VACCINES PROGRESS AND CHALLENGES

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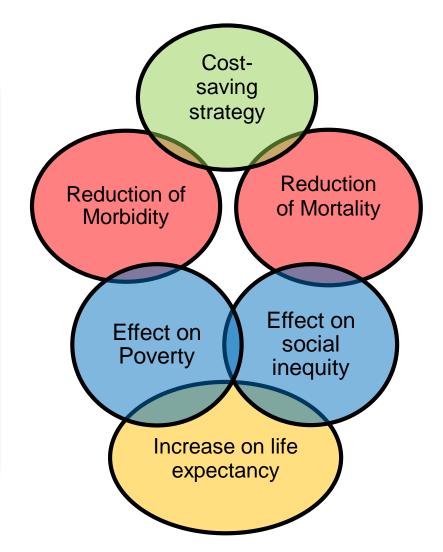


Conflicts of Interest

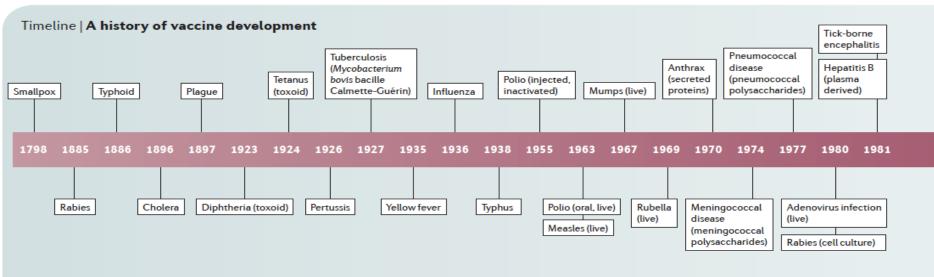
- Research grants for vaccine trials provided by Takeda, GSK, Sanofi, Janssen, Gilead, NIH and Gates Foundation
- Member of Advisory Boards for Takeda, GSK, Janssen
- Member of DSMB (Data Safety Monitoring Board) for Novavax and Janssen

IMPACT OF VACCINATION

"With the exception of potable water, no other strategies, not even the antibiotics, have induced a greater reduction on morbidity and mortality than vaccination"

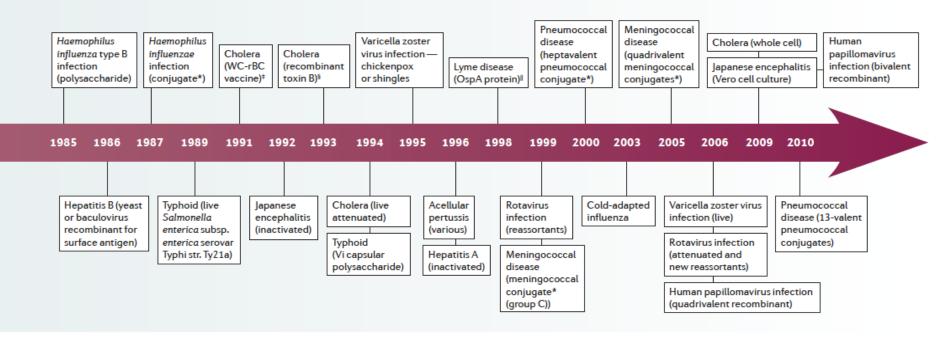


1. Plotkin *et al.* Ch 1 in Plotkin *et al.* Vaccines. 6th Edition, Elsevier Saunders, 2012; 2. WHO. Influenza. Available at: http://www.who.int/mediacentre/factsheets/2003/fs211/en/ (accessed November 2014); 3. Andre *et al.* WHO 2008;86(2):81–106; 4. Ehreth. *Vaccine* 2003;21:4105–17.



*Capsular polysaccharide conjugated to carrier proteins. [‡]Killed, recombinant B subunit, whole-cell vaccine. [§]Cholera toxin B combined with enterotoxigenic *Escherichia coli*. ^{II}Now withdrawn.

First 200 years: 25 vaccines Last 25 years: 25 vaccines



Impact of the Immunization Program in The Americas

Morbilidad

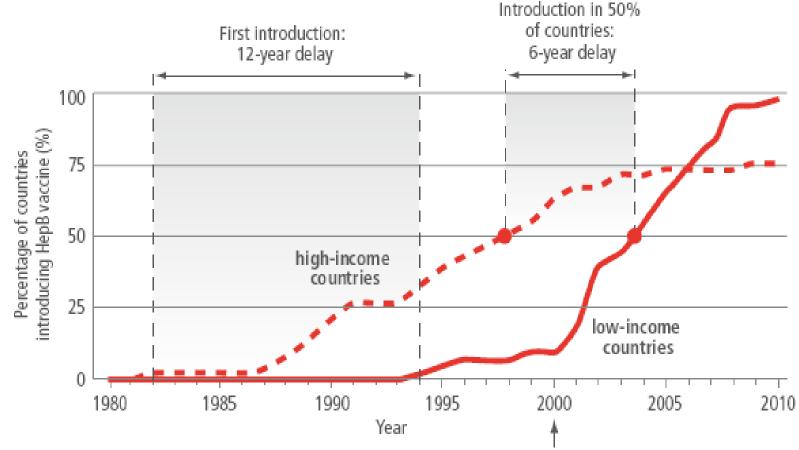
Enfermedad	# Casos antes de la vacuna	# Casos despues de la vacuna
Polio	2.989 (1980)	0 (2014) 100%
Rubéola endémica	125.056 (1997)	0 (2014) 100%
Síndrome rubéola congénita	80 (2000)	0 (2014) 100%
Difteria	5.570 (1980)	9 (2014) 99%
Tétanos neonatal	803 (1980)	10 (2014) 99%
Sarampión	257.790 (1980)	1.996 (2014) 99%

Mortalidad

Enfermedad	# Muertes antes de la vacuna	Muertes antes de la vacuna # Muertes despues de la vacuna	
Polio	18 (1980)	^{0 (2014)} 100%	
Sarampión	950 (1990)	0 (2014) 100%	
Tétanos neonatal	116 (1996)	3 (2014) 97%	
Rotavirus	15,000 (2004)*	7,238 (2014)* 52%	

* Estimados OPS en 2014; Fuente: OPS-OMS/UNICEF (cortesía: Dra. María Luisa Avila)

History of the Introduction of new vaccines in the world



WHO, Vaccine Introduction Database

Current decision-making in the LA Region

In the past:

- Ministry of Health (epidemiologists, public health specialists, PAHO representatives)
- Media, Government, Manufacturer lobby

Currently (same plus):

- Robust EPI programs + PAHO Revolving Fund
- Advisory Board on Practices of Immunization
- Academic Societies (Pediatrics, ID, PH, OB-GYN)
- Participation of countries in vaccine multicenter trials

Vaccines in the LA Region

In all countries:

BCG (at birth), DTPa-w + Hib-HB-IPV (bOPV), HA (1-2 doses), MMR (2 doses), Pneumococcus (3+1, 2+1), Influenza, Rotavirus (2-3 doses): 14 diseases

In many countries:

• Varicella (1-2 doses), HPV (2-3 doses, age cohort)

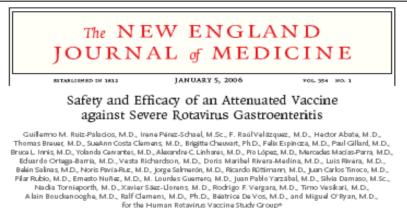
In some countries:

• Meningococcus A-C-Y-W (B?), YF, Dengue, Cholera

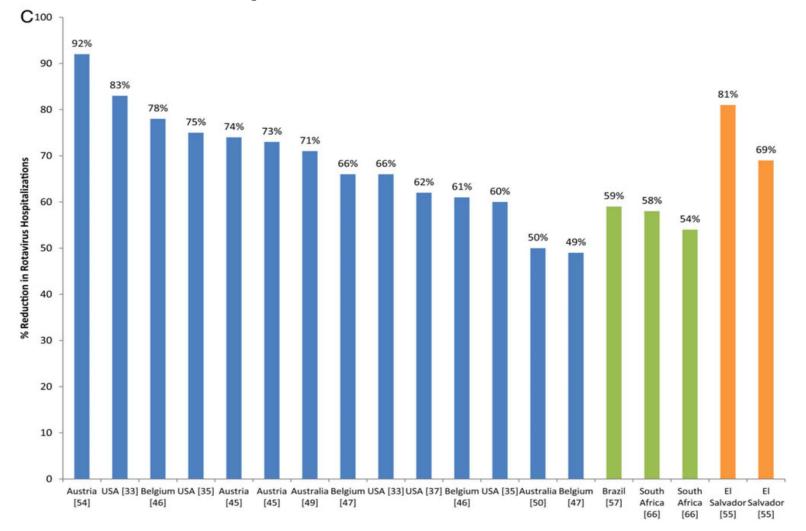
Relevant Vaccination Achievements in the Region

- Poliomyelitis eradicated in 1991
- Indigenous measles eliminated in 2002
- Congenital rubella syndrome eliminated in 2010
- First region in incorporating universal rotavirus vaccination
- Pioneer vaccine trials in many LA countries: rotavirus, pneumococcus, meningococcus, HPV, influenza, hepatitis A, pertussis, varicella, yellow fever, dengue, polio, norovirus, and now RSV

Paper of the year 2006, Lancet

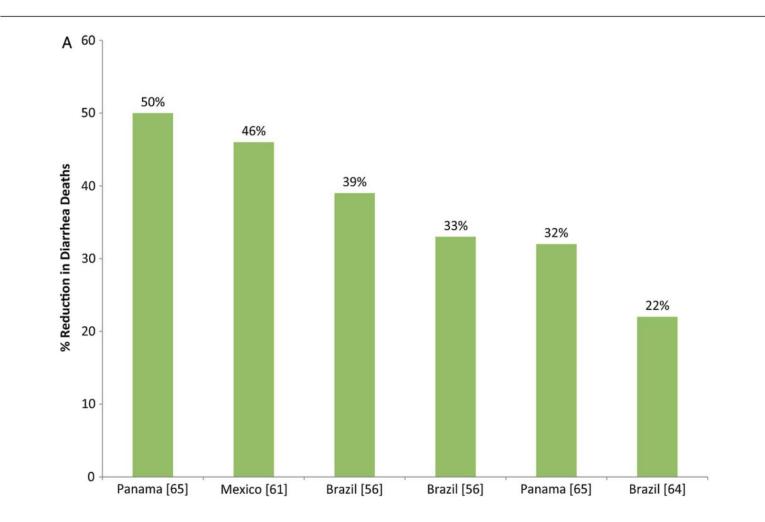


Reduction of hospitalizations by rotavirus diarrhea in children <5 years after vaccine introduction



Tate JE et al. Clin Infect Dis 2014: 1291-1301

Reduction in deaths caused by Rotavirus GE in Children <5 years after vaccine introduction



Tate JE et al. Clin Infect Dis 2014: 1291-1301

Original Article

National legislation and spending on vaccines in Latin America and the Caribbean

Michael McQuestion^{a,d,*}, Ana Gabriela Felix Garcia^b, Cara Janusz^b, and Jon Kim Andrus^c

- Period 1980-2015
- 1980: only 2 countries with vaccination laws
- 2003: 9 countries
- 2011: 27 (92% of the whole region population)
- Impact: Increased investment on vaccines, reduction of vaccine introduction gaps, decreased infant hospitalization and mortality

Factors contributing to a successful immunization program within the PAHO Region

- Commitment of member countries to immunization as a priority
- Immunization considered a critical intervention in public health
- Investment on vaccination viewed as a social product but also as a long-term direct and indirect saving strategy
- Better understanding of society about the value of considering immunization as part of a right and responsability
- Considering a strong immunization program as an integral part of a wellfunctioning health system
- Encouraging sustainable access to funding, quality supply and innovative technologies
- Promotion of local and regional research to characterize burden of diseases, investigation of new vaccines, and cost-benefit analysis

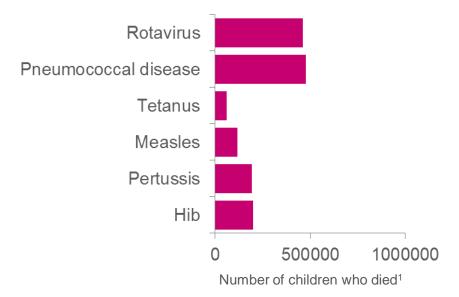
Challenges in the field of vaccinology

1 in 5 of all children who die before the age of five lose their lives to vaccinepreventable diseases¹



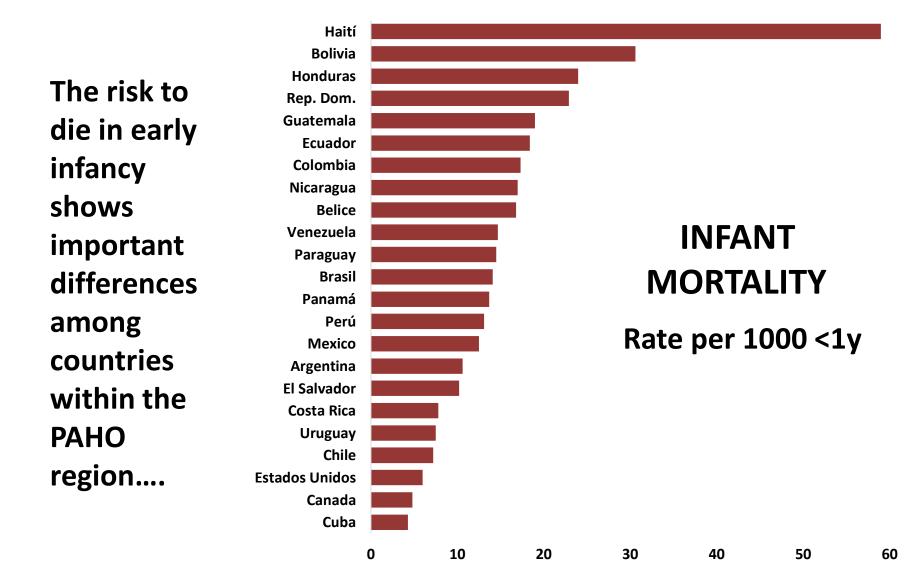
In 2011 alone, 1.5 million children under 5 years of age died from vaccinepreventable diseases¹

'There remains an **urgent need** to reach all children with life-saving vaccines'²



1. WHO. Global Immunization Data.

<u>http://www.who.int/immunization/monitoring_surveillance/global_immunization_data.pdf</u> (accessed January 2017); 2. Gates Foundation. Vaccine Delivery. <u>http://www.gatesfoundation.org/What-We-Do/Global-Development/Vaccine-Delivery</u> (accessed January 2017)

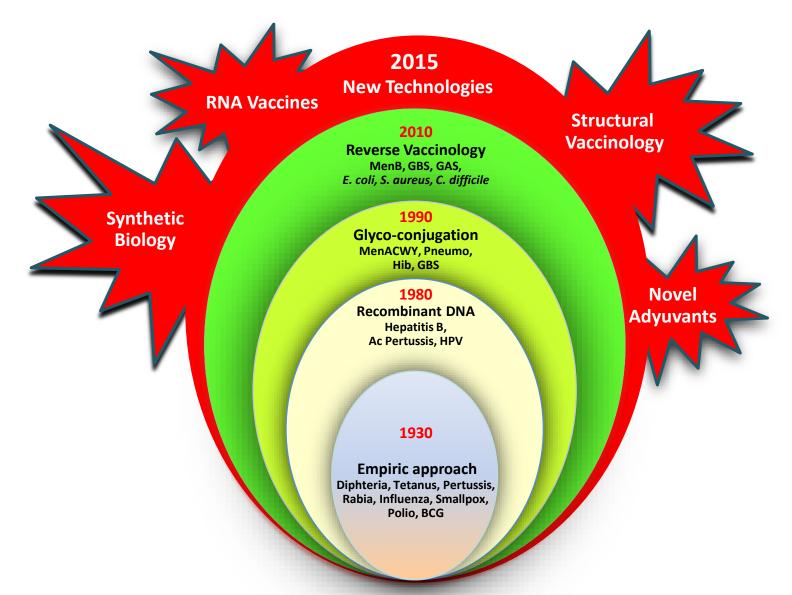


Vaccination along the people life span

Infants/Children ^{1,2}	Adolescents/ adults ^{2,3}	Travellers ^{2–4}	Pregnancy ^{3–5}	Elderly ^{2,3}
 Difteria Tétanos Tosferina Hepatitis B Influenza Poliomielitis Neumococo Meningococo Rotavirus Varicela SRP Haemophilus influenzae tipo b Hepatitis A 	 Tétanos Influenza Difteria Hepatitis A Hepatitis B Meningococo Neumococo Tosferina VPH Varicela Zoster SRP Poliomielitis Haemophilus influenzae tipo b 	 Cholera Dengue Influenza Hepatitis A Hepatitis B Encefalitis Japonesa Fiebre amarilla Meningococo Rabia Encefalitis por garrapata Fiebre tifoidea Tuberculosis 	 Hepatitis B Influenza Tosferina Tétanos Difteria Poliomielitis 	 Influenza Meningococo Neumococo Varicella Zoster Tétanos Difteria Tosferina Hepatitis A Hepatitis B

- 1. CDC, 2016. http://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-child-combined-schedule.pdf
- 2. ECDC, 2016. http://vaccine-schedule.ecdc.europa.eu/pages/scheduler.aspx
- 3. CDC, 2016. <u>http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-schedule.pdf</u>
- 4. Rappuoli R et al. Nat Rev Immunol 2011;11:865–872; 5.
- 5. CDC, 2016. Guidelines for vaccinating pregnant women. http://www.cdc.gov/vaccines/pregnancy/hcp/guidelines.html

Vaccines: from empiric approaches to modern technologies



Finco O and Rappuoli R. Frontiers in Immunology. 2014; 5:1-6

Vaccination threatenings

- Social, economic and political variabilities among countries of the region
- Low immunization coverage in many communities within countries
- Poor immunization strategies in adolescents, adults and pregnant women
- Risk of disease reemergence (low coverage), importation (polio, diphteria, measles, yellow fever) or new infections (dengue, chikungunya, zika)
- Poor compromise of media to inform properly about benefits of vaccines (many fake news about adverse events)
- Unification of message among vaccine scientists and advocates: "vaccines do not save lives, vaccination does"

"If you want to go fast walk alone, if you want to go further walk together"



WORLD VIEW · 16 OCTOBER 2018

The biggest pandemic risk? Viral misinformation



A century after the world's worst flu epidemic, rapid spread of misinformation is undermining trust in vaccines crucial to public health, warns Heidi Larson.

