

SECURE WEBINAR 18

BLUEPRINTS TO BREAKTHROUGHS: ENHANCING VACCINE MANUFACTURING ECOSYSTEMS IN DMCS

24 OCTOBER 2024
2:00-3:30 PM Manila time

Regulatory Systems Strengthening in the Western Pacific Region




Dr Jinho Shin

Medical Officer
Regulatory Systems Strengthening
Essential Medicines & Health Technologies
Division of Health Systems & Services
WHO Regional Office for the Western Pacific
Manila, Philippines
shinj@who.int

This is not an ADB material. The views expressed in this document are the views of the author/s and/or their organizations and do not necessarily reflect the views or policies of the Asian Development Bank, or its Board of Governors, or the governments they represent. ADB does not guarantee the accuracy and/or completeness of the material's contents, and accepts no responsibility for any direct or indirect consequence of their use or reliance, whether wholly or partially. Please feel free to contact the authors directly should you have queries.

Setting the scene

Member States in WHO Western Pacific Region



Representative Offices

- Cambodia
- China
- Lao People's Democratic Republic
- Malaysia (area of responsibility: Brunei Darussalam, Malaysia, Singapore)
- Mongolia
- Papua New Guinea
- Philippines
- Samoa (area of responsibility: American Samoa, Cook Islands, Niue, Samoa and Tokelau)
- Solomon Islands
- South Pacific (area of responsibility: Fiji, French Polynesia, Kiribati, the Marshall Islands, the Federated States of Micronesia, Nauru, New Caledonia, New Zealand, the Commonwealth of the Northern Mariana Islands, Palau, Tonga, Tuvalu, Vanuatu, and Wallis and Futuna)
- Viet Nam

Country Liaison Offices

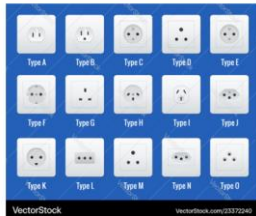
- Northern Micronesia (area of responsibility: the Marshall Islands, the Federated States of Micronesia and Palau)
- Kiribati
- Tonga
- Vanuatu

©WHO. This information is accessible to AEM Management and Staff. It may be shared outside AEM with appropriate permission.




Why do we need to use a unified global standard for Medical Products?

Travel nightmare



To Protect People from Diseases without Barriers

Making travelers happier



©WHO. This information is accessible to AEM Management and Staff. It may be shared outside AEM with appropriate permission.

Member States in WHO Western Pacific Region



Representative Offices

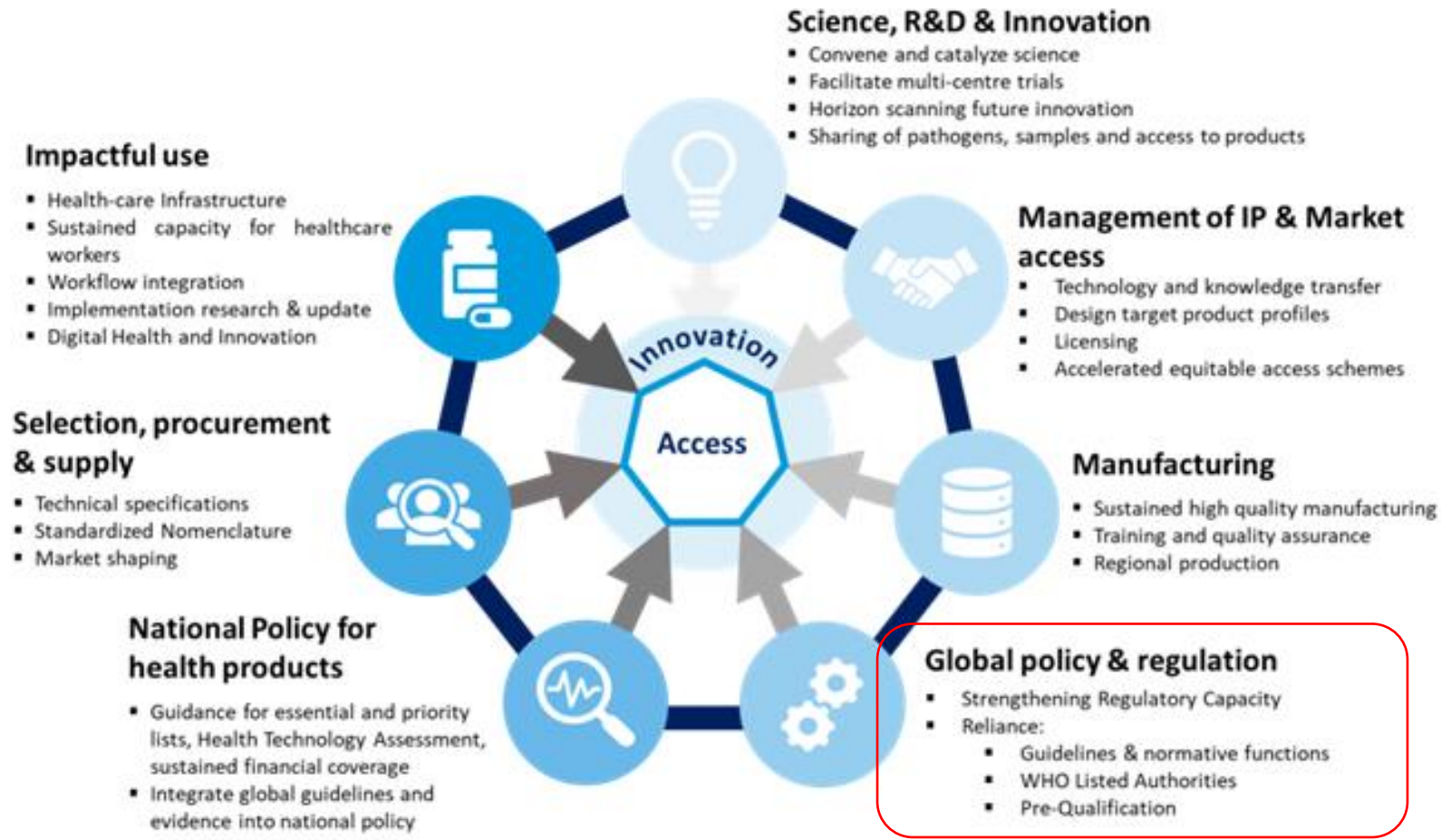
- Cambodia
- China
- Lao People's Democratic Republic
- Malaysia (area of responsibility: Brunei Darussalam, Malaysia, Singapore)
- Mongolia
- Papua New Guinea
- Philippines
- Samoa (area of responsibility: American Samoa, Cook Islands, Niue, Samoa and Tokelau)

- Solomon Islands
- South Pacific (area of responsibility: Fiji, French Polynesia, Kiribati, the Marshall Islands, the Federated States of Micronesia, Nauru, New Caledonia, New Zealand, the Commonwealth of the Northern Mariana Islands, Palau, Tonga, Tuvalu, Vanuatu, and Wallis and Futuna)
- Viet Nam

Country Liaison Offices

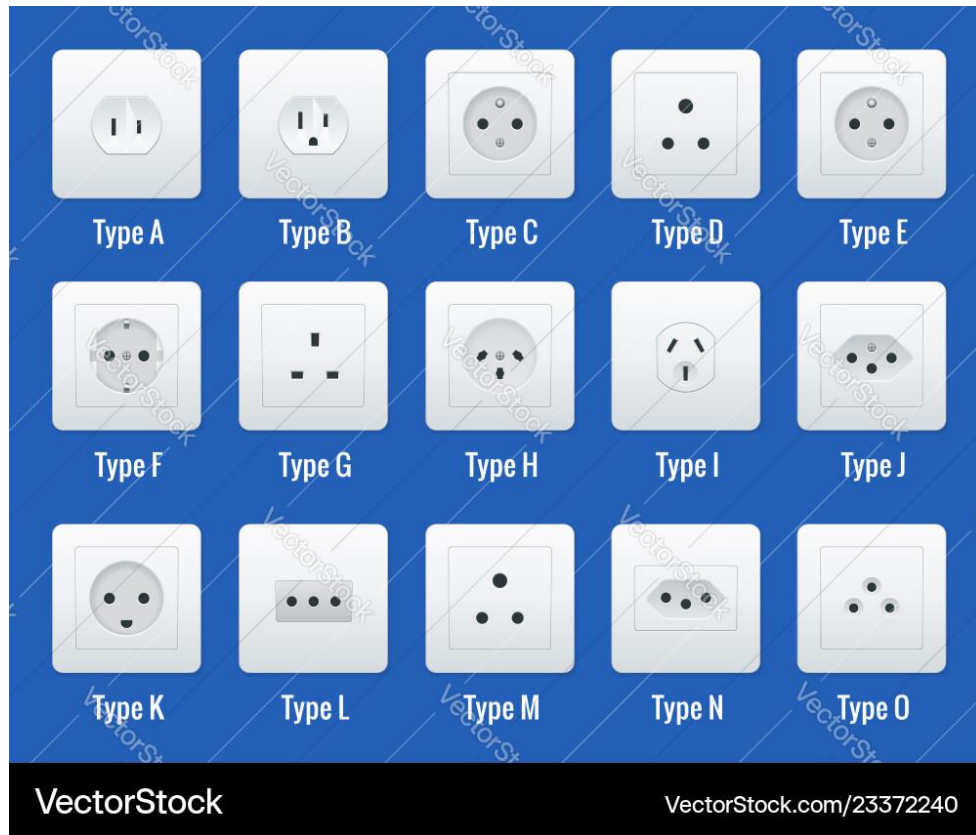
- Northern Micronesia (area of responsibility: the Marshall Islands, the Federated States of Micronesia and Palau)
- Kiribati
- Tonga
- Vanuatu

WHO ecosystem approach to accelerating access to life-saving innovation



Why do we need to use a unified global standard for Medical Products?

Travel nightmare



To Protect People from Diseases without Barriers

Making travelers happier



**What are the key functions
of the NRA**

National Regulatory Authority: Structure and Role

A regulatory authority is a public institution(s) or governmental body or bodies authorized **by law** to exercise independent regulatory oversight over the **development**, **production**, **marketing** and **surveillance** of medical products.

NRAs are often structured as

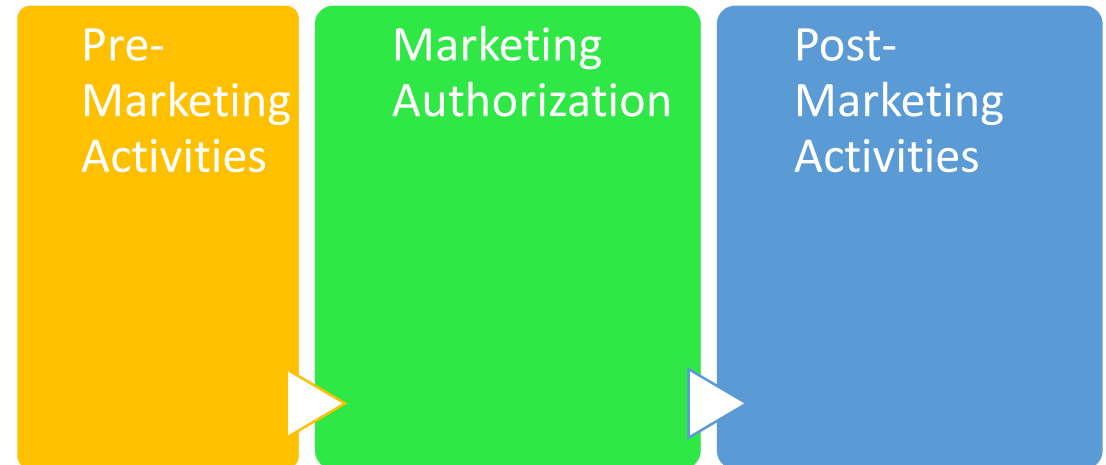
- Centralized,
- Decentralized,
- Discrete

The regulatory authority plays a critical **role** in:

- (a) ensuring the **quality, safety, efficacy/performance** of medical products,
- (b) overseeing **the supply chain** in which their **quality is ensured** until they reach the patient/consumer and
- (c) ensuring the relevance and accuracy of **product information**.

What are the critical product attributes of vaccines, medicines, and medical devices including in-vitro diagnostics ('medical products')?

- **Safety** and **Efficacy** (Performance for MeDev): tested in the pre-market period
- **Quality**: must be traceable to those of the clinical lots and be met consistently
- **Safety** and **Effectiveness** (Performance for MeDev) are monitored and updated continuously in the post-market period



WHO RSS program launched in 1997 with a new statement of “**a Vaccine of Known Good Quality**”, that adopts systems approach to NRA strengthening

WHO Vaccine Policy Statement*

- ☒ the **NRA** independently controls the quality of the vaccine in accordance with the **six specified functions** defined by WHO
- ☒ there are **no unresolved confirmed reports of quality-related problems**

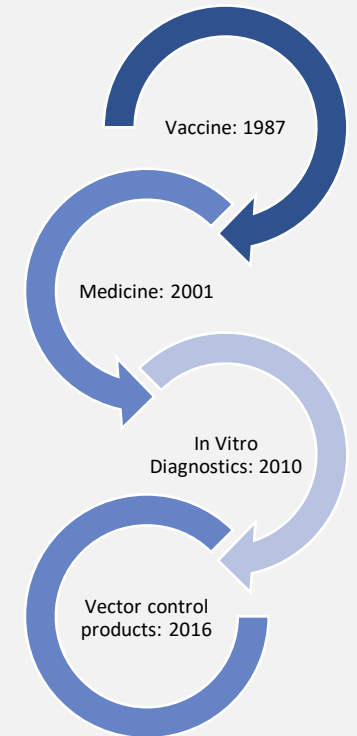
6 Critical Functions of NRA

- **A** published set of requirements for licensing
- **S**urveillance of vaccine field performance
- **S**ystem of lot release
- **U**se of laboratory when needed
- **R**egular inspections for Good Manufacturing Practice (GMP) compliance
- **E**valuation of clinical performance

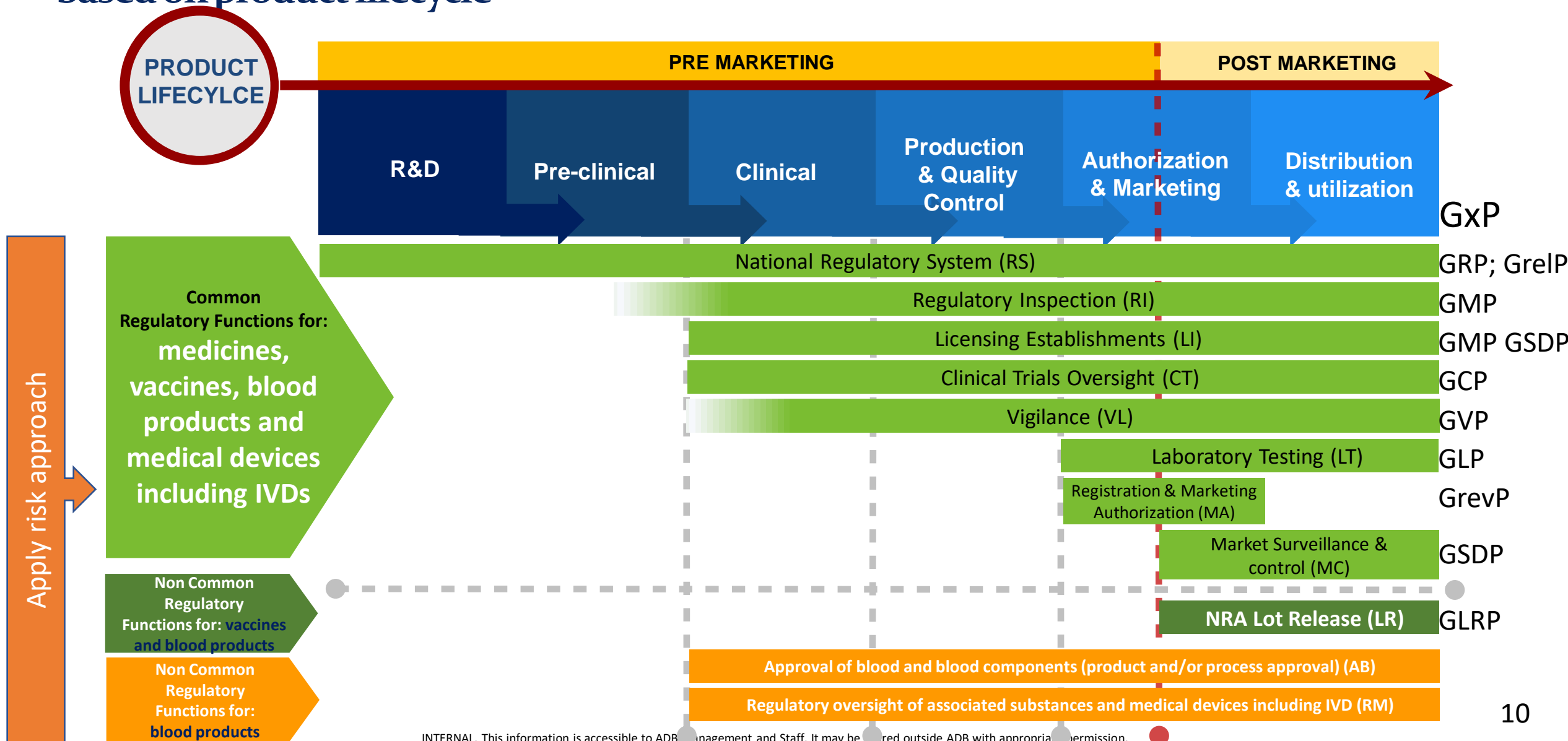
* WHO GPV (Global Programme for Vaccines and Immunization) Policy statement 1997: [source](#);

** WHO GPV Policy on 6 critical functions of NRA: [source](#)

WHO
Prequalification
Timeline by Products



WHO recommended regulatory functions for medicines, vaccines, blood products and medical devices including IVDs based on product lifecycle

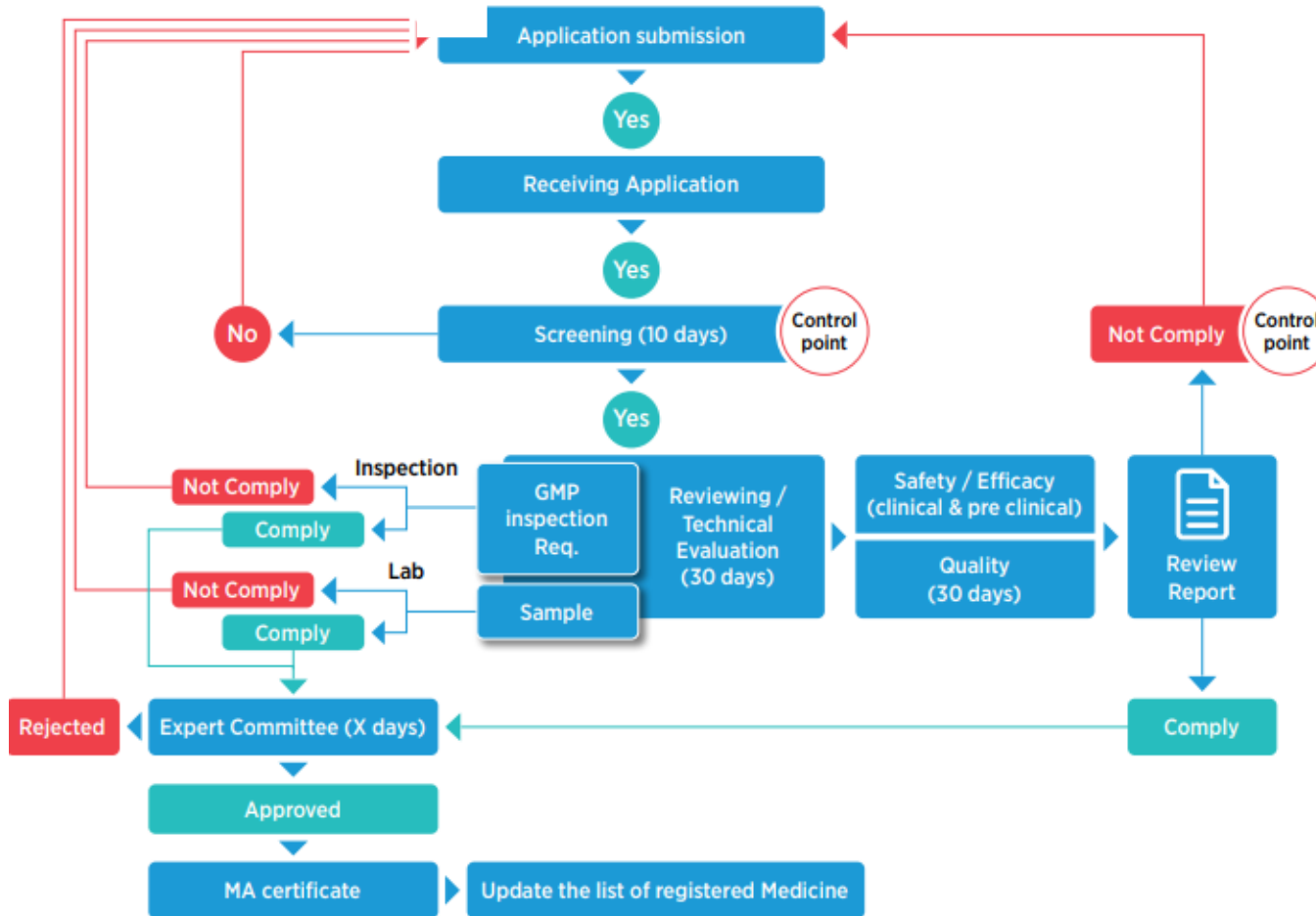


Example of Registration and Marketing Authorization (MA) process

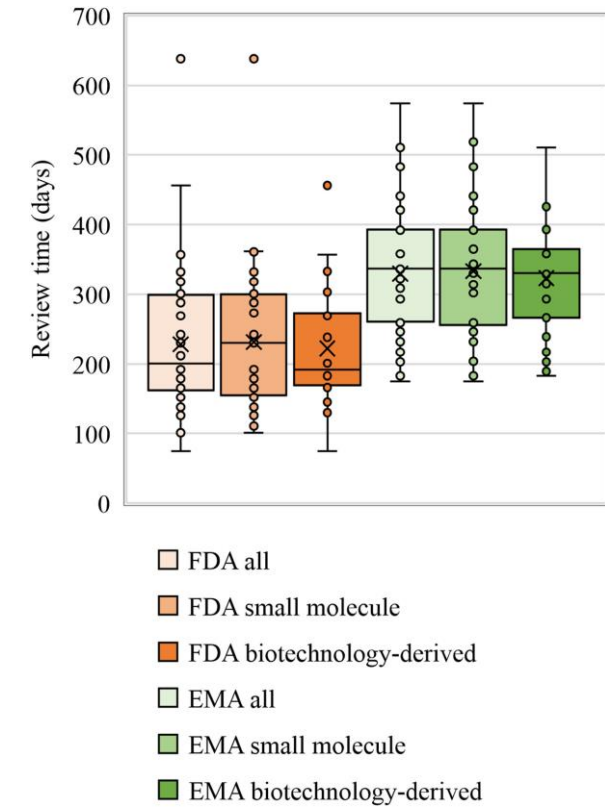
2.

Example of Registration and Marketing Authorization (MA) processes

- Characteristics of the processes and interrelationships involved in the MA



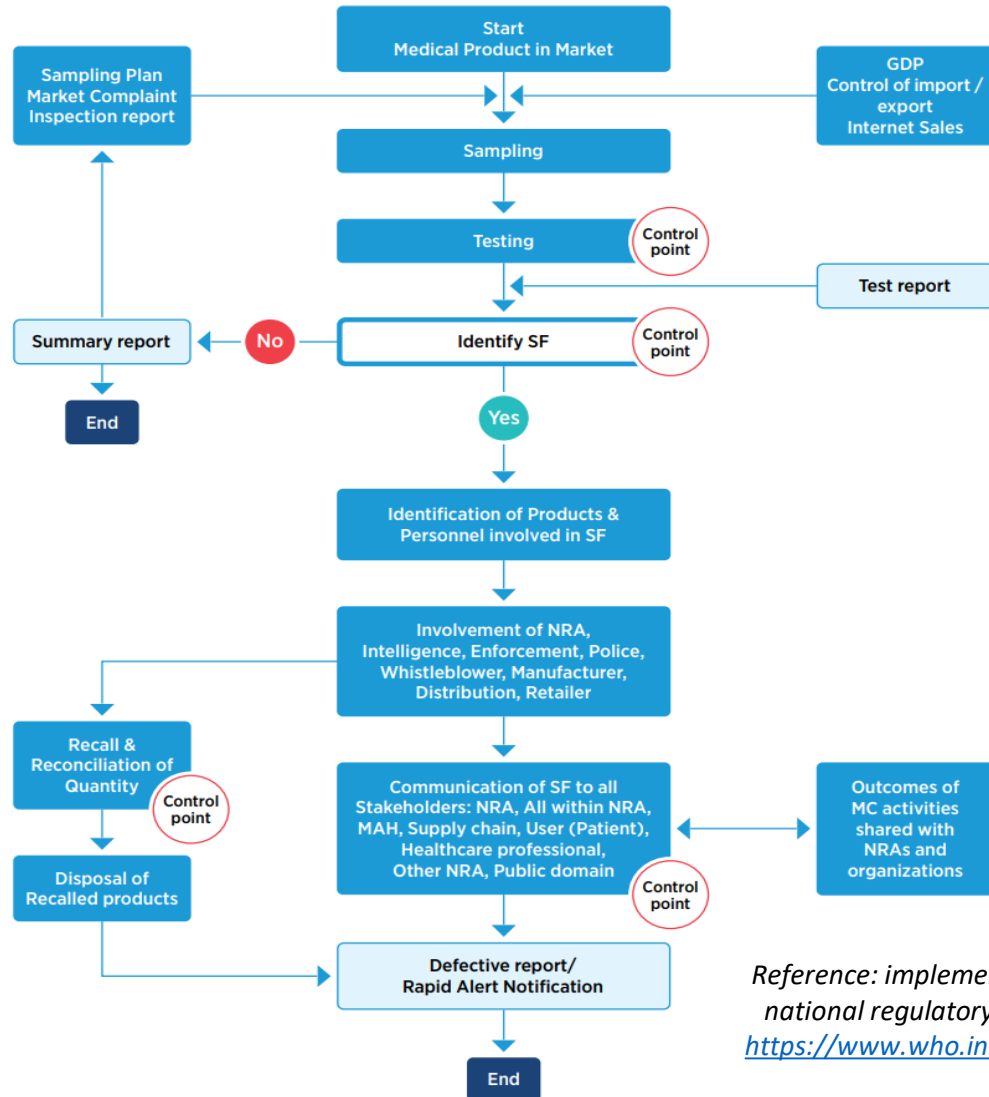
A detailed analysis of expedited regulatory review time of marketing authorization applications for new anticancer drugs in the US and EU



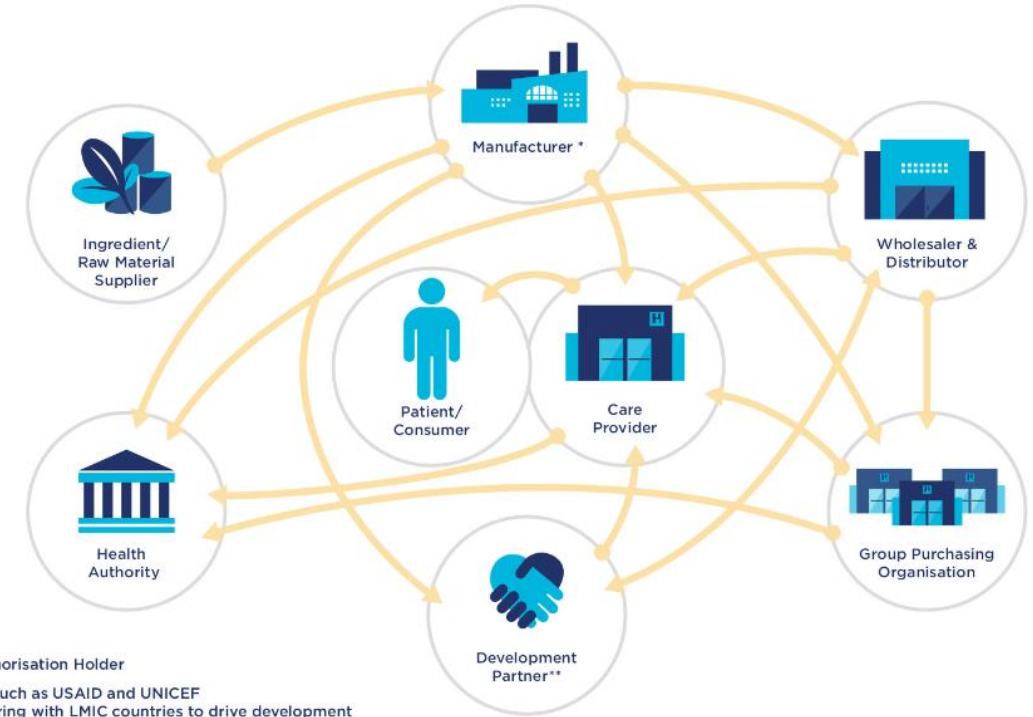
Reference: implementing quality management systems in national regulatory authorities: Examples and practices <https://www.who.int/publications/i/item/9789240022379>

Clinical Translational Sci, Volume: 15, Issue: 8, Pages: 1959-1967, First published: 13 May 2022, DOI: (10.1111/cts.13308)

Example of Marketing Surveillance and Control (MC) process



GS1 Standards and Traceability in Healthcare



Product Identifier:

Expiry Date:

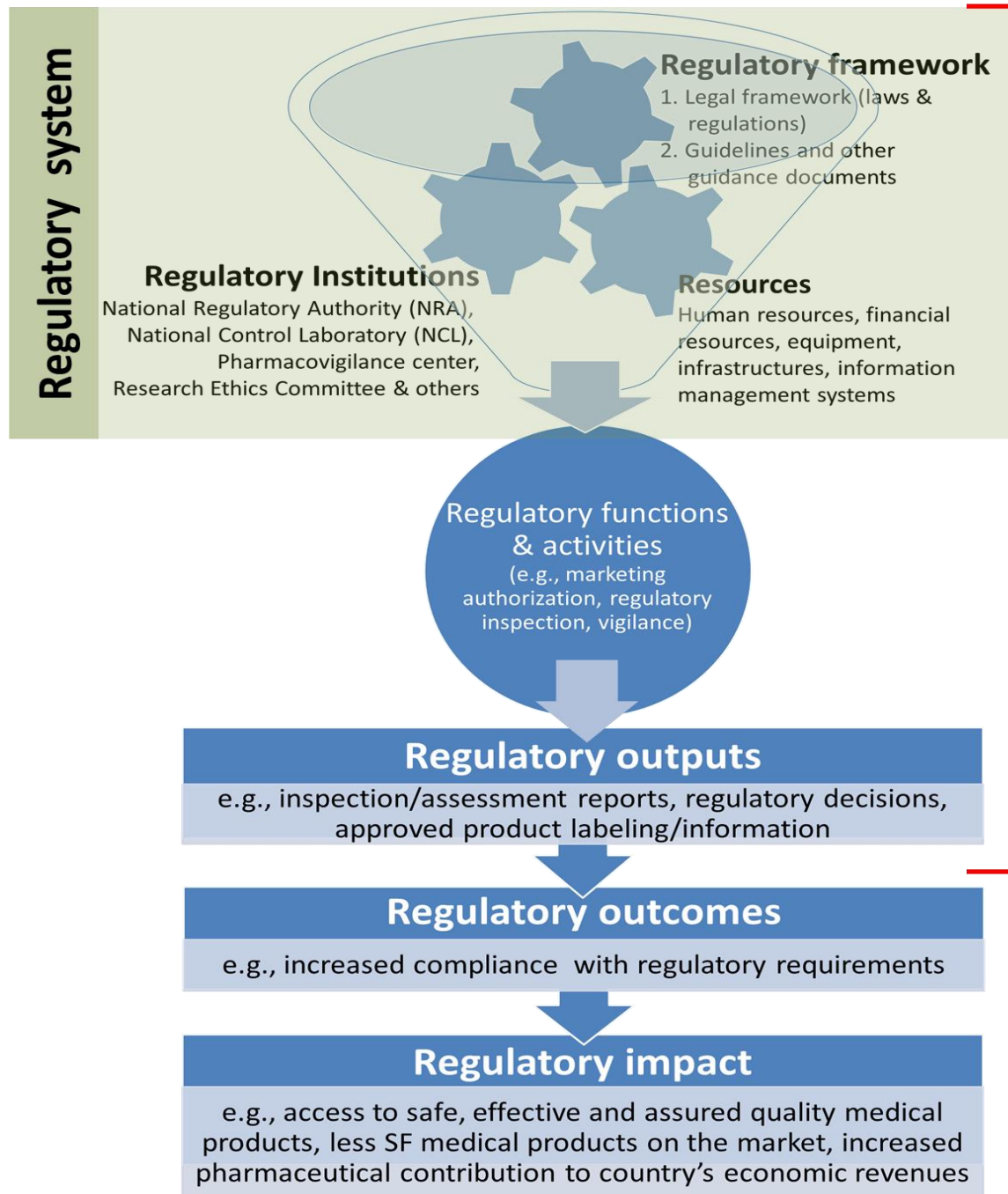
Batch Number:

Serial Number:

Reference: implementing quality management systems in national regulatory authorities: Examples and practices
<https://www.who.int/publications/i/item/9789240022379>

[GS1 Healthcare Strategy 2023-2027 | GS1](#)

**What outcomes and impact
does the NRS want to
achieve**



General concept of regulatory system

According to Good regulatory practice principals and enablers

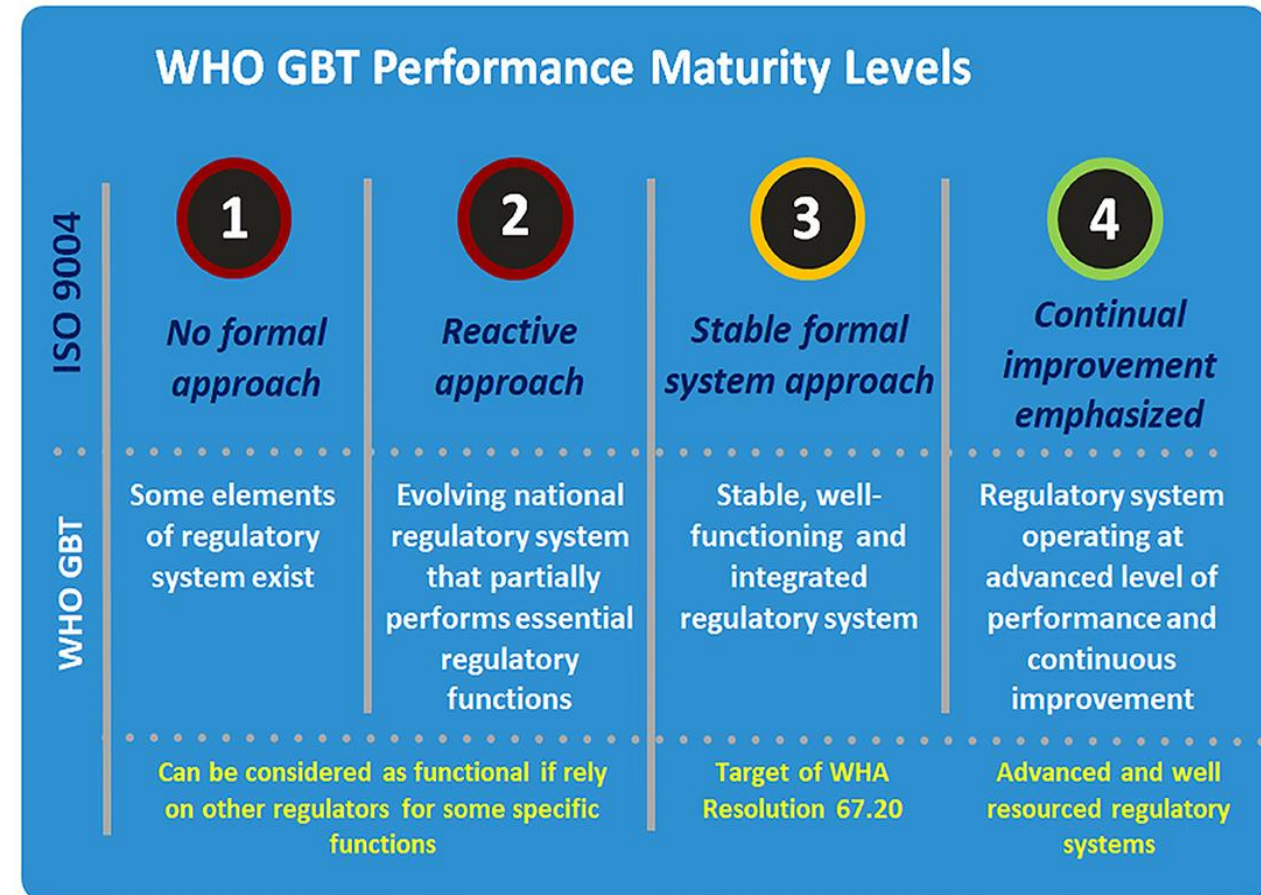
Source: *Good regulatory practices in the regulation of medical products* [9789240020900-eng.pdf \(who.int\)](#)

**What are these terms:
Benchmarking and WLA**

Global Benchmarking Tools (GBT) and concept of maturity level (ML)

GBT is a tool to objectively evaluate the regulatory system:

- ✓ **Medicines and vaccines using GBT**
- ✓ **Blood products** (including whole blood, blood component and plasma-derived products) using **GBT + blood**
- ✓ **Medical devices** (including in vitro diagnostics) using **GBT + medical devices, under revision**



- ✓ **ML3 for vaccine regulation** is an eligibility criterion for a manufacturer to apply for WHO prequalification that is intended to supply to the UN market

‘WHO Listed Authority’ replacing ‘Stringent Regulatory Authority’

A WHO Listed Authority (WLA) is a regulatory authority or a regional regulatory system which has been documented to comply with all the relevant indicators and requirements specified by WHO for the requested scope of listing based on an

An established benchmarking (GBT) + a Performance Evaluation (PE) process



First three WLAs

31st October 2023

SRA



Switzerland
Swissmedic

tWLA



Republic of Korea
MFDS

ML4 NRA



Singapore
HSA



Home / News / Landmark listing of first three countries as WHO-Listed regulatory Authorities



Landmark listing of first three countries as WHO-Listed regulatory Authorities

31 October 2023 | Departmental news | Reading time: 2 min (453 words)

The Health Sciences Authority (HSA), Singapore; the Ministry of Food and Drug Safety (MFDS), Republic of Korea; and the Swiss Agency for Therapeutic Products (Swissmedic), Switzerland are the first three countries to be listed as WHO-Listed Authorities.

A WHO-Listed Authority (WLA) is a regulatory authority or a regional regulatory system which has been documented to comply with all the indicators and requirements specified by WHO for the requested scope of listing based on an established benchmarking and performance evaluation process.

Members of the technical advisory group on WHO-Listed Authorities (TAG-WLA) met for the first time, 11 to 12 September 2023, at WHO headquarters in Geneva, Switzerland and reached a consensus to recommend the listing of HSA, MFDS and Swissmedic as WHO-Listed Authorities, after discussing the findings of the performance evaluations of these three regulatory authorities.

Media Contacts



Sarah Sheppard

World Health Organization
Telephone: +41 79 516 67 56
Email: sheppard@who.int

<https://www.who.int/news/item/31-10-2023-landmark-listing-of-first-three-countries-as-who-listed-regulatory-authorities>

33 new WLAs

20th May 2024

RRS



*European Medicines
Regulatory Network*

**EC/EMA
+30 NCAs**

SRA



*United States
of America*

US FDA

ML4 NRA



Singapore

HSA*

* MC function



<https://www.who.int/news/item/20-05-2024-largest-number-of-regulatory-agencies-for-medical-products-approved-as-who-listed-authorities>

Total WLA: 36 Regulatory Authorities and 34 Member States

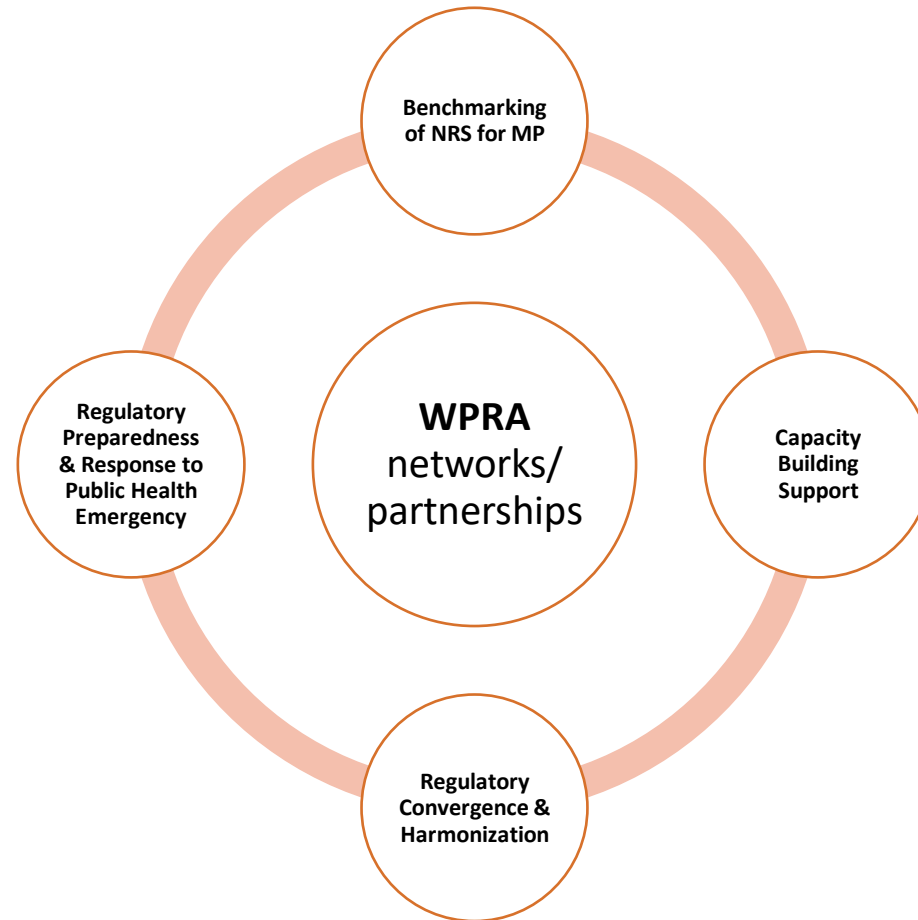
**Is there a Regional Cooperation
& Collaboration Mechanism
among NRAs and Partners?**

Medicine & Vaccine Production, National Control Laboratories in the Western Pacific

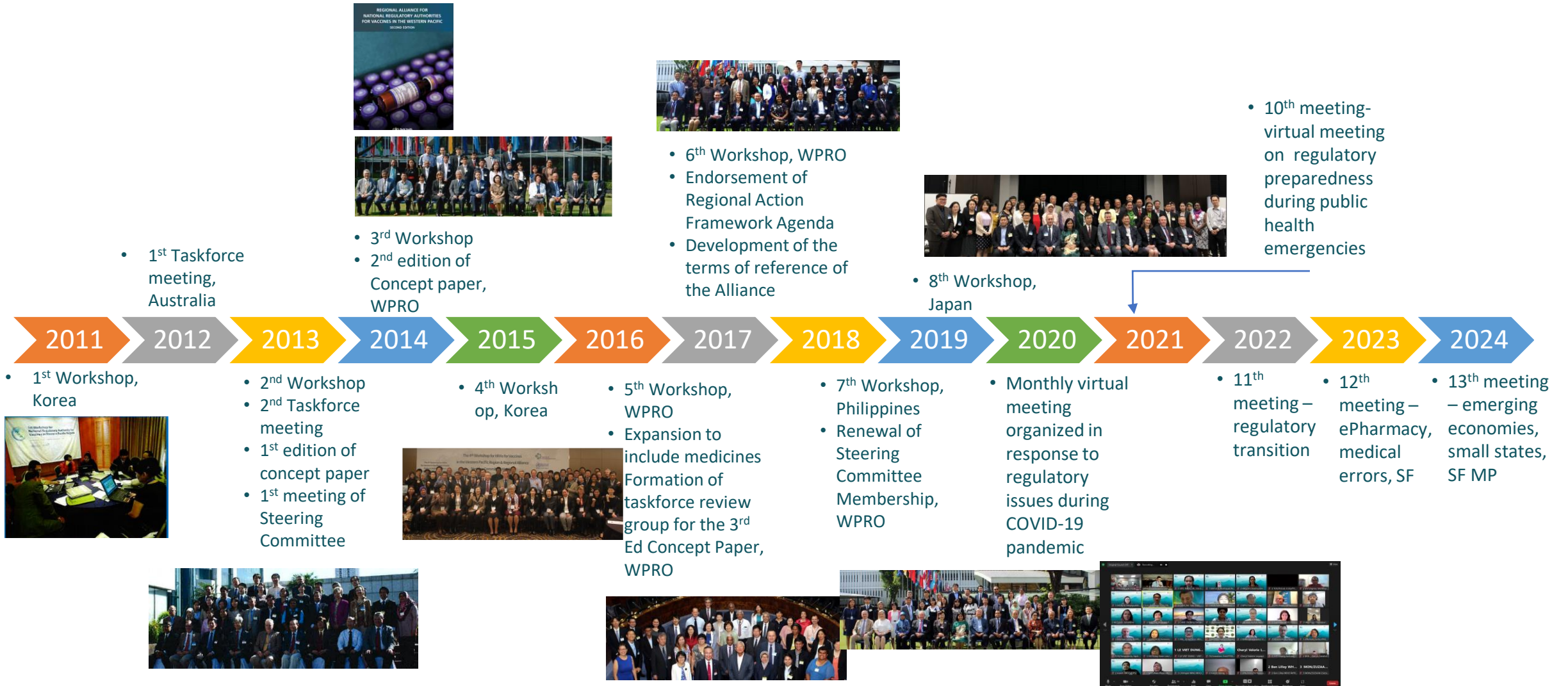
Countries	Medicine Production	Vaccine Production	Medicine NCL	Vaccine NCL	Vaccine Lot Release System	Risk-based LR
Australia	Yes	Yes	Yes	Yes	Yes	Yes
Brunei Darussalam	Yes		Yes			
Cambodia	Yes		Yes			
China	Yes	Yes	Yes	Yes	Yes	Yes
Japan	Yes	Yes	Yes	Yes	Yes	Yes
Lao PDR	Yes		Yes			
Malaysia	Yes	Yes	Yes	Developing	Yes	Yes
Mongolia	Yes		Yes			
New Zealand	Yes		Yes			
Papua New Guinea	Yes		Yes			
Philippines	Yes		Yes	Developing	YES (SLP review)	
Republic of Korea	Yes	Yes	Yes	Yes	Yes	Yes
Singapore	Yes		Yes			
Viet Nam	Yes	Yes	Yes	Yes	Yes	
Pacific Island Countries	Medical Oxygen*			No	No	

- All countries listed above have established national medicines control laboratories (except the Pacific Island Countries), as of Oct 2024
- New Zealand: Has National Medicine QA Laboratory, no vaccine laboratory but has an agreement with TGA for vaccine quality testing
- Philippines and Malaysia: Existence of legal and regulatory provisions for lot release.

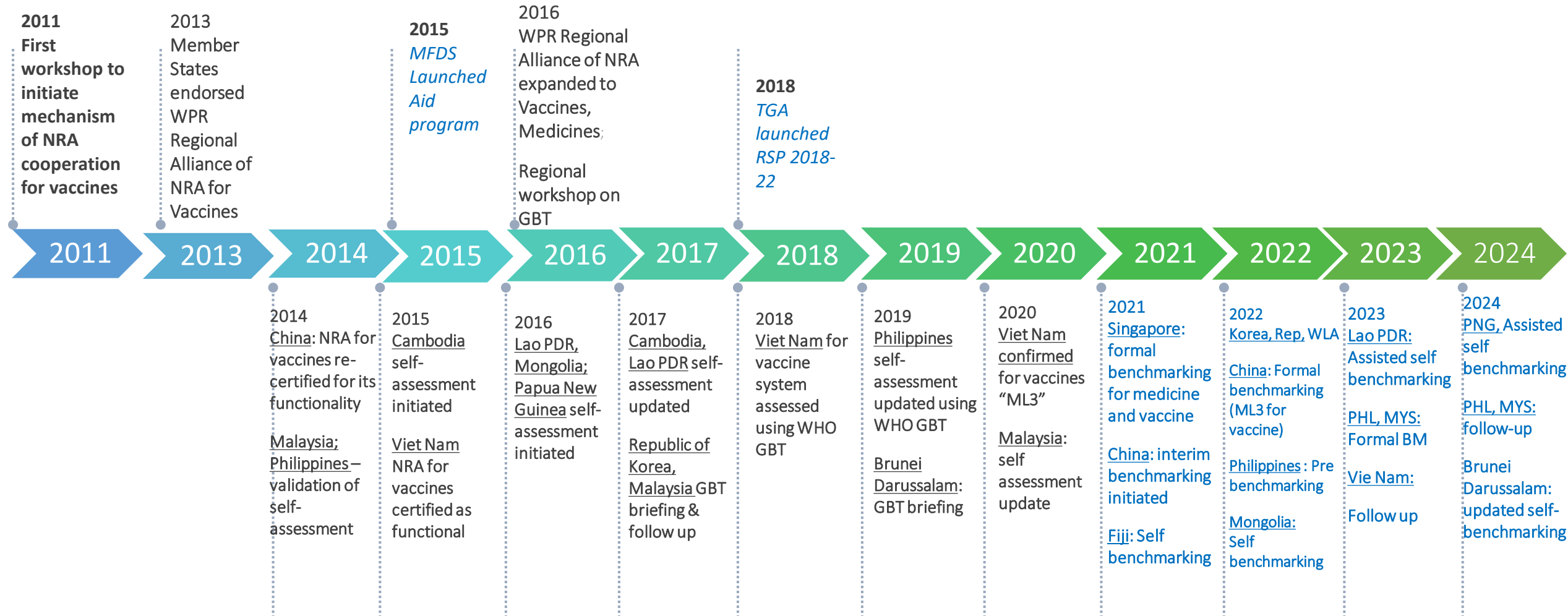
Harnessing Regulatory System Strengthening, Cooperation, Convergence and Harmonization through Western Pacific Regional Alliance of NRAs for Medical Products (WPRA)



Regulatory Cooperation/Collaboration through WPRA



Key milestones of NRS benchmarking in WHO Western Pacific Region



Achievements of regulatory systems in the Western Pacific

Republic of Korea and Singapore:

- Achieved WLA status in 2023-2024; **Rep of Korea** – Vaccines & Medicines; **Singapore** - Medicines

Viet Nam and China:

- Maintained ML3 for **vaccine** regulation after re-benchmarking in 2018 and 2022, respectively

Philippines and Malaysia:

- Hosted formal WHO benchmarking in 2023: **Philippine** – Medicines; **Malaysia** – Vaccines and Medicines

Brunei Darussalam, Fiji, Mongolia, Lao PDR, Papua New Guinea:

- Accomplished self-benchmarking; **Scope** - Medicines

Australia, Japan:

- Transitioning from SRA to WLA: The evaluation process ongoing for both Vaccines and Medicines

What are the current efforts to close equity gaps in improving access to vaccines through local production in low-resource settings

mRNA TTP

WHO mRNA TTP - R&D consortia in SEAR/WPR				
	HFMD	Tx HPV	Dengue	P. Vivax
Members	Hillemann Labs, NUS, A*STAR, Chula Polysci	Chula, A*STAR, Novartis , Novartis , Novartis , Novartis	NI, Duke-NUS, Chula, Hillemann, Novartis , Novartis	Mendelot, Chula, Bunnell, Novartis , Novartis , Novartis
Antigens	EV-A71 8k, VP1, 2D ⁺ - C/4-6d, C/4-6d and C/4-6d	Subunit HPV 35/18 E6, E7, E7, L2	Subunit prM/E, consensus NS5	Prv2S, Prv2GP, Prv2G2
Main achievements	TTP, CDP developed Antigen Design in VLP-expression	TTP, CDP developed Antigen Design. Preclinical evaluation in mice	TTP, CDP developed Antigen Design. Preclinical evaluation in mice	TTP, CDP developed Antigen Design. Preclinical evaluation in mice
Planned	2024 - preclinical evaluation of EV-mRNA vaccines in mice 2025 - Phase 1	2024 - Select candidate for Phase 1 2025 - Phase 1	2024-2025 - Preclinical evaluation in mice and NHP 2026 - Phase 1	2024 - Preclinical evaluation in NHP 2026 - Phase 1 (2026)

Bangkok scientific consultation (Oct 23) and [Singapore meeting \(Mar 24\)](#) have led to the establishment of NSD consortia

©2004, The copyright is property of HR Management, Inc. All rights reserved. All other trademarks are the property of their respective owners.

Challenges in Regulatory Oversight of mRNA Vaccine Local Production in Bangladesh and Viet Nam

- Developing guidelines for clinical trials
- Developing guidelines for chemistry, manufacturing and control (CMC), nonclinical and clinical evaluation
- Establishing independent quality control testing
- Post-market surveillance and pharmacovigilance
- Regulatory oversight of good manufacturing practices
- Aligning local regulatory standards with international guidelines

Source: WHO. A case study on the ecosystem for local production of pharmaceuticals, vaccines and biologics. The Bangladesh context (<http://file.unhcr.org/refworld/docid/509d61c2.html>). Accessed 17 October 2018.

©2009, The copyright is hereby is not transferred without the written consent of the copyright owner.

2

GTH-B

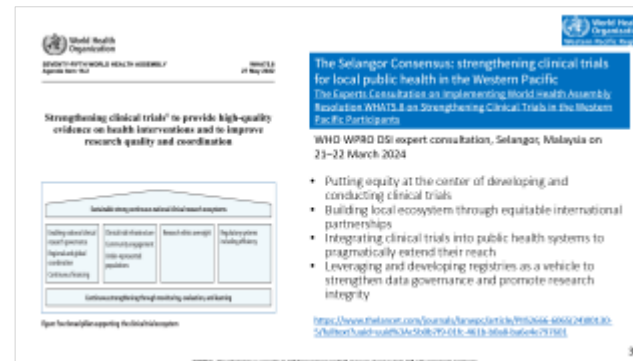
WHO Global Training Hub for Biomanufacturing (GTH-B)



100

© 2004 Blackwell Publishing Ltd, *Journal of Internal Medicine* 255: 105–112

CT ecosystem



NOTES: The information is provided to all management and staff. It may be shared with other employees within the organization.

3

WHO mRNA TTP - R&D consortia in SEAR/WPR

	HFMD	Tx HPV	Dengue	P. Vivax
Members	Hilleman Labs, NUS, A*STAR, Chula, Polyvac	Chula, A*STAR, Incepta , Afrigen, NVI	IVI, Duke-NUS, Chula, Hilleman, Bio Farma , Incepta	Mahidol, Chula, Burnet Inst., Eijkman Inst., Bio Farma
Antigens	EV-A71 (P1, VP1, 3CD) + CV-A16, CV-A6 and CV-A10	Bivalent HPV 16/18 E2, E6, E7, L1	Tetravalent prME + consensus NS1	Pvs25, PvCSP, Pvs230
Main achievements	TPP, CDP developed Antigen Design In vitro expression	TPP, CDP developed Antigen Design Preclinical evaluation in mice	TPP, CDP developed Antigen Design Preclinical evaluation in mice	TPP, CDP developed Antigen Design Preclinical evaluation in mice
Planned	2024 - preclinical evaluation of EV-A71 mRNA vaccines in mice 2025 - Phase 1	2024 – Select candidate for Phase 1 2025 – Phase 1	2024-2025 – Preclinical evaluation in mice and NHP 2026 - Phase 1	2024 – Preclinical evaluation in NHP 2026 – Phase 1 CHMI

Bangkok scientific consultation (Oct 23) and [Singapore meeting \(Mar 24\)](#) have led to the establishment of R&D consortia!

Challenges in Regulatory Oversight of **mRNA Vaccine** Local Production in Bangladesh and Viet Nam

- Developing guidelines for clinical trials
- Developing guidelines for chemistry, manufacturing and control (CMC), nonclinical and clinical evaluation
- Establishing independent quality control testing
- Post-market surveillance and pharmacovigilance
- Regulatory oversight of good manufacturing practices
- Aligning local regulatory standards with international guidelines

Source: WHO. A case study on the ecosystem for local production of pharmaceuticals, vaccines and biologicals: The Bangladesh context
<https://iris.who.int/bitstream/handle/10665/376686/9789240092808-eng.pdf?sequence=1>

WHO Global Training Hub for Biomanufacturing (GTH-B)



Credit: MOHW, Republic of Korea

Strengthening clinical trials¹ to provide high-quality evidence on health interventions and to improve research quality and coordination

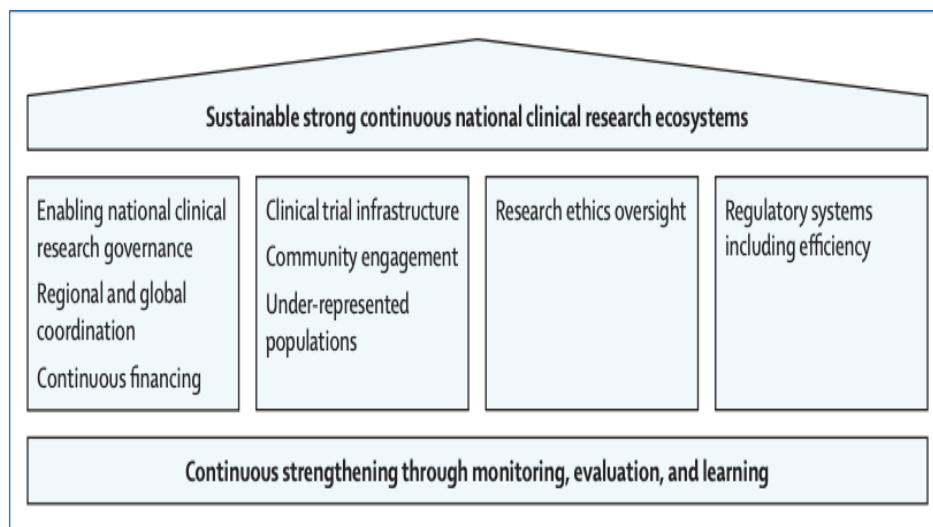


Figure: Four broad pillars supporting the clinical trial ecosystem

The Selangor Consensus: strengthening clinical trials for local public health in the Western Pacific

The Experts Consultation on Implementing World Health Assembly Resolution WHA75.8 on Strengthening Clinical Trials in the Western Pacific Participants

WHO WPRO DSI expert consultation, Selangor, Malaysia on 21–22 March 2024

- Putting equity at the center of developing and conducting clinical trials
- Building local ecosystem through equitable international partnerships
- Integrating clinical trials into public health systems to pragmatically extend their reach
- Leveraging and developing registries as a vehicle to strengthen data governance and promote research integrity

[https://www.thelancet.com/journals/lanwpc/article/PIIS2666-6065\(24\)00130-5/fulltext?uuid=uuid%3Ac5b0b7f9-01fc-461b-b0a8-ba6e4e797601](https://www.thelancet.com/journals/lanwpc/article/PIIS2666-6065(24)00130-5/fulltext?uuid=uuid%3Ac5b0b7f9-01fc-461b-b0a8-ba6e4e797601)

Key takeaways

- Strengthening regulatory systems for medicines, vaccines, and medical devices including in vitro diagnostics ensures that these products are **safe**, **effective**, and **of assured quality**.
- Strengthening regulatory systems also promotes **innovation**, and ensures **regulatory predictability** with enhanced transparency, making vaccines and other medical products more **accessible** and **affordable**.
- By aligning with **global standards**, it also builds trust in health systems and facilitates global cooperation in product distribution.
- Efforts to close equity gaps in access to medical products in low-resource settings focus on **local production** through technology transfer and capacity building, like the WHO's mRNA vaccine hub, WHO Global Training Hub for Biomanufacturing, and strengthening clinical trials.
- **Moving forward, partnerships** between governments, international organizations, and the private sector will ensure resources, technical support, and infrastructure to boost local manufacturing and appropriate oversight by competent regulatory authorities to ensure quality.

SECURE WEBINAR 18

BLUEPRINTS TO BREAKTHROUGHS: ENHANCING VACCINE MANUFACTURING ECOSYSTEMS IN DMCS

24 OCTOBER 2024
2:00-3:30 PM Manila time

Vaccines save lives

