



THE LANCET GLOBAL HEALTH COMMISSION MEDICAL OXYGEN SECURITY

A CALL TO ACTION ON



2 October 2024

“We can’t ever be complacent and say it will not happen to us. We need to be prepared and have the systems in place so that lives are not lost unnecessarily for lack of medical oxygen.”

COVID-19 patient, India, 2024

This is just one of the many anguished pleas the **Lancet Global Health Commission on Medical Oxygen Security** heard from patients as we conducted a two-year exploration of access to medical oxygen. Today, on World Oxygen Day, while we acknowledge the recent efforts of governments, and regional and global health agencies to respond to the medical oxygen shortages brutally exposed during the pandemic, we remain deeply concerned.

The Commission’s detailed examination over the past two years has revealed that the vast majority of patients who need pulse oximetry and medical oxygen do not receive them, and where they are available, patients are often subject to high out-of-pocket costs. This contributes to a large burden of preventable deaths that disproportionately occur in low- and middle-income countries and in the most vulnerable populations. It has constrained progress to the health-related **Sustainable Development Goals** (SDGs) and made a mockery of the journey to Universal Health Coverage (UHC). Further, there is a high probability that if another disaster struck tomorrow where medical oxygen is needed in vast quantities, most countries would, once again, not be ready and able to meet the demand.

We must do more and we must work with a sense of urgency.

Accordingly, we call on all governments to ensure that pulse oximetry and medical oxygen are part of both national health and pandemic preparedness and response plans and programs. We note that the demand for medical oxygen is rising in countries with wide gaps in access, driven by high birth rates, and rising demand for surgery/anesthesia (including for accidents and injuries) and essential chronic disease care (e.g., COPD). Climate change, especially by increasing air pollution, and conflict are causing additional pressure. While we understand that competing spending priorities and diminished government budgets have created a challenging environment, national governments can save many lives now and reduce the costs of the next pandemic by investing in strong and resilient medical oxygen systems.

On a more positive note, there has never been more international support to help nations meet the medical oxygen challenge. The World Health Assembly has provided a blueprint for action with the **Increasing Access to Medical Oxygen** resolution. All 194 member States have adopted it. The World Health Organization (WHO) has also updated the **International Pharmacopoeia** to include alternative

sources of medical oxygen. A **Global Oxygen Alliance** (GO₂AL) has been established to continue the work of the international emergency oxygen response, which provided \$US1 billion worth of oxygen supplies to over 100 countries during the pandemic. GO₂AL is led by Unitaid, The Global Fund, Africa CDC, and PAHO with support from WHO, UNICEF, USAID and a line-up of stellar global health agencies with experience in medical oxygen. We applaud Alliance members for their progress, and note the recent publication of a **report** and a **Call for Proposals** on oxygen innovations. We also applaud the impressive initiatives highlighted in the GO₂AL Statement for World Oxygen Day.

However, as critical as this progress is, it is insufficient to close the wide gaps in access to medical oxygen that the Commission has documented and will publish in 2025. To fill these gaps, national governments will need significant financing and national finance ministries and regional and global development finance institutions will need to respond. In addition, many countries will still need traditional grant financing, especially to ensure an adequate supply of trained clinicians and engineers to operate and maintain the equipment. We look to global health donors to support this effort and strengthen the capacity of GO₂AL to efficiently and effectively coordinate and implement it. We also need the full engagement of all arms of the medical oxygen industry as fully participating partners. Key to the long-term sustainability of medical oxygen systems are thriving local markets of businesses contracted to maintain operations.

In early 2025, the Commission will release its report and the first estimates of the unacceptably wide gaps in access to pulse oximetry and medical oxygen for patients living in low- and middle-income countries. These gaps are far wider than the treatment gaps that exist for other essential medicines and are contributing to a massive burden of both infectious and chronic disease deaths, across all age groups, in health facilities and in the community. *We would never accept such wide gaps in access for any other essential medicine, and especially when no substitute treatment is available.*

We will be foreshadowing the major findings and recommendations of the Commission at the **World Health Summit** in October 2024. Do join us if you are attending. Let's make 2025 the year when the world takes a giant step forward in the long journey to strengthen national health systems so they can guarantee pulse oximetry and medical oxygen to all who need them, and be ready to respond effectively to increasing demands during future pandemics and other emergencies.

What is the Lancet Global Health Oxygen Commission?

The *Lancet Global Health* Oxygen Commission was **announced** in September 2022 to shed light onto the number of patients needing medical oxygen and the cost of meeting that need, how to define and measure oxygen access, which oxygen solutions work best in different settings, and how to generate the financing and political will to achieve transformational change. It will address all levels of care from hospital to home, all age groups from neonates to the elderly, all health conditions where oxygen is a recommended treatment, and all the ways in which access to oxygen can contribute to health system strengthening and pandemic preparedness. The Commission is led by a group of Commissioners and guided by a team of Advisors and an Executive Committee, including representatives from Makerere University, Uganda, icddr,b, Bangladesh, the University of Melbourne and the Murdoch Children's Research Institute, Australia, and Karolinska Institutet, Sweden — with support from the Every Breath Counts Coalition. For more information on the Commission, click [here](#), and for a list of Oxygen Commissioners and Advisors, click [here](#).

Contacts

Executive Committee (alphabetical order)

Dr Hamish Graham, University of Melbourne and Murdoch Children's Research Institute, Australia, hamish.graham@rch.org.au

Leith Greenslade, Every Breath Counts, USA, leith@justactions.org

Dr Carina King, Karolinska Institutet, Sweden, carina.king@ki.se

Dr Freddy Kitutu, Makerere University, Uganda, kitutufred@gmail.com

Zoë Mullan, Lancet Global Health, UK, zoe.mullan@lancet.com

Dr Ahmed Ehsanur Rahman, icddr,b Bangladesh, ehsanur@icddr.org