

CEP•I

CEPI RNA VACCINE REGULATORY WORKSHOP

RNA Workshop Presentation Slides

Day 2

Session 2 · Regulatory Basis in Practice
28–29 July 2026



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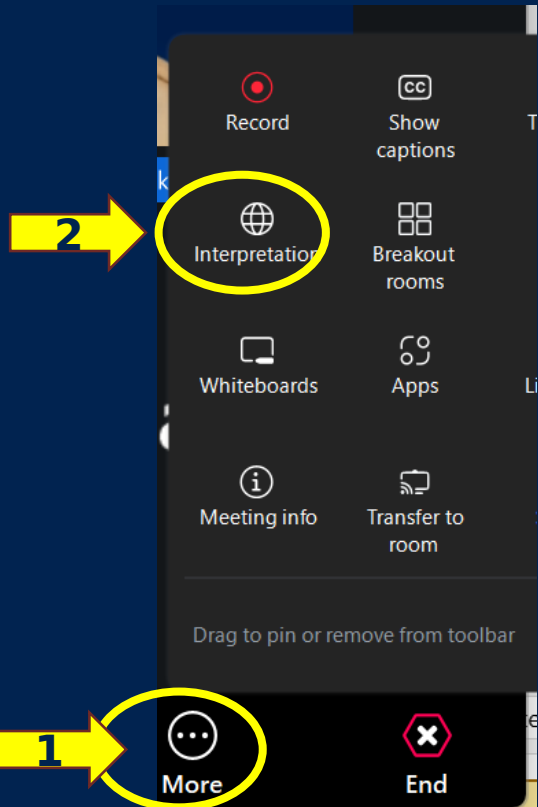
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Regulatory Pathways in the Development of RNA Vaccines

28-29 July 2026

Instructions for Using Simultaneous Translation



< [Windows | macOS | Web app](#) [Android | iOS](#) >

1. In your meeting/webinar controls, click **Interpretation** .
2. Click the language that you would like to hear.
3. (Optional) To hear the interpreted language only, click **Mute Original Audio**.

Notes:

- You must join the meeting audio through your computer audio/VoIP. You cannot listen to language interpretation if you use the [dial-in](#) or [call me](#) phone audio features.
- As a participant joining a language channel, you can broadcast back into the main audio channel if you unmute your audio and speak.



SESSION 2 • MODULE 1 • 10 MINUTES

Opening & Recap of Session 1

A CEPI-led workshop for NRA regulators of the Americas

CEPI

What Day 2 covers

Four modules build the answer to today's framing question — starting with this recap, then moving into emergency development, reliance, and inspection.

1	Opening & Recap	Recap of Session 1 and the framing question that runs through today.	YOU ARE HERE
2	Development under emergency	How development and review compress when time is short.	
3	Reliance in the Americas	Regional experience using others' decisions to move faster.	
4	Product-specific GMP inspection	Inspecting RNA and LNP manufacture against the right expectations.	

What we established in Session 1

1

The molecule

mRNA elements — 5' cap, UTRs, antigen ORF, poly(A) tail — each annotated and justified.

2

The manufacture

Cell-free IVT and LNP formulation; sequence-agnostic and faster to adapt.

3

The RNA family

Standard mRNA, self-amplifying RNA, and circular RNA — one diversifying platform.

4

The platform question

RNA, LNP, or both — the boundary shapes data-sharing and change management.

5

Readiness & roles

Six-domain self-assessment, product classification, and the two NRA roles.

What mRNA is — and what it does in the body

mRNA is a short-lived instruction, not a drug that lingers. The vaccine delivers the message; your own cells make the antigen.

1

Deliver

The lipid nanoparticle carries the mRNA into the cytoplasm of your cells — it stays outside the nucleus.

2

Translate

Ribosomes read the mRNA and build the target antigen, exactly as they read the cell's own messages.

3

Display

The antigen is shown to the immune system, which learns to recognise it. No live virus is involved.

4

Clear

The mRNA is broken down within days. It does not enter the genome and does not change your DNA.

Never enters the nucleus • Never alters DNA • Cleared within days

Why this makes a fast, adaptable platform

The same mechanism that keeps mRNA transient also makes it a versatile platform — the process barely changes when the target does.



Plug-and-play

Swap the coding sequence, keep the process. A new antigen does not mean a new manufacturing method.



Sequence-agnostic

No cell culture and no eggs. The same cell-free chemistry makes any construct, so scale-up is faster.



Transient & non-integrating

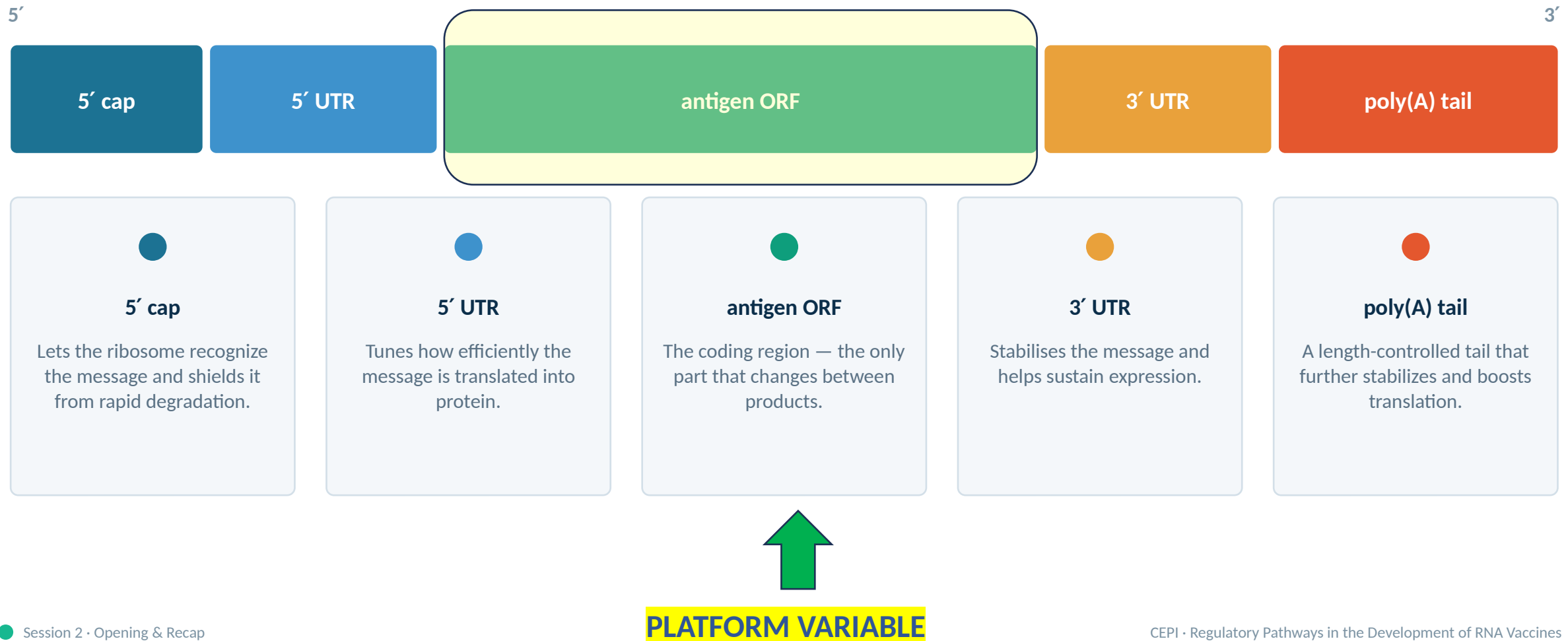
Expression is temporary and the genome is untouched, giving a well-characterised safety profile.



For an NRA: platform knowledge carries across products — the review of the process can be largely reused when only the sequence changes.

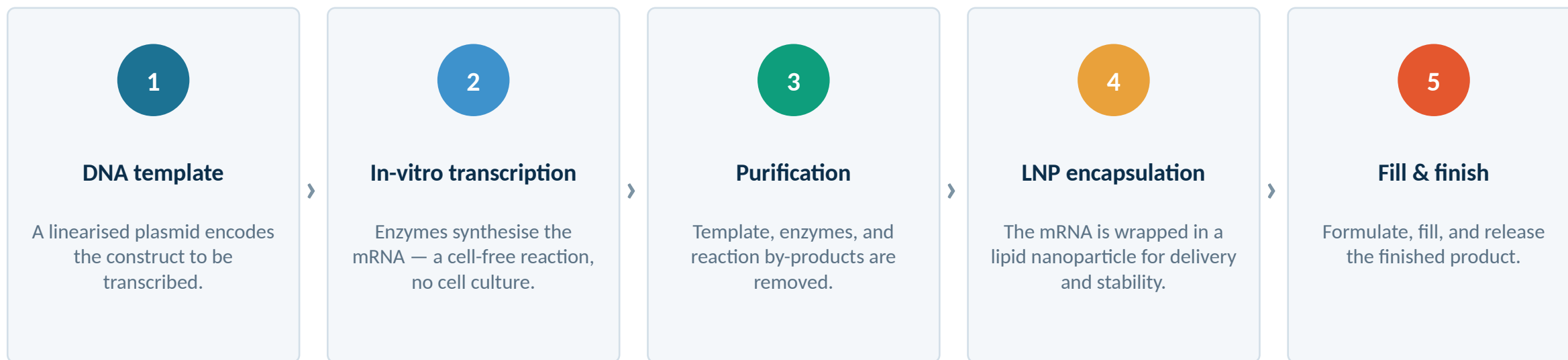
Anatomy of the mRNA construct

Read 5' to 3', every element is deliberate. Only the coding region changes from one product to the next.



Cell-free synthesis, then formulation

The mRNA is made in a tank with no living cells, then wrapped for delivery. The chemistry does not change when the sequence does.



Sequence-agnostic and faster to adapt — the same platform process makes any construct.

One platform, three RNA formats

The molecule can take several forms. The differences change dose and durability — but the regulatory questions rhyme across all three.

Established

Standard mRNA

Encodes the antigen directly. The most mature format and the basis of the first licensed products.

saRNA

Self-amplifying RNA

Carries a replicase, so each molecule makes more copies inside the cell — potentially much lower doses.

circRNA

Circular RNA

A closed loop with no free ends, aiming for greater stability and longer-lasting expression.

Different molecules, one diversifying platform — the review builds on shared foundations.

Where do you draw the ‘platform’ line?

‘Platform’ can mean the RNA, the delivery system, or both together. The boundary is a regulatory choice with real consequences.



RNA only

The message is the platform; the LNP is assessed per product.



LNP only

The delivery system is the platform; each new RNA rides on it.



RNA + LNP together

The whole system is treated as a single platform.

 **Why it matters:** the boundary you choose shapes what data can be shared across products and how post-approval changes are managed.

Assessing readiness, and knowing your role

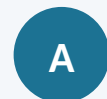
A self-assessment across six regulatory domains, a product classification, and the two roles an NRA can play — the set-up for Session 2.

Six-domain self-assessment

- 1 Scientific expertise
- 2 Analytical infrastructure
- 3 Legal & regulatory authority
- 4 Operational systems
- 5 Collaboration mechanisms
- 6 RNA GMP inspection readiness



Product classification — vaccine, biological, or gene therapy? The category sets the pathway, dossier, and inspectorate.



Manufacturing-country NRA

Oversees development and production at source — the full dossier, GMP, and release.



Importing-country NRA

Relies on the work of others where possible, focusing effort on local decisions.

The mRNA Vaccine Revolution

Core principles, safety, and regulatory pathways
of platform technologies

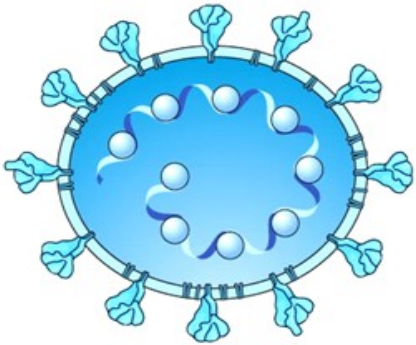
PLATFORM SCIENCE

CLINICAL SAFETY

REGULATORY PATHWAYS

Four Generations of Vaccine Technology

Vaccine 1.0



Whole-organism either live and weakened, or killed forms

- Polio, hepatitis A, rabies, influenza, yellow fever, measles, mumps, rubella, typhoid

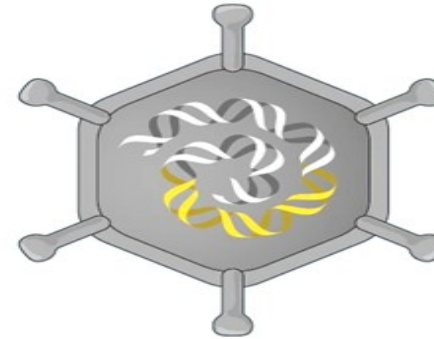
Vaccine 2.0



Recombinant subunit vaccines, consisting of specific protein antigens or protein components

- Seasonal influenza, hepatitis B, HPV

Vaccine 3.0



Adenoviral non replicating DNA and plasmid DNA

- VSV-Ebola vaccine
- COVID19

Vaccine 4.0



Synthetic in nature, carries the cells' message to make the antigen for a particular infection

- COVID19

Time to manufacture

Process Economics

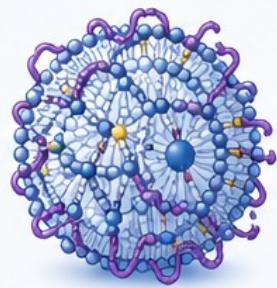
mRNA-LNP VACCINES: MECHANISMS OF ACTION AND PATHWAYS TO NEXT-GENERATION IMMUNITY

Powerful, Coordinated Immunity, Millions of Lives Saved. Continued Innovation for a Healthier Future.

nature

Nucleoside-modified mRNA-lipid-nanoparticle (mRNA-LNP) vaccines confer a high level of protection against severe COVID-19 and, since their first authorization for human use in 2020, have saved millions of lives. Their efficacy relies on the induction of powerful and coordinated innate and adaptive immune responses.

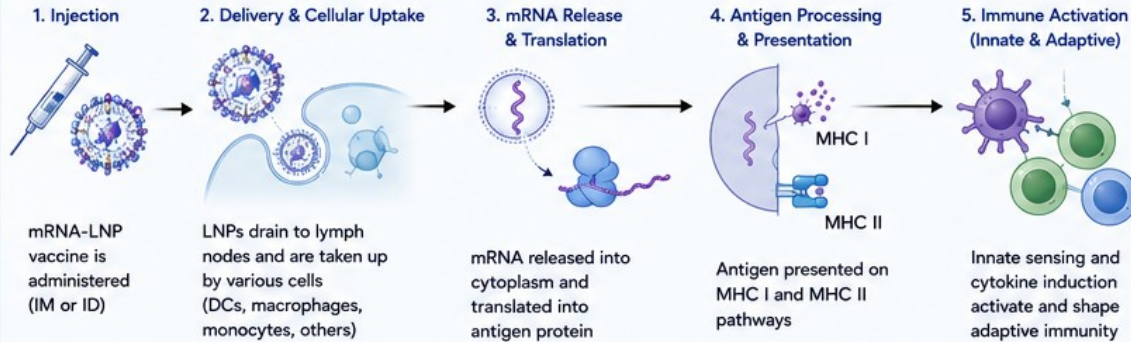
THE mRNA-LNP VACCINE PLATFORM



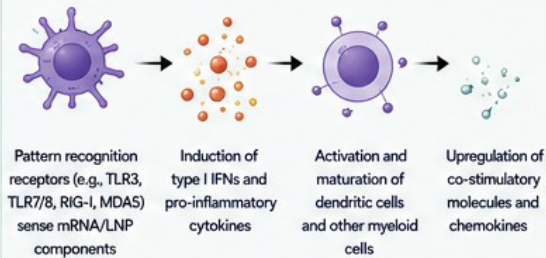
- Nucleoside-modified mRNA (wrapped on surface)
- Ionizable lipid
- Phospholipid
- Cholesterol
- PEG-lipid

- ✓ Protects mRNA
- ✓ Enables efficient cellular delivery
- ✓ Provides intrinsic adjuvant activity
- ✓ Scalable and adaptable platform

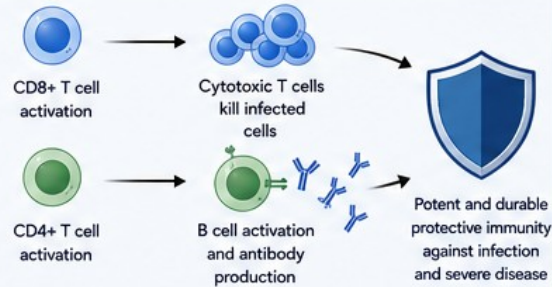
MECHANISMS OF ACTION: FROM INJECTION TO IMMUNITY



INNATE IMMUNE RESPONSE



ADAPTIVE IMMUNE RESPONSE



KEY KNOWLEDGE GAPS

- ? How are LNPs sensed by the immune system and how do they exert adjuvant activity?
- What are the specific signals and cellular pathways critical for protective immunity?
- Is it feasible to uncouple vaccine immunogenicity from reactogenicity?
- How do different components influence the quality, magnitude and durability of responses?

PLATFORM COMPONENTS THAT CAN BE MODIFIED

- mRNA sequence and structure (antigen, UTRs, modifications)
- Lipid composition and ratios (ionizable lipids, helper lipids, cholesterol, PEG-lipid)
- Particle size, charge and surface properties
- Dose and route of administration
- Formulation and storage conditions

ADVANCING NEXT-GENERATION mRNA VACCINES



THE IMPACT

- Deepening our understanding of mRNA-LNP vaccine mechanisms will accelerate the development of next-generation vaccines to tackle emerging and challenging pathogens for which effective vaccines do not exist or need improvement.

NATURE

Nature, vol. 654, pp. 892-901 (2026)



mRNA-LNP vaccines represent a platform with extraordinary potential—driven by science, guided by immunology, and focused on saving lives today while preparing for the health challenges of tomorrow.



The Regulatory Journey

01

Phased clinical trials

Strict progression through Phase I, II and III human testing before any licensure decision is taken.

02

Expedited transition

Emergency Use Authorisation bridged early rollout ahead of full Biologics License Application approval.

03

The platform advantage

Seasonal strain updates use a streamlined, flu-shot style variation pathway rather than a fresh dossier.

04

Continuous pharmacovigilance

Active post-market surveillance tracks real-world outcomes across every authorised population.

SO WHAT?

Because the platform itself is what gets licensed, a strain change is handled as a variation rather than a fresh dossier. That single regulatory fact is why mRNA can move at outbreak speed.

Clinical Safety & Metrics

01

Expected reactogenicity

Mild, temporary effects — fatigue, a sore arm, short-lived fever — consistent with a working immune response.

02

Modified nucleosides

Chemical modification of the mRNA minimises unintended innate inflammation without blunting immunogenicity.

03

Exceptional efficacy

Over 90% protection against the initial strains, with a sustained reduction in hospitalisation and ICU admission.

04

Rare event tracking

Low-risk, manageable instances of transient myocarditis identified early and mitigated through label and dosing guidance.

SO WHAT?

Reactogenicity is expected and self-limiting; the rare events are known, tracked and manageable. Regulators licensed the platform on exactly that distinction.

India's Regulatory Success Story

2022

DCGI emergency use authorisation

GEMCOVAC®-19 became the world's first thermostable mRNA COVID-19 vaccine to reach authorisation — and the first developed wholly outside the US or EU.

Sources: DCGI / CDSCO authorisation records; Gennova

GEMCOVAC®-19

India's first indigenously developed mRNA vaccine. DCGI emergency use authorisation, June 2022; GEMCOVAC®-OM, the Omicron-specific booster, followed in 2023.

Thermostability

Stable at 2–8 °C, enabling rural distribution without the ultra-cold chain that Pfizer and Moderna require.

Regulatory adaptation

DCGI mirrored global EUA frameworks while weighting local feasibility and manufacturing readiness.

Conditional approval

Granted against a commitment to ongoing pharmacovigilance and real-world safety data.

Strategic impact

Validated India's biotech ecosystem and set the precedent for oncology and infectious-disease mRNA therapies.

The Outlook

01

Expanding targets

Programmes now extend to rabies, influenza, Nipah and Ebola alongside COVID-19, at stages from preclinical through clinical development.

02

Active pipeline

Clinical trials underway in personalised oncology, where the platform's speed of iteration matters most.

03

Agile defence

New target sequences can be synthesised and scaled within days of a genome being published.

SO WHAT?

The asset is the speed of iteration, not any one target. Days from sequence to candidate means the target list keeps growing while the manufacturing platform stays unchanged.

Challenges in Democratising the Platform



Differentiating Technology

- Stable at 2 - 8 °C
- Uses **adsorption chemistry** for ease of manufacturing, minimizing losses and readily scalable
- Uses **the self amplifying mRNA platform**, which gives the advantage of a low dosing regimen
- Backward Integration



Ultra-low
temperature
logistics



Ease of
Manufacturing

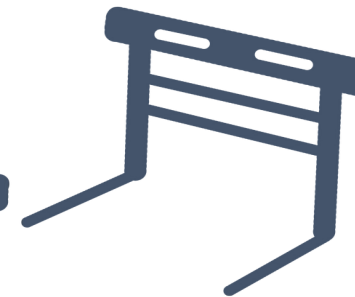
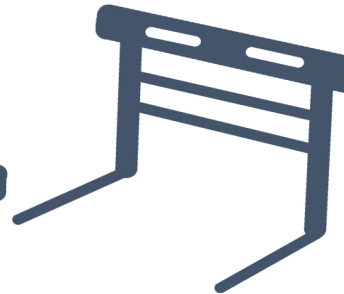
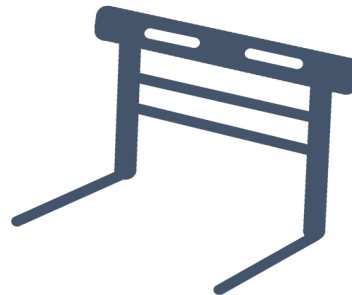
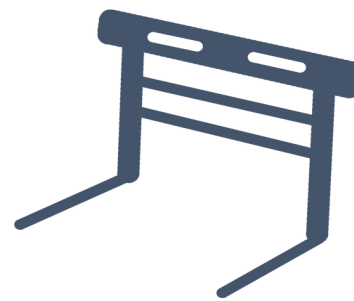


Scalability



Supply of raw
materials

Tech transfer -
Regional Hub



ImmunoScript™
LIFE SCIENCE



mRNA VACCINES: SAFE, EFFECTIVE, ADAPTABLE

THE LANCET

A Transformative Advance in Vaccinology with Enduring Impact for Public Health and Beyond

A TRANSFORMATIVE PLATFORM

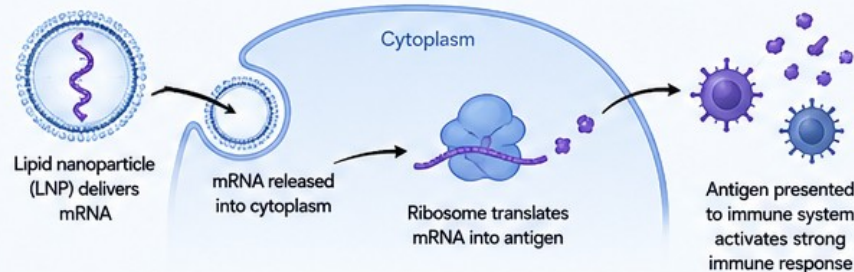


- Rapid development timelines
- Scalable manufacturing
- Strong immunogenicity with favourable safety profile



Billions of doses administered globally during COVID-19 – unprecedented real-world evaluation across diverse populations.

HOW mRNA VACCINES WORK



Transient cytoplasmic expression



No genomic integration



Rapid clearance from the body

Distinct from other gene therapies

SAFETY BY DESIGN & REGULATION



Defined vaccine components (mRNA, LNP, excipients) with rigorous quality controls



Robust manufacturing standards and lot-to-lot consistency



Regulatory oversight by global authorities (e.g., FDA, EMA, CDSCO)



Continuous safety monitoring and pharmacovigilance systems

CLINICAL EVIDENCE



Randomised controlled trials demonstrated high efficacy and acceptable safety



High efficacy against symptomatic disease, severe disease and hospitalisation



Consistent safety profile across trials and age groups

REAL-WORLD EFFECTIVENESS



Effectiveness across all age groups, including older adults and adolescents



Protects during pregnancy



Beneficial in immunocompromised populations



Reduces transmission and supports community protection

PUBLIC HEALTH IMPACT



Saved millions of lives and prevented severe outcomes



Reduced burden on healthcare systems



Strengthened pandemic preparedness and health system resilience

PUBLIC PERCEPTION & CONFIDENCE



Transparent communication



Engagement with communities



Addressing misinformation



Building and sustaining trust



NEXT-GENERATION mRNA VACCINES: THE ROAD AHEAD



Reduce reactogenicity and improve tolerability



Broader and more durable immunity



Enhanced global access and equity



Sustainable public trust and confidence



Expanding to cancer and autoimmunity



The accumulated evidence affirms mRNA vaccines as a safe, effective, and adaptable platform with enduring relevance for future infectious disease prevention and public health preparedness, and for the treatment of cancer and autoimmunity.



THE LANCET

The Lancet, vol. 408,
issue 10551, pp. 275–288
(18 July 2026)



Thank you

Pioneering the future of precision therapeutics.

GET IN TOUCH
info@immunoscript.bio

ImmunoScript Life Science Private Limited
CIN U72100PN2026PTC255053

OFFICE

BTS-2 Building, Chrysalis Enclave, Block 2
International Biotech Park, Phase II
MIDC Hinjawadi, Pune 411057
Maharashtra, India



SCAN TO VISIT
immunoscript.bio

FIOCRUZ RNA Platform

Patrícia Neves

Head of RNA Products Development/ ESPDT/VDINV
Bio-Manguinhos/ FIOCRUZ



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BRAZILIAN CONQUEST

Selected by WHO to be part of RNA Program

The Oswaldo Cruz Foundation has been selected by the World Health Organization (WHO)/Pan American Health Organization as one of the partner institutions in the RNA Program.

The selection is the result of a global call aimed at increasing the capacity for development and production and expanding access to RNA vaccines in low- and middle-income countries.



"Já era esperado", diz Dalcolmo sobre escolha da OMS para Fiocruz fabricar vacina

Fundação vai desenvolver e produzir novo imunizante contra Covid-19 com tecnologia de RNA mensageiro (mRNA), na América Latina

Beatriz Puente e Thayana Araújo, da CNN, no Rio de Janeiro
26/09/21 às 08:58 | Atualizado 26/09/21 às 08:58

CNN 29 jun 2021



Fiocruz é escolhida pela OMS para desenvolver vacina com técnica inovadora

Instituto Bio-Manguinhos será centro para desenvolvimento e produção de imunizantes com essa tecnologia na América Latina

Exame 21 set 2021



Fiocruz é selecionada pela OMS para desenvolver vacina de RNA mensageiro

Instituto Bio-Manguinhos será centro para desenvolvimento e produção de imunizantes com essa tecnologia na América Latina

O Globo
21/09/2021 - 17:30 / Atualizado em 21/09/2021 - 18:42

Jornal O Globo 21 set 2021



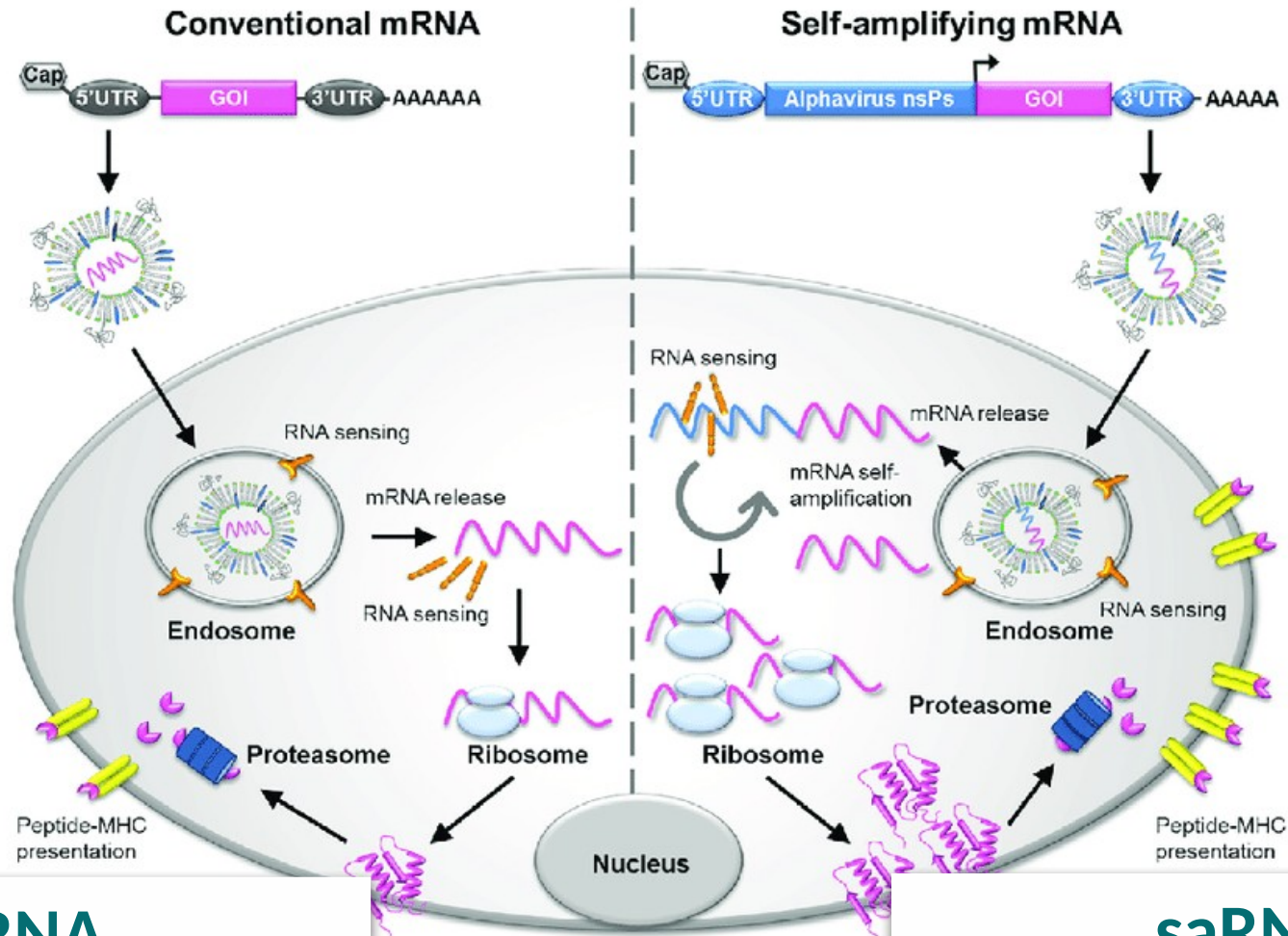
OMS escolhe Fiocruz para produção de vacinas contra covid-19

Vacinas de RNA mensageiro são um novo tipo de imunizante em estudo

Agência Brasil 21 set 2021



DEVELOPMENT STRATEGY



mRNA

saRNA

5'UTR

Spike

3'UTR

nsP1

nsP2

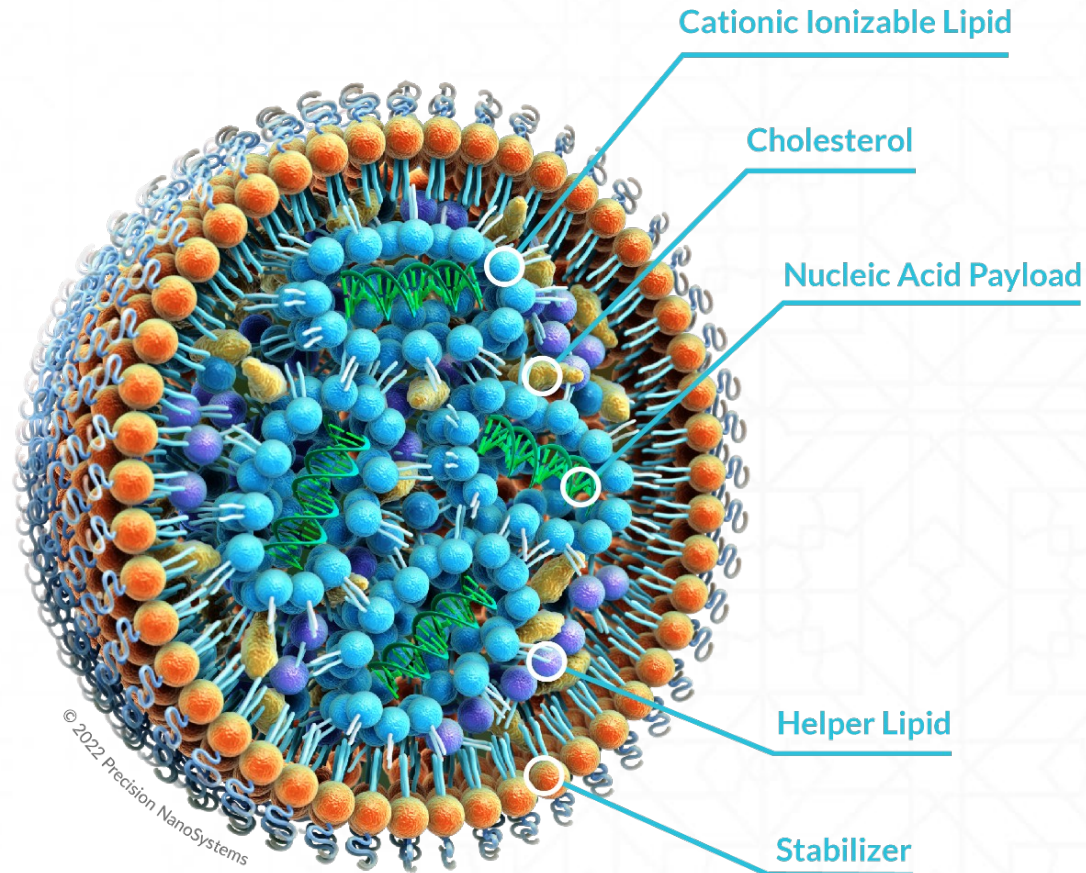
nsP3

nsP4

Ag 1

Ag 2

IONIZABLE LIPIDS



**MORE THAN 20
COMBINATIONS**
of ionizable lipids x
constructs have been fully
developed at Bio-
Manguinhos



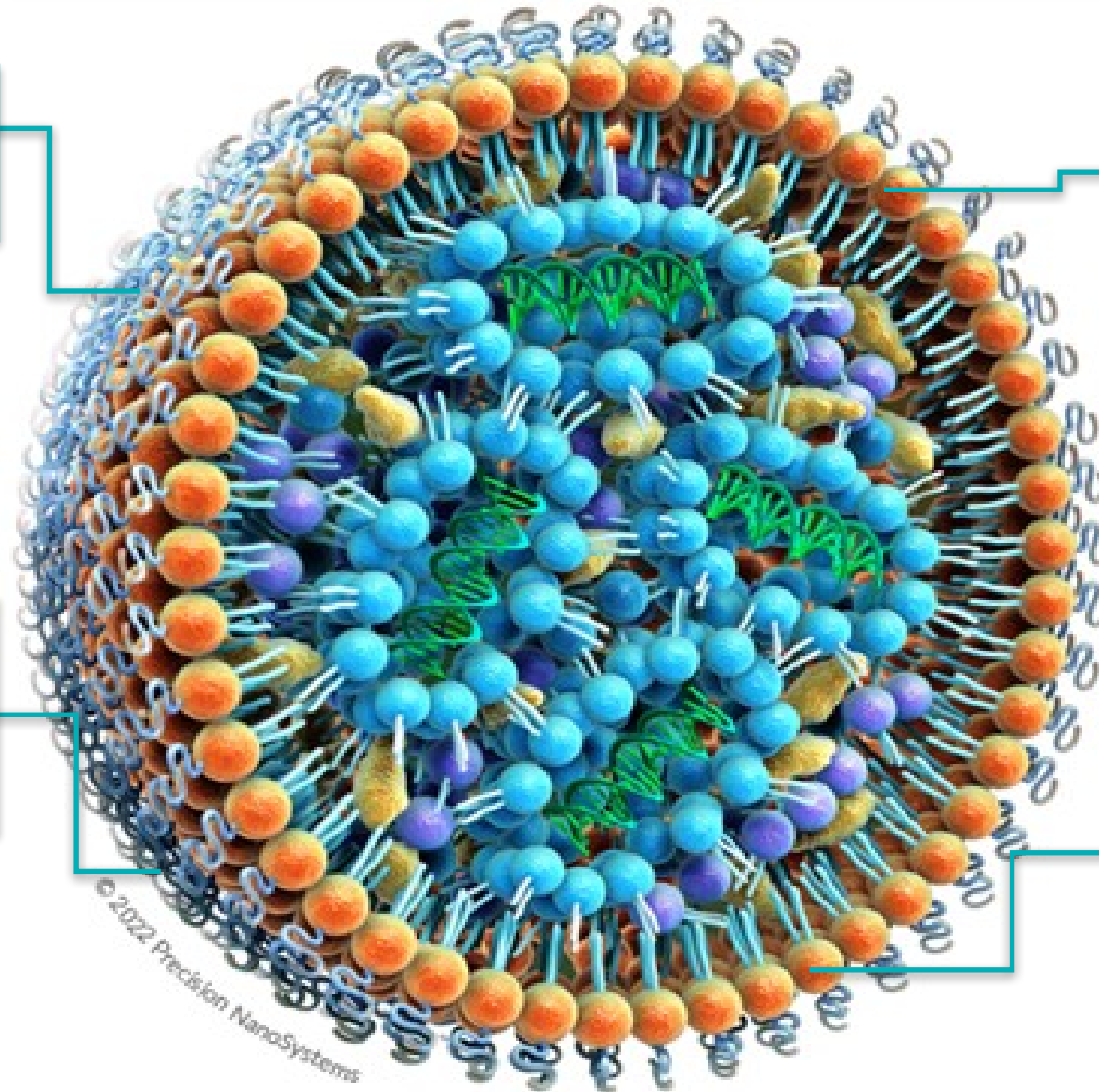
BRAZILIAN RNA PLATFORM

100 % protection

Robust T cell
responses

High titers of
neutralizing antibodies

Reduced Viral Load



BRAZILIAN RNA PLATFORM



“Platform for the Expression of Non-Replicating (Conventional) Messenger RNA (mRNA) for the Development of Vaccines and Therapies: Nucleic Acid Sequence, Composition, Use, Method of Treatment and/or Prevention of Diseases and Method of Preparation of the Composition”

PCT_BR_2025_050533



Denis Barbosa Award for Intellectual Property
and Public Interest



Brazilian RNA Vaccines- Manufacturing



First GMP area for RNA products in Latin America



Brazilian RNA Vaccines- Manufacturing

To achieve large-scale production using GMP inputs, Bio-Manguinhos uses equipment called Ntensify Midi from QUANTOOM.



System Functions (Divided into Two Parts)

Performs mRNA production using IVT technique

Performs mRNA purification using magnetic beads

Processing Time

Installation: 2 hours

Calibration: 1:30 min

Start-up: 5 hours for 1 reactor or 12 hours for 4 reactors.

1 reactor

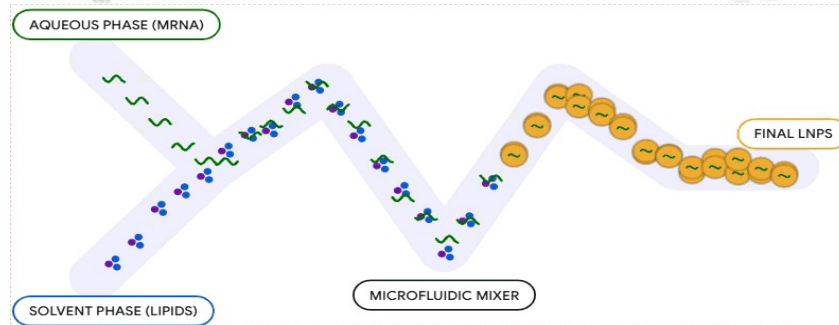
1g mRNA purified
~around 10,000 doses of vaccine

4 reactors

4g mRNA purified
~around 40,000 doses of vaccine

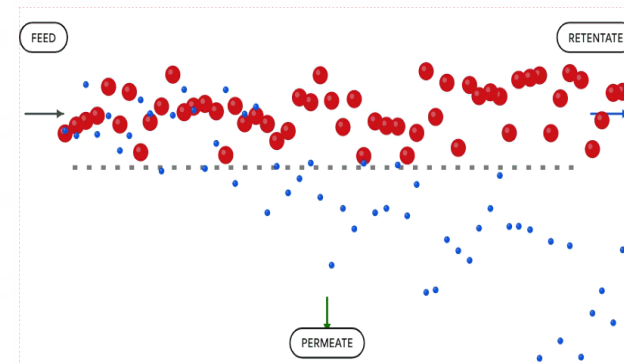
Brazilian RNA Vaccines- Manufacturing

ENCAPSULATION (formation of mRNA-LNPs)



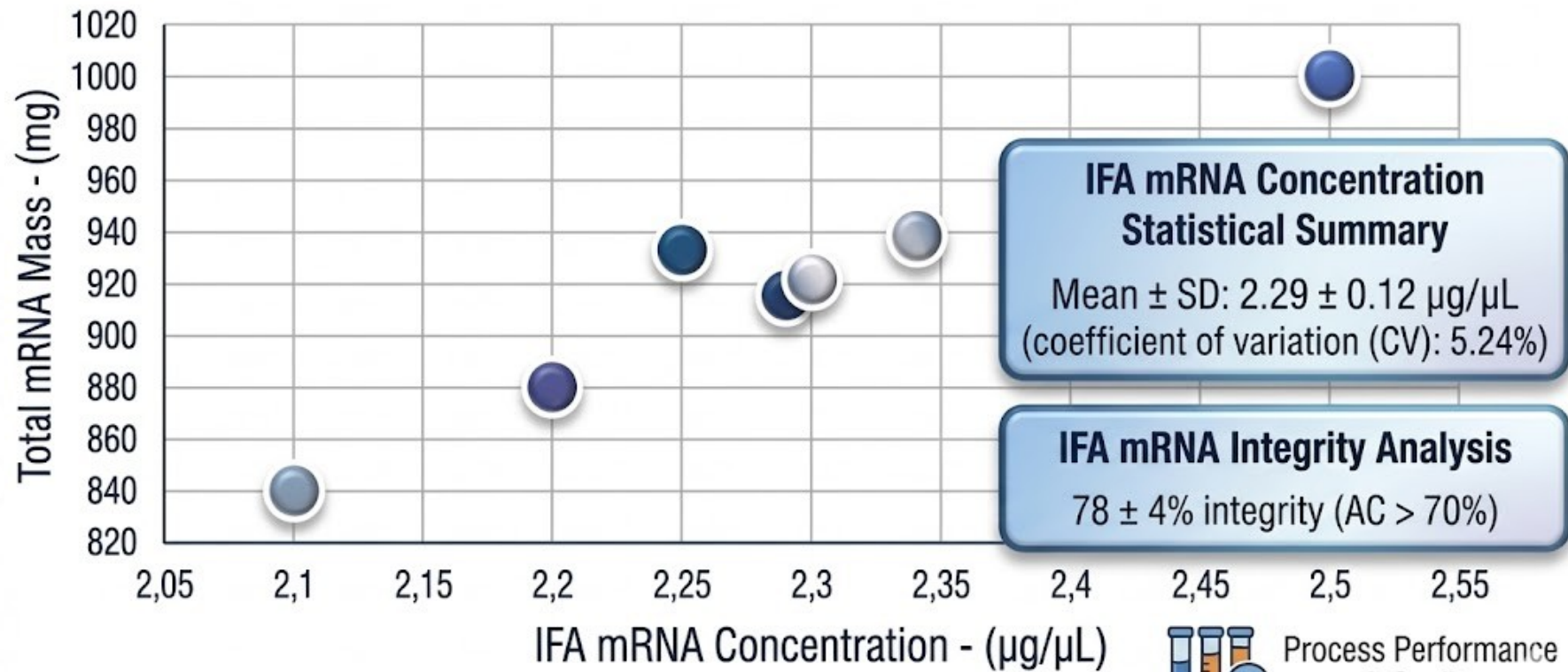
In a microfluidic mixer, the aqueous phase (mRNA) is rapidly mixed with the solvent phase (lipids), leading to the self-assembly of lipids around the mRNA to form LNPs.

TFF (TANGENTIAL FLOW FILTRATION) (Purification and Concentration)

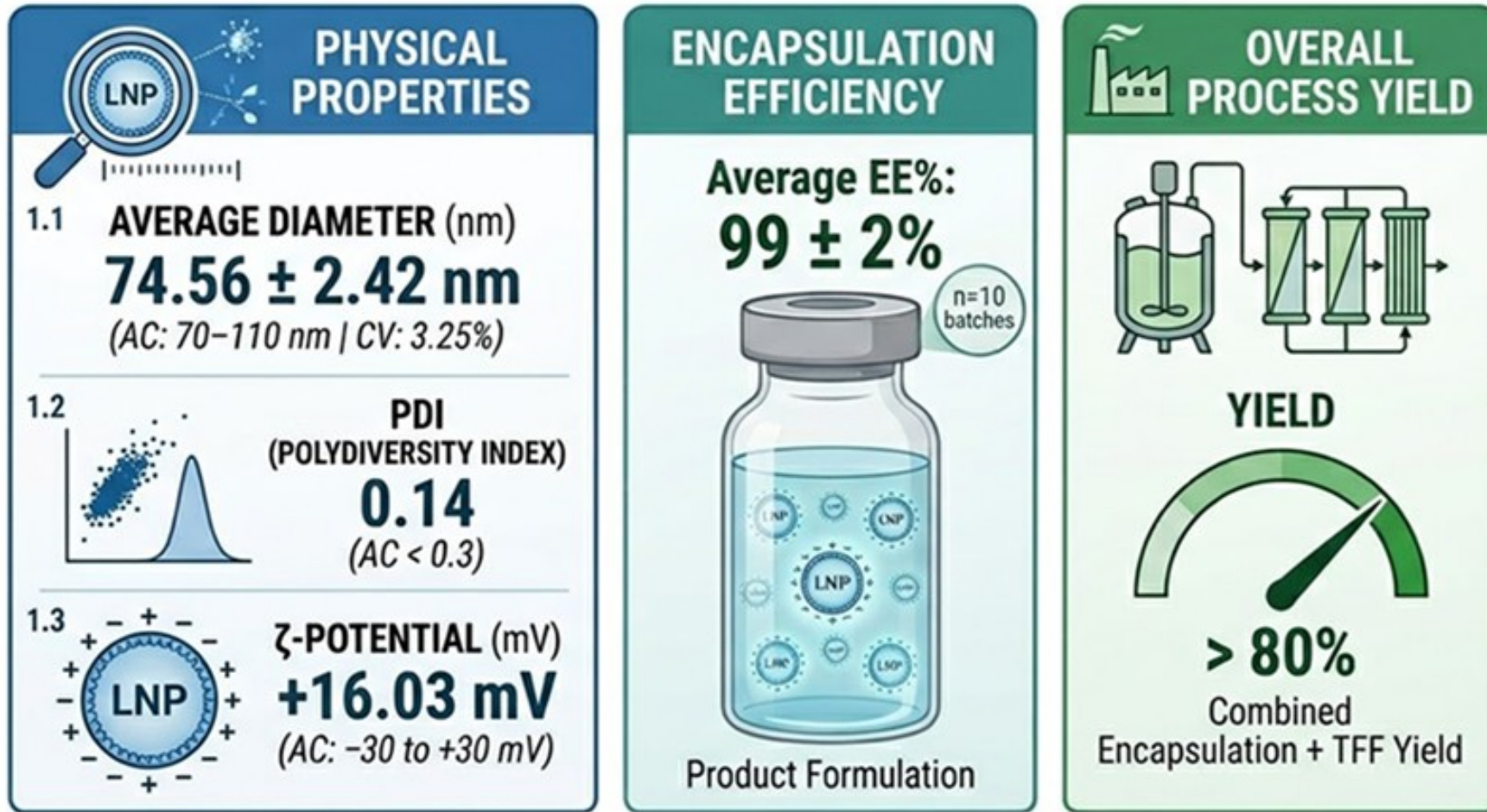


TFF uses tangential flow to keep particles in the retentate while allowing buffer and small molecules to pass through the membrane (permeate).

Brazilian RNA Vaccines- Manufacturing



Brazilian RNA Vaccines- Manufacturing



High Reproducibility Scalable Process Product Quality Assured

Brazilian RNA Vaccines- Manufacturing Capacity



Naked RNA (DS)



Encapsulation



Fill and Finish (DP)



Housing



TOX Studies



A Veeda Lifesciences Company

No. : SPR004/25

Date: 09/05/2025

STUDY PROGRESS REPORT

Treatment: The respective group animals received test item at specified dose as indicated under 'Study Design', whereas the animals of G1/G1R received control (saline) and G2/G2R received vehicle control (LNP) alone through intramuscular route.

Clinical signs of toxicity/mortality: No treatment related clinical signs of toxicity or mortality were noted in all the tested group animals. However, injection site thickening was observed in all animals except control (saline) group.

Refer Table 1.

Body Weight: Slight decrease in body weight was observed in treated males (G2/G2R, G3/G3R & G4/G4R) when compare to saline control group males (G1/G1R).

Refer Table 2.

Feed Consumption: Slight decrease in feed consumption was observed in treated males (G2/G2R, G3/G3R & G4/G4R) when compare to saline control group males (G1/G1R).

Refer Table 3.

Assessment of Local Reaction: No local skin reactions like erythema and edema at injection site were observed in any of the treated group animals till today.

Refer Table 4.

Physiological Observation (Body Temperature):

After first administration, vaccine and LNP related increase in rectal temperature of $>38^{\circ}\text{C}$ up to day 3 was noted in G2/G2R, G3/G3R & G4/G4R group animals and returned to normal from day 4. After second dose administration, vaccine and LNP related increase in rectal temperature $>38^{\circ}\text{C}$ was noted on day 18 in G2/G2R, G3/G3R & G4/G4R group animals. After third dose administration, vaccine and LNP related increase in rectal temperature $>38^{\circ}\text{C}$ was noted on day 32 in G2R, G3R & G4R group animals. ((main group animals (G2, G3 & G4) shown rectal temperature $>38^{\circ}\text{C}$ on day 30 and day 31)).



QUALITY AND REGULATORY DEVELOPMENT



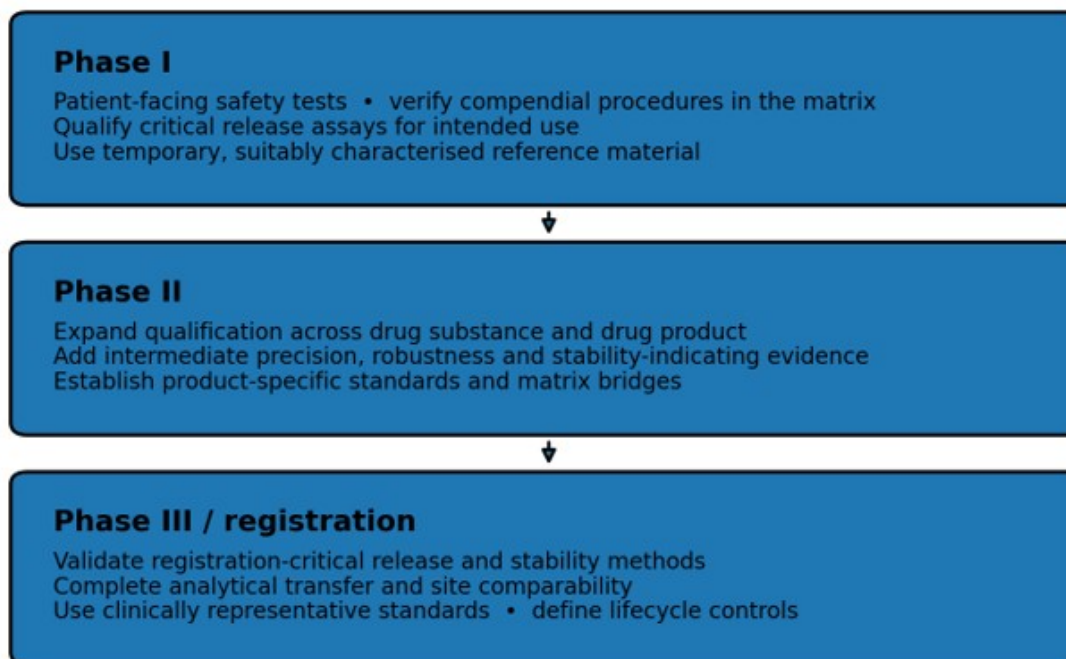
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Analytical Control Strategy

CONFIDENTIAL

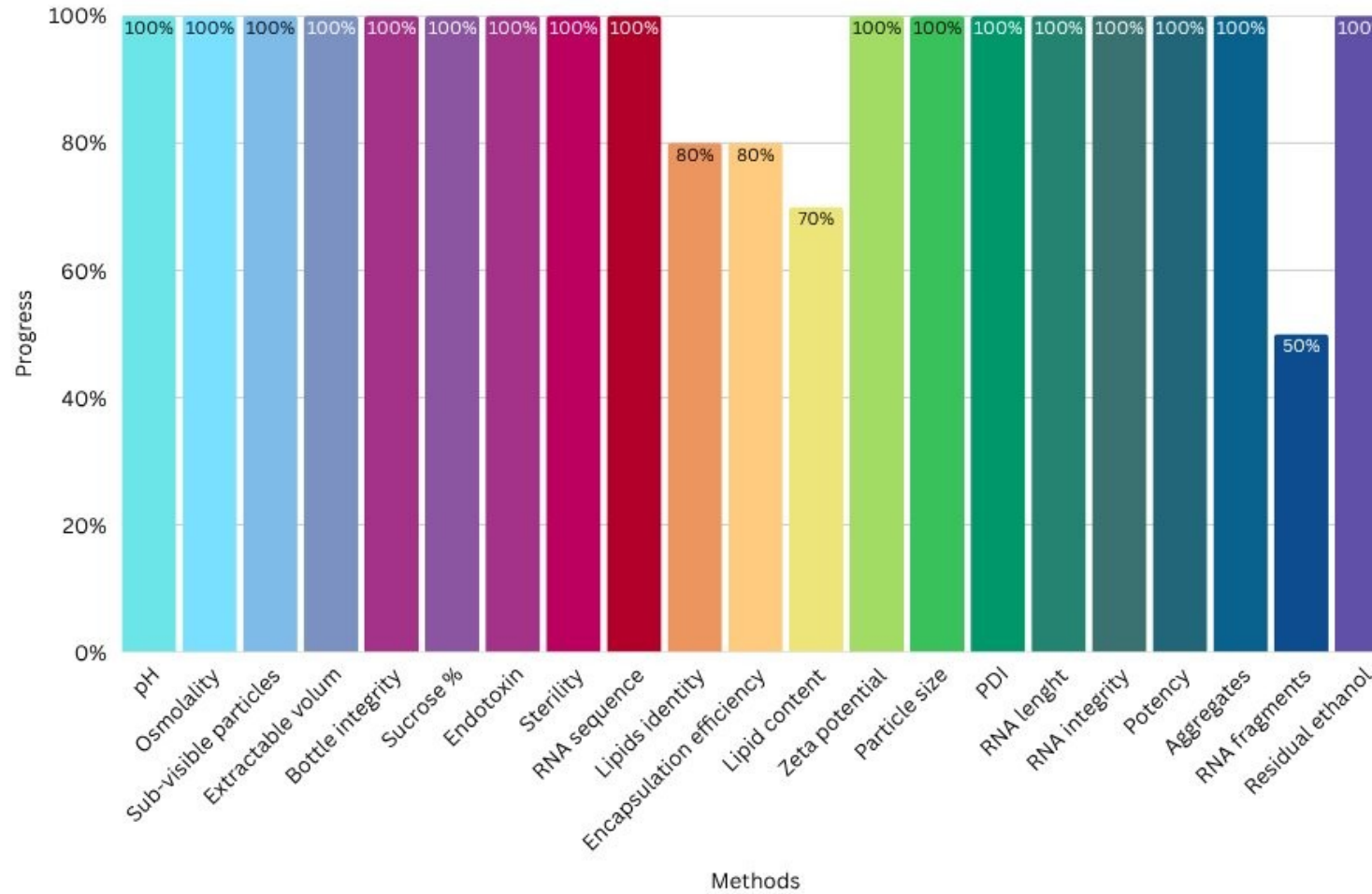
Phase-appropriate maturation of analytical evidence



Cross-cutting controls: ATP-defined performance | system suitability | sample/reference controls | trending | change triggers

Method maturity is driven by intended use and risk; clinical phase is a planning horizon, not a substitute for scientific justification.

Quality Control Status- DP controls

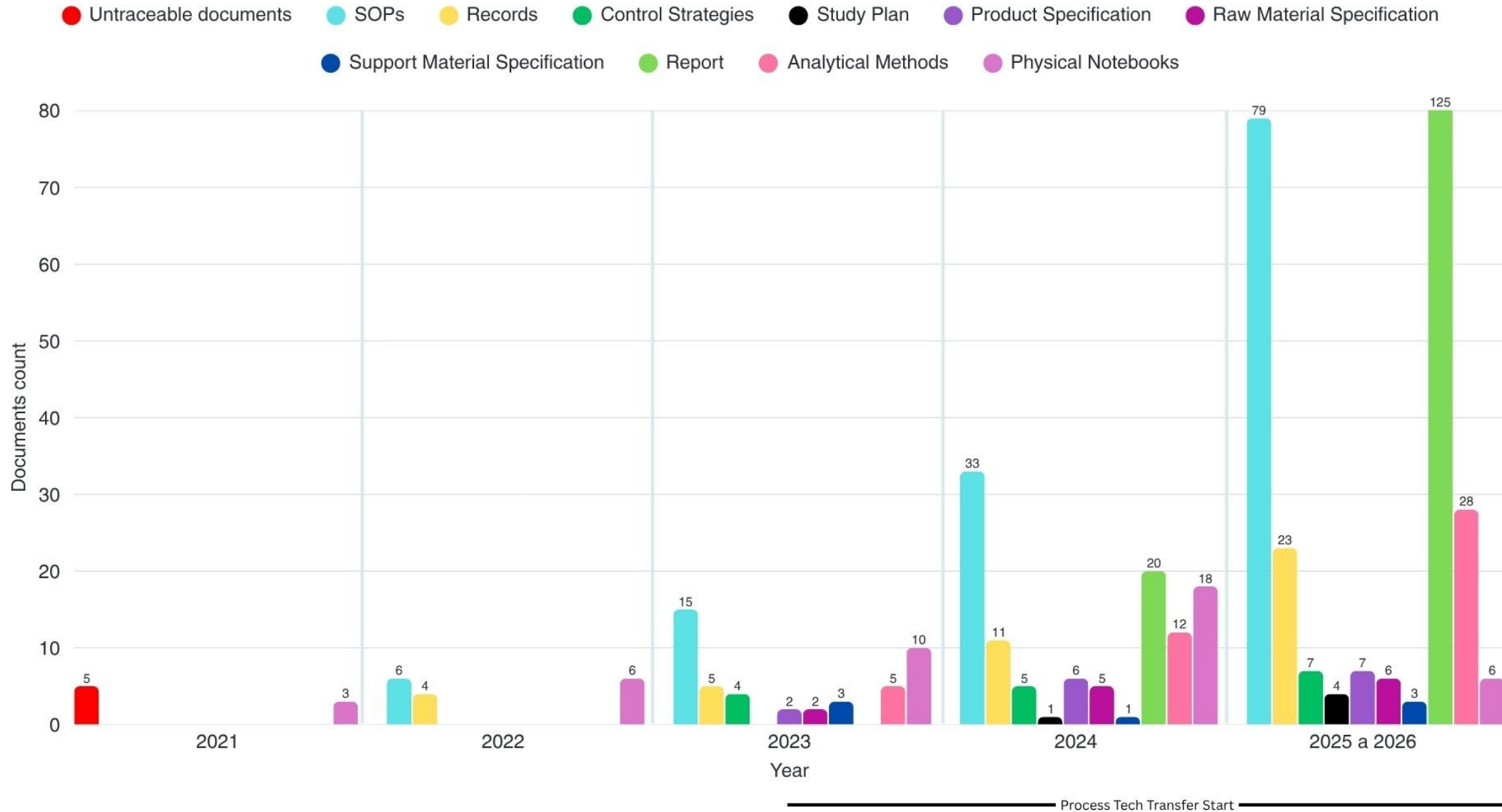


Ministério da Saúde

FIOCRUZ

Fundação Oswaldo Cruz

Documentation Status



Records

2021



Ordinary notebook,
low traceability

2022

Ministry of Health
FIOCRUZ

Institute of Technology
in Immunobiologicals

DI No. 2022/0045
Page 01 of 01

TECHNICAL RECORD OF IN VITRO RNA TRANSCRIPTION

Record number: Date: Responsible:

Sample Identification

Product: Batch/lot:

Sample type: ☐ Raw material ☐ In-process ☐ Other:

Origin: Quantity: Expiration date:

Storage condition:

Test Information

Test: Method: Equipment: Analyst: Supervisor:

Test on:

Results / Observations:

Reagents and Materials

Item	Code	Lot	Manufacturer	Expiration date	Qty	Unit
Item 1	12345	ABC123	Manufacturer A	12/2023	1	mL
Item 2	67890	XYZ456	Manufacturer B	09/2024	1	mL

Prepared by: Checked by: Approved by:

Records with DI number,
experimental notebooks,
with traceability

2023 and 2024

Ministry of Health
FIOCRUZ

Institute of Technology
in Immunobiologicals

RECORD BPx

BPx RECORD OF IN VITRO PLASMID DNA PRODUCTION

Registry No.: BPx023_0001AM Confidential Page 01 of 01

Unit Resp.: DEDP LATIM Name: BPx023_0001AM Cost center:

Document type: PRODUCTION RECORD - PLASMID DNA (IN VITRO)

1. GENERAL INFORMATION

Product: Batch/Lot: Start date: End date: Start time: End time: Analyst: Supervisor: Equipment in use: Location:

Scope of work: Plasmid DNA production (in vitro) Extraction of plasmid DNA

2. DAILY RECORD

Step: Start time: End time: Duration: Deviations: ☐ Yes ☐ No Description: Responsible person: Signature: Date: Review by: Signature: Review date:

3. EQUIPMENT

Equipment	Code	Phase	Tag
Equipment 1	ED-01	Phase 2	TAG001
Equipment 2	ED-02	Phase 2	TAG002
Equipment 3	ED-03	Phase 3	TAG003
Equipment 4	ED-04	Phase 3	TAG004
Equipment 5	ED-05	Phase 3	TAG005

Printed by: Date: 01/05/2023 Version: 01 Page: 1 of 1

BPx records, formalized,
with traceability,
printed and bound

2025 to date

Ministry of Health
FIOCRUZ

Institute of Technology
in Immunobiologicals

REPORT

ANALYSIS OF INTEGRITY OF RNA SAMPLES FROM LIPID NANOPARTICLE EXTRA MESSENGER (mRNA) OF 0125 TRANS CONSTRUCTION (260126VTB003LT)

Unit Resp.: DEDP LATIM Number: RLT2613_000MAN DF Visualization - Confidential

1. OBJECTIVE

Describe the results of integrity and sample size of mRNA samples from the construction 0125 trans extracted lipid nanoparticles (Batch: 260126VTB003LT).

2. REPORT

The procedures for the samples were performed according to PBP4735 - CAPILLARY ELECTROPHORESIS FOR THE ANALYSIS OF SIZE, QUANTIFICATION AND QUALITY OF mRNA MESSENGER OBTAINED BY IN VITRO (IVT). The data below were analyzed according to PBP1606, COMMON REPORT ON mRNA MESSENGER OBTAINED BY TRANSCRIPTION IN VITRO (IVT) USING THE PROSIZE SOFTWARE (AGILENT).

2.1 Information about the assay request

Table 1. Information about the assay request

SOS Request Number	2289410
Requestor	Raysa Silva (HUB RNA ESPDT)
Unit	LATIM
Sample Lot	260126VTB003LT
Sample Type	RNA Vaccine - Tuberculosis

2.2. Extraction of mRNA from lipid nanoparticles

The RNA extraction was performed according to PBP4180 - EXTRACTION OF RNA MESSENGER OF LIPID NANOPARTICLES.

Table 2. Operator responsible for mRNA extraction from lipid nanoparticles

Operator	Unit	Date
Joyce Pereira	LATIM	06/05/2026

Table 3. Instruments used for mRNA extraction from lipid nanoparticles

Instrument	Manufacturer	Lot	Validation
------------	--------------	-----	------------

Highly detailed
analysis records

SOPs, analytical methods, reports

2021

Transcriptome in vitro – Megascript T7.

1. Master mix preparation (for a 20 µL reaction):

Component	Volume
2X NTP Mix	10 µL
10X Reaction Buffer	2 µL
T7 Enzyme Mix	2 µL
RNase Inhibitor	0.5 µL
Template DNA	1 µg
Nuclease-free Water	up to 20 µL

2. Incubate at 37 °C for 2 hours.

3. Purify the RNA using the MEGAclean kit, according to the manufacturer's instructions.

Informal protocols,
without traceability,
printed version

2022

WORK INSTRUCTION		
TITLE: IN VITRO RNA TRANSCRIPTION		DI No.: LAT102
		REVISION: 00
1. CHANGES		
Revision	Date	Change
00	02/11/2022	Issue
2. OBJECTIVES		
Describe the procedures for in vitro RNA transcription using the MEGAscript T7 kit.		
3. SCOPE OF APPLICATION		
Applies to the Immunology Technology Laboratory – LATIM, at the Technology Development Vice-Presidency – VDTEC.		

Protocols with DI number,
formalized, with traceability,
printed

2023 and 2024

Ministry of Health FIOCRUZ Bio-Manguinhos Institute		STANDARD OPERATING PROCEDURE (SOP)
OBTAINING IN VITRO TRANSCRIBED RNA		
RESP. UNIT: DEDEP LATIM	Document No.: PPAT79_000MAN	PDF Visualization: Confidential
1. OBJECTIVE		
Describe the procedures for obtaining planned DNA from bacterial strains transformed with plasmids for transcription in vitro.		
2. SCOPE		
Applies to the Immunology Technology Laboratory – LATIM, at the Experimental Department and Pre-clinical – DEDEP, of the Innovation Vice-Presidency – VDIn.		

SOPs in BPx, formalized,
with traceability, printed
and digital (StarDoc)

2025 to date

Ministry of Health FIOCRUZ Bio-Manguinhos Institute		REPORT
REPORT ON THE EVALUATION OF THE ELECTROPHORESIS METHOD FOR DETERMINING THE SIZE AND INTEGRITY OF mRNA ENCAPSULATED IN LIPID NANOPARTICLES		
RESP. UNIT: DEDEP LATIM	Report No.: RLT2544_000MAN	PDF Visualization: Confidential
Ministry of Health FIOCRUZ Bio-Manguinhos Institute		ANALYTICAL METHOD
INTEGRITY ANALYSIS METHOD OBTAINED FROM mRNA BY IN VITRO TRANSCRIPTION (IVT) OF THE COVID-19 VACCINE BY CAPILLARY ELECTROPHORESIS		
RESP. UNIT: DEDEP LATIM	Document No.: MTA066_001MAN	PDF Visualization: Confidential
Ministry of Health FIOCRUZ Bio-Manguinhos Institute		REPORT
ANALYSIS OF THE INTEGRITY AND SIZE OF EXTRACELLULAR mRNA SAMPLES OF LIPID NANOPARTICLES - TUBERCULOSIS/0125 TRANS (260128VTB003LT)		
RESP. UNIT: DEDEP LATIM	Report No.: RLT2613_000MAN	PDF Visualization: Confidential

In addition to SOPs,
we now have QC and stability
analysis reports available in real time

Dialogue with ANVISA

Timeline of Regulatory Meetings

Key topics discussed over time



IND submission- Phase I request

Comprovante de Protocolização

Page 1 of 1



AGÊNCIA NACIONAL DE VIGILÂNCIA SANITÁRIA
Unidade de Atendimento e Protocolo - UNIAP

Impresso em: 13/02/2026 21:47:10

COMPROVANTE DE PROTOCOLIZAÇÃO ON-LINE

Protocolo:

20260000000138243

Expediente:

0153513267

Número de Transação:

2089342026

Tipo de Documento:

Processo

Número do Processo:

25351029069202611

Favorecido:

33.781.055/0001-35 - FUNDACAO OSWALDO CRUZ

Assunto:

10754 - ENSAIOS CLÍNICOS - Anuência em processo do Dossiê de Desenvolvimento Clínico de Medicamento (DDCM) - Produtos Biológicos

Protocolizado On-Line via Petição Eletrônica por:

136.231.107-36 - CELINA VIEIRA DA CUNHA GUEDES ALVARENGA em 13/02/2026 21:47:10

Requirements answered
in July 1st 2026



Ministério da Saúde

FIOCRUZ

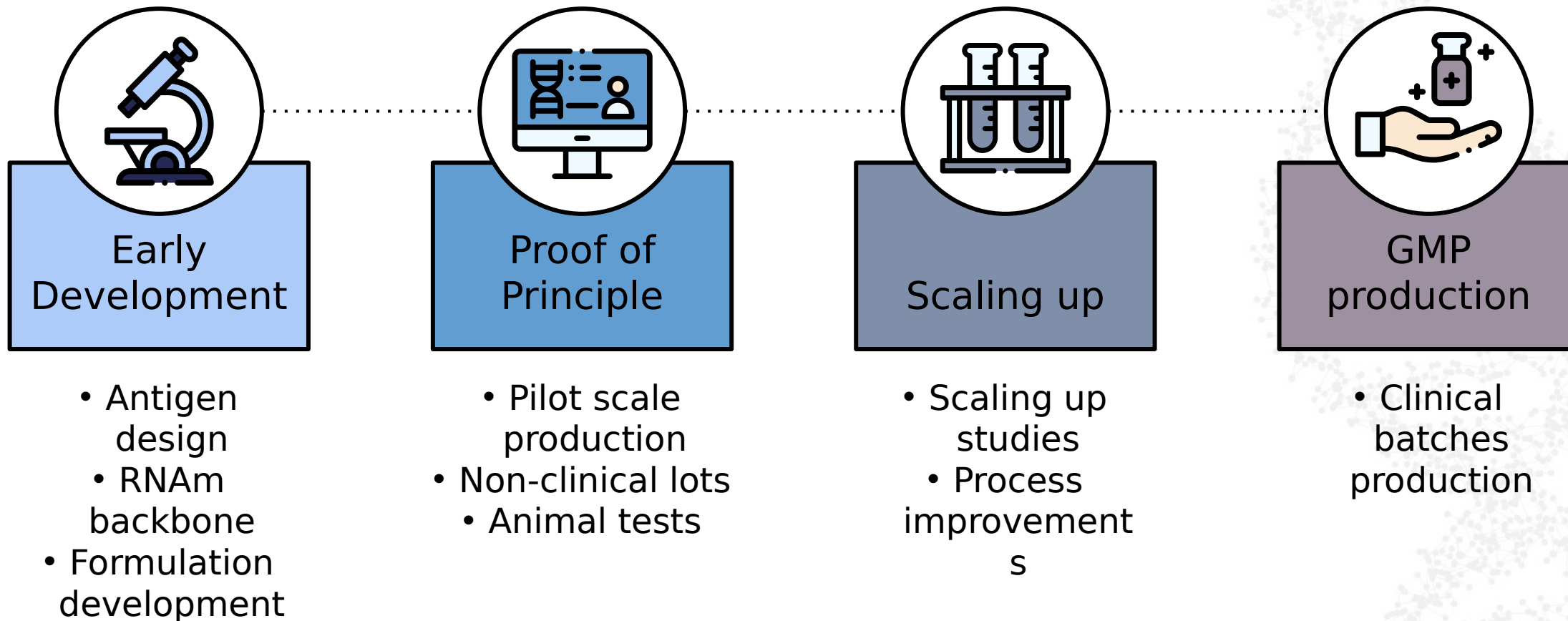
Fundação Oswaldo Cruz



Instituto de Tecnologia
em Imunobiológicos

Bio-Manguinhos

BRAZILIAN RNA PLATFORM



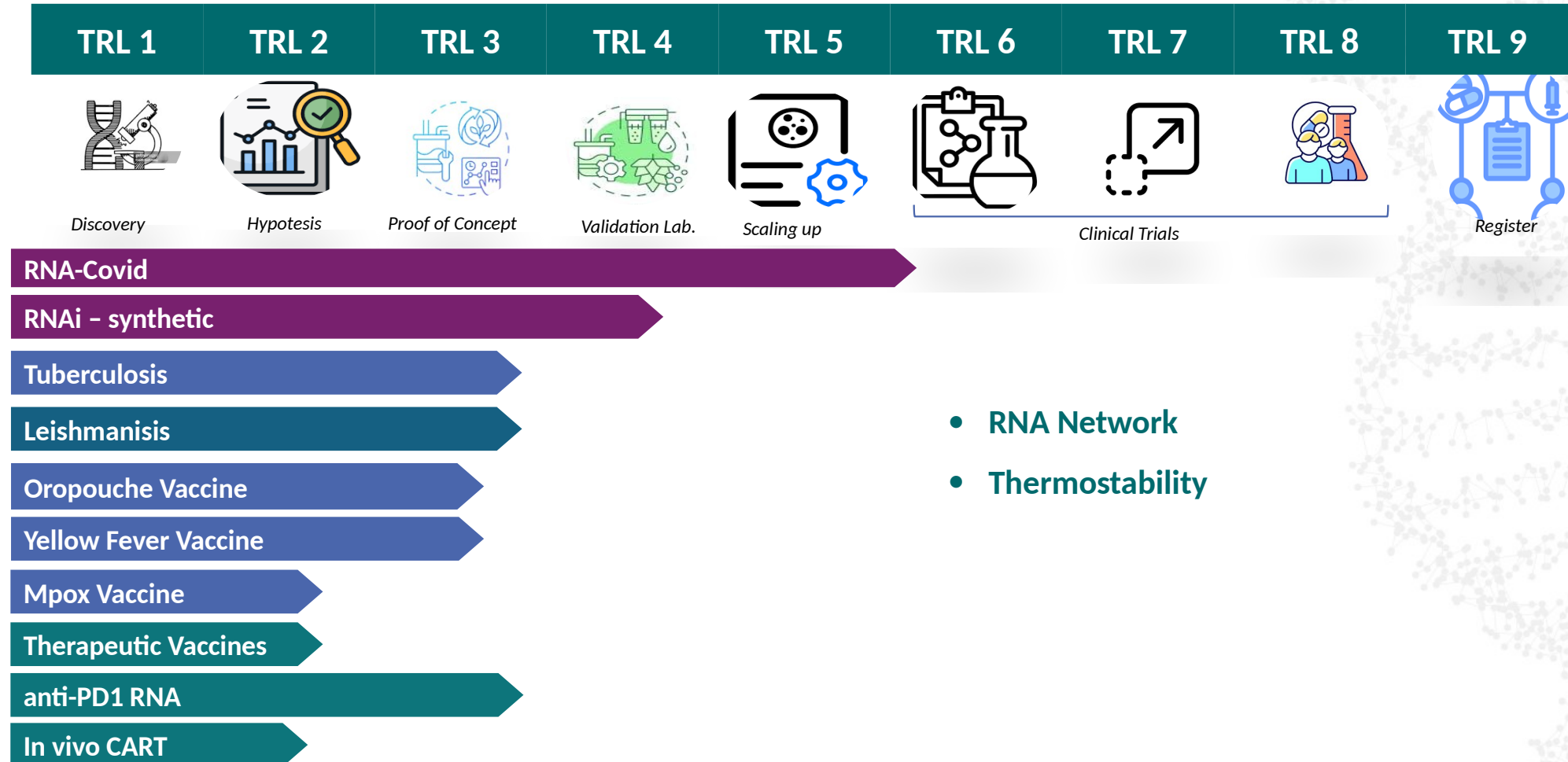
Ministério da Saúde

FIOCRUZ

Fundação Oswaldo Cruz



PORTFÓLIO - RNA



Ministério da Saúde

Instituto de Tecnologia
em Imunobiológicos

RNA PLATFORM: REGULATORY QUALIFICATION FRAMEWORK

International references and convergent evidence requirements | Status: July 2026

REGULATORY LANDSCAPE

FDA · 2024 DRAFT	WHO · 2022	EMA · 2025 DRAFT	PMDA · 2026	MHRA · 2025 DRAFT	ICH FRAMEWORK	EU vPTMF
Formal designation program for human drugs and biologics	mRNA/saRNA-LNP vaccine platform approach	Human mRNA quality and prior-knowledge approach	Nonclinical platform-based safety bridging	Fixed/variable model for individualised mRNA	Q8, Q9, Q10, Q11 and Q12	Formal certification — veterinary vaccines only

CONVERGENT REQUIREMENTS TO QUALIFY AS AN RNA PLATFORM

- 1 Defined Platform Boundary**

Clearly distinguish the fixed technological core from the variable RNA payload.
- 2 Anchor Product & Cross-Product Evidence**

Use an approved or qualified reference product and relevant data across more than one product.
- 3 Standardised and Reproducible Manufacturing**

Apply the same core process, equipment strategy and validated operating ranges.
- 4 QTPP, CQAs, CPPs & Specifications**

Define product targets, critical attributes, process parameters and a robust control strategy.
- 5 Comparable Formulation & Delivery**

Maintain the delivery system and formulation, or demonstrate scientifically justified comparability.
- 6 Comparable Impurities, Stability & Performance**

Show that payload changes do not materially alter quality, impurity clearance or stability.
- 7 Risk-Based Bridging + Product-Specific Tests**

Leverage platform knowledge while retaining identity, potency and on-target safety assessments.
- 8 Lifecycle Governance & Change Management**

Use comparability protocols, knowledge management, decision gates and controlled platform evolution.



PLATFORM-READY FOR REGULATORY DATA LEVERAGING

Formal designation depends on jurisdiction: FDA — human drugs and biologics; EU vPTMF — veterinary vaccines.

WHO, EMA, PMDA and MHRA use platform or prior-knowledge approaches. A shared facility or common IVT equipment alone is not a regulatory platform.

FIOCRUZ: HUB FOR LATIN AMERICAN RNA INNOVATION ECOSYSTEM





Patrícia Neves
Leader of RNA Products Development

E-mail | pcristina@bio.fiocruz.br

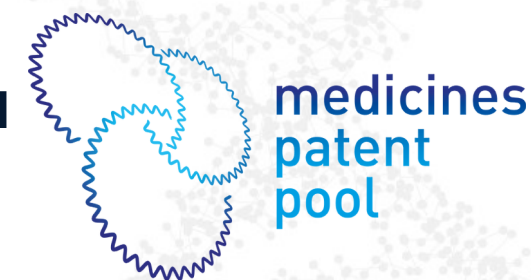
Financers- Funds Raising Office
FIOCRUZ



Gates Foundation



AMBEV Drogasil
Repsol Shell



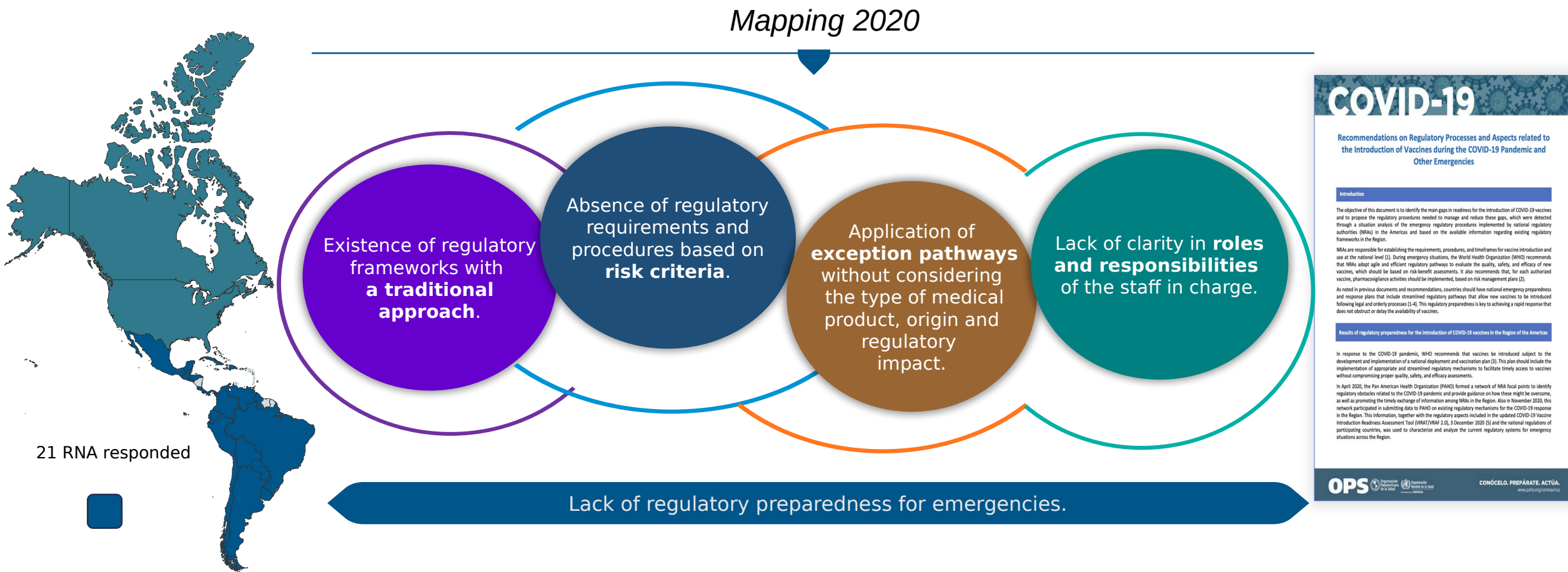
“The current emergency environment: how the regulatory landscape has evolved since COVID-19, and what is expected for the next emergency”

***Strengthening Regulatory Preparedness in the
Americas: Lessons from COVID-19 and Emerging Expectations
for
Future Vaccine Authorization***

María Teresa Ibarz M.

International consultant to the Quality and Regulation Unit of Medicines and Health Technologies (QR), Department of Innovation, Access to Medicines and Health Technologies (IMT)

Lessons learned from the H1N1 pandemic and gaps identified in readiness for the introduction of COVID-19 vaccines

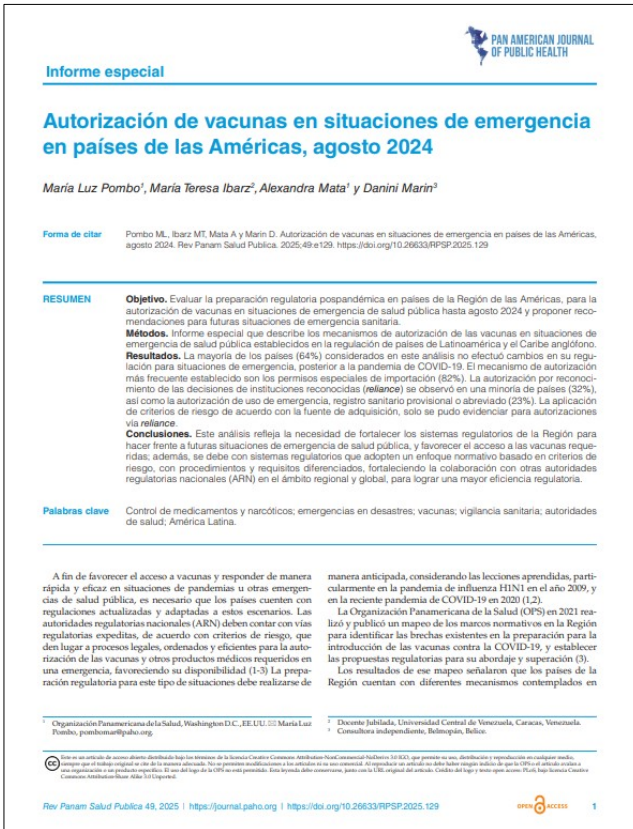


1. WHO. Guidelines on regulatory preparedness for provision of marketing authorization of human pandemic influenza vaccines in non-vaccine-producing countries. TRS. 1004, 2017. <https://apps.who.int/medicinedocs/documents/s23326en/s23326en.pdf>

2. PAHO. Recommendations on Regulatory Processes and Aspects related to the Introduction of Vaccines during the COVID-19 Pandemic and Other Emergencies. 2021. <https://iris.paho.org/handle/10665.2/54516>

Authorization of vaccines and other medical products in emergency situations in the Region of the Americas

Mapping 2024



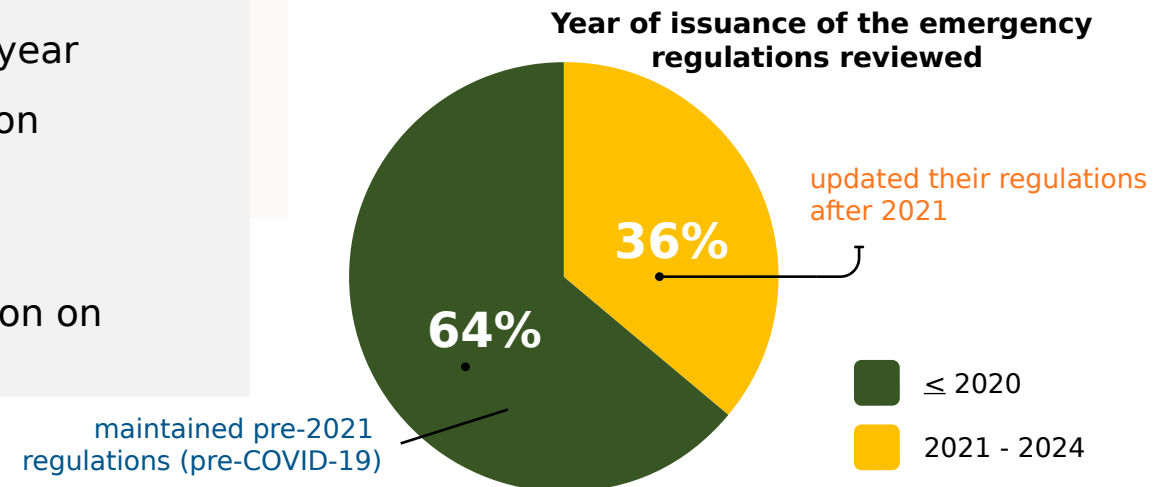
Methodology

- **Analysis of 22 countries in Latin America and the English-speaking Caribbean**
- **Evaluation period:** August 2023 - August 2024
- **Variables analyzed:**
 - Regulation publication year
 - Established authorization mechanisms
 - Applied risk criteria
 - Availability of information on websites

Results

1. Emergency Regulations

- **64%** of countries did not introduce changes their regulations for emergency situations.
- **32%** of countries submitted new regulations



Pombo ML, Ibarz MT, Mata A y Marin D. Autorización de vacunas en situaciones de emergencia en países de las Américas, agosto 2024. Rev Panam Salud Publica. 2025;49:e129. <https://doi.org/10.26633/RPSP.2025.129>

Authorization of vaccines and other medical products in emergency situations in the Region of the Americas

Autorización de vacunas en situaciones de emergencia en países de las Américas, agosto 2024

Maria Luz Pombo¹, Maria Teresa Ibarz², Alexandra Mata¹ y Danini Marin³

Forma de citar Pombo ML, Ibarz MT, Mata A y Marín D. Autorización de vacunas en situaciones de emergencia en países de las Américas agosto 2024. *Rev Panam Salud Publica*. 2025;49:e129. <https://doi.org/10.26633/RPSP.2025.129>

Objetivo. Evaluar la preparación regulatoria pospandémica en países de la Región de las Américas, para la autorización de vacunas en situaciones de emergencia de salud pública hasta agosto 2024 y proponer recomendaciones para futuras situaciones de emergencia sanitaria.

Métodos. Informe especial que describe los mecanismos de autorización de las vacunas en situaciones de emergencia de salud pública establecidos en la regulación de países de Latinoamérica y el Caribe anónimos.

Resultados. La mayoría de los países (64%) considerados en este análisis no efectuó cambios en su regulación para situaciones de emergencia, posterior a la pandemia de COVID-19. El mecanismo de autorización más frecuente establecido son los permisos especiales de importación (82%). La autorización por reconocimiento de las decisiones de instituciones reconocidas (*reliance*) se observó en una minoría de países (32%). En los países que usaron la autorización en una emergencia, registró mayor prioridad (abreviado (23%)) las aplicaciones de *reliance* de riesgo de acuerdo con la fuente de adquisición, solo se pudo evidenciar para autorización vía Internet.

Conclusiones. Este análisis refleja la necesidad de fortalecer los sistemas regulatorios de la Región para hacer frente a futuras situaciones de emergencia de salud pública, y favorecer el acceso a las vacunas requeridas; además, se debe con sistemas regulatorios que adopten un enfoque normativo basado en criterios de riesgo, con procedimientos y requisitos diferenciados, fortaleciendo la colaboración con otras autoridades regulatorias nacionales (ARN) en el ámbito regional y global, para lograr una mayor eficiencia regulatoria.

Palabras clave Control de medicamentos y narcóticos; emergencias en desastres; vacunas; vigilancia sanitaria; autoridades de salud; América Latina.

La Organización Panamericana de la Salud (OPS) en 2021 realizó y publicó un mapeo de los marcos normativos en la Región para identificar las brechas existentes en la preparación para la introducción de las vacunas contra la COVID-19, y establece las propuestas regulatorias para su abordaje y superación (3). Los resultados de ese mapeo señalaron que los países de la Región cuentan con diferentes mecanismos contemplados en

² Consultora independiente, Belmopan, Belice.

² Organización Panamericana de la Salud, Washington D.C., EE.UU. ✉ María Luz Pombo, pombomar@oasbo.org

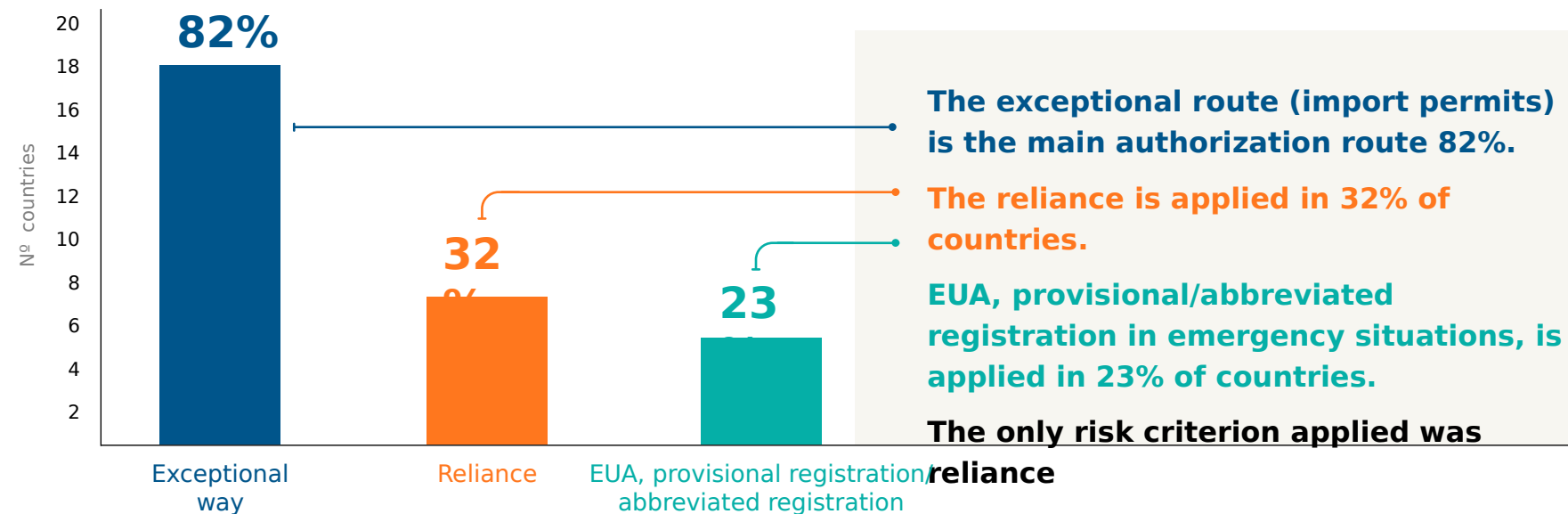
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OPEN ACCESS

Results

- 2. Authorization Mechanisms

Authorization mechanisms for medical products in emergency situations

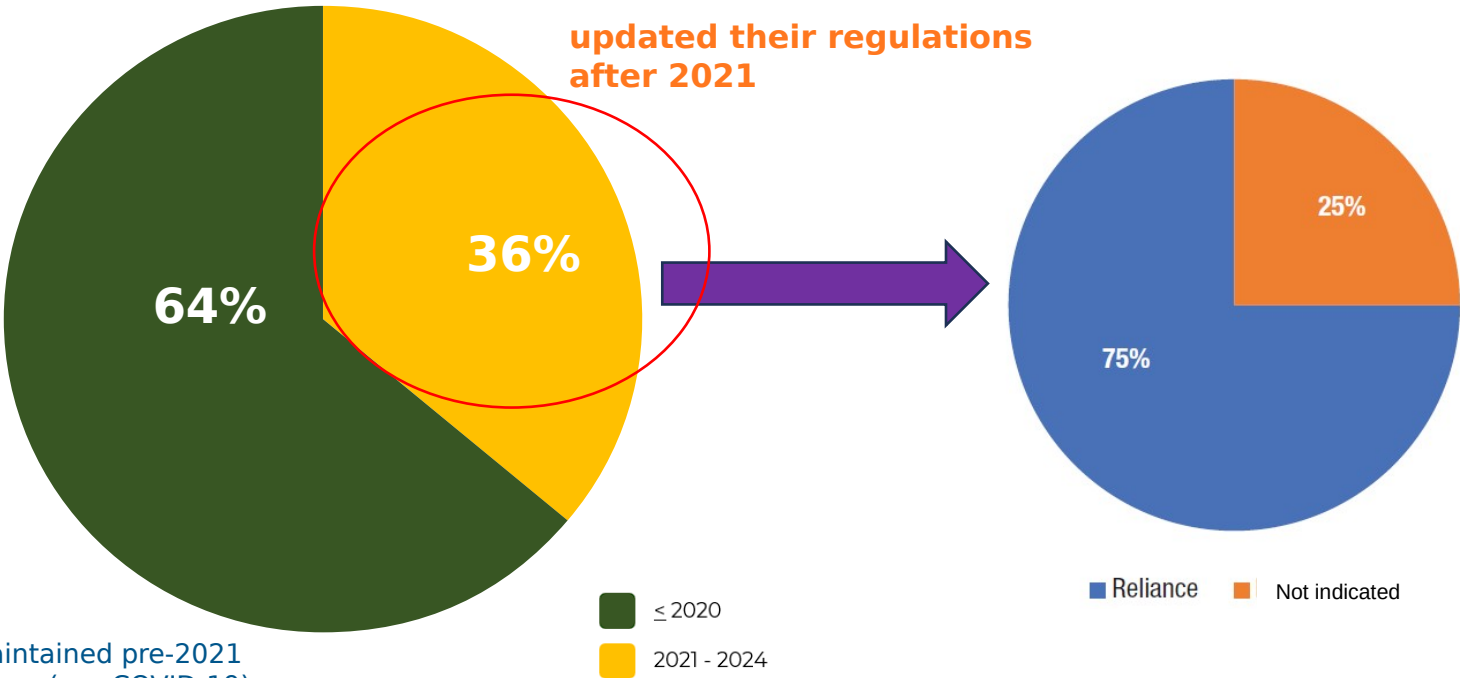


Pombo ML, Ibarz MT, Mata A y Marin D. Autorización de vacunas en situaciones de emergencia en países de las Américas, agosto 2024. *Rev Panam Salud Publica*. 2025;49:e129. <https://doi.org/10.26633/RPSP.2025.129>

Authorization of vaccines and other medical products in emergency situations in the Region of the Americas

Results

Year of issuance of the emergency regulations reviewed



maintained pre-2021 regulations (pre-COVID-19)

Informe especial

Autorización de vacunas en situaciones de emergencia en países de las Américas, agosto 2024

María Luz Pombo¹, María Teresa Ibarz², Alexandra Mata¹ y Danini Marin³

Forma de citar Pombo ML, Ibarz MT, Mata A y Marin D. Autorización de vacunas en situaciones de emergencia en países de las Américas, agosto 2024. Rev Panam Salud Publica. 2025;49:e129. <https://doi.org/10.26633/RPSP.2025.129>

RESUMEN

Objetivo. Evaluar la preparación regulatoria pospandémica en países de la Región de las Américas, para la autorización de vacunas en situaciones de emergencia de salud pública hasta agosto 2024 y proponer recomendaciones para futuras situaciones de emergencia sanitaria.

Métodos. Informe especial que describe los mecanismos de autorización de las vacunas en situaciones de emergencia de salud pública establecidos en la regulación de países de Latinoamérica y el Caribe anglofono.

Resultados. La mayoría de los países (64%) considerados en este análisis no efectuó cambios en su regulación para situaciones de emergencia, posterior a la pandemia de COVID-19. El mecanismo de autorización más frecuente establecido son los permisos especiales de importación (82%). La autorización por reconocimiento de las decisiones de instituciones reconocidas (*reliance*) se observó en una minoría de países (32%), así como la autorización de uso de emergencia, registro sanitario provisional o abreviado (23%). La aplicación de criterios de riesgo de acuerdo con la fuente de adquisición, solo se pudo evidenciar para autorizaciones vía *reliance*.

Conclusiones. Este análisis refleja la necesidad de fortalecer los sistemas regulatorios de la Región para hacer frente a futuras situaciones de emergencia de salud pública, y favorecer el acceso a las vacunas requeridas; además, se debe con sistemas regulatorios que adopten un enfoque normativo basado en criterios de riesgo, con procedimientos y requisitos diferenciados, fortaleciendo la colaboración con otras autoridades regulatorias nacionales (ARN) en el ámbito regional y global, para lograr una mayor eficiencia regulatoria.

Palabras clave Control de medicamentos y narcóticos; emergencias en desastres; vacunas; vigilancia sanitaria; autoridades de salud; América Latina.

A fin de favorecer el acceso a vacunas y responder de manera rápida y eficaz en situaciones de pandemias u otras emergencias de salud pública, es necesario que los países cuenten con regulaciones actualizadas y adaptadas a estos escenarios. Las autoridades regulatorias nacionales (ARN) deben contar con vías regulatorias expeditas, de acuerdo con criterios de riesgo, que den lugar a procesos legales, ordenados y eficientes para la autorización de las vacunas y otros productos médicos requeridos en una emergencia, favoreciendo su disponibilidad (1-3). La preparación regulatoria para este tipo de situaciones debe realizarse de manera anticipada, considerando las lecciones aprendidas, particularmente en la pandemia de influenza H1N1 en el año 2009, y en la reciente pandemia de COVID-19 en 2020 (1,2).

La Organización Panamericana de la Salud (OPS) en 2021 realizó y publicó un mapeo de los marcos normativos en la Región para identificar las brechas existentes en la preparación para la introducción de las vacunas contra la COVID-19, y establecer las propuestas regulatorias para su abordaje y superación (3).

Los resultados de ese mapeo señalaron que los países de la Región cuentan con diferentes mecanismos contemplados en

¹ Organización Panamericana de la Salud, Washington D.C., EE.UU. ² María Luz Pombo, pombo@paho.org. ³ Docente Jubilada, Universidad Central de Venezuela, Caracas, Venezuela. ⁴ Consultora independiente, Bogotá, Colombia.

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Rev Panam Salud Publica 49, 2025 | <https://journal.paho.org> | <https://doi.org/10.26633/RPSP.2025.129>

Authorization of vaccines and other medical products in emergency situations in the Region of the Americas

Key recommendations:

- **Review regulatory frameworks to include differentiated mechanisms based on risk criteria**
- **Establish simplified regulatory pathways for quality-assured products reliance**
- **Reduce the use of import authorizations without risk criterio**
- **Improve information on NRA websites**

Risk and probability criteria according to the source of acquisition



Proposed risk matrix

Pombo ML, Ibarz MT, Mata A y Marin D. Autorización de vacunas en situaciones de emergencia en países de las Américas, agosto 2024. Rev Panam Salud Publica. 2025;49:e129. <https://doi.org/10.26633/RPSP.2025.129>

Takeaways

Regulation

- ✓ Prioritize regulatory preparedness for emergency situations.

Authorizations

- ✓ **Producing countries:** prioritize emergency use authorization evaluations (EUA)
- ✓ **Importing countries:**
 - Rely on quality-assured procurement pathways (Reliance).
 - Avoid using import permits without risk criteria.

International Cooperation

- ✓ Maximize efficiency through collaboration among national regulatory authorities at regional and global levels.

Strengthening Regulatory Preparedness

Strengthening Regulatory Preparedness in the Americas: Lessons from COVID-19 and Emerging Expectations for Future Vaccine Authorization

Thank you



SESSION 2 • MODULE 3

Product-Specific & GMP Inspections

What makes RNA-vaccine facilities different — and where existing biologicals inspection checklists fall short.

A CEPI-led workshop for NRA regulators of the Americas

CEPI

Beyond the conventional biologicals checklist

RNA facilities introduce hazards and controls that traditional vaccine inspections were never designed to catch.



Different hazards

Ubiquitous RNases, organic solvents, ultra-cold storage — not the usual bioprocess risk set.



Different equipment

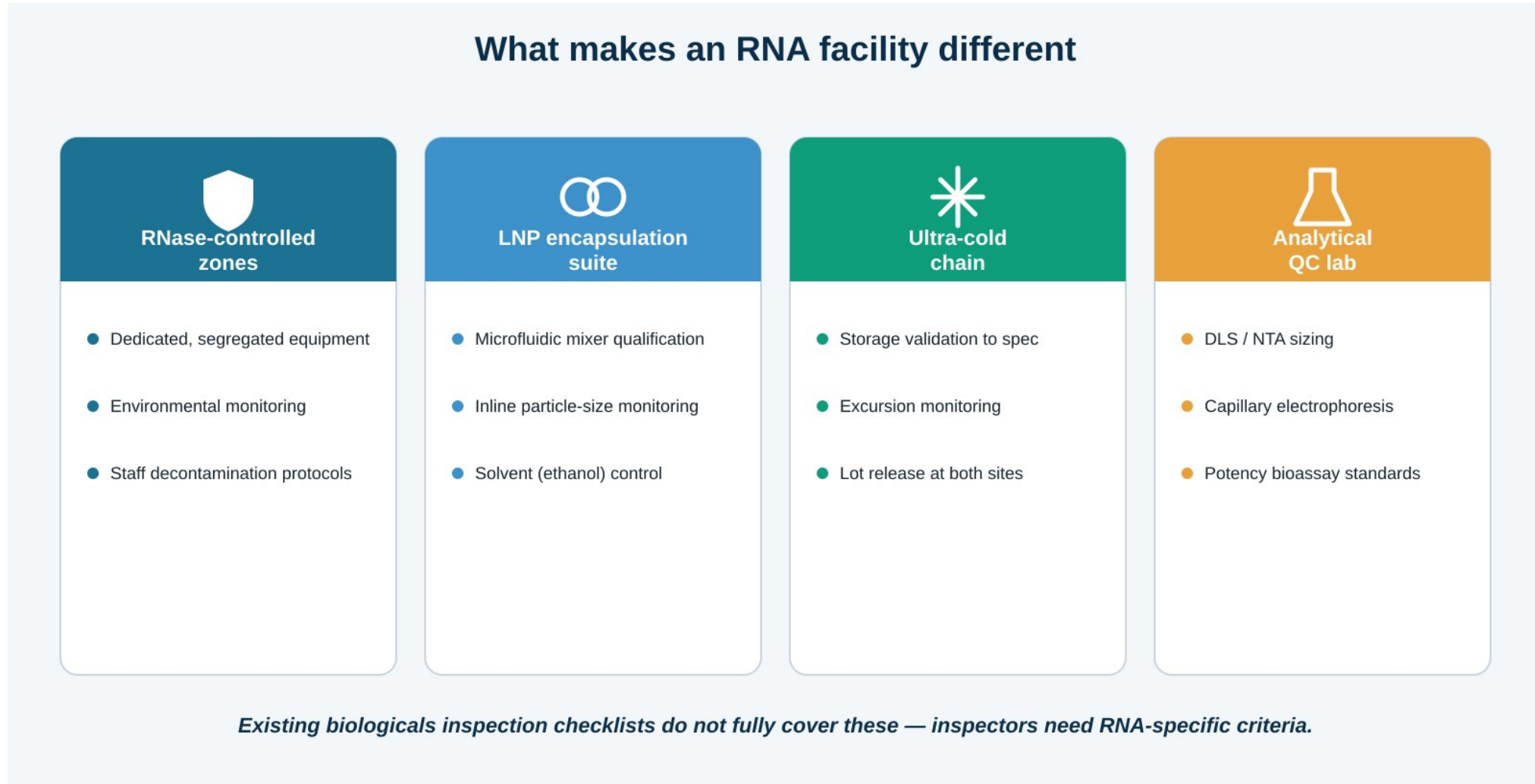
Microfluidic mixers and inline sizing instead of bioreactors and chromatography skids alone.



Different analytics

Nanoparticle sizing and RNA-integrity assays that many QC labs have not run before.

What makes an RNA facility different



Keeping the environment RNase-free

Why it dominates the design

RNases are everywhere — on skin, surfaces and equipment. A single contamination event can degrade a batch and destroy potency. RNase control is the organising principle of the facility.

Inspectors should verify it is designed in — not bolted on.



Segregated, dedicated equipment

Prevent cross-contamination; validated RNase-decontamination of surfaces and tools.



Environmental monitoring

Programme tuned to RNase and bioburden, not only classical particulates.



Staff decontamination protocols

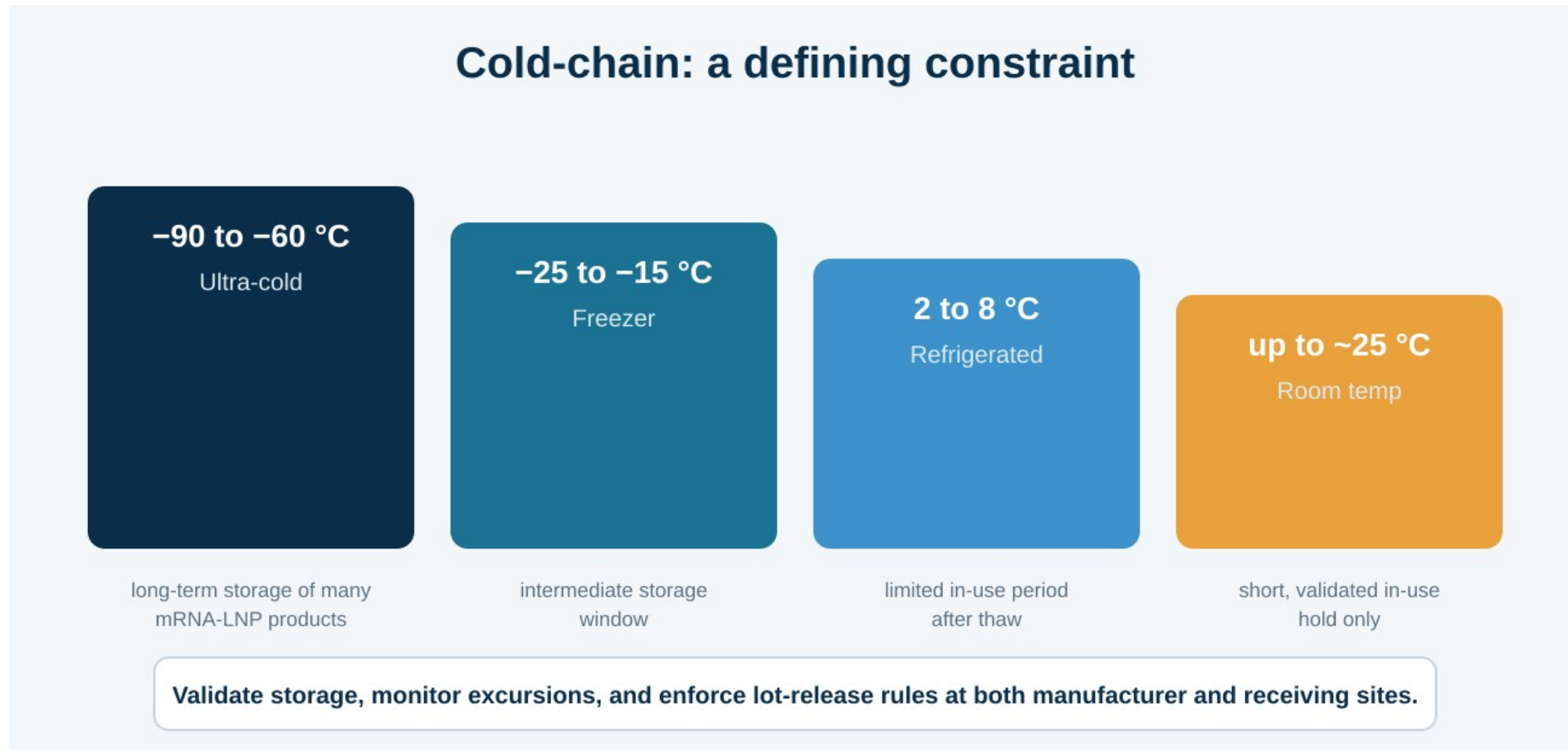
Gowning, glove discipline and workflow that treat the operator as the main RNase source.



Material & water controls

RNase-free consumables and reagents; documented qualification of suppliers.

Ultra-cold storage and the release chain



Inspection focus: validated storage across the whole chain, continuous excursion monitoring, and lot-release rules honoured at both the manufacturer and every receiving site.

Qualifying the encapsulation suite



Microfluidic mixer qualification

Flow rates, mixing ratio and shear are critical process parameters — qualify the equipment and its operating ranges, not just the output.



Inline particle-size monitoring

Real-time size and polydispersity control during formulation, with defined action limits.



Solvent (ethanol) control

Ethanol is a process-related impurity of particular relevance for LNPs — characterise and control its removal.



Encapsulation efficiency

Un-encapsulated mRNA is unstable; percentage encapsulation is a controlled critical quality attribute.

Where existing checklists fall short

1

DLS / NTA

Dynamic light scattering & nanoparticle tracking for LNP size, distribution and zeta potential.

2

Capillary electrophoresis

RNA integrity, fragment sizing and %-intact transcript — orthogonal to chromatography.

3

Potency bioassays

Cell-based or cell-free expression assays with qualified reference standards.

4

Impurity & adduct analysis

IP-RP-HPLC / mass spectrometry for dsRNA, residual DNA and RNA-lipid adducts.

Reference-standard availability is often the binding constraint — potency and integrity assays are only as good as the standards behind them.

Mapping the gaps

Conventional checklist assumes...	RNA facility also needs...
Cell-culture bioprocess controls	RNase-free design, dedicated equipment and staff decontamination
Standard 2–8 °C cold storage	Validated ultra-cold storage with continuous excursion monitoring
Chromatography-based purity	Nanoparticle sizing (DLS/NTA) and RNA-integrity by capillary electrophoresis
Established potency reference standards	New RNA potency/expression standards — often not yet available
Familiar impurity panel	dsRNA, residual DNA template, and RNA-lipid adduct control

Findings at RNA facilities — the recurring themes

Across FDA and EMA inspections of mRNA-vaccine sites, the citable observations cluster into four themes.



Environmental & air control

Cleanroom HVAC and differential-pressure control in mRNA drug-substance suites — e.g., inadequate Grade C air handling.



Cleaning & contamination

Validated equipment cleaning before mRNA runs; RNase and cross-contamination discipline.



Segregation & materials

Defined, separate areas; control of expired or restricted materials used in mRNA production.



Cold chain & fill-finish

Ultra-cold storage and aseptic fill-finish; contamination and mold control at drug-product sites.



Cross-cutting: most public findings are conventional GMP issues at sites that also make mRNA — few are RNA-specific, and none are yet public for saRNA. But reliance already works: FDA accepted a Spanish (AEMPS) inspection, and EMA and Health Canada have inspected jointly.

Findings you can cite, by facility

Facility (role)	Agency • year	What was cited
Moderna — Norwood, MA <i>mRNA drug substance</i>	FDA Form 483 Sep 2023	Equipment not cleaned before mRNA-1273 drug-substance runs; expired / restricted materials in DS; Grade C cleanroom air handling inadequate.
Catalent — Bloomington, IN <i>fill-finish</i>	FDA Form 483 Sep 2022	Form 483 at Moderna bivalent fill-finish; site not initially added to the EUA pending FDA review.
Pfizer (ex-Hospira) — McPherson, KS <i>fill-finish</i>	FDA 483s (repeat)	Mold and microbial-contamination control, cleaning / disinfection — general aseptic issues, not RNA-specific.
Spikevax pharmacovigilance system <i>EMA + Health Canada — joint</i>	2021	5 major / 5 minor findings; CAPA endorsed — a joint-inspection and reliance example.
mNEXSPIKE — FDA Summary Basis for Regulatory Action <i>reliance record</i>	2025	FDA accepted a Spanish AEMPS facility inspection as ≈ VAI — a reliance example.

A Form 483 records an inspector's observations, not a final GMP determination. Sources: FDA 483s / EIRs ([fda.gov](https://www.fda.gov/ora/electronic-reading-room), ORA Electronic Reading Room); EMA EPAR assessment reports; FDA Summary Basis for Regulatory Action.