

International Organization for Chemical Sciences in Development Imperial College London Institute of Global Health Innovation

# Chemistry and health: the need for a comprehensive approach

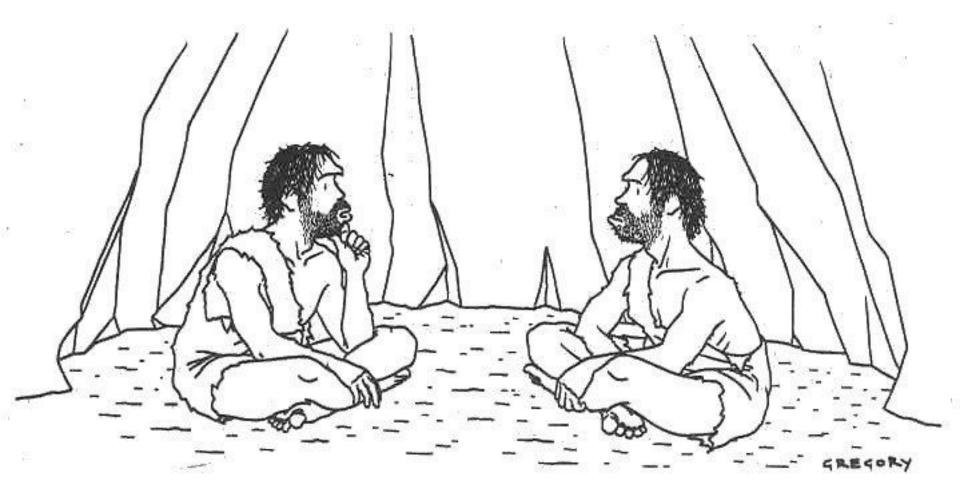
School of Chemistry & Molecular Biosciences, University of Queensland: 17 July 2018

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- Adjunct Professor, Institute of Global Health Innovation Imperial College, London
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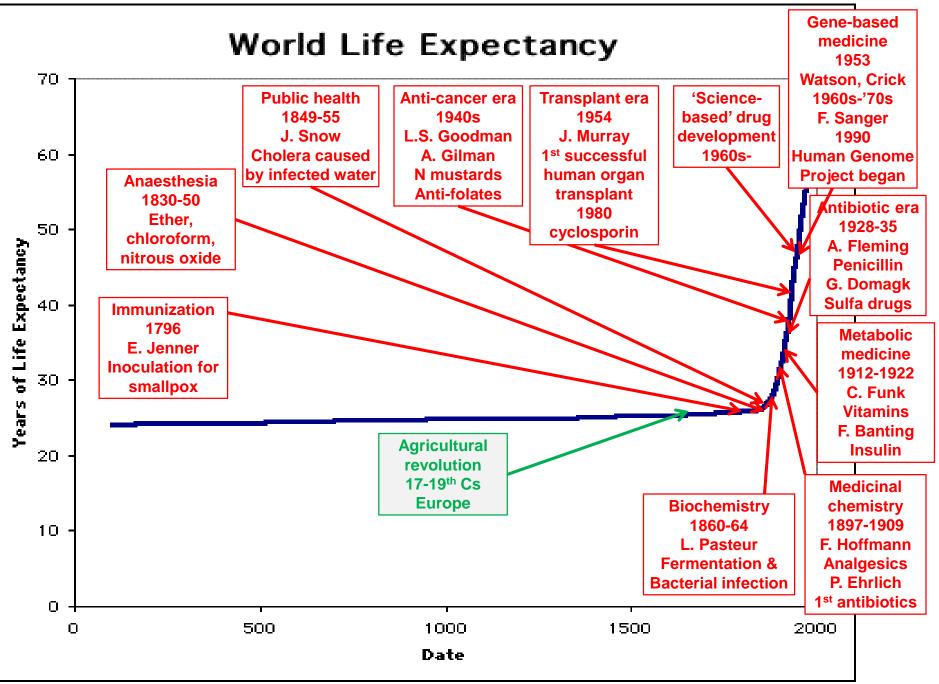






Our air is clean, our water is pure, we all get plenty of exercise, everything we eat is organic and free range, but something's just not right – nobody lives past thirty!

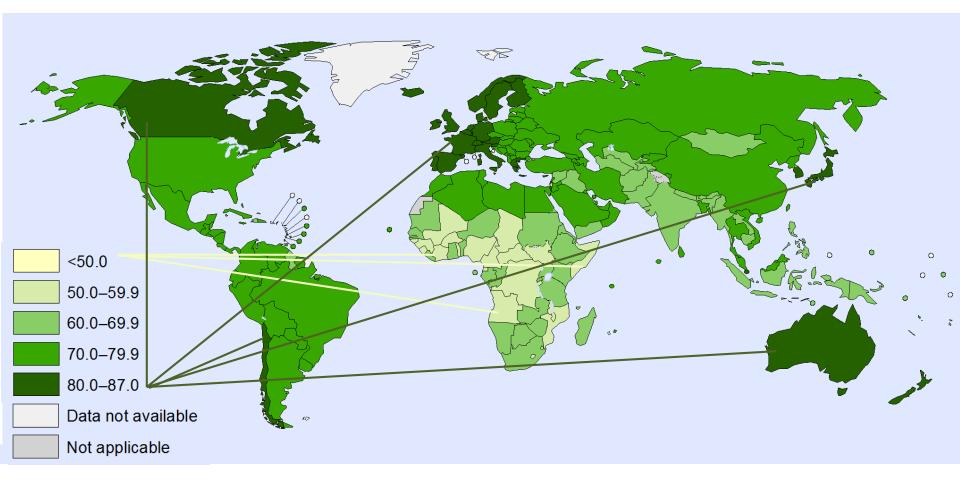
Alex Gregory. New Yorker, 22 May 2006. www.newyorker.com/cartoons/bob-mankoff/cave-cuisine



Life expectancy graph from:

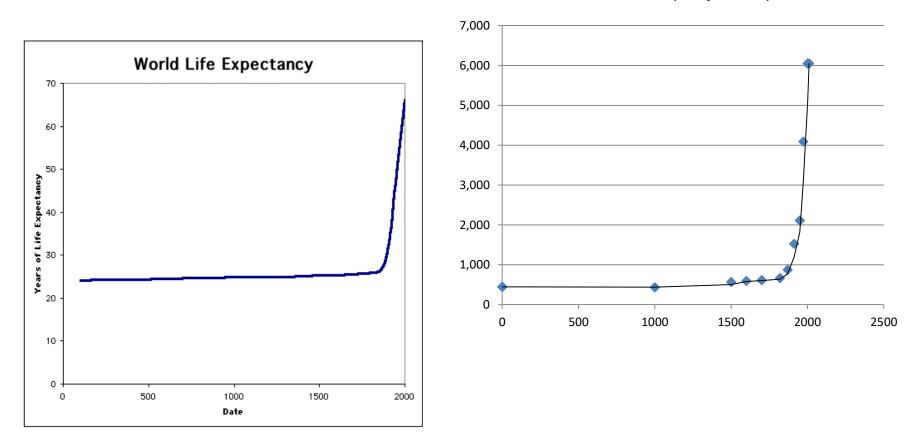
www.j-bradford-delong.net/movable\_type/images2/Life\_Expect\_Long.gif

#### World: Life expectancy at birth, both sexes, 2015



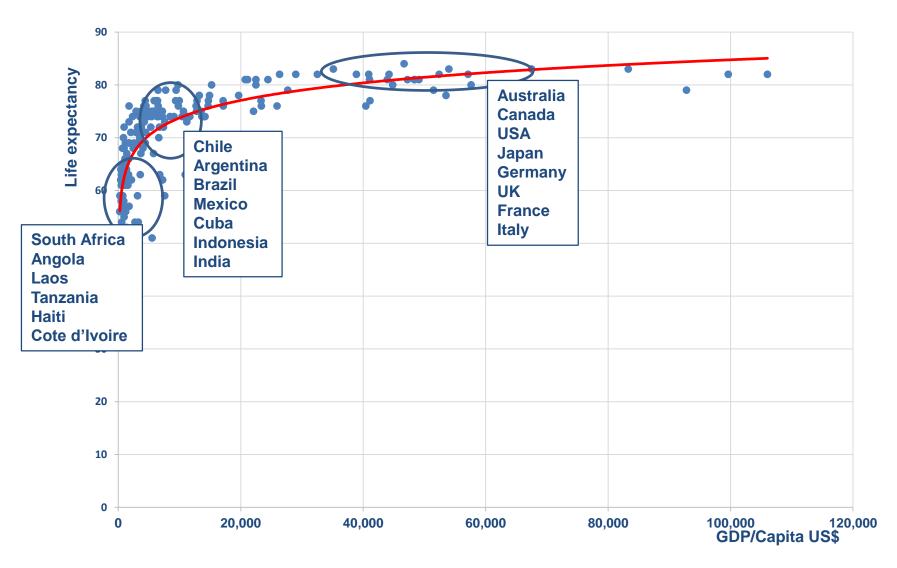
http://gamapserver.who.int/mapLibrary/Files/Maps/Global\_LifeExpectancy\_bothsexes\_2015.png

# **Global GDP per capita** 1990 international (Geary-Khamis) dollars



### How much health do you get for your wealth?

**Preston curve: Life expectancy vs GDP per capita 2012** 



Matlin 2015: GDP data from World Bank 2015; Life expectancy data from WHO World Health Statistic 2014

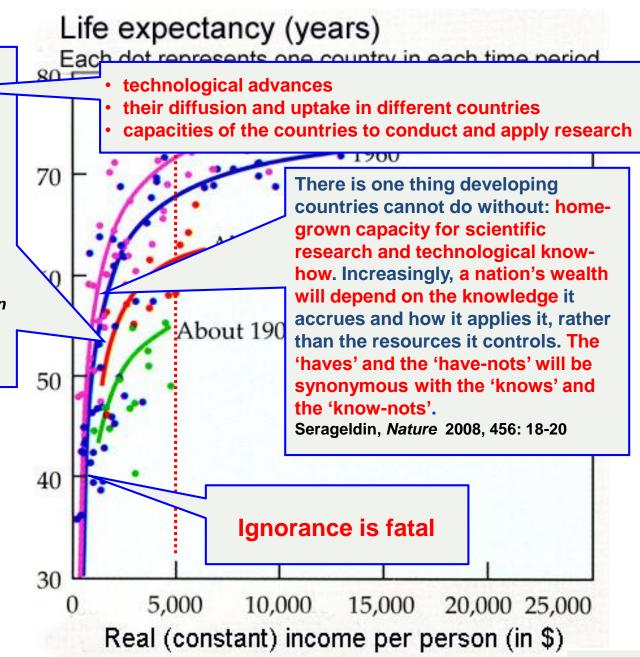
### Preston curves 1900-1990

 20th century mortality decline had its origin in technical progress

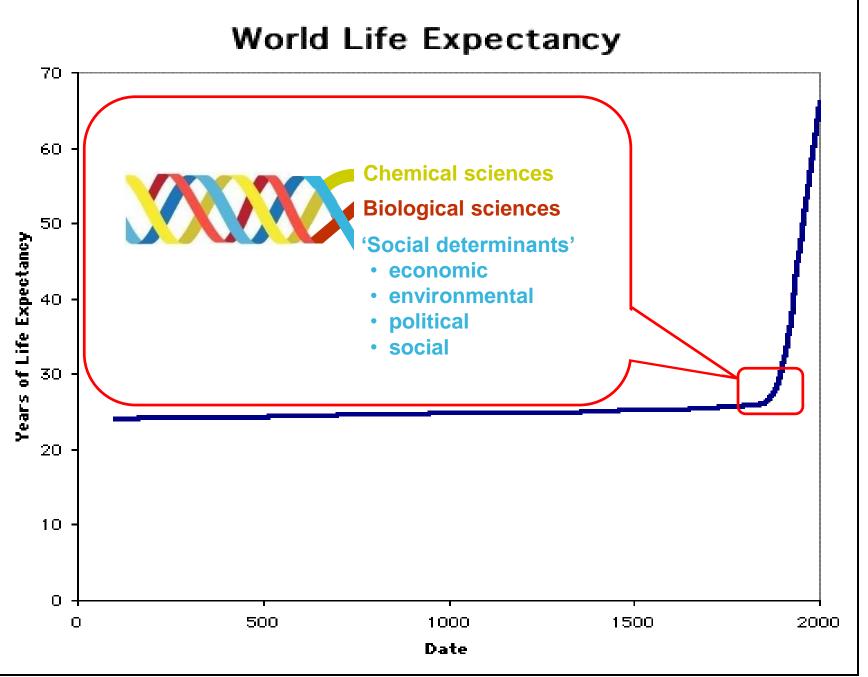
Easterlin, European Review of Economic History 1999, 3: 257–94

 Much of the variation in country outcomes results from very substantial cross-country variation in the rate of technical progress

Jamison, Disease Control Priorities in Developing Countries (DCP2), World Bank 2006



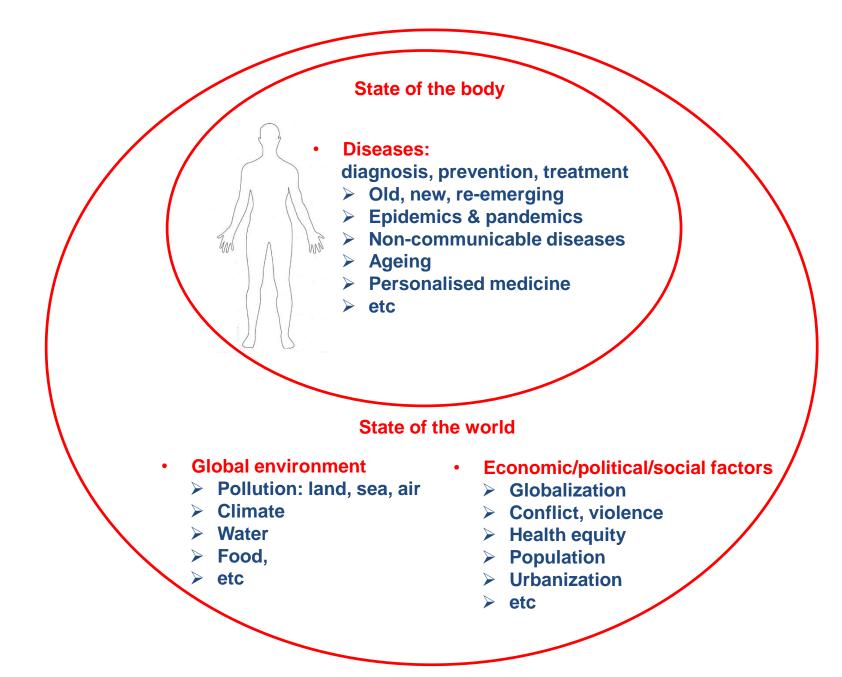
C. Dye; Preston curves from: www.gresham.ac.uk/lectures-and-events/is-wealth-good-for-your-health



Life expectancy graph from:

www.j-bradford-delong.net/movable\_type/images2/Life\_Expect\_Long.gif

#### **Oncoming global health challenges**



# The chemical sciences have been central to global progress and will be essential to meeting oncoming global challenges – especially sustainable development

Matlin, Mehta, Hopf & Krief, The role of chemistry in inventing a sustainable future.. Nature Chemistry 2015, 7, 941-3

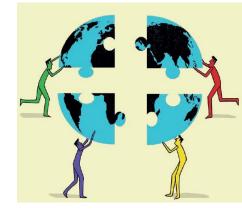
2015 UN Sustainable Development Goals (SDGs) for 2030



www.un.org/sustainabledevelopment/sustainable-development-goals/

#### **Chemistry in the 21<sup>st</sup> century**

#### 'One-world chemistry'

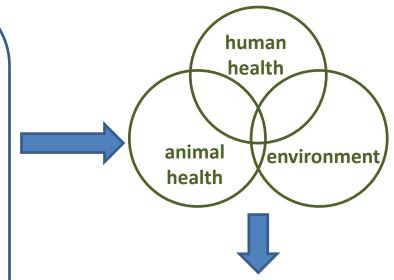


### Aims to be:

- A science for the benefit of society • Ethical practice
  - Systems thinking ()
  - Systems thinking (ST)
  - Cross-disciplinarity

### **Recognises:**

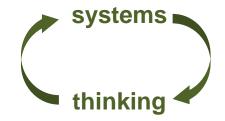
 Earth is a single system in which the health of human beings, animals and the environment are al strongly interconnected: all three must be taken into account in considering the impacts of chemistry



Implications for chemistry and health

- Need for comprehensive approaches that see the relationships between chemistry and health in the broad context
  - Thinking about systems and how they function and interact
  - Using cross-disciplinary approaches

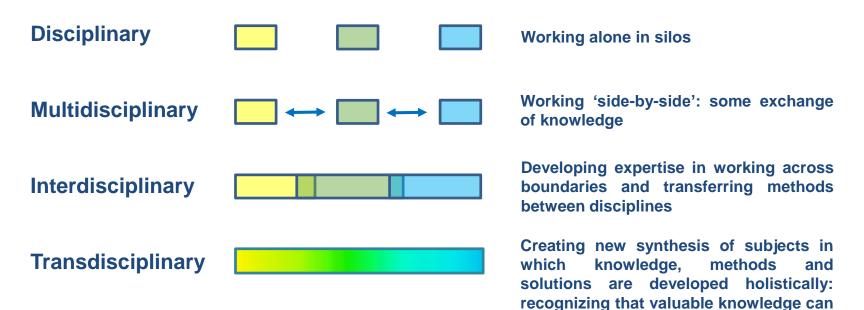
Implications for chemistry education

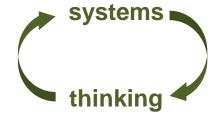


be found in the spaces between defined

disciplines

#### **Cross-disciplinary modes**





#### System

 an interconnected set of elements that is coherently organized in a way to achieve a function or purpose.

#### Systems thinking

- Using strategies to develop understanding of the interdependent components within and among complex, dynamic systems
- Seeing and understanding systems as wholes rather than as collections of parts

   as a web of interconnections that creates emerging patterns which help to identify
   the leverage points that lead to desired outcomes

### **Challenges to health**

#### Antibiotic Resistant Bacteria (ARB)

Early 20<sup>th</sup> century

Pre-antibiotic era Infections cause around 43% of deaths



**1928** Fleming discovers penicillin; First examples of resistant bacteria seen

# 1945

Fleming wins Nobel Prize

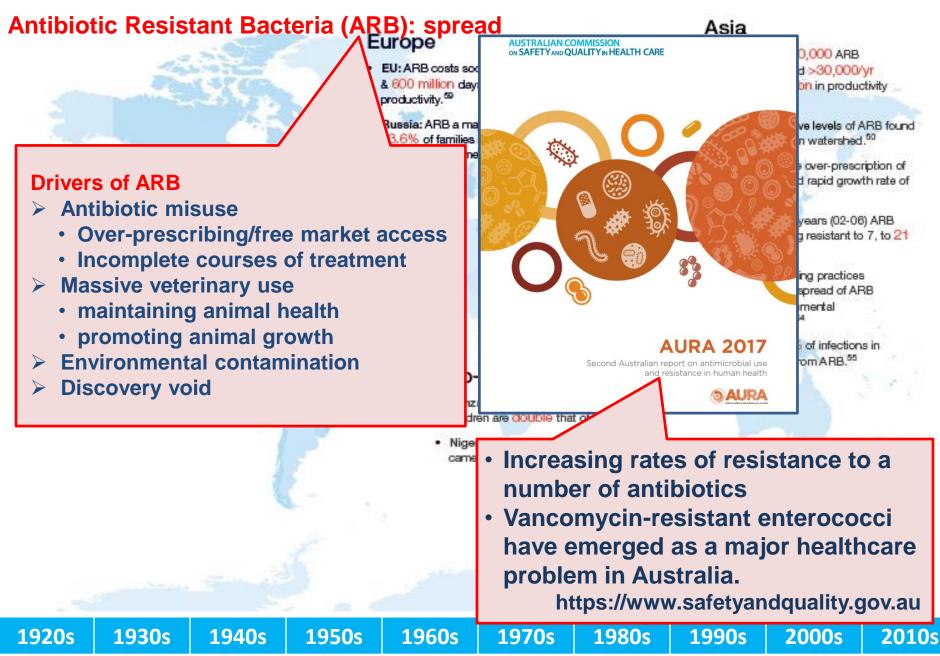
"note of warning ... It is not difficult to make microbes resistant to penicillin in the laboratory by exposing them to concentrations not sufficient to kill them, and the same thing has occasionally happened in the body." On average antibiotics and vaccines add 20 years to each person's life

Late 20<sup>th</sup> century 'Golden age' of antibiotic discovery By 2000, fewer than 7% of deaths caused by infections

1920s 1930s 1940s 1950s 1960s 1970s 1980s 1990s 2000s 2010s

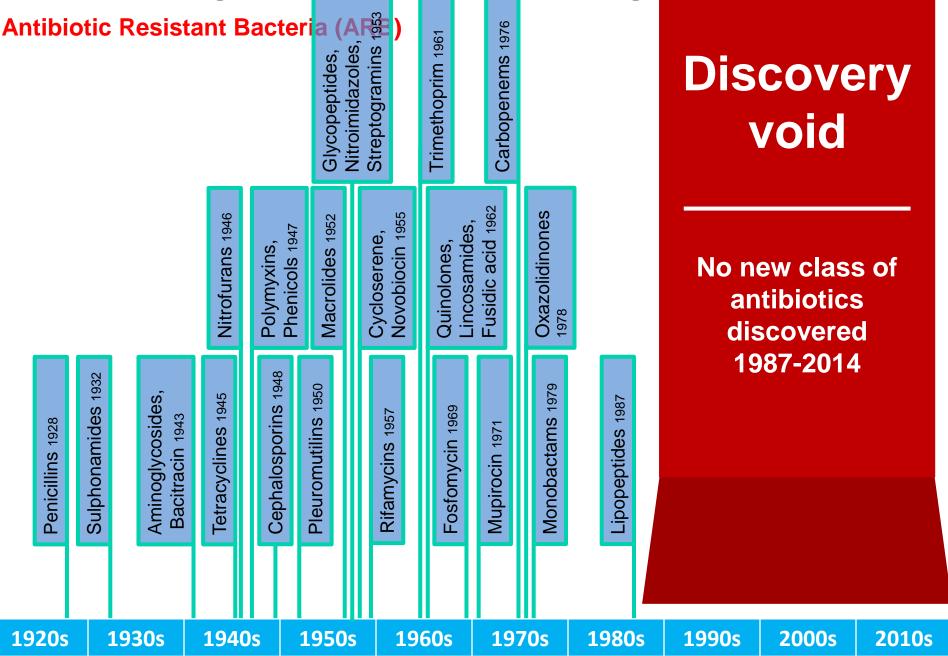
Professor Dame Sally C Davies, Chief Medical Officer, England

### Challenges in the chemical sciences for global progress



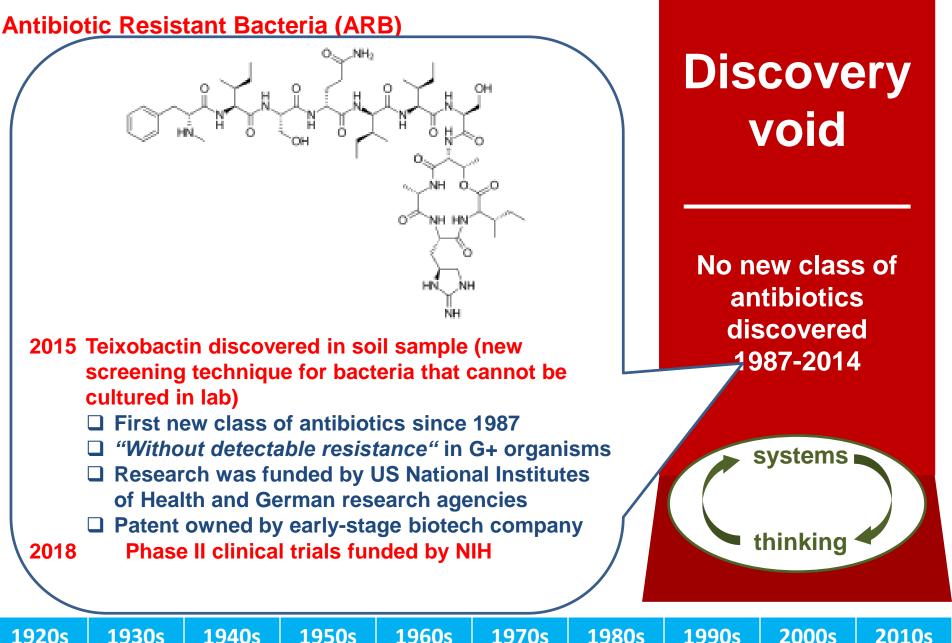
http://reports.weforum.org/global-risks-2013/view/risk-case-1/the-dangers-of-hubris-on-human-health/#read

### Challenges in the chemical sciences for glo



Professor Dame Sally C Davies, Chief Medical Officer, England





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### Challenges in the chemical sciences for glo

#### Antibiotic Resistant Bacteria (ARB)

# EDITORIAL

## nature biotechnology

## Wanted: a reward for antibiotic development

Addressing the commercial failure of the antibiotic market should be a priority for governments seeking to encourage development of new drugs against resistant bugs.

A the end of May, the Nature conference "Countering Antimicrobial Resistance" in Beijing, China, showcased a wide array of discovery approaches focused on combatting drug-resistant bacteria. On the one

Bad Bugs program, the Global Antibiotics Research and Development Partnership, Novo Holdings' REPAIR Impact Fund and the Combating Antibiotic Resistant Bacteria Biopharmaceutical Accelerator (CARB-X)

**1970s** 

Nature Biotechnology 2018, 36555;

companies

https://www.nature.com/articles/nbt.4193

**1960s** 

any new antibiotic is likely to be kept as a lastresort treatment

"Systemic global market failure to incentivize frontend investment in antibiotic development through the promise of longer-term commercial reward"

1950s

Regulatory burdens

**1930s** 

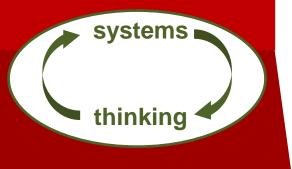
1940s

**1920s** 

### No new class of antibiotics discovered

Discovery

void



2000s

**2010s** 

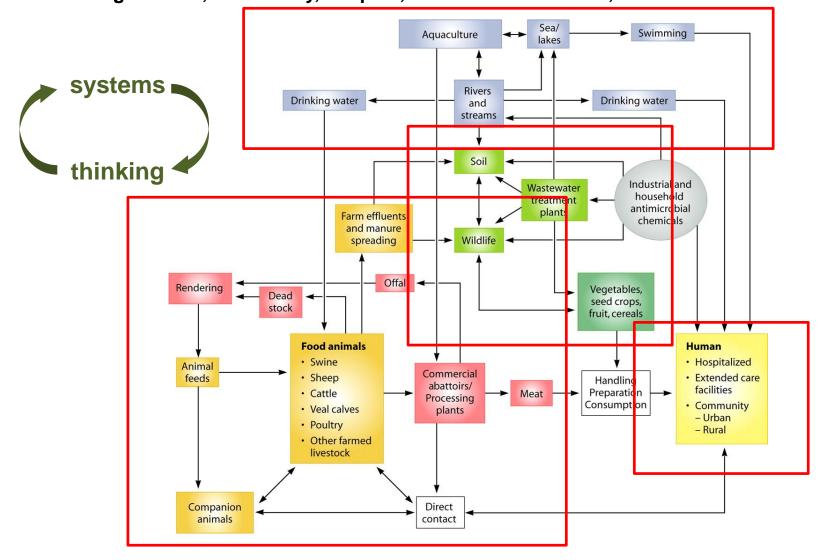
Professor Dame Sally C Davies, Chief Medical Officer, England

**1990s** 

**1980s** 

#### **Determinants of antimicrobial resistance**

Dissemination of antibiotics and antibiotic resistance within agriculture, community, hospital, wastewater treatment, and associated environments



Julian Davies, Dorothy Davies. Microbiol. Mol. Biol. Rev. 2010;74:417-433 http://mmbr.asm.org/content/74/3/417.full

### Challenges in the chemical sciences for global progress

#### Antibiotic Resistant Bacteria (ARB)

### Early 20<sup>th</sup> century

Pre-antibiotic era Infections cause around 43% of deaths

#### Mid 21<sup>st</sup> century

Without action, infection-related mortality may have returned to pre-antibiotic levels



**1928** Fleming discovers penicillin; First examples of resistant bacteria seen

### 1945

#### **Fleming wins Nobel Prize**

"note of warning ... It is not difficult to make microbes resistant to penicillin in the laboratory by exposing them to concentrations not sufficient to kill them, and the same thing has occasionally happened in the body."

### 2013

Lancet Infectious Diseases: "We stand at the dawn of a post-antibiotic era ... virtually all disease-causing bacteria are resistant to the antibiotics commonly used to treat them"

#### Late 20<sup>th</sup> century

'Golden age' of antibiotic discovery By 2000, fewer than 7% of deaths caused by infections

# 1920s1930s1940s1950s1960s1970s1980s1990s2000s2010sProfessor Dame Sally C Davies, Chief Medical Officer, England

### **Challenges in the chemical sciences for global progress**

### Antibiotic Resistant Bacteria (ARB)

- Need for better tools to recognize resistance
- Especially: cheap, accurate, rapid and easy-to-use point-of-care test kits for bacterial infections:
  - ✓ more targeted use of antibiotics
  - ✓ overall reduction in misdiagnosis and prescription
  - ✓ part of the toolkit for stewardship of antibiotics in the future
- Need for greater investment in new antibiotics
- US: Obama administration nearly doubled the federal funding to combat antimicrobial resistance to more than \$1.2 billion in 2016
- > EU: Action Plan against Antimicrobial Resistance launched 2011
- IMI: EU/European pharmaceutical industry 'Innovative Medicines Initiative': New Drugs for Bad Bugs programme

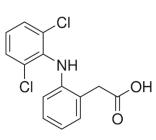
#### Need for a coordinated global effort to counter antibiotic resistance

- > May 2015 World Health Assembly: *Global action plan on antimicrobial resistance (AMR)* 
  - ✓ governments all committed by May 2017 to put in place a national action plan on antimicrobial resistance, aligned with the global action plan
- > USA+EU: Trans Atlantic Taskforce on Antimicrobial Resistance
- WHO, UN's Food and Agriculture Organization and World Organisation for Animal Health collaborating closely



#### India

Critically endangered vultures in India are still at risk of exposure to the anti-inflammatory drug diclofenac, through widespread illegal sales of the drug.



India, Europe, USA High levels of pharmaceutical ingredients in treated effluent from wastewater-treatment plants and in effluent downstream from pharmaceutical factories

Gudgeon downstream of wastewater-processing plant had swollen abdomens and other abnormalities Drugs excreted by patients can taint rivers, even after passing through wastewaterprocessing facilities Upstream-Downstream-0 20 40 60 80 100 Sex ratio (%)

Fish downstream of a French pharmaceutical factory much more likely to show characteristics of both sexes (intersex) than those upstream

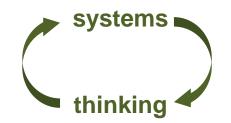
#### Nature.com August & September 2011

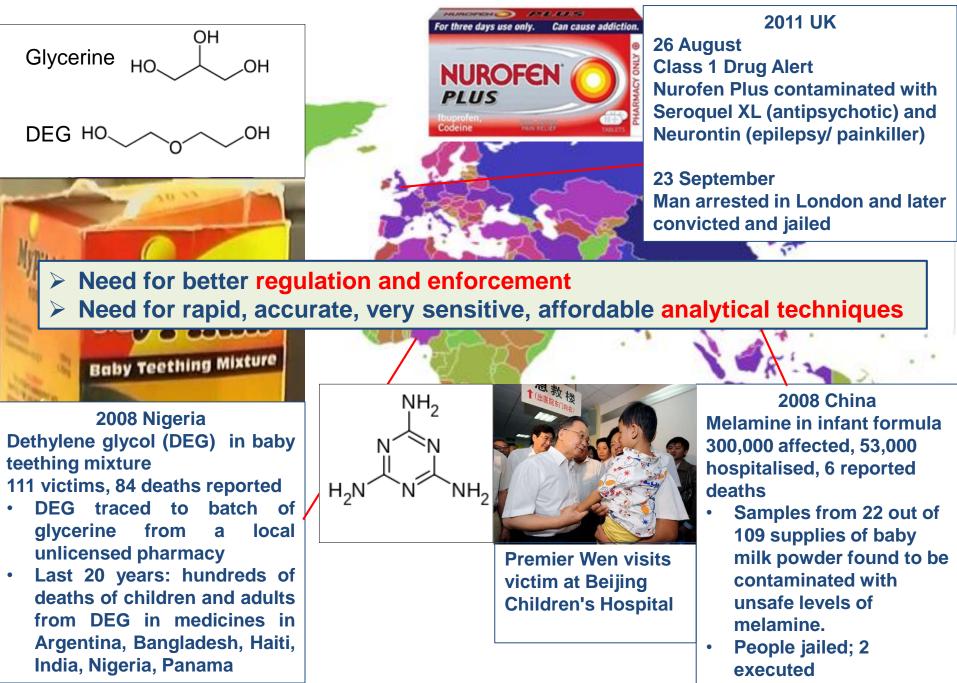


High levels of pharmaceutical ingredients found in treated effluent from wastewatertreatment plants and in effluent downstream from pharmaceutical factories. Examples from India, USA and EU USA and EU do <u>not</u> have regulations limiting the concentrations of pharmaceuticals released into the aquatic environment in either municipal wastewater or in effluent from manufacturing facilities.

> Nature, 15 August 2011. www.nature.com/news/2011/110815/full/476265a.html

- Need for better regulation and enforcement
  - requires understanding and support from public and policy makers
- Need for rapid, accurate, very sensitive, affordable analytical techniques
  - preferably that can be applied at, or very close to, the site being inspected



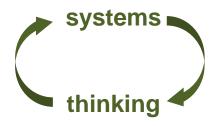


Impact of globalization on drug and food safety: important lessons Extent of problem:

- Toxicoses from contaminated food and drugs are often identified only when large numbers of people or animals are affected and numerous deaths result
- Deliberate contamination may be widespread but escape detection in poorly regulated markets.
- Contaminated raw material produced in a poorly regulated market may cross national boundaries and be used in manufacturing processes for numerous products, sometimes in more well-regulated markets.

#### **Capacity for solutions**

- It is not clear that regulatory organizations have the capacity to identify significant contaminations despite their best efforts.
- The [relevant scientific] communities, in cooperation with regulatory agencies, should develop cooperative programmes designed to detect and limit these global outbreaks.
- Although addressing regional or national outbreaks remains an important role for regulatory agencies, the [relevant scientific] communities must develop proactive global approaches to this global problem.



Global problem needing global solutions

Its a fake world: Counterfeit drugs becoming increasingly available

 Estimated counterfeit drug sales worth in the range US\$ 75 - 200 billion/year globally Counterfeit medicines estimated to constitute >10% of global medicines market: c. 1% in HICs and 10-50% in LMICs

c. 40 % of drugs in USA imported and
c. 80 % of active ingredients in US
drugs from overseas sources.
c. 10% of <u>all</u> counterfeit goods seizured
in USA in 2014 were counterfeit drugs.

Percentage of counterfeit drugs:

between 20% and 30%
between 10% and 20%
between 1% and 10%
less than 1%

Global Reporting of Counterfeit Medicines http://ec.europa.eu/internal\_market/indprop/docs/conf2008/wilfried\_roge\_en.pdf

June 2011

**Belgian** man extradited from **Costa Rica** to **USA** convicted of operating fraudulent internet pharmacy and jailed for 4 years

- Sold \$1.4 million misbranded and counterfeit drugs and controlled substances
- An international business:
  - customer service call centre in Philippines
  - Western Union wire transfers via the Philippines, Costa Rica and USA
  - credit card processors in the Netherlands
  - website hosting service in USA
- The Canadian co-defendant remains a fugitive.

www.fda.gov/ICECI/CriminalInvestigations/ucm257945.htm

**July 2011** 

US National Association of Boards of Pharmacy report: 96% of 8,000 internet pharmacy Web sites analyzed operate out of compliance with United States pharmacy laws

www.nabp.net/news/nabp-issues-rogue-online-pharmacy-public-health-alert/

Jan 1999 - Oct 2000 WHO: 46 reports from 20 countries (60% LMICs)

- Counterfeit drugs included antibiotics, hormones, analgesics, steroids, antihistamines:
- without active ingredients, 32.1%;
- with incorrect quantities of active ingredients, 20.2%;
- with wrong ingredients, 21.4%,
- with correct quantities of active ingredients but fake packaging, 15.6%;
- with high levels of impurities and contaminants, 8.5%
- > In 2011, 64% of antimalarial drugs in Nigeria were found to be counterfeit
- No simple solution
- Problem has reached a global dimension and needs a global approach
- Absence of, or weak, drug regulation, testing, enforcement





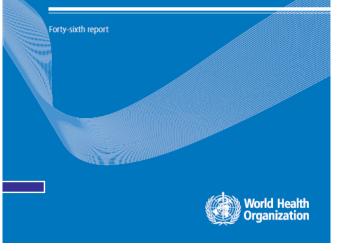


WHO 2011: www.who.int/medicines/services/counterfeit/overview FDA 2012: www.fda.gov/Drugs/DrugSafety/DrugIntegrityandSupplyChainSecurity/ucm298047.htm

WHO Technical Report Series

970

WHO Expert Committee on Specifications for Pharmaceutical Preparations



# *Every country, regardless of its stage of development, should consider investment in an independent <u>national</u> <u>drug quality control laboratory</u>*

WHO Expert Committee on Specifications for Pharmaceutical Preparations 29th Report, 1984. http://whqlibdoc.who.int/trs/WHO\_TRS\_704.pdf

#### Absence of, or weak, drug regulation

 In 2015, of 191 WHO member states c. 20% had well developed drug regulation. Of remainder, c. 50% implemented some drug regulation; another 30% either had no drug regulation in place or a very limited capacity that hardly functioned.

General Information on Counterfeit Medicines, WHO 2015 www.who.int/medicines/services/counterfeit/overview/en/index1.html Substandard, spurious, falsely labelled, falsified and counterfeit (SSFFC) medical products, WHO 2016. /www.who.int/mediacentre/factsheets/fs275/en/

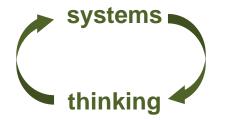
#### **Technologies to prevent/identify counterfeits**

- World market for pharmaceutical anti-counterfeiting technology c. US\$ 3.4 billion in 2015
- Pharmaceutical + food anti-counterfeiting market may exceed US\$ 160 billion by 2020

www.visiongain.com/Report/1360/Pharmaceutical-Anti-counterfeiting-Technologies-Market-Analysis-and-Forecasts-2015-2025

www.hexaresearch.com/research-report/pharmaceuticals-and-food-anti-counterfeiting-technologies-industry/

- Challenges/opportunities for the chemical sciences
  - New chemistry products, processes and analytical methods:
     \* Safe, effective, affordable, sustainable
  - Public and policy makers need to understand the dangers; and the policies and practices [systems] needed to counter them and to tackle highly ingenious criminals \* Challenges for [chemical] science literacy
- Challenges for regulation
  - Better cooperation and harmonization among analysts in the fields of pharmaceuticals, food, environment
  - Better cooperation and harmonization between analysts in all fields and policy makers
    - \* Challenges for capacities for [chemical] science literacy, communication, diplomacy

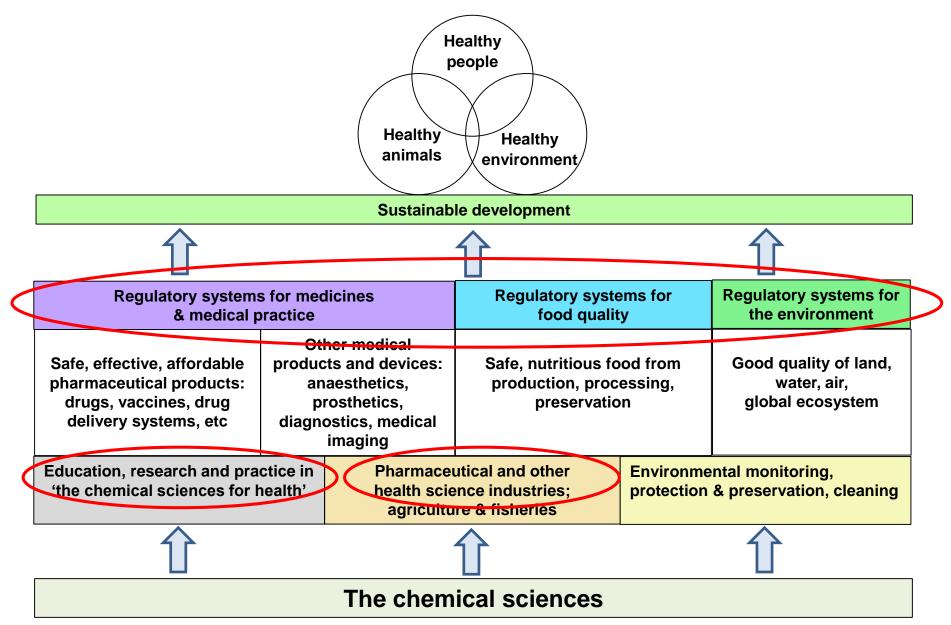


- The chemical sciences have been good for health
- Faced with the oncoming global challenges, even greater efforts are required
- The chemical sciences are <u>not</u> able to function optimally in helping to deliver better health and health equity

Three systemic fragmentations, involving:

- 1. the science discipline
- 2. the functioning of industry
- 3. the regulatory systems related to health

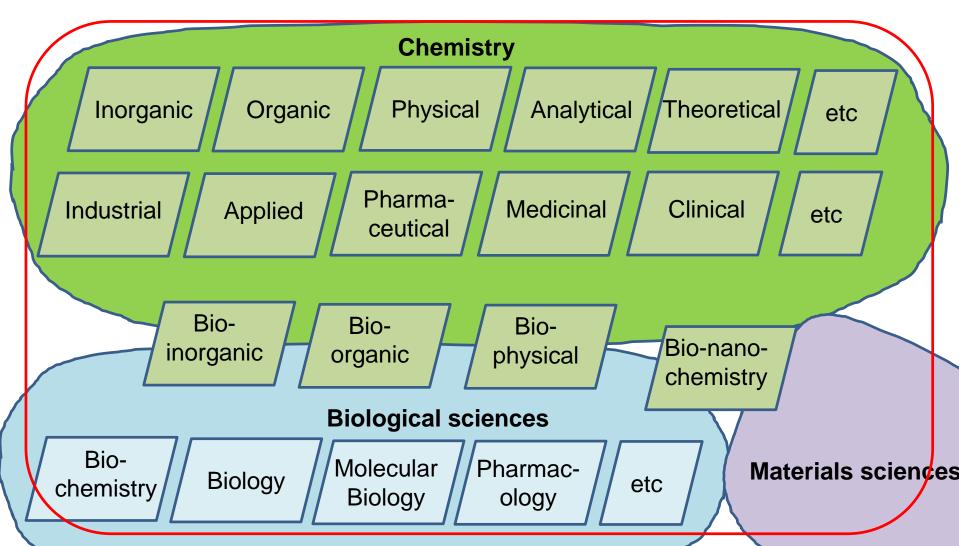
#### The chemical sciences support health through multiple channels



Matlin, Mehta, Krief & Hopf. ACS Omega, 2017, http://doi.org/10.1021/acsomega.7b01463

### Three systemic fragmentations:

**1. Compartmentalization in the science discipline** 



### **Three systemic fragmentations:**

**1. Compartmentalization in the science discipline** 

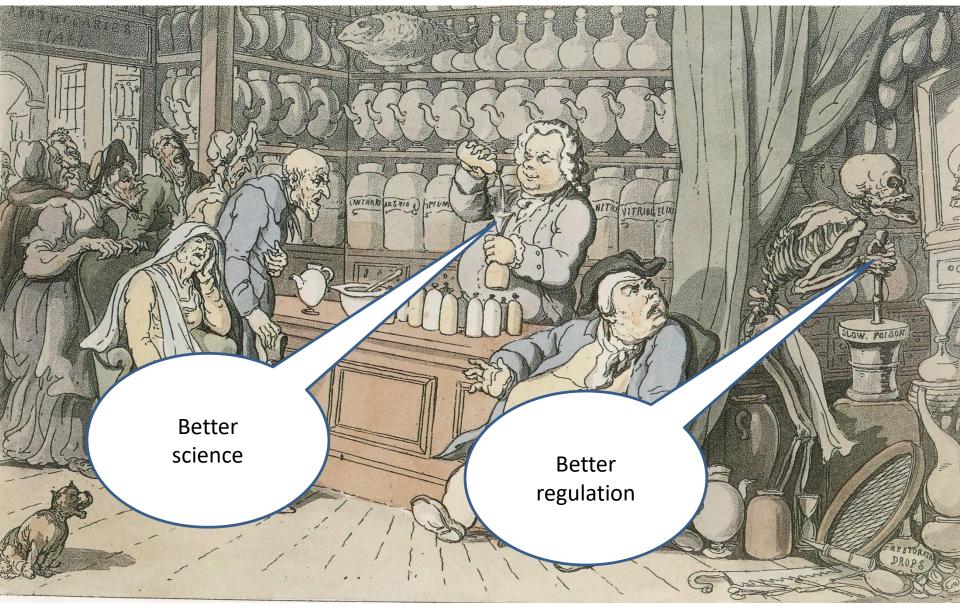
#### **Chemistry and Health**

- Creating an overall vision of the multitudinous roles and capacities of the chemical sciences in achieving better health
- Providing the intellectual underpinning for trained graduates and researchers with a solid, broad platform of knowledge and skills to engage in cross-disciplinary work applied to health, related to, eg:
  - medicinal/pharmaceutical chemistry
  - □ biopharmaceutical analysis
  - □ clinical chemistry
  - biomaterials
  - medical imaging

- □ toxicology
- environmental analytical chemistry
  - cnemistry
- nutrition & food analysis
- □ forensic chemistry
- regulatory affairs
- Promoting convergence of diverse knowledge streams in the chemical sciences and harnessing these convergences to enhance the innovative contributions of the chemical sciences to health
  - New degrees; changed curricula

**Three systemic fragmentations:** 

- **1. Compartmentalization in the science discipline**
- 2. Dis-integration in the pharmaceutical industry



*The Quack Doctor, 1814* Arnold-Foster & Tallis*, The Bruising Apothecary*, Pharmaceutical Press, 1989

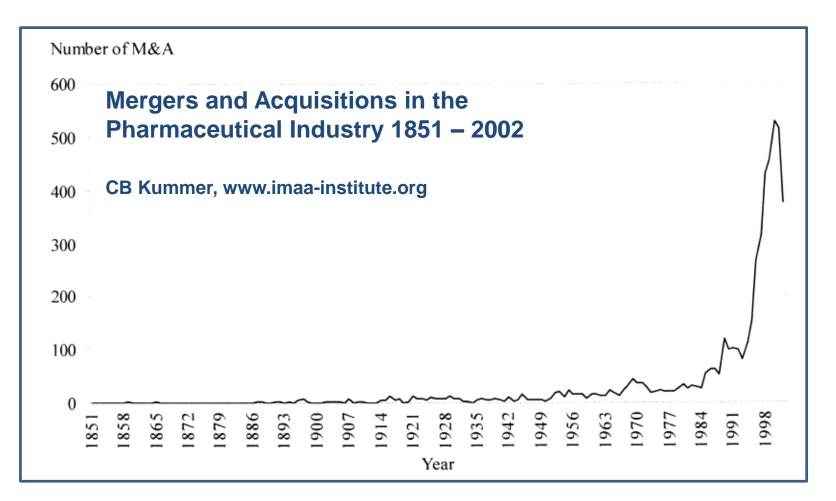
**Globally:** 

- The 20 largest pharma/biotech companies employed over 1.3 million people in 2006
- The industry generated global sales > US\$ 1 trillion by 2015
- Biopharmaceutical research companies are the most research intensive in the world; USA invested US\$ 67.4 billion in 2010; in Europe, represents 1/5 of total EU private R&D expenditure Australia:
- The Australian pharmaceutical industry exports products worth AUS\$4 billion annually and employs more than 15,000 people





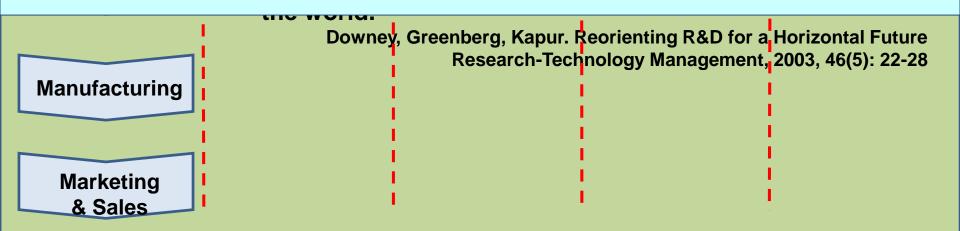
- Moving: sideways, and to East and South Asia Paradoxically:
  - Mergers and acquisitions
  - Shift from 'vertical' to 'horizontal' structures, including the separation of research from development

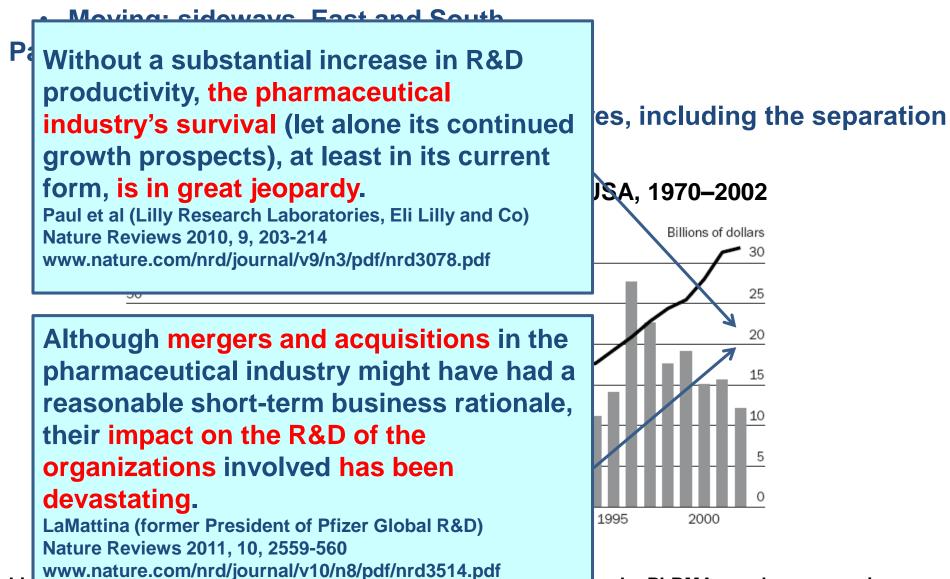


• Moving: sideways, East and South Paradoxically:

While mergers apparently have achieved cost reductions and addressed short-run pipeline problems, there is little evidence to date that they increased long-term R&D performance or outcomes. Many of the larger pharmaceutical firms... continue to deal with a persistent R&D productivity problem.

> Grabowsky & Kyle 2008 Mergers and alliances in pharmaceuticals: effects on innovation and R&D productivity. http://margaretkyle.net/G-K%20Merger%20chapter.pdf





ng by PhRMA member companies,

inflation-adjusted to constant 2002 dollars by the NIH Biomedical R&D price deflator.

IM Cockburn, The Changing Structure Of The Pharmaceutical Industry, Health Affairs, 23, no.1 (2004):10-22. http://content.healthaffairs.org/content/23/1/10.full.html

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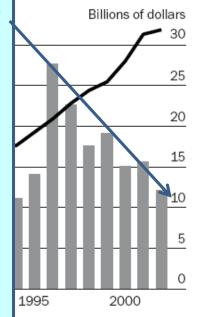
inf

- Pharmaceutical industry is undergoing fundamental change and its future is unclear.
- Emergence of a handful of companies that controls two-thirds of NMEs.
- Growth in number of NMEs controlled by marketing organizations that have little or no internal drug discovery or development activities: increased dramatically since 2000 and could raise important questions about the future landscape and viability of drug discovery and development.

Kinch et al (Center for Molecular Discovery, Yale University) An overview of FDA-approved new molecular entities: 1827-2013. Drug Discovery Today 2014, 19, 1033-1039. Lir https://www.ncbi.nlm.nih.gov/pubmed/24680947

### es, including the separation

### JSA, 1970–2002



ng by PhRMA member companies, R&D price deflator.

ructure Of The Pharmaceutical Industry,

Health Affairs, 23, no.1 (2004):10-22. http://content.healthaffairs.org/content/23/1/10.full.html

### One-world chemistry, systems thinking and cross-disciplinarity applied to



More organisations overall, particularly large firms, reported a greater increase in their global discovery investment than that in the UK. This could suggest that whilst areas of the landscape may be thriving, overall the UK may be proportionally losing out globally.

**ABPI 2016** 

Thus the UK needs to consider how it can best maintain its position as a central player in a dynamic global discovery landscape.

www.abpi.org.uk/our-work/library/industry/Pages/The-changing-UK-drug-discovery-landscape.aspx

Does it matter where and how the science gets done, as long as new products are created to meet the growing health needs? Analysts differ:

- Some: the metamorphosis has had 'mixed results'
- Some: it has not been to the advantage of people's health
   o decline in numbers of new drug entities coming into use annually
  - decline in numbers of new drug entities coming into use annually
     perrowing of focus on block buster drugs while (discesses of the poor
  - o narrowing of focus on block-buster drugs while 'diseases of the poor' neglected
  - may be a shift in job opportunities in the relevant sciences accompanying the geographic relocation of pharmaceutical R&D to South and East Asia;
  - and this may decrease the popularity of these sciences in Europe North America, Australia – weakening their traditionally strong capacities in research for health

### Three systemic fragmentations:

- 1. Compartmentalization in the science discipline
- 2. Dis-integration in the pharmaceutical industry
- The model needs revisiting since the world needs
- more drugs and other health products at more affordable prices for more diseases and conditions
- a system that enables achievement of the SDG goals of health and health equity for all, based on the principle of 'leave no-one behind'.
- Solutions will not be straightforward:
- driven by economic forces that do not originate in the pharmaceutical sector itself but in functioning of economic reward and innovation systems at national and global levels.
- If the high-income countries with traditionally strong pharmaceutical development capacities wish to retain their industries and their leadership roles in the field, they need to play close attention to systemic elements involved and bolster critical ones, including:
- ensuring strong, robust and well-designed education programmes, including relating to the chemical sciences, that create a pool of talent with skills honed in conducting interdisciplinary and trans-disciplinary research
- well-funded academic centres that can create new leads to health products
- innovation hubs that foster early-stage drug development
- national innovation systems and innovation financing that encourage the growth of independent middle-size companies that have options beyond buy-out when they create promising candidate products and high-value new licensed drugs

### Three systemic fragmentations:

- **1. Compartmentalization in the science discipline**
- 2. Dis-integration in the pharmaceutical industry
- 3. Disconnections in the regulatory sector

It's a dirty world and a fake world – affects pharmaceuticals, food and the environment

Need for more effective regulation

- Licencing
- Quality of products procured
- Quality of products in circulation
- Counterfeits
- Contamination of environment
- Contamination of foodstuffs

**Regulation = Laws + policing + criminal justice system** 

- Analytical science feeds into all three
  - Sets position for what is possible
  - Sets practical framework/limits for timescale and cost of what is detectable
  - Sets limits of what is 'provable' and therefore enforceable by courts

#### Dialogue essential: between scientists, policy makers, legal system, public, media

- Non-technical language
- Effective communication e.g. about 'certainty' and 'risk'



## ACS Omega 2017, **2**, 6819-6821 http://doi.org/10.1021/acsomega.7b01463

Thank you

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