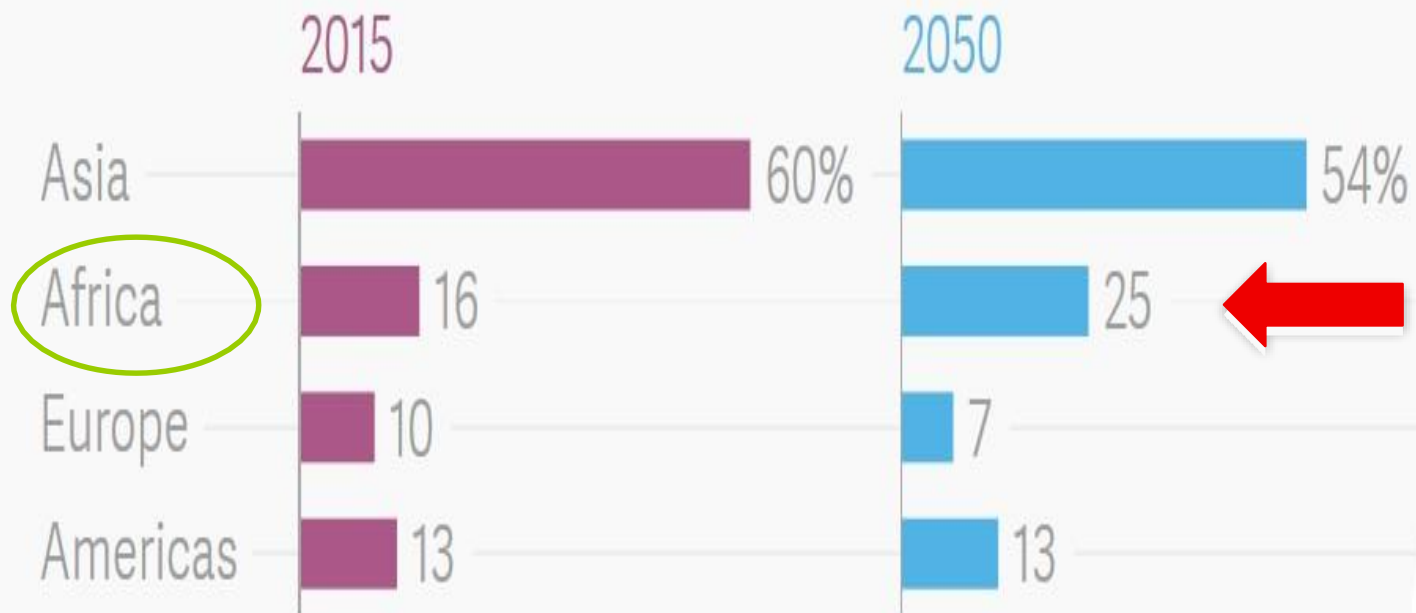


Advancing Vaccine Development and Manufacturing in Africa



A quarter of the world's population will live in Africa by 2050...

Share of global population by region



Δ T L Δ S

Data: United Nations World Population Prospects 2015 Revision

Over 60% of unicef volumes come to Africa

2013 Vaccines Supplies: US\$ 1, 285 million

2.79
billion doses

2,185
shipments

Source UNICEF Supply Division

Immunization Supplies

Vaccines

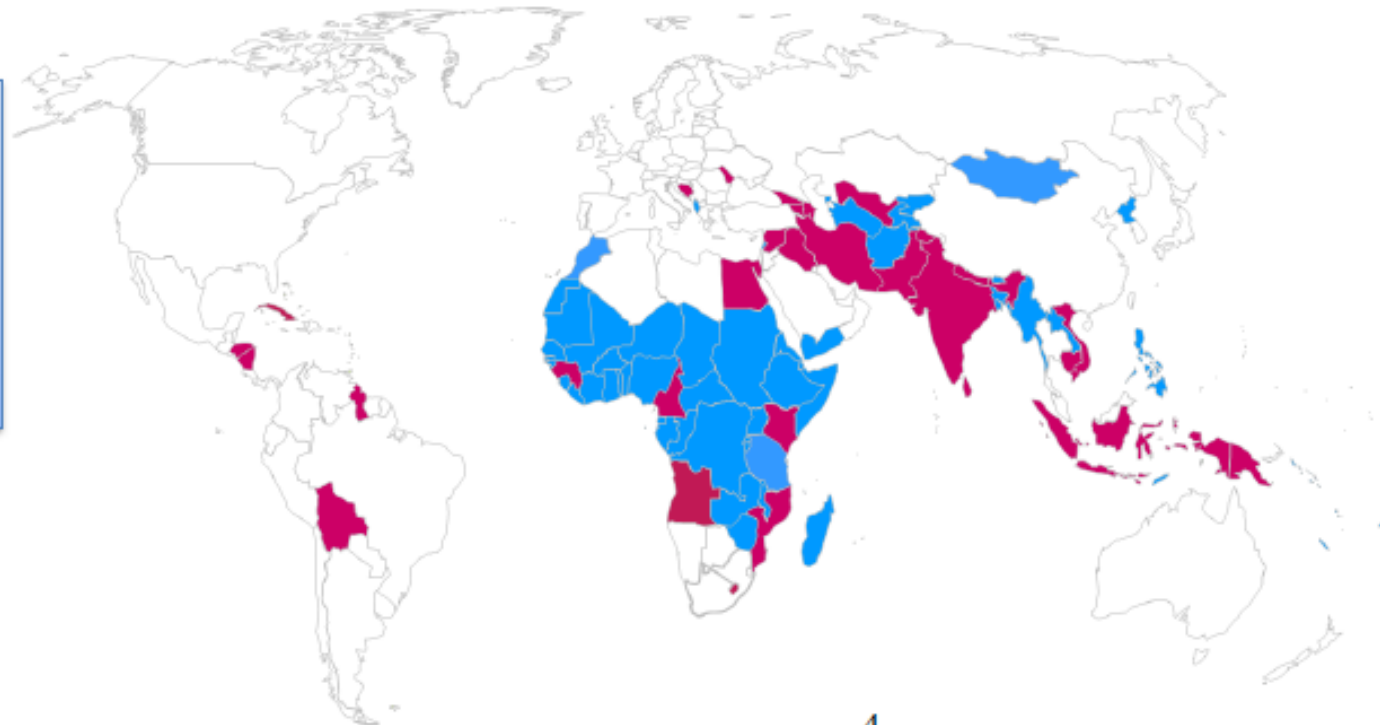
BCG , DTP, TT/Td/DT, Measles containing, OPV, HepB, YF, DTP-HepB, DTP-HepB/Hib, DTP/Hib, Hib, MR, Meningitis, MMR, PCV, RV IPV, HPV etc.

Safe Injection equipment

Cold Chain Equipment

Countries UNICEF
procures on behalf of

- Full schedule
- Partial schedule



4

Source: UNICEF Supply Division

One in five children in Africa lack access to all available vaccines.



It's time to accelerate action toward universal access to immunization across the continent.

#VaccinesWork

One in five children in Africa does not receive the vaccines they need.



It's time to **accelerate action** toward universal access to immunization in Africa.

#VaccinesWork



Africa produces
less than 1%
of its own vaccine
needs!

2018: No African flu manufacturing capacity

Countries with influenza vaccine production capacity in 2006 and following implementation of the WHO Technology transfer project



The Current Reality

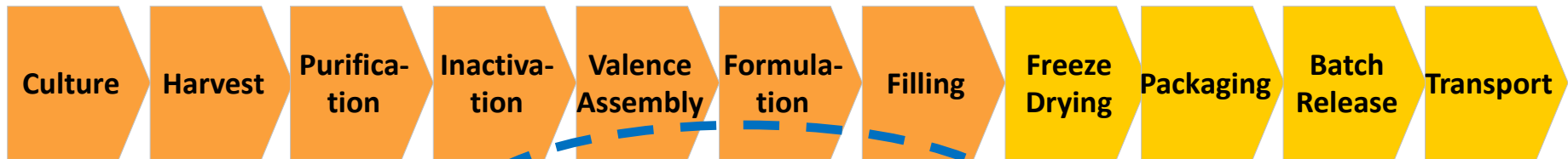
Lack of vaccine manufacturing capacity could potentially lead to:



Vaccine Manufacture is a **complex multi-step** process

Industrial Operations

Bulk Production



up to 12 months

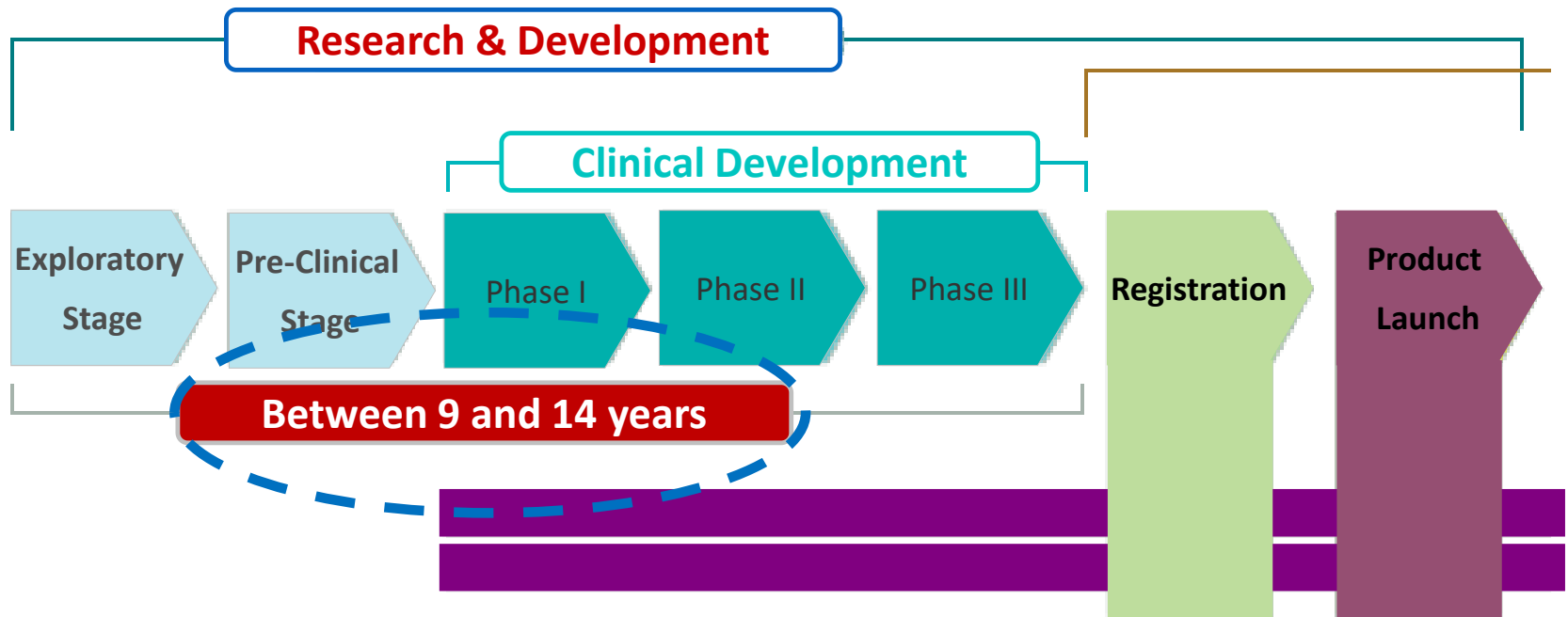
Quality: Quality Control, Quality Assurance

Pharmacovigilance

70%

of a vaccine's production time
dedicated to quality control

Vaccine development is a complex process



60-100 million USD investment

Setting up vaccine capacity



- It takes longer than planned!
- It costs more than estimated!
- It's not as simple as you think!

“Vaccines are Good for Children and Economies”

THE BLOG, Feb 08, 2017

[By Dr Orin Levine](#)

“Expanding use of vaccines could save up to \$44 for every dollar spent”

Science Daily: February 8, 2016

Source: Johns Hopkins Bloomberg School of Public Health

Vaccine Industry Swot Analysis

Strengths	Weaknesses
<ul style="list-style-type: none"> • Prevent Diseases • Vaccines are widely available • National Program have reduced the cost as a barrier to vaccination • There are no 'generics' in vaccines • Few decision makers (governments/ unicef/WHO/GAVI) 	<ul style="list-style-type: none"> • Vaccine R&D is lengthy and expensive • Less awareness to the benefit of vaccines • Vaccine manufacturing: one of the highest cost in the pharmaceutical industry • Regulatory approvals are lengthy even when there are similar products
Opportunities	Threats
<ul style="list-style-type: none"> • Global recognition of the benefits of immunisation • Vaccines for Diseases currently without a vaccine • Vaccines are looked at for treatment of non- communicable diseases 	<ul style="list-style-type: none"> • Only the strongest survive • India and China depend on large populations an cohorts and protectionism • “western companies” protect their IP • Anti- vaccination movements

Enter...



AFRICAN VACCINE MANUFACTURING INITIATIVE

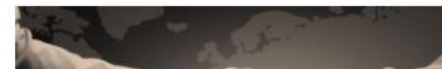
Website: www.avmi-africa.org

Ensuring Africa has the capacity to manufacture vaccines

Breaking the cycle of dependency

[Learn More](#)

[Contact Us](#)



To promote the establishment of sustainable human vaccine manufacturing capacity in Africa

Role of Catalyst and Coordinator

- **Promote, support and coordinate** efforts of the African vaccine manufacturers and other interested parties.
- **Work with partners (public and private).**

Vaccine Manufacturing in the **PMPA** context

- Vaccine manufacturing is considered **highly important in today's Africa**
 - Establish with long term goals/vision
 - the production capacity to rapidly respond to Africa's needs
 - provide a sustainable source of high quality products to address vaccine preventable diseases.



VMIPA STUDY

VACCINE MANUFACTURING AND PROCUREMENT IN AFRICA

An analytical assessment of vaccine manufacturing capacity and
procurement mechanisms for establishing sustainable vaccine
manufacturing capacity in Africa



UNITED NATIONS
DEVELOPMENT PROGRAMME



World Health
Organization

An **analytical** assessment of vaccine **manufacturing** capacity and **procurement** mechanisms for establishing sustainable vaccine manufacturing capacity in Africa.

A comprehensive overview of the current situation, main directions, issues, challenges and opportunities relating to vaccine manufacture on the continent.

Key relationship

Manufacturing



Procurement

Sustainability

VMPPA Study: Scope

Focus Area 1

Vaccine **Market**
Dynamics in Africa

Focus Area 2

Vaccine
Procurement and
Financing
Mechanisms

Focus Area 3

Feasibility of
Establishing
Sustainable
**Manufacturing
Capacity**

Focus Area 4

**Financing and
funding** mechanisms
to establish
sustainable vaccine
manufacturing

- **Market**
- **Procurement**
- **Manufacturing**
- **Financing & Funding**

Key findings of the VMPPA study

Vaccine Market

- **African demand is booming:** vaccine doses, vaccine types, increased populations, immunization coverage & vaccine expenditure

Vaccine Procurement

- **Dominant procurement mechanism is Africa:**
UNICEF SD
45 out of 54 countries use UNICEF SD

Vaccine Manufacturing

- **Heterogeneous levels of capacities and capabilities**

Vaccine Funding

- **Manufacturing facility cost :** between USD 60 – 130 million, with CAPEX at 60%

2016: Production capacity

GROUP 1: Companies with locally produced and marketed products: 3	GROUP 2: Companies at late stage of industrial development and manufacturing (no vaccines currently produced): 1	GROUP 3: Companies at very preliminary planning of vaccine development (no vaccines currently produced): 4
Pasteur Institute in Dakar, Senegal*	Biovac, South Africa	Pasteur Institute, Algeria
Pasteur Institute Tunis, Tunisia**		Pasteur Institute, Morocco
Egyvac-Vacsera, Egypt**		EPHI, Ethiopia
		Biovaccines, Nigeria

* Vaccines: Yellow Fever

** Vaccines: BCG

*** Vaccines: Tetanus toxoid, Cholera Typhoid, Cholera/typhoid, DT, DTP, DTP-Hib, Meningitis AC (polysaccharide)

Other products: Insulin, various antisera

2016: Vaccine value chain assessment



THE BIOVAC INSTITUTE
The science of protecting life

African Companies CAPABILITIES	GROUP 1: Companies with locally produced and marketed products			GROUP 2: Companies at late stage of vaccine development & manufacturing
	Institut Pasteur Dakar (Senegal)	Vacsera (Egypt)	Institut Pasteur (Tunisia)	Biovac (South Africa)
Level 1: Import for Distribution				
Level 2: Packaging and Labeling				
Level 3: Product Manufacturing (fill & finish)				
Level 4: API Manufacturing				
Level 5: Research and Development				

VMPP Study Conclusion

- Limited space for multiple major players in the vaccine production field in Africa
- A number of regional hubs could be established.
- Requires the right level of political and technical support
 - a clear, well-funded and coherent regional policymaking and planning approach,
 - development of the necessary ecosystem to establish a viable, competitive and sustainable vaccine manufacturing capability.



UNITED NATIONS
INDUSTRIAL DEVELOPMENT ORGANIZATION



World Health
Organization



WHITE PAPER

Establishing Manufacturing Capabilities for Human Vaccines

Key cost drivers and factors to consider when planning the
establishment of a vaccine production facility



A summary of key cost drivers and factors to consider when planning the establishment of a vaccine production facility.

An introduction to the manufacturing of human vaccines, providing information about the vaccine market, investment costs, project timelines and other factors to take into consideration.

WHITE PAPER

Commercialising vaccines:

A methodology to identify potential market opportunities
and conduct outline assessments

Case study: South Africa

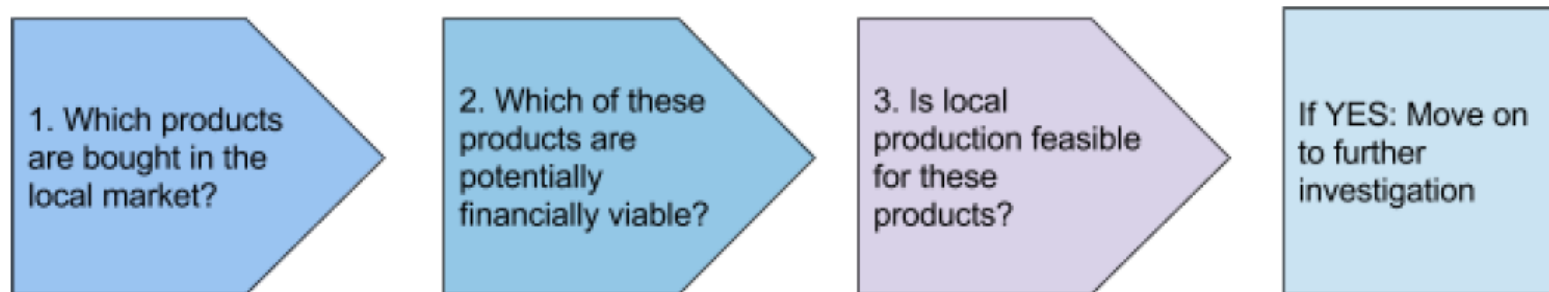
Global UNIDO Project:
Strengthening the local production
of essential medicines in developing countries
through advisory and capacity building support

2018

A methodology to identify
potential commercially
viable market opportunities
and conduct outline
assessments.

Country Case Study

- The study is to establish the initial evaluation to decide which vaccines may be worth manufacturing for a particular market.



- **First Phase:** Understanding the country's market for vaccines
- **Second Phase:** Identifying financially viable candidates for local production
- **Third Phase:** Assessing feasibility of local production

Profiling and Positioning

2016	<ul style="list-style-type: none">• Ministerial Conference on Immunization in Africa• GVIRF
2017	<ul style="list-style-type: none">• DCVMN• GET• Website
2018	<ul style="list-style-type: none">• EAC Vaccine Forum• Dubai Vaccine Forum• Advac-Africa• 5th German-African Healthcare symposium

- Partnering with WHO, UNIDO, GIZ, HHS
- Studies and publications
- Meetings with presidents and ministers

AVMI has developed an Advocacy document targeting priorities such as:

1. **Promoting the visibility of AVMI regionally and globally** as the voice for local vaccines and biologicals manufacturing in Africa.
2. **Promoting the development and adoption of a Pan-African vaccines and biologicals policy.**
3. **Leveraging** existing and new **partnerships** (public and private).
4. **Creating a network of advocates** across the region for vaccines and biologicals manufacturing in Africa.
5. **Promoting linkages** with other **infectious diseases area initiatives**

African Manufacturers



Prospective Manufacturers

...establishing local vaccine manufacturing capacity

● Nigeria

- BioVAccines
- Innovative Biotech



● Ghana

- AspirX



● Zambia

- Biomedicalabs

Key challenges

- Secretariat needs to be better resourced with full time people.
- Lack of political support in Africa
- Funding
- Communication
- Mindset
 - Quality | Africa
 - Foreign dependency

Key Focus Areas ?

- Ministerial Conference on Vaccine Development and Manufacture
- REC vaccine fora
- Increasing membership – both in numbers and broader geographical spread throughout the continent
- Fundraising
- Gavi Graduation – AVMI support
- Secure government support
- “BRICS Vaccine R&D Centre”
- ...

Agenda today and tomorrow

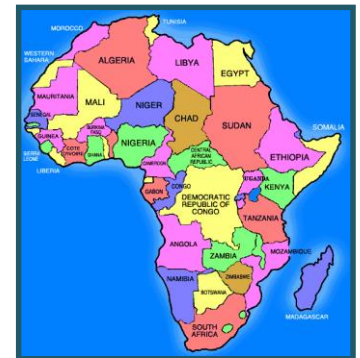
- *Session 2:* **Advancements**
- *Session 3:* **Regional Perspectives**
- *Session 4:* **Knowledge Café**
- *Session 5:* **Key Disease Challenges**
- *Session 6:* **Global Perspectives and Initiatives**
- *Session 8:* **A word from our sponsors**
- *Session 9:* **Key Messages, Decisions and Actions**

AVMI role is crucial ...

Supporting country decision-making processes and business model evaluations

Contributing to capacity strengthening and building partnerships

Advocating for sustained access & viable vaccine development and production in the continent, building from the Heads of State Declaration on Immunization



African Vaccine Manufacturing Initiative (AVMI)

In summary...

- Africa has limited production capacity yet is the most in need of routine vaccines
- Africa has zero vaccine manufacturing capability to respond to pandemics
- A country needing to set up a vaccine manufacturer needs to have the right ecosystem in place (e.g. regulatory, skilled population, maintenance of sophisticated equipment, higher education system)
- Unless Africa procures its vaccines directly it will remain donor dependent and the cycle will not be broken.
- **It is possible to have more manufacturers provided that there is policy coherence within country and amongst the African states/regions.**

If this were easy... we would not be here.

We are here because it is difficult and challenging.

We are here because it is necessary and possible

” **Africa** is the future:
By 2050, Africa's
population will
number 2.5 billion.
One in four people
on earth will be
African. ”

- To speak of the future, one must speak of Africa – Europe's twin continent. *Jean-Claude Juncker*

- Universal health coverage is ultimately a political choice. It is the responsibility of every country and national government to pursue it. It takes vision courage and long term thinking

Dr Tedros Adhanom Ghebreyesus, Director-General of WHO



With thanks to...

Secretariat

Based in Cape Town,
South Africa



Executive Director

Patrick Tippoo



Technical Officer

Dr Alex Ochem



Information Officer

Daria Kow



Legal Support

Charlie
Nemugumoni



Technical Liason
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Melissa Schouw

...and...

Board of Directors

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Director
Hela Kallel



Director
Amha Kebede



Director
Jean-Vivien Mombouli



Director
Ebrahim Mohamed



Director
Cheikh Boye

Thank You



**The best time to
plant a tree was
20 years ago.
The second best
time is now.**