



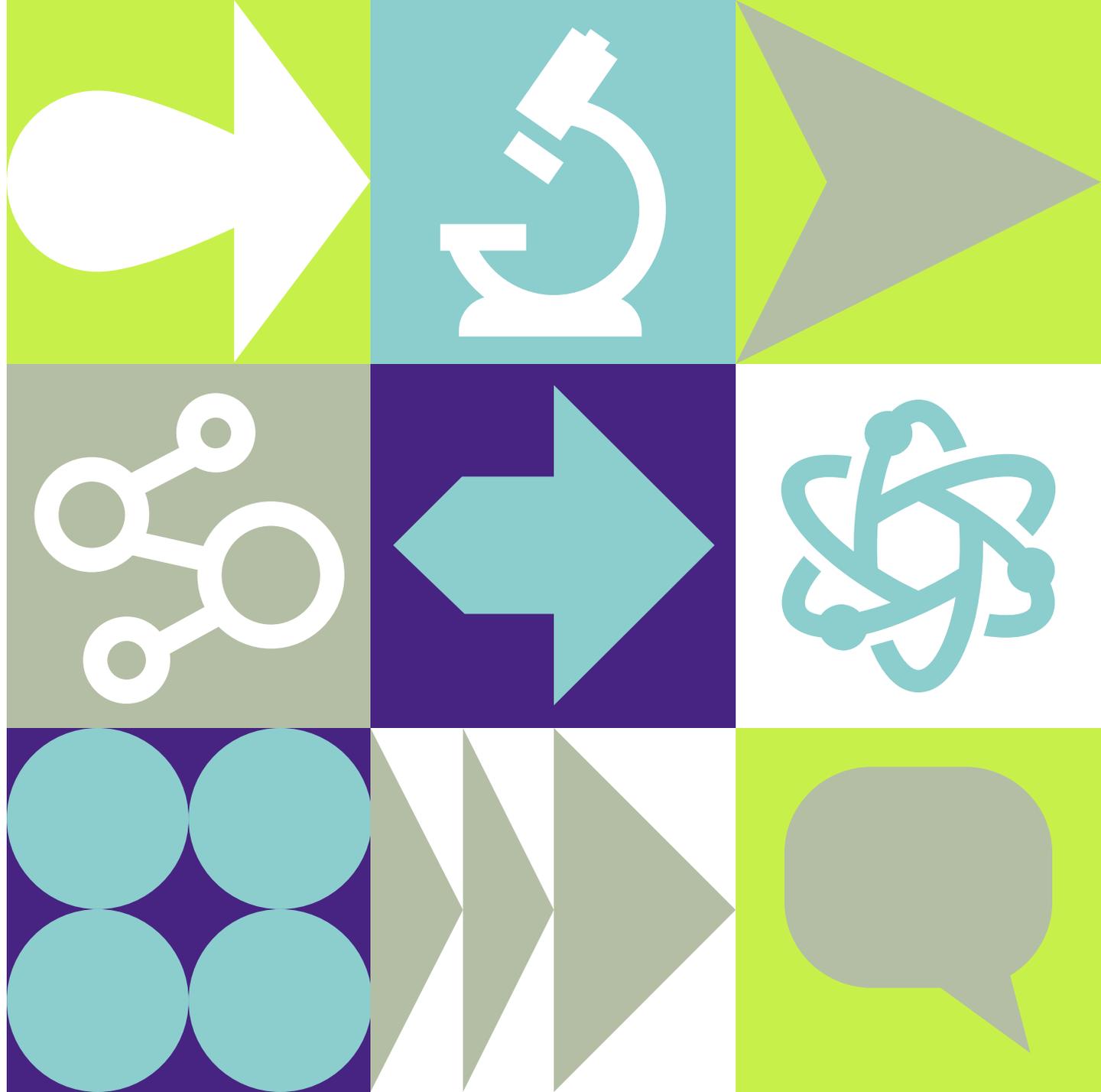
 **IAS 2021**

Monoclonal Antibodies for Infectious Diseases: Dream or Reality?

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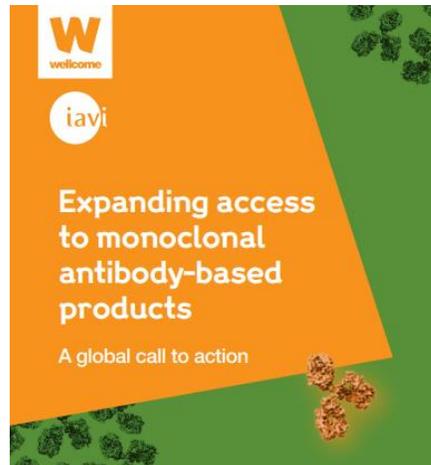
And many other generous individuals and partners around the world

As of March 2021

Monoclonal Antibodies for Infectious Diseases: Dream or Reality?

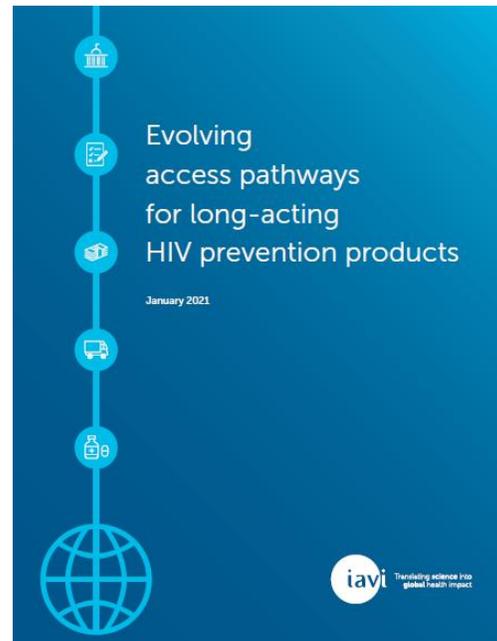
- Today's presentation reflect learnings from *landscape research reports* and *webinars* led by IAVI, in collaboration with partners

IAVI-Wellcome Call to Action Report on Expanding Access to Monoclonal Antibody-based products, published August 2020:
Case studies, >100 interviews with global stakeholders across > 15 countries



Available at iavi.org and wellcome.org/reports/expanding-access-mono-antibodies

IAVI report on access to future HIV prevention products, published 2021
> 50 interviews from 22 organizations



Webinars on expanding access to Monoclonal Antibodies, co-organized by IAVI, in collaboration with partners

"Making monoclonal antibodies broadly accessible to communities most at risk of HIV/AIDS – What would it take?" November 23, 2020  

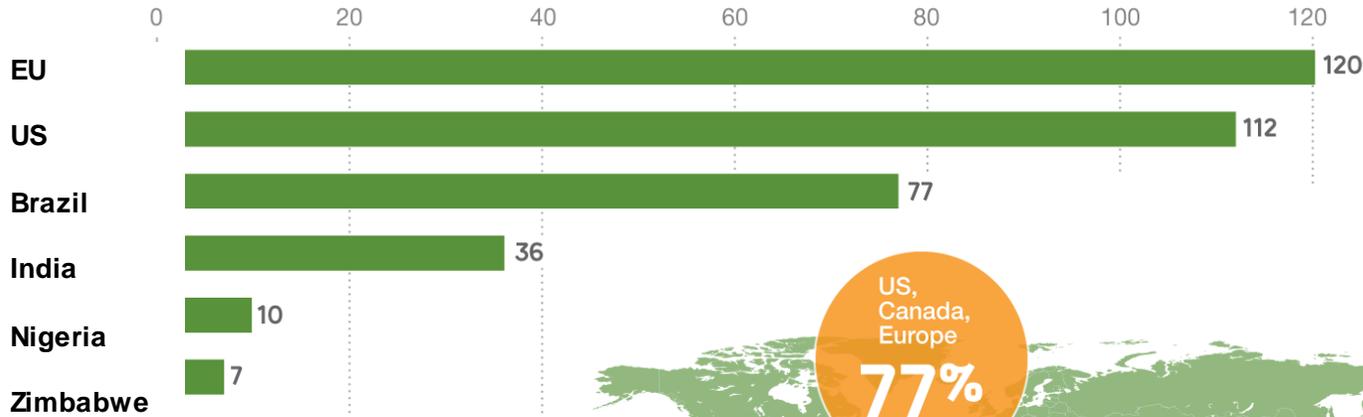
'Global access pathways for monoclonal antibodies: Can COVID-19 pave the way?' January 19, 2021   

'Innovative bio-therapeutics for COVID-19 — how can monoclonal antibodies for SARS-CoV-2 be made accessible in low- and middle-income countries (LMICs)?' February 24, 2021    

'Strengthening regulatory and policy frameworks to enable access to monoclonal antibodies in Africa June 30, 2021  

Availability and Affordability of mAbs are key barriers to Global Access

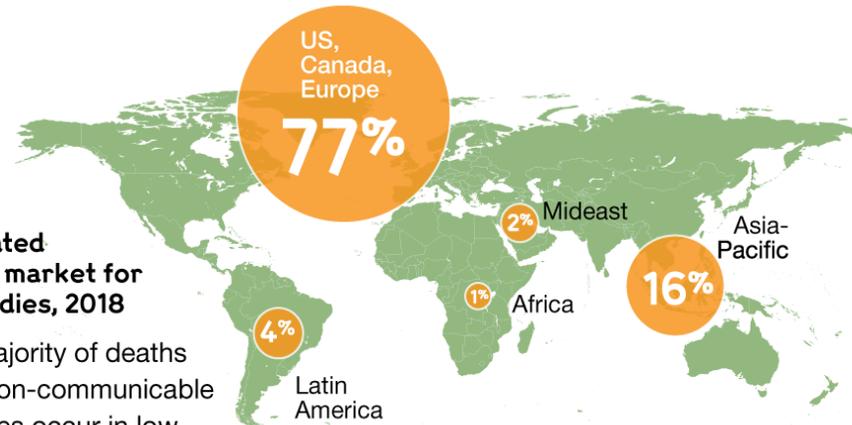
Number of registered monoclonal antibodies in selected countries (includes biosimilars)



Sources: IAVI registration analysis (chart)
Coherent Market Report, 2019 (map)

Estimated global market for antibodies, 2018

The majority of deaths from non-communicable diseases occur in low- and middle-income countries.



Expanding access to monoclonal antibody-based products, 2020



Median price of monoclonal antibodies by therapy area for one year of treatment

US prices as of January 2017, in US dollars

Oncology/hematology

\$142,833

Immunology

\$52,969

Infectious diseases/allergy

\$29,808

Ophthalmology

\$22,464

Cardiology/endocrinology

\$15,624



Source: Hernandez (2018) Am J Manag Care

Access gap is expected to widen as the proportion of mAbs for non-communicable and infectious diseases in product pipelines continues to increase

Access to mAbs is *severely limited* in Low- and Middle-income Countries: Impact on Infectious Diseases

Key barriers/opportunities

Advocacy and Awareness

- Limited awareness of the health and economic value of mAbs
- Unclear market size and disease burden

Policy and Regulatory processes

- LMIC regulatory processes complex or undefined
- WHO-guidance, WHO-prequalification and inclusion into WHO-essential and national medicine lists in early stages

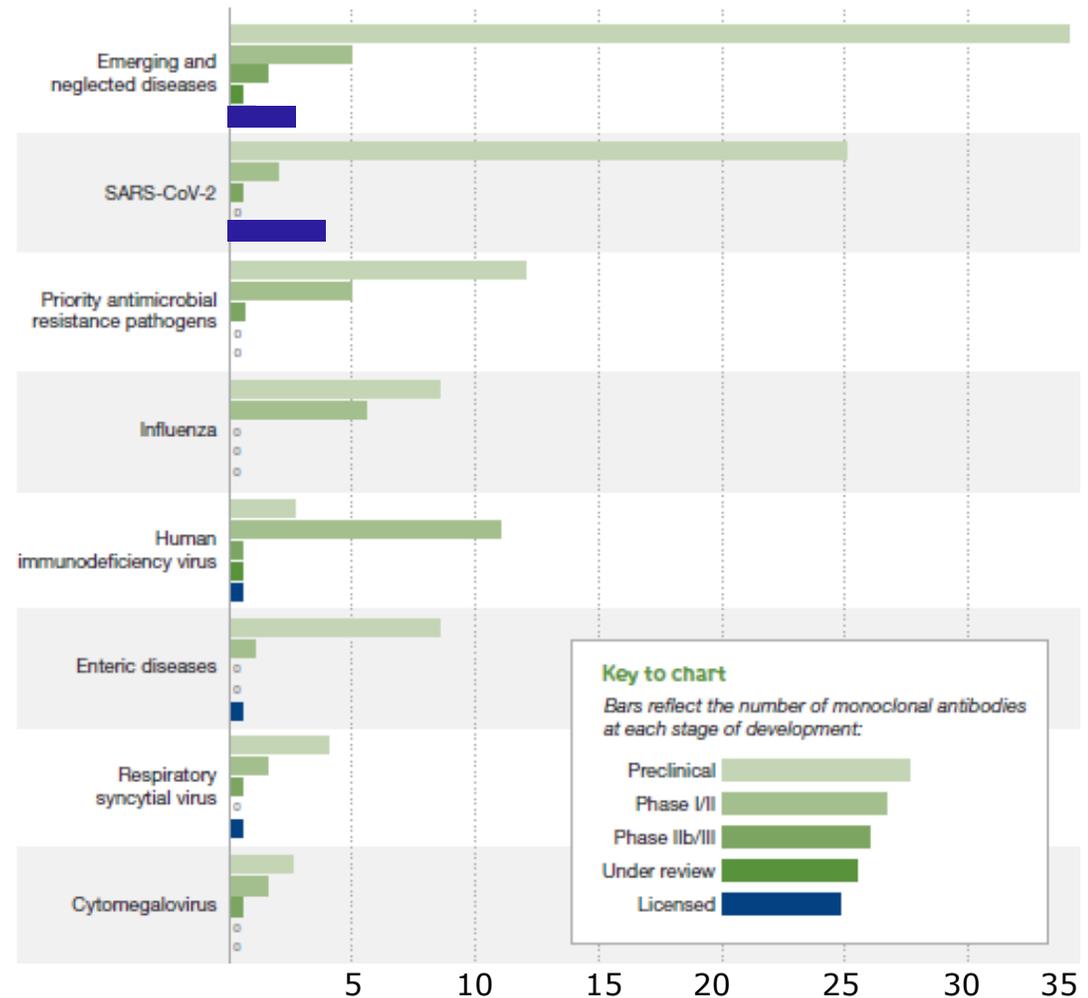
Technological innovations

- Product profiles not designed for affordability, and convenient delivery
- Combinations of antibodies or engineered multi-specific antibody formats needed for some viruses and pathogens
- Integration of new technologies for low-cost manufacturing and delivery in early stages

Business and partnership models

- Limited models for global licensing and affordable pricing
- Insufficient global manufacturing capacity for equitable supply
- Lack of donor-funded procurement platforms

Number of monoclonal antibodies in development and licensed for infectious diseases and pathogens



Access to mAbs for Infectious Diseases in Low- and Middle-income Countries

Case Study: Anti-RSV mAb Synagis® (palivizumab)

- Only licensed mAb to prevent respiratory syncytial virus (RSV) infections, the second-leading cause of death in children during the first year of life
- First approved in the US in 1998 (license holder: Astra Zeneca)
- Marketed in > 80 countries but limited access in LMIC public health systems
- Not licensed in China or Nigeria, two countries with high RSV incidence
- Prices, depending on country, range from ~ \$4-17K per season (five monthly intramuscular doses of 15 mg/kg)
- **Next generation long-acting anti-RSV mAbs (Nirsevimab, 1 dose per season) with preferred product profile, in late-stage development, expected filing in 2022**

99% of deaths from respiratory syncytial virus occur in low- and middle-income countries.

99% of the sales of Synagis, an antibody-based preventive, are in the US and Europe.

Four mAb products for SARS-CoV-2 developed & authorized in record time... but global access limited

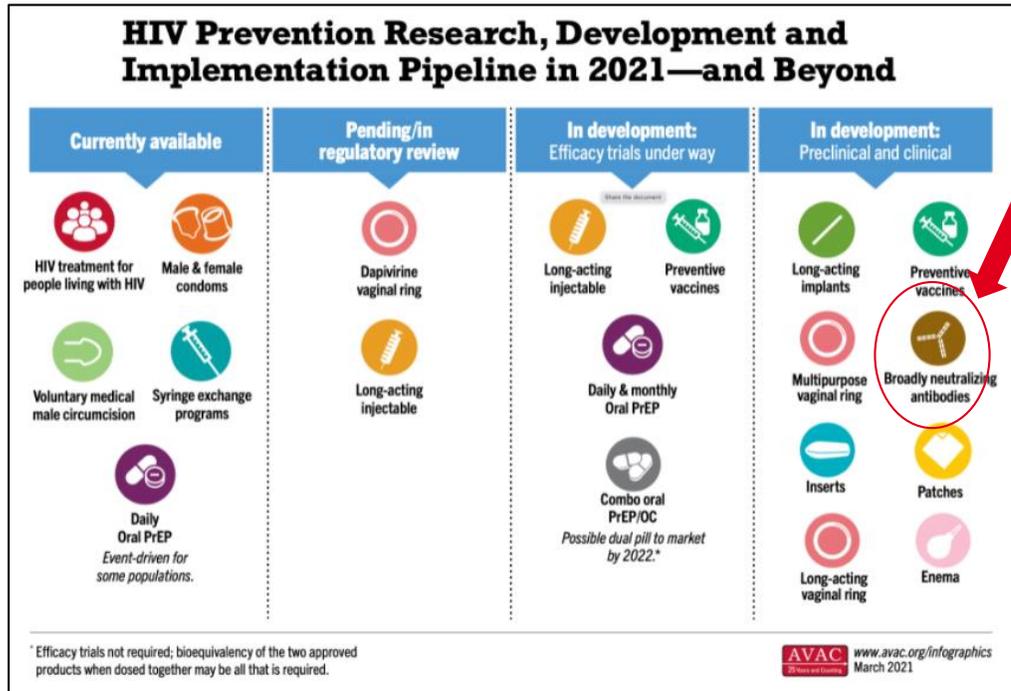
Barriers to Global Access:

- Requires **high doses delivered by intravenous (IV)** administration -- increases cost and burden of delivery
 - *Recommendation: identify more potent lower dosage mAbs delivered by IM or SQ injections, responsive to VOCs*
- Requires **timely diagnosis** of SARS-CoV-2 infection and rapid linkage to care
 - *Recommendation: Strengthen capacity for early diagnosis and improve linkages to care*
- 4 EU/US/South Korea authorized mAb combination/single products, **LMIC authorizations currently limited** to Brazil, India
 - *Recommendation: use collaborative regulatory approaches (eg. used for Ebola) to accelerate broad authorizations, and accelerate WHO prequalification to enable rapid entry into national medicine lists*

Other opportunities for Global Access:

- Optimize formulations to minimize reliance on cold storage
- Optimize antibody function to treat severe COVID-19 and define patient subsets most responsive to mAbs for SARS-CoV-2
- Expand licensing partnerships and market commitments, strengthen manufacturing capacity, and streamline supply chain for raw materials
- Establish platforms for pooled procurement, distribution and allocation

Broadly neutralizing antibodies (bnAbs) for HIV: a future prevention option across multiple other product types and delivery



Opportunities for Global Access

- Improve affordability by optimizing bnAb combinations for enhanced potency, half-life, thermostability, developability – to enable infrequent SQ injections
- Partner with regional low-cost manufacturers to reduce cost of manufacturing and delivery
- Engage with communities to understand acceptability & delivery barriers and integrate into product design
- Integrate early into WHO policy guidance
- Demonstrate relative value proposition, cost-effectiveness of mAbs
- Expand use of joint reviews and collaborative regulatory pathways
- Expand use of pooled procurement platforms to ensure affordability

Global Access to Monoclonal Antibodies is challenging, but realistic

- ***The COVID-19 pandemic has helped raise awareness*** to the challenges and opportunities for global access to mAbs, especially for infectious diseases – however, more advocacy and awareness building needed
- Technological advances can drive rapid discovery and development of mAbs for infectious diseases - early engagement between public and private stakeholders is needed to ***design affordable mAb products that are responsive to global needs***
- There is an urgent need for ***broader registrations in LMICs, new global manufacturing and supply models, and new global pooled procurement and distribution pathways*** for global access to mAbs

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