

Current access landscape for paediatric DTG formulations in southern Africa

Perspectives from the Medicines Patent Pool

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19 October 2026 – Lilongwe, Malawi

Working towards an equitable world

*MPP negotiates with
pharmaceutical
companies to
accelerate access to
new, essential health
products for the
people who need
them*



Conflict of Interest Disclosure

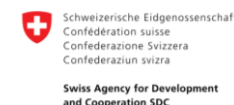
- I have no relevant financial relationships with pharmaceutical companies or other conflict of interest to disclose.

Thanks to the entire MPP team!



Acknowledgments

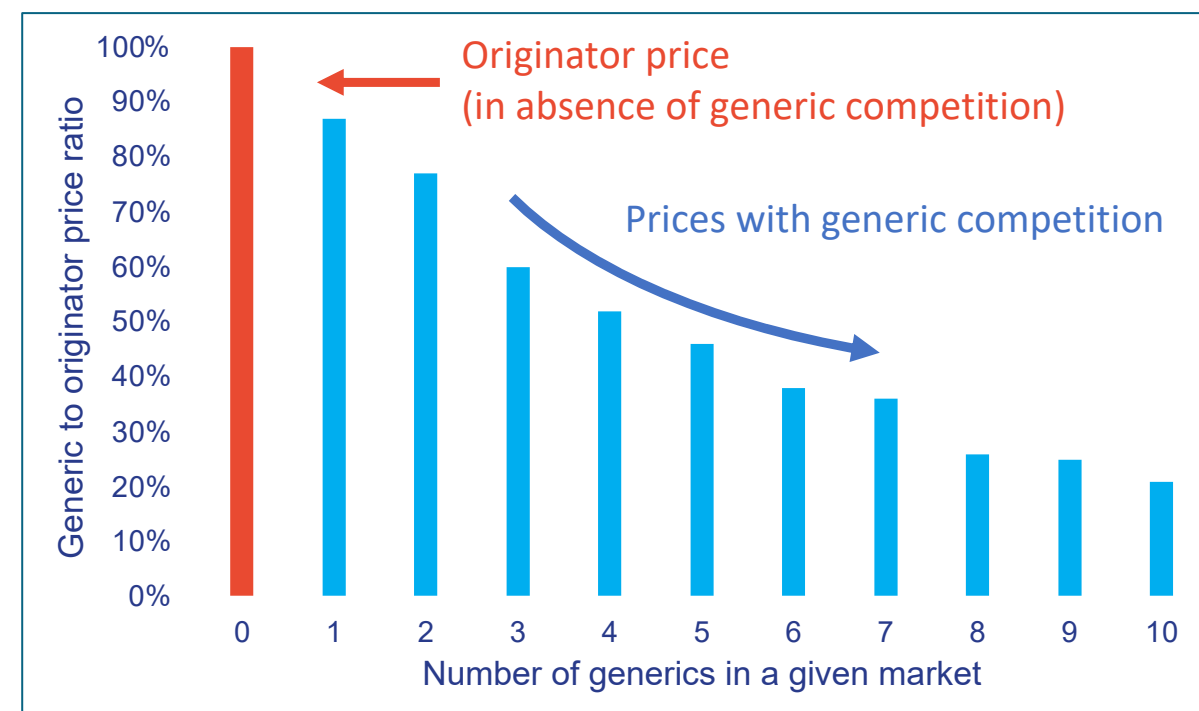
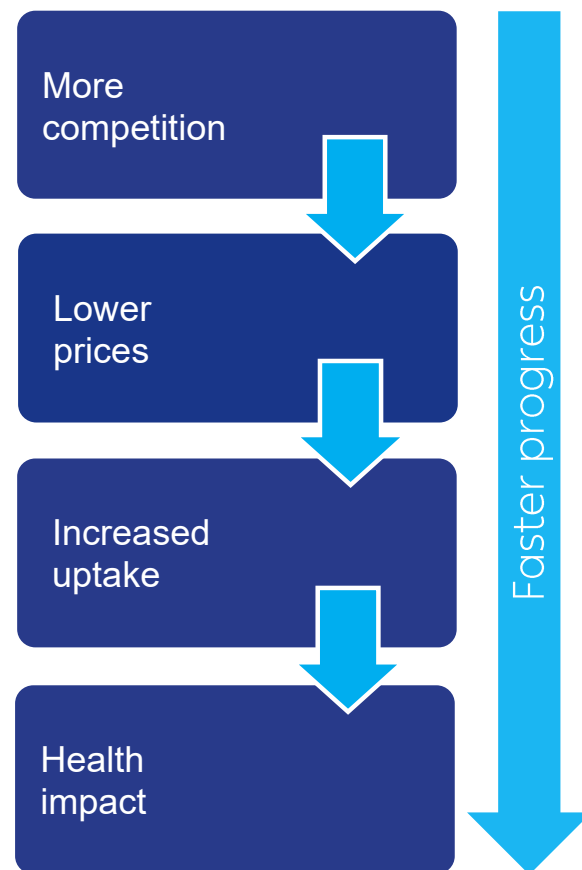
- The work of the Medicines Patent Pool in HIV is made possible by the financial support of Unitaid.
- We thank them, as well as our other current public and philanthropic funders.



MPP's model to accelerate access & improve health

Overview of the voluntary licensing model

- Driving prices down through generic competition
- Accelerating timelines for generic product availability



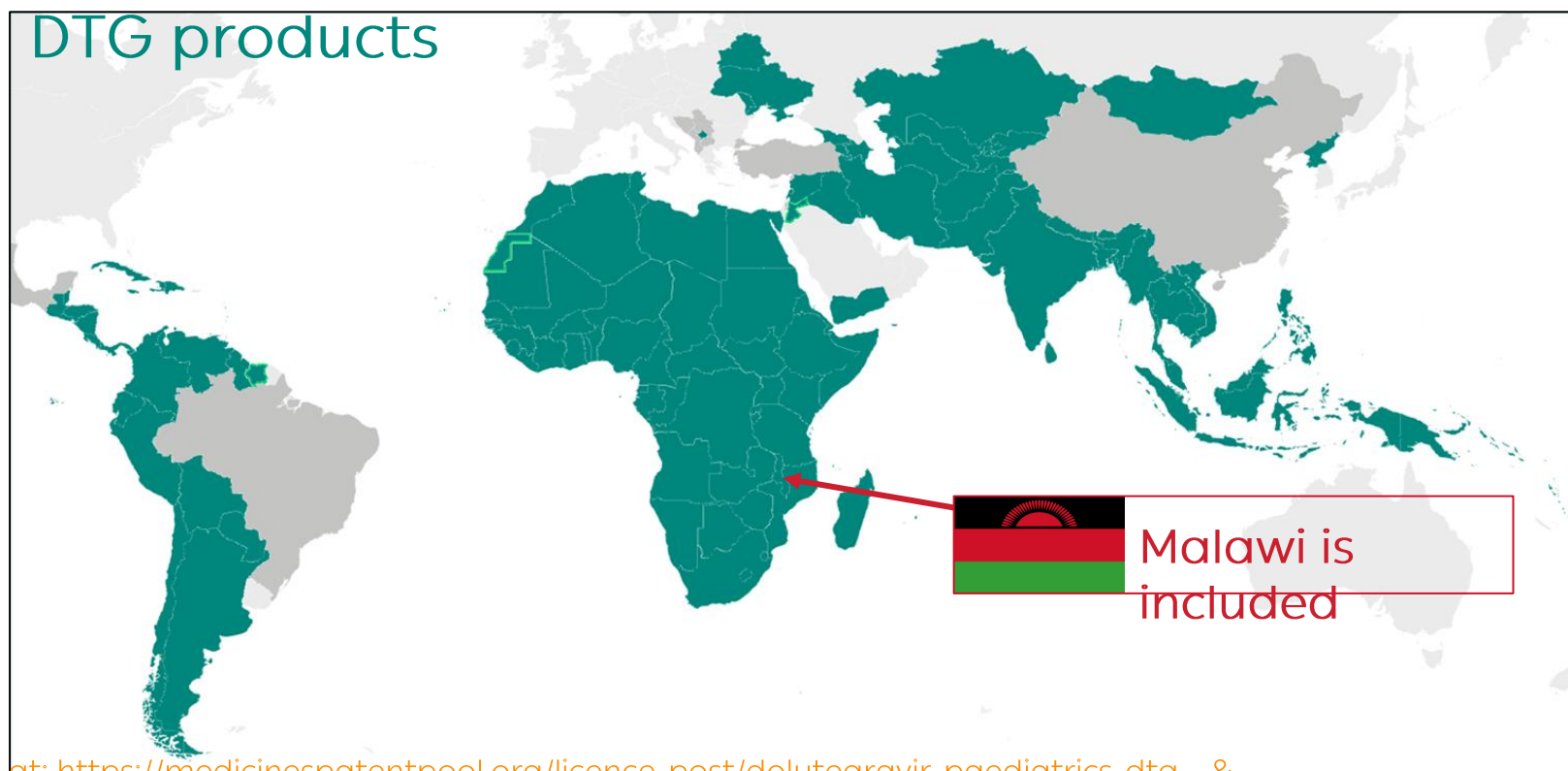
MPP's work in HIV is
funded by Unitaaid



Enabling access to DTG-based paediatric HIV treatment

1. Generic competition through partnership: Licensing

>130 countries able to access paediatric generic DTG products



More at: <https://medicinespatentpool.org/licence-post/dolutegravir-paediatrics-dtg> & <https://accesspal.org>

Enabling access to DTG-based paediatric HIV treatment

2. Generic development through partnership: Tech support

The paediatric DTG single tablet was developed with incentives, extensive technical support, and an innovative regulatory



2018
Project initiated

2019
Product developed

2020
Product approved

2021
Product launched

12X
Faster than average generic pediatric HIV treatment approval **SINCE PEPFAR** was established

25X
Faster than average generic pediatric HIV treatment approval **EVER**

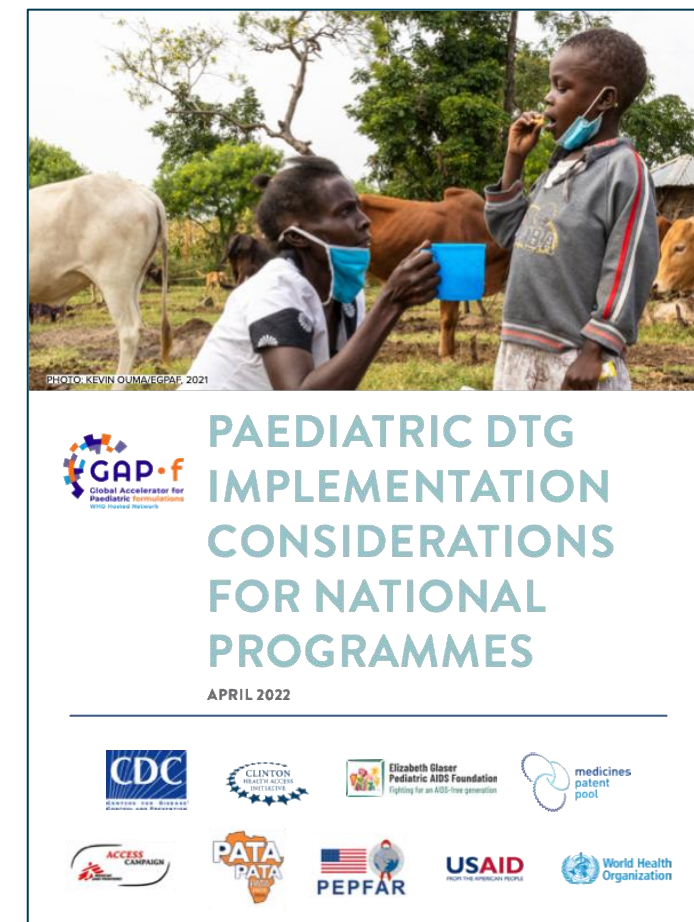
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3. Generic rollout through partnership: Coordination

106 countries supplied pDTG 10mg scored

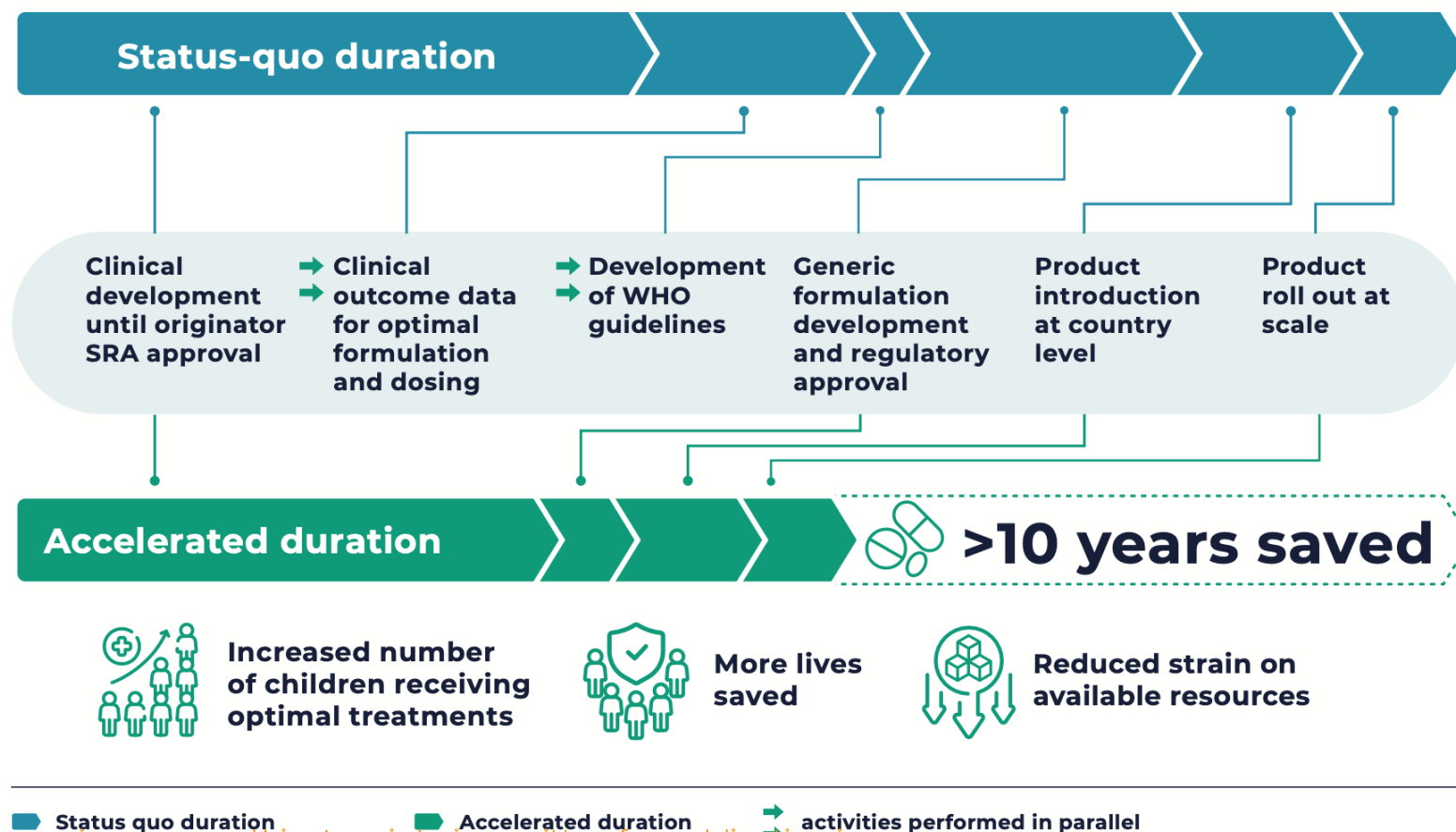


More at: <https://medicinespatentpool.org/what-we-do/addressing-childrens-needs> & <https://accesspal.org>
(data by end Q2-2026)



Enabling access to DTG-based paediatric HIV treatment

4. Optimal formulation success story



GAP-f, a WHO network created to respond to the persistent paediatric treatment gap, aims to replicate this

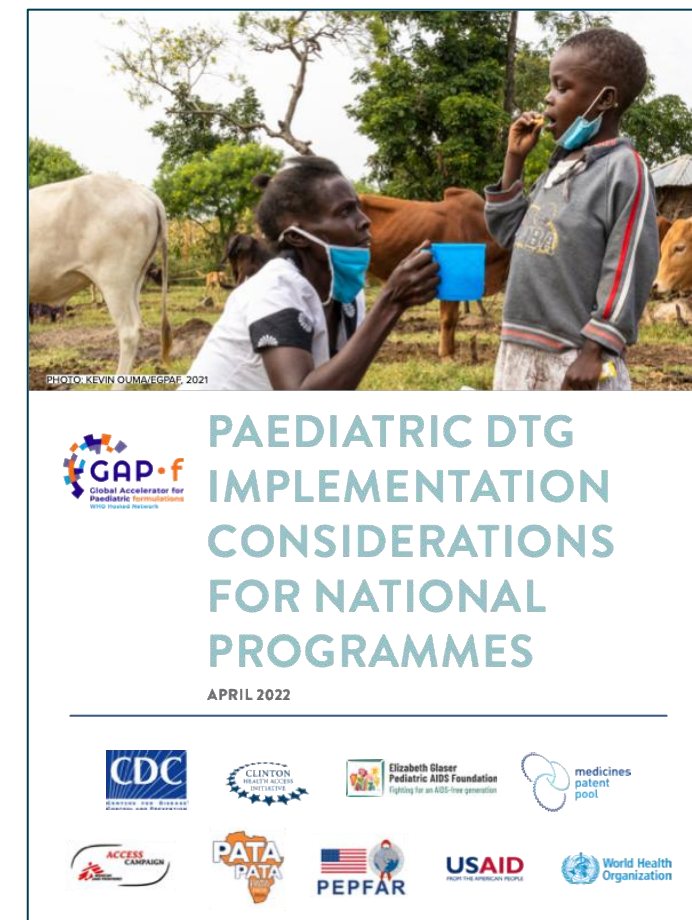
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5. Developing and rolling out a fixed dose combination

50 countries supplied pALD 60/30/5mg dispersible tablets



More at: <https://medicinespatentpool.org/what-we-do/addressing-childrens-needs> & <https://accesspal.org> (data by end Q2-2026)



In summary

Globally

- The pDTG → pALD transition has advanced well since 2025
- pALD is now the most used paediatric DTG formulation
- By end of Q2-2026, pALD had been:
 - Filed in 19 countries
 - Approved in 21 countries
 - Supplied in 50 countries
- Many countries have not transitioned yet (including several in Africa)

Malawi



- pDTG rollout proceeded from Q1-2021 until Q4-2024
 - During that period, 504,000 bottles of 90 tablets have been supplied
- The transition to pALD started in Q4-2024
 - To date, 250,000 bottles of 180 tablets have been supplied
- Malawi can encourage other countries to transition to pALD by sharing its experience

Some recommendations...

Advocating for children's access to optimal treatment

1. Continue rolling out pALD as the central pillar of HIV treatment in children <20 kg
2. Document the Malawi experience with pALD to date and share it with countries planning their transition
3. Prioritize pALD for the smallest kids, and transition those >20 kg to standard ALD tablets, and later to TLD



Thanks for your attention!

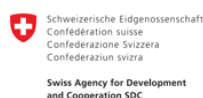
Thanks to our funders!



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And thanks for your collective dedication to HIV care for all

