Address by French President Jacques Chirac
at the World Customs Organization Council Session

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Thursday, 24 June 2010

Mr. President, Secretary General, Minister, Delegates, Dear friends,

According to the World Health Organization, 30% of medicines on the market in developing countries are falsified. Over 200,000 people die every year because they were unfortunate enough to take, in good faith, fake medicine to treat malaria.

Today as I am speaking to you, men, women and children are dying because criminal networks are making money from the trafficking of fake medicines: by fake medicines I mean substances that contain a small amount or none of an active ingredient and substances that are often toxic and not effective in treating patients, at times even killing them.

Twenty years ago, this type of trafficking accounted for 5% of international pharmaceutical sales. Today, it accounts for about 10%, amounting to 45 billion Euros.

Medicine is not like other goods. No one in a position of power should allow health to be involved in a criminal economy.

Access to good-quality medicines is a public health cause. I took up this cause as President of France, fighting so that it is not only rich countries benefiting from pioneer treatments,

- So that we find solutions to lower the cost of drugs for the poorest countries,
- And innovative financing mechanisms to help achieve the health-related objectives of the Millennium Development Goals.

To ensure that everyone has the right to access good-quality medicines, whether branded or generic, is the purpose behind the Declaration that, together with Presidents Blaise Compaoré of Burkina Faso and Boni Yayi of Benin, we issued on 12 October 2009 in Cotonou, in the presence of many Heads of State and high-level representatives of governments and international and regional institutions.

This Declaration calls for more awareness and political action to fight the crime of trafficking fake medicines.

Its aim is for States and international organizations to establish all the legal and legislative provisions necessary to coordinate action of those involved in both the public and private sector.

Of course to eradicate this scourge, we need to improve access to good-quality medicines.

We also need to jointly comply with strict product quality controls,

- by improving their traceability,
- and by securing pharmaceutical channels.

The need for transparent pharmaceutical supply chains is crucial.

Today, here at the World Customs Organization, I would like to commend the extremely important role that customs offices are playing. On a daily basis they are fighting to keep harmful, and at times deadly, medicines out of the hands of patients.
Your responsibility is a great: you must maintain an extremely fine balance, preventing illegal medicines from crossing borders without harming of course the legitimate trade of legal medicines and generics.

The expertise of the World Customs Organization in three areas – security of supply, pharmaceutical channel security and patient safety – is essential.

The President of France was not wrong in putting French Customs in charge of coordinating the combat against the trafficking of falsified medicines last year on 26 October.

Securing pharmaceutical channels requires cooperation between States to harmonize resources and laws.

This approach of cooperation and expertise sharing must also guide intergovernmental policies,
- pooling drug quality control resources,
- harmonizing customs codes,
- customs and law enforcement cooperation at sub-regional level.

This is the reason the WHO World Health Assembly passed a resolution on 21 May 2010 in Geneva calling for greater involvement of States in the fight against falsified medicines.

The Medicrime Convention, drafted by the Council of Europe and soon to be open for signature by its 47 Member States, will also provide the first legislative tools to criminalize manufacturing, supplying and offering to supply falsified medical products. I hope that it will be adopted swiftly by as many countries as possible.

It is an effective instrument and is a decisive step forward in our combat.

The same type of coordination conducted at international level between the World Health Organization, the World Customs Organization, the United Nations, the Council of Europe and Interpol could be applied within States, between health workers and departments, customs, police forces, the civil society and political leaders.

This coordination should be coupled with increased action in the area of training, as the World Customs Organization does every year.

Your capacity building action is therefore of paramount importance. We need to step up training efforts for all those involved so that they can recognize good quality medicines, the channels they should use, and the standards they should comply with.

Your Counterfeiting and Piracy Group will certainly be able to provide concrete assistance.

Last February, my Foundation had the chance, at the joint invitation of your Organization and the Director-General of Customs in Benin, to assess and underscore the importance of customs’ role in fighting falsified medicines. Once cargo goes through customs, it is impossible to trace.

We can no longer do anything. It’s too late. We need to work upstream, including in transit operations.

To this end, the World Customs Organization’s very detailed knowledge on existing codes and its ability to work within a network can help further cooperation among States.

The last point, which I would like to emphasize, is undoubtedly the most important: education and information, two pillars without which sustainable health policy cannot be built.

Let’s not ever forget that when a falsified product is bought, the consumer is the victim. No one knowingly buys a product that could threaten his life or that of one of his loved ones.
In countries without public health systems, where health is the second biggest expense for a household, this act, which is so commonplace in northern countries, takes on a special dimension; an economic dimension and a psychological dimension.

What can a mother of a sick child do if she doesn’t have social coverage?

She goes to the market to do something she thinks is right, but that could end up having fatal consequences.

It is by setting up social coverage ensuring access to good-quality health products that we can tackle trafficking over the long term.

There are two solutions. We need to help States implement them. Northern countries are also affected. You know a growing number of our citizens now buy their health products on the Internet, outside pharmaceutical channels that are overseen.

In both northern and southern countries, customs have their role to play in terms of public opinion to help people better understand the issues and to become more aware of the dangers at stake.

In this long and painstaking struggle, your courage and the risks you are taking everyday for your citizens are exemplary. Please allow me to pay tribute to Yolanda Benitez, a customs officer in Ciudad del Este, in Paraguay, who was shot down by traffickers while carrying out her duties, and whose memory you have chosen to honor, dedicating to her this trophy, which is awarded every year to the customs office doing the most to fight counterfeiting and piracy.

I hope that a future award, specifically for working to eliminate fake health products, will be created and will provide the opportunity to take stock of action taken and progress made every year.

A mother who buys fake medicine to treat malaria does not know that she is paying for her own death or that of her sick child.

It is for that woman, and for that child, that I call for action today on the part of everyone.

Thank you.