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**SCHOOL OF PUBLIC HEALTH**

# Valuing Vaccination

**David E. Bloom**

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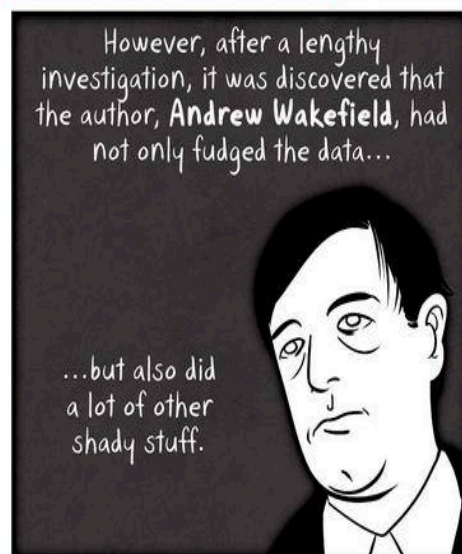
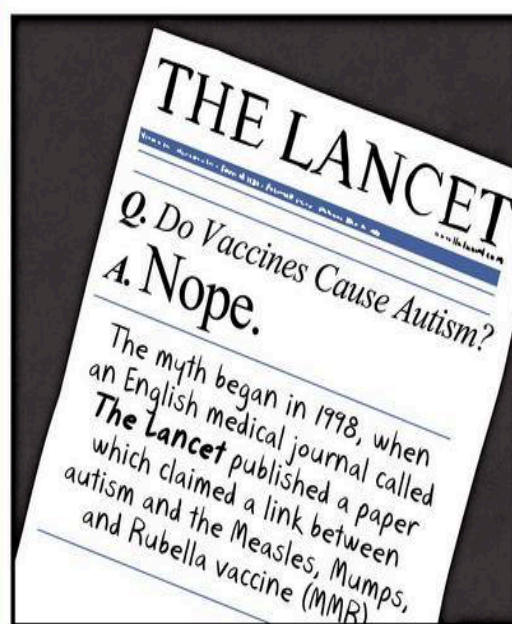
**January 19, 2015**

**Fondation Mérieux**

**Veyrier-du-lac, France**

**Vaccination ecosystem health check: achieving impact today  
and sustainability for tomorrow**





## Early report

## Ileal-lymphoid-nodular hyperplasia, non-specific colitis, and pervasive developmental disorder in children

A J Wakefield, S H Murch, A Anthony, J Linnell, D M Casson, M Malik, M Berelowitz, A P Dhillon, M A Thomson, P Harvey, A Valentine, S E Davies, J A Walker-Smith

## Summary

**Background** We investigated a consecutive series of children with chronic enterocolitis and regressive developmental disorder.

**Methods** 12 children (mean age 6 years [range 3-10], 11 boys) were referred to a paediatric gastroenterology unit with a history of normal development followed by loss of acquired skills, including language, together with diarrhoea and abdominal pain. Children underwent gastroenterological, neurological, and developmental assessment and review of developmental records. Ileocolonoscopy and biopsy sampling, magnetic-resonance imaging (MRI), electroencephalography (EEG), and lumbar puncture were done under sedation. Barium follow-through radiography was done where possible. Biochemical, haematological, and immunological profiles were examined.

**Findings** Onset of behavioural symptoms was associated by the parents, with measles, mumps, and rubella vaccination in eight of the 12 children, with measles infection in one child, and otitis media in another. All 12 children had intestinal abnormalities ranging from lymphoid nodular hyperplasia to patchy ulceration. Histology showed patchy chronic inflammation in 11 children and reactive ileal lymphoid hyperplasia in seven, but no granulomas. Behavioural disorders included autism (nine), disintegrative psychosis (one), and possible postviral or vaccinal encephalitis (two). There were no focal neurological abnormalities and MRI and EEG tests were normal. Abnormal laboratory results were significantly raised urinary methylmalonic acid compared with age-matched controls (p=0.03), low haemoglobin in four children, and low serum IgA in four children.

**Interpretation** The identified associated gastrointestinal disease and developmental regression in a group of previously normal children, which was generally associated in time with possible environmental triggers.

Lancet 1998; **351**: 637-41  
See Commentary page

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Correspondence to: Dr A J Wakefield

## Introduction

We saw several children who, after a period of apparent normality, lost acquired skills, including communication. They all had gastrointestinal symptoms, including abdominal pain, diarrhoea, and bloating and, in some cases, food intolerance. We describe the clinical findings, and gastrointestinal features of these children.

## Patients and methods

12 children, consecutively referred to the department of paediatric gastroenterology with a history of a pervasive developmental disorder with loss of acquired skills and intestinal symptoms (abdominal pain, bloating and food intolerance), were investigated. All children were admitted to the ward for one week, accompanied by their parents.

## Clinical investigations

We took histories, including details of immunisations and exposure to infectious diseases, and assessed the children. In 11 cases the history was obtained by the senior clinician (JW-S). Neurological and psychiatric assessments were done by consultant staff (PH, MB) with HMS-4 criteria.<sup>1</sup> Developmental histories included a review of prospective developmental records from parents, health visitors, and general practitioners. Four children did not undergo psychiatric assessment in hospital; all had been assessed professionally elsewhere, so these assessments were used as the basis for their behavioural diagnosis.

After bowel preparation, ileocolonoscopy was performed by SHM or MAT under sedation with midazolam and pethidine. Paired frozen and formalin-fixed mucosal biopsy samples were taken from the terminal ileum; ascending, transverse, descending, and sigmoid colons, and from the rectum. The procedure was recorded by video or still images, and were compared with images of the previous seven consecutive paediatric colonoscopies (four normal colonoscopies and three on children with ulcerative colitis), in which the physician reported normal appearances in the terminal ileum. Barium follow-through radiography was possible in some cases.

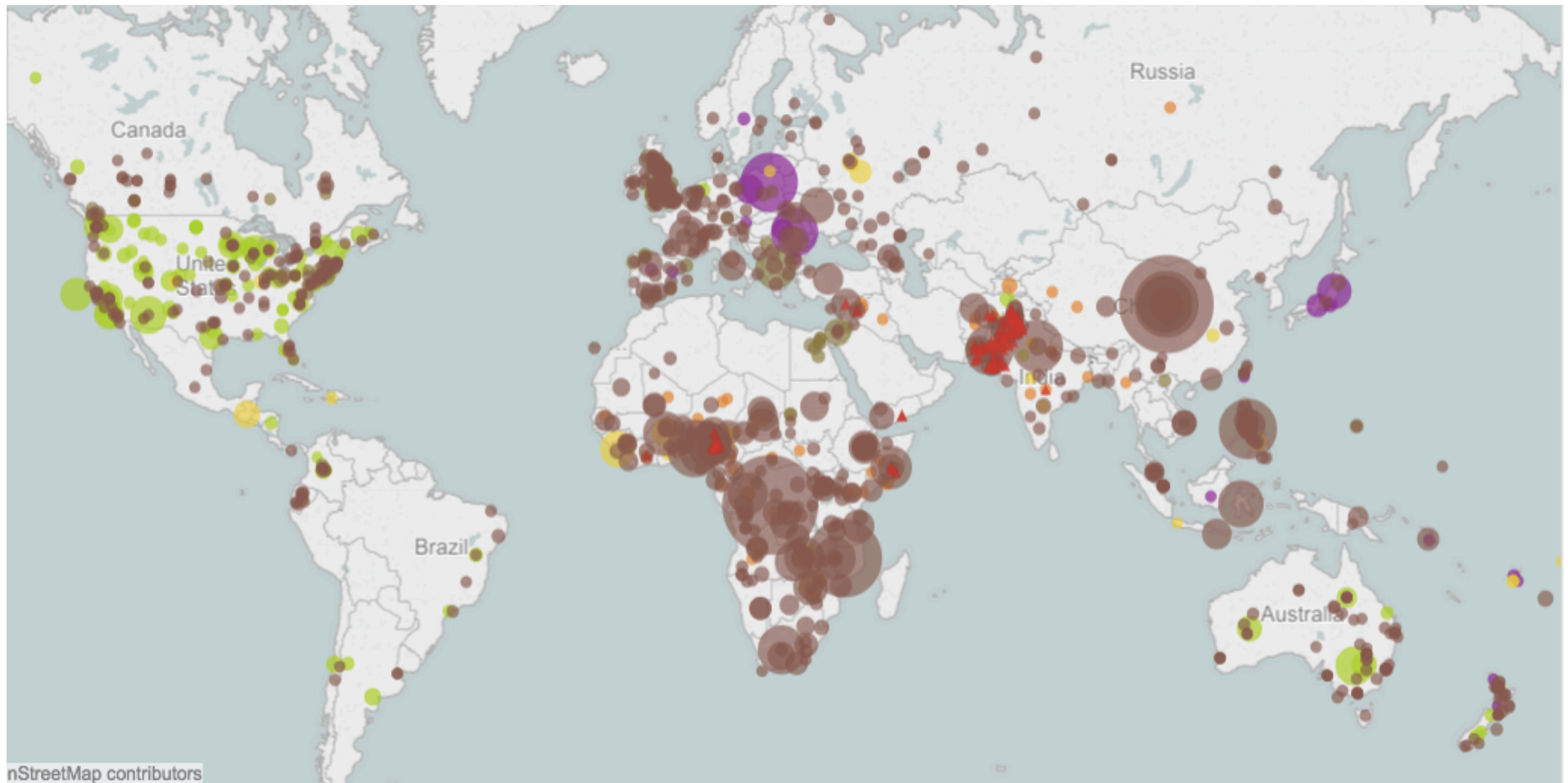
Also under sedation, cerebral magnetic-resonance imaging (MRI), electroencephalography (EEG) including visual, brain stem auditory, and sensory evoked potentials (where compliance made these possible), and lumbar puncture were done.

## Laboratory investigations

Thyroid function, serum long-chain fatty acids, and cerebrospinal-fluid lactate were measured to exclude known causes of childhood neurodegenerative disease. Urinary methylmalonic acid was measured in random urine samples from eight of the 12 children and 14 age-matched and sex-matched normal controls, by a modification of a technique described previously.<sup>2</sup> Chromatograms were scanned digitally on computer, to analyse the methylmalonic-acid zones from cases and controls. Urinary methylmalonic-acid concentrations in patients and controls were compared by a two-sample *t* test. Urinary creatinine was estimated by routine spectrophotometric assay.

Children were screened for antidiomycal antibodies and boys were screened for fragile-X if this had not been done

# Vaccine preventable disease outbreaks



# What we will cover today...

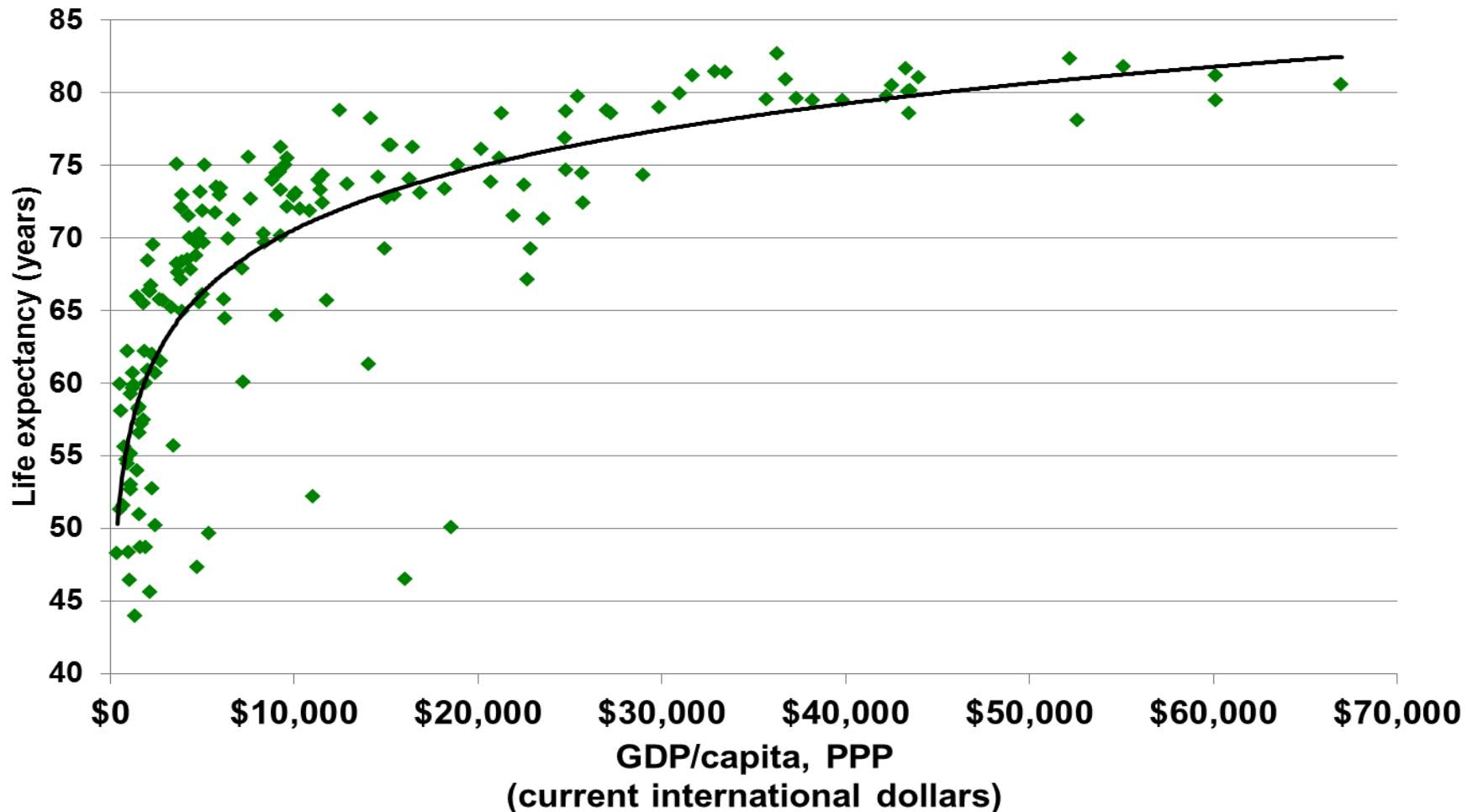
- 1) Review key links between health and wealth
- 2) Discuss the role of vaccination as a driver of both health and wealth
- 3) Operationalizing the VOV framework



# What we will cover today...

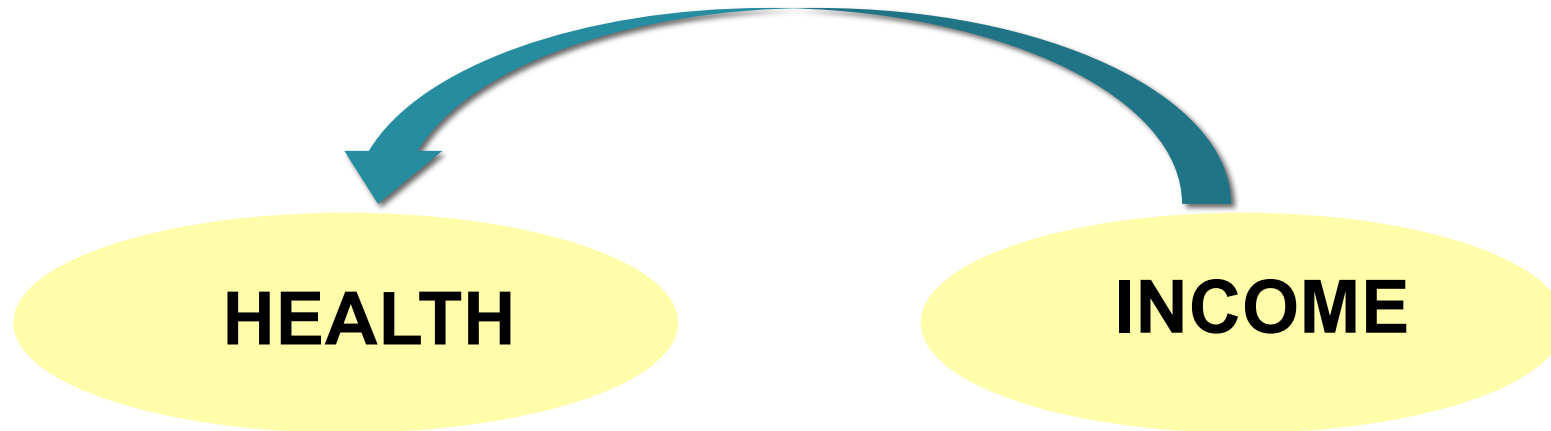
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# Life expectancy and income



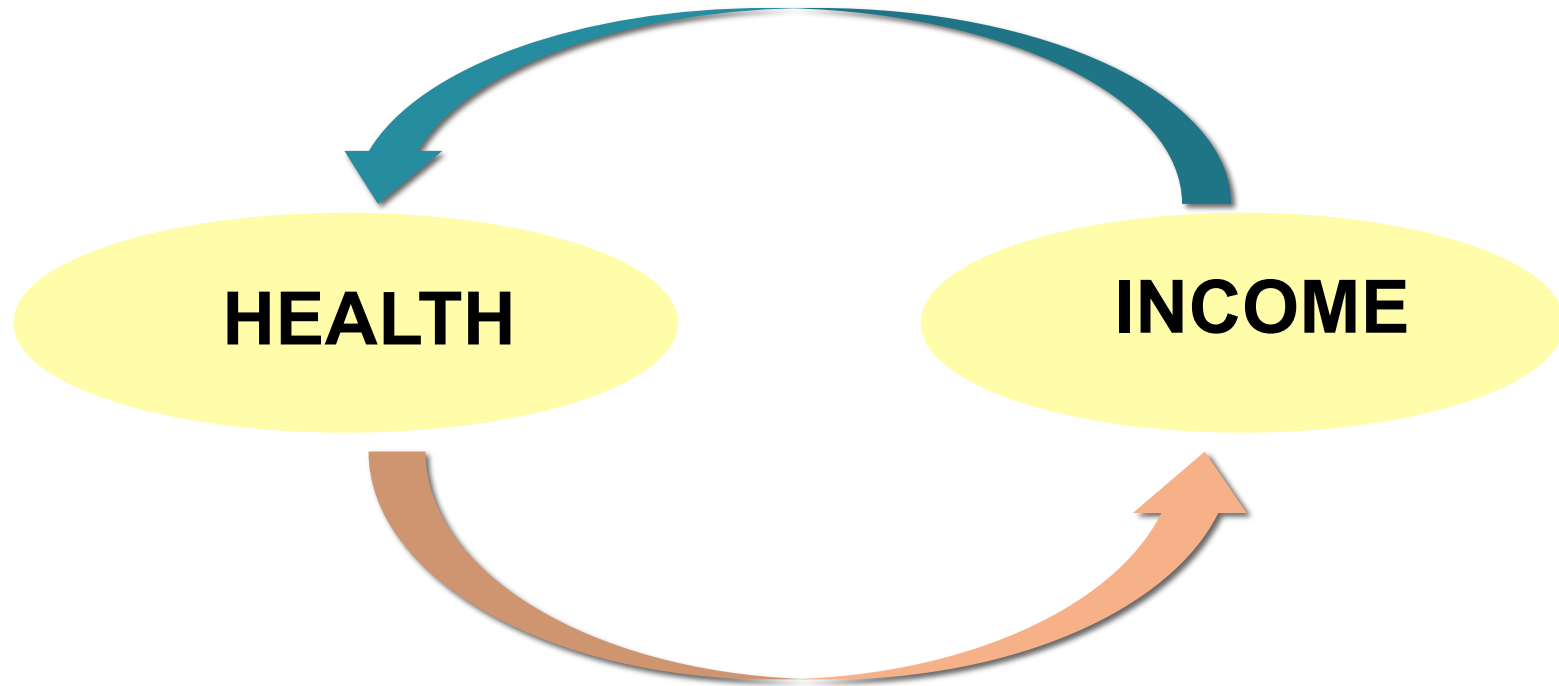
Sources: Life expectancy data: United Nations. World Population Prospects: The 2012 Revision (data for 2010); GDP/Capita: World Bank. World Databank (data for 2012).

# From income to health...



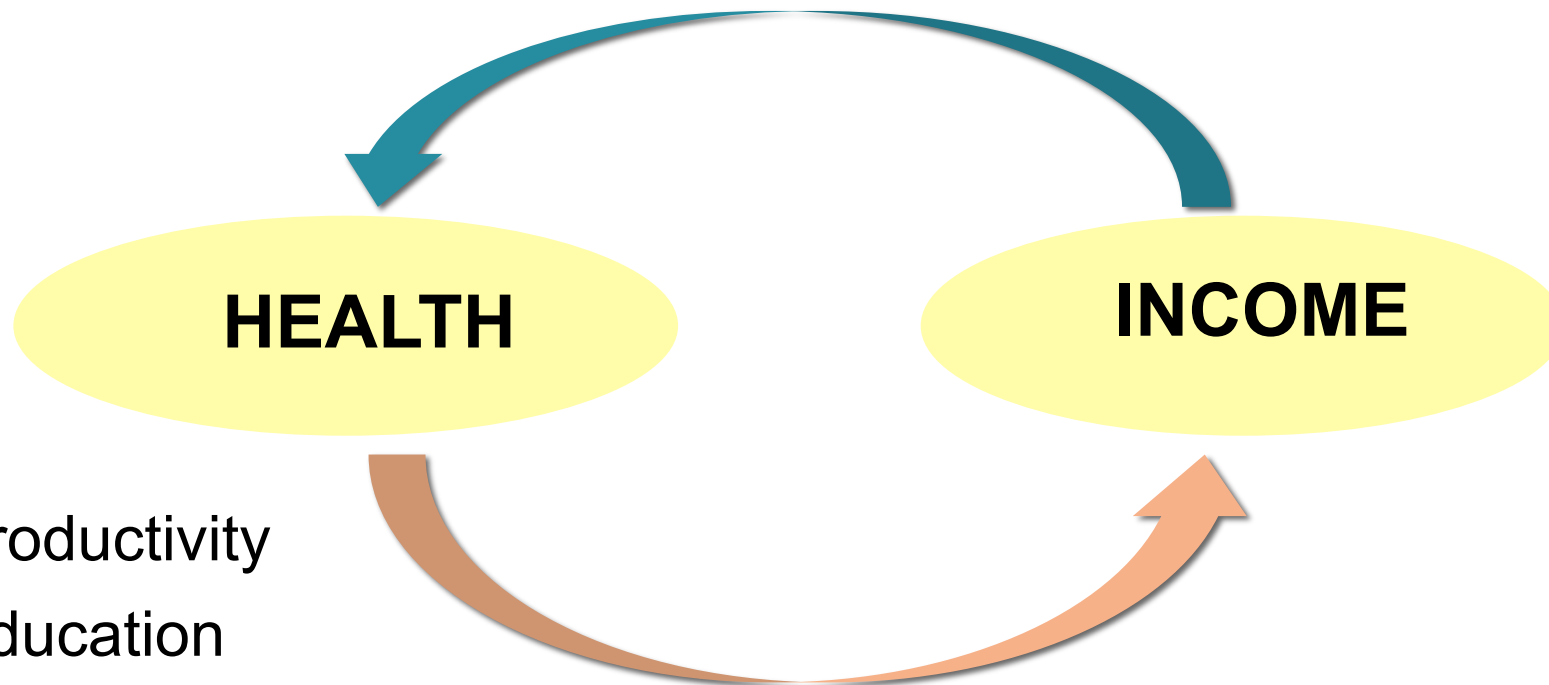
- Nutrition
- Safe water
- Sanitation
- Health care
- Psycho-social resources

... and from health to income



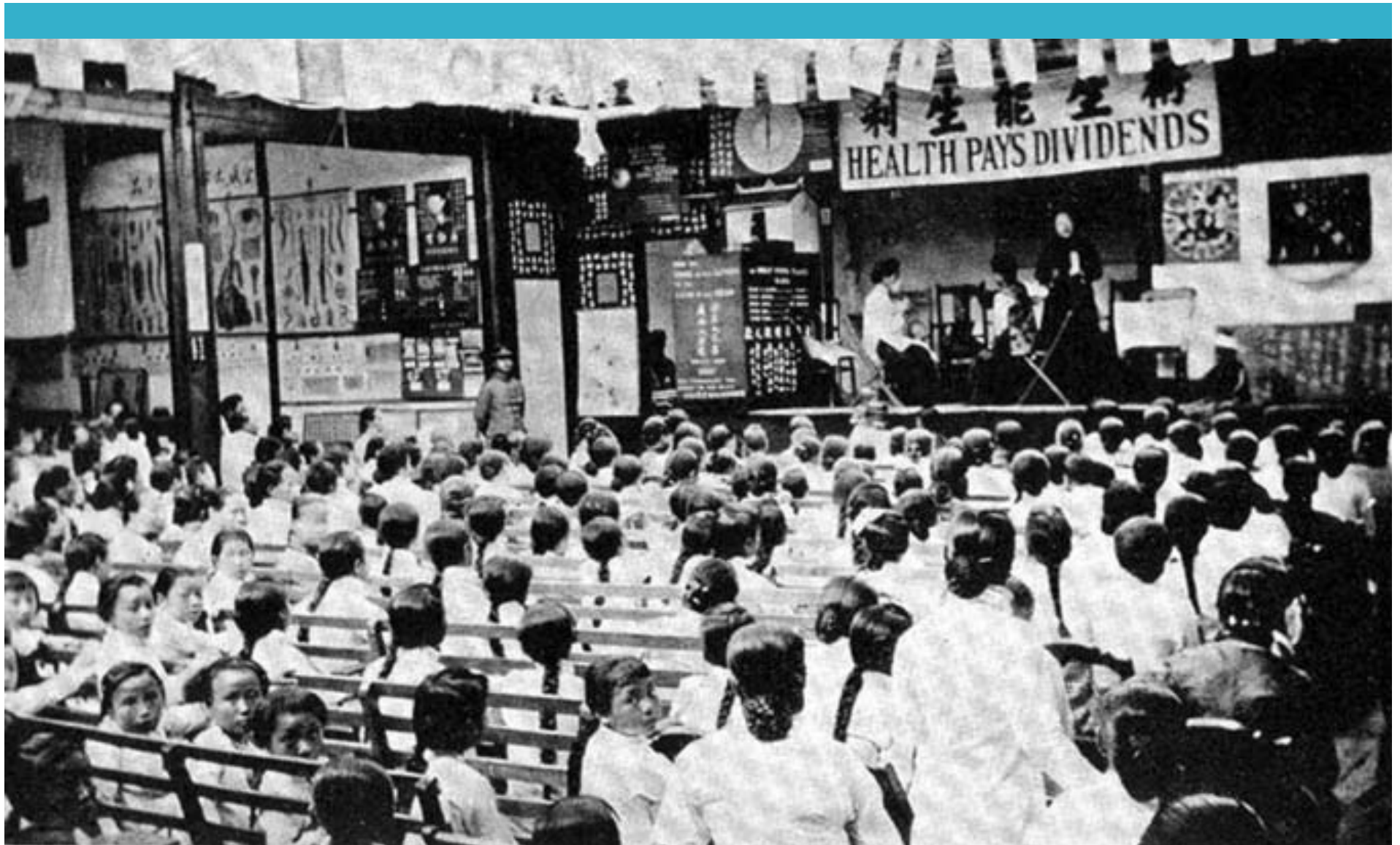


## ... and from health to income



- Productivity
- Education
- Investment
- Demographic dividend

**Sources:** Bloom DE & Fink G. (2013). "The Economic Case for Devoting Public Resources to Health" in Jeremy Farrar, Nicholas White, David Lalloo, Peter Hotez, Thomas Junghanss and Gagandeep Kang, eds., *Manson's Tropical Diseases 23rd Edition*, Elsevier.  
Bärnighausen T, Bloom DE, Cafiero ET, O'Brien JC. (2012). Economic evaluation of vaccination: capturing the full benefits, with an application to human papillomavirus. *Clinical Microbiology and Infection* 18 (Suppl. 5): 1–7



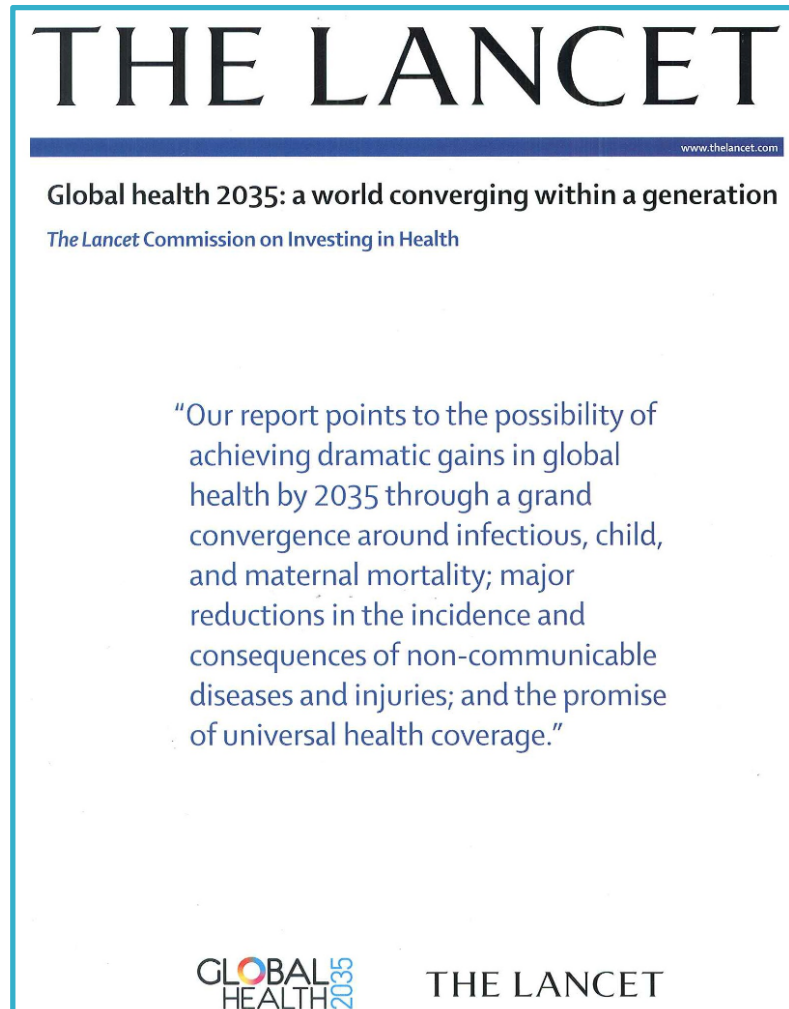
Stage decorations of the public health lecture. Source: Bu (2009) from Strother F. (1918) 'An American Physician-Diplomat in China', *The World's Work*, New York: Doubleday, page and Co., p. 546.

# Turbo-charging the economy



**A 10 year gain in life expectancy translates into as much as 1 additional percentage point of annual growth of income per capita**

# Investing in health





“ **A healthy population is  
a prerequisite for growth as  
much as a result of it.**

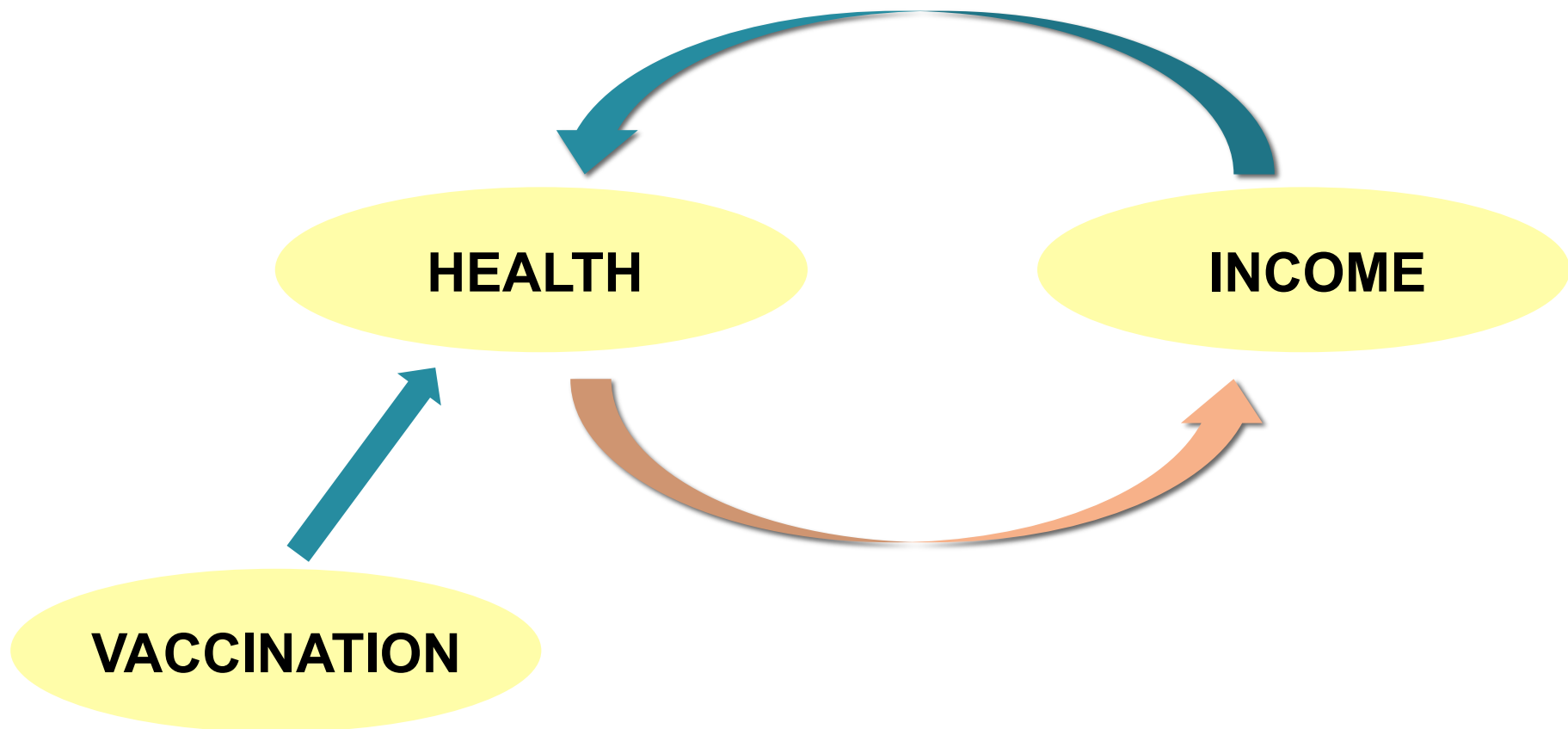


**Dr. Gro Harlem Brundtland**  
Director-General, WHO 1998-2003  
On the occasion of the launch of the  
Report of the WHO Commission on  
Macroeconomics and Health

# What we will cover today...

- 1) Review key links between health and wealth
- 2) Discuss the role of vaccination as a driver of both health and wealth
- 3) Operationalizing the VOV framework

# Health and income: application to vaccination



# Inattention to the full economic benefits...





# Valuing vaccinations: the traditional perspective

Perspective		Benefit categories
	<b>Narrow</b>	Health care cost savings
		Care-related productivity gains

# Valuing vaccinations: a broader perspective

Perspective		Benefit categories
Broad	Narrow	Health care cost savings
		Care-related productivity gains
		Outcome-related productivity gains
		Behavior-related productivity gains
		Community externalities
		Utilitarian value of health gains

# What we will cover today...

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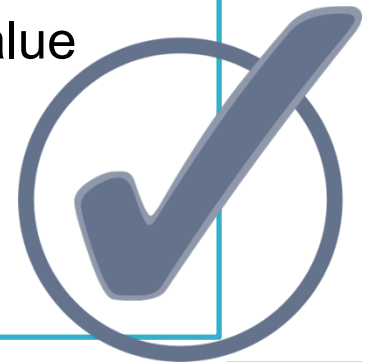
# Valuing vaccinations: selecting the right tool

- **Cost-effectiveness analysis**

- Compares 2 or more health interventions with a common health outcome
- Outcomes expressed in terms of DALYs or gain in life years

- **Benefit-cost analysis**

- Looks at a range of health and non-health outcomes
- Outcomes expressed in terms of a dollar value





# Evolving evidence base

- 'The value of vaccination', *World Economics*, 2005.
- 'Do we fully understand the economic value of vaccines?', *Vaccine*, 2007.
- 'Accounting for the full benefits of childhood vaccination in South Africa', *South African Medical Journal*, 2008.
- 'The effect of maternal tetanus immunization on children's schooling attainment in Matlab, Bangladesh: follow-up of a randomized trial.' *Social Science & Medicine*, 2011.
- 'Rethinking the benefits and costs of childhood vaccination: the example of the *Haemophilus influenza* type b vaccine', *Vaccine*, 2011
- 'Estimated economic benefits during the 'Decade Of Vaccines' include treatment savings, gains in labour productivity.' *Health Affairs* 2011.
- 'The effect of vaccination on children's physical and cognitive development in the Philippines', *Applied Economics*, 2012
- 'Economic evaluation of vaccination: Capturing the full benefits, with application to HPV', *CMI*, 2012.
- 'Systematic review of studies evaluating the broader economic impact of vaccination in low and middle income countries', *BMC Public Health*, 2012.
- 'Valuing the broader benefits of dengue vaccination, with a preliminary application to Brazil', *Seminars in Immunology*, 2013
- 'Valuing vaccination,' *Proceedings of the National Academy of Sciences*, 2014

# GAVI: The power of productivity ...

A drop of  
pure gold

“A group of researchers attempts to estimate the economic benefits of vaccination.”

Reuters  
Oct 13th 2005  
From *The Economist*  
print edition

12% by 2005

18% by 2020

Source: Bloom DE, Canning D, and Weston M.  
“The Value of Vaccination”. *World Economics*  
8:15-39, July-September 2005

# Philippines: cognitive development



Cognitive development improvements generate an estimated rate of return to investment in a basic immunization program of 21%

Source: Bloom DE, Canning D, and Seiguer E. "Childhood Immunization as Human Capital", (*working manuscript*)

# ‘Rethinking the benefits and costs of childhood vaccination: the example of the Hib vaccine’

Vaccine 29 (2011) 2371–2380



Contents lists available at ScienceDirect

Vaccine

journal homepage: [www.elsevier.com/locate/vaccine](http://www.elsevier.com/locate/vaccine)



## Review

### Rethinking the benefits and costs of childhood vaccination: The example of the *Haemophilus influenzae* type b vaccine<sup>☆</sup>

Till Bärnighausen<sup>a,b</sup>, David E. Bloom<sup>a,\*</sup>, David Canning<sup>a</sup>, Abigail Friedman<sup>a</sup>, Orin S. Levine<sup>c</sup>, Jennifer O'Brien<sup>a</sup>, Lois Privor-Dumm<sup>c</sup>, Damian Walker<sup>d</sup>

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*Haemophilus influenzae* type b vaccine

## ABSTRACT

Economic evaluations of health interventions, such as vaccinations, are important tools for informing health policy. Approaching the analysis from the appropriate perspective is critical to ensuring the validity of evaluation results for particular policy decisions. Using the example of cost-benefit analysis (CBA) of *Haemophilus influenzae* type b (Hib) vaccination, we demonstrate that past economic evaluations have mostly adopted narrow evaluation perspectives, focusing primarily on health gains, health-care cost savings, and reductions in the time costs of caring, while usually ignoring other important benefits including outcome-related productivity gains (improved economic productivity due to prevention of mental and physical disabilities), behavior-related productivity gains (economic growth due to fertility reductions as vaccination improves child survival), and community externalities (herd immunity and prevention of antibiotic resistance). We further show that potential cost reductions that could be attained through changes in the delivery of the Hib vaccine have also generally been ignored in economic evaluations. Future economic evaluations of childhood vaccinations should take full account of benefits and costs, so that policymakers have sufficient information to make well-informed decisions on vaccination implementation.

# Valuing the broader benefits of dengue vaccination, with a preliminary application to Brazil



Seminars in Immunology 25 (2013) 104–113



Contents lists available at [SciVerse ScienceDirect](http://SciVerse.ScienceDirect.com)

Seminars in Immunology

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Review

## Valuing the broader benefits of dengue vaccination, with a preliminary application to Brazil

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### ARTICLE INFO

**Keywords:**  
Dengue  
Vaccine  
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Immunization  
Economic evaluation

### ABSTRACT

The incidence of dengue has been on the rise since at least the 1960s, bringing greater urgency to the need for a vaccine to prevent the disease. Recent advances suggest that the scientific world is moving closer to an effective dengue vaccine. However, there are concerns that the price of a future vaccine could limit its uptake. High prices, in addition to other challenges, have already weighed negatively in government decisions to include other new vaccines in national immunization programs, e.g., the pneumococcal, rotavirus, and human papillomavirus vaccines. Recent research on the value of vaccination, however, suggests that vaccination confers benefits that are often neglected by traditional economic evaluations. In the case of dengue, commonly overlooked benefits are likely to include reduced spending on outbreak control, averted losses in tourism flows, and avoided productivity losses due to long-term dengue sequelae. Accounting for these and other broader benefits of dengue vaccination could reveal significantly greater economic value and strengthen the case for inclusion of dengue vaccination in national immunization programs. In this article we discuss a framework for the broader value of vaccination and review its application in the context of dengue vaccination for Brazil.

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# Dengue in Brazil

## Sao Paulo Dengue Fever Outbreak Concerns World Cup Visitors, Officials

By *Connor Adams Sheets*  @ConnorASheets  
on June 20 2014 6:38 PM



FIFA WORLD CUP  
Brasil



The Rio Time  
News in Rio de Janeiro, Brazil



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About Us ▾ Print Edition ▾ Advertising ▾ Business Directory ▾ Issue CCXVIII - Weekly Edition: May 15 - May 21, 2013

### Dengue Fever Cases Triple in Brazil: Daily

February 26, 2013 | Filed under Daily Update, Politics | Posted by Contributing Reporter

By Leo Byrne, Contributing Reporter

RIO DE JANEIRO, BRAZIL – The ministry of health reported today that the number of dengue fever cases in the country was three times higher than during the same period last year. Although the number of serious cases and deaths decreased by 44 and 20 percent respectively, the total number of cases rose to 204,650 in the first seven weeks of the year.

The Secretary of Health Observation, Jarbas Barbosa attributed the increase to a different strain of the disease, known as DENV-4 which has been circulating Brazil since 2011. A higher than usual incidence of mosquitoes was also to blame.

"Every time we have a new strain in a place where it has never previously circulated, more people are susceptible. In 2013, [DENV-4] hit big cities and this

g data from ajax.googleapis.com... ease in the number of cases,"



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26 February 2013 Last updated at 10:26 GMT

### Brazil dengue cases almost triple as new strain spreads

Health authorities in Brazil say there has been a steep rise in the confirmed cases of dengue fever this year.

More than 200,000 people were infected in the first seven weeks of 2013 compared to 70,000 in the same period last year, official figures suggest.

The southern state of Mato Grosso do Sul has been hardest hit.

Officials said the cases were likely to rise as the rainy season increases

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Bangladesh orders cyclone evacuation

#### Features & Analysis



# ‘Economic evaluation of vaccination: Capturing the full benefits, with application to HPV’

ORIGINAL ARTICLE

10.1111/j.1469-0691.2012.03977.x

## Economic evaluation of vaccination: capturing the full benefits, with an application to human papillomavirus

T. Bärnighausen<sup>1,2</sup>, D. E. Bloom<sup>1</sup>, E. T. Cafiero<sup>1</sup> and J. C. O'Brien<sup>1</sup>

1) Department of Global Health and Population, Harvard School of Public Health, Boston, MA, USA and 2) Africa Centre for Health and Population Studies, University of KwaZulu-Natal, Mtubatuba, South Africa

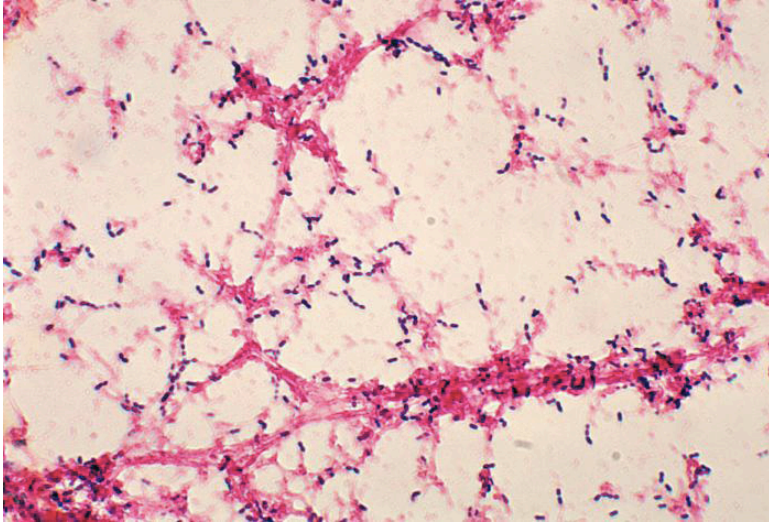
### Abstract

Vaccination has been among the greatest contributors to the past century's dramatic improvements in health and life expectancy. Recent advances in vaccinology have resulted in new vaccines that will likely lead to substantial future health gains. However, the high cost of these new vaccines, such as the human papillomavirus (HPV) vaccine, poses an obstacle to their widespread adoption in many countries. Economic evaluation can help to determine if investment in vaccine introduction is worthwhile. However, existing economic evaluations usually focus on a narrow set of vaccination-mediated benefits—most notably avoided medical-care costs—and fail to account for several categories of potentially important gains. We consider three sources of such benefit and discuss them with respect to HPV vaccination: (i) outcome-related productivity gains, (ii) behaviour-related productivity gains, and (iii) externalities. We also highlight that HPV vaccination protects against more than just cervical cancer and that these other health gains should be taken into account. Failing to account for these broader benefits of HPV vaccination could result in substantial underestimation of the value of HPV vaccination, thereby leading to ill-founded decisions regarding its introduction into national immunization programmes.

**Keywords:** Benefit-cost analysis, economic evaluation, economics, externalities, human papillomavirus vaccine, vaccination

**Original Submission:** 5 May 2012; **Revised Submission:** 18 June 2012; **Accepted:** 23 June 2012

# Pneumo vaccination in Ontario



# Final remarks

- Don't focus on costs in isolation
- Need better alignment on a defined range of potential prices
- Need better data and more evidence

The New York Times

HEALTH | PAYING TILL IT HURTS : Vaccines

COMMENTS

## *The Price of Prevention: Vaccine Costs Are Soaring*

By ELISABETH ROSENTHAL JULY 2, 2014



**PAINFUL MEDICINE** Rachel Chavez, left, and Beth Barnhart administer vaccines to Caius Sims as his mother, Cedra Sims, helps hold him at Dr. Lindsay Irvin's office.  
Ben Sklar for The New York Times

# Debate on pricing: resource costs or value-based?





*"I'll have an ounce of prevention."*