

SCOPE OF COMPULSORY LICENSE AND GOVERNMENT USE OF PATENTED MEDICINES IN THE CONTEXT OF THE COVID-19 PANDEMIC

To meet public health needs, such as in the current COVID-19 emergency, governments can use **compulsory licenses** and **government use** as a tool for procurement and import of patented medicines.¹

These mechanisms are provided for in most laws worldwide. The WTO TRIPS Agreement, as reaffirmed by the Doha Declaration on TRIPS and Public Health, recognises the right of WTO members to grant compulsory licenses and their freedom to determine the grounds upon which such licenses may be granted (read our Call for Action on Intellectual Property and Trade Measures to Address the Covid-19 Crisis [here](#)).

The South Centre offers a guide for the issuance of compulsory licenses and government use, see [here](#), [aquí](#) en español.

The table below provides information of instances of their use.

Compulsory Licenses/ Government Use Authorization: (as of 2 March 2021)

Country	Drug	CL/GU	Year (granted /filed)	Ground	Royalty
Ecuador	Raltegravir	CL	2021	Public interest	.17 USD per tablet
Russia	Remdesivir (for Covid-19)*	CL	2021	National security	N.A
Hungary	Remdesivir (for Covid-19)*	GU	2020	N.A.	N.A
Israel	Lopinavir/ritonavir (for Covid-19)*	GU	2020	National security, essential services and supplies	N.A

¹ Countries with insufficient or no pharmaceutical manufacturing capacity can also import the medicine by issuing a compulsory license, in accordance with article 31 *bis* of the TRIPS Agreement, from an exporting country that also issues a compulsory license for such purpose. However, the use of this system would require compliance with conditions which are very restrictive and cumbersome. See Carlos M. Correa, *Will the Amendment to the TRIPS Agreement Enhance Access to Medicines?*, Policy Brief 57, January 2019, South Centre, Geneva. Available at <https://www.southcentre.int/policy-brief-57-january-2019/>

* WHO recommends against the use of remdesivir in COVID-19 patients

* WHO recommends against the use of lopinavir/ritonavir in COVID-19 patients

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Country	Drug	CL/GU	Year (granted /filed)	Ground	Royalty
Russia	Sunitinib	CL	2019	N.A.	10%
Russia	Lenalidomide	CL	2018	N.A.	3%
Malaysia	Sofosbuvir	GU	2017	N.A.	N.A
Germany	Raltegravir	CL	2016	Urgent need, public interest	N.A
Congo	ARVs	GU	2014	N.A.	N.A
Ecuador	Etoricoxib	CL	2014	Public Interest	0.2% - 0.4%
Ecuador	Mycofenolate sodium	CL	2014	Public Interest	2%
Ecuador	Sunitinib	CL	2014	Public Interest	N.A
Ecuador	Certolizumab	CL	2014	Public Interest	N.A
Ecuador	Ritonavir	CL	2013	Public Interest	4%
Ecuador	Abacavir/lamivudine	CL	2013	Public Interest	7%
Gabon	ARVs	GU	2013	N.A.	N.A
India	Sorafenib tosylate	CL	2012	Availability and Affordability	7%
Indonesia	Abacavir, didanosine, efavirenz, lopinavir/ritonavir, tenofovir, tenofovir/emtricitabine, tenofovir/emtricitabine/efavirenz	GU	2012	Health Emergency	0,50%
Ecuador	Ritonavir	CL	2010	Public Interest	4%
Honduras	ARVs	GU	2008	N.A.	N.A
Honduras	ARVs	CL	2008	N.A.	N.A
Philippines	ARVs	GU	2008	N.A.	N.A
Sudan	ARVs	GU	2008	N.A.	N.A
Thailand	Letrozole	GU	2008	N.A.	N.A
Thailand	Docetaxel	GU	2008	N.A.	N.A
Thailand	Erlotinib	GU	2008	N.A.	N.A
Thailand	Efavirenz/emtricitabine/tenofovir, lamivudine/zidovudine/efavirenz	GU	2008	N.A.	N.A
Brazil	Efavirenz	GU	2007	Public Interest	1,50%
Congo	ARVs	GU	2007	N.A.	N.A
Italy	Finasteride	CL	2007	Abuse of dominant position	0%
Ivory Coast	ARVs	GU	2007	N.A.	N.A

Country	Drug	CL/GU	Year (granted /filed)	Ground	Royalty
Ivory Coast	Lamivudine, lamivudine/zidovudine, lamivudine/zidovudine/nevirapine, lamivudine/stavudine, lamivudine/stavudine/nevirapine, didanosine, efavirenz, indinavir	GU	2007	N.A.	N.A
Mongolia	ARVs	GU	2007	N.A.	N.A
Thailand	Lopinavir	GU	2007	N.A.	0,50%
Thailand	Clopidogrel	GU	2007	N.A.	0,50%
Gabon	ARVs	GU	2006	N.A.	N.A
Georgia	ARVs	GU	2006	N.A.	N.A
Pakistan	ARVs	GU	2006	N.A.	N.A
Sao Tome and Principe	ARVs	GU	2006	N.A.	N.A
Thailand	Efavirenz	GU	2006	N.A.	0,50%
China	FDC of lamivudine/stavudine/nevirapine	CL	2005	Non-availability in the country	N.A
Gabon	ARVs	GU	2005	N.A.	N.A
Ghana	ARVs	GU	2005	Health Emergency	N.A
Guatemala	ARVs	GU	2005	N.A.	N.A
Honduras	ARVs	GU	2005	N.A.	N.A
Italy	Imipenem/cilastatin	CL	2005	Abuse of dominant position	N.A
Zimbabwe	ARVs	GU	2005	N.A.	N.A
Liberia	ARVs	GU	2005	N.A.	N.A
Mozambique	Efavirenz	GU	2005	N.A.	N.A
Myanmar	ARVs	GU	2005	N.A.	N.A
Philippines	ARVs	GU	2005	N.A.	N.A
Swaziland	Nevirapine, zidovudine	GU	2005	N.A.	N.A
Chinese Taipei	Oseltamivir	GU	2005	N.A.	N.A
Tajikistan	Lamivudine, stavudine, zidovudine, nevirapine, efavirenz, tenofovir, didanosine, lopinavir, saquinavir, ritonavir, nelfinavir, abacavir	GU	2005	N.A.	N.A
Guinea	ARVs	GU	2004	N.A.	N.A
Indonesia	Nevirapine, lamivudine	GU	2004	Health Emergency	0,50%

Country	Drug	CL/GU	Year (granted /filed)	Ground	Royalty
Ivory Coast	ARVs	GU	2004		
Ukraine	ARVs	CL	2004	N.A.	N.A
Zambia	Lamivudine/stavudine/nevirapine	CL	2004	N.A.	2,50%
Zimbabwe	ARVs	CL	2004	N.A.	N.A
Malaysia	zidovudine, zidovudine/lamivudine	GU	2003	N.A.	4%
Zimbabwe	ARVs	GU	2003	N.A.	N.A
Zimbabwe	ARVs	GU	2002	N.A.	N.A