[DD Month YYYY]

The Secretary of the 22nd Expert Committee on the Selection and Use of Essential Medicines

Department of Essential Medicines and Health Products (EMP)

World Health Organization (WHO)

20 Avenue Appia

CH-1211 Geneva 27 Switzerland

Dear Committee Members

*[NOTE: Sample support letter provided for customization. Please feel free to revise.]*

On behalf of [*please insert organisation name*], I submit this letter in support of the application for the addition of co-packaged oral rehydration salts (ORS) solution and zinc for the treatment of diarrhoea to the WHO Model List of Essential Medicines for Children (EMLc). This inclusion would provide the missing link between the long-standing global recommendation and frontline practice in the treatment of childhood diarrhoea.

ORS and zinc are considered the cornerstone of diarrhoea treatment in low-resource settings. Administration of low osmolarity ORS and zinc sulphate tablets for 10–14 days as an adjunct therapy has been recommended by WHO and the United Nations International Children’s Emergency Fund (UNICEF) since 2004. However, access to ORS and zinc remains a challenge, and the rate of co-administration of both products is extremely low. In eight out of fifteen countries with the highest burden of diarrhoeal disease, less than two percent of the diarrhoea cases are treated with both ORS and zinc. The current WHO EMLc lists ORS and zinc separately, leading to a number of obstacles impeding access to this lifesaving therapy.

The co-packaging of ORS and zinc has the potential to reduce neonatal and child mortality and morbidity, and increase the quality of health care provided to these populations, particularly in low and middle-income countries (LMIC). The WHO EMLc is a highly influential normative standard that offer critical guidance for countries to adapt their individual national EMLs and prioritize expenditures, procurement and supply, and training of healthcare providers. Such alignment stands to foster a more enabling environment for the use of ORS and zinc at a national level, ultimately helping improve access, lowering the cost of long-term health care to families and communities, and saving and improving lives.

We anticipate that WHO will conclude that the scientific evidence detailed in the application presents a compelling case that the co-packaging of ORS and zinc for management of childhood diarrhoea will save lives of millions of infants and children. Both products are already listed separately in the EMLc, and administration of both has been recommended by WHO and UNICEF since 2004. Co-packaged ORS and zinc has been recognized as “an innovation” by UNICEF Supply Division and included in the UNICEF supply catalogue. Both products are widely available globally, including in LMICs, and are safe, cost-effective, and inexpensive to manufacture. There are already an increasing number of co-packaged products available on the market, and at least four countries have already included co-packaged ORS and zinc on their national EMLs.

This application would further increase the number of co-packaged products available, stimulate competition, help bring down prices, and lead to a transformative increase in the percentage of diarrhoea cases being treated with the combination therapy recommended by WHO and UNICEF.

[*Organisation name*] is committed to expanding access to co-packaged ORS and zinc. *[Please insert a short description of your organization and any relevant connection to ORS and zinc.]*

We respectfully urge the committee to consider the additional lives that could be saved or improved with expanded access to co-packaged ORS, and zinc and accept the proposal for the inclusion of co-packaged ORS and zinc on the EMLc for the management of childhood diarrhoea.

Yours faithfully,

*[Name]*

*[Position]*

*[Department]*

*[Organization]*

*[Street address]*