<table>
<thead>
<tr>
<th>Vaccine developer</th>
<th>Name</th>
<th>Regulatory status outside SA</th>
<th>Application at SAHPRA</th>
<th>Status at SAHPRA</th>
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<tr>
<td>AstraZeneca/University of Oxford/Serum Institute of India</td>
<td>AZD1222/COVISHIELD</td>
<td>EMA -submission for marketing authorisation&lt;br&gt;UK Emergency use Listing (EUL)&lt;br&gt;India EUL - COVISHIELD</td>
<td>NDoH submission of S21</td>
<td>S21 review finalised and authorisation granted on 22 January 2021.</td>
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<tr>
<td>BioNTech/Pfizer</td>
<td>Comirnaty/BN T-162</td>
<td>Emergency Use Authorisation (EUA) in UK, USA , WHO EUL and Provisional approval EMA</td>
<td>Submitted for registration</td>
<td>Under review</td>
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</table>
SAHPRA is empowered by Section 21 of the Medicines Act to grant access to an unregistered medicine in such manner and:

- for a period as SAHPRA may determine,
- where conventional therapies have been ruled out, have failed or are unavailable as marketed products.
- for specific quantities and specific individuals/patients
- where adequate scientific data for risk/clinical benefit exists

This must always have regard to the safety, efficacy and the quality of the health product.

Examples of health products that were granted Section 21 authorisation are Remdesivir, SARS-Cov-2 Serology Test Kits, etc.
Section 21 application for COVISHIELD™ vaccine

1. Applicant: National Department of Health
2. Manufacturer: Serum Institute of India (SII)
3. Quantity: Initially, 1.5 million doses in bulk supply, thereby avoiding the need to apply on a named-patient basis
4. Target group: Healthcare workers
5. Product: COVISHIELD™ vaccine, a ChAdOx1 nCoV-19 Corona Virus Vaccine. The manufacturing is based on technology transfer from Astra Zeneca (AZ).
Regulatory reviews conducted

A thorough review has been conducted by SAHPRA to ensure that the vaccinee will receive safe, efficacious and quality-assured vaccines.

1. Quality review
2. Manufacturing facility review
3. Clinical review
4. Review of safety and post-access monitoring (incl Pharmacovigilance Reporting Requirements)
Quality review

- Manufacturing processes appropriately validated
- Comparability was demonstrated between AZ and SII product.
- Release specification for SII product identical to AZ
- Lot Release-on arrival into country-
  - Test and verify the quality of vaccine that is available in SA.
  - All SII vaccine lots are subject to lot release by the Indian National Control Laboratory
  - All imported lots will also be subject to an additional lot release by the South African National Control Laboratory (SANCL)
  - The SANCL lot release process complies with the requirements of the WHO Guideline for independent lot release of vaccines by regulatory authorities
Manufacturing Facility Review:

• As part of the Section 21 process, SAHPRA Inspectorate has:
  – reviewed the acceptability of Good Manufacturing Practices (GMP) of the site that is producing the vaccine.
  – The review considered current positive GMP status of Serum Institute of India as per SAHPRA GMP certification process
  – Additional desktop review of processes specific to the manufacturing of the COVISHIELD ChAdOx1 nCoV-19 Corona Virus Vaccine

• Serum Institute of India has current GMP approval from SAHPRA for the manufacture of two vaccines (BCG vaccine and Rota virus)
Clinical safety and efficacy evaluation

• Results of the pre-clinical as well as Phase I and II clinical studies were reviewed in detail and have shown acceptable safety efficacy outcomes.

• The review of the early results of the ongoing Phase III studies have shown acceptable safety and 70% efficacy profile for the vaccine.
Pharmacovigilance Reporting Requirements

Manufacturer’s periodic safety update report (PSUR) (worldwide data) on a 6-monthly basis.

Manufacturer’s summary safety report (simplified PSUR) (worldwide data) every month containing:

- (1) estimated exposure;
- (2) cumulative and interval adverse Effects tabulations, from post-marketing experience and ongoing trials;
- (3) a summary of signals identified, validated, and closed;
- (4) changes to the company core data sheet;
- (5) summary of requests from regulatory authorities;
- (6) an interpretation discussing the risk-benefit balance of the vaccine.

A summary of Adverse event following Immunization (AEFIs) reported by NDoH to SAHPRA, on a two-weekly basis.

Annual review of drug safety information after depletion of vaccine stocks to identify any other potential risks not captured previously.

NDoH to report serious AEFIs within 24hrs and non-serious AEFIs within 7 days to SAHPRA.

A serious AEFI is defined as “one which requires hospitalization or prolongation of existing hospitalization, causes congenital malformation, results in persistent or significant disability or incapacity, is life-threatening, or results in death.”
Review of safety and post-access monitoring

• Pharmacovigilance: Safety monitoring and reporting tool
  – Simple practical reporting tool – Med Safety App
  – Specific COVID-19 vaccine awareness programs for healthcare professionals and the public has been on-going by the NDoH
    • Vaccine safety profile
    • Reporting of adverse events following immunization (AEFIs) and the importance thereof
    • How to report AEFIs using the Med Safety App
  – Causality assessment – the process of determining the relationship between the adverse event and the vaccine - NDoH and SAHPRA
  – Adverse events following immunisation (AEFI) are a notifiable medical condition
## Adverse effect reporting: Med Safety App

### Med Safety App
- Passive surveillance: Spontaneous reporting of AEFI
- Mobile application
- Can be used by both healthcare professionals and the public
- Available for Android and iOS devices
- Same case report form as paper-based system
- Data will be pooled with three other African countries for signal detection

### Vaccine Monitor
- Active surveillance: Follow-up vaccine recipients
- Collecting COVID-19 vaccine information to ensure that real world use of COVID-19 vaccines reflects the experience from clinical trials
- Web and App interface
- Active follow-up with individuals at different intervals to determine if any ADRs have been experienced

### Advantages
- Replaces the need for paper forms, hence strengthens data quality
- Allows reporting from the public
- Ability to detect and analyse AEFI at both National and Continental level
- Real time data visibility
- Integrated safety data collection, analysis and interpretation of signals and trends to enable informed public health safety decisions
- Reported cases can be updated with additional information
- Ability to share information back with immunisation programmes
Conclusions

• A rigorous review process was implemented by SAHPRA

• SAHPRA experts with extensive knowledge and expertise were part of the review committee

• Extensive collaboration with other regulatory authorities that SAHPRA aligns itself with as well as the WHO is on-going
THANK YOU