## Open Letter to Moderna CEO and Chairperson

For attention: S. Bancel and N. Afeyan

Per email

14 February 2022

Dear Stephan Bancel and Noubar Afeyan

<u>Civil society groups in South Africa call on Moderna to immediately withdraw the mRNA vaccine patents it has filed in South Africa, and to provide technical expertise to the WHO mRNA Hub in South Africa</u>

We write to you as concerned civil society organisations in South Africa, representing affected communities regarding several patents, which have been filed by Moderna and granted in South Africa, without the requisite due examination.

The patents were filed and remain in place despite: the on-going United States Government's National Institutes of Health (USG NIH) and Moderna technology ownership dispute; the refusal by Moderna to issue non-exclusive licences for use in South Africa, and in other African countries; the delay by Moderna to file its regulatory dossier with the medicines regulator in South Africa; the refusal by Moderna to sell its vaccine to several African governments and other poorer countries, as recently reported by the New York Times.<sup>1</sup>

It is important to state that these patents pose long term barriers to scaling up the supply of messenger RNA (mRNA) vaccines and to diversifying local production in the continent. Analysis shows that there are a number of capable manufacturers<sup>2</sup> which meet both the technical requirements and quality standards to manufacture mRNA vaccines. However, Moderna's refusal to share the technology, and opting instead to build its own facility from scratch, further delays access to these life-saving vaccines.

In the COVID-19 pandemic, people in Africa have undeniably been the hardest hit by vaccine inequity, with 3 out of 4 health workers and 9 out of 10 people not yet fully vaccinated, by end 2021.<sup>3</sup>At the same time, companies such as Moderna have prioritised supplies to wealthy nations; millions of people in high-income countries (HICs) have already had their third vaccine administered; all while only 11% of people on the African continent are fully vaccinated.

Moderna belatedly allocated a mere 110 million vaccines for a continent with an estimated population of 1.3 billion people and via the few bilateral deals of which we are aware, even

<sup>&</sup>lt;sup>1</sup>https://www.nvtimes.com/2021/10/09/business/moderna-covid-vaccine.html

<sup>&</sup>lt;sup>2</sup> https://msfaccess.org/sharing-mrna-vaccine-technologies-save-lives

<sup>&</sup>lt;sup>3</sup> https://www.afro.who.int/news/only-1-4-african-health-workers-fully-vaccinated-against-covid-19

charging countries such as Botswana twice the price paid by the United States (U.S.) and European Union(EU).

In response to on-going global vaccine inequity and nationalism inherent in this pandemic, South Africa was selected to host the first World Health organisation (WHO) mRNA Technology Transfer Hub ('Hub') to fast track the supply of vaccines to the rest of the continent, as well as to other low-and-middle income countries (LMICs). However, Moderna's patents in South Africa have created legal risks and uncertainties for any outputs of the Hub.

We note that Moderna has also withdrawn or abandoned equivalent patents in multiple countries, including Canada and Australia<sup>4</sup>, while actively maintaining the equivalent patents and applications in South Africa. The only conclusion we can draw from Moderna's selective patent filings, is that Moderna does indeed intend to enforce these patents, despite public announcements to the contrary. Given that Moderna itself may decide when the 'pandemic is 'over', this is hardly a reassuring pledge and may potentially undermine the Hub's current and future functioning and research, at the expense of all LMICs.

The vaccine was publicly funded and co-developed by the U.S. government. Moderna is reported to have now made over \$10 billion in profits from this vaccine.

We urge Moderna to desist from continuously putting Africa last in line, due in part to Moderna's limited capacity to fulfil production demands. It is time that Moderna act in the interests of people, not profits, and immediately agree to:

- Withdrawing and abandoning all patents and patent applications in South Africa related to the Moderna Covid-19 mRNA vaccine technology [as already done in several HICs].
- Immediately lending technical assistance to the Hub in order to guarantee its success within an expedited period.
- Allowing the Hub, the freedom to continue its vital work now, which will help to potentially develop vaccines against other high burden diseases in Africa, such as tuberculosis (TB), Human Immunodeficiency Virus (HIV) and Malaria.

History will remember which side Moderna stood on in this pandemic, and there is still time to stand on the side of saving lives.

For purposes of corresponding, please use: <a href="mailto:candice.sehoma@joburg.msf.org">candice.sehoma@joburg.msf.org</a>

<sup>4</sup> https://msfaccess.org/removing-intellectual-property-barriers-covid-19-vaccines-and-treatments-people-south-africa

## **Signatories:**

- Action Against NCDs in Eswatini
- African Alliance
- Afya na Haki Kenya 3.
- Amnesty International
- Alternative Information and Development Centre AIDC South Africa
- **BMS World Mission**
- Cancer Alliance South Africa
- Centre for Health, Human Rights and Development (CEHURD) Uganda
- Civil Society SDGs Campaign -GCAP -Zambia
- Community Working Group On Health Zimbabwe
- Council for NGOs in Malawi CONGOMA
- Covid-19 People's Coalition South Africa
- **Disability Connection**
- 14. Eagle Lead Development Initiative (ELDI)
- Extinction Rebellion South Africa
- 16. Frontline AIDS South Africa
- Global Call to Action Against Poverty 17.
- 18. Global Justice Now
- Global South Against Xenophobia (GSAX)
- Good Health Community Programmes
- Halley Movement GCAP Mauritius
- Health Action International Asia Pacific (HAIAP)
- 23. Health GAP
- Health Justice Initiative South Africa
- Health Poverty Action
- ICWK Institute of Clerks of Work Kenya ICWK
- International Labour Research and Information Group ILRIG South Africa
- Institute for Economic Research on Innovation Tshwane University of Technology, SA
- Just Treatment
- 30. Korean Pharmacists for Democratic Society
- Médecins Sans Frontiers Southern Africa
- National Association of NGOs
- Network of TB Champions
- Norwegian People's Aid
- **OXFAM International**
- OXFAM South Africa 36.
- Patient and Community Welfare Foundation of Malawi
- People Against Apartheid And Fascism
- People's Health Institute, Korea
- People's Health Movement South Africa 40.
- People's Health Movement Korea 41.
- People's Vaccine Alliance (PVA)
- People's Vaccine Alliance (PVA) Africa 43.
- Public Eye
- Public Health Innovations 45.
- Public Service Accountability Monitor PSAM South Africa
- SA National Labour and Economic Development Institute (NALEDI)
- Salud por Derecho Spain
- Section 27 South Africa 49.
- South Africa NCD Alliance
- South Asia Alliance for Poverty Eradication SAAPE
- Southern African Alcohol Policy Alliance SAAPA
- The Anti-Repression Working Group (ARWG) South Africa
- The Rights Initiative 54.
- The Yunus Centre
- Third World Network
- Treatment Action Group TAG
- Umvoti AIDS Centre South Africa
- Underprivileged Welfare Support Development Association
- Universities Allied for Essential Medicines (UAEM) / Free the Vaccine
- Universities Allied for Essential Medicines, UK 61.
- Vaccine Advocacy Resource Group Africa
- 63. Western Cape Forum for Intellectual Disability (WCFID) South Africa