



Report of the Medicines Patent Pool Expert Advisory Group on the Proposed Licence Agreement with the University of Washington on TLD long-acting injectable for HIV

Introduction

The Expert Advisory Group (EAG) of the Medicines Patent Pool (MPP) has reviewed the proposed licence agreement (the Agreement) between MPP and the University of Washington (UW) for a long-acting injectable technology (LAI).

This drug development project is supported by UNITAID through the global long-acting drug combination development (GLAD) project. The objective is to transform oral short-acting TLD (tenofovir disoproxil fumarate, lamivudine, and dolutegravir) to a combined long-acting subcutaneous injectable formulation with potential health, economic and social impact in the global fight against HIV. The assumption is that such a new formulation would help reduce the associated costs of treatment and improve adherence and retention in care for people living with HIV (PLHIV), thus reducing the gap to viral suppression while reducing the therapeutic burden for PLHIV their caregivers, and their communities.

This report reflects the outcome of a written consultation with the EAG, chaired by Peter Beyer. In addition to the EAG members, the consultation included Nathan Ford, Francois Venter and Wim Vandeveldde of the Scientific Advisory Panel (SAP).

The Terms of Reference for the EAG pose two questions that the EAG has to address in assessing draft licence agreements: (i) do the negotiation results sufficiently meet the requirements set out in the Statutes, and (ii) do the negotiation results offer sufficient added value over the *status quo*?

Having reviewed the proposed Agreement, the EAG answers both questions in the affirmative and recommends that the Board requests the Executive Director of MPP to finalise and execute the necessary documents with the UW.

Background, Overview of the Proposed Agreement

The daily pill regimens for the treatment and/or prevention of diseases such as HIV can represent a challenge in achieving optimal adherence to therapeutic regimens and can diminish the impact of otherwise effective medicines. This TLD-LAI seeks to improve disease management, patient overall comfort and therapeutic outcomes by replacing oral regimens with formulations requiring less frequent administrations, such as long-acting injectables, that help to safely sustain effective amounts of medicines in the body for extended periods of time and thereby obviate the need for daily pills. UW's 3-drug combination in one injection is enabled by a drug-combination nano-particle platform (DcNP) technology. This DcNP platform technology has been proven to enable the stabilization of 3 or more HIV drugs, even when they exhibit diverse physical-chemical properties, clustered into one product with a long-acting behaviour when administered via a subcutaneous route.

UNITAID's grant to the UW requires that UW license the LAI to MPP. The grant agreement specifies terms and conditions governing the future licensing to MPP as well as the subsequent development and ultimate commercialisation of products relying on the UW LAI. These conditions align with MPP's own statutory requirements for licences which are reflected in this proposed Agreement.



MPP entered negotiations with UW for LAI in September 2020 and first briefed the EAG on the negotiations in November 2020.

Through the Agreement, UW would license to MPP all patents and know-how necessary for the manufacture of long-acting injectables of (a) TLD or (b) either: (i) tenofovir and dolutegravir (TD); or (ii) lamivudine and dolutegravir (LD). The licence from UW to MPP would allow MPP to grant two types of non-exclusive, non-transferable, and royalty-free sublicences

- one for development partners to be able to develop licensed products anywhere in the world, and
- one for commercialisation partners to commercialise the licensed products in the Field (prevention and/or treatment of HIV) and in the Territory, consisting of all low- and middle-income countries.

This proposed Agreement contains a decision point designed to provide some flexibility in addressing questions that may arise given the variety of licensed products and the challenges for development and commercialisation that may be unique to certain of those products. The point is to determine whether a development partner is necessary for the respective product. If not necessary, then the development partner will be bypassed in favour of proceeding directly from contract manufacturer to commercialisation partner.

Assessment of the Proposed Collaboration in Light of MPP's Statutes

MPP's Statutes contain guiding principles against which the draft licence agreements are assessed. The EAG finds that the proposed collaboration meets the requirements in the Statutes, as summarised in the table below.

Relevant Considerations in the Statutes of the Medicines Patent Pool

Statutes	Terms in Proposed Licence
Negotiating terms and conditions of licence agreements with aim to maximize public health benefits, taking into account the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property of the WHO (GSPOA); WTO Doha Declaration	<ul style="list-style-type: none"> • Provisions ensuring that sales inside or outside the Territory are not a breach of the Agreement if the sales do not infringe UW intellectual property (as, for example, if a compulsory licence has been granted) or reliance on UW know-how.
Entering into licence agreements with patent holding entities, and sublicense agreements with generic manufacturers and other appropriate sublicensees on a non-exclusive and non-discriminatory basis	<ul style="list-style-type: none"> • MPP to enter into non-exclusive licences with development partners and commercialization partners.
As and when necessary, enforcing terms and conditions of licence agreements, with appropriate dispute resolution mechanisms	<ul style="list-style-type: none"> • MPP takes on significant obligations to monitor and enforce terms of development and commercialization agreements; specifies dispute resolution process with senior executives.
Requiring stringent quality criteria for licensed products	<ul style="list-style-type: none"> • Requires all licensees seek approval from WHO-PQ, Global Fund/UNITAID Expert Review Panel, US FDA, and/or other WHO Listed Regulatory.

Including anti-diversion and traceability mechanisms	<ul style="list-style-type: none"> Licensees required to mark licensed products with language stating that the product is sold under licence from MPP.
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Assessment of the Proposed Collaboration in Light of the *Status Quo*

The EAG finds that the proposed Agreement represents a significant added value over the *status quo*, due to, *inter alia*, the transparent, public health-oriented terms and conditions and a broad geographic territory encompassing all low- and middle-income countries (LMICs). It should be stressed that the licence is royalty-free for both public and private market of LMICs. The licence includes also a requirement of the affordable price of the product, such price level is to be agreed with UNITAID as well.

Moreover, even though it is not stated as an obligation for the UW, the UW acknowledges in the licence that in High Income Countries (“HICs”) access to drugs in low-income groups can also be a challenge and therefore UW’s licensing strategy for HICs aims to be socially responsible.

Furthermore, the successful development of the LAI has the potential to improve affordable access to HIV medicines for underserved and vulnerable populations. The long-acting technologies in this proposed licence have the potential to alleviate certain challenges in the fields of HIV under existing prevention and treatment regimens, whether pill burden, stigma, or poor uptake, and may yield economic savings that would allow health systems to stretch their budgets further. In the field of HIV, while advances in treatments in recent years have been tremendously important, a long-acting injectable formulation holds the potential of replacing several weeks’ worth of pills with one single injection – easier both for patients and medical infrastructure.

The EAG has in the past encouraged MPP to continue to focus on upstream interventions to improve access. This Agreement offers a roadmap to move from development through commercialization that could benefit a wide array of parties through a variety of different products. The Agreement demonstrates that working with R&D funders such as UNITAID can increase MPP’s leverage in obtaining optimal terms otherwise not possible when acting alone.

Recommendation

The EAG concludes that the proposed Agreement with UW is consistent with MPP's mandate as defined in its Statutes and represents a significant improvement over the *status quo* in terms of the public health-oriented nature of the licensing terms and conditions. The EAG recommends that the Medicines Patent Pool Governance Board request the Executive Director to sign the proposed Agreement between UW and MPP.



Peter Beyer
Chair, Expert Advisory Group
Date: 03 December 2021