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Improving Regulatory capacity in Africa through joint reviews: Experiences from the African Vaccine Regulatory Forum (AVAREF)

Dicky Akanmori AVAREF Secretariat



World Health Organization

KEY Regulatory Challenges in LMICs

Clinical development

- Processes confusing for product developers involving regulatory agencies and ethics committees, Example
 - Lack of clarity of roles between regulatory authorities and ethics committees
 - Lack-of/disparate application requirements
 - Overall lack of capacity / capabilities and transparency

Registration & Licensure

- Rx/Vx: well-established "3-step" process, but slow and Redundant retarding timely Country introduction of needed Health products
- Dx: Unpredictable processes, lack of agreed-upon standards, multiple quality assurance mechanisms, slow registration and uptake of novel lifesaving technologies

Post-licensure / Surveillance

 Limited pharmacovigilance Capacity in increasing number of vaccines and Drugs

 Increased inflow of counterfeit and falsified Substandard products due to low surveillance and enforcement

Why AVAREF?

- Growing public health needs and limited resources, demand faster, cheaper, and better treatments and vaccines.
- Mosaic of regulations govern product development and oversight, creating inefficiency and adding to costs of safe, innovative, and effective vaccines and therapies.
- Duplication due to overlapping reviews and inspections of clinical/ manufacturing sites for similar purposes.

What is the African Vaccine Regulatory Forum (AVAREF)

• ALL National Regulatory Authorities of African Region and national Ethics Committees (ECs)

 Established by WHO in 2006 to build capacity for vaccine clinical trials in 19 African countries

African Vaccine Regulatory Forum (AVAREF) HISTORY



REGIONAL OFFICE FOR Africa



Adapted AMRH© Bill & Melinda Gates Foundation

New AVAREF Governance Model



Core Values and Guiding Principles

Values –

- Transparency & integrity,
- responsiveness,& innovativeness
- Ownership & collaboratio
- Guiding Principles
 - Strong Partnerships and alignment with AMRH and other initiatives
 - National ownership, stewardship and leadership
 - Reliance on competent work and decisions of functional ethics committees and regulatory authorities
 - Upholding confidentiality
 - Efficiency and sustainability

What is a Joint Review?

- Review whether for approval of products or clinical trials carried out by NRAs with or without ECs to provide outcomes ina short time without sacrificing the quality of assessment.
 - Multi-country/multi-site
 - One country assisted by others
 - Clinical trial applications/marketing authorization
 - Face-to-face sessions and closed sessions

Joint Reviews

- 2006: Joint reviews of CTAs, joint GCP inspection of phase II trial of Men. A. conjugate vaccine using model procedure
- 2008: Joint review of malaria vaccine, RTS,S,
- 2011: Joint review of CTA of candidate TB vaccine
- Joint reviews for MenAfriVac
- December 2014: CTA of vaccine against Ebola
- February 2015:
- March 2015: Assisted Reviews
- 2016: Assisted review of therapy against eumycetoma, Neglected disease
- Joint review of combination treatment for lesihmaniasis

Joint/Assisted Reviews and GCP Inspections

"Process has been widely viewed as successful, improving the capacity and coordination and encouraging the use of defined review timelines and common documentation" -

Source: Safer, Faster, Cheaper Improving Clinical Trials and Regulatory Pathways to Fight Neglected Diseases - Report of the Center for Global Development's Working Group on Clinical Trials and Regulatory Pathways

Upcoming Review

- Special Approval of malaria vaccine Mosquirix
- Three countries Ghana, Kenya and Malawi
- Issue special limited authorization for a pilot of the new vaccine.
- Implement pharmacovigilance readiness
- Jointly receive and review safety data for 3 countries

Challenges and Opportunities......

- From decision to import permit

 Advocacy & leadership training
- Secure electronic platform
- Sequential to parallel submissions
- Addressing Epidemics
 - CEPI & BMGF supporting Table Top exercise to develop framework by AVAREF
- Sustainability
 - Funding from WHO to countries and RECs.
 - Common formats for use in RECs and countries

Conclusion

- Joint reviews, improve worksharing, promote harmonization, efficiency and transparency
- Effective in emergencies/outbreaks Ebola
- Limitations
- Further improvements required