Authors: Ksenia Babikhina, Sergey Golovin, Natalia Egorova, Tatyana Khan, Alexey Mikhailov.

Background: The number of people receiving treatment in Russia based on official estimates is approximately 200,000. The country has faced numerous access-related challenges: drug stock-outs, limited access to preferred options (including tenofovir) and fixed-dose combinations (FDCs). Treatment Preparedness Coalition has been analyzing the government procurement programme to identify gaps and elaborate recommendations for enhancing treatment access.

Methods: In 2015, 2380 contracts were included into the analysis (excluding peadiatric formulations). The analysis included 28 international non-proprietary names of antiretroviral drugs registered in Russia based on the website grls.rosminzdrav.ru. The drugs were divided into three groups: nucleoside/ nucleotide reverse transcriptase inhibitors (NRTIs); non-nucleoside reverse transcriptase inhibitors, protease inhibitors (excluding ritonavir), integrase inhibitors, CCR5 inhibitors, and fusion inhibitors; and FDCs containing complete regimens. The number of patients per year for each drug was calculated by diving the total amount of items purchased by the recommended daily dose and 365. The number of patients who could potentially receive treatment was calculated based on the number of third drugs and the number of possible combinations of NRTIs assuming that each combination should contain either 3TC or FTC. The total sum of FDCs containing complete regimens was added to the total number of third-drug regimens.

Results: In total, approximately 158,000 patients could receive treatment based on the sum of third drugs and FDCs containing complete regimens. This figure does not include children. Potentially, the discrepancy between the official statistics and the monitoring data can be explained by the fact that the official statistics includes those who have stopped treatment due to various reasons.

The most widely used third drugs are lopinavir/ritonavir (54,500) and efavirenz (53,000). In the NRTI group, the number of patients who could potentially receive regimens containing either 3TC or FTC is approximately ~134 000. The number of patients who could potentially receive TDF-based regimens is approximately 4000; the number of D4T-based regimens is 8,600. The number of patients receiving FDCs containing complete regimens (ABC/3TC/AZT; 3TC/AZT/NVP; FTC/TDF/RPV) is 250.

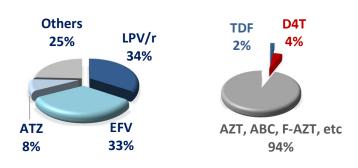
Conclusions: The number of patients who could potentially receive antiretroviral treatment in Russia can be 20% lower

than the official estimates. Only 2.5% receive TDF-based regimens. Less than 1% receive FDCs containing complete regimens; none of them receives the preferred WHO option 3TC(FTC)/TDF/EFV as a single pill. These data should be used as a basis for optimizing procurement and provision policy.

Key recommendations based on the analysis:

- Optimization of treatment regimens:
 - Promotion of FDCs
 - Wider use of TDF and less D4T in the first line
- Price reduction for antiretroviral treatment
 - Generic competition through TRIPS flexibilities (compulsory licensing, patent opposition)
 - Negotiations with manufacturers and suppliers
- Measures to improve treatment adherence and retention in care
 - Low-threshold programmes for key populations
 - Promotion of the benefits of antiretroviral therapy as a nationwide strategy

TOTAL NUMBER OF PATIENTS IS 160 000 - 200 000



THIRD DRUGS = 99,8%

FDCs CONTAINING COMPLETE REGIMENS=0,2%

- AZT + 3TC + NVP
- FTC + RPV + TDF
- ABC + AZT + 3TC

Website: http://itpcru.org/ Contacts: office@itpcru.org

