Update on prequalification of medicines

UN Medicines & Diagnostics Prequalification Programme: Future Needs and Strategic Options

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Prequalification of essential medicines

- The UN prequalification program is an action plan for expanding access for the hardest hit by
  - HIV/AIDS
  - Tuberculosis
  - Malaria
- for ensuring quality, efficacy and safety of medicines all the way through the medicines supply chain.

Why the prequalification is needed

- **Problems**
  - Millions of people with HIV/AIDS, tuberculosis and malaria, have no or limited access to treatment
  - Procurement and supply of substandard and counterfeit products in different countries
  - Weak/absent QA systems of medicines supply chain
  - Lot of money invested in procurement

    ➔no harmonized quality assurance system available for procurement organizations/initiatives
- **Risks**
  - Sourcing of poor quality products or even counterfeit medicines ➔ risk to patients, treatment failure, resistance, reputation

Challenges of prequalification

- **Demand** for affordable antiretrovirals, anti-malaria drugs and anti-tuberculosis drugs is increasing
- Increasing number of generic manufacturers offering products
- **Challenges** for UN family and procurement agencies to ensure supply of quality products

Prequalification basic principles

- **Voluntary** for participating manufacturers
- **Legitimate** - Procedure and standards approved through WHO Expert Committee system, involving all Member States and governing bodies
- **Widely discussed**
  - **FIP Congress, Nice 2002**
  - **ICDRA 2002 and 2004 (>100 national drug regulatory authorities)**
- **Transparent:** all information on **http://mednet3.who.int/prequal/**
- **Open** to innovators and multi-source/generic manufacturers
- **No cost** for applicants during pilot phase

Expected outcome of prequalification

- List of products and manufacturers approved for UN procurement
  - Meeting international norms and standards on quality, safety, and efficacy
- Better access to treatment
  - Fair procurement mechanisms (e.g. tender, competition)
  - WHO commitment to developing better access to quality medicines
- Harmonization
  - DRAs, WHO treatment programs, NGOs, procurement organizations
  - Ongoing monitoring of quality, safety & efficacy of essential medicines
- Capacity building
  - DRA's: life-time learning experience in assessment and inspection
  - Manufacturers: free feed-back on performance and advice how to improve

How prequalification is organized

- **Role of WHO:**
  - **Managing and organizing the project on behalf of the UN**
  - **provide technical and scientific support and guarantee that international norms and standards are applied all through the process of assessment, inspection and quality control**
- **Partners:**
  - **UNICEF, UN Population Fund (UNFPA), UNAIDS and with the support of the World Bank**
  - **Anti-malarial and anti-TB products: Roll Back Malaria and Stop TB (Global Drug Facility); HIV/AIDS Department**
- **Actors:**
  - **Assessors and inspectors of National DRAs as well as National Quality Control Laboratories of pIC/S and ICH member countries**

Training activities

- In 2005 two one week comprehensive training courses on quality of TB drugs and ARVs (Malaysia, China)
- Two more courses in pipeline (Ukraine, China)
- Three GMP training courses (South-Africa, China)
- Upcoming GMP training course in Tanzania (with PQ participation)
- Training of QC lab officials

Current status – September 2005

- **Started with HIV/AIDS products in 2001 – malaria and TB products later**

- **Prequalified products (Sept 2005)**

		Dossiers arrived (July 2005)	
• 98	HIV related medicines	- 289 (Feb-05)	316 (Aug -05)
• 8	anti-tuberculosis medicines	- 153	156
• 2	anti-malarial medicines	- 46	48
• **108**		**488**	**520**

- **Ongoing assessments and follow-up**
  - **Products**
  - **Manufacturing sites**
  - **CROs**
  - **Drug quality control laboratories**

Ongoing monitoring and requalification

- Samples taken after supply – QC and checks
- Routine inspections and additional inspections
- Changes and variations controlled
  - Products and manufacturers
- Requalification (re-assessment) every 3 years
- World Health Assembly resolution: WHA57.14 of May 2004
  - Public reports requested
  - WHOPIRs and WHOPARs now on the web
  - Increasing interest in WHO Public Inspection Reports (WHOPIR)

Recent news and new challenges

- 2005 changes in GFTAM procurement policy – challenges for prequalification
- Confidentiality Agreement with the US FDA
- Recognition of US FDA tentative approval process for ARVs based on the scientific assessment done by FDA
- Additional fields of cooperation with European Directorate of the Quality Medicines (responsible for European Pharmacopoeia)
- Jointly funded post established with UNICEF to help managing the assessment weeks in Copenhagen from Sept 2005
- Resources for 2006/2007

Summary and conclusion

- **Good news**
  - Many products and suppliers comply with the standards
  - Many suppliers appreciate feedback and are willing to improve
  - Unique technical knowledge obtained about products, especially about generic antiretrovirals and antimalarials
- **Bad news**
  - Only limited number of products have met the required standards
  - Takes time to get into compliance: • data to be generated • tests to be carried out • GMP upgrade needed
  - Bad quality generics undermine public confidence in generics
  - Quality has its price (e.g. TB)

Summary and conclusion CONT…

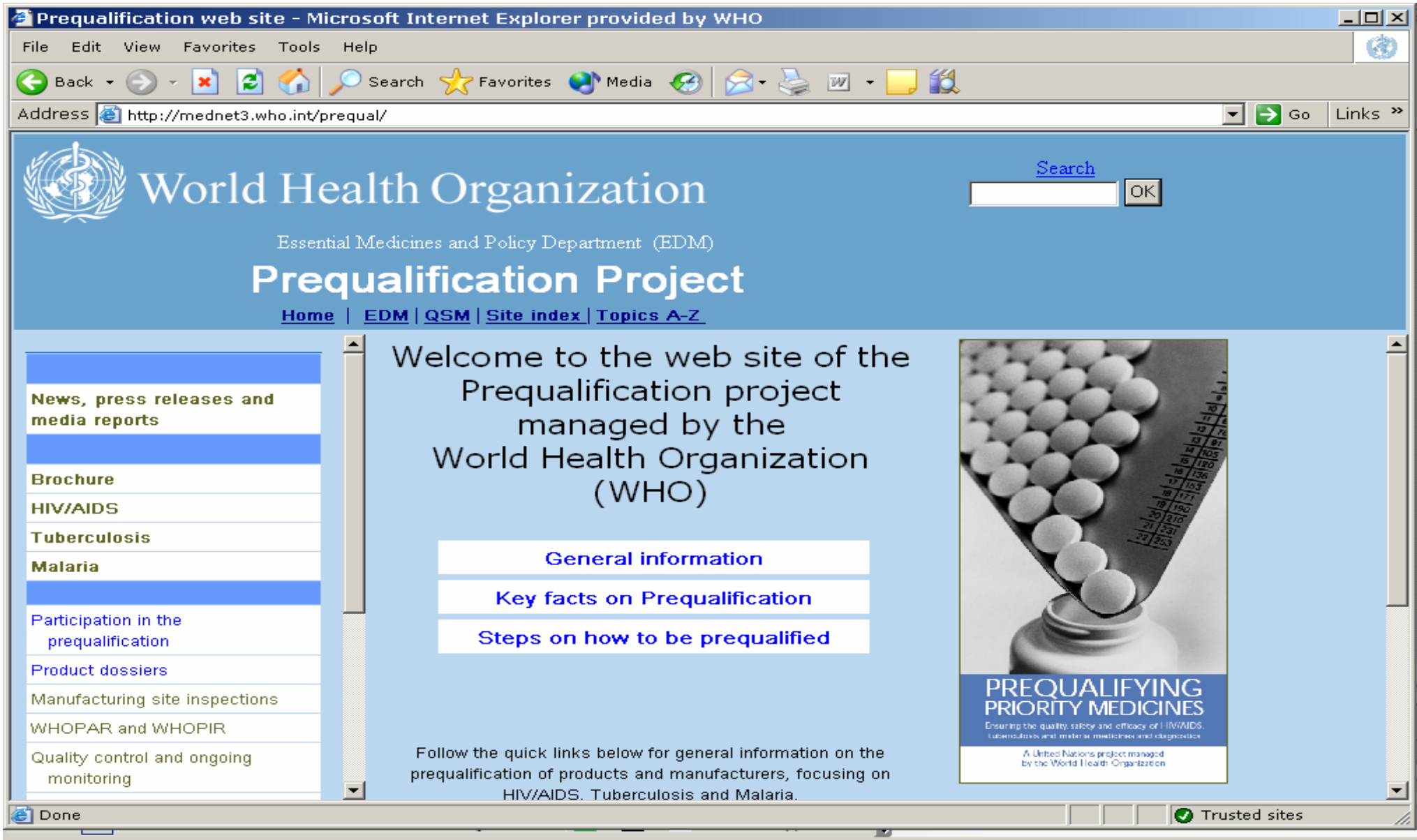
***Quality* can not be assessed, tested or inspected *into* the product**

BUT

it has to be built into it!

More technical help to manufacturers in developing countries is needed

http://mednet3.who.int/prequal/



Prequalification of RH medicines - update

- **Start-up of PQ/RH is included in the WHO/PATH/Gates partnership (Phase 2) – expected to start later in 2006**
- **Criteria for selection of medicines have been set in 2004**
  - **Public health relevance**
  - **High economic volume**
  - **Known quality risks (need to assist DRAs)**
  - **Examples: oxytocin, ergometrine, injectable contraceptives**
  - **Second line: oral contraceptives, antihypertensives**
- **Methodological advice on PQ/RH (devices) by partners**
  - **Condoms? IUDs?**

PQ/RH: proposed next steps

- Complete Phase 1 of WHO/PATH/Gates partnership; release funds for Phase 2
- Final selection of items for first wave PQ/RH to be made by UN partners (WHO/RH, UNFPA and WHO/QSM)
- Call for expression of interest by manufacturers (start with short list of medicines; expand from there)
- PQ/RH-devices (if agreed)
  - Make UN (WHO/UNFPA) analysis of current practices
  - Transfer / add PQ principles where needed