

WHO Prequalification of medicines



Setting the Context
Advanced GMP Workshops
12-20 November 2018, India

Presentation outline

- Introduction
- Prequalification process
- Contribution
- WHO' recent initiatives
- Concluding messages



1. Introduction



Essential Medicines and Health Products: Prequalification of medicines

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FACILITATING ACCESS TO QUALITY MEDICINES FOR ALL WHO NEED THEM

Information For

- Manufacturers
- Regulatory agencies
- Quality control laboratories
- Procurement agencies

NEWS & ALERTS

17th Invitation to manufacturers of antituberculosis medicines to submit an expression of interest (EOI) for product evaluation to the WHO Prequalification Team:

UPCOMING EVENTS

First PQT Medicines Quality Workshop for Manufacturers
Copenhagen, Denmark

QUICK LINKS

- Prequalified Lists:
 - finished pharmaceutical products



PQTm: A United Nations Programme managed by WHO

- Started in March 2001 as a pilot project to facilitate access to quality medicines used in the treatment of HIV/AIDS.
- Partners included WHO, UNAIDS, UNICEF, UNFPA and supported by World Bank.
- Quickly expanded to include Tuberculosis, Malaria, Reproductive Health (2006), Influenza and others
- Current donors – mainly UNITAID and Bill and Melinda Gates Foundation.
- Fees were introduced on 1 Sept 2013 and reviewed in January 2017- aims to cover 50% of the PQT budget.



Why prequalify medicines?

- ❑ Increasing demand for generics, several players, substandard products on the market.
- ❑ Lack of well established drug regulatory systems (50% have varying capacity and level of development, 30% minimal or limited regulation).
- ❑ Lack of quality assured medicines can have serious consequences – ineffective treatment, drug resistance, side effects etc.
- ❑ Provide quality products for UN procurement, but also other partners (Global Fund, NGOs and country procurement).

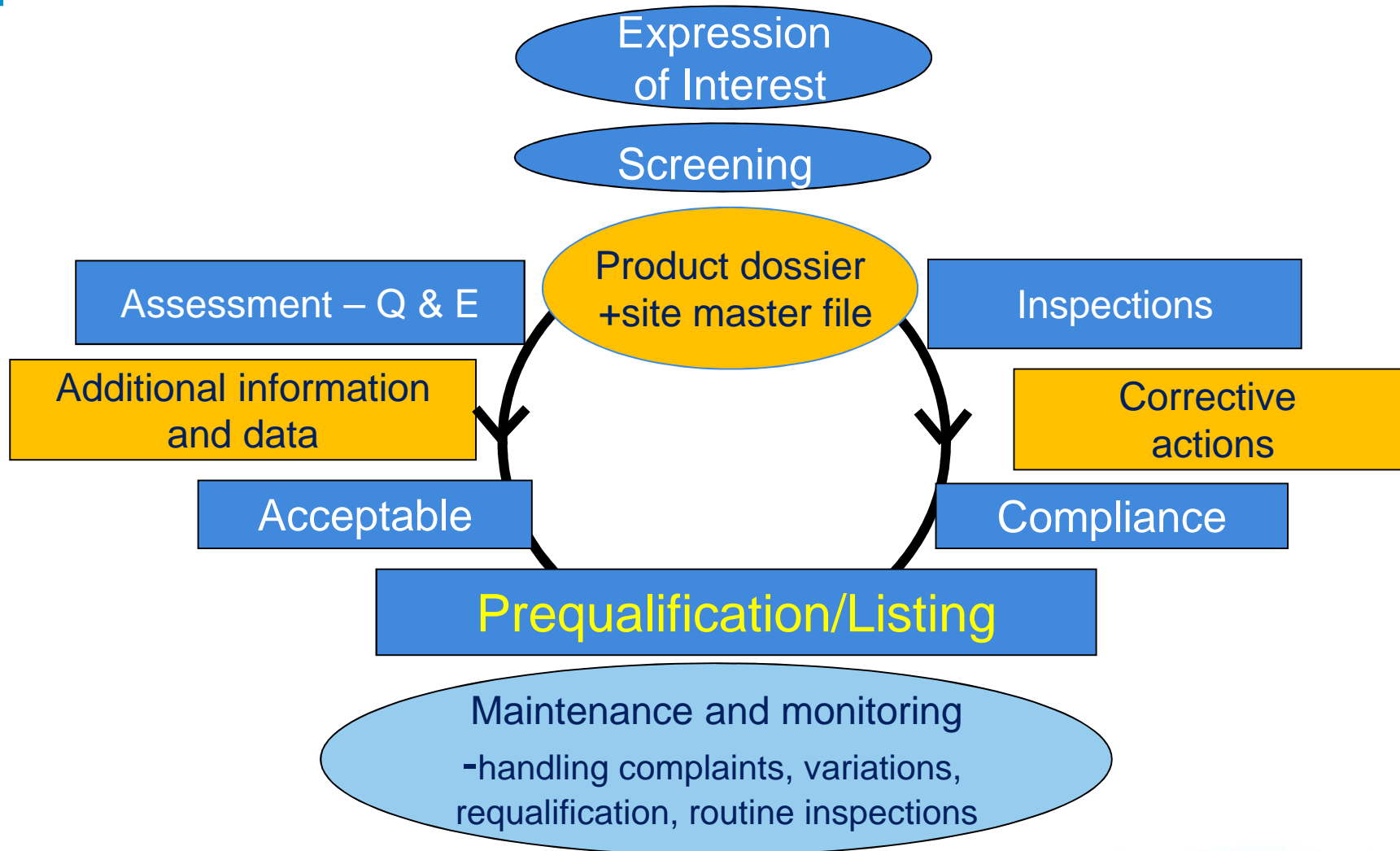


Scope of prequalification

- ❑ Limited to **priority medicines** as published in Invitations for Expression of Interest (EOI) on PQT website
- ❑ 8 Therapeutic areas
 - ✓ **HIV/AIDS**
 - ✓ **Malaria**
 - ✓ **Tuberculosis**
 - ✓ **Reproductive Health**
 - ✓ **Influenza**
 - ✓ **Acute diarrhoea in children (zinc)**
 - ✓ **Neglected Tropical Diseases (NTDs)**
 - ✓ **Hepatitis B and C**
- ❑ Potential for other categories if there is the need



2. Prequalification of medicines process



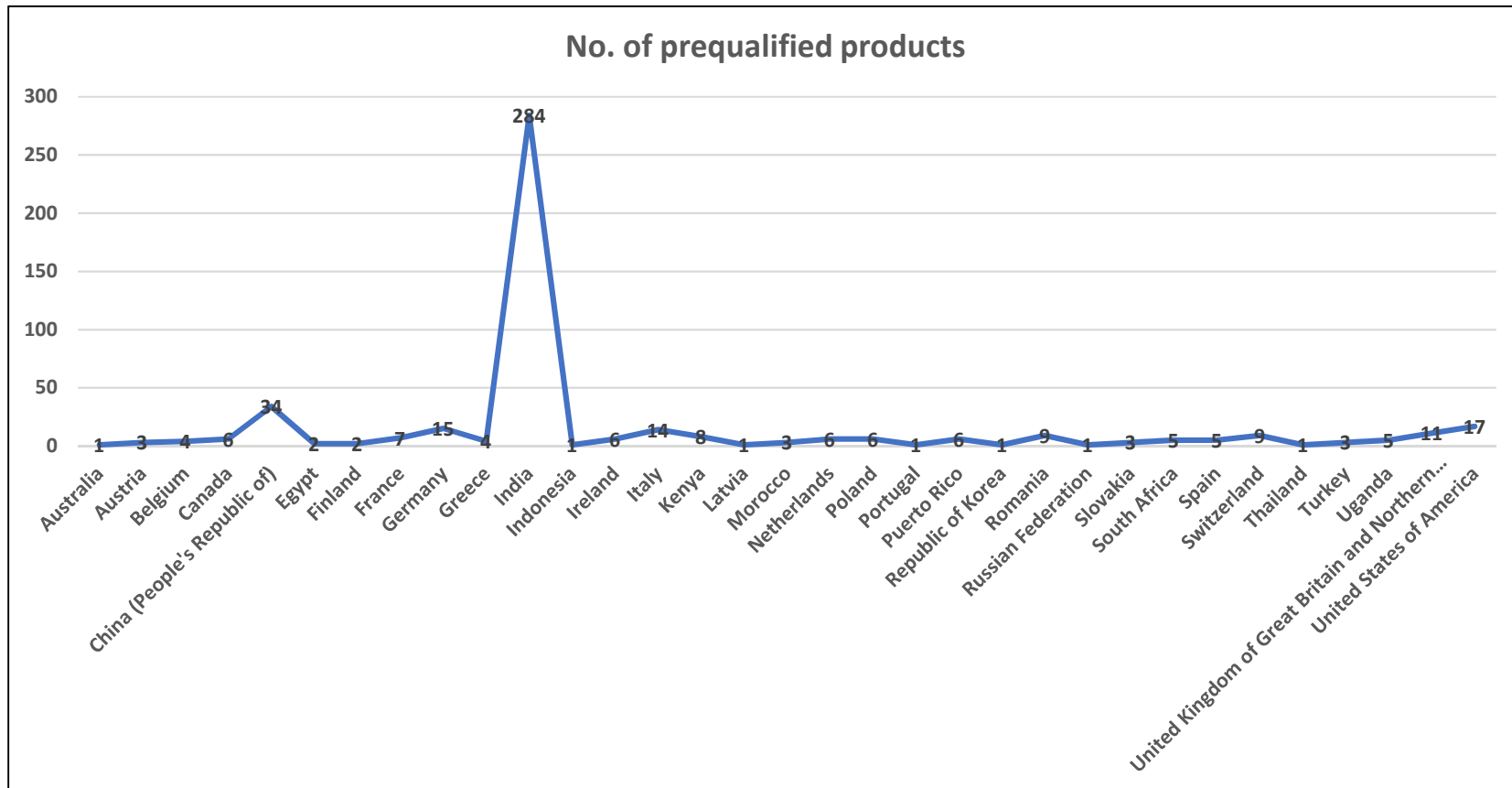
3. Contribution of Indian Pharmaceutical Manufacturers to WHO PQ-1

Indian manufacturers	APIs	FPPs
Currently on the PQ list	70 out of 123 (57%)	368 out of 533 (69%)*
Under assessment	30 out of 44 (68%)	80 out of 125 (64%)

*includes those that are listed based on alternative listing route (the number for those prequalified by WHO (full or SRA route) is 270 out of 427= 63%)



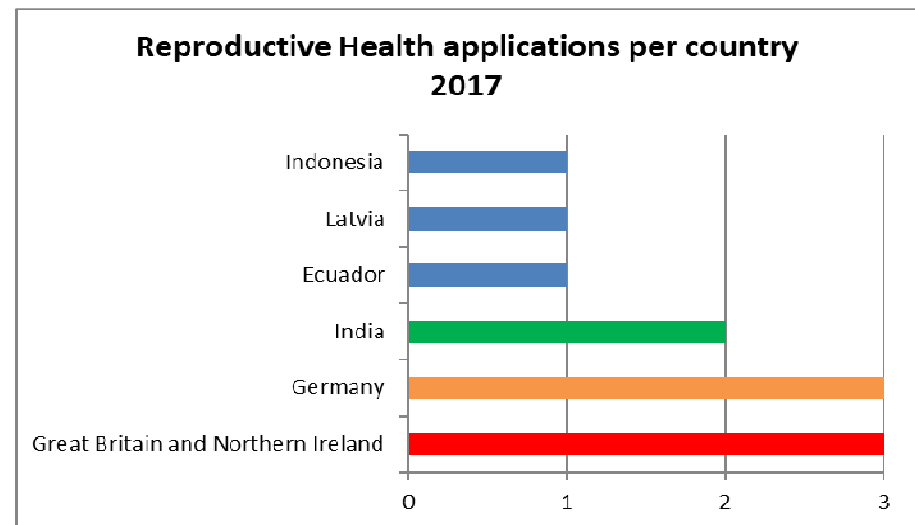
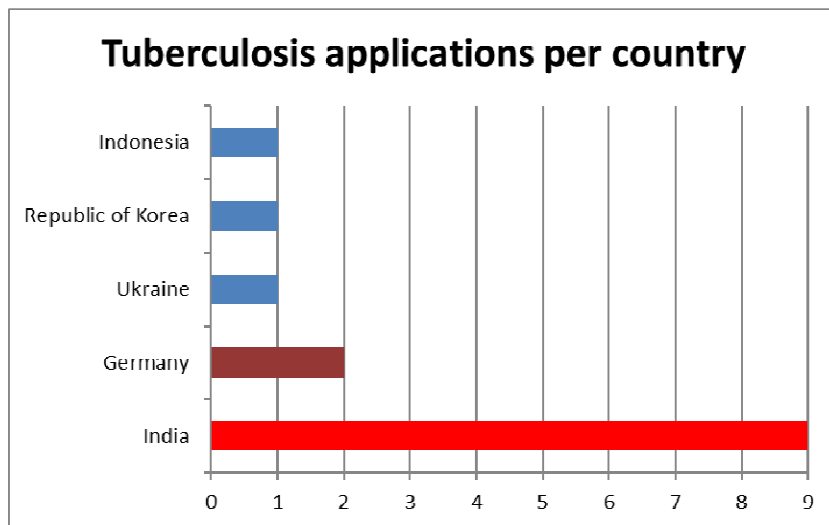
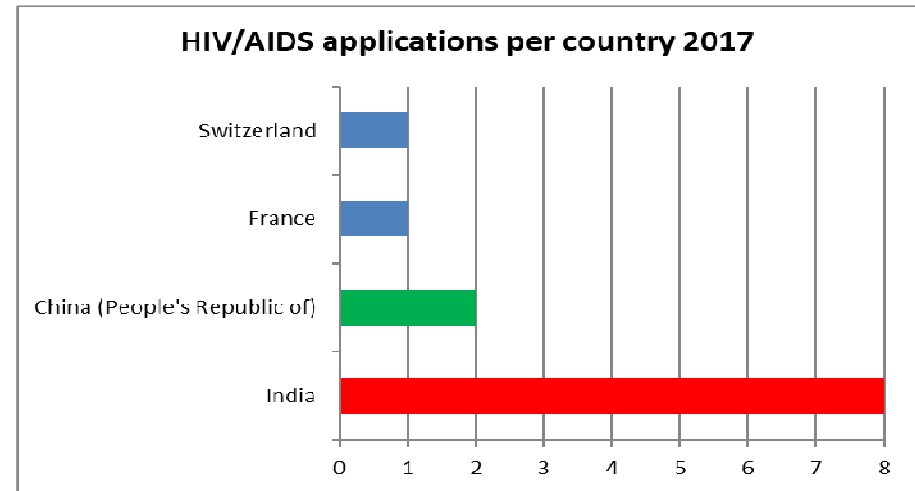
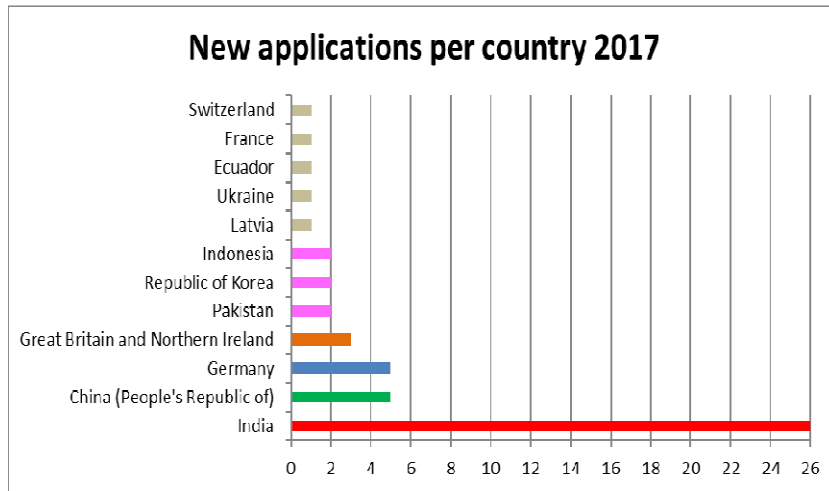
Contribution of Indian Pharmaceutical Manufacturers to WHO PQ-2



Note: total number 484 but actual number is higher because several products manufactured in more than one country



Contribution of Indian Pharmaceutical Manufacturers to WHO PQ-3



Contribution of Indian Pharmaceutical Manufacturers to WHO PQ-4



On 31 October 2018, WHO Prequalification Team - medicines (PQTm) added the below products to its "List of Prequalified Products".

Products added:

- **HA664** - Darunavir (as ethanolate) - 800mg - tablets - Cipla Ltd – INDIA – *This is the first 800mg darunavir tablet to be prequalified*
- **HA678** - Dolutegravir (as sodium) - 50mg - Tablets - Mylan Laboratories Ltd – INDIA
- **HA721** - Efavirenz/Lamivudine/Tenofovir Disoproxil Fumarate - 400mg/300mg/300mg - Tablets - Mylan Laboratories Ltd – INDIA – *This is the first efavirenz/lamivudine/tenofovir disoproxil fumarate 400mg/300mg/300mg tablet to be prequalified*
- **MA113** - Pyrimethamine/Sulfadoxine - 25mg/500mg - Tablets - Guilin Pharmaceutical Co Ltd – CHINA
- **MA132** - Amodiaquine Hydrochloride/Artesunate - 67.5mg/25mg - Tablets - Micro Labs Ltd – INDIA
- **MA133** - Amodiaquine Hydrochloride/Artesunate - 135mg/50mg - Tablets - Micro Labs Ltd – INDIA
- **MA134** - Amodiaquine Hydrochloride/Artesunate - 270mg/100mg - Tablets - Micro Labs Ltd – INDIA
- **MA674** - Medroxyprogesterone acetate - 150mg/ml - Suspension for injection - Mylan Laboratories Ltd – INDIA – *This is the first generic medroxyprogesterone injection to be prequalified*
- **TB289** - Moxifloxacin (as hydrochloride) - 400mg - Tablets - Zhejiang Hisun Pharmaceutical Co Ltd - CHINA
- **TB323** - Linezolid - 600mg - Film-coated tablets - Micro Labs Ltd – INDIA
- **TB349** - Moxifloxacin Hydrochloride (monohydrate) - 100mg - Dispersible tablet - Micro Labs Ltd – INDIA – *This is the first moxifloxacin 100mg dispersible tablet to be prequalified*

For the complete product list please see: <https://extranet.who.int/prequal/content/prequalified-lists/medicines>

For further information please visit the WHO Prequalification Team - Medicines website at <https://extranet.who.int/prequal> or contact PQT directly at prequal@who.int

WHO Prequalification Team (PQT)

World Health Organization
Geneva, Switzerland



4. WHO PQ & RSS contribution to Indian Manufactures and recent initiatives

11 **Technical assistance** have been offered to Indian Pharma since 2005

- GMP FPP – 5
- GMP API – 4
- Dossier – 1
- QCL – 1

Rotational inspectors and assessors



PQT-M Quality Workshop for Manufactures

- ❑ The first (pilot) Quality Workshop for manufacturers was held in July 2018.
- ❑ 60 participants from 30 companies. The feedback was very positive. **Significant number of participants from India attended.**
- ❑ **Their questions and perspectives contributed** to the value of the workshop for other participants (and also keep PQ assessors and inspectors on their toes!!)
- ❑ The 2nd workshop for manufactures is planned for 3, 4 and 5 July 2019. To be announced on the PQ website in the spring of 2019.



5. Conclusion - Key messages-1

- ❑ Before Prequalification (PQ), acceptability of the Indian products were questionable. **Through the years interaction with PQ has led to an improvement in the quality, safety and efficacy of the products from India.**
- ❑ PQ has been a **learning opportunity for the Indian manufacturers** to gain confidence in meeting SRAs requirements and launching to stringent markets
- ❑ Indian manufacturers started manufacturing **fixed-dose combination (FDC) of ARVs**. Together with PQ's innovative approach to accept the concept of FDC products, this has led to **reduced pill burden** and increased **patient compliance**.



5. Conclusion - Key messages-2

- ❑ More than 50% of prequalified APIs and nearly 70% of prequalified FPPs are from India.
- ❑ Nearly 90% antimalarials procured with funds from Global Fund are prequalified and produced in India,
- ❑ Model dossier (MD), another good example of collaborative work. The MD was developed by WHO PQ together with an Indian Pharma company,
- ❑ Also...Indian pharma has provided valuable input for the development of WHO norms and standards that take industry perspectives and needs sufficiently into account.



5. Conclusion - Key messages-3

In the spirit of continuous improvement, WHO PQ have been seeing some worrying trends:

- ❑ Manufacturers work hard to get PQ and then they relax, routine inspections reveal issues, an indication of **poor maintenance culture**,
- ❑ Different sites, different production lines and different standards for different markets e.g. **regulated vs non-regulated** or **less regulated** or **rest of the world, double standard?**
- ❑ **Data integrity and falsification of data** which has led to publication of notice of concerns, statement of non-compliance, warning letters, import alerts, complaints, recalls etc.





Thank you for your attention

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