

The WHO PQ Programme and its Updated Role after the Outbreaks of Ebola and Zika Virus

Robyn Meurant

Dept of Essential Medicines and Health Products

Prequalification Team – Diagnostics Assessment



**World Health
Organization**

The evolution of a new role for the PQ Programme

- 2014 Ebola virus crisis highlighted the need for an emergency assessment procedure for vaccines, medicines and IVDs
- The procedure would need to be different from PQ in four major ways
 - Faster assessment process
 - Decision based on minimal evidence of safety and performance, given that few products would be at a mature stage in the development cycle
 - Rolling submissions acceptable as more data (evidence) is collected by the manufacturer
 - Need to be flexible

- WHO Prequalification Programme already had experience with other assessment mechanisms
 - Lab evaluation only
 - Expert Review Panel for innovative products
 - QMS and limited dossier
- Emergency Use Assessment and Listing (EUAL) Procedure
 - To apply when there is a Public Health Emergency of International Concern
 - A procedure that can be adapted to the circumstances of the emergency
 - Based on good regulatory practice

- The Listing provides guidance including product-specific technical information to
 - UN procurement agencies,
 - WHO product utilization advisory committees,
 - national regulatory authorities (NRAs),
 - and others involved in efforts to control an epidemic.

The EUAL Procedure

- Where possible, the EUAL for IVDs procedure consists of:
 - A desktop review of selected manufacturing and QMS documentation
 - A review of any existing documentary evidence of safety and performance
 - A limited laboratory evaluation of relevant performance and operational characteristics of the product
- Possibility to abbreviate any of the steps if evidence of sufficient scrutiny by a stringent regulatory authority

EUAL: The Ebola Experience

- Few manufacturers had started to develop NAT and antigen detection assays
- Most had very little technical documentation
- Some had rudimentary QMS (ISO 13485) but not manufacturing capacity
- Clinical blood samples were not available for validation
 - restriction in transportation of clinical samples outside W Africa
- Testing required BSL-4 laboratories
- Therefore the manufacturers had minimal analytical and clinical performance data



Ebola EUAL and International Collaboration

- International support in the provision of EVD IVD expertise for Dossier and QMS review
 - Dossier requirements and review
 - Adoption of US FDA requirements for dossier (provided alignment and harmonised approach)
 - USA, Belgium, Australia, Switzerland
- International Support for WHO based Lab and Field evaluations
 - BSL4 lab and LOD studies (Bernhard Nocht Institute, Germany)
 - Sierra Leone clinical performance study (Nigerian and PHE Labs)



Ebola EUAL : Making a Difference

- WHO first listed a PCR, followed by a rapid antigen assay
- PCRs were able to be used in the internationally supported mobile laboratories
- Use of RDTs has proven sustainable



EUAL and the Zika Experience

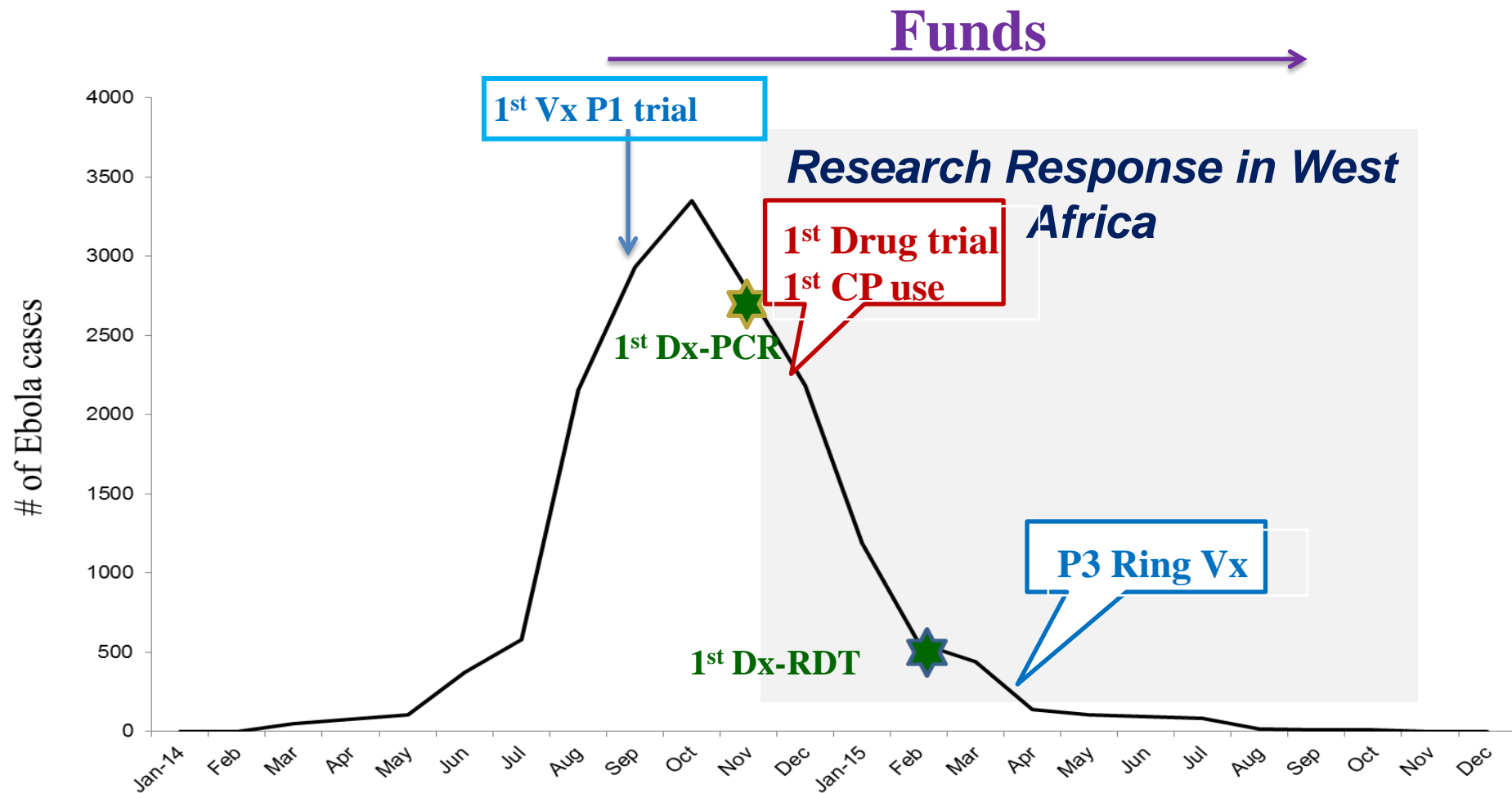
- Lessons learnt

- Optimise international cooperation 
- Agree and publish requirements 
- Ensure requirements aligned 
- Abbreviate where possible 
- Alignment /cooperation with other WHO/PAHO led initiatives 
 - Input into testing strategies 
 - WHO reference materials 
 - TPP development 

EUAL for Zika virus

- Challenges
 - Access to collaborating centres
 - Products validated in Europe (Flavivirus-naive populations)
 - WHO resources
 - Changing evolution of the disease
 - Outbreaks in other parts of the world
 - Different lineage

WHO Research Response EBOLA



Response to the Ebola outbreak

WHO Response to Outbreaks

- Global strategy for epidemic preparedness:
 - R&D Blueprint for Action to Prevent Epidemics
- WHO coordination for
 - Improved preparedness
 - Rapid response
- Ratified at the 68th WHA2015 and G7 Health Ministers, 2015

Development of the Blueprint

- Building on the efforts of others
- A collaborative effort with Member States and other relevant stakeholders
- Consultations
- Scientific Advisory Group



Blueprint activities of note

- Assessing epidemic threat and defining priority pathogens
 - Methodologies
 - Monitoring
- Outlining funding processes
- Building an effective coordination framework based on global cooperation
- Developing R&D roadmaps
 - Priority pathogens
 - Technology platforms

Blueprint activities of note

- .Facilitate open access to research resources
 - Publication of CT protocols for blueprint priority diseases
 - Develop a concept of biobanking linked by an information sharing platform
 - Facilitate discussions on best practices for testing vaccines, drugs and diagnostics
- Efforts to strengthen national regulatory and ethics bodies
- Connecting the Blueprint with other international efforts



Thank you