

Wednesday, 25 May, 2022

To:

Right Honourable Justin Trudeau, Prime Minister of Canada

The Honourable Jean-Yves Duclos, Minister of Health of Canada

The Honourable Carolyn Bennett, Associate Minister of Health of Canada

Cc:

Hiroaki Ueno, Chief Executive Officer, Mitsubishi Tanabe Pharma

Emma Walmsley, Chief Executive Officer, GlaxoSmithKline

Jacek Olczak, Chief Executive Officer, Philip Morris International

Dear Prime Minister Justin Trudeau and Ministers Duclos and Bennett:

Following from previous correspondence, the undersigned organizations and individuals continue to express serious concerns about the investment and ongoing collaboration between the Government of Canada and Philip Morris International (PMI) regarding the COVID-19 vaccine developed by Medicago Inc. (Covifenz). Due to Medicago's partial ownership by the tobacco industry and the resulting conflicts, we urge the Canadian government to sever its ties with and divest from Medicago and to support COVID-19 vaccine alternatives that are not financed by tobacco companies.

Medicago is a foreign-owned company operating in Québec, and **PMI currently holds over 20% of the equity in the vaccine producer**¹. PMI is also

¹ https://pmidotcom3-prd.s3.amazonaws.com/docs/default-source/investor_relation/pmi_2021_annualreport_2.pdf?sfvrsn=8016b6b7_4

investing additional funds in the development of the vaccine itself and is therefore leveraging the Government of Canada's investment of US\$130M in the vaccine.

By collaborating with PMI on a vaccine candidate, the Government of Canada is demonstrating complete disregard for its treaty obligations under the Framework Convention on Tobacco Control (FCTC). Moreover, the government appears to be turning a blind eye to the tobacco industry and the pandemic of eight million deaths annually that it is fueling--including **48,000 annual deaths in Canada**². We now know that tobacco-related conditions, like respiratory and cardiovascular diseases, are **risk factors associated with COVID-19**³. The **World Health Organization (WHO) has found**⁴ that "smoking is associated with increased severity of disease and death in hospitalized COVID-19 patients." The control of one pandemic should not come at the expense of another.

The WHO recently **denied the approval**⁵ of the emergency distribution of Covifenz due to Medicago's ties with PMI. The WHO affirmed its decision by stating that it will abide by its policy of non-engagement with the tobacco industry and advised Medicago to divest itself of tobacco interests. We applaud the WHO's commitment to the **WHO Framework of Engagement with Non-State Actors (FENSA)**⁶ which embodies the WHO FCTC policy of protecting public health from the commercial and vested interests of the tobacco industry and hope this precedent could inspire other WHO actions while engaging with the private sector. This commitment is also consistent with **Article 5.3 of the FCTC**⁷ which denounces partnerships and collaborations with tobacco companies. The agreement between the Canadian government and Medicago breaches several articles and sections of the FCTC--a global public health treaty to which Canada is a full signatory. The violations include:

- (1) Collaborating with tobacco companies on corporate social responsibility strategies;

² <https://www.lung.ca/lung-health/lung-info/lung-statistics/smoking-and-tobacco-statistics>

³ <https://www.bmj.com/content/368/bmj.m1198>

⁴ <https://www.who.int/news-room/commentaries/detail/smoking-and-covid-19>

⁵ <https://www.bnnbloombergq.ca/medicago-s-covid-shot-faces-who-rejection-over-firm-s-tobacco-ties-1.1738759>

⁶ <https://www.who.int/about/collaboration/non-state-actors>

⁷ <https://fctc.who.int/who-fctc/overview>

- (2) Investing in tobacco industry ventures and schemes; and
- (3) Indirectly promoting a tobacco company and its brands.

The potential development of a COVID-19 vaccine could very well represent one of the most successful public relations strategies ever mounted by a tobacco company. The involvement of the Government of Canada is disturbing and represents a gross oversight or indifference of the government's obligations under the FCTC. For example, **recent news media reports**⁸ describe how PMI and the tobacco industry could use the tobacco COVID-19 vaccine to further corporate social responsibility (CSR) activities especially in Low-to-Middle-Income Country (LMICs), since it undermines hard-fought lifesaving corporate sponsorship bans. It's also worth mentioning that **several documents**⁹ have shown reported how the tobacco industry is using the COVID-19 crisis as a CSR strategy. Parties to the FCTC, through the **Declaration on the FCTC and recovery from the COVID-19 pandemic**¹⁰ adopted at the Ninth Conference of the Parties (COP) in November 2021, have raised concerns that tobacco industry's acquisition in the pharmaceutical sector "could complicate and hinder tobacco control implementation." This trend could **lead to more government incentives**¹¹ for the tobacco industry's pharmaceutical interests.

The Government of Canada was a strong supporter and early adopter of the FCTC. At the Eighth COP in October 2018, the Government of Canada's delegation championed a decision urging all 182 participating nations to **accelerate the implementation of Article 5.3 of the FCTC to limit government**¹² interactions with tobacco companies. Ironically, the Government of Canada has yet to implement its own cross-government guidelines for Article 5.3 for all governing bodies within its jurisdiction. The absence of strong guidelines may have facilitated the recent PMI collaboration and subsequent

⁸ <https://www.eco-business.com/news/dark-side-to-big-tobaccos-covid-19-csr-activities-2/>

⁹ <https://tobaccotactics.org/wiki/covid-19/>

¹⁰ https://untobaccocontrol.org/downloads/cop9/decisions/FCTC_COP9_10_EN.pdf

¹¹ <https://exposetobacco.org/wp-content/uploads/STOP-Pharma-Brief-3.15.22.pdf>

¹² [https://fctc.who.int/publications/m/item/fctc-cop8\(12\)-maximizing-transparency-of-delegations-from-parties-and-observers-to-the-conference-of-the-parties-its-subsidiary-bodies-and-other-who-fctc-meetings](https://fctc.who.int/publications/m/item/fctc-cop8(12)-maximizing-transparency-of-delegations-from-parties-and-observers-to-the-conference-of-the-parties-its-subsidiary-bodies-and-other-who-fctc-meetings)

Health Canada **approval of the Medicago vaccine**¹³ for use by adults in Canada.

The FCTC discourages participating nations from entering any partnership or collaboration with tobacco companies based on the tobacco industry's track record of exploiting governments to its commercial advantage which is intrinsically detrimental to public health --civil society organizations in **Bangladesh**¹⁴, **Nigeria**¹⁵, and **Ghana**¹⁶ have also been urging their governments to refuse Covifenz vaccine. These transgressions--including in Canada--have been well-documented and the Canadian government is very aware of the deceptive, fraudulent and manipulative practices of the tobacco industry.

Tobacco use claims over eight million lives annually and tobacco industry interference has been described as the single **largest barrier to tobacco control**¹⁷ globally. The many transgressions of tobacco companies--including PMI--are **very well documented**¹⁸ in legal filings by 10 Canadian subnational governments representing \$500 billion in total claims for health care costs resulting from alleged industry deception and negligence. The Canadian federal government has also collected and analyzed many such documents in its own tobacco industry lawsuits to uphold its tobacco legislation including laws to restrict tobacco advertising, sponsorship, and promotion.

Based on these concerns and the related breaches of the FCTC, the undersigned organizations urge the Government of Canada and Health Canada to:

¹³ <https://www.reuters.com/business/healthcare-pharmaceuticals/canada-approves-medicagos-plant-based-covid-19-vaccine-adults-2022-02-24/>

¹⁴ <https://www.thedailystar.net/health/disease/coronavirus/fallouts-fightback/vaccine/news/reject-covid-19-vaccine-offers-tobacco-companies-anti-tobacco-orgs-urge-govt-2993436?amp>

¹⁵ <https://www.environewsnigeria.com/nigerian-govt-cautioned-against-accepting-philip-morris-covid-19-vaccine/>

¹⁶ <https://ghananewsonline.com.gh/reject-tobacco-giant-philip-morris-covid-19-vaccine-vald-calls-on-the-ministry-of-health/>

¹⁷ https://www.euro.who.int/_data/assets/pdf_file/0005/165254/Tobacco-Industry-Interference-A-Global-Brief.pdf

¹⁸ <http://www.smoke-free.ca/SUAP/2020/Litigation%20update.pdf>

(1) Reject any further agreements and collaboration with Medicago based on the requirements of the FCTC to which the Government of Canada is a full signatory.

(2) Divest fully from Medicago and reinvest the funds in vaccine development that is not co-sponsored or underwritten by tobacco companies.

(3) Develop and implement strong cross-government guidelines to fully implement Article 5.3 of the FCTC to prevent future partnerships, collaborations, and joint investments with the tobacco industry and related ventures and schemes that are substantially financed, supported or sponsored by tobacco companies.

Thank you for your prompt attention to this important public health matter.

Signed,

Action on Smoking and Health Canada

Corporate Accountability

Organizational endorsements

- | | |
|--|---|
| 1. Abhinav Bharat Foundation ABF | 9. Alianza Por La Salud - Bolivia |
| 2. ACT Promoção da Saúde (ACT Health Promotion) - Brazil | 10. Alianza por la Salud Alimentaria en Colombia |
| 3. African American Tobacco Control Leadership Council | 11. Anti Drug Abuse Association of Lesotho |
| 4. African Center for Advocacy | 12. ArvoreAgua - www.arvoreagua.org |
| 5. African Tobacco Control Alliance | 13. Action on Smoking and Health - ASH Finland |
| 6. Ageing Nepal | 14. ASH Scotland - Action on Smoking and Health Scotland |
| 7. Alberta Health Services | 15. Asha Parivar |
| 8. ALIANZA ENT- PERU | |

16. Asian Consultancy on Tobacco Control
17. Asociación Civil Tabaco o Salud, ACITASVE - Venezuela
18. Asociación Colombiana de Salud Pública
19. Asociación Latinoamericana de Medicina Social AMES
20. Aurora College
21. Austrian Council on Smoking and Health
22. Cancer Research UK
23. Cancer Survivors Quest
24. Cancer Warriors Foundation
25. Center for Constitutional Rights
26. Centre for Health Science and Law (CHSL)
27. Centro para la Defensa del Consumidor (CDC)
28. CEPROSAF-Honduras
29. Chile Libre de Tabaco
30. CIET - Uruguay
31. Citizen News Service-CNS
32. CLAS Coalition for Americas' Health
33. Coalición México Salud-Hable
34. Coalition Camerounaise contre le Tabac (C3T)
35. Comisión Nacional Permanente De Lucha Antitabaquica - Colat Peru
36. Comité National Contre le Tabagisme
37. Corporate Accountability and Public Participation Africa (CAPPA)
38. Custodios De Semillas Del Quindio - Colombia
39. DNF (Demain sera Non-Fumeur)
40. Educar Consumidores – Colombia
41. Empower India
42. En-Comunicación - Costa Rica
43. Enfoque Territorial - Paraguay
44. European Respiratory Society
45. Fannie Lou Hamer Institute
46. FIQUIRES, familias cáncer de pulmón
47. Fresh and Balance
48. Framework Convention Alliance
49. Fundación Colombiana del Corazón
50. Fundación Dominicana de Obesidad y Prevenición Cardivascular, Inc. (FUNDO) – Dominican Republic
51. Fundación Ellen Riegner de Casas - Colombia
52. Fundación InterAmericana del Corazón Bolivia

53. Fundación Movimiento Contra el Cáncer, Movicáncer (Fundación Movicáncer) - Nicaragua
54. Fundación Salud Ambiente y Desarrollo - Ecuador
55. Fundaciónn Anáas - Colombia
56. Geneva Global Health Hub (G2H2)
57. Global Alcohol Policy Alliance
58. Grupo Perfil - Uruguay
59. Healís Sekhasaria Institute for Public Health
60. Health Funds for a Smokefree Netherlands
61. HealthJustice
62. IBFAN Colombia
63. ImagineLaw, Inc.
64. InterAmerican Heart Foundation
65. Interamerican Heart Foundation Argentina
66. International Union Against Tuberculosis and Lung Disease
67. Jamaica Coalition for Tobacco Control
68. Japan Society for Tobacco Control
69. Jazzbooks.com
70. Jeewaka Foundation
71. KFL&A Public Health - TCAN EAST
72. Manushya Foundation
73. MPS GABON
74. Nairobi Peoples Settlement Network
75. Narasha Community Development Group
76. National Campaign for Sustainable Development Nepal
77. Nigeria Tobacco Control Alliance
78. Norwegian Cancer Society
79. Oilwatch
80. Pratyasha' Anti-Drug's Club
81. Pacientes Alto Costo - Colombia
82. People's Health Movement
83. Peruvian American Medical Society
84. Philippine Cancer Society
85. Reconciliation And Development Association-RADA
86. RedPaPaz-Colombia
87. RENATA-Costa Rica
88. RightOnCanada
89. RIGHTS Foundation
90. Salud Justa MX
91. Sangai Youth Tobacco Free And Educational Organisation
92. Shakti Comunicaciones

93. Slovenian Coalition for Public Health, Environment and Tobacco Control

94. Small Planet Institute

95. Smoke Free Israel

96. Smoke Free Partnership

97. Sociedad Colombiana de Medicina del Trabajo

98. Sociedad Uruguaya de Tabacologia

99. Society for International Development (SID)

100. Southeast Asia Tobacco Control Alliance

101. Súmate - El Salvador

102. Swiss Association for Tobacco Control

103. Taiwan Medical Alliance for the Control of Tobacco (TMACT)

104. Tanzania Tobacco Control Forum

105. The Garden of Hope Foundation

106. The Heart Foundation of Jamaica

107. Tobacco Control Alliance in Georgia, George Bakhturidze

108. UBINIG (Policy Research for Development Alternative)

109. Uddipto Mohila Unnayan Sangastha

110. Uganda Alcohol Policy Alliance (UAPA)

111. Unfairtobacco / BLUE 21

112. Vancouver Coastal Health

113. Vision for Alternative Development - Ghana

114. Voluntary Health Association of India

115. Wemos Foundation

116. World Health Federation

117. Zambia NCD Alliance