

DCVMN Annual Report 2016

Table of Contents

Message from the President.....	5
DCVMN in unison with National Health Authorities and the Pan American Health Organization	6
DCVMN members' progress in global vaccine supply	7
Expert Webinar Series: Real-time engagement	10
Professional development: the solid basis for future vaccines	11
DCVMN's E-learning Platform.....	14
Vaccines: Shaping Global Health.....	15
Governance statements.....	20
Executive Committee renewal	20
Financial statements	21
Acknowledgments	22

EXECUTIVE COMMITTEE MEMBERS



Mr. Mahendra Suhardono
President
Bio Farma, Indonesia



Mr. Rajinder Kumar Suri
Vice President
Panacea Biotech Limited, India



Dr. Akira Homma
Treasurer
Bio-Manguinhos (Fiocruz), Brazil



Mr. Rayasam Prasad
Biological E. Limited, India



Ms. Meng Li
China National Biotec Group Co.Ltd., China



Mr. Patrick Tippoo
The Biovac Institute, South Africa



Mr. Juliman
GAVI Board Alternate
Bio Farma, Indonesia



Dr. Steven Gao
Xiamen Innovax Biotech Co. Ltd., China



Mr. Adar Poonawalla
GAVI Board Representative
Serum Institute of India Ltd., India



Dr. Sonia R Pagliusi
Executive Secretary
DCVMN International

Message from the President

Dear Members, Partners and Friends,

In 2016 it was my pleasure to welcome five new members of DCVMN: Zydus Cadila, HLL Biotech Ltd., and Green Signal Bio from India, AMSON Vaccines Ltd. from Pakistan, and our 50th member, Instituto Biologico Argentino (BIOL). By joining this Network, new members will gain much benefit nowadays and in the future, to broaden their knowledge, especially related to vaccines' development, procurement, supply and financing. My sincere appreciation goes also to the loyalty of all members that continue to support and strengthen the Network for many, many years. Your solidarity and friendship enabled the Network to grow.

I would like to emphasize again that collaboration and partnerships amongst members are essential to achieve our goal to provide a sustainable supply of high-quality and affordable vaccines to developing countries.

To accelerate the development of new vaccines, solid partnerships are needed in many sectors including research, manufacturing, and regional supply. The partnerships will help mitigate risks, leverage investments, and speed time to market. The collaborations with WHO, PAHO, UNICEF, GAVI, and other stakeholders, has provided better insights in quality systems, supply chain and new regulations.

The Global Polio Eradication is approaching, and the global switch from tOPV to bOPV has taken place since 1st of May 2016. However, the resurgence of wild poliovirus type one, detected recently, has raised our concerns. I would like to encourage DCVMN members to continue contributing in the eradication of wild polioviruses by a sustainable supply of high quality and affordable Polio vaccines. Eradication could not be achieved without a vital contribution from DCVMs. Indeed, the close interaction among WHO, UNICEF, GAVI, DCVMs, and all relevant eradication initiatives, will bring the success of polio eradication in the world.

Finally, I hope that engaging partnerships amongst DCVMN members and strong support from the other parties will continue for the sake of global health.

Sincerely,



Mahendra Suhardono
DCVMN President

DCVMN in unison with National Health Authorities and the Pan American Health Organization¹



DCVMN Executive Committee members welcome the Argentinian Minister of Health and PAHO Deputy Director in Buenos Aires, 25 October 2016

In his opening speech at the 17th Annual General Meeting of the Developing Countries Vaccine Manufacturers Network, the Honorable Minister of Health of Argentina, Jorge Lemus, appreciated that vaccines are shaping global health. “We consider vaccination an instrument for prevention, promotion and protection of the health of populations” he said. Our mission is to establish the concept of vaccination as a right of people, while the State has the responsibility to ensure access and supply of this key tool for the population, he continued. Vaccination has enabled the eradication of smallpox worldwide, and the elimination of Polio, measles and recently of rubella from the Americas. The National Immunization Schedule of Argentina is one of the most complete worldwide with 23 vaccines that were progressively included in the schedule since 2003, when only 5 vaccines were provided.

If all persons would receive the indicated vaccination timely, then the circulation of infectious agents would be interrupted among both the vaccinated and the non-vaccinated individuals, protecting and benefitting the whole population through the so-called herd immunity effect. Thus vaccination is also a personal responsibility towards those around us who may not be able to receive it, such as immuno compromised persons.

¹ <http://www.dcvmn.org/DCVMN-in-unison-with-National-Health-Authorities-and-the-Pan-American-Health>

DCVMN members' progress in global vaccine supply

The world's first vaccine against Hand-foot-mouth disease launched by IMBCAMS



On March 18, the first batch of inactivated enterovirus 71 (EV71) vaccine, developed by Institute of Medical Biology, Chinese Academy of Medical Sciences (IMBCAMS), was approved for the distribution to the Chinese market by the China Food and Drug Administration. Experts believe that the vaccine will effectively reduce the incidence of hand, foot and mouth disease in children in China, especially in reducing mortality in some serious cases, protecting significantly the lives of healthy children. The Vice Governor of Yunnan Province, Dong Hua, attended the launch ceremony extending the congratulatory letter of the provincial government. The vaccine is the world's first EV71 vaccine, and it is the only one manufactured using human diploid cells, gaining two national patents for this technology, and in line with international standards. From 2000 to September 2015, there were nearly 13.42 million cases of hand, foot and mouth disease reported, with 3374 cases of death, making it one of the highest incidence of infectious diseases in China.

At present, the hand, foot and mouth disease lacks of effective treatment options, therefore vaccination is the fundamental mean of prevention and control. IMBCAMS began the research and development of the EV71 inactivated vaccine back in 2008, when the epidemic of hand, foot and mouth disease first surfaced in Anhui Province. After thorough research, the FY-23K-B strain was selected and identified, the strain and technology allowed scale-up for manufacture, establishing the production process system, while ensuring quality control and quality management systems. The immunization program targets children aged from 6 months to 5 years, the routine immunization program is 2 doses, with 1 month interval.

More information:

http://www.imbcams.ac.cn/Category_2142/Index.aspx (Chen Zehui Fan Lin reports)

Incepta Vaccine Ltd. has launched its Dhaka vaccine manufacturing facility

Incepta Vaccine Ltd. has developed an international standard bulk manufacturing facility providing the best environmental conditions for performing the operations. The facility can manufacture both Bacterial and Viral bulk antigens. The establishment of the facility will reduce dependence on vaccine import and help Bangladesh to become a self-sufficient vaccine manufacturing country.



Honorable health Minister Mohammed Nasim, MP inaugurated the facility on Thursday, 28th July 2016.

Addressing the inaugural ceremony, the Minister said that Bangladesh is now able to export quality medicines to 90 countries all over the globe. Bangladesh is now capable of manufacturing life-saving vaccines and successfully reduces the dependence on imported vaccines. 'We will take the initiatives to get the WHO authorization which is needed for export of vaccines.' The Minister said.

More information at:
<http://www.inceptapharma.com/news-events.php>

Positive Phase 1 results announced for seasonal influenza vaccine candidate made locally in Vietnam

Nha Trang, Vietnam, September 27, 2016 –The Institute of Vaccines and Medical Biologicals (IVAC) of Vietnam, announced results from a Phase 1 clinical trial of its inactivated seasonal influenza vaccine candidate (IVACFLU-S) which targets three strains of influenza: A/H1N1, A/H3N2, and B. Overall results showed the vaccine candidate to be well tolerated and immunogenic.



The study sponsored by IVAC, was conducted in the Hung Ha district of Vietnam's Thai Binh province by the National Institute of Hygiene and Epidemiology (NIHE), and authorized by Vietnam's Ministry of Health. Funds for the study were provided by the World Health Organization (WHO) through a grant from the Biomedical Advanced Research and Development Authority (BARDA) of the US Department of Health and Human Services. PATH, a nonprofit organization, provided technical support under a cooperative agreement with BARDA.

More information at: <http://en.ivac.com.vn/tin-tuc/2/38/positive-phase-1-results-announced-for-seasonal-influenza-vaccine-candidate-made-locally-in-vietnam/vien-vac-xin.html>

Medigen Vaccine Biologics Inaugurates Manufacturing Plant for Cell-Based Vaccines



On 26th October 2016, Medigen Vaccine Biologics Co. inaugurated Taiwan's first cell-based vaccine manufacturing plant, which is located in Hsin-Chu Biomedical Science Park in northern Taiwan. Medigen develops vaccines and biosimilar monoclonal antibodies to prevent regional infectious diseases like enterovirus (EV71), dengue, H7N9, H5N1, and respiratory syncytial virus (RSV). In his opening remarks, Vice President Chen Chien-Jen addressed the importance of vaccine self-sufficiency and pointed out that in current Taiwan's vaccine market, only 8% is locally produced, while the rest relies on importation. Therefore, "the completion of this vaccine manufacturing factory marks a milestone in the capability of prevention and control of infectious disease".

More information at:

<http://www.medigenvac.com/en/1943/medigen-vaccine-biologics-mvcs-inaugurates-taiwans-first-cell-based-vaccine-manufacturing-plant>

Inactivated Polio Vaccine (IPV) from Serum Institute of India received WHO prequalification status

On 28th October 2016, the inactivated Polio vaccine produced by Serum Institute of India received approval by WHO as one of the pre-qualified vaccines for United Nations procurement. The Honorable Prime Minister Shri. Narendra Modi visited the Serum Institute of India on Sunday, 13th November and met with the Chairman & Managing Director Dr. Cyrus Poonawalla and CEO Mr. Adar Poonawalla. The Prime Minister expressed appreciation over the largest vaccine manufacturing facility in the world that makes low cost vaccines to protect children and encouraged the Poonawalla's Group to make vaccines available to all.



More information at:

http://www.seruminstitute.com/content/news_1.php

Expert Webinar Series: Real-time engagement



A series of 11 webinars was held throughout the year 2016. Respected experts were invited to share valuable knowledge with our members, taking advantage of the power of online communication technology, in connecting with our members across the globe.

Date	Presenter (affiliation)	Topic	Number of connections*
20 Jan 2016	Mr. A. van der Ark (Intravacc)	Characterization of Whole Cell Pertussis vaccine by mass spectrometry	27
02 Feb 2016	Ms. Amie Batson (PATH)	Developing Country Vaccine Markets	19
08 Mar 2016	Ms. Jayasree Iyer (ATMF)	Access to Vaccines Index	6
06 Jul 2016	Dr. M. Dennehy (QA)	Overview of EU GMP Part 1	15
14 Jul 2016	Dr. M. Dennehy (QA)	Overview of EU GMP Part 2	18
30 Aug 2016	Dr. Martin Lush (NSF)	Key Performance Indicators (Quality)	15
06 Sep 2016	Ms. A.Ottosen & Ms. L. Kavanagh (UNICEF)	UNICEF vaccine distribution practices	23
20 Sep 2016	Prof.A.Wilder-Smith (School of Medicine Singapore)	Lessons learnt from Dengue vaccines trials	14
06 Oct 2016	Dr. Erik Kakes (Applikon)	Biosafety in upstream processing	12
16 Nov 2016	Mr. Steve Williams (CBE)	Data Integrity Landscape	29
15 Dec 2016	Mr. Per Staugaard & Mr. Jaap Koster (Consulting)	Biomanufacturing: how to comply with GMP and Biosafety regulations	24
Total			150

Table 1. Webinars summary 2016

* some attendees have connected as groups

Professional development: the solid basis for future vaccines

During 2016, DCVMN and partners organized a series of workshops, focusing on several topics of Quality Management Systems, as well as other cross-cutting topics such as clinical studies management and biorisk. The workshops, provided by expert consultants in relevant areas, aim to align DCVMs with international standards, in order to update DCVMN members on current GMP trends for manufacturing high-quality vaccines.

Training consultants from various countries provided their services and shared broad expertise as trainers at DCVMN's regional workshop. Their profile is available on DCVMN's consultants' portal for record. Cf. <http://www.dcvmn.org/-Consultants-list-9->

In order to measure the impact of learning, a self-evaluation was voluntarily performed by participants on the first and last day of training. On average, an increment of 7% to 39% on the self-evaluation was observed across the workshops.

For the first time, DCVMN took its training activities to Kunming, China; Cairo, Egypt; Dhaka, Bangladesh and Bali, Indonesia. Participants who attended regional workshops were encouraged to pass on the knowledge by organizing follow-up in-house training for their colleagues, within 3-months period after each regional workshop, to disseminate the knowledge, creating a “multiplier-effect”.

In total, 457 participants attended the regional workshops, where 42.3% were female and 57.7% were male, from 41 companies and 13 countries from March 2016 to January 2017. The location, topic and attendance of all regional workshops are shown on the table 2 below.

Follow-up in-house training sessions organized by member companies after regional workshops, benefited in addition 1053 people. In all, the “train-the-trainer” initiative reached 1510 people across the globe in 2016 .

DCVMN Regional Training Workshops on QMS

Among the 9 workshops listed below, two workshops were cosponsored by Sandia Labs. All these efforts are partly supported by a grant from the Bill and Melinda Gates Foundation (Grant no. OPP 1113279).

Date	Location	Topic	No. of participants	follow-up reported	Total
14-18 Mar 2016	Kunming, China	Qualification and validation of facilities, regulatory and practical approaches	77	206	283
4-8 Apr 2016	Hyderabad, India	Change control, aseptic process validation	62	288	350
30 May 3 Jun 2016	Rio, Brazil	Critical systems and clinical studies: Water, Air and Audits	69	152	221
28 Jun 1 Jul 2016	Seoul, Korea	QbD, registration and GMP audits	56	167	223
14-28 Jul 2016	Cairo, Egypt	*Sandia Biorisk Workshop	22	n.a.	22
17-21 Jul 2016	Bali, Indonesia	Clinical management and Pharmacovigilance strategies	44	240	284
20-21 Oct 2016	Buenos Aires, Argentina	*Sandia Biorisk Workshop	24	n.a.	24
24 Oct 2016	Buenos Aires, Argentina	Satellite WHO PQ	42	n.a.	42
15-19 Jan 2017	Dhaka, Bangladesh	Quantitative and Qualitative Vaccine Analysis	61	n.a.	61
Total			457*	1053	1510

Table 2. DCVMN training workshops held from March 2016 to January 2017. According to our records only 7 individuals attended more than one workshop

DCVMN Annual Report 2016



Kunming workshop, 14-18 March 2016



Training workshop on QMS in Hyderabad, India, 4-8 April 2016



Korea FDA Director General, Dr. Sohn at the Seoul workshop



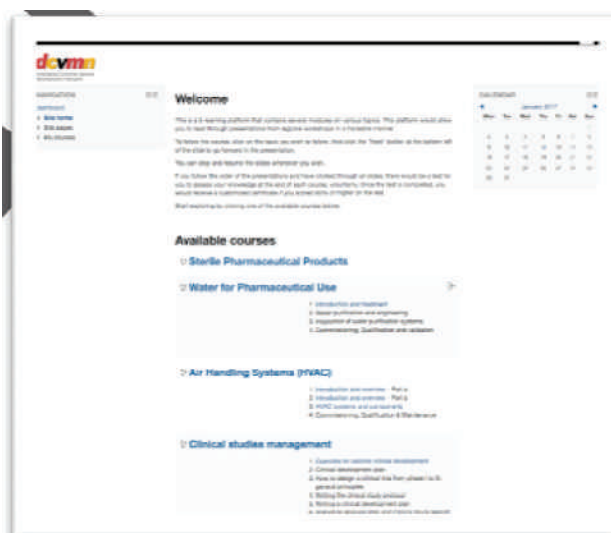
Participants visit to the Cholera Hospital at ICDDR, B (International Centre for Diarrhoeal Disease Research, Bangladesh) during Dhaka workshop

DCVMN's E-learning Platform

In 2016, DCVMN launched its E-learning platform, with the aim of supporting the training workshops, as well as facilitating knowledge sharing in follow-up in-house training sessions among DCVMN members.

The platform allows DCVMN members to access freely to online learning material. After completing each module, a self-evaluation with automatic correction enables users to test their knowledge on the respective topic; then a customized certificate can be downloaded for each module completed, if users score 80% or higher on the self-evaluation.

At present, four E-modules are available online for DCVMN members to follow voluntarily during their free time. The four modules are: Air-handling systems, Water for pharmaceutical use, Sterile Products and Clinical studies management.



DCVMN continues to promote and encourage all members to use the E-learning platform for personal upgrade, and in the future, an e-certificate is envisaged as a pre-requisite for relevant regional workshops' participation.

Vaccines: Shaping Global Health

DCVMN Annual Meeting 24-27th October, Argentina

The Director of PAHO, Dr. C.F. Etienne, addressed the delegates via video, and highlighted that PAHO has undertaken to make national health programs sustainable and affordable, encouraging improvements in quality and availability of vaccines from both private and public sectors. As a result, polio was eradicated, rubella was eliminated from the WHO Americas region in 2015, and it is now the first WHO region to be declared free of measles. She thanked DCVMN members for their contribution to national immunization programs. PAHO is committed to continue collaboration with DCVMN members and welcome innovative suggestions, to ensure that the Americas have sustainable access to life-saving vaccines.



PAHO Director, Dr. C. Etienne, by video



*Honorable Minister Dr. J. Lemus,
Mr. H. Sigman, Group InSud/ Sinergium (Left to Right)
at the opening session*



DCVMN members and delegates at the opening session

DCVMN Annual Report 2016

The Developing Countries Vaccine Manufacturers Network (DCVMN) gathered leaders in immunization programs, vaccine manufacturing, representatives of the Argentinean Health Authorities and Pan American Health Organization, among other global health stakeholders, for its 17th Annual General Meeting in Buenos Aires, to reflect on how vaccines are shaping global health.

Shaping global health warrants collective efforts for improving the access to vaccination, and was discussed by featured experts and panel discussions on the following sessions:

- Global Access to Vaccines,
- Vaccine Supply and Procurement,
- Regulatory Convergence,
- Future Vaccines and Biological Products,
- Innovation and Polio Endgame Strategy.

Outbreaks of emerging infections and the global Polio eradication and containment challenges are reminders of the importance of vaccines' access, and of the importance of new public-private partnerships.



DCVMN Executives with Dr. M.P. Kieny, WHO Assistant Director General for Health Systems & Innovation (Fourth from right)



DCVMN delegates



Mr.M. Zaffran, Director WHO: Global Polio Eradication Initiative (GPEI)



Mr. R. Prasad (BMGF), and other delegates at audience

Polio eradication and elimination of measles and rubella from the Americas is a result of successful collaboration, made possible by timely supply of affordable vaccines.

After decades of intense competition for high-value markets, collaboration with developing countries has become critical and, the involvement of multiple manufacturers as well as public- and private-sector investments, are essential for developing new vaccines against emerging infectious diseases. The recent Zika virus outbreak and the accelerated Ebola vaccine development exemplify the need for international partnerships to combat infectious diseases.

DCVMN Annual Report 2016



Ms. S. Rautio, UNICEF



Dr. F. Kristensen, CEPI

A new player, the Coalition for Epidemic Preparedness Innovations (CEPI) has made its entrance in the global health community, aiming to stimulate research preparedness against emerging infections.



Ms. M. Malhame, Gavi, The Vaccine Alliance



*Mr. J. Fitzsimmons, Director PAHO RF (Left)
Dr. I. Danel, PAHO Deputy Director (Right)*



DCVMN delegates in the audience

DCVMN Annual Report 2016



Dr. P. Aprea, ANMAT National Control Laboratory Dr. J.L. di Fabio, Regulatory Expert

Face-to-face panel discussions facilitated the dialogue around challenges, such as risks of viability to vaccine development and regulatory convergence, to improve access to sustainable vaccine supply. It was discussed that joint efforts to optimizing regulatory pathways in developing countries, reducing registration time by up to 50%, are required.



Panel discussion, regulatory convergence session, (left to right) Dr. J.L. di Fabio, Dr. N. Dellepiane, Dr. A. Porras, Ms. D. Decina, Ms. C. Rodriguez



DCVMN Delegates

Governance statements

The Executive Committee reviews, advises and approves, on behalf of members, the day-to-day operations of the Secretariat throughout the year. Regular teleconferences (TC) and two meetings are structured with pre-set agenda items and relevant documents are circulated in advance to facilitate informed decision making. All voting Executive Committee members act on a voluntary, non-remunerated basis. In addition, DCVMN representatives appointed as senior advisers to the Executive Committee serve at the GAVI Board.

In 2016 there were seven Executive Committee teleconferences or meetings: January 14th, February 18th, April 11th, June 27th, August 23rd, October 24th, November 26th. Participation of executive committee members is shown in the table below. Gavi Alliance Board representatives attended one Gavi Board meeting and one Gavi Board retreat within the calendar year. At the general assembly on 24th October 2016, members approved the budget 2017, and the location of the next DCVMN AGM 2016, which will take place in Seoul, S. Korea, hosted by SK Chemicals.

Role	Name	Company	Attendance out of 7 TC/or meetings
President	Mr. Mahendra Suhardono	PT Biofarma	3
Vice-President	Mr. Rajinder K. Suri	Panacea Biotec	2
Treasurer	Dr. Akira Homma	Biomanguinhos	3
Member	Mr. Steven Gao	Innovax	6
Member	Ms. Li Meng	CNBG-Sinopharm	2
Member	Mr. Ray Prasad/M.Datla	Biological E	2
Member	Mr. Patrick Tippoo	Biovac	7
EC Senior Adviser (non-voting)	Dr. Suresh Jadhav	Serum Institute of India	5
Gavi Board Member (non-voting)	Mr. Adar Poonawalla	Serum Institute of India	1
Executive Secretary (non-voting)	Dr. Sonia Pagliusi	DCVMN International	6
Gavi board alternate (non-voting)	Mr. Juliman Fuad	PT BioFarma	n.a.

Executive Committee renewal

Democratic election for Executive Committee members was held at the General assembly, on 25th October 2016, and 12 nominees were present. Each nominee briefly introduced him/herself. 30 member companies participated at the election, and 29 ballots were received, and one ballot was invalid, due to 4 selected names from the same country. It was agreed that the seven most voted nominees assume the membership of the Executive Committee, according to article 3.9 of the bylaws, thus a new Executive Committee was constituted. The votes counted in public and validated by Dr. G. Temprano (ANLIS), Ms. Girija AVS, Ms. Ting and Dr. S.Pagliusi were as follows: BioE, Ms. M. Datla = 26 votes; Butantan, Dr. A. Precioso = 23 votes; CNBG, Ms L. Yang = 21 votes; Biovac, Mr. P. Tippoo = 21 votes; Sinergium, Mr. F. Lobos = 20 votes; Innovax, Mr S. Gao = 18 votes; Bharat, Mr. S. Prasad = 16 votes. It was agreed that the President would be the nominee with most votes, Ms. Datla.

Financial statements

DCVMN International Statement of Income and Expenditures for the year ended on 31st December 2016

<u>INCOME</u>	<u>2016</u>		<u>2015</u>	
	<u>CHF</u>	<u>USD</u>	<u>CHF</u>	<u>USD</u>
Members contributions	320'078.52	320'030.00	281'473.50	290'000.00
Donations	892'340.40	906'000.00	494'062.20	521'000.00
Annual meeting contribution	64'800.85	65'888.00	57'778.88	60'375.00
Reimbursement meeting contribution	0.00	0.00	-2'529.29	-2'555.35
Annual meeting contribution participants	14'844.76	15'100.00	16'810.50	17'150.00
Other income	2'400.11	2'423.37	57.84	61.26
Income on investments	4'376.70	4'566.66	0.00	0.00
Gain on investments	7'422.02	7'535.05	0.00	0.00
Foreign exchange gain	27'861.18	23'062.06	27'109.20	28'329.04
Total income	1'334'124.54	1'344'605.14	874'762.83	914'359.95
 <u>EXPENDITURES</u>				
Salaries	133'169.90	134'011.05	106'188.35	109'322.30
Social contributions AVS/AI/APG/AC/PCFam	11'300.90	11'361.45	9'110.45	9'418.70
Social Insurances	2'718.45	2'688.35	2'114.15	2'105.85
LPP contribution	13'917.30	14'024.71	12'691.40	13'285.32
Office rental	6'279.12	6'324.83	6'529.33	6'709.60
Office insurance	381.45	377.60	343.35	367.26
Office supplies	5'678.22	5'708.67	1'456.30	1'508.18
Account Honorarium	13'721.40	13'738.89	13'073.00	13'474.90
Administration (salaries)	721.50	726.59	1'114.00	1'102.53
Internal audit	4'911.00	4'805.10	3'004.25	3'001.25
Mock audit initiative	272'884.43	273'526.06	155'434.76	157'443.93
Training initiative	223'699.94	225'738.89	243'144.57	251'919.54
Regulatory Forum Initiative	60'851.29	61'230.72	27'632.80	28'240.09
Consulting Database	9'936.00	10'030.13	29'377.00	30'346.80
Publications	1'913.70	1'945.72	1'715.32	1'733.00
Representation and travel	12'733.31	12'870.93	0.00	0.00
Meeting	2'370.00	2'425.50	4'322.92	4'535.93
Annual meeting	78'902.36	80'014.67	62'493.55	63'908.04
Miscellaneous	50.00	49.60	372.03	378.84
Loss on investments	0.00	0.00	12'729.09	13'138.26
Interests paid	27.65	27.20	0.00	0.00
Bank and paypal charges	3'623.61	3'678.89	5'437.29	5'440.30
Taxes on previous year	-117.50	225.59	15'717.95	15'746.38
Taxes	10'000.00	9'838.65	6'300.00	6'293.71
Total expenditures	869'674.03	875'369.79	720'301.86	739'420.71
 SURPLUS	 464'450.51	 469'235.35	 154'460.97	 174'939.24

Approved
24/04/17

Sonia Pagliusi
DCVMN Executive Secretary

DCVMN Annual Report 2016

Notes:

Over the year 2016, DCVMN has grown from 45 to 50 corporate members with five new manufacturers joining the network: Zydus Cadila, HBL Ltd. Green Signal Ltd., Amson Ltd. And BIOL. DCVMN revenue has increased by 47%, from nearly 914'360 USD to 1'344'605 USD (see Balance table above). This was mainly due to increase in fund raising activities and private donations, notably grant awards by the Bill and Melinda Gates foundation. DCVMN is moving towards diversified and independent resources, based on three main pillars: memberships, partnerships and private donations, similar to many other international organizations, to achieve a sustainable and balanced operations' model.

At the last quarter of the calendar/financial year the network's activities and interim financial statements were presented by the Executive Committee to the general assembly of members, on 24th October, in Buenos Aires, Argentina, when the proposed 2017 activities and budget of 1'099'800 USD were approved by the assembly.

All income and disbursements are handled exclusively by bank transfers, providing independent and accurate accounting records, complying with international accounting and business practices. All disbursements are subject to two-signature system, prepared by the Secretariat and approved by the Treasurer. All disbursements correspond to bank transactions records and invoices to services, controlled by an external accountant and comptroller. Accounts were audited by an internal professional auditor nominated by the Executive Committee.

Of note, in 2016 the dollar valuation compared to Swiss franc has contributed to foreign exchange gain that reflects the value of the dollar on 31st December 2016 as compared to the average exchange rate of the dollar over the calendar year.

In income, subtitle "foreign exchange gain" indicates the difference between the exchange rate applied during the year and the exchange rate on 31st December 2016 according to the tax payable on 31st December 2016 revaluation rate.

Acknowledgments

To facilitate knowledge sharing and intensifying training opportunities for a skilled industry workforce, the annual meeting and regional workshops held in developing countries throughout 2016 were co-sponsored by corporate partners. We are grateful to corporate partners for helping foster manufacturing excellence for the benefit of all people.



We thank Sinergium Biotech for hosting and supporting the annual meeting, and the Bill and Melinda Gates Foundation for a conference Grant 2016 (grant no. OPP1157021).