# 15<sup>th</sup> DCVMN International AGM Vaccines, Our Shared Responsibility

(October 27-29, 2014)

" Partnerships for Vaccine Development "

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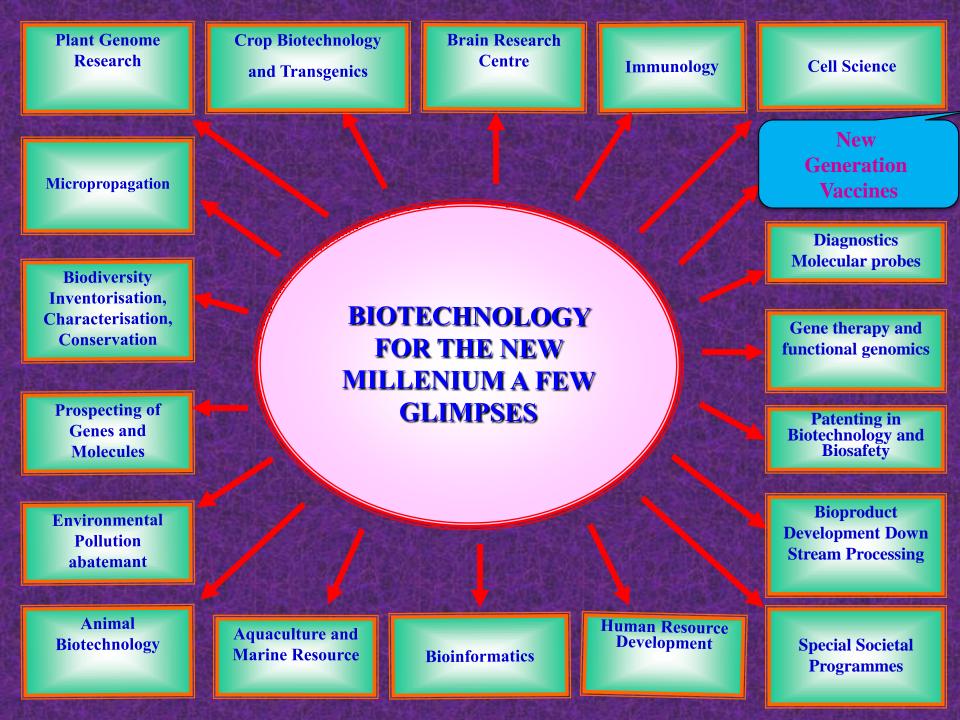
Ministry of Science & Technology

Government of India, New Delhi



## **OUR VISION**

"Attaining new heights in biotechnology research, shaping biotechnology into a premier precision tool of the future for creation of wealth and ensuring social justice - specially for the welfare of the poor".



## **Advances in Vaccinology**

- Vaccines are the fastest growing biotech area with the entire pharma/biological sector and India is considered a global hub in this sector.
- To design better and more effective vaccines.

#### **Need Newer Techniques to design novel vaccines**

 Genomics, proteomics, bioinformatics, computational tools, reverse vaccinology, microarray technology, signature tagged mutagenesis and *Invivo* expression technology

## Vaccine Development and Demand

- Till 1980 vaccine requirements for immunization programme has been made through the public sector vaccine manufacturers.
- Due to increase in demand of vaccines, the private sector entered in the vaccine manufacturing business to produce new and improved vaccines.
- High Demand GAVI supported by multiple donor, purchase through UNICEF for the entire developing world.
- India itself is a large consumer for its immunization programme.
- The global vaccine market expected to reach about \$1 billion by 2015.
- Expected product innovations and global recognition of the benefits of immunization with new and improved prophylactic, therapeutic and adult vaccines.

#### Major vaccines produced in India

- DPT,
- DT,
- Tetanus Toxoid,
- BCG,
- Oral Polio (formulation)
- MMR
- Penta
- Rubella,
- Hepatitis-B,
- Rabies
- Typhoid etc.

Now Rotaviral Diarrhoea Vaccine : ROTAVAC - BBIL

SII & others

The VISION 2025 of Department of Biotechnology, Govt. of India envisages

#### No one should suffer from Vaccine Preventable Diseases

- To make available of affordable, safe & effective vaccines for Children, Adolescent, Adults and Geriatric population.
- To accomplish the strategy comprises of strengthening:
  - ☐ Fundamental tools for vaccine development (Basic and applied R & D)
  - □ Product Development, Manufacturing, Regulation & Marketing capabilities
  - Human Resource
  - Effective partnerships with National/International Scientists and Organizations.

#### **Collaborative Vaccine Development**

- Vaccine development, clinical trial and commercialization is very complex and requires many steps with involvement of multipartners.
- The partners will bring prospective, resources and unique skills
- Academic institutions will develop candidate vaccines and conduct clinical trials.
- Industry provides expertise in product development, manufacturing and commercial launching.
- The Government will facilitate through financial support and regulatory clearances.
- Most currently available as well as those in the developmental stage resulted from successful collaborations between partners from academic institutions, government, private sector including support from global organizations and non-governmental organizations.

#### Vaccine Research and Development Programme of DBT

- The Department is implementing the programme since 1987-88 through:
- Technology Mission on Immunization Development of new and improved vaccines and production of some of the EPI vaccines (polio, measles etc.)

  - BIBCOL (IPV, Moscow)IVCOL (PMSV, France)
- Indo US Vaccine Action Programme a model bilateral programme under implementation for the past 27 years - "Value Added Programme"
- Medical Biotechnology Task Force
- National Jai Vigyan Mission programme for S&T on generation of new and improved Vaccines
- Vaccine Grand Challenge Programme A new governance model
- The VGCP is being implemented with an overall objective to accelerate development of candidate vaccines for which earlier leads are available and to take them through pre-clinical and clinical development and commercialization.
- Potential candidate vaccines developed Rotavirus, Cholera, Typhoid, Rabies (DNA based), Malaria. Dengue, Tuberculosis, Japanese Encephalitis, HIV, chickenguniya etc.

#### Key features envisaged under VGCP for granting mechanisms:

- Preliminary grant for nascent ideas followed by full grants for those that show promise.
- Planning grant for proposal writing as a team with consultant support.
- Centre of Excellence and programme support as per existing DBT schemes but through the vaccine grand challenge apex committee.
- Research strengthening grants for retaining key team members on contract hiring basis, extendable every 5 years.
- Engagement of consultants for problem solving as per Government of India norms.
- Public Private Partnership projects strictly according to SBIRI and BIPP and pharma fund rules.
- Cooperate grants, where R&D is jointly managed by investigators and by a professional team engaged by the programme on a part time basis.
- Subcontracting of work to not for profit organization, public institutes and industry through an open, competitive process.
- Consortium projects with other ministries or agencies in the country and internationally.

## **Current Status of DBT Vaccine Projects**

<b>&gt;</b>	Rotaviral vaccine development (116E)				
	0	Developed first indigenous rotavirus vaccine called ROTAVAC® - \$1 per dose.			
		Under a unique social innovation public private partnership model.			
		Recently approved to pilot introduction of the vaccine in EPI programme of Govt. of India.			
<b>&gt;</b>	Malaria vaccine development				
	00	Phase-I completed Established MVDP (DBT, EMVI, MVI, Bill & Melinda Gates Foundation)			
	De	Dengue vaccine development			
	000	Tetravalent vaccine against DENV-1 to 4] - ICGEB, New Delhi International Vaccine Agency - GlobeVac Technical Consultation – NIH			

Cholera vaccine development					
	□ Phase III				
>	JE vaccine development				
	☐ Transferred to Panacea Biotech- due to various reasons not progressed further.				
	Typhoid vaccine development				
	□ Transferred to USV Ltd. □ Efforts made to make V <sub>i</sub> polysaccaride vaccine (THSTI-BBIL)				
	Rabies vaccine development				
	□ Animal studies completed □ Human studies not pursued				
	Chickengunya -				
	Immunological studies ☐ ICGEB, AIIMS, New Delhi ☐ Emory Vaccine Centre				

#### Effective Global Partnership Rotaviral Diarrhoea Vaccine Development

Indian Federal Government DBT / ICMR Academic Institutions

AIIMS, New Delhi-CDC, Atlanta ISc., Bangalore-Stanford University

NGO SAS, New Delhi

Rotaviral Diarrhoea Vaccine Candidates [116E and I321]

US Federal Government NIH / NIAID

Industry
BBIL, Hyderabad

Global Organizations
PATH

#### Low-Cost Rotavirus Vaccine



#### Developed in partnership between



















Bharat Biotech puts the cost as under Rs. 54 a dose for children.
Affordable health care at its best!

#### Example of effective global partnership Case Study-II: Malaria Vaccine Development

Indian Federal Government DBT, ICMR

#### **MVDP**

Independent Society

**Academic Institutions** 

ICGEB and MRC, New Delhi

### Malaria Vaccine Candidate

[MSP1<sub>19</sub> and P.vivax duffy binding]

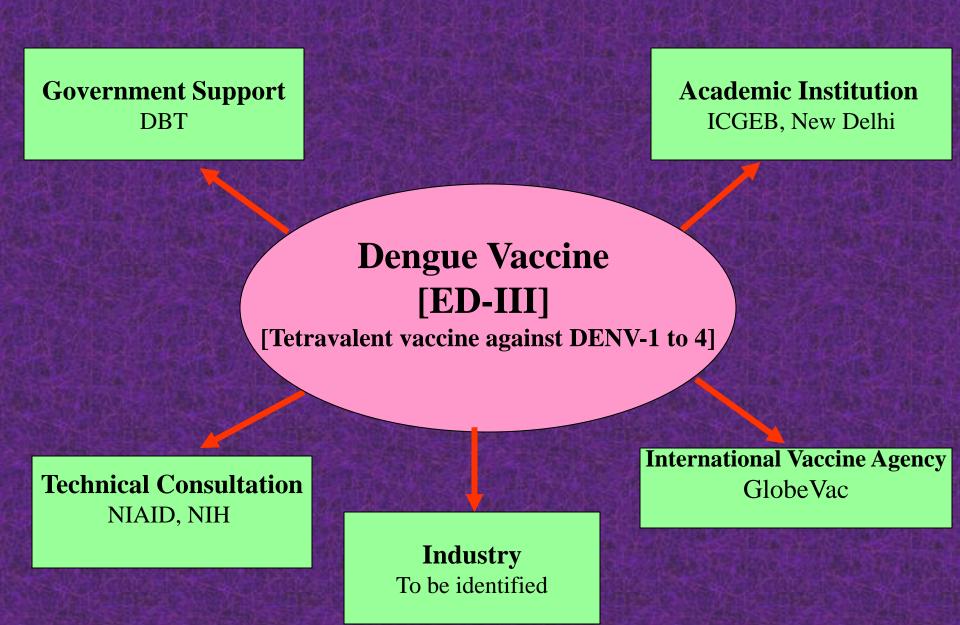
US Federal Government NIH, NIAID

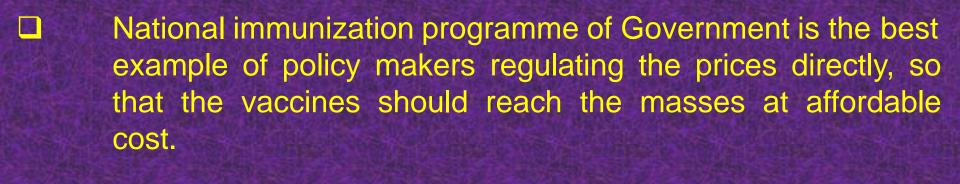
Industry

BBIL, Hyderabad

Global Organizations
PATH, MVI,
EMVI, Bill & Melinda Gates

### **Dengue Vaccine Development**





- Government has to look at various options to make the vaccines affordable.
- For example **Polio Vaccine** was made available to masses at negligible price through the public programme.
- Without compromising the quality of vaccine, we have to work towards achieving the affordability, healthy competition is a necessity for the companies and at the same time the Government too has social responsibility.

Source: Biospectrum (edition February, 2013) statement given by Dr.T.S.Rao, Adviser, DBT

#### INDUSTRIAL PROMOTION AND DEVELOPMENT

- Major policy goal to promote R&D in SME's and to provide enabling mechanism to build in-house company technology capabilities
- Continuation and expansion of Small Business Innovation Research Initiative SBIRI
- Public partnership with large scale companies encouraged and supported in areas vital to the national development from scientific, economic or social perspective and development of technologies and products.
- Establishment of incubators by cosnortia of small and medium enterprises: Biotechnology Industry Research Assistance Council (BIRAC) for monitoring, supporting and nurturing R&D in small and medium biotechnology companies.
- Biotech clusters: Institutions, parks, incubators with large space for new start-ups NCR, Bangaluru, Mohali, Kolkata, Pune.

#### **Challenges**

- New and improved vaccines need to be developed for a variety of infections of public health importance against which no effective preventive intervention measures are available or practical.
- A new paradigm needs to be established among all stake holders of immunization this includes research institutions, industrial partners, funding agencies in public-private partnership mode including global partners.
- Since vaccine R&D is an expensive and high risk enterprise. Normally it takes more than 10-15 years to bring a vaccine from research to commercialization with an approximate cost of US\$200-500 million per vaccine.
- The uncertainly of research outcomes makes the pipeline necessity with a portfolio of vaccine candidates for each of the targeted diseases.
- The prospects of new formulation technologies specially for new conjugate vaccines and production under GMP conditions revolutionized production of international standard quality vaccines.
- Not having effective vaccine adjuvants Need to establish Vaccine Adjuvant Centre for new and novel adjuvants

#### Major hurdles faced by vaccine industry

- Technological capacity and access to know-how
- Lack of generic pathway for vaccines
- High capital investment in manufacturing infrastructure with lack of demand
- Gap in the need and accessibility of vaccines
- Need to add new vaccines in expanded program in immunization (EPI)
- High cost of R&D, long and complex clinical trials result in longer time to licensure
- Entry barriers to emerging suppliers in competition

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Global	173,388
Korea	5,634
China	8,276
Taiwan	3,672
India	5,496
Thailand	1,567
	(source : ClinicalTrials.gov)

(Published in : Biospectrum – Volume 12)

## Opportunities and Challenges of International Cooperation in S&T with development of Vaccines and Pharmaceuticals: The DBT Experience

#### **Opportunities**

- Model for national programmes
- Institutional strengthening & Capacity building
- Access to international networks
- Frontier research in areas of mutual interest
- PPP with international partners
- Develop products/processes: global standards

#### **Challenges**

- Harmonization with national/regional priority areas – avoiding duplication of work
- Clinical trial issues (SC order) & adoption of global best practices
- Increased administrative time & effort review, IP, agreements etc
- Collaboration in strength to strength; not just transfer of biological material

## Translational Health Science & Technology Institute (THSTI)

Vaccine & Infectious Disease Research Centre

Pediatric Biology Centre

Centre for Biodesign & Diagnostics

Centre for Human Microbial Ecology

Policy Centre for Biomedical Research

Drug Discovery Research Centre

> Population Science Partnership Centre

Clinical Development
Services Agency

Intramural Centers

**Intl.Centres (USA)** 

IAVI – HIV Pre Term Birth Extramural Centers

Partnership

Centers

### **Biotech Science Cluster, Faridabad**

Vaccine & Infectious
Disease Research
Centre (VIDRC)

Clinical Research
Centre for
Paediatric Diseases
(AIIMS)

Paediatrics
Biology Centre
(PBC)

Plat form Technology Centre Translational Health Science & Technology Institute (THSTI)

Centre for
Animal Model
for Clinical
Advances

**Biotech Park** 

**POLICY UNIT** 

**Incubator** 

Centre for Biodesign and in vitro

Diagnostic

UNESCO Regional Centre for Biotechnology (RCB)

Clinical Development
Services Agency
(CDSA)

Cancer Nano Centre Clinical Research Centre for Neurological Disorder with NBRC & Gurgaon Civil Hospital

Drug Discovery
Centre

Molecular Breeding (NIPGR)



- Based on the experiences so far, we in the Department re-defining the Vaccine Research and Development Mission to translate the product development process upto commercialization in accelerated mode.
- ☐ The same is under consideration by the Government of India

## How do we deal with this exciting but uncertain future

Courage
Core Values
Innovativeness
Togetherness

## Thanks