

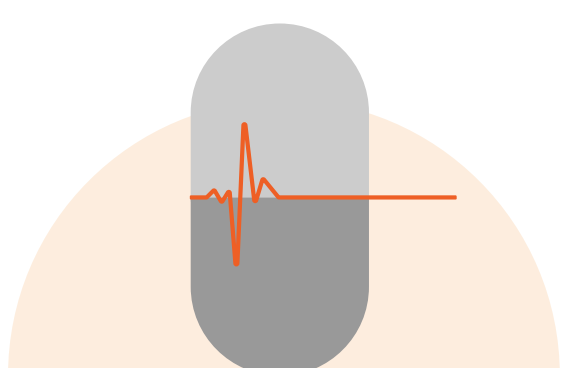
# Fighting the AMR crisis

Dear policymakers, you must take action to curb antimicrobial resistance. This requires investing in solutions that drive real innovation, while ensuring patient access to treatments and the sustainability of public health systems. Let's make the smarter investment that benefits all.

A new model for antibiotic development and access is here—addressing Antimicrobial Resistance (AMR) fairly and sustainably for patients and public health systems.



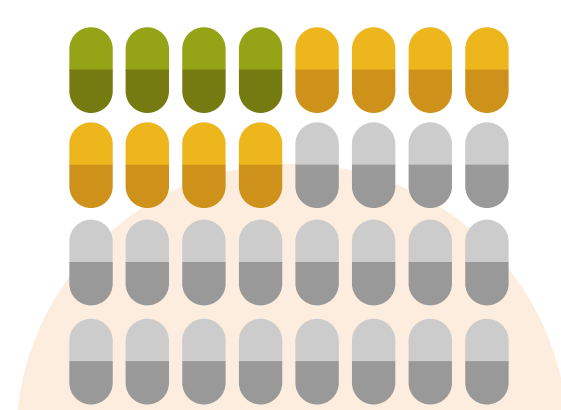
## AMR Facts



**Over 35,000 deaths** in Europe annually are attributed to AMR.



**Rising healthcare costs** and limited treatment options for some bacterial infections due to growing resistance.



**Insufficient innovation:** out of 32 antibiotics under development that target the most threatening bacteria, only 12 are innovative and just 4 of these are active against the top risk category of pathogens ([WHO study](#)).



**A global threat** requiring urgent and systemic action.



Besides using existing antibiotics prudently, we need new ones against resistant bacteria.—here's how we can get what consumers need.

## Step-by-step model for fairer antibiotic development

### THE SOLUTION

The EU and Member States step up their contribution to global efforts to finance the development of antibiotics that address priority medical needs.

To do so effectively, the Health Emergency Preparedness and Response Authority (HERA) is entrusted to coordinate a scheme of 'push and pull' incentives consisting of research grants, milestone prizes, and joint procurement supported by a revenue-guarantee model. This payment approach separates revenues from sales volumes, ensuring that antibiotics remain accessible while limiting overuse. HERA can provide support at different stages:

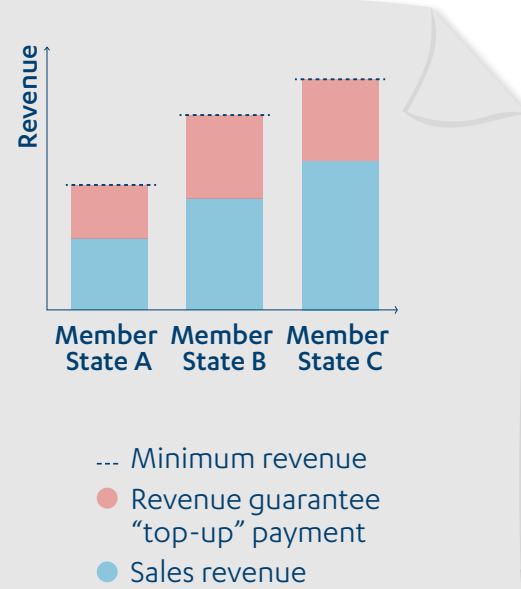
### STEP 4 APPROVAL AND PROCUREMENT

- ✓ The European Medicines Agency (EMA) evaluates and approves antibiotics that address priority medical needs.
- ✓ Member States participating in the EU procurement scheme offer a revenue-guarantee that is substantial enough as to 'pull' innovation.

Pre-agreed revenue guarantee ideally co-funded by the EU →

This system:

- Offers a return on investment for developers and reduces financial risk by offering a guaranteed minimum level of revenue, (partially) delinked from sales volumes.
- Ensures availability and fair pricing.
- Promotes equitable access for regions most in need.



### STEP 3 CLINICAL TRIALS

Antibiotics are tested on diverse groups for safety and efficacy.

### STEP 2 PRECLINICAL TESTING

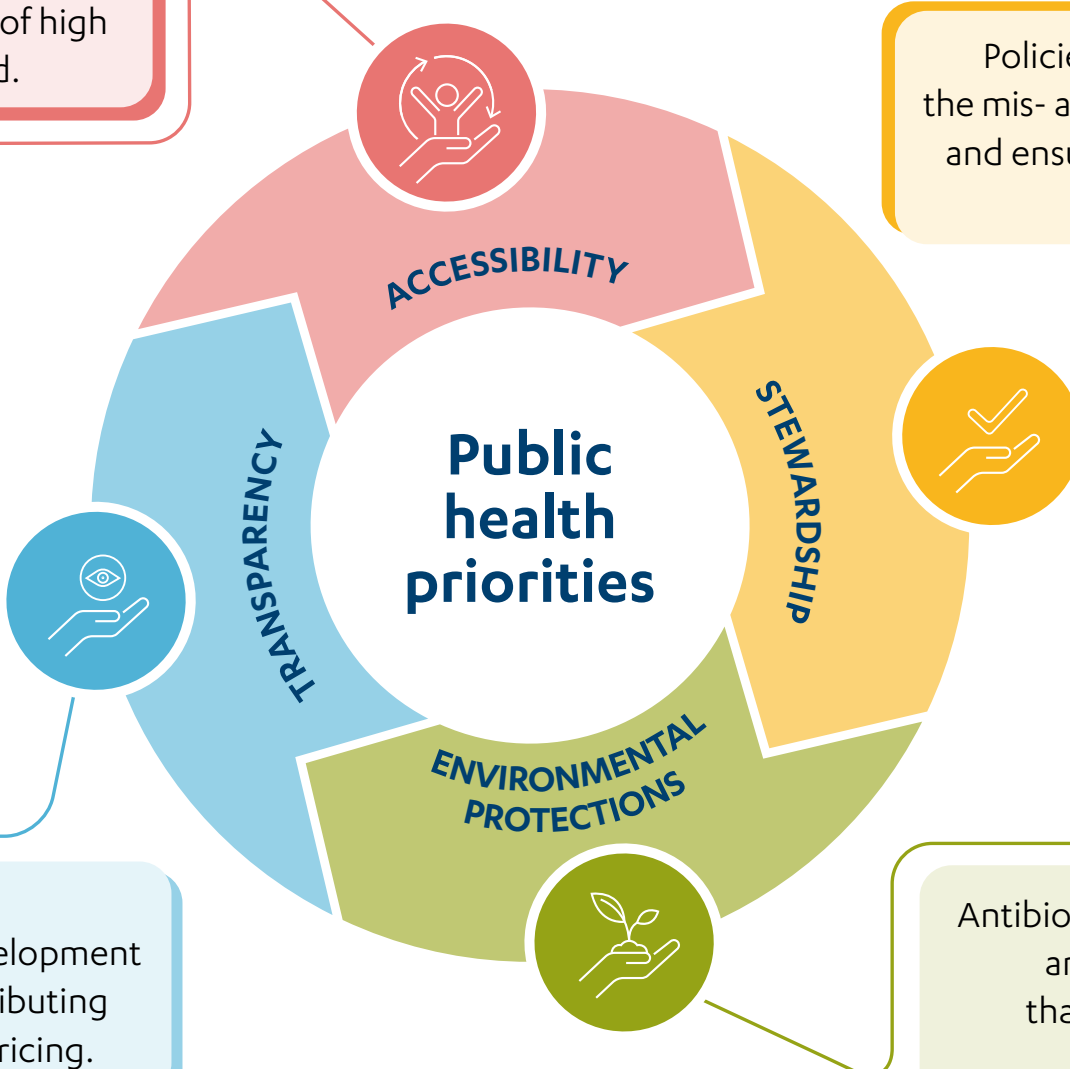
Before they are administered in clinical trials, promising antibiotic candidates undergo specific tests in the lab to evaluate their safety.

### STEP 1 DRUG DISCOVERY

Researchers discover new compounds, building on basic research on the disease and how it could be treated.

New antibiotics are available and affordable in all regions, particularly in areas of high unmet medical need.

Policies are in place to prevent the mis- and overuse of antibiotics, and ensure they remain effective for future generations.



Public funding for antibiotic development is reported, contributing to fair medicine pricing.

Antibiotics are manufactured and disposed of in ways that limit the risk of AMR in the environment.

This model is based on collaborative efforts globally between public funders, research universities, non-profit drug developers, and the pharma industry.

By attaching conditions to public funding, this model delivers new antibiotics and contributes to their responsible use, the sustainability of public health systems, and access to healthcare worldwide.

Read our [joint position paper](#) for full recommendations, and BEUC's [factsheet](#) on the risk of relying on 'transferable exclusivity vouchers' to promote antibiotic development.

