

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Cefnogi pobl sydd â chyflyrau cronig](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [supporting people with chronic conditions](#).

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Senedd Health and Social Care Committee: Consultation - Supporting people with chronic conditions - Written evidence from Moderna

About Moderna

Moderna is a biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines. In the company's 12 years' existence, Moderna has developed the industry's preeminent mRNA platform, building on continuous advances in basic and applied mRNA science, delivery, technology, and manufacturing. Our platform could pave the way for the clinical development of therapeutics and vaccines for rare and infectious diseases, including chronic conditions, as well as immuno-oncology.

NHS and social care services

- **The readiness of local NHS and social care services to treat people with chronic conditions within the community**

Local NHS services went above and beyond during the pandemic however there are several areas where they can take further precautions to protect populations against chronic conditions. In the case of Long COVID, the creation of a dedicated Long COVID service in North Wales is a positive step forward, however the collection of data is key to ensuring health services' readiness and facilitating ongoing treatment for chronic COVID conditions. As seen with Long COVID services in Wales, England, and Scotland, data has been essential for developing pathways for treatment and similar principles can be applied to other chronic conditions.

NHS Wales should also consider how to prepare for the next generation of treatments, with local NHS services getting ready for their rollout of community treatment. For example, personalised cancer treatments, as well as combination and RSV vaccines, could protect against winter flu, long COVID, and limit the impact of RSV upon other chronic conditions.

Moderna is committed to investing in the UK long-term through our successful partnership with the UK Government. This partnership will see us deliver a state-of-the-art mRNA manufacturing and research facility in Harwell, creating more than 150 jobs and onshoring vaccine production to ensure patients in the UK can access our future products. However, for this to be achieved, and for local NHS services in Wales to feel the benefits of the next generation of treatments such as RSV vaccines, the UK's regulatory structure should be reformed to ensure it can process personalised medicines coming through the pipeline such as personalised cancer treatments. To achieve this, it is crucial that the Government delivers on its planned reforms to clinical trials, and works at pace to implement reforms to the MHRA approvals process as set out in the Spring Budget. The Welsh Government and NHS Wales have a role to play here and they should consider how to further this aim in their representations to the UK Government, the MHRA, and the JCVI.

- **Access to essential services and ongoing treatment, and any barriers faced by certain groups, including women, people from ethnic minority backgrounds and disabled people**

Key to providing on-going treatment is the development of new and innovative medicines to counter chronic conditions. An essential part of this is developing an effective clinical trials regime that reflects the diversity in the Welsh population. Clinical trials are essential for innovation - without a smoothly operating, expedient clinical trials system, it will be difficult to get new treatments to market where they are needed most with appropriate safeguards in place. It is critically important that the UK's clinical trials systems take account of the pressures placed upon it and adapt accordingly, as well as having a greater recognition of diversity and health inequalities to ensure the products coming to market reflect the population they are intended to serve.

Moderna's commitment to diversity and access to clinical trials is clear. Estimates indicate the average clinical trial has an average of 6% patients from ethnic minorities - Moderna's current average is around 38%, but it is as high as 62% in some trials. We are continually striving to increase diversity and participation among minority groups.

We paused our clinical trials during the development of the COVID-19 vaccine to ensure there was enough representation from ethnic minorities in the patient groups. Whilst developing the COVID-19 vaccine was a clear priority and we needed to move fast, we were not comfortable bringing a product to market that hadn't been appropriately tested across a variety of patient groups. Getting this right was, and is, essential.

Ultimately, the most effective way to tackle barriers to healthcare across minority groups is to build trust. This can be achieved in several ways, but most notably by increasing the participation rate of patients from minority groups in clinical trials. If we can demonstrate that a medical product has been extensively tested on a wide variety of patient groups, we build trust amongst these groups as the data is truly representative.

Vaccines are an essential service to patients and they play a central role in preventative healthcare, yet we are seeing a declining trend in vaccine uptake, particularly among minority groups. In order to increase vaccination uptake amongst these groups, we should also look at reforming the Yellow Card reporting system to ensure that data on vaccines is as transparent and accessible to the general public as possible. At the moment, we have a system that can be easily misinterpreted, which results in the spread of misinformation and consequently fear or hesitancy about vaccines. The Government should seek to reform the reporting system and the publication of data to ensure it is a clear, concise representation of the facts. This will help to build trust amongst the public, who have been exposed to significant levels of misinformation particularly around COVID-19.

Multiple conditions

- **The ability of NHS and social care providers to respond to individuals with multimorbidity rather than focusing on single conditions in isolation**

An important tool for the NHS to allow them to respond to individuals with multimorbidity issues will be the creation of new treatments which can tackle several conditions. An important tool for the NHS to allow them to respond to individuals with multimorbidity issues will be the creation of new

treatments which can tackle several conditions such as triple combination vaccines, multivalent vaccines and vaccines for unmet needs.

Developing these new medicines - and getting them licensed and distributed - is a key stage in this, as is the introduction of a universal RSV immunisation programme. This aligns with the Welsh Government's focus on shifting to a model of preventative healthcare and will be crucial for NHS Wales in tackling the root causes of ill-health and minimising the number of patients who experience illnesses, but also in delivering cost-savings which can be reinvested into the health system. A study in 2015 estimated that among adults, approximately 487,000 GP episodes and 18,000 hospitalisations were attributable to RSV per average season.

Impact of additional factors

- **The impact of the pandemic on quality of care across chronic condition**

The pandemic affected many aspects of care across the United Kingdom, including for those suffering from chronic conditions. This was in part due to the UK's degree of pandemic preparedness. In the future, to avoid any drop in the quality of care, the Welsh Government should ensure its pandemic preparedness strategy is up to date, and governance structures are in place to deal with any future pandemics and which consider the impact of a pandemic upon care for chronic conditions. While the Emergency Planning & Response Division within HSSG is a useful resource, the Welsh Government should consider establishing a Standing Committee on Pandemic Preparedness, as the Scottish Government have done, to specifically deal with future pandemics by connecting the industrial science base with Government and local service providers, developing clinical and life sciences resources, creating a dedicated pandemic preparedness centre, and ensuring Wales remains equipped for any future pandemic.

Moderna is also taking action to promote pandemic preparedness, for example through our 10 year partnership with the UK Government - the Moderna Innovation and Technology Centre (MITC) - to build a new facility at our campus in Harwell, Oxfordshire for vaccine and therapeutics research, development, and production. This partnership will give NHS patients across the four nations of the UK access to a domestically produced supply of COVID-19 vaccines, as well as future vaccines developed for other respiratory infections.

While our partnership is a positive step, Wales has a unique opportunity to build on lessons learnt from the pandemic, specifically from the pace at which it was able to invest in, research, and develop the western world's first licensed COVID-19 vaccine. Clinical trials were a central part of this success - demonstrating the immense potential of Wales and the UK's R&D and healthcare sector when provided with the right tools and regulatory environment.

However, the number of clinical trials undertaken in the UK is declining rapidly. A [report](#) from The Association of the British Pharmaceutical Industry (ABPI) in October 2022 found the number of industry clinical trials in the UK fell by 41% yearly between 2017 and 2021, with cancer trials falling at the same rate. These figures pushed the UK down in the global rankings for late-stage clinical research, dropping from second in the world to sixth in Phase II trials, and from fourth to tenth in

Phase III trials. Without these trials, the UK cannot test a treatment's efficacy, safety, or how it compares to existing treatments.

It is crucial that the Senedd's Health and Social Care Committee builds upon lessons learnt from COVID-19 and urgently considers the impact increasing delays to clinical trials and declining recruitment to clinical trials will have on the UK's ability to support a preventative model of health and social care, as outlined above. If Wales is to ensure it's ready for the next pandemic, and for the UK to fulfil its ambitions to become a science superpower, we need reform of the clinical trials system. The ABPI estimates that growing the UK's clinical trial capability could lead to a 40% decrease in the total attributable burden of disease. This is crucial if we are to relieve pressure on the NHS, improve staff productivity, and free up funding to reinvest into unlocking other healthcare innovations, supporting a wider shift to a preventative model of healthcare.

- The extent to which services will have the capacity to meet future demand with an ageing population

A useful resource for health care services going forwards will be innovative medicines. By taking preventative action against illnesses such as winter flu, COVID-19, and RSV, through innovative medicines, the capacity of local services will be greatly enhanced, freeing up NHS resources and staff to focus on other areas. The development of such medicines will also ease pressure on social care services, against releasing valuable capacity to help patients in need of greater support.

However, as stressed above, issues with the regulatory regime around clinical trials could threaten to delay the introduction of these medicines and others. The Welsh Government should continue to develop its pandemic preparedness strategy, as well as considering RSV immunisation for elderly patients to ensure they do not fall ill in the first place, or have access to treatment to protect them from the worse effects of respiratory infections, COVID-19, and seasonal flu.

As reported in the press this week, the creation of a new committee to examine gaps in Welsh pandemic preparations and supplement the work of the UK COVID Inquiry could be a useful development to help Wales prepare for any future pandemics ([link](#)), in particular examining lessons that could be learnt around care for older people to ensure capacity is there when needed in future. However, the UK COVID Inquiry should also be closely monitored and any resulting lessons taken into account.