Policies and challenges related to the introduction of new drugs and regimens for DR-TB patients

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WHO’s strategy and guidance for new TB drug introduction

The WHO Strategic Plan for rational introduction of new TB drugs and regimens in countries

Key Principles:

• Need for combination regimen(s)

• Adaptation to largely variable country settings (health & NTP infrastructure, TB epidemiology, level of preparedness, etc.)

• Ensure equitable access to safe and quality-assured new drugs for all patients in need

• Prevent misuse of the drugs and emergence of resistance

• Multistage and pluri-partner process.
1. Minimum requirements for country preparedness and planning.
2. Implementation plan for introduction of new TB drugs or regimens.
3. Pharmacovigilance (active drug safety monitoring and management) and drug resistance surveillance.
4. Private sector engagement.
5. Systems approach for ensuring uninterrupted supply of quality-assured medicines.
6. Operational research
Guidance on the use of new TB drugs

- Expert consultations to evaluate new TB drugs/regimens coming out of the pipeline and revise/update treatment guidelines as appropriate
- Development of interim guidance for the use of bedaquiline
- Development of interim guidance for the use of delamanid
- Backed-up by the Companion Handbook on WHO guidelines for PMDT
"Bedaquiline may be added to a WHO-recommended regimen in adult patients with pulmonary MDR-TB, under *five* specific conditions"

"conditional recommendation, very low confidence in estimates of effect"


WHO – June 2013
Interim policy guidance on the use of bedaquiline

5 conditions:

1. Proper selection of patients
2. Patient informed consent required
3. Treatment design based on WHO recommendations
4. Close monitoring conditions
5. Active pharmacovigilance and management of AEs
Implementation Plan for introduction of bedaquiline in countries

- Step 1: Establish the framework for the introduction of bedaquiline at country level
- Step 2: Meet the minimal requirements for introduction of bedaquiline
  - *checklist* to assist in country preparedness
- Step 3: Develop a national plan for introduction of bedaquiline
- Step 4: Implement the introduction of bedaquiline in pilot sites
- Step 5: Generate evidence for scale up
Work with 'early implementing countries'

- Countries have expressed interest in working with WHO for introduction of bedaquiline (BDQ) in programme conditions, following WHO recommendations
- Political will and funding for BDQ
- In general, high burden TB countries with
  - high rates of DR-TB
  - robust PMDT programs
  - referral centers to manage complicated patients
Work with 'early implementing countries'

• Initial **workshop** involving all key stakeholders (NTP, MoH, NRA, NPV, etc.) and TA bodies/donors (GF, USAID, B&MGF, KNCV, etc..)
  o Outline of a country-specific National Implementation Plan
  o Establishment of national framework
  o Identification of pilot sites
  o Determination of target cohort
  o Laboratory aspects
  o Monitoring – including recording and reporting
  o Establishment of plans for active drug safety management and monitoring in conjunction with key stakeholders
  o Discussion with NRAs on regulatory aspects and drug procurement
  o Timeline of activities
• Follow-up of activities at country-level
Lessons learnt (1)

• Introduction of BDQ according to WHO recommendations seems to work and countries are very much willing to do this;

• Process requires careful planning, reinforcement of some aspects/structure (lab, R&R, M&E, PV) and training;

• Inevitable delays/hurdles and logistical challenges (e.g. high level approval, waiver for drug import, drug order approved by GF, organization of active PV, etc.)

• Long term view to improve the way new drugs are introduced: find balance given urgent needs and slow implementation process;
Lessons learnt (2)

• Model can be used for other new drugs and regimens as they become available;

• Need to streamline process for more countries and other new drugs;

• Train consultants, need to deliver updated information to donors, regulators

• Key role rGLCs to advise countries appropriately on ability to introduce new TB drugs/regimens and related activities