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Daniel O'Day
Chairman and Chief Executive Office
Gilead Sciences
333 Lakeside Drive
Foster City, CA 94404

November 2, 2020

Dear Mr. O'Day,

Despite limited evidence of efficacy, remdesivir is expected to become a blockbuster. Gilead stands to make a windfall not only from the sales of a treatment heavily subsidized by taxpayers. Gilead also stands to benefit from the highly lucrative priority review voucher (PRV) it received based on the "material threat" designation. The PRV represents an entirely unnecessary and inappropriate incentive given Gilead's expected revenues. We urge Gilead to relinquish the PRV.

U.S. government scientists likely coinvented remdesivir and U.S. taxpayers have provided more than $70 million dollars in support for remdesivir research and development, yet Gilead is charging American consumers $520 per dose – more than anyone else in the world. Gilead announced to its shareholders recently that in the third quarter of 2020, its remdesivir revenues totaled $873 million. Wall Street analysts project Gilead will receive nearly $1 billion more in the fourth quarter and forecasted this summer that remdesivir sales could reach $7.7 billion in 2022.

Lawmakers' intent in creating the medical countermeasure PRV program was to provide additional incentives to pharmaceutical manufacturers to encourage development of new drug and biological medical countermeasures. Gilead is already being handsomely compensated through remdesivir sales and is slated to recoup any investment it made in its development many times over, which, again, was heavily subsidized by taxpayers. Provision of the PRV was clearly an unnecessary windfall to Gilead in addition to these already excessive revenues.

We and many others previously called on Gilead to rescind the orphan drug designation it received for remdesivir and to price remdesivir at $1 per dose – a price at which independent researchers determined remdesivir can be manufactured and sold for a reasonable profit. We now call on Gilead to relinquish the PRV granted to it upon the approval of remdesivir.

We await your urgent response.

Signed,

Peter Maybarduk, director, Access to Medicines
Public Citizen