

# Vaccines, a healthy future

Developing Countries Vaccine Manufacturer's Network  
21<sup>st</sup> Annual General Meeting (Virtual)  
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## Harmonization of regulatory approaches in African countries – WHO efforts

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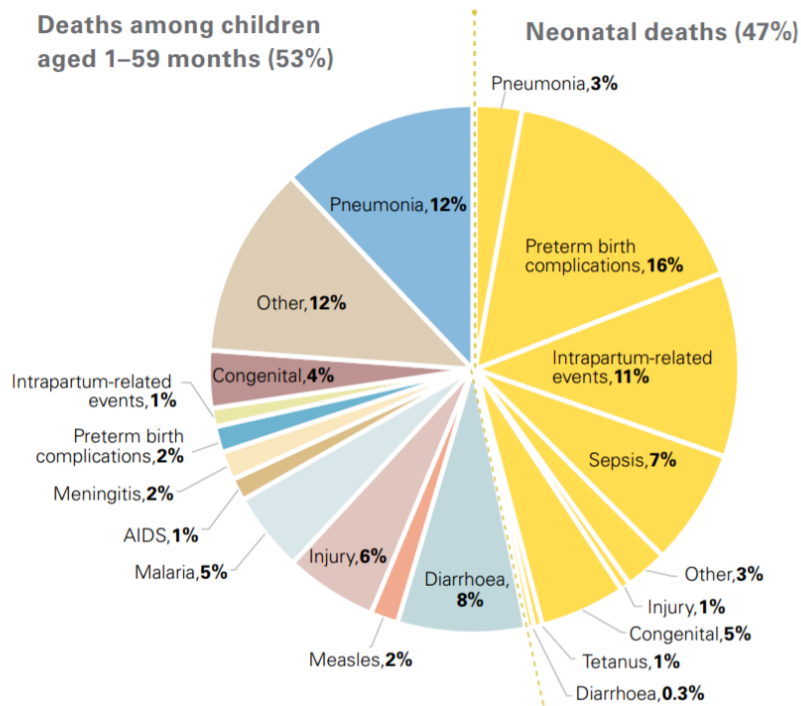
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# Infectious (preventable) diseases remain a leading cause of death among children under age 5



Global distribution of deaths among children under age 5 by cause, 2018



**One child under age 15 died every five seconds in 2018**

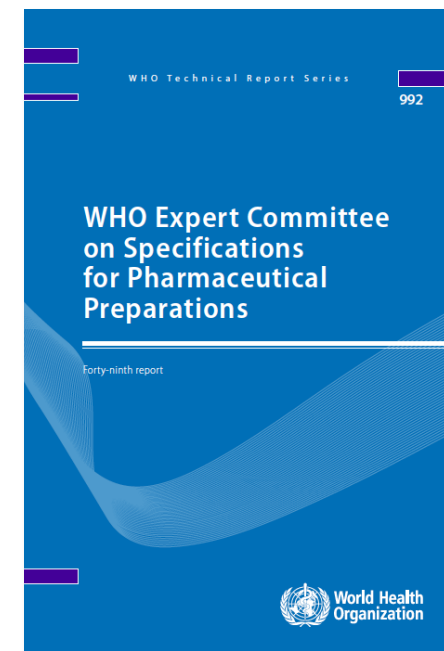
UN Inter-agency Group for Child Mortality Estimation

## Access to medical products – global challenge

- In many low- and middle-income countries essential medical products are not always readily available and accessible;
- WHO estimate is that one third of the world's population have no or little access to essential medical products;
- This contributes to disparities in health and life-expectancy between low-income and high-income countries;
- One of the reasons is inadequate regulatory capacity and lack of collaboration and work sharing in medicines regulation.

# Globalization in medical products regulation

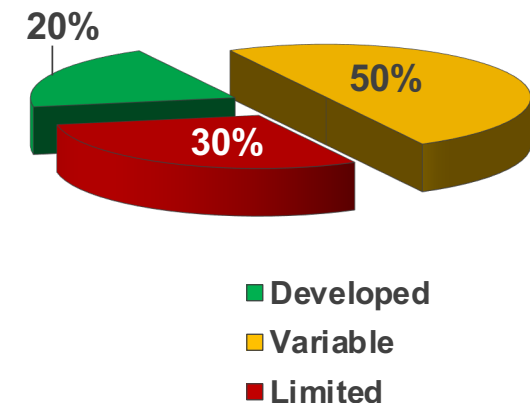
- All medical products should be used in the countries only after approval by the national or regional regulatory authority - **in line with current international standards** (WHA Resolutions: WHA 67.20 (2014); WHA 67.21 (2014); WHA63.12 (2010);
- There is no clear vision or policy about HOW to set up regulatory systems in times when it is unrealistic to manage all functions in one national setting – due to **globalization of regulatory science**;
- New medical products are likely more complex and sophisticated – demanding advanced health systems and "quality use".



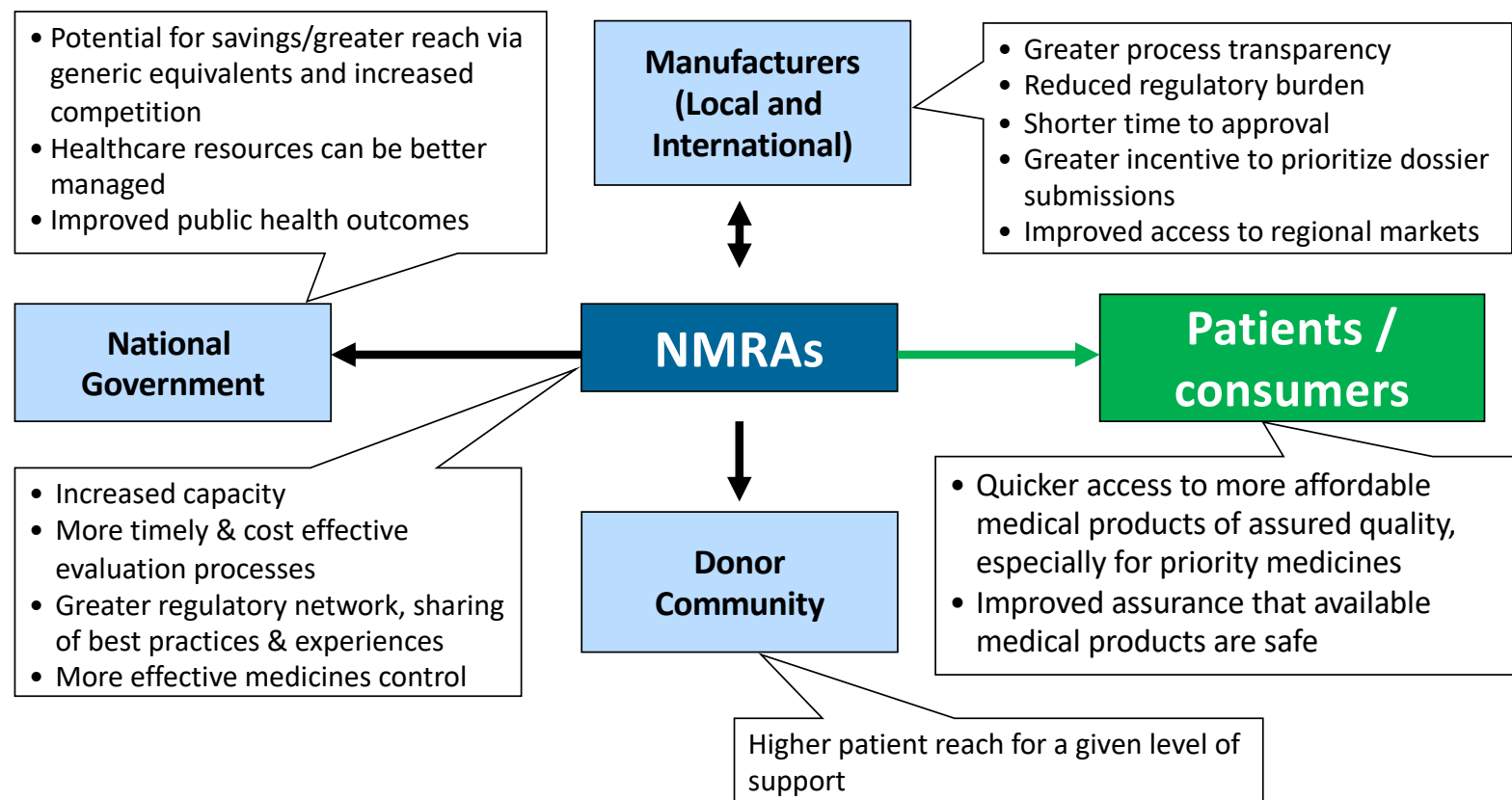
# Gap in Regulatory Capacity

- **≈30% of NMRA globally** have limited capacity to perform core regulatory functions
- Regulatory capacity gap between different countries (low- and high-income) in terms of:
  - Human and financial resources;
  - Regulatory functions effectively performed;
  - Expertise available for fulfilling regulatory functions;
  - Availability of proper systematic training for regulators.

194 WHO Member States:

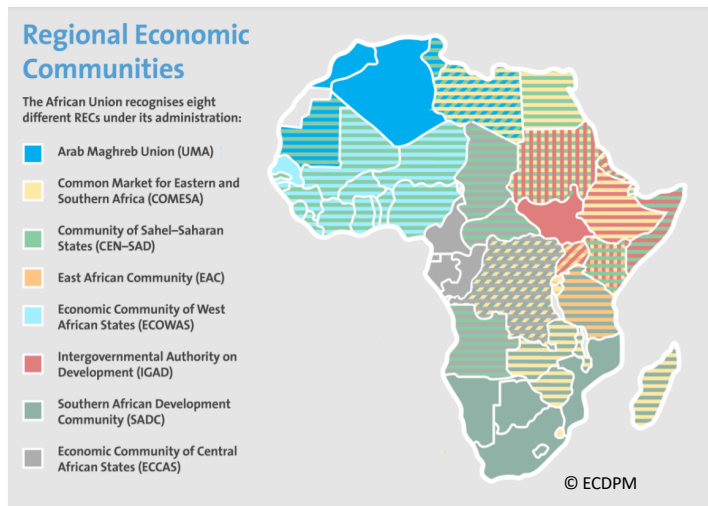


# Why to support Regulatory Convergence and Harmonization?



# African Medicines Regulatory Harmonization (AMRH) initiative

Launched in 2009 as a collaborative effort of a **Consortium of International Partners\*** to respond to the challenges arising in harmonizing medicines regulation in Africa.



The overall objective of AMRH is:

To achieve a harmonized medicines regulation process in the countries belonging to the **Regional Economic Communities (RECs)**, based on common documents, processes and shared information systems at the RECs level.

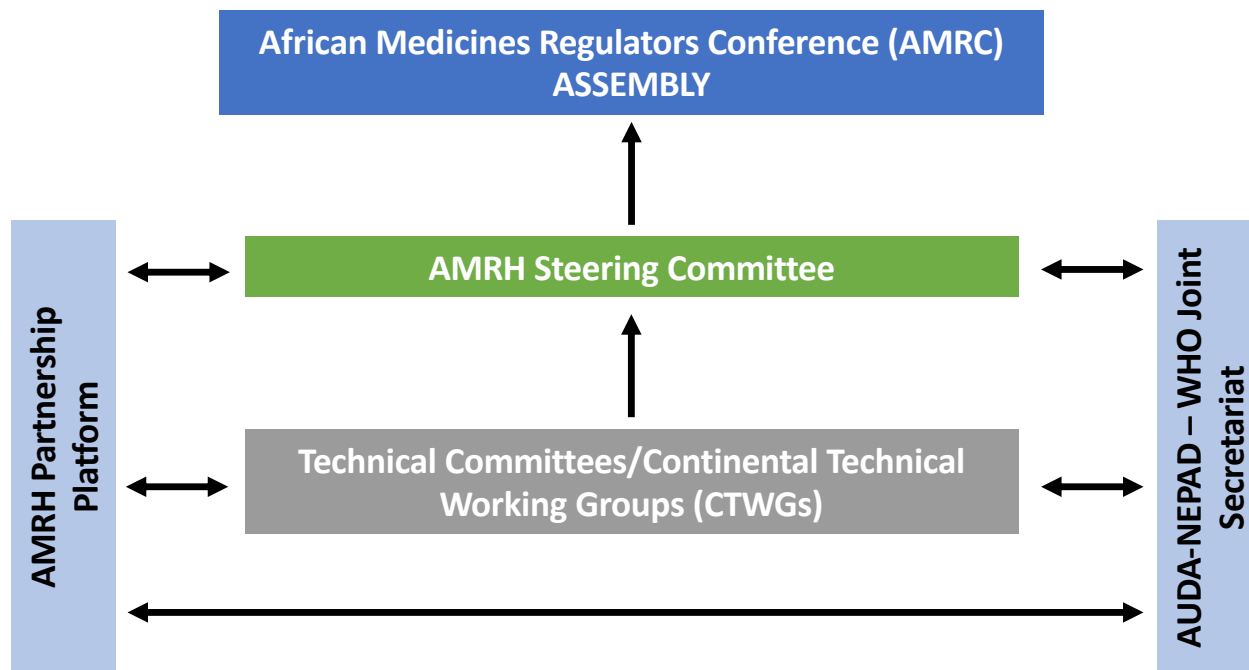
\*African Union Commission, the Pan-African Parliament, the African Union Development Agency - New Partnership for Africa's Development (AUDA-NEPAD), WHO, Bill and Melinda Gates Foundation (BMGF), UK DFID and the CHAI

# AMRH as a game changer in the Africa

All African RECs currently implementing Medicines Regulatory Harmonization Programmes/Projects:

- Development and implementation of Harmonized Technical Requirements/Common Technical Documents for medical products regulation;
- Development of Common Information Managements Systems;
- Implementation of joint activities – dossier assessments and GMP inspections;
- Impact monitoring and evaluation processes in place.

# AMRH Governance Framework



## AMRH Technical Committees:

- AVAREF;
- AMDF;
- ABRF;
- AMQF;
- Medicines Policy and Regulatory Reform.

# Achieving AMRH vision

**African people to have timely access to essential medical products and technologies that are safe, effective and of assured quality.**

- Harmonized Technical Requirements/Common Technical Documents for medical products regulation were successfully developed and implemented in all RECs;
- A number of dossiers were jointly assessed and joint GMP inspections conducted in all RECs resulting in a number of essential medical products registered in the countries within a substantially shorter timelines;
- Important documents and procedures, including for addressing public health emergencies were developed and implemented by the AMRH Technical Committees, e.g., AVAREF, AMDF, ABRF, AMQF and others.

## African Vaccine Regulators Forum (AVAREF) facing the COVID-19 pandemic

- AVAREF series of webinars to share information about products under development against COVID-19 and harmonization of the review and processing of COVID-19 clinical trial applications.
- AVAREF developed and adopted a critical document – the Strategy and Guidance for Emergency Preparedness;
  - The first application for an emergency joint review using this procedure commenced in July 2020.

# African Medical Devices Forum (AMDF)

**AMDF COVID-19 Task Force** established with the working groups focusing on four key priority activities:

- List of COVID-19 IVDs which will be updated from time to time:
- List of medical devices and other products for prevention, control and case management:
- Mechanism to receive feedback on substandard and falsified IVDs, medical devices and personal protective equipment (PPEs) and inform NRAs;
- Donations.

## Instead of conclusions - benefits of the harmonization and networking in Africa

**Formation of effective networks between regulatory authorities nationally and internationally is beneficial in:**

- Facilitating saving of scarce resources;
- Eliminating duplicative activities;
- Helping to build trust among the regulators in the continent;
- Paving the way towards establishment and operationalization of the African Medicines Agency (AMA);
- Ultimately – in improving access to most needed essential medical products for the populations in Africa.



[www.who.int/medicines](http://www.who.int/medicines)