

News digest 33 Q2, 2012

Dear partners, friends, and colleagues:

The following is a summary of recent, current, and upcoming activities at the Meningitis Vaccine Project (MVP). We welcome your comments and suggestions at <a href="mailto:info@meningvax.org">info@meningvax.org</a> and encourage you to forward this update to friends or colleagues who might be interested in learning about MVP's progress.

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## Vaccine introduction and communication activities

- Chad launched its second vaccine introduction phase on June 23, as planned, with no fewer than 11 ministers attending the various ceremonies in the 4 regions where MenAfriVac<sup>TM</sup> was introduced. High-level delegates from the World Health Organization (WHO), UNICEF, and Rotary Club as well as local opinion leaders and representatives from political, religious, and cultural associations also came in large numbers to show their support for the 10-day campaign that targets more than 2 million Chadians aged 1- to 29 years. As in last year's campaign, and despite the heavy rains that fell in 3 regions, immunization staff tried their utmost to fulfill their task and more often than not even went beyond the call of duty to ensure that a maximum number of people received MenAfriVac<sup>TM</sup>, extending the vaccination hours into the evening and even into the night to allow field laborers, fishermen, and day-time workers to get immunized.
- A meeting was held in Douala, Cameroon, on May 3–5 to evaluate the lessons learnt and identify best practices from previous MenAfriVac<sup>TM</sup> introduction campaigns. The meeting was attended by representatives from countries that have already conducted the campaigns (Burkina Faso, Cameroon, Chad, Niger, and Nigeria); countries that will have their first introduction campaigns in 2012 (Benin, Ghana, Senegal, and Sudan); and key project and introduction partners, including Agence de Médecine Préventive, the Bill & Melinda Gates Foundation, the GAVI Alliance, the US Centers for Disease Control and Prevention (CDC), UNICEF, WHO, and PATH.
- Preparations continue to advance smoothly for the next round of MenAfriVac<sup>TM</sup> vaccination campaigns in Africa. Weekly multipartner teleconferences chaired by the WHO Intercountry Support Team (IST) in Ouagadougou, Burkina Faso, prepare the way for vaccine introduction by addressing a variety of issues relevant to MenAfriVac<sup>TM</sup> rollout this coming fall, including coordination and planning of the mass campaigns, social mobilization and advocacy, logistics, cold chain and waste disposal management, pharmacovigilance, training and supervision of health workers, and resource mobilization.
- Staff from WHO HQ and/or IST visited Benin, Ghana, Senegal, and Sudan in preparation for the first round of vaccination campaigns that are to be held in these countries toward the end of 2012.
- In June, GAVI board members approved a new policy increasing GAVI contribution to the MenAfriVac<sup>TM</sup> campaign operational costs to \$0.65 per target person compared to the \$0.30 currently contributed. The new policy, which will take effect in September 2012, will support many meningitis belt countries in their effort to mobilize in-country resources for the vaccination campaigns. Additional GAVI funds could be used to support and reinforce country investments in key activities specifically related to the introduction of MenAfriVac<sup>TM</sup>, including communication and social mobilization, logistics and waste management, and disease surveillance and laboratory work; and they could also be used to reinforce capacity building and health infrastructures at the national, regional, and local levels. More information on GAVI's contribution can be found <a href="here">here</a>.

## Surveillance and epidemic preparedness activities

• As the 2011–2012 meningitis season winds down in sub-Saharan Africa, the 14 countries that have an enhanced disease surveillance system report 20,265 meningitis cases and 1,732 deaths. Burkina Faso and the Democratic Republic of Congo (DRC) have been the worst affected, but laboratory tests confirm that *Neisseria meningitidis* (Nm) W135, Nm X, and Streptococcus pneumoniae have

been responsible for most cases in Burkina Faso. Laboratory data are awaited from DRC. In general terms, the 2011–2012 epidemic season was characterized by widespread activity of *Nm* W135, with outbreaks of relative low intensity in several countries.

- To date, not a single case of group A meningitis has been notified in the more than 54 million individuals who received a dose of MenAfriVac<sup>TM</sup> in 2010–2011.
- Chad was hit by a group A meningitis outbreak for the fourth consecutive year, but only in regions where MenAfriVac<sup>TM</sup> has not been introduced. For the first time ever, MenAfriVac<sup>TM</sup> was used in response to a group A meningitis epidemic in Africa.
- WHO and partners are developing enhanced surveillance tools as new challenges are arising
  following the introduction of MenAfriVac™. A tool is being developed to help countries identify
  surveillance procedures prior to introduction that will allow the impact of the vaccination
  campaigns to be measured and evaluated. A strategic meeting is planned in Chad in August 2012
  to define the most appropriate and sustainable surveillance system for this country.
- Staff from IST, WHO HQ, and CDC conducted joint visits in a number of countries to provide support for vaccine introduction as well as training on laboratory and surveillance capacities.

## **Clinical activities**

- The following six clinical trials related to licensing and prequalification of MenAfriVac<sup>TM</sup> for use in 1- to 29-year olds have been successfully completed:
  - Phase 1 PsA-TT-001 study in India.
  - Phase 2 PsA-TT-002 study in Mali and the Gambia.
  - Phase 2/3 PsA-TT-003 study in Mali, Senegal, and the Gambia.
  - Phase 2/3 PsA-TT-003a study in India.
  - Phase 3 <u>PsA-TT-005</u> study in India.
  - Phase 3 PsA-TT-006 study in Mali.
- The Phase 2 <u>PsA-TT-004</u> study is on schedule. The last visit of the last subject was performed May 4. A total of 1,200 infants are enrolled in the study that investigates the safety and immunogenicity of different dosages and schedules of MenAfriVac<sup>TM</sup> when administered concomitantly with EPI vaccines. Conducted at the Navrongo Health Research Centre in Ghana, the study is scheduled for completion in early 2013.
- The antibody <u>persistence study</u> was completed in April in Senegal, the third and last participating country. In this study individuals who participated in the PsA-TT-002 and PsA-TT-003 clinical trials are retraced to measure immune persistence up to 5 years after receiving MenAfriVac<sup>TM</sup>. Overall study results are expected to be available by the end of this year.
- Clinical study <u>PsA-TT-007</u> is progressing well at the Center for Vaccine Development-Mali, despite the current political uncertainty in the country. So far over 700 participants have been enrolled out of a total target of 1,500. This phase 3 study evaluates the immunogenicity and safety of different schedules and formulations of the meningococcal A conjugate vaccine administered concomitantly with local EPI vaccines in healthy infants and toddlers.

## **Publications**

• Several articles coauthored by MVP staff and project partners have been recently published, including "Effectively introducing a new meningococcal A conjugate vaccine in Africa: The Burkina Faso experience," published in *Vaccine* (View abstract); "Development of a group A meningococcal conjugate vaccine, MenAfriVac (TM)," published in *Human Vaccines & Immunotherapeutics* (View abstract); "Adverse events following immunization during mass vaccination campaigns at first introduction of a meningococcal A conjugate vaccine in Burkina Faso, 2010," published in *Vaccine* (View abstract); "Whom and where are we not vaccinating? Coverage after the introduction of a new conjugate vaccine against group A meningococcus in Niger in 2010," published in *PLoS One* (Read article); and "Critical episodes in the understanding and control of epidemic meningococcal meningitis," published in *Vaccine* (View abstract).

That's all for now from the MVP team. Stay tuned for our next news digest in three months' time.

We look forward to receiving your comments at <a href="mailto:info@meningvax.org">info@meningvax.org</a>.

Created in 2001, the Meningitis Vaccine Project is a partnership between WHO and PATH. The mission of MVP is to eliminate epidemic meningitis as a public health problem in sub-Saharan Africa through the development, testing, introduction, and widespread use of conjugate meningococcal vaccines.

For more information on MVP, please visit our website at <a href="http://www.meningvax.org">http://www.meningvax.org</a>.