

# VIPS Phase I executive summary: Prefilled polymer blow-fill-seal droppers / dispensers

June 2019

# Prefilled polymer blow-fill-seal (BFS) droppers / dispensers



## About prefilled polymer BFS droppers/dispensers

- Blow-fill-seal is an aseptic filling process that is **widely used** to produce a variety of pharmaceuticals in polymer primary containers.
- In BFS process, a polymer resin is melted into a parison, which is blown into a mould, filled, and sealed, all in a continuous process within a single piece of equipment. This is in contrast to preformed polymer squeeze tubes, in which the container is first produced and sterilized, and then shipped to a different site for filling and sealing.
- A BFS dropper produces metered-size droplets and **could be used for small dose volume vaccines such as oral polio vaccine (OPV)**, including multidose presentations. A BFS dispenser emits a stream of vaccine and could be used for oral vaccines such as rotavirus and cholera that typically have a larger dose volume.



BFS squeeze tube dispensers (GSK Rotarix)

## Stage of development

- BFS dispensers are **currently manufactured and commercially available**.
- In 2019, GlaxoSmithKline's (GSK's) **Rotarix oral rotavirus vaccine was the first vaccine to be WHO prequalified in a BFS container**.
- **Other vaccines are being evaluated for BFS dispenser presentations.**

# Prefilled polymer blow-fill-seal (BFS) droppers / dispensers scorecard

Comparator: single dose vial (SDV) (liquid) and dropper/dispenser



Quality of evidence: Moderate

| VIPS Criteria   |   | Indicators   |   | Priority indicators - Country consultation             |               |           |
|---|---|--|---|--|---------------|-----------|
| Primary criteria  | Health impact   | Ability of the vaccine presentation to withstand heat exposure   | Neutral   | RI* Facility   | RI* Community | Campaigns |
|   |   | Ability of the vaccine presentation to withstand freeze exposure | Neutral   |  |               |           |
| Coverage & Equity impact  | Ease of use <sup>a</sup>  | Better   | +   | ++   | ++            |           |
|   | Potential to reduce stock outs <sup>b</sup>                               | Better   |   |  |               |           |
| Safety impact   | Acceptability of the vaccine presentation to patients/caregivers          | Neutral  |   | +  | +             |           |
|   | Likelihood of contamination   | Better   |   |  | +             |           |
|   | Likelihood of needle stick injury   | Neutral  |   |  |               |           |
|   | Total economic cost of storage and transportation of commodities per dose | Considerably better  | +   |  |               |           |
| Economic costs  | Total economic cost of the time spent by staff per dose                   | Better   | ++  | ++   | +             |           |
|   | Total introduction and recurrent costs <sup>c</sup>                       | Neutral  |   |  |               |           |
|   | Secondary criteria  | Potential breadth of innovation use                              | Applicability of innovation to one or several types of vaccines | All liquid oral or intranasal vaccines are candidates. |               |           |
| Ability of the technology to facilitate novel vaccine combination |   |  | No  |  |               |           |

\* RI : Routine immunisation

|    |                                     |
|----|-------------------------------------|
| ++ | Given significantly more importance |
| +  | Given more importance               |
|    | Kept neutral                        |

<sup>a</sup> Ease of use can prevent missed opportunities and impact ability for lesser trained personnel to administer the vaccine, including self-administration  
<sup>b</sup> Based on the number of separate components necessary to deliver the vaccine or improved ability to track vaccine commodities  
<sup>c</sup> Total economic cost of one-time / upfront purchases or investments required to introduce the innovation and of recurrent costs associated with the innovation (not otherwise accounted for)

# Prefilled polymer blow-fill-seal (BFS) droppers / dispensers: Antigen applicability



- BFS droppers/dispensers could be **used with liquid vaccines** that are **administered orally**.
- It is possible that vaccines that are **currently given as intranasal sprays** could be given as **intranasal drops using a BFS dropper**.
- Compatibility of a vaccine with the BFS filling process and material would have to be assessed on a case-by-case basis.
- Examples of VIPS priority antigens that would be **well-suited for a BFS dropper/ dispenser** include **OPV, and liquid rotavirus**.
  - In 2019, GSK licensed a new presentation of Rotarix vaccine in a strip of 5 single-dose BFS squeeze tubes which **stacks to minimize the cold chain footprint**.

# Prefilled polymer blow-fill-seal (BFS) droppers / dispensers: Assessment outcomes



## KEY BENEFITS

- **Potential to positively impact coverage and equity:**
  - +++ May be **easier to use**:
    - Require **fewer preparation steps** than glass vials (which require a separate delivery device)
    - May **reduce errors and improve dose control**
  - Potential to **reduce stock-outs** due to fewer components required compared to a glass vial presentation (no need for a separate dropper device), simplifying distribution
- **May improve safety:**
  - ++ Could reduce the **risk of contamination**, by reducing reuse of delivery device.
- **Potential to reduce economic costs:**
  - ++ May **reduce storage and transportation costs** due to lower in the cold chain volume given the potential to be more compact than single-dose glass vials and out of cold chain volume due to fewer components
- +++ May **save health care worker time**

## KEY CHALLENGES

- The space **saved in the cold-chain will be dependent on container design**:
  - How much space is required for product labelling, and whether an overwrap is required to prevent gas and water vapour ingress/egress through the polymer
- **Antigen applicability**:
  - Limited to oral and intranasal vaccines and diluents

- +++ Important attribute for at least 2 settings or for the 3 settings based on the country consultation (see slide 3)
- ++ Important attribute for campaigns or routine facility-based immunisation based on country consultation (see slide 3)

# Prefilled polymer blow-fill-seal (BFS) droppers / dispensers: Rationale for prioritisation



- Based on the analysis, BFS droppers/dispensers are included in a **'maybe'** category for prioritisation and **the Steering Committee is requested to provide advice on whether this innovation should be prioritised or not for Phase II.**
- While these devices offer benefits that could **positively impact coverage and equity and safety and reduce delivery costs, there are few VIPS priority vaccines that are delivered via the oral or intranasal route to which they apply.**
- In addition, since BFS containers are already used in the pharmaceutical industry, it is **unclear whether prioritisation by VIPS would add significant benefit.**

## Additional important information to be analysed in phase II (if prioritised for Phase II):

- Economic analyses of single dose and multi-mono-dose formats and the possibility of leveraging BFS manufacturing processes for other BFS products such as compact prefilled auto-disable devices (CPADs).
- The potential production, user handling, and disposal benefits of polymer containers versus glass.