



May 7, 2025

Stephen Astle

Director, Defense Industrial Base Division

Office of Strategic Industries and Economic Security Bureau of Industry and Security

United States Department of Commerce

Re: Comments on Section 232 National Security Investigation of Imports of Pharmaceuticals and Pharmaceutical Ingredients [Docket No. 250414-0065, XRIN 0694-XC120]

Dear Director Astle:

The COPD Foundation appreciates the opportunity to provide comments on the Bureau of Industry and Security's Section 232 investigation into the national security implications of imports of pharmaceuticals and pharmaceutical ingredients.

The COPD Foundation is a 501(c)(3) not-for-profit organization created in 2004, representing the 16 million Americans who have been diagnosed with COPD and the millions more who remain undiagnosed. The COPD Foundation's mission is to help millions of people live longer and healthier lives by advancing research, advocacy, and awareness to stop COPD, bronchiectasis, and NTM lung disease.

We respectfully urge the Department to narrowly tailor its inquiry to specific, evidence-based national security risks and to avoid any broad-based tariffs that would have unintended and harmful consequences for patients and the United States health care system.

Medicines are not discretionary consumer goods; rather, they are indispensable components of patient care, prescribed by licensed health care professionals to treat specific, and often life-threatening, medical conditions.¹ Unlike commodities where alternative options may be readily substituted based on price or availability, prescription medicines are selected based on clinical efficacy, safety profiles, and individual patient needs. Patients do not choose their illnesses—and for many conditions, particularly serious, chronic, or rare diseases—the available treatment options are few, highly specialized, and not readily interchangeable. The imposition of tariffs on medicines would introduce new barriers into an already complex and fragile health care delivery system; it would increase costs across the supply chain, delay or disrupt access to medically necessary therapies, and ultimately reduce the availability of essential treatments—resulting in immediate and profound consequences for patient health outcomes, quality of life, and overall system sustainability.²

Millions of Americans rely on medicines that are manufactured outside the United States, particularly from close and longstanding allies such as Ireland, Switzerland, and the United Kingdom—countries whose regulatory frameworks for pharmaceutical manufacturing mirror the high standards enforced domestically.^{3,4} These imports include critical biologics, advanced therapies, and specialty pharmaceuticals that are essential to the treatment of conditions for which few, if any, alternative

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options exist.⁵ Medicines manufactured abroad are often integral components of complex, multi-modal treatment regimens carefully calibrated by providers to address the individual and evolving needs of patients; substitution, when even theoretically possible, carries significant clinical risks—including reduced therapeutic efficacy, increased side effects, and potential disease progression.⁶ Tariffs that disrupt the availability of these treatments or increase their cost to providers, insurers, and ultimately patients would endanger treatment continuity, compromise disease management strategies, and heighten the risk of adverse health outcomes.⁷

The COPD Foundation’s community forum, COPD360social, is a moderated social platform with over 60,000 members. The most frequently cited obstacle to treatment access by forum members is medication cost. Many COPD patients survive on a fixed income and individuals must carefully budget their funds to account for the price of their medications. Changes in medication costs disrupt budgets so severely that patients are forced to go without their treatments. This disruption in their treatment regimens can have serious health impacts such as increased discomfort, more frequent hospitalizations, and even death.

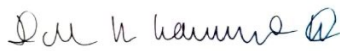
In addition to the direct clinical consequences, tariffs on medicines would deepen existing health imbalances across the United States.⁸ Vulnerable populations—including individuals with lower incomes, residents of rural and medically underserved areas, and those managing multiple chronic conditions—already face disproportionate barriers to accessing necessary medical care.⁹ These groups are least able to absorb the financial burden of higher prescription drug costs resulting from tariffs and are most at risk of nonadherence, delayed treatment initiation, or complete foregone care.¹⁰ Moreover, the ripple effects of increased medicine costs would not be confined to individuals paying out-of-pocket; public programs such as Medicaid and Medicare, as well as private health plans, would face increased expenditure pressures, leading to broader system-level consequences including increased premiums, higher cost-sharing, restricted formularies, and further access limitations.¹¹

At a time when policymakers across the political spectrum are working to advance policies designed to improve the affordability, accessibility, and adequacy of health care, imposing tariffs on medicines would run counter to these objectives—erecting new barriers at the very moment when efforts to remove them are gaining critical momentum. It is essential that any policies emerging from this investigation carefully weigh not only theoretical trade or industrial policy benefits but also the very real and immediate impacts on patient care, health equity, and the overall functioning of the US health care system.

The COPD Foundation strongly urges the Department of Commerce to avoid recommending broad-based tariffs on pharmaceutical imports and inputs. Such measures would compromise patient access to life-saving medicines. We encourage the Department to adopt a measured, patient-centered approach that prioritizes specific, demonstrated threats and promotes investment through constructive and collaborative policy tools.

We appreciate the opportunity to provide input on this important issue and welcome further dialogue to ensure that Americans retain timely access to safe, effective, and affordable medicines without unintended barriers that could compromise patient health.

Sincerely,



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