



Volume 2 - 4th Quarter 2015

Highlights from BIO 2015

Africabio Enterprises Inc

The BIO International Convention was in full swing in June 2015 as CEOs, scientists, researchers, economic development professionals, and investors walked the halls of the Pennsylvania Convention Center in Philadelphia. A highlight for Africabio's CEO was the presence of an Africa pavilion, a first at the convention. Exhibitors from Ghana, Kenya, Mauritius, Nigeria, and Zimbabwe promoted their organization's and country's biopharmaceutical innovations and opportunities for collaboration. It represented the idea that a focus on global economic growth brings more attention to Africa, which has a growing middle class and competitive advantage in natural resources, and also brings a new perspective on the potential for innovation and disease research as the world becomes more connected. African scientists must focus on bringing about more opportunities for collaboration and knowledge transfer with their Western colleagues. This means strengthening African countries regulatory environment, offering infrastructure locally, and ensuring a base of young scientists eager to solve the unmet needs of Africa.

Bio Ventures for Global Health (BVGH) was a co-organizer of two panel sessions focused on Africa and its healthcare needs: Africa's Leading Economies Welcome Industry Partnerships and Global Emergency Case Study: Ebola.



Speakers on BVGH's Global Emergency Case Study: Ebola panel. From left to right: Dr. Ripley Ballou, Head of Ebola Vaccine Research, GSK; Dr. Lou Fries, CMO, Novavax; Dr. Swati Gupta, Executive Director, Office of Public Health and Science, Merck Vaccines; Dr. Hanneke Schuitemaker, Head of Viral Vaccine Discovery and Translational Medicine, Infectious Disease and Vaccines, Janssen, J&J; Dr. Luciana Borio, Acting Chief Scientist, U.S. FDA; Dr. Trevor Mundel, President, Global Health Division, Bill & Melinda Gates Foundation; and Dr. Francis Kateh, Deputy Minister-Designate, Ministry of Health, Liberia.

Dr. Francis Kateh appeared on several BIO panels to share case studies from Liberia's fight against the Ebola virus and about Liberia's expanding life sciences industry, health focus, and infrastructure development.



Regional
Collaboration for
EVD Vaccines
and
Therapeutics
Ethical & Regulatory
Challenges During

Emergency Situations

Representatives from Liberia, Guinea, and Sierra Leone, the three countries most affected by Ebola Virus Disease (EVD), discussed ethical and regulatory challenges

encountered during the crisis at a conference organized by the Regional Collaboration for EVD Vaccines and Therapeutics, in Monrovia, Liberia, 26-27 August, 2015.

The conference, spearheaded by the EVD clinical research leadership of the Liberian scientific community, brought together more than 60 health officials, researchers, ethicists, and regulators from the three most affected countries within the Mano River Union (MRU) and the Cote D'Ivoire. Other representatives came from pan-African and quasigovernmental organizations, including the World Health Organization (WHO-AFRO), Food and Drug Administration (FDA), National Institutes of Health (NIH), London School of Hygiene and Tropical Medicine (LSHTM), French National Institutes of Medical Research (INSERM), West African Taskforce for the Control of Emerging and Re-emerging Infectious Diseases (WATER), and the African Vaccine Regulatory Forum (AVAREF).

In his welcome statement on behalf of the government of Liberia, the now-former foreign minister Augustine Kpehe Ngafuan said the gathering was important because it would help organize a subregional effort to develop a resilience framework against EVD. He reflected on the EVD era when the Liberian government did not have time to reflect on what was being done; people were more concerned with saving lives than adhering to regulations. He said that although it was tempting to begin using new antiretroviral drugs to immediately save lives, medical ethics requires that drugs are tried on nonhuman primates to determine safety and therapeutic thresholds before advancing to clinical trials in humans. He concluded by praising those health workers who died in saving lives in the three most affected countries.

The conference focused on ethical and regulatory issues that arose during the recent EVD crisis. These included ethical and regulatory structures existing within the MRU and how emergency challenges encountered during the EVD crisis with clinical research and biological samples were addressed within the framework of emergency contexts. Attendees shared lessons learned and advanced recommendations for the development of a strategically driven platform and roadmap to prevent future outbreaks of emerging infectious diseases. Discussions ranged from ownership of human blood samples, the establishment of banks to store and govern biological samples, the roles of international partners in research and development, and research methods employed during emergencies. Other issues discussed, with implications during emergency situations, were social mobilization and communication strategies, engagement and partnering with community leaders and structures, initiation of common protocols for clinical trials, strengthening of research and laboratory infrastructures, and training and capacity enhancement of African ethicists and regulators. The result was the creation of a joint communique among the MRU countries for actions by their respective governments and international development partners.

Dr. Stephen B. Kennedy, chair of the organizing committee and coordinator for EVD research at the Incident Management System in Liberia, stressed "the importance of

regional collaboration and cooperation in finding effective vaccines and other therapeutics to tackle emerging infectious diseases through knowledge and technology sharing in research and clinical trials."

After two days of intense deliberation, participants agreed to collaborate and cooperate within the contexts of the following areas as key recommendations: (1) Develop harmonized regulatory framework for the approval, availability, and import of medicinal drugs and devices; (2) Develop harmonized framework for and adherence to ethical standards during health disasters; (3) Develop and adhere to appropriate and approved harmonized mechanisms for vaccines, therapeutic agents, and testing methods; (4) Identify a harmonized cross-country strategic framework to build capacity in the areas of ethics, regulatory affairs, research, and infrastructure; and (5) Share information, experience, and good practices during and after health emergencies.

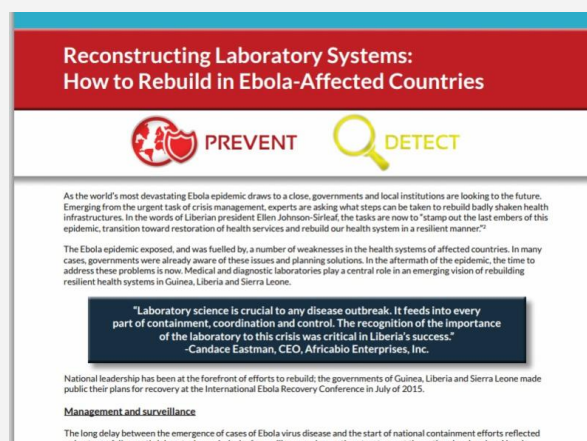
Authored by: Stephen B. Kennedy, MD, MPH, FLCP, FWACP, Liberia Post Graduate Medical Council

Africabio CEO Speaks Reconstructing Laboratory Systems

Candace Eastman, CEO was featured in the African Society for Laboratory Medicine (ASLM) Special Global Health Security Edition published October 2015. The link is below.

<https://aslm.org/stay-informed/press-room/lab-culture-newsletter/>

Courtesy of African Society for Laboratory Medicine



ASLM Newsletter



Partner Corner

The JSI Infection Prevention and Control Activity (IPCA)

John Snow, Inc. (JSI) is a global public health management consulting and research organization that currently implements four programs with more than 100 in-country staff

and consultants in Liberia. JSI has been on the front lines of the Ebola response in West Africa since the onset of the epidemic. Beginning in September 2014, JSI has provided technical assistance to the Liberian Ministry of Health (MOH) to create the National Infection Prevention and Control (IPC) Task Force, an advisory body composed of representatives from the MOH, bilateral and multilateral organizations, and local and international NGOs. The IPC Task Force developed the MOH's first Ebola-focused IPC training curriculum, coordinated emergency response partner activities, and disseminated IPC-related data and developments to key stakeholders. In November 2014, JSI was awarded a cooperative agreement by USAID's Office of Foreign Disaster Assistance (OFDA), the **Infection Prevention and Control Activity (IPCA)**, to scale up Ebola-focused IPC activities in Liberia.

The primary objective of the IPCA is to institutionalize IPC practices within Liberia's health system, with a focus on hand hygiene, triage and screening, cleaning and waste management, and the distribution of, access to, and proper utilization of personal protective equipment (PPE). The IPCA continues to pursue this objective through three primary components:

1. The provision of training and monthly supportive supervision to clinical and nonclinical healthcare workers from more than 200 health facilities on IPC protocols using the MOH-approved training curriculum in eight counties: Bomi, Gbarpolu, Grand Cape Mount, Grand Kru, Montserrado, Rivercess, River Gee, and Sinoe.
- 2) The last-mile distribution of essential IPC supplies, including PPE, on a periodic basis (frequency of distribution varies by county) to nearly 700 health facilities in all 15 counties.
- 3) Building IPC oversight capacity within the MOH at the county and central levels.

The activities that make up these components have evolved in recent months to reflect Liberia's transition to a post-emergency context, and are currently focused on building County Health Team capacity to maintain a robust, sustainable level of emergency preparedness. The IPCA will continue through December 2015.

Authored by: Yvonne Kodl, JSI Training and Supervision Advisor for the Liberia IPCA

Upcoming Events

Celebrate **Lab Week**

Save the Date

Highlighting Diagnostics in Liberia

Join the discussion of improving Liberia's diagnostic environment during Medical Laboratory Professionals Week and showcase how your organization is making a difference.

**April 20-21, 2016 | 8:00 A.M.—5:00 P.M.
Monrovia, LIBERIA**

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