

Lenacapavir for PrEP

Case Study

Kat Green
Senior Director, GPS Regulatory Affairs



Context

Unmet Need



African Continent

1.3M new infections annually;
~3,600 new HIV infections daily;
50% in Sub-Saharan Africa
544 AGYW (age 15-24) contract HIV EVERY DAY



Southeast Asia

In Thailand, after 6 months of PrEP initiation, only 30% of users still use PrEP with sufficient adherence to prevent HIV infection



Latin America

HIV incidence of new cases has only declined 1% since 2010

External Environment



World Health Organization



ZAMBIA MEDICINES REGULATORY AUTHORITY



MCAZ



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH



PHARMACY AND MEDICINES REGULATORY AUTHORITY



NATIONAL AGENCY FOR FOOD AND DRUGS
ADMINISTRATION AND CONTROL



Namibia Medicines Regulatory Council



AVAC
Global Advocacy for HIV Prevention



USAID
FROM THE AMERICAN PEOPLE



PAHO
Pan American Health Organization



SAHPRA
South African Health Products Regulatory Authority



BOMRA
MEDICINES REGULATORY AUTHORITY



EFDA
ETHIOPIAN FOOD & DRUG AUTHORITY



RWANDA FDA
Rwanda Food and Drug Authority



REPUBLIC OF KENYA
MINISTRY OF HEALTH
PHARMACY AND POISONS BOARD



anarme
Autoridade Nacional
Reguladora de Medicamento. IP



ĐỘI QUẢN LÝ DƯỢC
D.A.V
DIRECION DE VENEZUELA
DIRECCION DE VENEZUELA



FDA
Food and Drug Administration
PHILIPPINES



UGANDA
NATIONAL DRUG AUTHORITY
Safe Drugs Save Lives



Rationale



Lenacapavir for PrEP (L4P)

Simultaneous global filings of major markets at same time as low and lower middle-income countries (LLMICs) to enable fastest access to PrEP in those markets with the biggest HIV burden

The Context

Gilead Ambition



Regulatory Objectives



Geographic Scope

The Approach

EU Medicines for All



WHO PQ

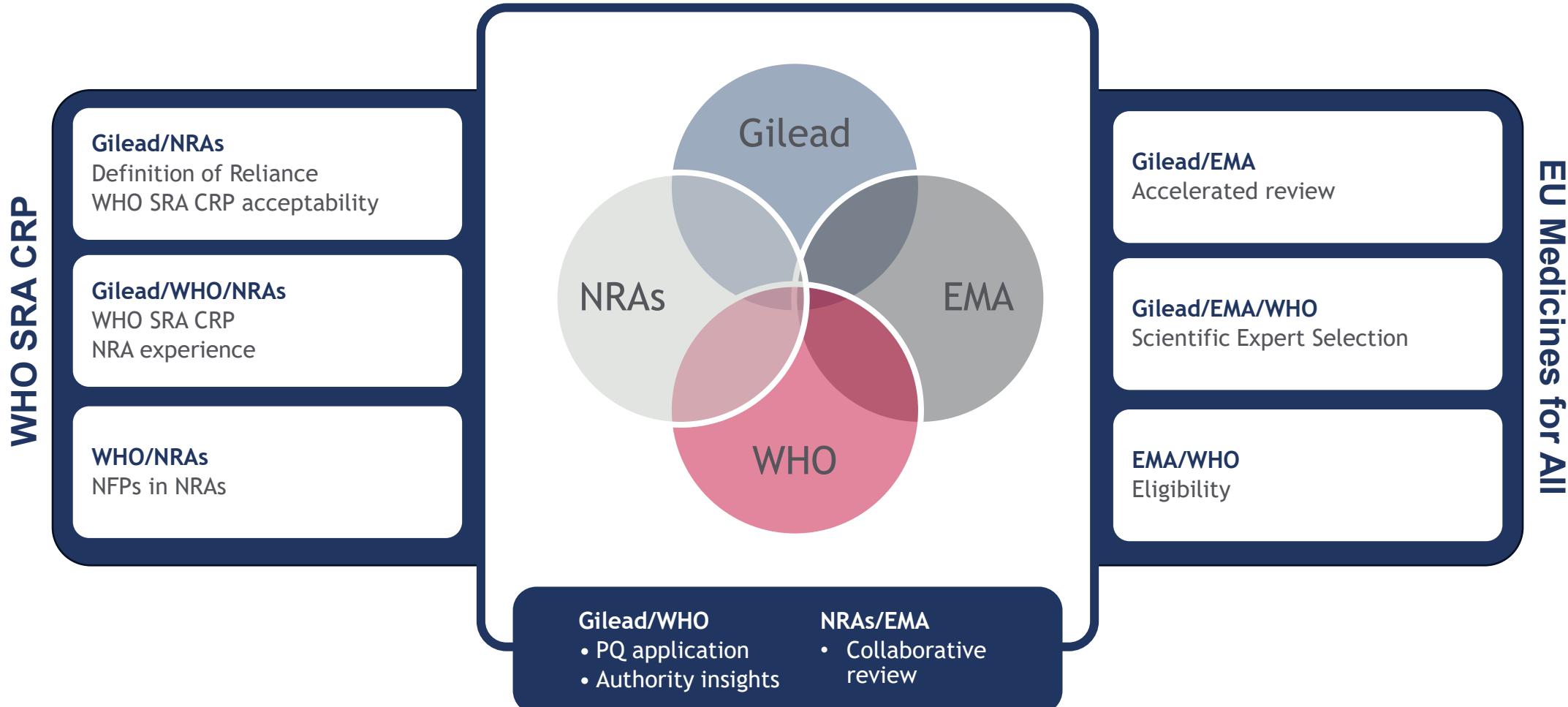


WHO SRA CRP



Collaboration

The LEN4PrEP regulatory strategy is underpinned by the principle of partnership



WHO PQ = World Health Organisation Prequalification

WHO SRA CRP = World Health Organisation Stringent Regulatory Authority Collaborative Registration Procedure

EMA = European Medicines Agency

NRA = National Regulatory Authority

NFP = National Focal Point

Confidential - Internal Use Only



Summary of Successes and Challenges



Challenges

EUM4all pre-submission steps were not clear

National government alignment requires a x-functional engagement plan

Lack of detailed guidance can prolong execution activities

Post-opinion collaboration with EMA to navigate the end of the EUM4all process

Significant upfront investment for planning

Appropriately setting Internal and External expectations



Successes

Parallel EUM4all Submission & timeline to EU centralised procedure

Questions from Scientific Expert countries

Experts from the WHO and 8 national regulatory authorities contributed to scientific discussions

Parallel submission requested by SAHPRA

Abridged PQ application

Expedited review timelines



Key Considerations for Success

Environmental



External regulatory environment – emerging reliance pathways



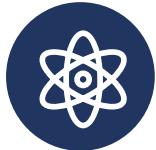
External political will – PrEP has a significant role to play to support global goals



Strong clinical evidence



Aligned ambition with external partners

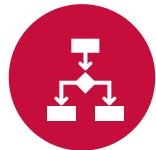


Scientific Innovation: unmet medical need for prevention options to reduce new infections

Internal



Early Strategic discussions with key regulators



Socialisation of proposed procedural route



Gain external regulatory guidance



Create a global dossier and meet the sameness requirements of reliance



Commitment to a global access strategy for LEN

Thank you

