



**BRAC** SCHOOL OF  
JAMES P GRANT PUBLIC HEALTH



# Pharmaceutical R&D in Bangladesh: Ground Realities and Prospects

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# Background of the study



Early bird in developing Drug Policy (1982)

257 licensed pharmaceutical manufacturers (allopathic) are operating in Bangladesh and about **150 are functional**; the top ten companies have 70 % of market share and the top 20 have 78 %.



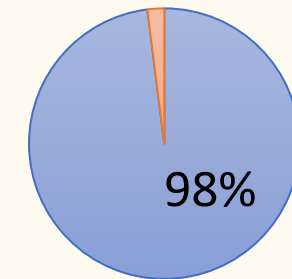
**Third-largest exporter** of generic drugs globally. The industry is projected to grow beyond **US\$ 6 billion by 2025**, with an export potential of US\$ 450 million. It currently **exports to 144 countries** including the UK, EU and USA.



Bangladesh is not **included in patent protection law** by WTO for an extended period of **until 2033**.



Total Drug Sales



■ Indigenous Pharmaceuticals  
■ Others

# Justification

Proactively prepare for the situation of **post-TRIPS waiver**.

**Little evidence** on this issue.

Mapping the **existing pharmaceutical system** and its current business model is imperative.

Through this study, we aim to map the **current R&D activities and the pharmaceutical industry's business model in Bangladesh**.

# Objective

To identify the **main actors, purposes and funding flows** of the pharmaceutical R&D sector

To analyze the **current business model of pharmaceutical industry** and how it impacts the R&D sector

To explore **business models that can spur the innovation** in the pharmaceutical industry

# Operational definition

**Business Model**      The way R&D is financed, organized, facilitated, regulated, and governed.

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**Pharmaceutical R&D as GPG**      Three criteria-  
Product must first be generated, widely available and accessible

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**Research & Development**      Development of new molecule, new chemical entity or new process

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**Product Development**      Renewing an existing product/ formula

# Method

- Key Informant Interviews (18)
- Scoping review (21)
- Database search (3)

Category	Definition	Whom we targeted
Financer (4)	Those who provide push or pull funding for R&D	CEO, Plant Head, Managing director.
Implementer (6)	Those whose organizations are directly involved in the R&D process	Head/Manager of R&D
Facilitator (8)	Those seeking to advance, improve or otherwise shape the R&D process	Academician and policy maker

# Findings from Scoping review & KII

# Current situation of pharmaceutical R&D

- Not enough innovative activities

- API production
- Reverse engineering
- Manufacturing more complex products, including biologics and biosimilars
- Research on rare diseases and developing novel molecules
- The development of a COVID-19 vaccine candidate during the pandemic
- Patenting new chemical entity (NCE) in Europe, Australia, Bangalore, India
- Collaboration with universities outside Bangladesh
- Cutting-edge research by academic researchers in phytochemistry, ayurvedic, herbal medicine, neurology, pharmacology

*“So far, we don’t have any innovative product or NCE molecule that we invented. For that invention, actually, the infrastructure and other facilities that are required are not available...so NCE, is not right now happening.” (KII\_Implementer)*

*“So, okay. for example, recently with the Bangalore patent office, we have applied for a patent. Before that we have done a patent with the TGA Australia.” (KII\_Implementer)*

*“We are developing lead molecules and reporting on their activity worldwide and publishing in high-impact journals. I have developed one anti-protozoal drug.... Here in Bangladesh, we have done so many clinical trials under the observations of doctors..” (KII\_Facilitator)*

# Key focus of pharmaceutical industries

80% of the sampled farms had Below-average levels of innovativeness.

## Key focus

- Provide patients with accessible generic medications-meeting consumers demands
- Generating substantial revenue
- Export pharmaceutical products to other countries: great demand due to low price & meeting international regulatory requirements: US FDA, UK MHRA, TGA
- Antiviral, anticancer, and anti-blood flu medications by large industries

## KII interviews

*“They study the prevalence of the most occurring disease. In Bangladesh, a study found that 73% of people are suffering from hyperacidity. so we need, esomeprazole, antacid etc.. This is how they are prioritizing.” (KII\_Facilitator)*

*“...We have a separate team for product development of the domestic market as well as for non-regulated markets and the regulated markets of other countries such as the European market, UK market as well as Canada, Australia, and some US-based markets. So, we are doing the equivalent product development.” (KII\_Implementer)*



# Key Actors in pharmaceutical R&D



## Pharmaceutical companies

In-house investors  
Marketing department  
R&D/PD Department

Government  
Body  
DGDA

## Research organizations and universities

ICDDR  
BMRC  
IEDCR  
Institute of Public Health  
National Institute of Cancer Research and Hospital  
National Institute of Ophthalmology and Hospital  
Few public and private universities

*"Basically, DGDA is referred to as a national regulatory authority who controls the importation, exportation, consumption, and distribution of the medicines" (KII\_Facilitator)*

*"We are following IMS data. Suppose we have a product named "X", It has a 200 crore market. As it is already in the market so ABC company has already launched that product. After launching, they identified that their molecule growth was good. Like every year, they can get a good profit. We are not targeting any disease or therapeutic criteria." (KII\_Financer)*

# Fundings in pharmaceutical R&D

## Pharmaceutical sector

## Researchers and universities

- No direct involvement of the government in financing R&D for the pharmaceutical companies
- 100 crores BDT investment in 2022 for R&D by one company

- Government funds
- External funding from outside like the foreign government like Italy or Japan.

**BDT 100 to 300 crore Fund from Govt. (about US\$ 94,000 to 280,000 thousand) for health research.**



**University Grant Commission of Bangladesh**

**Higher Education Quality Enhancement Project**



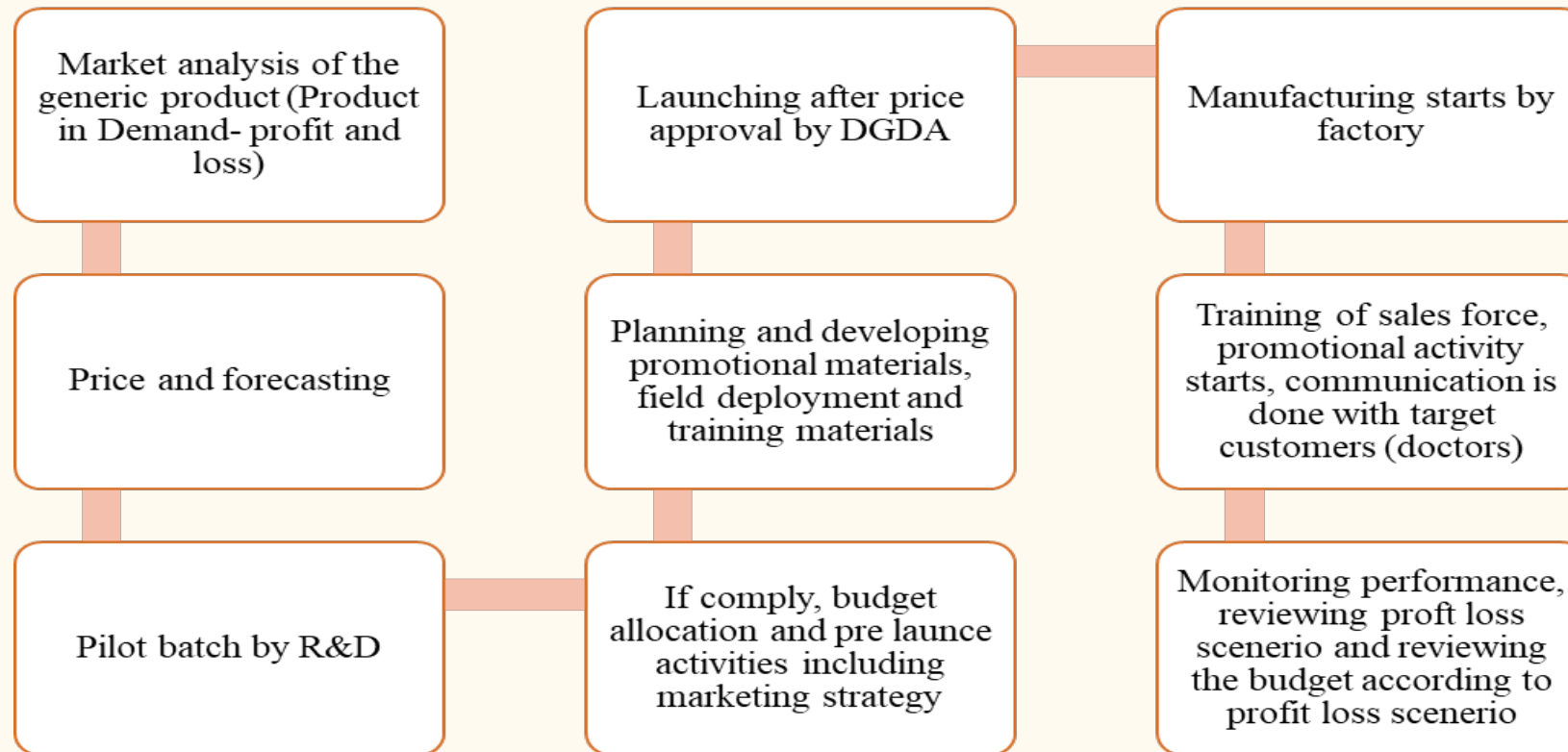
**The Commonwealth**



**Ministry of Science and Technology**

**Ministry of Education**

# Current Business Model



**Easy accessibility of API leads to the burgeoning generic formulation industry**

**Exporting medicine as a key part of the current business model**



**Profit centric**

# Prospect of a new business model for innovation

Compensate the innovator with funds from external sources in exchange for the knowledge generated and made available in the public domain as a public good (i.e., not being subject to a patent)

The stakeholders opinions-

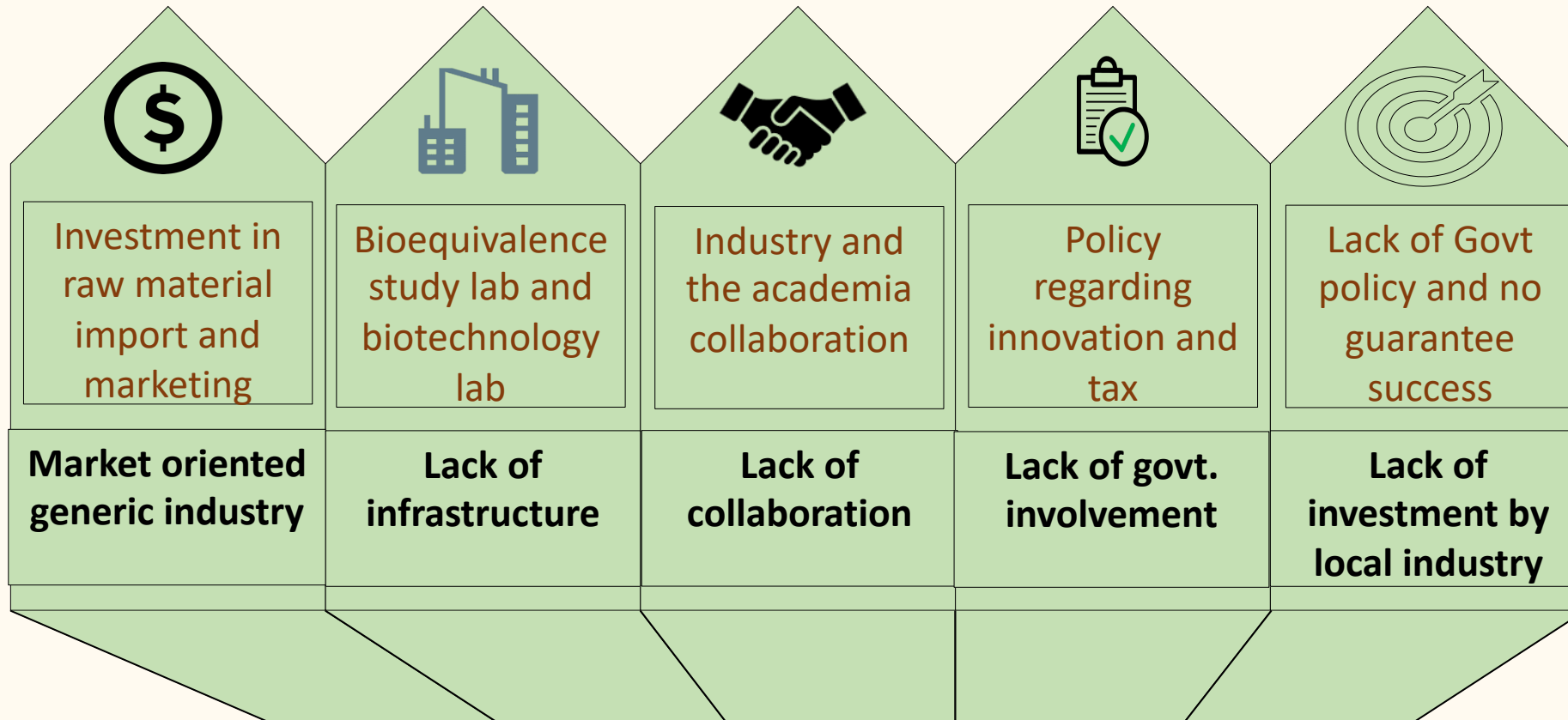
- Feasible and possible
- Researchers will lose interest
- Possibility of misuse
- Model to be built around the business context and claims that only vaccination items could be exempt from the patent policy.

Possible business model for innovation in Bangladesh-

*“I would rather try to maintain the United Nations much stronger and let the United Nations invest that amount of money in health research, the total amount of money each and every country is investing, and distribute that money within each and every country. So, each and every country has a vital chance for developing their own product rather than having to look upon another country and waiting for them to give the product.” (KII\_Facilitator)*

*“Wealthy nations may have patents while developing countries should be kept patent-free.” (KII\_Facilitator)*

# Challenges



*“The second problem is Bangladeshi businessmen do not want to take a risk in their whole portfolio and the policymakers cannot have a system where the risk of a company can be protected.” (KII\_Facilitator)*

*“Our regulatory guideline has a policy which is that there must be a reference product in the USFDA or Europe UK MHRA; we can only get approval then. If we do any innovation which is not approved in USA, UK or MHRA, they will not give us any approval.” (KII\_Implementer)*

# Priority actions

## Skill development

Skilled human resources with technical expertise

## Infrastructure development

Upgrade laboratory environment



## Stakeholders collaboration

Pharma-academia collaboration

## Regulatory approach

Dedicated budget for research, policy for tax and patent

*“Yes, we have to develop an infrastructure to provide a proper environment for the scientist. It would not be like the facility for commercialization...we need to maintain the standard.”(KII\_Financer)*

*“Our government has no plan to revise the policy or work on the existing policies for pharmaceutical research-based activities. This is a very important point.” (KII\_Facilitator)*

# Findings from database research

# Database Research

## 01 G-Finder

To track the amount of funding for neglected diseases & emerging infectious diseases

## 02 ClinicalTrials.gov

To explore the current clinical trial condition in Bangladesh

## 03 WHO ICTRP





# G-Finder Analysis: Total investment in different R&D stages in Bangladesh (2007-2020)

All values are in millions (USD)

Years	Basic research	Cross-cutting or unspecified	Discovery & pre-clinical	Post-registration	Clinical field development	Total
2020	6.3	0.5	0.4	<0.1	0	7.3
2019	1.3	3.9	0.1	0.4	0	5.7
2018	1.4	3.9	0	0.5	0	5.8
2017	1.5	0	0	1.8	0	3.3
2016	1.6	0	<0.1	1.5	0	3.1
2015	2.6	0	0.1	0	0	2.8
2014	0	0	0.1	0	0	0.1
2013	0	0	0	0.5	0	0.5
2012	0	1.3	0	0	0	1.3
2011	0	1.9	0	0	0	1.9
2010	<0.1	2.0	0.2	0	0.1	2.5
2009	0.1	2.5	0.1	7.2	0	10
2008	<0.1	3.2	0	0	0	3.2
2007	0	3.7	0	0	0	3.7

Source: G-Finder

# Funders & Funding Value in Bangladesh (2007-2020)

All values are in millions (USD)

Funders	2020	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010	2009	2008	2007
<b>US NIH</b>	3.1	0.1	<0.1	<0.1	<0.1	0	0	0	0	0	0	0	0	0
<b>Gates Foundation</b>	2.5	1.1	1.1	0.8	1.4	2.5	0	0.5	0.1	0	0.1	7.4	0	0
<b>Wellcome</b>	0.6	0.4	0.4	0.8	0.4	0.2	0	0	0	0	0	0	0	0
<b>UK FCDO</b>	0.5	3.9	3.9	0	0	0	0	0	0	0	0	0	0	0
<b>EC</b>	0.4	0.1	0	0	<0.1	0.1	0.1	0	0	0	0	0	0	0
<b>Effect hope</b>	0.1	0.1	<0.1	0.1	0.1	0	0	0	0	0	0	0	0	0
<b>Global Affairs</b>	<0.1	0	0	0	0	0	0	0	0	<0.1	0.1	0	0	0
<b>Canada</b>														
<b>Swiss SDC</b>	0	0	0	0	0	0	0	0	0	0	0	0.6	1.1	1.4
<b>Swedish SIDA</b>	0	0	0	0	0	0	0	0	1.2	1.9	1.9	2.0	2.0	2.3
<b>Norwegian</b>	0	0	0	0	0	0	0	0	0	0	<0.1	0.1	<0.1	0
<b>SIU</b>														
<b>Other</b>	0	0	0.2	1.5	1.1	0	0	0	0	0	0.2	0	0	0
<b>Total</b>	7.3	5.7	5.8	3.3	3.1	2.8	0.1	0.5	1.3	1.9	2.5	10	3.2	3.7

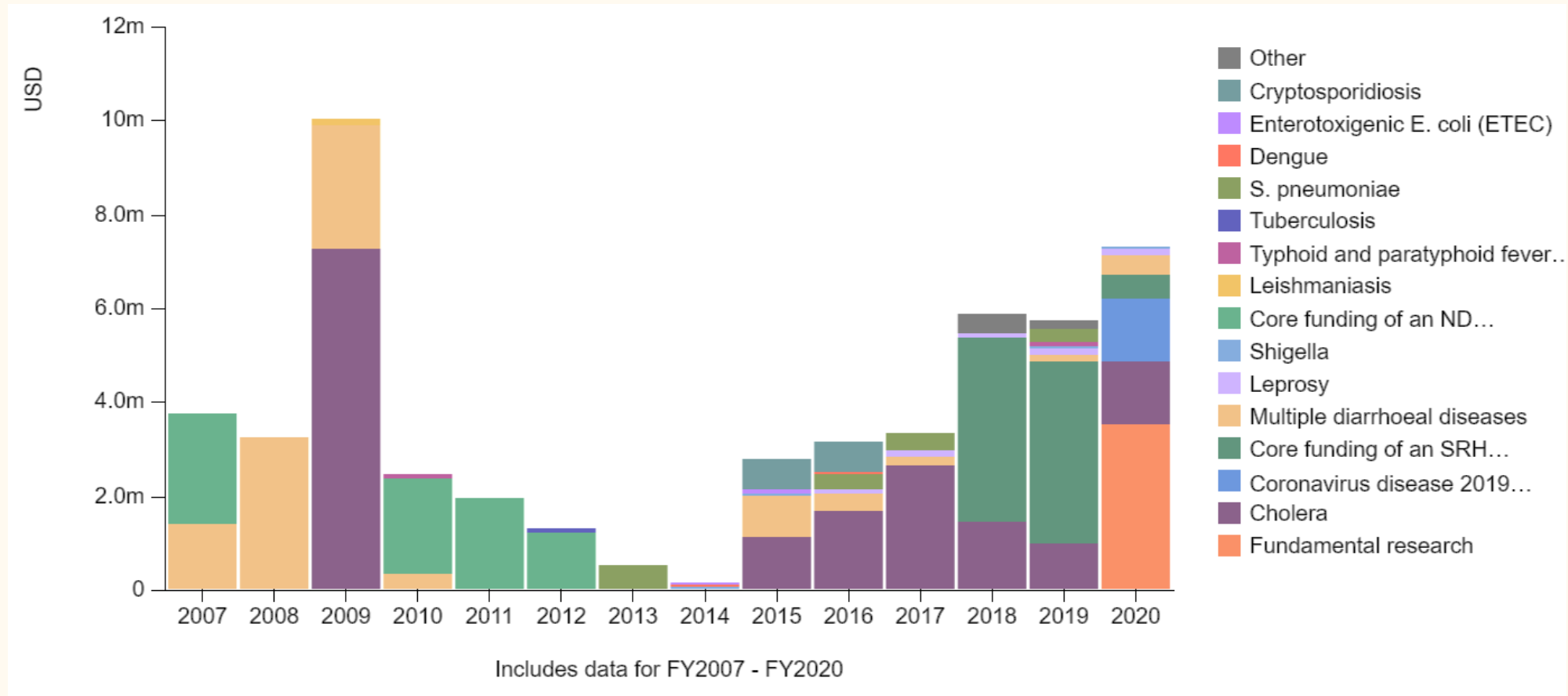
Source: G-Finder

# Total Investment in Different Diseases in Bangladesh (2007-2020)

Diseases	Millions (USD)
Cholera	16
Multiple Diarrhoeal diseases	9.6
Core funding for an SRH organization	8.3
Core funding for an NCD organization	7.5
Fundamental research	3.5
S- Pneumonia	1.5
COVID-19	1.3
Cryptosporidiosis	1.3
Leprosy	0.6
Rotavirus	0.5
Shigella	0.3
Typhoid and paratyphoid fever	0.2
Enterotoxigenic E.coli	0.1
Leishmaniasis	0.1
Tuberculosis	0.1
N. meningitidis	0.1
Dengue	<0.1
Multiple helminth infections	<0.1
<b>Total</b>	<b>51</b>

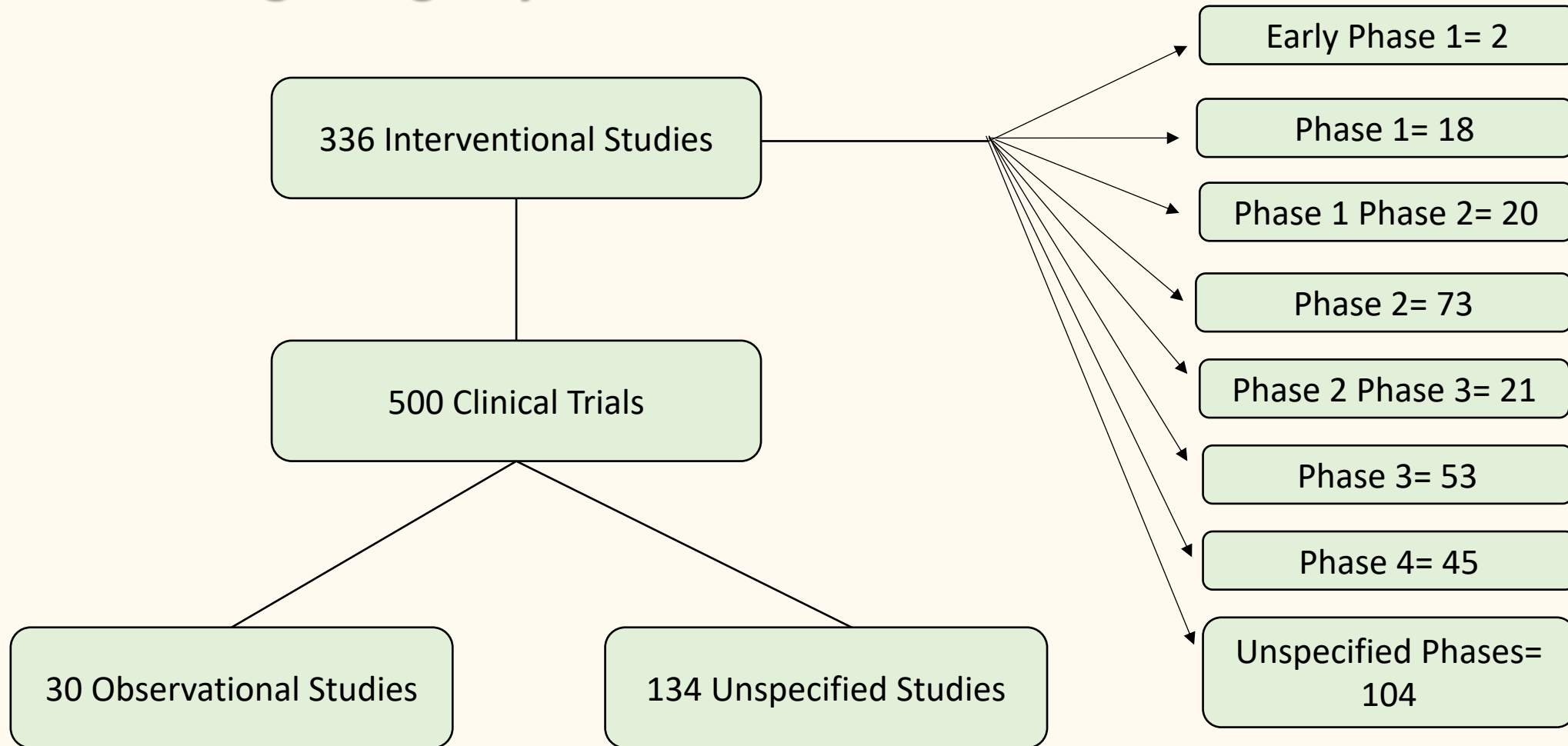
**Source: G-Finder**

# Investments in different diseases over the years in Bangladesh (2007-2020)



Source: G-Finder

# Flow chart of the different studies of clinical trials from ClinicalTrials.gov registry



Source: ClinicalTrials.gov

# National government organization

National Organisation	Organization Type	Name of the Organisation Conducting Clinical Trials	No. of Clinical Trials	Percent
Government	Research Organisation	<a href="#"><u>Zokiganj Upazila Health Complex</u></a>	02	0.4
		<a href="#"><u>BRICM</u></a>	01	0.2
		<a href="#"><u>BMRC</u></a>	01	0.2
		<a href="#"><u>Bandarban Sadar Hospital</u></a>	01	0.2
		<a href="#"><u>Maternal and child health training institute (MCHTI)</u></a>	01	0.2
		<a href="#"><u>Centre for the Rehabilitation of the Paralysed(CRP)</u></a>	01	0.2
		<a href="#"><u>Child Health Research Foundation (CHRF)</u></a>	01	0.2
		<a href="#"><u>Upazila Health and Family Planning Office (UHFPO)</u></a>	01	0.2
	Universities	<a href="#"><u>Bangabandhu Sheikh Mujib Medical University (BSMMU)</u></a>	91	18.2
		<a href="#"><u>Dhaka Medical College Hospital (DMC)</u></a>	09	1.8
		<a href="#"><u>Dhaka University (DU)</u></a>	03	0.6
		<a href="#"><u>Chittagong Medical College Hospital (CMCH)</u></a>	02	0.4
		<a href="#"><u>Bangladesh University of Engineering and Technology (BUET)</u></a>	01	0.2

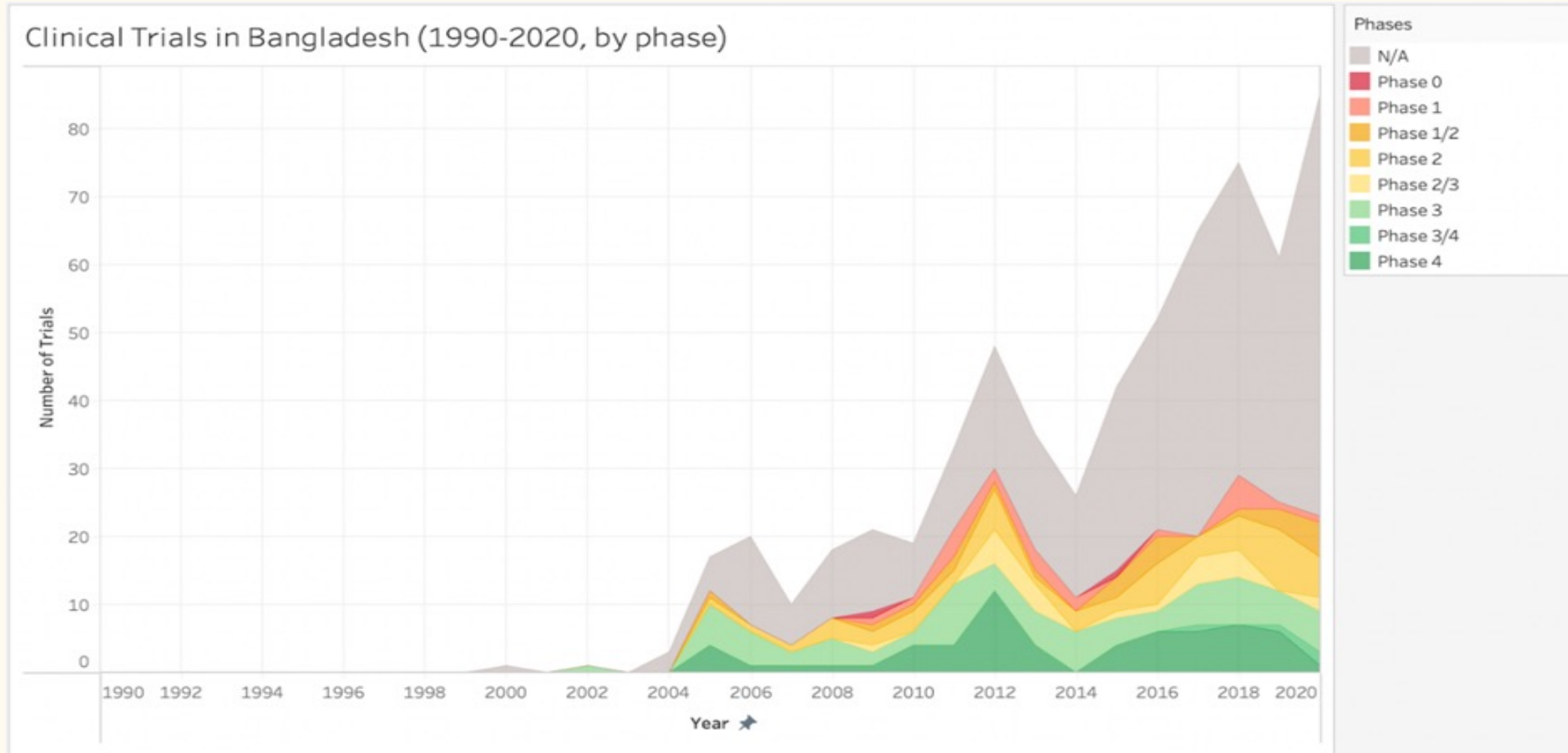
Source: ClinicalTrials.gov

# National non-government organization

National Organisation	Organisation Type	Name of the Organisation Conducting Clinical Trials	No. of Clinical Trials	Percent
Non-government	Research Organization	<a href="#"><u>icddr,b</u></a>	175	35
		<a href="#"><u>BRAC</u></a>	05	1
		<a href="#"><u>Bangladesh Laser and Cell Surgery Institute and Hospital, Dhaka, Bangladesh</u></a>	02	0.4
		<a href="#"><u>Bangladesh Reference Institute for Chemical Measurements (BRICM)</u></a>	01	0.2
		<a href="#"><u>Bangladesh MARIB Bandarban</u></a>	01	0.2
		<a href="#"><u>BIRDEM General Hospital</u></a>	01	0.2
		<a href="#"><u>Combined Military Hospital</u></a>	01	0.2
		<a href="#"><u>UChicago Research Bangladesh</u></a>	01	0.2
		<a href="#"><u>Stanford University</u></a>	01	0.2
		<a href="#"><u>Bangladesh Eye Hospital</u></a>	01	0.2
		Universities	<a href="#"><u>Bangladesh University of Health Sciences (BUHS)</u></a>	01
	<a href="#"><u>Community Based Medical College Bangladesh (CBMCB)</u></a>		01	0.2

**Source: ClinicalTrials.gov**

# Clinical Trials by phase over 1990-2020 in Bangladesh: WHO ICTRP



Source: WHO ICTRP



# Conclusions

- Limited involvement of the relevant stakeholders including the government in Pharmaceutical R&D
- No significant industry-academia collaboration
- Self-funded R&D activities in Pharmaceutical Industry
- Mostly focused on Product development
- Not prepared for the Post-TRIPS era

# Recommendations

- Prepare for the post-TRIPS era: the industry, the government, including the research community
- Develop and Update regulatory guidelines/laws to facilitate R&D in the public, private, and academia
- Investment in R&D by the public and private sectors; instead of short-term revenue generation, the industry should make investment for future sustainability; a certain proportion of the revenue generated may be ear-marked for R&D
- The government should allocate more resources to the Universities and other research organizations for generating necessary evidence
- Investment for improving infrastructure (e.g. Labs etc.) and human resources (e.g., skill-development training)
- Establish collaboration across relevant sectors (e.g. public-private, industry-academia)

Time is running short, we should start planning for it **TODAY!**

## Short questions

- What does research and development/innovation mean in the pharmaceutical industry and why is it important?
- How alternate approaches for conducting R&D can produce better global public health outcomes?
- What is the current scenario of the pharmaceutical industry in Bangladesh (generic industry, profit-centric business model, drug price, drug quality, less focus on NTD)?
- What is the current situation of clinical trials in Bangladesh (Funders, funding source, funding areas)?
- Is Bangladesh's pharmaceutical industry prepared for the post-TRIPS era?
- What are the limitations and scope of pharmaceutical R&D in Bangladesh?
- Who are the key actors and what role they can play to facilitate pharmaceutical R&D in Bangladesh?

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Thank you