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## **Reports by the Director-General**

### **Summary progress reports**

#### **WHO influenza virus traceability mechanism**

1. In May 2007, the Health Assembly adopted resolution WHA60.28 on Pandemic Influenza Preparedness: sharing of influenza viruses and access to vaccines and other benefits, which, inter alia, requested the Director-General to convene an intergovernmental meeting. During the Intergovernmental Meeting subsequently held in Geneva in November 2007, Member States adopted an Interim Statement<sup>1</sup> inviting the Director-General to take two immediate measures to increase transparency in the trust-based system necessary to protect public health:

- (a) establish a technical and feasible traceability mechanism as soon as possible within WHO to track all shared H5N1 and other potentially pandemic human viruses and parts thereof;
- (b) establish an advisory mechanism to provide guidance to strengthen the trust-based system needed to protect public health and undertake necessary monitoring and assessment of that system.

2. A WHO technical meeting was held on 24–26 October 2008 in Ottawa in order to develop technical parameters for a WHO influenza virus traceability mechanism. The participants, from 21 countries, represented National Influenza Centres, WHO Collaborating Centres, essential regulatory laboratories involved in the WHO vaccine virus selection and development process, and influenza vaccine industry associations (the International Federation of Pharmaceutical Manufacturers & Associations and the Developing Countries Vaccine Manufacturers Network). In addition, two advisory mechanism members and users of three different existing tracking systems participated.

3. The meeting concluded that detailed technical specifications for the influenza virus traceability mechanism should be finalized by a smaller working group in Geneva before the resumption of the intergovernmental meeting in December, and that an appropriate process to develop the improved system should proceed.

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<sup>1</sup> [http://www.who.int/gb/pip/pdf\\_files/IGM\\_PIP-IntStatement-en.pdf](http://www.who.int/gb/pip/pdf_files/IGM_PIP-IntStatement-en.pdf).

4. Discussion at the Ottawa meeting covered: a report by the Secretariat on the results of a broad survey conducted from July to September 2008 to elicit technical input on the scope and parameters of the improved traceability mechanism from all laboratories in the WHO Global Influenza Surveillance Network; the perspectives and priorities of National Influenza Centres, WHO Collaborating Centres and users; the experience of users of other traceability mechanisms; and practical lessons learnt from the interim influenza virus traceability mechanism. The meeting concluded that the influenza virus traceability mechanism would enhance transparency, equity, and trust, providing that it:

- was straightforward to use
- was limited to the mandate set by the intergovernmental process with possibilities for scale-up
- allowed open access, with some possible limitations
- promoted inclusiveness
- was flexible.

5. There was interest in creating interfaces with other systems or databases to help with global pandemic risk assessment, but participants recognized that such database activities would go beyond the mandate of the intergovernmental process. Guidance would be sought, on the length of time during which materials should be traced, and on the scope of the chain of users of the materials.

6. WHO's Secretariat provided information on three possible options that it will consider for development of the improved influenza virus traceability mechanism, building on the existing interim system: (1) a full request for proposals; (2) a limited request for proposals directed to companies with which WHO already has an agreement; and (3) the use of internal WHO technical resources without a request for proposals. The estimated time until implementation would range from July 2009, at the earliest, to July 2010. The cost might be between US\$ 500 000 to US\$ 1 million.

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