UNITED NATIONS

EP

United Nations Environment Programme

Distr.
GENERAL

UNEP/OzL.Pro/ExCom/51/Inf.4
20 February 2007

ORIGINAL: ENGLISH

EXECUTIVE COMMITTEE OF
THE MULTILATERAL FUND FOR THE
IMPLEMENTATION OF THE MONTREAL PROTOCOL
Fifty-first Meeting
Montreal, 19-23 March 2007

RAISING AWARENESS OF THE NEED TO PHASE OUT CFCs IN MDIs

(Presented by UNEP)

1. From 1 January 2007 until phase out on 31 December 2009, developing countries must rely on 15% or less of their base level consumption of CFCs to satisfy *all* uses, including those used in the refrigeration servicing sector and as a propellant in life-saving medication contained in metered-dose inhalers (MDIs). Sixteen Article 5(1) Parties manufacture their own CFC-MDIs. Given the limited time to transition to CFC-free MDIs and the need to remain compliant with the requirements of the Montreal Protocol, some of these 16 Parties are concerned that CFC quantities will be insufficient for CFC-MDI production and that, as a result, patients suffering from asthma and COPD will not have access to such medication. This particular problem can be addressed by taking constructive steps outlined below.

2. Decision IV/25 does not allow developing countries to gain access to Essential Use exemptions that would allow the use of CFCs until after phase out, thereby making the 3-year period from 2007 to 2010 crucial for the transition to CFC-free MDIs while at the same time safeguarding patient health. Decision XVII/14 requested the Executive Committee to "*…consider appropriate regional workshops to create awareness and to educate stakeholders, including doctors and patients, on alternative MDIs and on the elimination of CFCs in MDIs*". Decision XVIII/16 was more specific as it requested the '*…ExCom to consider including on the agenda of UNEP thematic regional workshops, information to clarify the steps required to advance the transition from CFC-MDIs.'*

3. Decision XVIII/16 also required all manufacturers in industrialised countries that export more than 10 tonnes of active ingredient in CFC-MDIs to an Article 5(1) Party, to provide information to that Party on steps that the manufacturer is taking to transition to CFC-free MDI exports, including the dates when the CFC-free MDIs are expected to be registered and on the market in the importing country; indicative information on pricing, licensing and/or technology transfer arrangements under consideration; and the exporting manufacturer's contribution to, and participation in, programmes for educating health care professionals, government health authorities and patients on the transition to CFC-free MDIs.

4. In addition in 2006, the MLF Secretariat provided a report that identified two Parties, with CFC-MDI manufacturers within their territory, who would need special assistance to meet their CFC reduction targets. The MLF agreed, in the light of comments made by delegates at the 49th Meeting, to update its report for submission to the 51st Meeting.

5. Consistent with these Decisions and MLF Report, and with regard to the conclusions of the MDI Thematic Meeting conducted as part of the South Asian Network Meeting held in Sri Lanka 4-5 December 2006, UNEP proposes a series of eight regional workshops in Article 5(1) regions to promote the transition to CFC-free MDIs through the following key activities: 1) Where necessary, and for countries which requested UNEP to be their implementing agency, to complete the collection of national information to allow for preparation of National Transition Strategies for those countries; 2) In cooperation with other Implementing Agencies working in the different regions (which are already assisting countries to develop and implement Transition Strategies) assist with appropriate regional actions to reduce and eliminate dependency on CFC-MDI imports . Those actions could facilitate countries to put in place, within the 3 year period available, licensing restrictions on imports of MDIs and pharmaceutical grade CFCs, leading in time to prohibition; registration of importers and manufacturers; and exploring the possibility for fiscal incentives to encourage CFC-free MDIs, including the provision of specialised and neutral

advice on pricing mechanisms for CFC-free and CFC-MDIs; and 3) Developing an 'MDI tracker' database in order to monitor progress in all aspects of the transition and to provide timely feedback to participants on where further action is necessary.

6. The regional workshops would target relevant officials in Environmental and Health authorities with the aim of providing participants with practical information to promote work on national awareness / educational campaigns with stakeholders, including those involved in the medical community, clinics, pharmaceutical companies and retail agencies, child care centres, research institutes and universities, NGOs and national patient organisations. Relevant representatives from the World Health Organisation would be invited to participate, as well as other Implementing and Bilateral Agencies of the MLF, in order to ensure effective coordination.

7. In close coordination with relevant implementing agencies in countries, advice would be provided on an as-needed basis after the regional workshops to the Health authorities in order to assist with solutions to problems as they arise. Environmental authorities would be encouraged to transition to CFC-free technology in the refrigeration sector in order to make available CFCs for potential MDI manufacture within the 15% consumption cap available until phase out.

8. These regional workshops would seek to address a number of problems that could impede the transition to CFC-free alternatives, such as a general reluctance by Health regulators to withdraw CFC-MDIs in view of other more pressing health concerns; that some CFC-free MDIs may be authorized but not actually marketed; that CFC-free MDIs may appear prohibitively expensive initially; and that mechanisms are put in place to encourage the removal of CFC-MDIs so that they do not inhibit the adoption of CFC-free MDIs.

9. The estimated budget for these activities would be US$610,000. This budget would cover 8 regional workshops. US$220,000 would be used for international consultancies, while the remaining US$390,000 for organization of the 8 thematic workshops.
