

# Vaccine Manufacturing In Africa – Current State Supply Map

Enhancing the sustainability of investment for vaccines manufacturing in Africa Addis Abeba, 27 June 2023

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# To move beyond public announcements, Africa CDC, CHAI, and PATH engaged suppliers & developed an up-to-date and nuanced understanding of their plans



#### **Objectives**

- Develop a detailed technical and commercial understanding of vaccines and their production volumes in Africa in the short, medium, and long-term to inform market shaping for sustainable African Vaccine Manufacturing.
- Assess the accurate installed capacity on the continent and evaluate proposed plans for AVM while considering the technical and commercial capabilities of companies involved.
- Understand the challenges individual firms are facing to support & accelerate high-potential plans or increase their probabilities of success



Support and acceleration of high-potential plans to increase probability of African Vx manufacturing success

# Outreach to 30 manufacturers with publicly announced plans to manufacture human vaccines & engagement with 19 African manufacturers



 In-person engagement with 9 manufacturers in 5 countries ensures that this report includes 100% coverage of the commercial scale manufacturing capacity on the continent.

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- Virtual engagement with 10 additional manufacturers allows representative findings for earlier-stage projects:
  - 4 with facility concept design complete
  - 5 with incomplete facility concept design
  - 1 with plans for R&D only

1. The focus of Institut Pasteur de Tunis is vaccine research and development, with intentions to seek a manufacturing and commercial partner.

# With ~2 Bn doses p.a. installed & ordered and a further 2Bn+ doses p.a. planned, DP capacity significantly exceeds the projected 2030 African demand



Annual 5 Dose vial drug product capacity of installed, ordered & future facilities by scenario, Doses (M)



#### **Key Findings**

- The planned increase in standard operations capacity at a continental level exceeds the projected 2030 African vaccine demand (1.5 Bn doses) by more than 2x
- Some installed capacity may be used for Biologics production
- Although individual companies may have valid reasons for their plans, the African manufacturing ecosystem will have excess capacity
- Manufacturers risk underutilization of DP facilities and long-term commercial sustainability

# Plans to expand DS capacity in the next 5 years are underway from 4 manufacturers, but will still see very limited DS capacity overall



Future Production Capacity by Company & Platform (Standard Operations), Reactor Volume (litres) & Eggs (#/per day)



#### **Key Findings**

- DS capacity today is relatively low
- In the next 5 years, the confirmed plans for growth in DS are in Yellow Fever and Cholera, while others have less defined plans
- Growth of bioreactor capacity is based on opportunities and is only located in ML3 geographies
- For a long-term equitable vaccine manufacturing footprint in Africa & to strengthen pandemic preparedness more focus needs to be placed on identifying opportunities for DS capacity
- Note: mRNA capacity not included here

# Absence of TTs for ~80% of the planned DP capacity as well as lack of ML3 status in some countries may constrain capacity utilization



## Installed, Ordered & Future 5-Dose Production Capacity by ML3 & Product Registration Status (Standard Operations), Doses (M)



#### **Key Findings**

- Future vaccine manufacturing capacity is planned in both ML3 and non-ML3 countries, with each expecting to increase capacity by ~1B doses.
- Tech transfers are currently not agreed for ~80% of the total installed, ordered, and future DP capacity.
- Both factors may **limit the viability of this capacity for vaccine production**.

No vaccine TTs in progress but other biologics being made or transferred;
TT in progress for some lines whilst others are not in active TT – Capacity numbers split between categories on a line by line basis;
Company 5 has lost its only tender for PCV;
Sources: CHAI/PATH Current State Vaccine Supply Mapping

### In addition to the 5 TTs for vaccines being produced, 5 additional TTs have started and 10 TTs have been signed, with many more in exploration stage



#### # of technology transfers by status of maturity For 18 45 different vacines Hexa. PCV. MR. Africa Mening. Rota. OCV, Penta, IPV, HepB Influenza. Rabies. C-19 YF, Hexa, PCV, 10 C-19 5 Pre-Deal Talks **TT Deal Signed** Commercially TT Started produced

#### **Key Findings**

- Most tech transfers are for the manufacturing of DP, only 4 tech transfer target manufacturing of DS in
- For some antigens, up to 5 manufacturers are engaged in pre-deal talks with originators **risking market** fragmentation
- Two of the five "commercially produced" vaccines are Covid-19 and thus production is unlikely to be continued

### **Conclusions & emerging recommendations**



- The continent already has 2 Bn doses p.a. of DP capacity installed or on order
- With new projects in the pipeline standard operational capacity could be pushed to 4 Bn doses p.a.
- The risk of DP overcapacity looms with all projects coming online as all future capacity would outstrip demand by >2x if utilized efficiently—greenfield projects still in the planning phase should be carefully considered
- Despite the immense DP capacity, a lack of tech transfers may constrain capacity utilization
- Conversely, well-targeted additional DS manufacturing capabilities and capacities could support pandemic preparedness and long-term competitiveness
- Greater clarity of demand for African-made vaccines is essential to advance business plans and tech transfers—less than 10Mn p.a. is currently being contracted through domestic/international tenders and risking existing facilities' viability
- At an ecosystem level, manufacturers played back strong technical DP capabilities as well as the ability to finance advanced projects
- On the other hand, commercial planning, market access, securing tech transfer partnerships, and expanding DS manufacturing capabilities were highlighted as areas requiring support as well as limitation of trained staff

<sup>•</sup> Complete study publication is planned for Q3

Thank you!



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