

January 5, 2021

Dr. Myrna Cabotaje

Undersecretary, Department of Health

Sta. Cruz, Manila

Email: oiucsecphst@gmail.com

Re: Inputs from Filipino scientists to the COVID-19 Vaccine planning at DOH

Dear Undersecretary Cabotaje,

We are a group of concerned Filipino biomedical and social scientists from different parts of the Philippines and the world, working in various fields relevant to vaccine research, development and regulation. We have been discussing the vaccines for COVID-19 in an online forum since May 2020¹. Many of us have contributed to the pandemic response, and we have even formed technical expert panels² that we forwarded to the PCHRD c/o Executive Director Dr. Jaime Montoya to be utilized in various aspects of vaccines in the Philippines.

Talk of the vaccines for COVID-19 coming soon to the Philippines prompted us to hold a discussion on December 29, 2020^{3,4} where we tackled issues concerning the evaluations of the vaccines, immunization prioritization, vaccination hesitancy in our population, post-administration monitoring and new strains of coronaviruses. We would like to add the following points as our input to the ongoing discussions and planning at the DOH regarding the upcoming COVID-19 vaccines:

1) **Evaluation Transparency, Information Integrity.** The considerations for evaluating any of the COVID-19 vaccines coming to the Philippines are safety and efficacy foremost. We trust in the competence and experience of our FDA, and an evaluation process that is transparent and publicized will help affirm this trust and promote vaccine uptake among Filipinos. Our recent history, the suspension of the Dengvaxia mass vaccination program, has harmed our immunization programs, thus, there is no recourse other than a completely transparent evaluation process, demonstrating integrity in the information communicated to the public for all of the vaccine candidates.

2) **Immunization Prioritization, Justice and Equity.** The goals for immunization prioritization are the efficient *a)* prevention of infection and transmission and *b)* protection of vulnerable populations. These goals are not mutually-exclusive, therefore, a balance between the two must be struck to maximize the benefits of the limited doses that will be available at the beginning. There are models for vaccine distribution from the work of Dr. Vena Pearl Bongolan and Professor Roselle Rivera at UP Diliman (**abstract attached**), and they are both available to be consulted by the DOH if needed. We also offer two documents that detail the modeling exercise performed at the CDC on Phased Vaccine Allocations (**slides attached**) in the US, which, if we were to use them as a framework to determine our own allocations, must be localized to our population's characteristics. We believe that healthcare workers, including those facilitating quarantine and contact tracing, should be given highest priority as they do the heaviest lifting in prevention and are also among the most exposed (therefore, of highest vulnerability). The entire

vaccination program depends on our health workforce so they have to be protected. We recommend vaccine allocations that emanate from positions of justice and equity, and the process of arriving at the allocations must be transparent for the public's understanding and acceptance. We also recommend that all stakeholders be properly educated regarding the official allocation/prioritization and thus enjoined to strictly comply with this national imperative.

3) **Distribution Efficiency.** From the limited information in the public sphere at the moment, the first authorized vaccine doses are scheduled months from now at the earliest. So there is ample time to prepare our healthcare system for an efficient distribution scheme to avoid the problems now being encountered in other countries⁵.

4) **Rapid Post-administration Monitoring/Reporting.** Because of the unprecedented speed of the development, trial and approval of these vaccines and the use of newer technologies never before rolled out on a global scale, a rapid post-administration monitoring system must be in place to be able to speedily respond to adverse events that may unexpectedly appear. Of equal importance is the monitoring of SARS-CoV-2 variants that may escape vaccine-augmented host responses and cause acute illness among those vaccinated. This rapid monitoring system will be another safety layer for our people and can promote a positive perception of the vaccines and the immunization program.

A thoughtful and people-centric mindset is what we are asking for, and we fervently hope that the FDA, DOH and IATF would consider our inputs. We are available for consultations if needed.

Sincerely,

The Philippine Covid-19 Vaccine Discussion Group Members

Signed:

Frances Acosta (*GlaxoSmithKline*)

Manny Bacolod (*Weill Cornell Medicine*)

Marilen Balolong (*UP Manila*)

Neil Andrew Bascos (*UP Diliman*)

James Bautista (*Bristol-Myers Squibb*)

Vena Pearl Bongolan (*UP Diliman*)

Maria N.B. Cajimat (*The University of Texas Medical Branch - Galveston National Laboratory*)

Salvador Caoili (*UP Manila*)

Francis Chung (*Douglas Pharmaceuticals*)

Gisela P. Concepcion (*Philippine-American Academy of Science and Engineering*)

Lourdes Cruz (*National Scientist*)

Leslie Michelle Dalmacio (*UP Manila*)

Romulo de Castro (*University of San Agustin*)

Maria Amelita Estacio (*UPLB*)

Neil Tan Gana (*UP Manila*)

Christian Gloria (*Hawaii Pacific University*)

Nina Gloriani (*Technical Working Group for Philippine COVID19 Vaccine Clinical Trials - Expert Panel on Vaccines*)
Julius Hafalla (*London School of Hygiene and Tropical Medicine*)
Francisco Heralde (*UP Manila*)
Leodevico Ilag (*Molawin Creek Ventures*)
Hilton Lam (*UP Manila*)
Daria Manalo (*Research Institute for Tropical Medicine*)
May Anne Mata (*UP Mindanao*)
Noel Miranda (*Independent Consultant*)
Lyre Murao (*UP Mindanao*)
Philip Ian Padilla (*UP Visayas*)
Homer Pantua (*Genentech*)
Karsten Pilonos (*Weill Cornell Medicine*)
Roland Remenyi (*The Medical City*)
Roselle Leah Rivera (*UP Diliman*)
Cynthia Saloma (*UP Diliman*)
Jonel Saludes (*University of San Agustin*)
Raymond Joshua San Pedro (*Coalition for People's Right to Health*)
Anna Serquiña (*Molecular Virologist, Bethesda, MD, USA*)
Peter Sy (*UP Diliman*)
Willy Tan (*Pfizer*)
Gianne Eduard Ulanday (*UP National Institutes of Health*)
Ann Villalobos (*Johnson & Johnson*)
Pia Zamora (*University of San Agustin*)

¹ <https://www.usacfi.net/covid-19-vaccine.html>

² <https://docs.google.com/spreadsheets/d/1DQJh8oyKbJ3ptjdOk4I6E66HSmkNKtJCFwW84WYgnlw/edit-gid=866666642>

³ <https://drive.google.com/file/d/1ebqR8y81bF4fkBanJ4b81WARuWTEs1bO/view>

⁴ https://drive.google.com/file/d/1mUZz687fM5jkh6Gb5CaKJ4j_3aKSnltx/view

⁵ <https://www.wsj.com/articles/covid-19-vaccines-slow-rollout-could-portend-more-problems-11609525711>