Do we need a PDP to help us deal with Antimicrobial Resistance?

How a product development partnership could promote innovation and responsible access to new antibiotics
Vision

- Establish a product development partnership (PDP) which, in collaboration with public and private partners in high-, middle and low-income countries, sustainably promotes the research and development of new antibiotics and ensures their rational use and their preservation globally.
Rational for a PDP

- A PPP/PDP model enables to:
  - establish TPPs addressing global needs
  - provide a coordinated strategic approach to drug development
  - engage into and stimulate pioneering long term scientific strategies
  - promote new innovative incentives and ensure accountable use of funds
  - Insure responsible use of and access to drugs
The model

Virtual and not-for-profit

- A “virtual” model is favored because:
  - it provides flexibility
  - does not immobilize capital and avoids costly overheads
  - facilitates collaborations with external public and private entities

- A not-for-profit model is preferred because:
  - Need assessments, TPPs definitions and scientific strategies will be defined solely by patient’s needs
  - No internal conflict to implement rationale use: no expectations of returns
  - Advocacy, fundraising and access to public funds facilitated, because no perceived or actual conflicts of interest
  - More freedom to design appropriate incentives and rewards, and to negotiate adequate premiums on the antimicrobials developed to insure patient access
Major tasks envisaged

- **Module 1: R&D**
  - Establish research priorities (i.e. TPPs), focusing on upstream discovery (long term) and specific downstream projects (short term)
  - Foster “test-and-treat” paradigm by embedding point of care, fast diagnostics within the R&D strategy

- **Module 2: Economic frameworks**
  - Business models, IP strategies, reward schemes

- **Module 3: Procurement and Supply**
  - Address access strategies managing rational -but wide- use of the products from global health perspectives
Governance structure

- Should include HICs and LMICs, IOs, NGOs/not-for-profit, industry.
- Board of Director (BoD) and Scientific Advisory Committee (SAC): risk managements and key strategic directions, delegate operations to Executive Team.
- BoD composition: balanced country representatives, donors, leading health and research institutions, academia, industry, « AMR-specific » NGOs,…
- Executive team: implement BoD strategy, supervise research consortiums and projects, BD activities, reward schemes and incentives, fundraising, advocacy & communication, drug facility to manage end products.
- Executive team composition: good mix of academia / not-for-profit, pharma, as well as scientific, public health and operational backgrounds.
- SAC composition: academic and private sector representation, to focus on technical issues, to provide recommendations to the Board to validate the strategy.
Funding

- Sustained, significant and long term government funding key for perennial successful operations: “Antibiotic Fund”
- Look additionally at new sources of funding, including from MIC
- Innovative financing mechanisms (eg. airlines levies, IFFIm, GHIF, etc.)
- …
Next steps

- Meeting report
- Side discussion at WHO EB
- Garner support at WHA via the GAP
- G7 concept note
- Coalition of countries to finance initial work
- Formal feasibility project team setup and hosting of the initial activities
Discussion points

- This is a global health agenda
- Despite several NCEs in development, identification of new anti-infective classes or new strategies to deal with infection remains a challenge => need significant government support for basic research in anti-infectives
- Landscaping and prioritization of needs and gaps, with a forward and proactive approach in R&D in view of long timelines
- Need of mobilization of significant new financial resources: « antibiotic fund »
- Ability to construct alternative forms of incentives that promote R&D, rational use and strong implication of the private sector (eg. CEWG report, delinkage concept and beyond..)