

Risk Analysis for Gene Drives

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Africa Biosafety Network of Expertise



Presentation Outline



Problem of Malaria in Africa



Gene Drives- AMRH, ABNE, USNIH



Risk Analysis- RA, RM, RC, WHO Guideline



WHO Guidelines for Testing GMMs



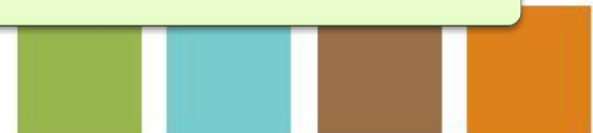
Reference International Treaties and Agreements-CBD, CPB, EFSA



Regional Platform ECOWAS, COMESA



Projection on Scenerio in Africa

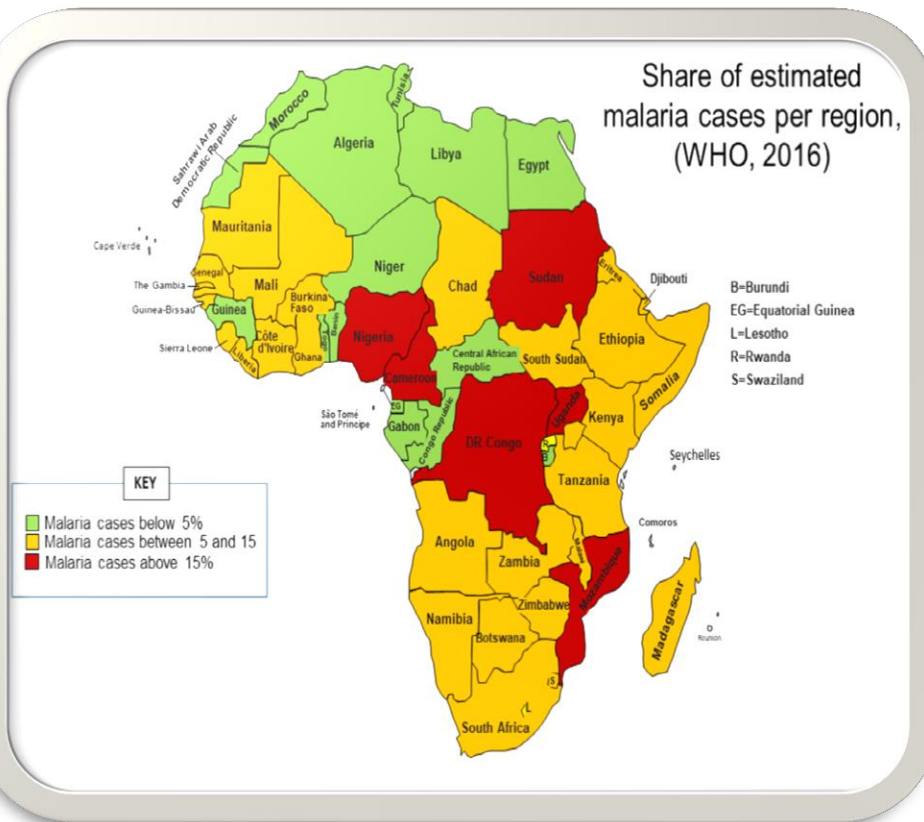


The Malaria Burden in Africa

WHO Estimates, 216 million new malaria cases and 445,000 deaths worldwide in 2016

Of which Africa accounting for 90% of the cases and 91% of the deaths([WHO, 2017](#)).

Children under five years of age are the most affected.



**Malaria burden in African countries
(Data Source: WHO 2016 World
Malaria Report)**

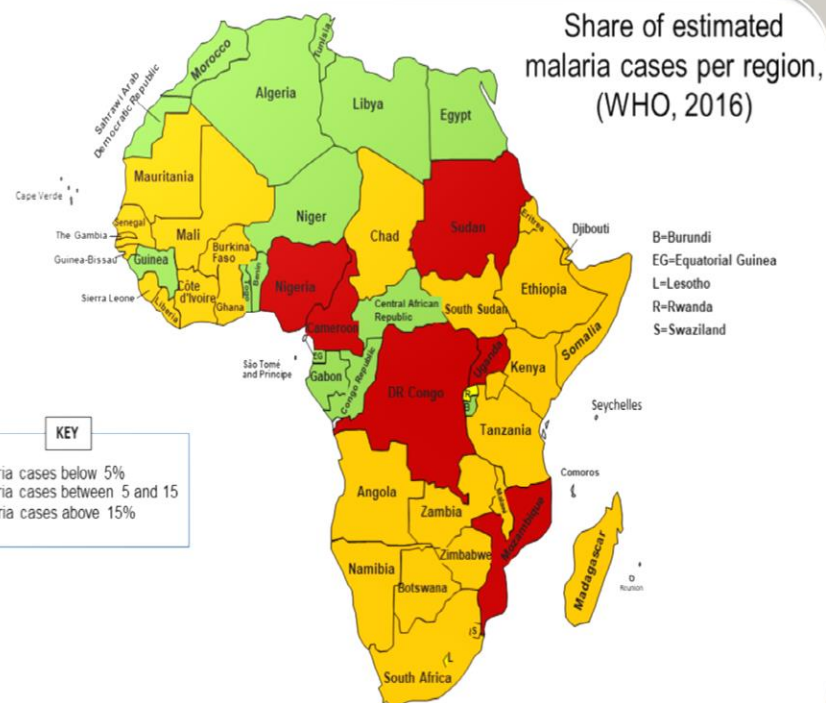


The Malaria Burden in Africa

In 2016, the global burden of malaria concentrated in 14 African countries, all accounted for 80% of global malaria cases and deaths.

Today, the Democratic Republic of Congo and Nigeria alone constitute 40% of the global malaria deaths([WHO, 2016](#))


WHO (data) DRC, Nigeria , Mozambique, Cameroon, Uganda, Tanzania, Kenya and Somalia have the highest prevalence rates, accounting for about half of the global malaria burden




Malaria burden in African countries
(Data Source: WHO 2016 World Malaria Report)



The Malaria Burden in Africa

 The Eastern Mediterranean Regional office of the World Health Organization, also known as EMRO

 In 2015, about 291 million people in 8 out of the 21 countries in the WHO EMRO Region were at some risk of malaria, with 111 million at high risk

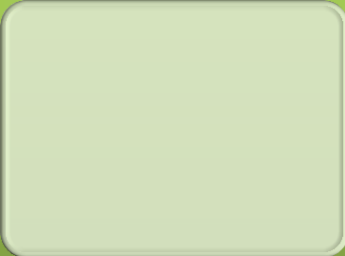
 Three African countries: Djibouti, Somalia and Sudan are part of EMRO and have areas of high malaria transmission.



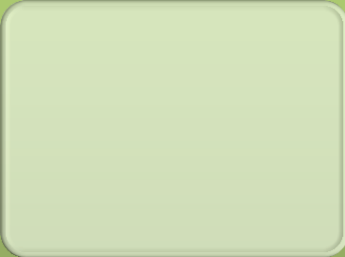
http://www.who.int/hac/network/who/ro_emro/en/



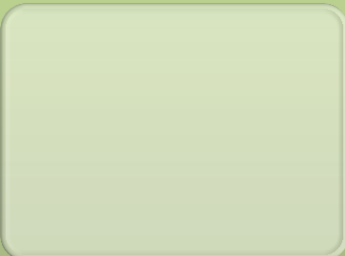
The Malaria Burden in Africa



Malaria in Africa is widely recognized as both a cause and consequence of poverty, The malaria-related losses were estimated to cost up to 1.3 % of Africa's GDP, and about US\$12 billion per year in direct costs, as of 2002([Gallup & Sachs, 2001](#); [Sachs & Malaney, 2002](#)).



Countries severely affected by malaria have up to five times lower Gross Domestic Product (GDP) than those without malaria([Jobin, 2014](#)).



WHO/RBM Action and Investment plan to defeat malaria, estimates if malaria were eliminated, the return on investment for Africa would be as high as 60:1, effectively unlocking extensive human and economic development on the continent ([WHO/RBM, 2015](#)).

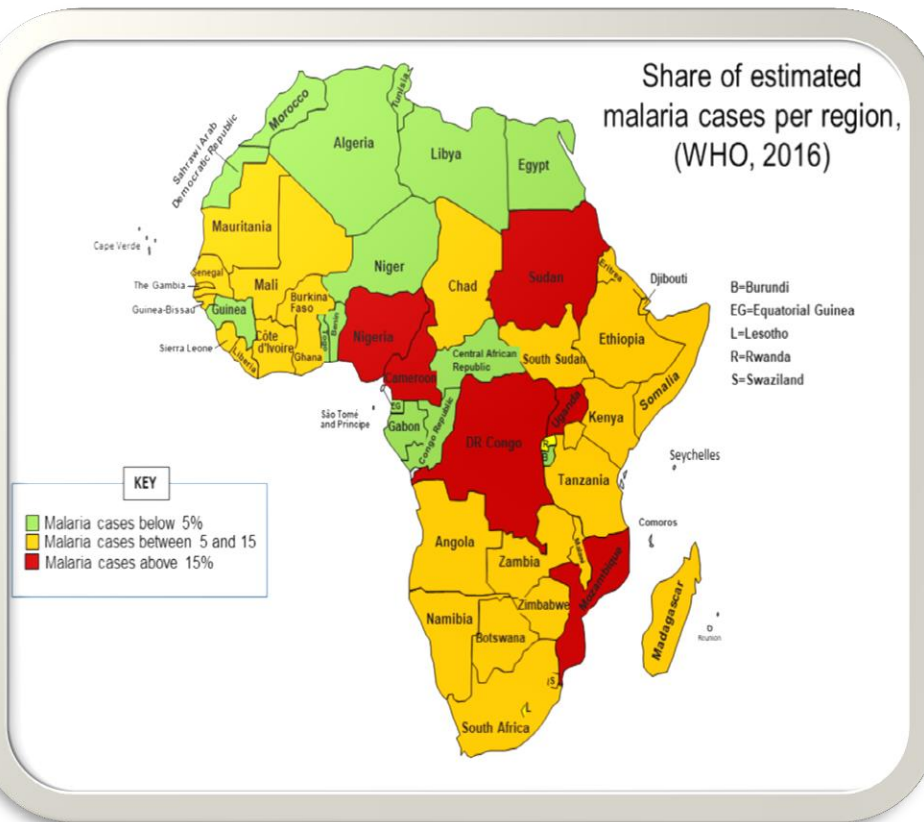


The Malaria Burden in Africa

Suppressing or modifying vector populations to eliminate malaria, offer enormous health benefits to Africa, and public health delivery systems will be the major primary beneficiaries of the technologies

The end goal for malaria-African Union, 2030 is target date for elimination([African Union, 2016](#))

Decision makers need to objectively review new technologies with potentially high impact, such as gene drive, and determine a suitable pathway for future development and deployment.



Malaria burden in African countries
(Data Source: WHO 2016 World Malaria Report)



GENE DRIVES

FOR MALARIA CONTROL AND ELIMINATION IN AFRICA



Gene Drive Technology options- Population Alteration

In population alteration, the gene constructs introduced are those that reduce organisms' **ability to transmit specific pathogens**. specific genetic segments that code for parasite binding proteins in the mosquito are altered so that malaria parasites can no longer bind to these receptors

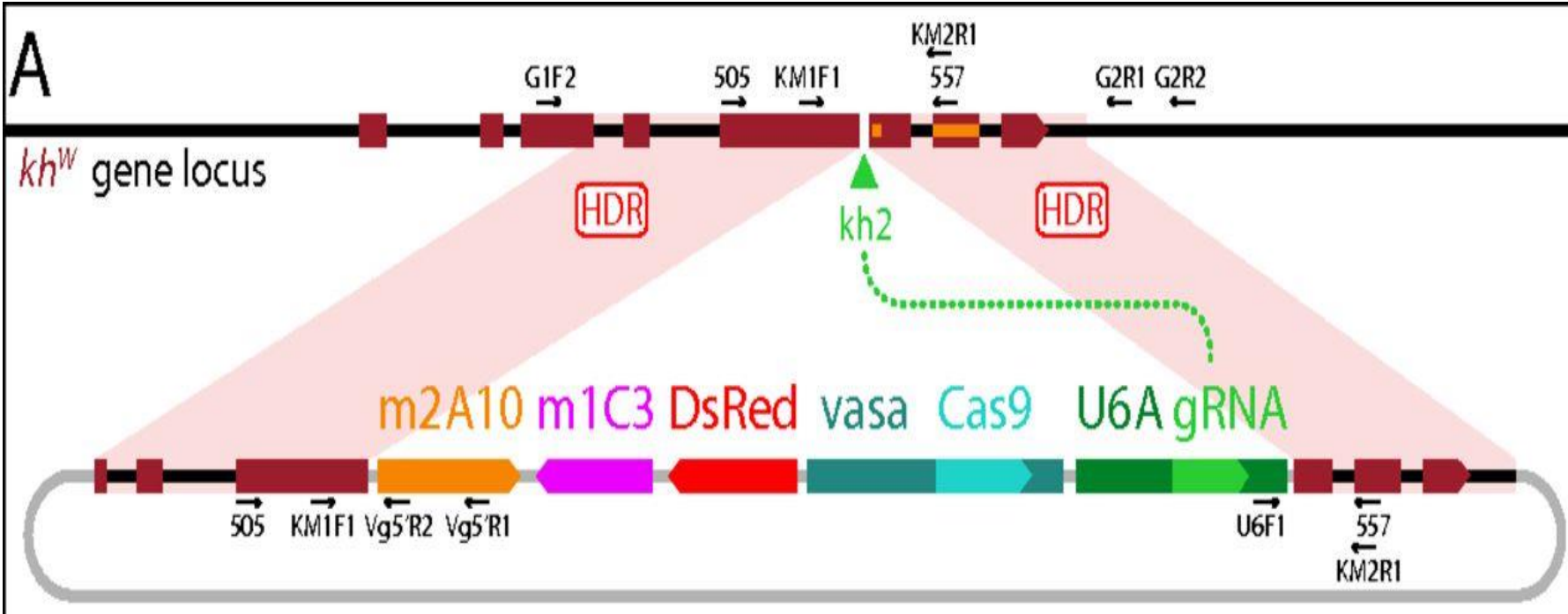
Scientists in California have created a highly efficient CRISPR/Cas-9 mediated gene drive, achieved 98% modification of a laboratory population of *Anopheles stephensi*- could no longer transmit the malaria parasite, *Plasmodium falciparum*([Gantz et al., 2015](#)).

Approach equally leads to use in large-scale malaria elimination efforts, with potentially high impact over short durations([Eckhoff et al., 2016](#)).

Unlike population suppression systems, the artificial gene constructs are intended to spread throughout the vector population and persist.



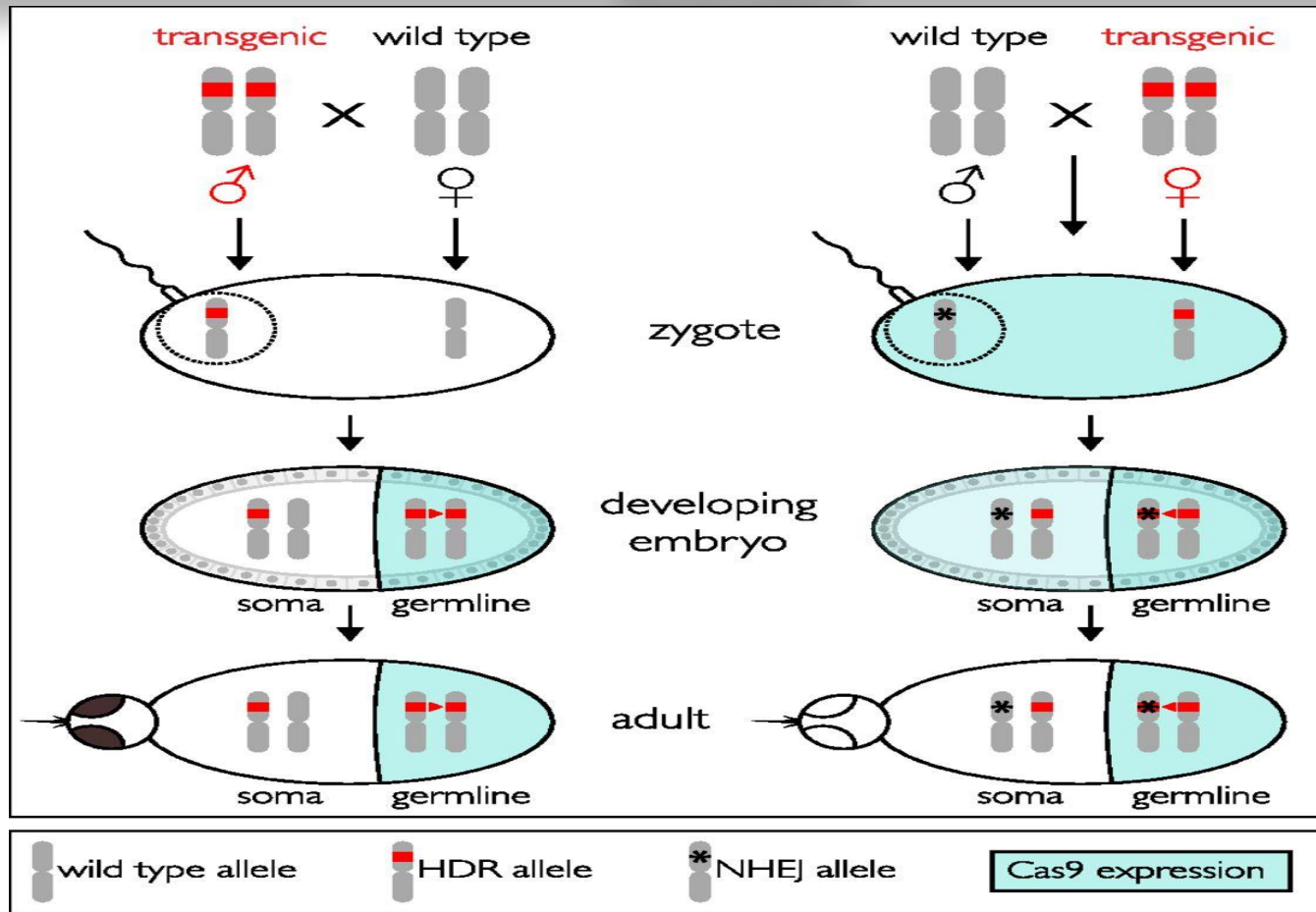
Site-specific integration into the *An. stephensi* kynurenine hydroxylase white locus



Gantz et al (2015)-<http://www.pnas.org/content/pnas/112/49/E6736.full.pdf>



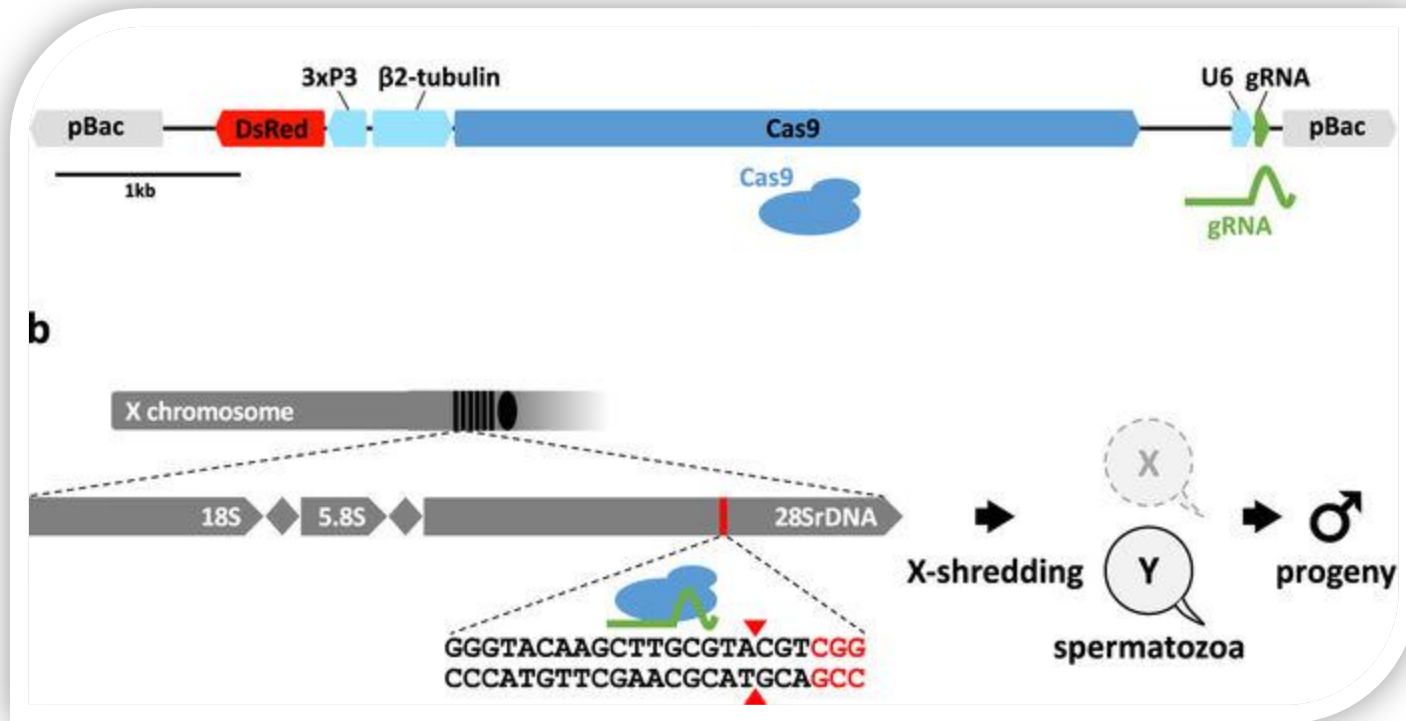
Model of AsMCRkh2 transgene activity in adult males & females



Gantz et al (2015)-<http://www.pnas.org/content/pnas/112/49/E6736.full.pdf>

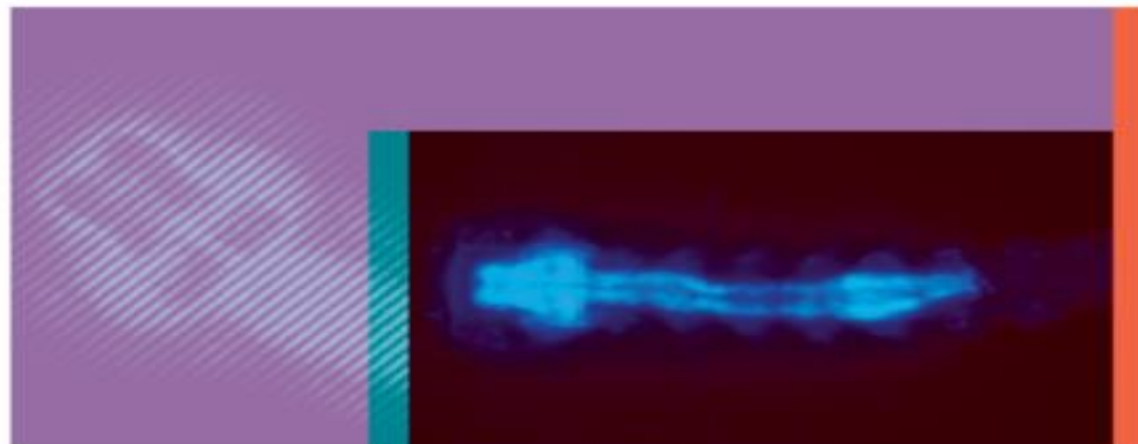


Generation of a CRISPR-Cas9 sex-ratio distortion system



Galizi, et al (2016) [Scientific Reports](#) 6, 31139





Guidance framework for testing of genetically modified mosquitoes

FOUNDATION
National Institute of Health



World Health
Organization


TDR



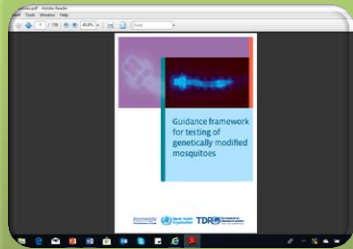
For research on
diseases of poverty
2002-2007 - WHO & WHO



Phased Testing Approaches of Gene drives



Stepwise approach to guide the preparation and conducting research from laboratory and continues through, if applicable, environmental monitoring



Recommended by WHO Guidelines for testing genetically modified mosquitoes ([World Health Organization, 2014](#)), and

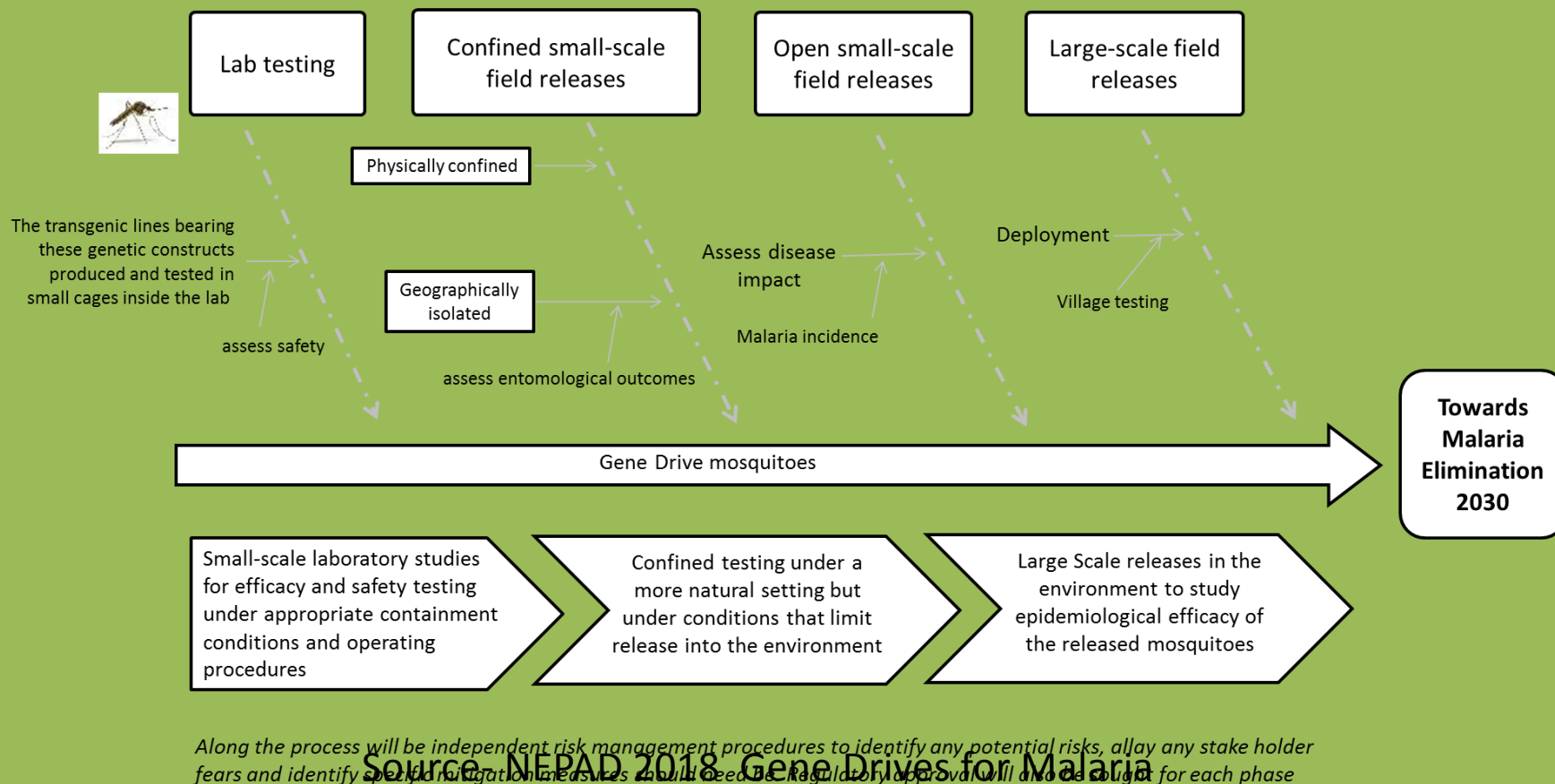


US National Academies for Sciences, Engineering and Mathematics report ([National Academies of Sciences & Medicine, 2016](#))



Pathway for Malaria Vector Control via Gene Drive

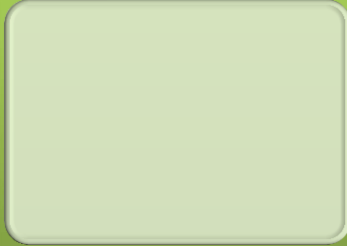
Pathway for malaria vector control via Gene Drive



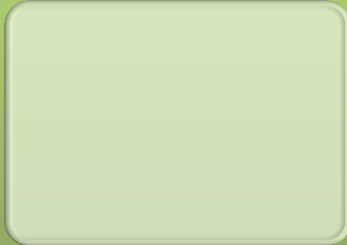
Source: NEPAD 2018 Gene Drives for Malaria
control and elimination in Africa



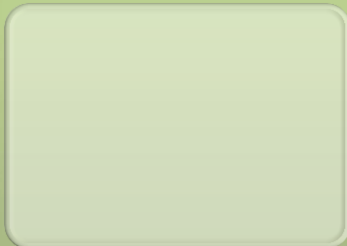
Three stages envisioned for testing gene drives



Laboratory development and assessments to determine safety and efficacy in small-scale laboratory cages;



Small-scale studies, beginning with testing under physically contained field cages and followed by additional small-scale studies- gene drive mosquitoes are released, first in ecologically-confined areas such as islands



Large-scale controlled field releases to assess the impact of the intervention in clinical parameters of the disease,



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Risk Analysis = RA + RM + RC

The Components of risk Analysis have described under several venues Australian Office of Gene Technology Regulator (OGTR), The Convention on Biological Diversity (CBD, 2012), Cartagena Protocol on Biosafety (CPB), the EFSA (2006, 2013), United Kingdom's Department of Environment, Food and Rural Affairs (DEFRA), the USA Environmental Protection Agency (EPA, 1998). Office of the Gene Technology Regulator. Risk Analysis Framework 2013. <http://www.ogtr.gov.au/internet/ogtr/publishing.nsf/Content/raffinal5-toc>.

Stepwise Approach to EIA (EFSA)

Problem Formulation

Hazard Characterization

Exposure Characterization

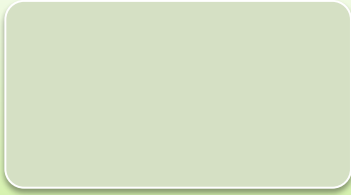
Risk Characterization

Risk Management Strategies

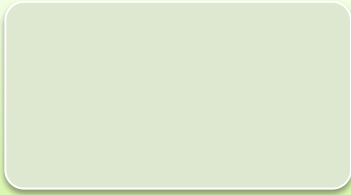
Risk Conclusion



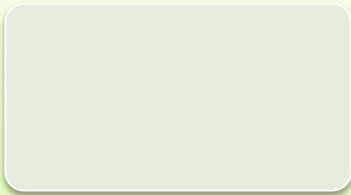
Four Categories of End Point- (Roberts et al. 2017)



Human Health



Animal Health



Biodiversity



Other considerations



Problem Formulation for Gene Drives in Mosquitoes



Human Health- Because • Because *An. gambiae* is an important disease vector, consideration should be given to potential alterations in disease transmission



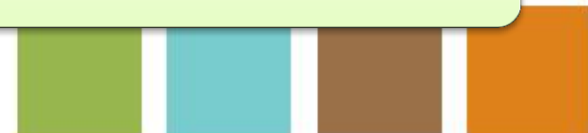
Proteins introduced into *An gambiae*, including components of the gene drive and markers should be considered with respect to allergenicity and toxicity



Biodiversity- Gene flow to other species within the *An. gambiae* s.l. complex through hybridization is likely, and does not create additional pathways to harm



Animal Health- Potential harm could occur from pathogen altered dynamics to transmission to livestock



Cross-Cutting Important Aspects

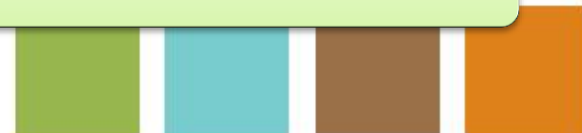
Choice of site

Appropriate Comparators

Hazard Characterization

GMM Characterization

Utility of Mathematical Modeling in RA



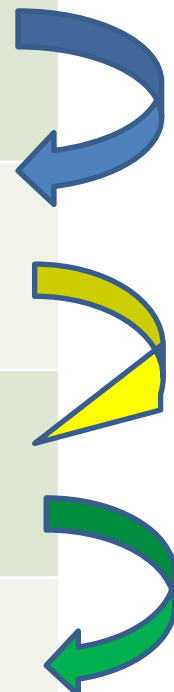
IMPORTANT CROSS CUTTING ASPECTS RISK ANALYSIS

	Site Selection	Appropriate Comparators	Hazard Characterization	GMM Characterization	Use of Mathematical Model
Phase 1- Laboratory					
Phase 2- Confinement					
Phase 3- Staged-Open					
Phase 4- Open Release					



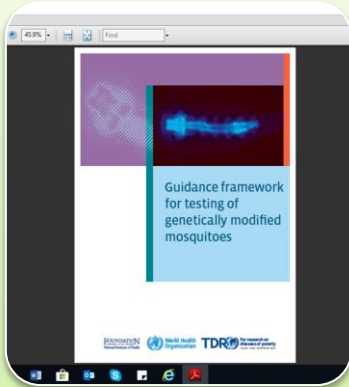
Interphase- phases and RA and RM

Phased Approach	Risk Assessment	Risk Management	RA for Deployment
Phase 1- Laboratory			
Phase 2- Confinement			
Phase 3- Staged-Open			RA and Benefits
Phase 4- Post Release			





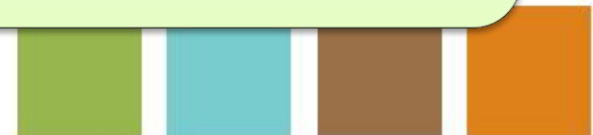
Biosafety in Development of GMMs



Focuses on reducing to acceptable levels any potential risks to human health and environment that might arise from the technology keeping in mind the adverse effects of vector borne disease (WHO, 2015)



Risk Analysis contributes to achievement of acceptable levels of safety .



The Biosafety Risk Analysis should determine



The potential Hazard



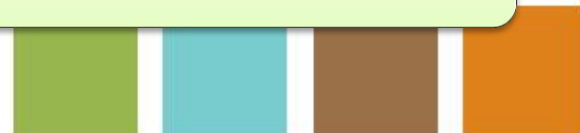
Impact of GMM on wild populations of target and non-target organisms



The magnitude or **likelihood of impact of any harm on the receiving environment**



The levels and consequences of uncertainty associated with these effects



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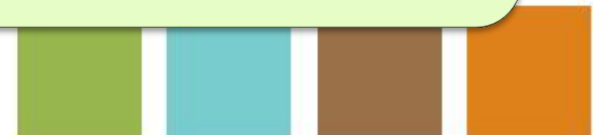
Studies in Phase 1 (WHO, (2014))



Studies in Phase 1 can provide data on risks that can be addressed by observing changes in **behaviour** and **ecologically** relevant characteristics of mosquito populations in small scale laboratory experiments.



With respect to biosafety testing, this Phase 1 primarily focuses on the relevant **characteristics of GMOs** themselves, and on laboratory experiments that can assess pathways that might lead to harm




PARAMETERS RELEVANT IN LABORATORY STUDIES (PHASES 1 AND 2) AS PART OF THE RA FOR GMMS (WHO, 2014)

Parameters	Example hazards	Assessment methods	Assessment endpoints
Female fecundity	Increased vector abundance	Cohort experiment; Life Table analysis	Is it limited by population density and /or Individual physiology? Is there a significance difference?
Oviposition rate			
Egg development rate	Increased growth potential; Reduced predation	Cohort experiment; Life Table analysis	Is there a significance difference?
Larval survival			
Pupal survival			
Egg survival	Increased Vector Abundance	Cohort Experiments Life table analysis Population level modeling	Is it density dependent What is the type of density dependent It it under or over compensatory Does it differ significantly
Larval survival			
Pupal Survival			
Adult emergence	Increased vector abundance	Cohort experiment; life Table analysis	Does the timing of Adult emergence? differ significantly?
Adult Size	Increased vector fitness	Increased vector fitness	Is adult size significantly different?
Adult Survival	Increased vector activity; More effective mating potential; Increased biting efficiency for females	Cohort experiment; Life table analysis; Population level modelling	Is it density- dependent? Is it significantly enhanced/ diminished by the modification?



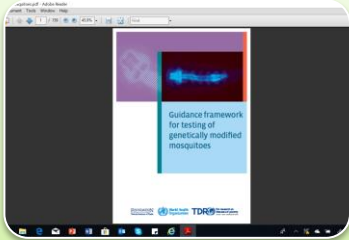
Interphase- phases and RA and RM

Phased Approach	Risk Assessment	Risk Management	RA for Deployment
Phase 1- Laboratory			
Phase 2- Confinement			
Phase 3- Staged-Open			RA and Benefits
Phase 4- Post Release			

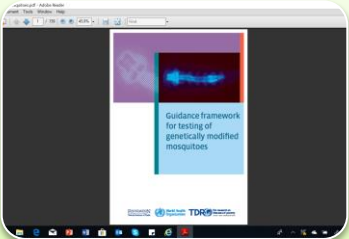




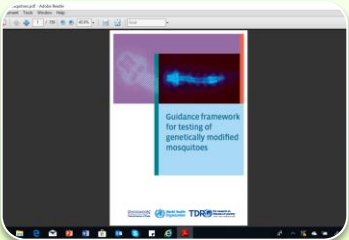
Studies in Phase 2



In Phase 2, RA data are obtained in trials conducted under **physically or ecologically** confined conditions.



This phase gathers RA data to reduce uncertainty regarding effects identified in Phase 1



Allows assessment of **health and ecological effects** under more realistic level of exposure



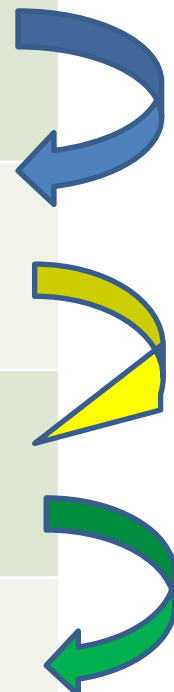
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Interphase- phases and RA and RM

Phased Approach	Risk Assessment	Risk Management	RA for Deployment
Phase 1- Laboratory			
Phase 2- Confinement			
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Phase 4- Post Release			





Studies in Phase 3- Staged- Open Release



Staged **open field trials** under Phase 3 can gather data under even more realistic conditions



Using less confined measures than in the previous phases



Parameters relevant in open--field studies for RA of GMMs (WHO 2014)

Parameters	Example hazards	Assessment methods	Assessment endpoints
Population size	Increased vector abundance; ecosystem disruption	Field population monitoring; Population level modelling	What is the Impact of the release? Relationship between release rate, timing, method and outcome?
Density dependence	Increased vector abundance; ecosystem disruption	Comparator studies at range of densities in laboratory; field Population monitoring; Population level modelling	Does the transgenic strain disease significantly in the role of this ecological process?
Spatial distribution	Increased vector abundance; Ecosystem disruption	Field population monitoring; population-- - level modelling; life-- -table experiments	Limits the spread of transgenic organism? Rate of spread of transgenic insect, under a range of conditions
Vector Capacity	Increased transmission per bite; increased biting rate	Comparator studies; post--- release monitoring	Is the capacity to harbour and transmit pathogens increased?



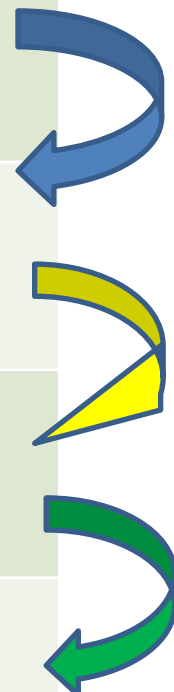
Parameters relevant in open-field studies for RA of GMMs (WHO 2014)

Parameters	Example hazards	Assessment methods	Assessment endpoints
Behavioural Resistance	Change in behaviour that avoids, or reduces efficacy of conventional management	Change in behaviour that avoids, or reduces efficacy of conventional management	Under field conditions, what limits the appearance and spread of resistance due to mosquito behaviours? Is there potential for assortative mating in the field?
Biochemical resistance	Change in physiology that avoids, or reduces efficacy of, conventional Management	Comparator studies; Cohort studies on Physiological changes In different life stages; post--release surveillance; population--level modelling	Is the likelihood or rate of resistance Development enhanced In transgenic mosquito strains?
Mass rearing quality indices	Quality of released Insects is different from planned, affecting negative outcomes	Cohort experiments; Comparator studies Before release; ooperational design And audit; pre---release monitoring; post---release monitoring	Do specific aspects of released Mosquito quality affect mosquito densities, pathogen transmission and transgene stability?



Interphase- phases and RA and RM

Phased Approach	Risk Assessment	Risk Management	RA for Deployment
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Phase 4- Post Release			

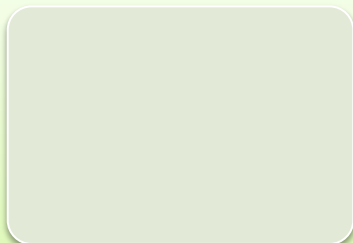




Studies in Phase 4- Open Release



RA should include issues such as the potential for the movement of GMMs beyond the **boundaries** for release areas- National and Regional Approval




Deployment of GMMs as Public Health Tool



The evolution of resistance, and will determine the necessary scope of **post-implementation Monitoring** and management



APET REPORT ON GENE DRIVES- June 2018



1.REGULATORY AND SAFETY REQUIREMENTS- in this aspect there will be some important considerations to adopt from the current regulatory framework that will include- there will be need to reference regulation the **GMMs** to relate the regulation to **international conventions/treaties (CBD and CPB)**; there is need to incorporate **regional regulatory approaches-** this is important because the mosquitoes will move across borders; there is need to **expand the role of health regulators** beyond their current mandate; there is need for regulatory information sharing process and capacity strengthening; there is need for robust **training especially on risk assessment.**



Interphase- phases and RA and RM

Phased Approach	Risk Assessment	Risk Management	RA for Deployment
Phase 1- Laboratory			
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BCH Central Portal

CH) is a mechanism set up by the [Cartagena Protocol on Biosafety](#) to facilitate the g Modified Organisms (LMOs) and assist the Parties to better comply with their global access to a variety of scientific, technical, environmental, legal and capacity in the six official languages of the UN.

and manage records in the BCH by signing in through the [Management Centre](#) 1.

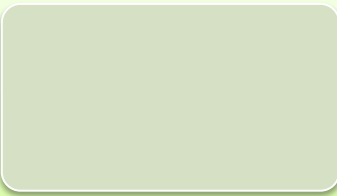
Latest Additions [\[More additions...\]](#)

ation de la Stratégie
lu Sénégal...

2018-07-12 Eswatini - National Database or Website
2018-07-12 Germany - Law, Regulation or Guideline



ACKNOWLEDGEMENTS



NEPAD Agency)- Aggrey Ambali, Hudu Mogtari, Justina Dugbazah, Barbara Glover, Moussa Savadogo, Olalekan Akinbo; Jeremy T. Ouédraogo, Sunday Igu Rocks, Wolde Sinebo, Modupe Bamidele Adeyemo , Silas Obukosia



National Biosafety Agency- Burkina Faso, Mali and Uganda, WAHO- West Africa Health Organization



National Biosafety Agency- Burkina Faso, Mali and Uganda



Danforth Plant Centre and US FNIH- Hector Quemada, Tonui Willy