

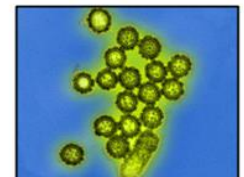
# JOINT UNICEF – UNFPA – WHO meeting

## PROGRAMMATIC SUITABILITY

### Prequalification of Vaccines

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# Programmatic Suitability for PQ (PSPQ)

Ensure that vaccines used in low- and middle-income countries can be used safely and effectively, given the constraints and conditions of their immunization systems



Nicaragua, rotavirus delivery, Photo: Gates Foundation



Mali, polio campaign, Photos: WHO/Olivier Ronveaux

PSPQ: [https://apps.who.int/iris/bitstream/handle/10665/148168/WHO\\_IVB\\_14.10\\_eng.pdf](https://apps.who.int/iris/bitstream/handle/10665/148168/WHO_IVB_14.10_eng.pdf)

## RATIONALE FOR ESTABLISHMENT OF PSPQ

- ❖ Vaccines produced in higher income countries made available to emerging countries
- ❖ Such vaccines show characteristics that while being acceptable for industrialized countries are not always suitable for emerging markets.

### Examples:

- A pneumococcal vaccine filled in non-autodisable pre-filled syringes
- A rotavirus vaccine with poor stability used in situations prone to cold chain break

## Objective of PSPQ

- Judge the programmatic suitability against defined mandatory, critical and preferred characteristics

## Benefits of PSPQ

- Give clear directions to vaccine industry before submission
- Reduce decision-making time

## PROCESS OF REVIEWING THE CHARACTERISTICS OF CANDIDATE VACCINES

PQ dossiers are screened for:

- completeness and compliance with the required format and contents
- compliance with programmatic suitability criteria
  - Rejection of dossier if mandatory characteristics are not met
  - Identified deviation from the critical characteristics or a unique characteristic detected: the product will be referred to the PSPQ Standing Committee (PSPQ SC) for independent review

## The PSPQ Standing Committee

- Is an independent advisory group to the WHO PQ - experts on immunization programmes, regulatory and policy experience.
- Aligned with Immunization Practices Advisory Committee (IPAC).
- Review, discussion and recommendation-making
- The maximum allowed time for review by the PSPQ Standing Committee is 90 days.

# Types of vaccine characteristics

## Mandatory

- Compliance is compulsory

## Critical

- Compliance is compulsory
- Deviations in vaccine characteristics will be reviewed by the PSPQ SC

## Preferred

- Not compulsory
- Reflect programmatic preferences

## Unique & innovative

- There is no guidance document developed
- Will be referred to the PSPQ SC

# Mandatory characteristics

- **Anti-microbial preservative** required in ready to use vaccines containing more than two-doses
- **Thermo-stability.** The vaccine or any component presented for PQ should not require storage at less than -20°C
- **Dose volume** should not be more than 1 ml/per dose for children > 5 years.
- Vaccine presented should not require an intravenous **route of administration**





# Critical characteristics (1)

- The vaccine should fit into currently commonly used schedules of **vaccination visits**.
- Oral vaccines should be ready to use
- **Thermo-stability/ storage:** Vaccines submitted for prequalification requiring storage below +2°C during its shelf-life period should have a minimum of storage above 2°C of 6 months
- **Vaccine Vial Monitor (VVM):** vaccine submitted should present data confirming that it has a thermostability profile to apply VVM.

## Critical characteristics (2)

- Packaging material that can be disposed of appropriately in the field using standard procedures
- Vaccines in pre-filled injection devices should have an auto-disable feature
- Vaccine dosed in standardized volumes (e.g. 1, 0.5, 0.25 ml)



# Preferred characteristics

- Antigenic stability after reconstitution
- Small packed volume
- Small and standardized dose volumes for oral vaccines
- Minimize number of doses that cannot be reused in subsequent sessions once the container is open
- Doses per primary container:
  - $\leq 10$  doses per vial in routine setting
  - $\geq 10$  doses per vial in campaign setting

# Unique or innovative characteristics

Examples:

- Nano-patches
- Nasal aerosols
- Micro-needle application

## **“Assessing the programmatic suitability of vaccine candidates for WHO prequalification”**



<https://www.who.int/publications/i/item/WHO-IVB-14.10>

# THANK YOU

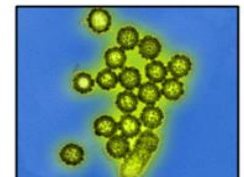


# JOINT UNICEF – UNFPA – WHO meeting

## WHO PQ: Risk benefit assessment procedures

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# Outline of presentation

- Goal and objectives
- WHO regulatory alignment roadmap
- Transition EUL to PQ





# Goal and objectives

## Goal

- to optimize access & availability to safe, efficacious, quality-assured COVID-19 products by further aligning regulatory processes

## Objectives :

- Explain and update on **WHO's roadmap** for aligning regulatory processes impacting access to vaccines during public health emergencies (nOPV2, Covid-19, Mpox)

<https://www.who.int/publications/m/item/roadmap-for-evaluation-of-astrazeneca-azd1222-vaccine-against-covid-19>

- Explain the activities of the evaluation of vaccines under the EUL



# WHO PQ assessment

## Prequalification (PQ) 1987

- Review of extensive quality, safety and efficacy and PSPQ for international supply
- Assessment performed by WHO independent experts
- Reliance on WHO Listed Authority (WLA) - abbreviated process under oversight of mature regulators (evaluation and oversight of programmatic aspects by WHO)
- Pre-submission meetings
- Post-PQ monitoring
- Reassessment/requalification

## Emergency Use Listing (EUL) 2015

- **Risk benefit assessment of essential set of quality, safety and efficacy data for use during PHEs**
- **Rolling review of data**
- Assessment performed by WHO independent experts in collaboration with National Regulatory Authorities (WLA)
- Reliance on WLA - abbreviated process under oversight of mature regulators (evaluation and oversight of programmatic aspects by WHO)
- Pre-submission meetings
- **Post- deployment monitoring**
- **Time limited recommendation**
- **Development should continue for MA/PQ**

**Risk benefit  
i.e Monkeypox**

**Stockpiles**

**Risk benefit  
snake  
antivenoms**



Source: [https://www.who.int/medicines/regulation/prequalification/prequal-vaccines/WHO\\_Evaluation\\_Covid\\_Vaccine.pdf?ua=1](https://www.who.int/medicines/regulation/prequalification/prequal-vaccines/WHO_Evaluation_Covid_Vaccine.pdf?ua=1)

# WHO alignment activities for COVID-19 vaccines

## Development criteria

- ✓ **Target Product Profiles**
- ✓ **Expert Committee on Biological Standards** guidance
- ✓ **Regulatory guidelines**

## Submission requirements

- ✓ **EUL and PQ guidance and Questions & Answers**
- ✓ **EUL/PQ Expressions of Interest** (conditions & evaluation criteria)
- **Labelling & packaging**

## Assessment process

- **Evaluation of candidates** for EUL/PQ (incl. inspection, lot release process & post-listing commitment)
- **Interactions & agreements** with NRAs/SRAs\*
- **Global assessment process\*** with region-designated national authority reps

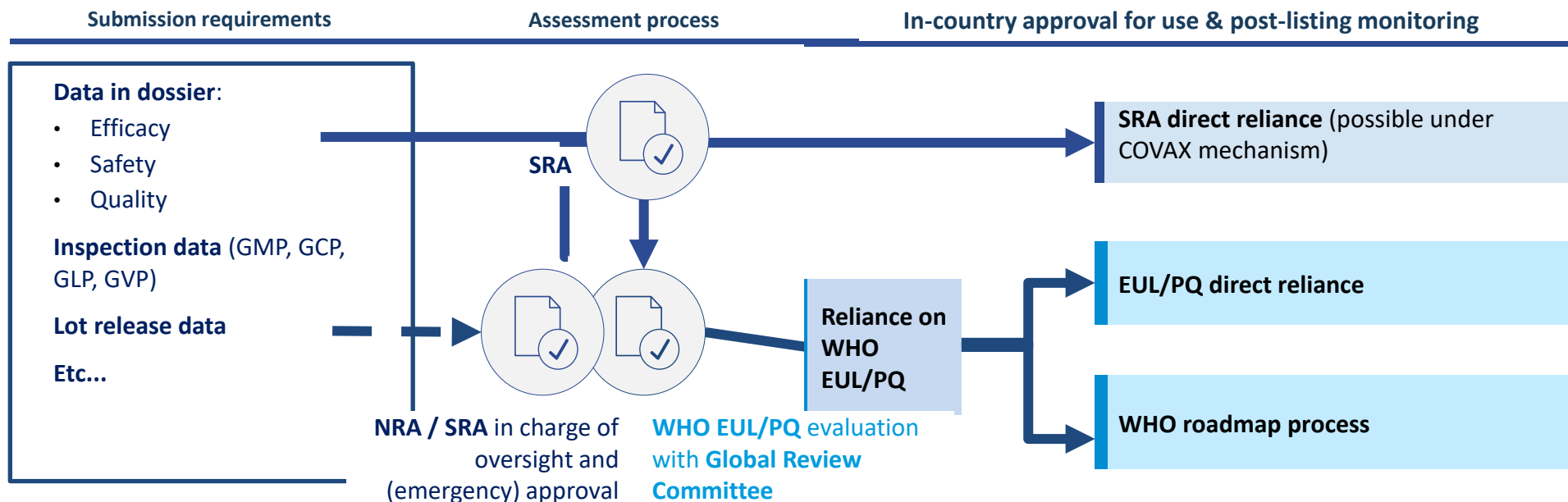
## In-country approval for use & post approval monitoring

- **Country regulatory reliance** on EUL/PQ\*
- Support for **safety monitoring** (based on safety preparedness manual)
- Tools for **risk communication** and strengthening **response capabilities**

- **Roadmap\*** to enable product specific regulatory alignment (assessment process, in-country approval & post-listing monitoring)
- **Alignment ongoing** (Regulatory Advisory Group, ICMRA, regional regulatory networks, Vaccine cluster etc.)
- Regulatory **updates and webinars**
- Best practice principles for **regulatory “agility”**



# WHO regulatory alignment roadmap for COVID-19 vaccines: overview of recognized pathways, and summary of related alignment activities



- Aligned requirements with NRA, in charge of oversight
- Participant NRA requirements captured
- Single format for application submitted by manufacturers
- Interactions & agreements with NRAs/ SRAs in charge of oversight early in process (incl. report sharing, aligned requirements)
- Global assessment with region-designated national authority representatives
- Transparent sharing of reports with all regulatory authorities for decision making process
- Promotion of reliance principles in countries based on facilitated pathways (direct, through regional networks, via regional champions/NRAs of reference)

# Support to regions & countries

Designate lead NRAs in the region: WHO EUL assessment  
Facilitation expedited national approval

Product Evaluation group PEG: Roster of experts, Regulatory experts all regions.

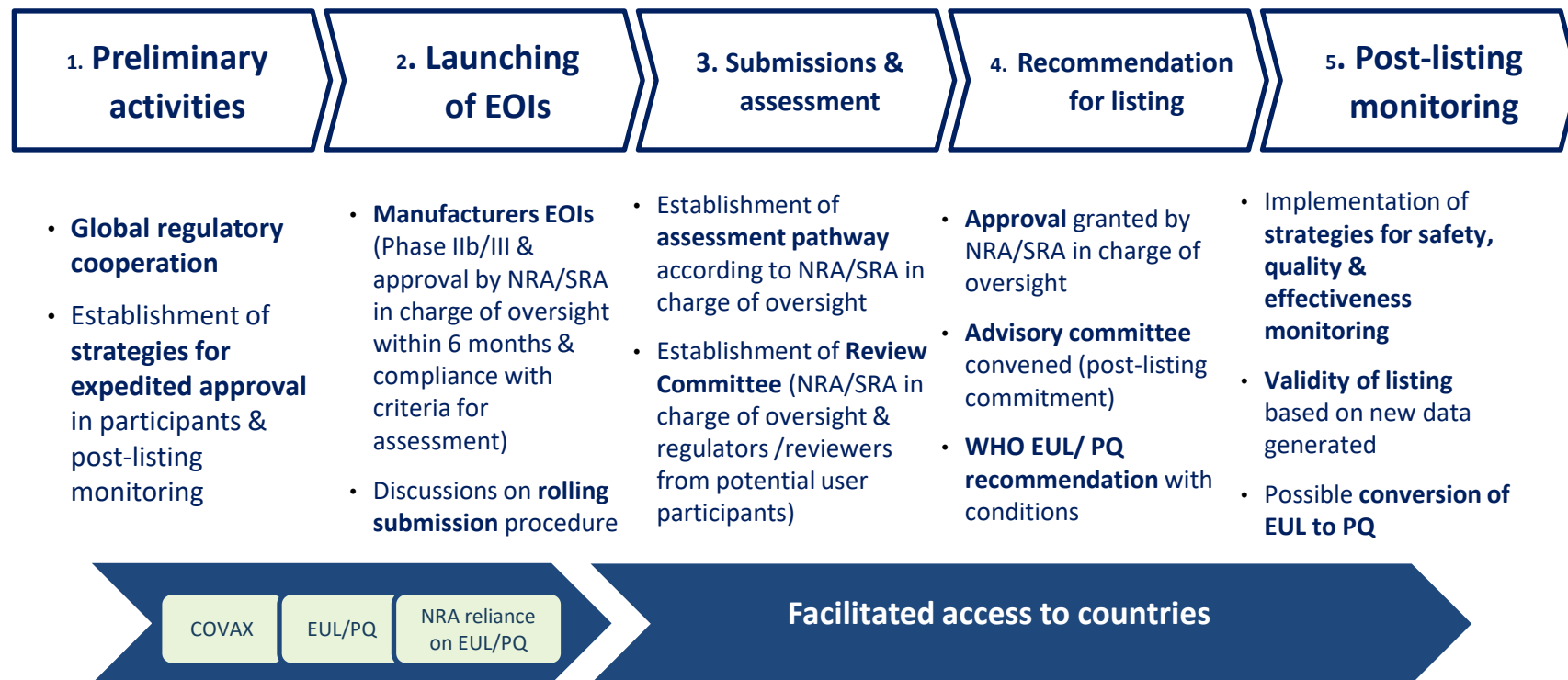
Technical Advisory group EUL (TAG-EUL): Risk benefit assessment

<https://extranet.who.int/pqweb/vaccines/TAG-EUL>

Collaboration agreement with NRAs of references and others on regulatory oversight

1. Sharing dossier and EUL reports with 105 countries
2. Discussion on outcome of review
3. Additional guidance for decision making on expedited authorization
  - One on one discussion with countries
  - Support to RO and agencies providing relevant docs
4. Post listing changes: Sharing assessment reports

# In-country expedited approval for use & post-listing monitoring: the WHO regulatory alignment roadmap



- **Sharing of assessment/ inspection reports / lot release** with regional-designated country reps
- **WHO-facilitated national approval process**





# Novel oral polio vaccine type 2


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## Poliomyelitis (Polio) vaccines



**Roadmap for evaluation of novel oral polio vaccine type 2**

One of the first applications of the EUL is the assessment of the novel oral polio vaccine type 2, for which WHO has developed a roadmap. The nOPV2 is expected to become a key tool in addressing type-2 vaccine derived polio and could significantly impact on progress in polio eradication.

Type 2 vaccine derived polio is currently affecting a number of countries, notably in Africa but also in some parts of the Middle East and Asia (including Somalia, Pakistan and the Philippines). Over the past five years, a total of 423 cases have been detected in 19 countries. This occurs when routine immunization coverage is low or when supplementary immunization activities are poorly conducted and not enough children are reached with the vaccine. As a result, a population is left under-immunized and the vaccine virus is able to circulate among unvaccinated children and undergo genetic changes. Hence, the main risk factor is low vaccination coverage. A fully immunized population is protected against both vaccine-derived and wild polioviruses.

One of the key actions to address the current vaccine-derived polio emergency is to roll out the nOPV2.

[Back to Emergency Use Listing Vaccines](#)





## Highlights of Covid 19 vaccines under EUL

### Main features

12 vaccines with different manufacturing platforms

- mRNA (2)
- Viral vector (4)
- Inactivated (3)
- Protein subunit (3)

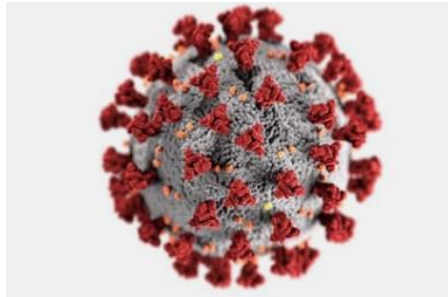
- Expanding regulatory oversight and manufacturing sites
- 19 NRAs of reference (mainly EMA)
- over 70 manufacturing sites

A range of age indications, shelf life and storage conditions

Covid 19 adapted vaccines

Approval by authority of reference

WHO EUL recommendation



The WHO Director-General concurs with the advice offered by the Committee regarding the ongoing COVID-19 pandemic. He determines that COVID-19 is now an established and ongoing health issue which no longer constitutes a public health emergency of international concern (PHEIC).



# Implications of the use of EUL/PQ if PHEIC is terminated

|                             |  Covid-19 vaccines                                                                                                                                                               |  In vitro diagnostics                                            |  Medicines / Biologicals                                                                                                                                                                                                                     |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>EUL listed</b>           | EUL status is maintained for a limited period while the product transitions to PQ and if the product continues to be supplied to LMICs                                                                                                                            | EUL status and procurement eligibility will be maintained until a PQ decision is taken, provided that the product is submitted for PQ assessment* |                                                                                                                                                                                                                                                                                                                                 |
| <b>Under EUL assessment</b> | EUL applications to be closed except for those close to EUL listing                                                                                                                                                                                               |                                                                                                                                                   | <ul style="list-style-type: none"> <li>• All Covid-19 treatments are assessed under PQ procedure</li> <li>• Based on clinical recommendation, PQed products will be maintained in the PQ list</li> <li>• PQ assessment will continue based on clinical recommendations, but with less priority than during the PHEIC</li> </ul> |
| <b>New</b>                  | Submission and acceptance for PQ assessment is made on a case-by-case basis based on public health<br>bei * Ag RDTs and NAT assays to be transitioned into PQ with a 6-month transition period for submission defined in collaboration with other WHO departments | PQ applications are accepted if products are within PQ eligibility (defined in collaboration with WHE)                                            |                                                                                                                                                                                                                                                                                                                                 |



# Implications to regulators in LMICs and procurement agencies

|                               |  <b>Covid-19 vaccines</b>                                                                                                                                                                                                                   |  <b>In vitro diagnostics</b>                                                                                                                                                                                                              |  <b>Medicines / Biologicals</b> |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <b>NRAs*<br/>in<br/>LMICs</b> | <ul style="list-style-type: none"> <li>Each NRA in LMICs may decide to switch from emergency authorization to standard market authorization, provided that the NRA receives an application</li> </ul> <p>Note: As of 31 Dec 2022, NRAs in &gt;110 countries have issued 5'436 regulatory clearances for 7 EULEd vaccines</p> | <ul style="list-style-type: none"> <li>Procurement decisions taken by each country and procurement agencies</li> <li>If a product is maintained in the PQ list, WHO PQ teams assist NRAs' decision making by sharing assessment reports (including variation reports) via Collaborative Registration Procedures</li> </ul> |                                                                                                                    |

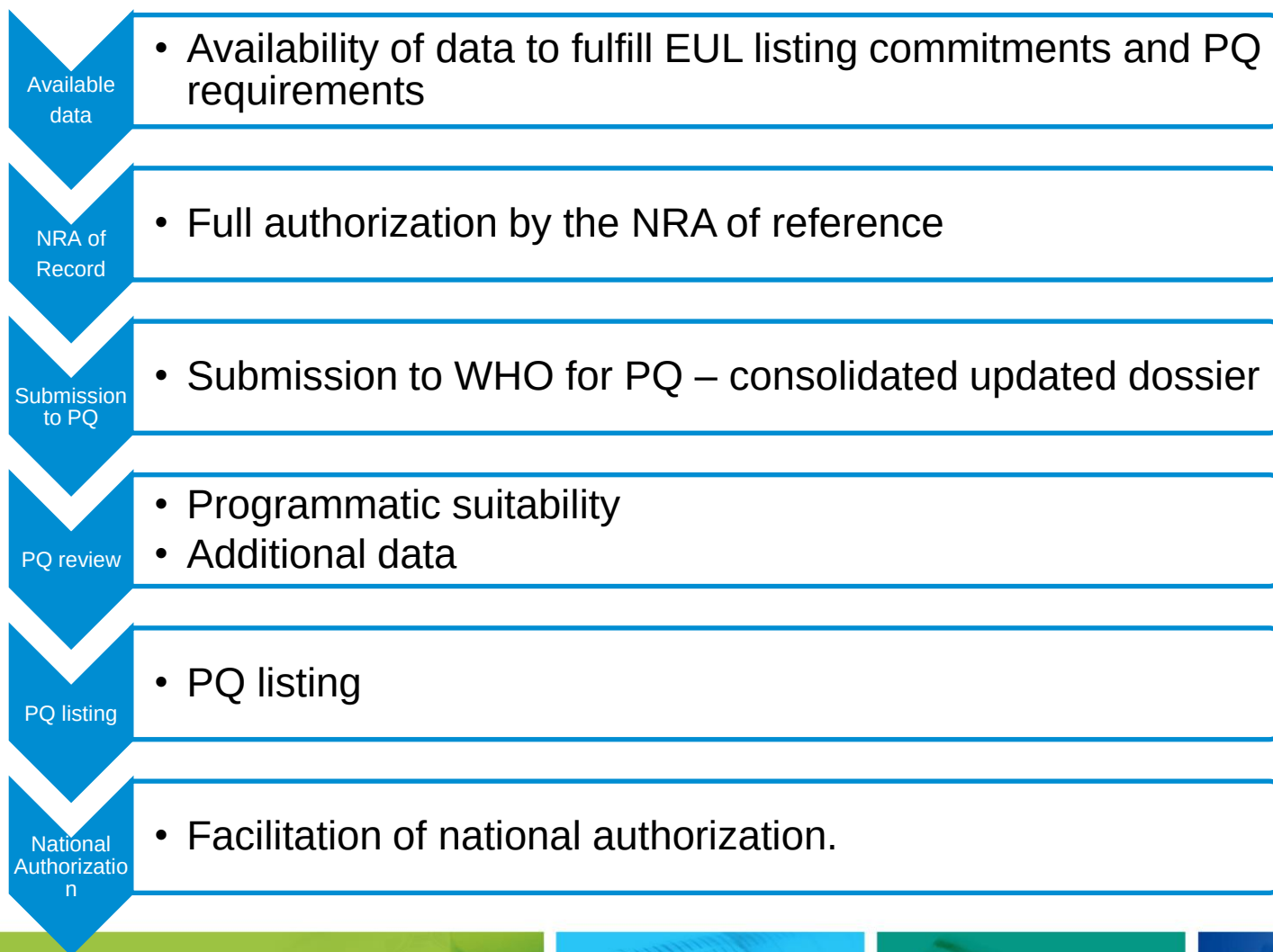
\* NRAs: National Regulatory Authorities



# Transition EUL to PQ



## Steps for transition Covid-19 vaccines from EUL to PQ

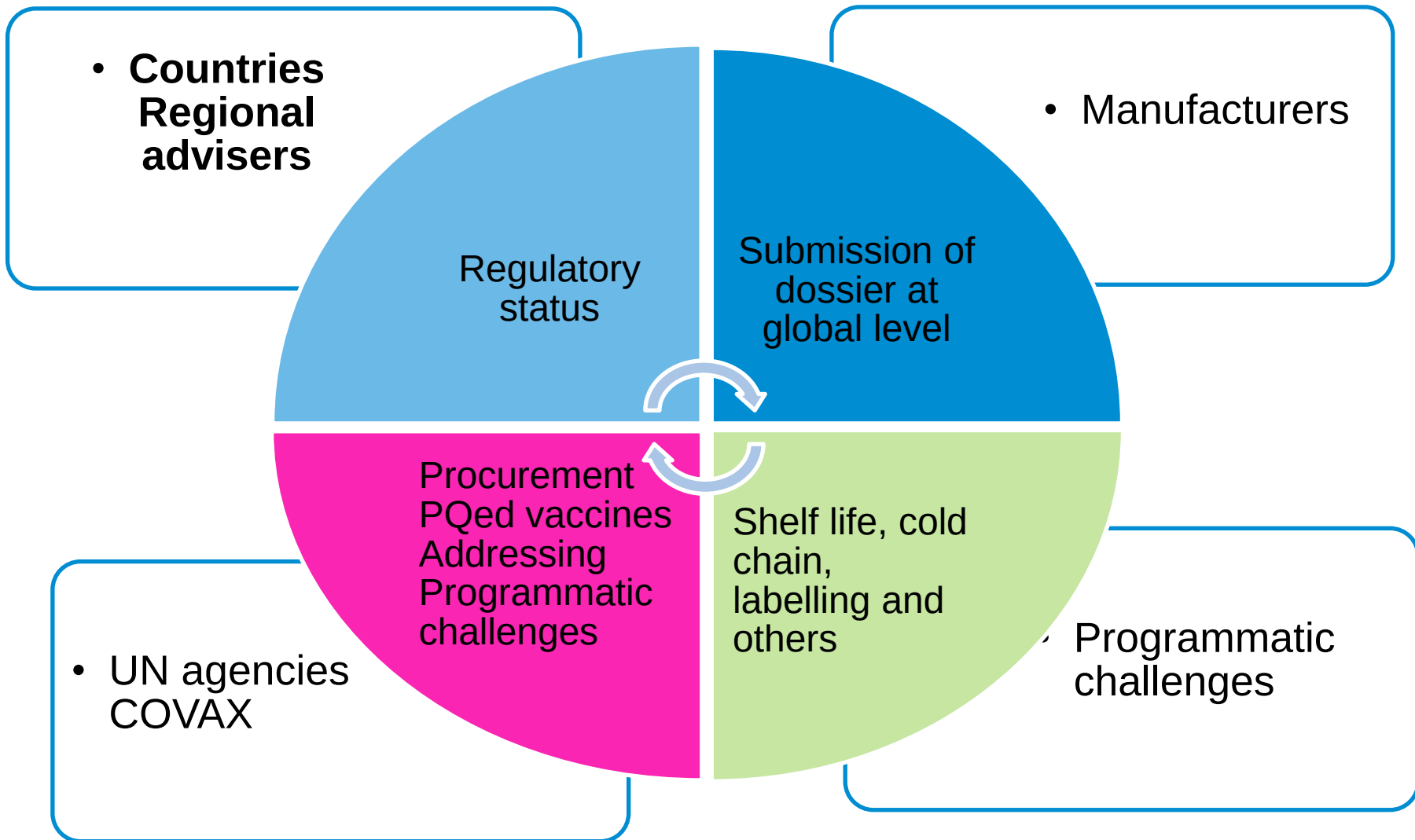


# Covid 19 vaccines recommended under EUL

## Deviation Programmatic suitability criteria for PQ

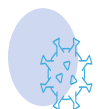
| Criteria                                                          | Applicable to         | Solutions & implications                                                                                           |
|-------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------|
| <b>Mandatory:</b><br>Storage conditions less than – 20 C          | mRNA Pfizer vaccine   | Ultra Cold chain equipment at central level<br>Training Health care workers<br><b>Implications:</b><br>Wastages    |
| <b>Mandatory:</b><br>Antimicrobial preservative more than 2 doses | All Covid 19 vaccines | Training HCW to discard vaccines at the end of the session once vial is opened<br><br><b>Implication:</b> Wastages |
| <b>Critical:</b><br>Storage at 2-8 for more than 6 months         | mRNA Moderna          | Training HCW<br><b>Implication:</b> Wastages                                                                       |
| <b>Critical</b><br>VVM                                            | All Covid 19 vaccines | Maintenance cold chain<br><b>Implication:</b> Wastages                                                             |

## Support to member states

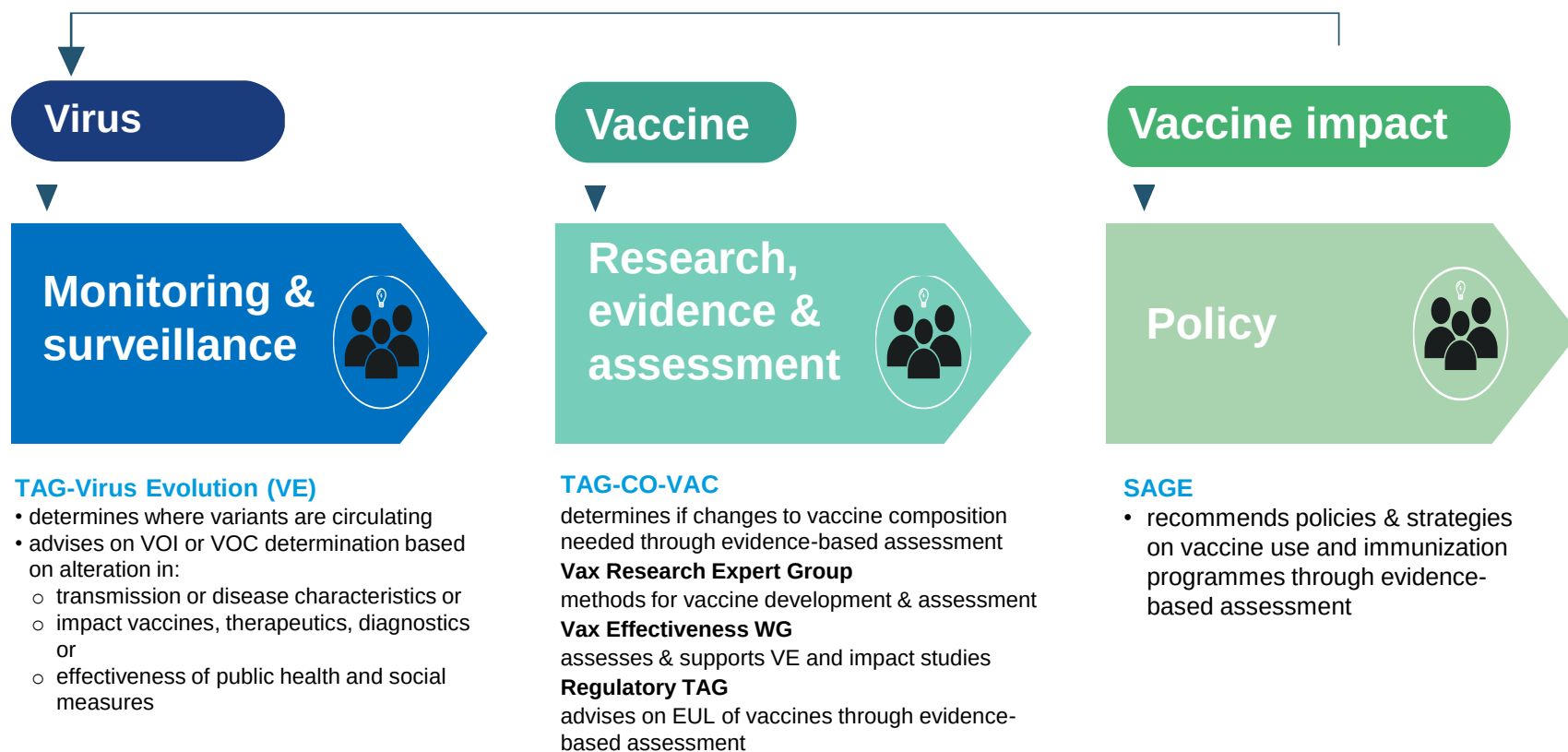




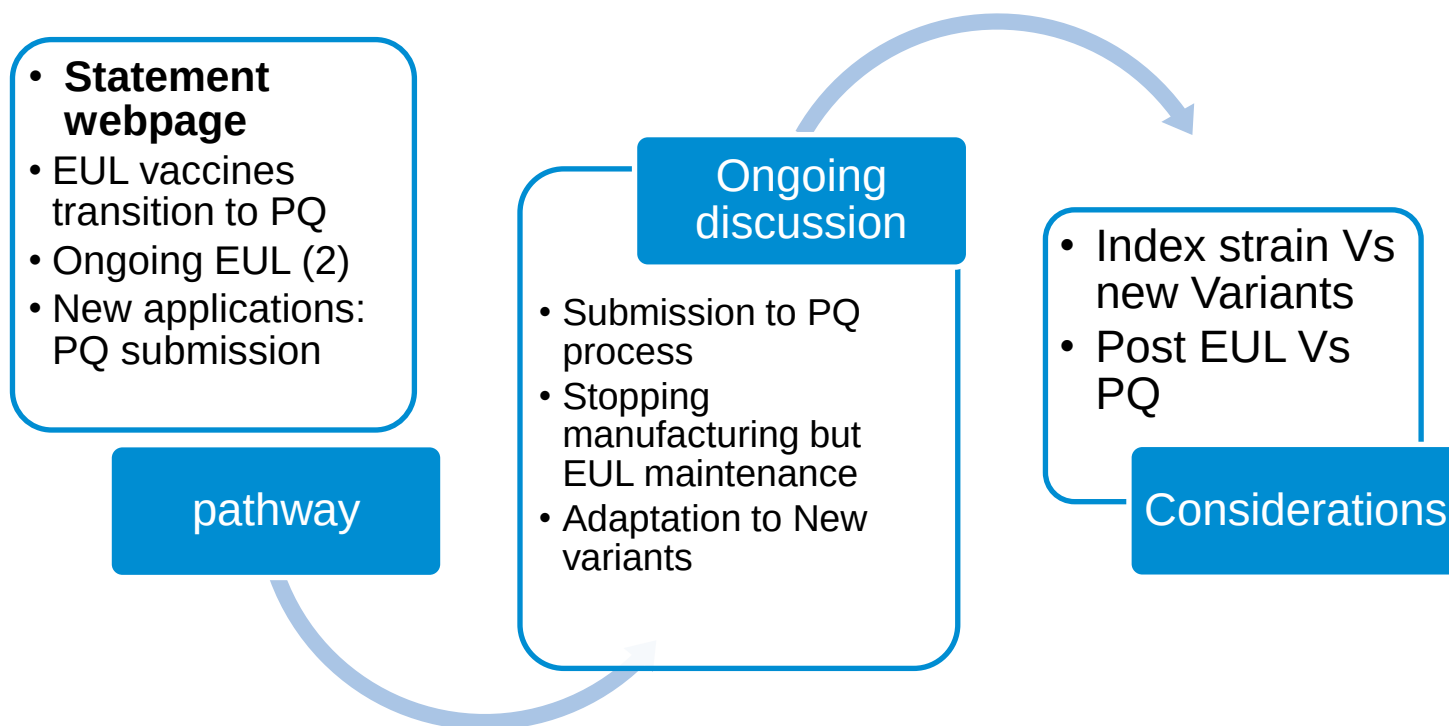
# WHO COVID-19 advisory groups develop recommendations on boosters, variants and variant vaccines along a comprehensive pathway



**Aim:** Monitor & assess SARS-CoV-2 variants and evaluate their impact on countermeasures, including vaccines, therapeutics, diagnostics or effectiveness of public health and social measures.



## Path forward



[PHEIC\\_web\\_31May2023.pdf \(who.int\)](#)

# Considerations

## PQ related

- Fees
- Dossier submission
- PSPQ

## Critical key changes

- Complexities of key changes introduced as post EUL and impact on timelines for transition to EUL
- Clear timelines to be set on potential critical changes that may be submitted post EUL (ie VOC), during the PQ assessment and Post PQ.

SAGE policy  
recommendations  
TAG COVAC

Staff Resources



## Additional information PQ&EUL:

PQT/VXA procedure [TRS 978, Annex 6 (2013)]

[http://www.who.int/entity/immunization\\_standards/vaccine\\_quality/TRS\\_978\\_61st\\_report\\_Annex\\_6\\_PQ\\_vaccine\\_procedure.pdf](http://www.who.int/entity/immunization_standards/vaccine_quality/TRS_978_61st_report_Annex_6_PQ_vaccine_procedure.pdf)

Programmatic Suitability for Prequalification

[http://www.who.int/immunization\\_standards/vaccine\\_quality/pspq2\\_v140512.pdf](http://www.who.int/immunization_standards/vaccine_quality/pspq2_v140512.pdf)

EUL Procedure and Questions and Answers

[https://www.who.int/medicines/regulation/prequalification/prequal-vaccines/EUL\\_PQ\\_Vaccines/en/](https://www.who.int/medicines/regulation/prequalification/prequal-vaccines/EUL_PQ_Vaccines/en/)

Target product profile

[https://www.who.int/docs/default-source/blue-print/who-target-product-profiles-for-covid-19-vaccines.pdf?sfvrsn=1d5da7ca\\_5&download=true](https://www.who.int/docs/default-source/blue-print/who-target-product-profiles-for-covid-19-vaccines.pdf?sfvrsn=1d5da7ca_5&download=true)

# Additional information PQ&EUL:

Evaluation criteria and EOI.

[https://www.who.int/medicines/regulation/prequalification/prequal-vaccines/resources/1\\_EOI-Covid-19\\_Vaccines.pdf?ua=1](https://www.who.int/medicines/regulation/prequalification/prequal-vaccines/resources/1_EOI-Covid-19_Vaccines.pdf?ua=1)

Roadmap

<https://www.who.int/publications/m/item/roadmap-for-evaluation-of-astrazeneca-azd1222-vaccine-against-covid-19>

Contact: EUL@who.int





WHO/Otto 8



WORKING  
TOGETHER



Department of Regulation and Prequalification, WHO

