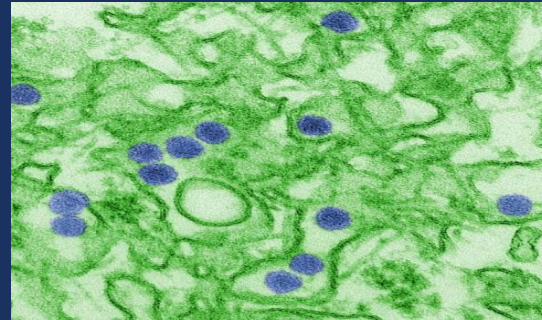
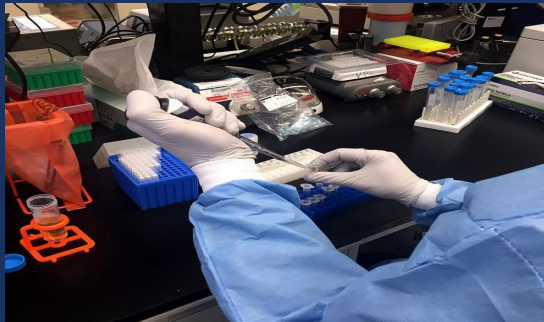


Advancing a priority arbovirus research agenda for global preparedness and response

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International Meeting on Zika and Mosquito-borne Arboviruses

London December 4-6, 2023

Meeting objectives:

- First 2 days: Advance a priority R&D agenda for Zika diagnostics, vaccines, and therapeutics
- Third day: Identify an integrated research strategy for mosquito-borne arboviruses

Hosted by the Wellcome Trust, London, UK



Background: WHO R&D Roadmaps for priority pathogens with epidemic potential

Background: WHO R&D Blueprint for Priority Pathogens

- Strengthen preparedness for priority pathogens of epidemic potential that have few or no medical countermeasures, i.e., diagnostics, vaccines, therapeutics
- Generate R&D roadmaps for priority pathogens
 - Summarize key barriers and knowledge gaps
 - Identify specific, time-bound R&D goals and milestones
- Structured format and processes for review, public vetting, publication

Meeting background and approach

- 2019 -- Advanced draft of WHO ZIKV R&D roadmap completed
 - Structure: Diagnostics, Vaccines, Therapeutics, Cross-cutting Issues
 - Developed by CIDRAP with WHO Zika Taskforce, University of Texas Medical Branch, WHO Blueprint, and Wellcome Trust
 - Not finalized due to COVID-19. Draft posted on WHO Blueprint website.
- 2023 -- WHO Zika Taskforce reconvened
- Updated ZIKV R&D roadmap
- Dec 2023: Meeting of stakeholders - use roadmap as a platform to define research priorities to advance R&D for ZIKV diagnostics, therapeutics, and vaccines.

Zika Taskforce and Steering Group

Taskforce Members

- Kristina Adams Waldorf, Univ of Washington
- Joseph Bennie, FDA, Ghana
- Aaron Brault, CDC, USA
- Christiane Coelho, ANVISA, Brazil
- Nuno Faria, Univ of Cambridge, UK
- Eva Harris, UC Berkeley, USA
- Nagwa Hasanin, UNICEF
- Albert Ko, Yale School of Public Health, USA
- Yee-Sin Leo, NCID, Singapore
- Ziad Memish, Ministry of Health, Saudi Arabia
- Jairo Méndez-Rico, PAHO
- Kaitlyn Morabito, NIH, USA
- Manuela Mura, EMA, The Netherlands
- Lee Ching Ng, NEA, Singapore
- Kirk Prutzman, FDA, USA
- Ingrid Rabe, WHO, Geneva
- Henrik Salje, Univ of Cambridge, UK
- Erin Staples, CDC, USA
- Stephen Thomas, SUNY Upstate Medical Univ, USA
- Jessica Vanhomwegen, Institut Pasteur, France
- Jurai Wongsawat, Ministry of Public Health, Thailand
- Devy Emperor, FIND, Geneva (observer)

Wellcome Trust

- Ana Cehovin
- Petra Fay
- Josie Golding

UTMB

- Alan Barrett
- David Beasley
- Nigel Bourne

CIDRAP

- Tabitha Kazaglis
- Eve Lackritz
- Anje Mehr
- Nicolina Moua
- Michael Osterholm
- Julie Ostrowsky
- Angela Ulrich

Meeting Objectives

- Identify key research priorities and **specific, actionable activities** needed to advance a ZIKV research agenda.
- Comprehensive, coordinated approach.
- Promote visibility and investment to accelerate research needs.
- Building on Zika R&D focus, Wellcome Trust added review of priorities for an integrated arbovirus research strategy.

Included topics of vectors, vector control, climate change, and interactions of host-virus-vector-animal reservoirs that were not part of the WHO R&D structure for medical countermeasures.

The need for a priority research agenda for Zika diagnostics, therapeutics, and vaccines

- February 2016 - WHO declared a Public Health Emergency of International Concern (PHEIC) due to emergence of ZIKV epidemic in the Americas and discovery of associated microcephaly and Guillain-Barré syndrome.
- November 2016 - WHO lifted the PHEIC with the declaration of the Director General, “***We must be ready for the long haul,***” a clear statement of the long-term commitment required to address this newly-emerged pathogen.



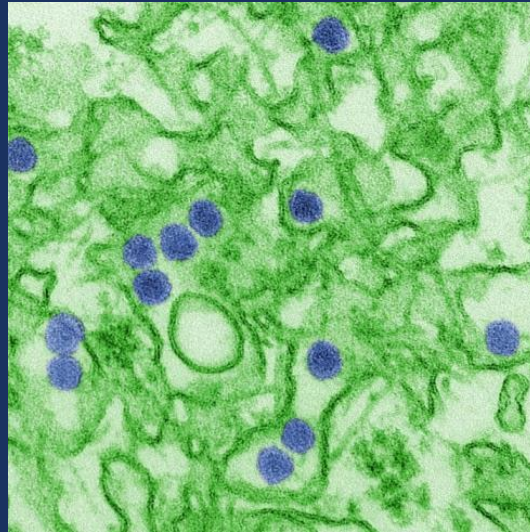
The need for a priority research agenda for Zika diagnostics, therapeutics, and vaccines

- Ultimately, 91 countries and territories have documented autochthonous, mosquito-borne ZIKV transmission.
- No vaccines, therapeutics, or diagnostics for routine antenatal screening.
- Risk of complacency after a global epidemic.
- Critical time to develop countermeasures now to be prepared for re-emergence in the future.

Unique challenges of Zika R&D

- Unlike other priority pathogens, disease is generally mild or asymptomatic. Ultimate goal is to prevent ZIKV infection of the fetus.
- Co-circulation and co-infection with other arboviruses.
- Low transmission and uncertainty of future transmission patterns:
 - Limits research opportunities
 - Uncertain markets for industry investment
 - Low visibility and investment

Zika Diagnostics: Key Challenges and Research Priorities



Zika diagnostics: key challenges

- Diagnostics are foundation of research, preparedness, and response: surveillance, early detection, forecasting, clinical diagnosis, R&D, clinical trials, evaluating public health measures, etc.
- Majority of ZIKV infections asymptomatic or mildly symptomatic
- Nucleic acid amplification tests (NAATs):
 - High specificity but narrow window of detectable RNA
 - Limited utility for identifying asymptomatic infections and for routine screening in antenatal care

Zika diagnostics:

Limitations of serology

- IgM detected generally 1-12 weeks post-infection.
- IgM may persist for months; positive test may reflect infection prior to pregnancy.
- Cross-reactivity with other flaviviruses and “antigenic sin.”
- PRNT is labor-intensive, limited to reference laboratories, and may fail to confirm etiologic flavivirus.
- Lack of approved tests for alternate specimen types (CSF, urine, amniotic fluid).

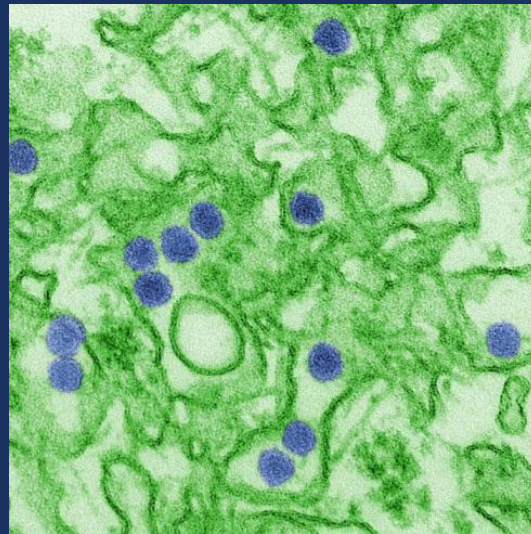
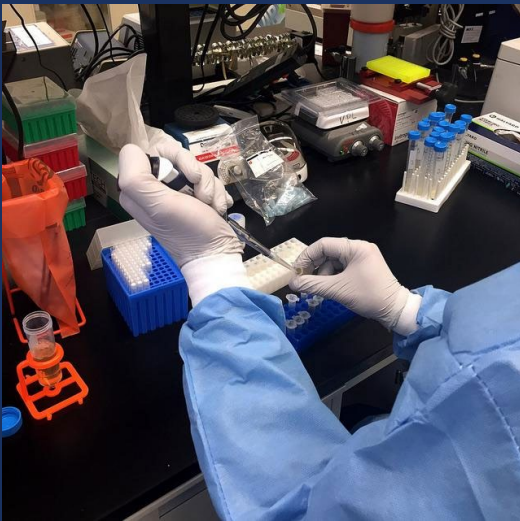
Zika diagnostics accessible for global use

Development of rapid and simple tests

- Need for point-of-care diagnostics in clinical settings with limited lab capacity
- Challenges with specificity and false positives
- Logistical challenges for reference laboratories; increased burden of confirmatory testing

Multiple NAAT and serologic assays approved under emergency use authorizations but not validated by standardized evaluations.

Zika Vaccines, Therapeutics, Prophylaxis: Key Challenges and Research Priorities



Key challenges for ZIKV vaccine R&D

- Complex immunologic interactions with other flavivirus infections.
- Potential ADE safety signal.
- Mechanisms of protective immunity of flavivirus vaccines poorly understood. Neutralizing Ab's often used as correlate of protection.
- Need to better elucidate roles of neutralizing, non-neutralizing, and T-cell mediated immune responses.
- Prevention of congenital infection unrealistic endpoint of clinical trials.
- Majority of adult infections asymptomatic/mildly symptomatic.
 - Difficult to assess clinical endpoints and benefit for regulatory approval.

Table 1. Zika vaccine candidate platforms and components.

Platform technology	Type
Live attenuated	<ul style="list-style-type: none">● Infectious clone based with mutations● Codon pair de-optimized● Plasmid-launched live attenuated vaccine● Chimeric prM + E based on either dengue, Japanese encephalitis or yellow fever backbones● Single round replicating viruses
Inactivated	<ul style="list-style-type: none">● Formalin-inactivated purified whole virus particle
Recombinant protein	<ul style="list-style-type: none">● N-terminal 80% envelope protein● N-terminal 90% envelope protein● Envelope protein domain III● NS1
Virus-like particles (VLPs)	<ul style="list-style-type: none">● prM + E protein
Live vectored	<ul style="list-style-type: none">● Measles virus● Vaccinia
None-live vectored	<ul style="list-style-type: none">● Replication deficient chimpanzee adenovirus● Replication deficient human adenovirus● Replication defective rhesus adenovirus● Replication defective poxvirus
DNA	<ul style="list-style-type: none">● prM + E● prM + E + NS1
RNA	<ul style="list-style-type: none">● prM + E

*prM = pre-membrane; E = envelope; NS1 = nonstructural protein 1

ZIKV vaccine R&D

- Multiple candidates in preclinical and Phase I and II clinical trials, multiple platforms.
- Non-standardized methods, endpoints.
- Unknown market demand. Unstable funding.
- Need to clarify target populations, non-traditional regulatory pathways.

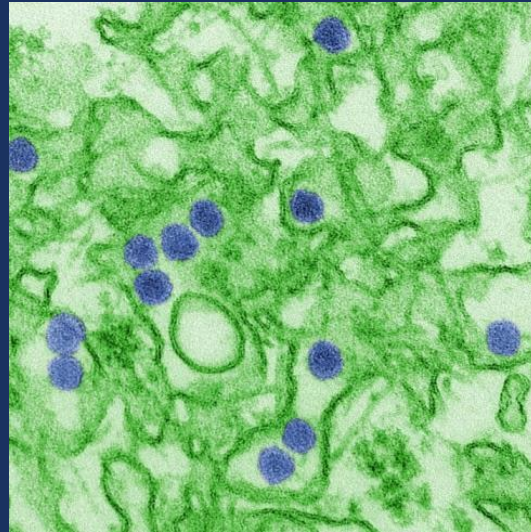
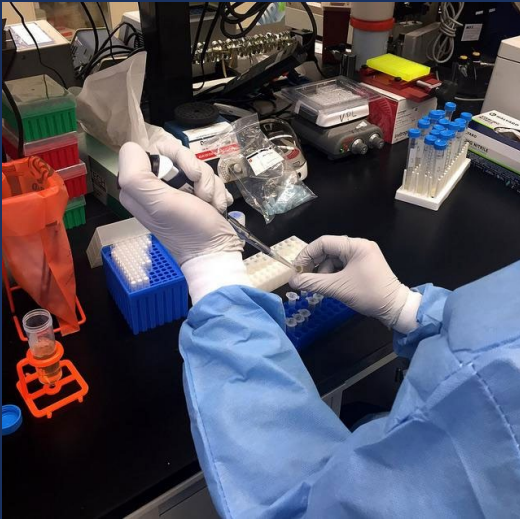
Source: Thomas and Barrett, Human Vacc & Immun. 2020

Defining regulatory pathways for vaccines and therapeutics

Multiple unique considerations for ZIKV regulatory approvals:

- Potential use in pregnant women or women who may become pregnant
- Prevention of congenital Zika infection - large sample size collected over years
- US FDA – likely stepwise approach:
 - Approval via accelerated pathway for adults. Animal rule alone unlikely.
 - Post-marketing studies to monitor population immunity and congenital Zika infection
- Different countries/regions with different regulatory requirements
- Prepare now for future outbreaks

Systematic Approaches to Accelerate R&D for Zika Diagnostics, Vaccines, Therapeutics



Biorepositories and sharing specimens

Need for sharing well-characterized clinical specimens

- Address restrictions of export of clinical specimens, protection of country interests, intellectual property, human subjects
- Models of agreements in Americas (PAHO), Europe (EU), Africa (Africa CDC)
- Proposed strategies:
 - Regional specimen sharing with legal agreements; define how quality samples are collected, stored, utilized.
 - Potential for industry agreements with countries if product commercialized.

Create systems for collection of standardized, well-characterized specimens

Develop standardized collections of well-characterized specimens for R&D, diagnostic assessments, laboratory proficiency programs.

Build global research networks collecting specimens from:

- Patients infected with ZIKV and other flaviviruses
- Geographically diverse areas
- Different patient populations: pregnant women, adults, neonates
- Different specimen types: blood, saliva, urine, amniotic fluid, CSF
- Standardized protocols for specimen collection, processing, and storage; characterized according to time after infection or symptom onset

Zika diagnostics:

Evaluation and validation of existing diagnostics

Activities:

- Landscape review of diagnostics that are commercially available or in the pipeline.
- Convene expert working group: review landscape analysis, summarize gaps, and identify priorities.
- Complete standardized evaluations of assays, using standardized panels with geographic diversity, reported in International Units using International Standards. Include specimens coinfecting/previously infected with other flaviviruses.
- Explore use of easy-to-collect specimens (e.g. saliva), new approaches (e.g. IgA), multiplex platforms for co-circulating arboviruses.

Animal models: key activities

Animal models of high importance in context of pregnancy research and low ZIKV transmission

- Inventory of animal models that best recapitulate congenital Zika infection.
- Investigate mechanisms of infection, pathophysiology, protective immunity, ZIKV kinetics, R&D for vaccines and therapeutics (including different viral strains).
- Correlates of protection for fetal infection, “sterilizing immunity”
- Define measureable endpoints that can be standardized across studies (viral load, immune response, malformations).

Controlled human infection models (CHIM) for Zika and other flaviviruses

Prominent role for **CHIM** studies to accelerate R&D during low **ZIKV** transmission

- ZIKV kinetics and immune response, by different sample types (blood, urine, saliva, cervical)
- R&D platform for vaccines, diagnostics, therapeutics
- Immunologic interactions of flaviviruses
- ZIKV CHIM studies approved and underway by Anna Durbin et al., Johns Hopkins Univ.
 - Identified strategies to mitigate risk for secondary sexual and mosquito-borne transmission. Enroll only women on highly-effective contraceptive methods.

Preparing research sites in advance of ZIKV re-emergence

- Establish global research networks with standardized and pre-approved protocols
- Geographically diverse research sites with co-circulating flaviviruses
- Engagement and planning with regulatory and public health agencies in countries at risk for re-emergence
- Identify and prioritize research candidates for diagnostics, vaccines, therapeutics
- Plan staffing, laboratory, and data management capacity
- Early engagement of governments, women, communities

Need for longitudinal cohorts

Longitudinal cohorts of pregnant women, infants, adults

- Durability of immune response
- Correlates of immune protection
- Interactions of ZIKV, DENV, and other flaviviruses: clinical, immunologic, epidemiologic
- Clinical sequelae of congenitally exposed infants, children
- Build community engagement
- Laboratory and research infrastructure for outbreak response

Need to identify strategies for long-term investment in the context of integrated arbovirus research.

Strengthen epidemiology and surveillance for preparedness and response

Data needed for early detection, response, forecasting, clinical outcomes, measurement of population-level immunity, response

- Enhance systems for early detection, monitoring, and evaluation of interactions of ZIKV, DENV, and co-circulating flaviruses
- Global data and laboratory capacity to support surveillance
- Track genetic epidemiology and inform forecasting models.
- Investigate novel strategies, e.g. wastewater surveillance
- Build investment for integrated arbovirus surveillance and control

Building global laboratory capacity for preparedness and response

- Conduct assessment of laboratory capacity in countries at risk for ZIKV
- Global mapping of reference labs
- Establish international reference laboratory networks for ZIKV/arboviruses
- Proficiency testing programs
- Anticipate assay selection, standardized protocols to evaluate diagnostics before the next outbreak

Programs to accelerate Zika R&D

- Update target product profiles (TPPs) and use cases for vaccines and therapeutics, including prophylaxis
 - Relevant to different geographic settings and capacity
- Ensure international standards and validation panels are available to assess new and existing diagnostics

Policy and investment for ZIKV and arbovirus R&D

Ultimately, need investment to accelerate R&D:

- Advance Zika research as part of an integrated arbovirus strategy
- Develop a full public health value proposition / cost-benefit analyses of medical countermeasures
- Investigate potential for advance purchase agreements
- Meetings and work groups to monitor pipeline, facilitate coordination and efficiencies
- Investigate strategies for protections related to legal liability of products used in women of reproductive age.

Advance visibility and engagement of governments, foundations, the public

- Collaborate with NASEM and other stakeholders