

includes the minimum medicines needed for a basic health-care system, while the complementary medicines list includes medicines for diseases that require more specialized diagnostic or monitoring facilities, medical care, and training.⁶ The model list can be

adapted to meet national needs and health priorities. Its principles and approaches are equally relevant to high-, middle-, and low-income countries and have increasing relevance as countries implement medicines benefits packages as part of universal health coverage. The

next expert committee (in its April 2015 meeting) will need to consider how to realize the global health benefits of new medicines for which affordability is a major issue. ■

Competing interests: None declared.

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Corrigendum

In Volume 86, Issue 4, April 2008, page 260, the third sentence of the first paragraph should begin: “In 2000, it was estimated that over 21.6 million episodes of typhoid occurred worldwide...”.

In Volume 92, Issue 8, August 2014, page 565, the second sentence of the findings section of the abstract should read: “In 56% (62/111) of the samples, it exceeded the Bangladeshi threshold of 50 µg/l; the mean concentration being 54.5 µg/l (range: 0.1–193.1).”