**New MSF report shows unacceptable global double standard in diabetes care, even though better treatments cost little to produce and could be much more affordable**

*Ahead of the Symposium on Diabetes in Humanitarian Crises, MSF called on pharmaceutical corporations to bring down prices of insulin pens and newer diabetes drugs, so that everyone, everywhere can access optimal care*

*Athens/Geneva, 8 April 2024* – A [report published](https://msfaccess.org/defeating-double-standard-diabetes-care) today by Doctors Without Borders (MSF) and T1International ahead of the *Symposium on Diabetes in Humanitarian Crises* in Athens looks intothe cost of production of insulin\* injection pens and newer diabetes medicines, revealing astonishing markups by pharmaceutical corporations. With Eli Lilly, Novo Nordisk and Sanofi dominating the diabetes market\*\* and so being able to set prices as high as they want, there is an urgent need for governments and policymakers to take action to reduce prices and address the lack of competition in the market for these essential treatments. The report also finds that people living with diabetes prefer using insulin pen injection devices over vials and syringes, and highlights the benefits of pens as more practical and safer to use for people with diabetes, especially in fragile and humanitarian settings.

While insulin pens are the standard of care in high-income countries, their higher prices mean they are almost never available to people in low- and middle-income countries, and are rarely used by humanitarian agencies, with MSF among the few agencies currently procuring them.

“In Lebanon, offering pens to people with diabetes in our care has had a [significant and positive impact](https://www.youtube.com/watch?v=plJOh849pFc) on their quality of life, especially for children who are more likely to stick to their treatment schedule with the easier-to-use and less painful pens,” said Dr Sawsan Yaacoub, Paediatrician for MSF in Lebanon. “The fact is that living with diabetes is challenging no matter where in the world you are, so now that we have a treatment option in insulin pens that is preferred and more practical, it should be an urgent priority to address pricing barriers and expand their availability to as many people as possible, especially considering how affordable pens could be if pharmaceutical corporations priced them fairly and without unnecessary markups.”

MSF and T1International’s survey of over 400 people on insulin in 38 countries found that 82% of those who had used both pens and the more traditional syringe and needle to deliver insulin preferred using pens, as they are easier and safer to use and give the correct dose, less painful, and less stigmatising when used in public – all factors that improve quality of life and increase adherence to treatment.

“We firmly believe that every person with diabetes should have affordable access to the insulin and delivery device that is best for their body,” said Elizabeth Pfiester, T1International’s Founder & Executive Director. “With many people with diabetes in our community having experienced a markedly improved quality of life with insulin pens, their availability as a treatment option is vital.”

In addition, MSF’s experience in providing care for people in humanitarian settings where there is a high risk of being affected by conflict, natural disasters and/or displacement, has demonstrated that pens are much more straightforward to use and transport when on the move. The World Health Organization (WHO) has recognised the critical value of insulin pen devices and long-acting insulin analogues, recently including them in the WHO Essential Medicines List, which is used by countries to prioritise their own essential medicines lists and procurement plans.

Based on MSF’s research into the cost of production, analogue insulin pens, which are a standard of care in high-income countries, could be sold at profit for as low as US$111 per patient per year, which includes insulin and the device needed to inject it. This is 30% less than human insulin in a vial with syringes, which have always been thought to be the most affordable option and therefore the only option offered to people in low- and middle-income countries or in humanitarian settings. Long-acting analogue insulin pens, for example, are sold for $2.98 in South Africa, $7.88 in India and $28.40 in the US, compared to the cost-based price of $1.30 per pen, revealing the extreme and unnecessary markup charged by the corporations.

“We have shown that it could be more affordable to use insulin pens instead of the old-fashioned vials and syringes, so no matter where a person lives in the world, they should be able to have equal access to their preferred diabetes care option,” said Dr Helen Bygrave, Non-communicable Diseases Advisor for MSF Access Campaign. “Pharmaceutical corporations Eli Lilly, Novo Nordisk and Sanofi must drop their insulin pen prices now, and at the same time, humanitarian agencies need to start procuring insulin pens and more systematically integrating them into the diabetes care they provide. There is really no excuse for today’s double standard in diabetes care to continue.”

Additionally, Eli Lilly and Novo Nordisk are the only producers of a newer class of medicine used to treat people with diabetes, GLP-1 receptor agonists. These corporations charge astronomical prices as their intellectual property barriers block generic manufacturers from entering the market, which could help drive prices down. A commonly used GLP-1, semaglutide, could be sold at a profit for just $0.89 per month, yet costs $115 per month in South Africa, $230 in Latvia, and $353 in the US, which is almost 40,000% higher than what the estimated generic price could be. In addition to driving prices down, having additional manufacturers in the market would be able to help meet the global demand for these new medicines, which Eli Lilly and Novo Nordisk continue to struggle to do alone.

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*Diabetes affects 537 million people globally. It is not just a disease of high-income countries: cases are rising in low- and middle-income countries, with a projected increase of 134% in Africa by 2045. Only half of people who need insulin in the world have access to it. MSF has significantly increased the number of diabetes consultations in its medical programmes: in 2022, MSF performed 205,122 diabetes-related consultations globally.*

\**Insulin is classified as either human or analogue, and by its onset and duration of action. Insulin analogues, while similar to human insulins in their basic structures, have been modified to change their onset and duration of action after injection, enabling greater flexibility of use for people living with diabetes.*

\*\**Eli Lilly and Novo Nordisk produce insulin and GLP1s. Sanofi produces insulin.*