

#vaccineswork

Combination Vaccines Why and How ? *Benefits and Risks*

Global Vaccine and
Immunization Research Forum
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MISSION AND STRATEGIC GOALS 2016–2020



Accelerate equitable uptake and coverage of vaccines



Increase effectiveness & efficiency of immunisation delivery as integrated part of strengthened health systems

To save children's lives and protect people's health by increasing equitable use of vaccines in lower-income countries



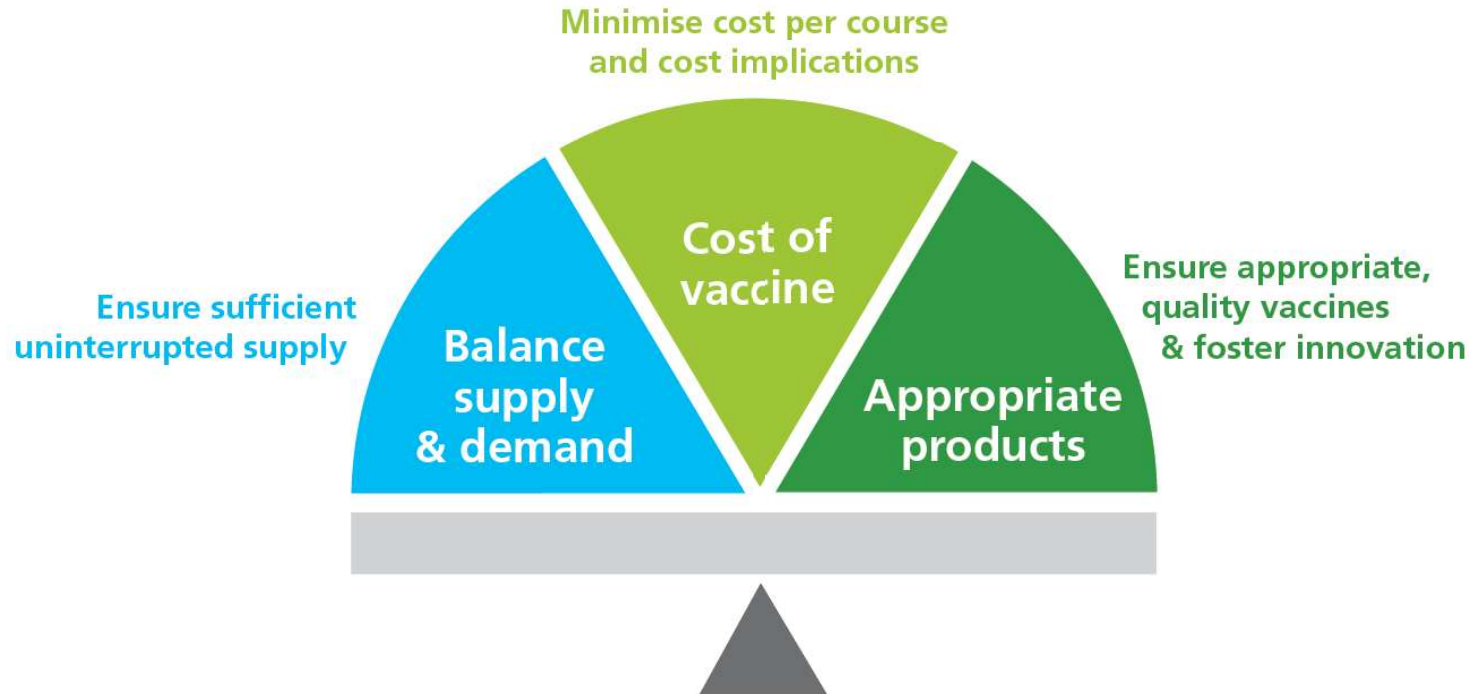
Improve sustainability of national immunisation programmes



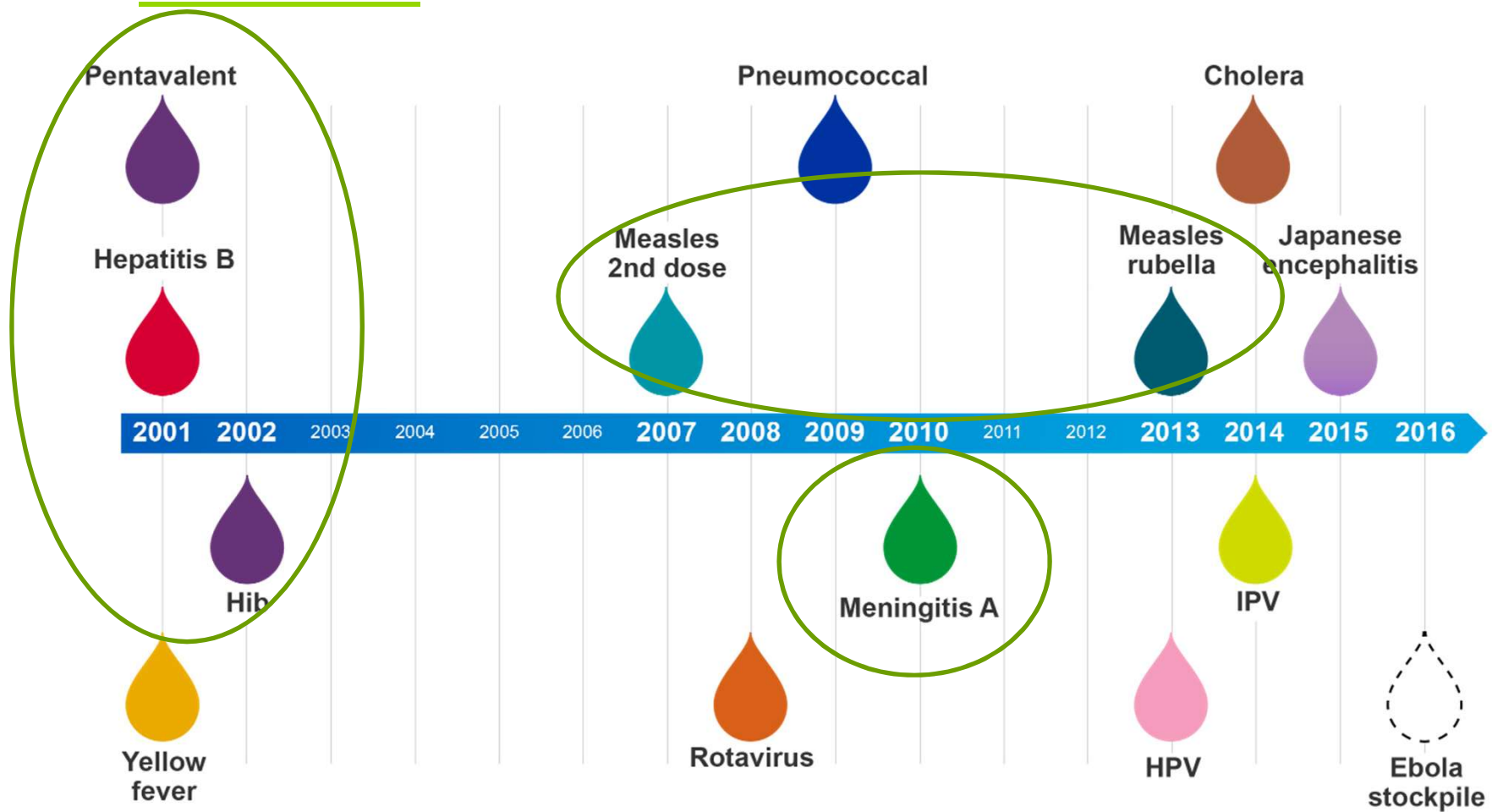
Shape markets for vaccines and other immunisation products

SUPPLY AND PROCUREMENT OBJECTIVES

Ensure sufficient supply of appropriate, quality vaccines at low and sustainable prices



GAVI'S VACCINATION PROGRAMMES: AN OVERVIEW

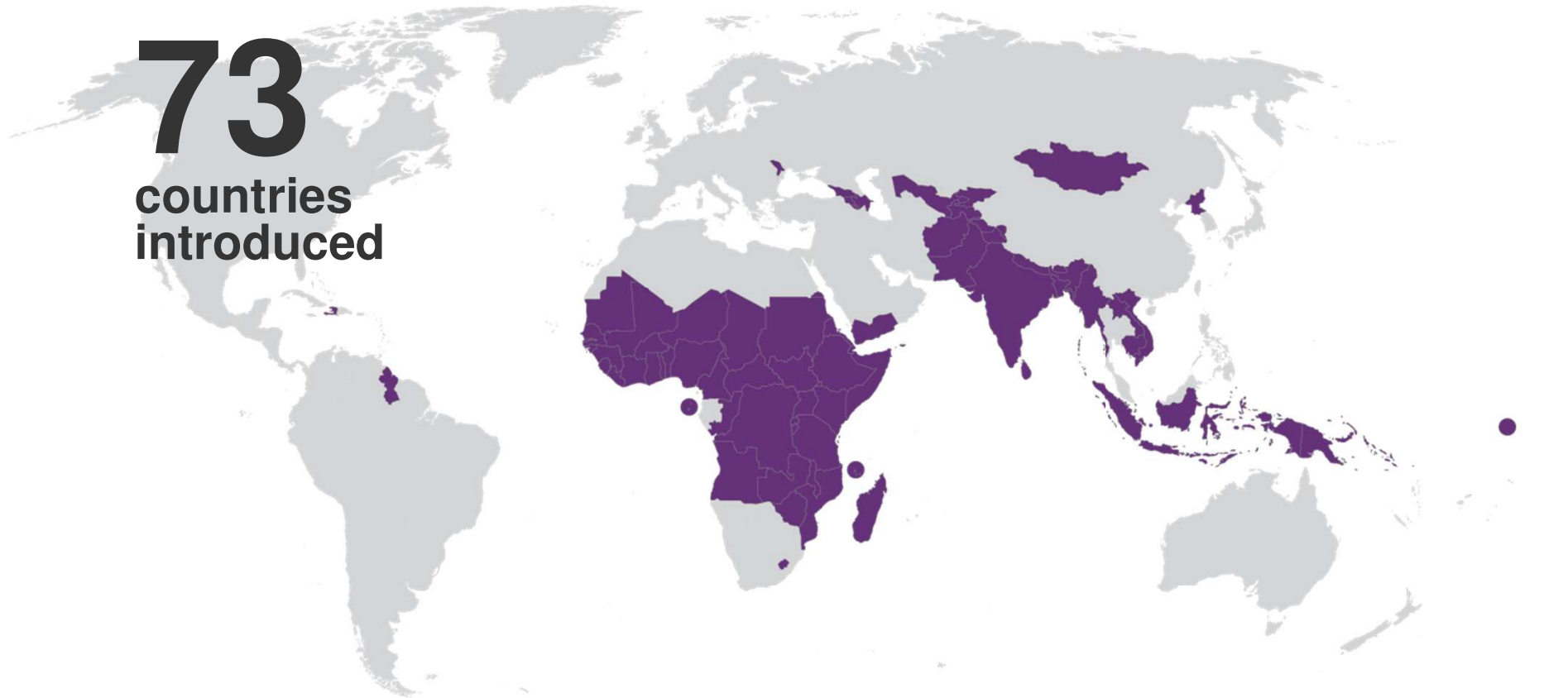


Refers to the first Gavi-supported introduction of each vaccine.

PENTAVALENT (DT_wP/HEPB/HIB)

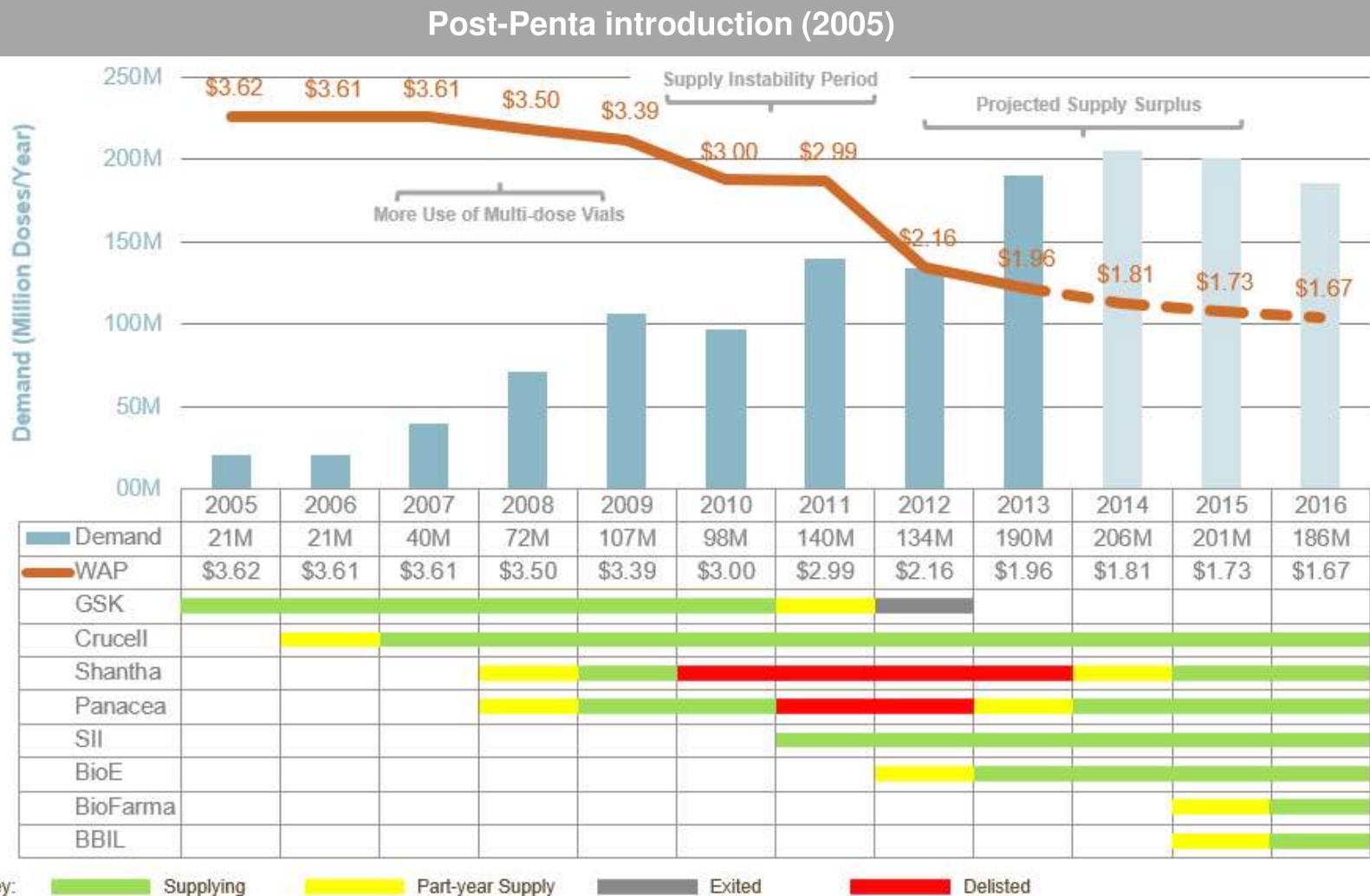
Vaccine support

73
countries
introduced



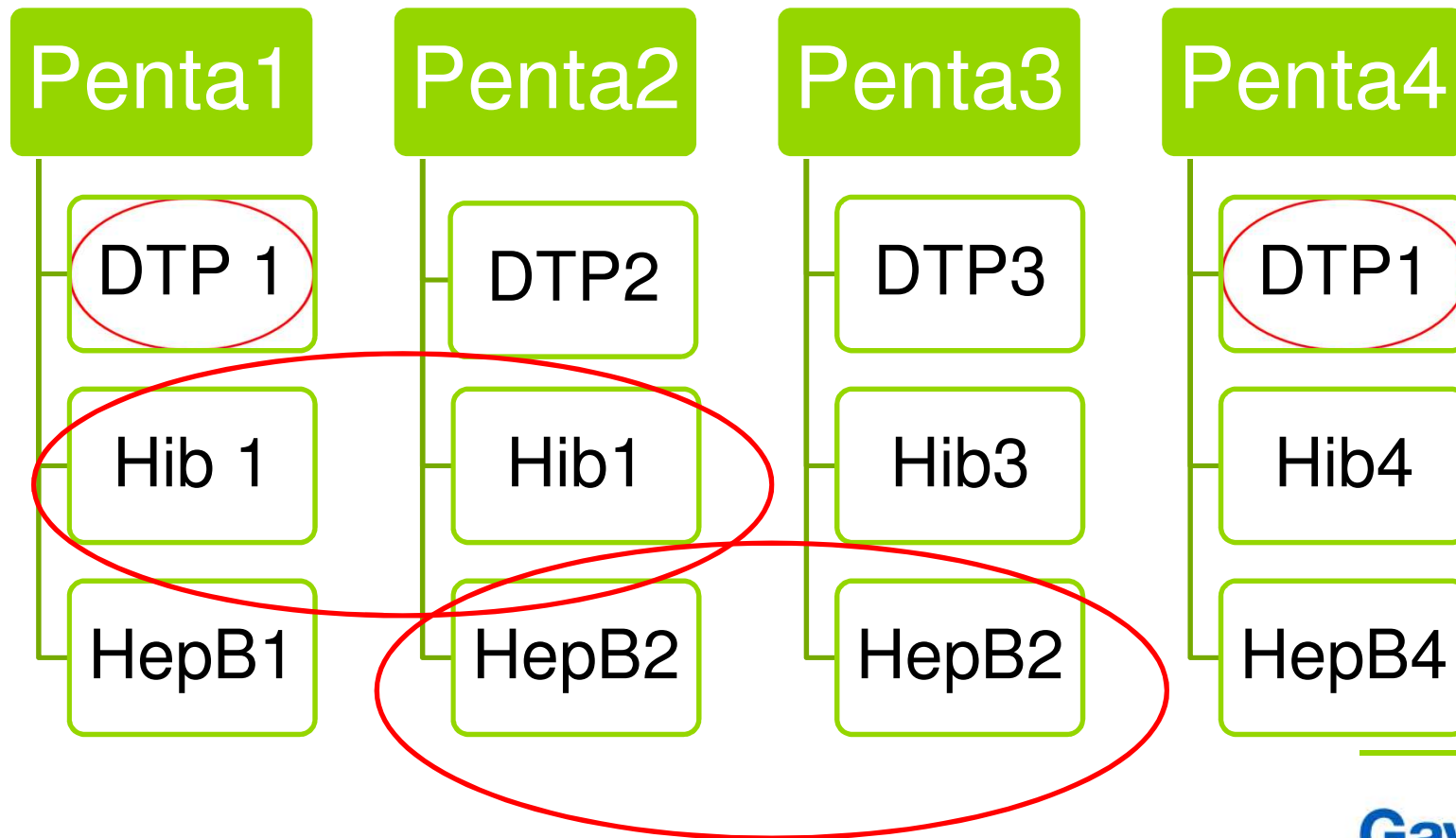
Note: 68 countries were approved for Gavi financing and 5 countries introduced independently of Gavi financing.
Source: Gavi data as of 31 December 2015.

INTRODUCING NEW COMBINATIONS DISRUPTS THE MARKET



Supply security considerations for ALL components of combinations

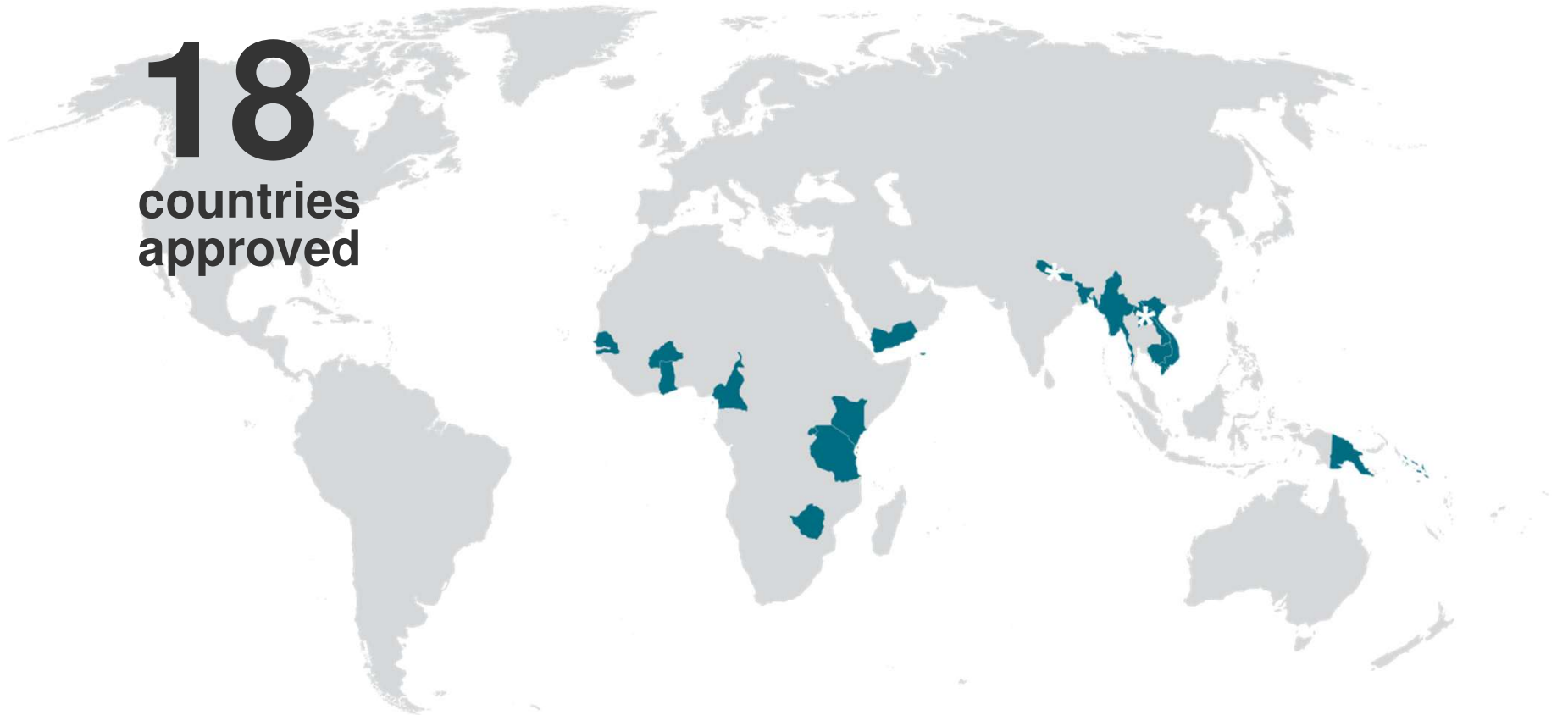
Manufacturers of penta share many common bulk manufacturers;
Implications for supply security at bulk and finished vaccine levels



MEASLES-RUBELLA (MR)

Vaccine support

18
countries
approved



*Approved for introduction grant to introduce rubella vaccine into the routine system.
Source: Gavi data as of 31 December 2015.

FRAGMENTED GLOBAL USE

Measles, Mumps, Rubella (MMR) used in >100 countries

M is cornerstone for lower income, moving toward MR

- **Manufacturers of prequalified vaccine**
3 MMR; 1 MR; 3 M
- Some market exits of “original” manufacturers
- New entrants watching movement from M to MR

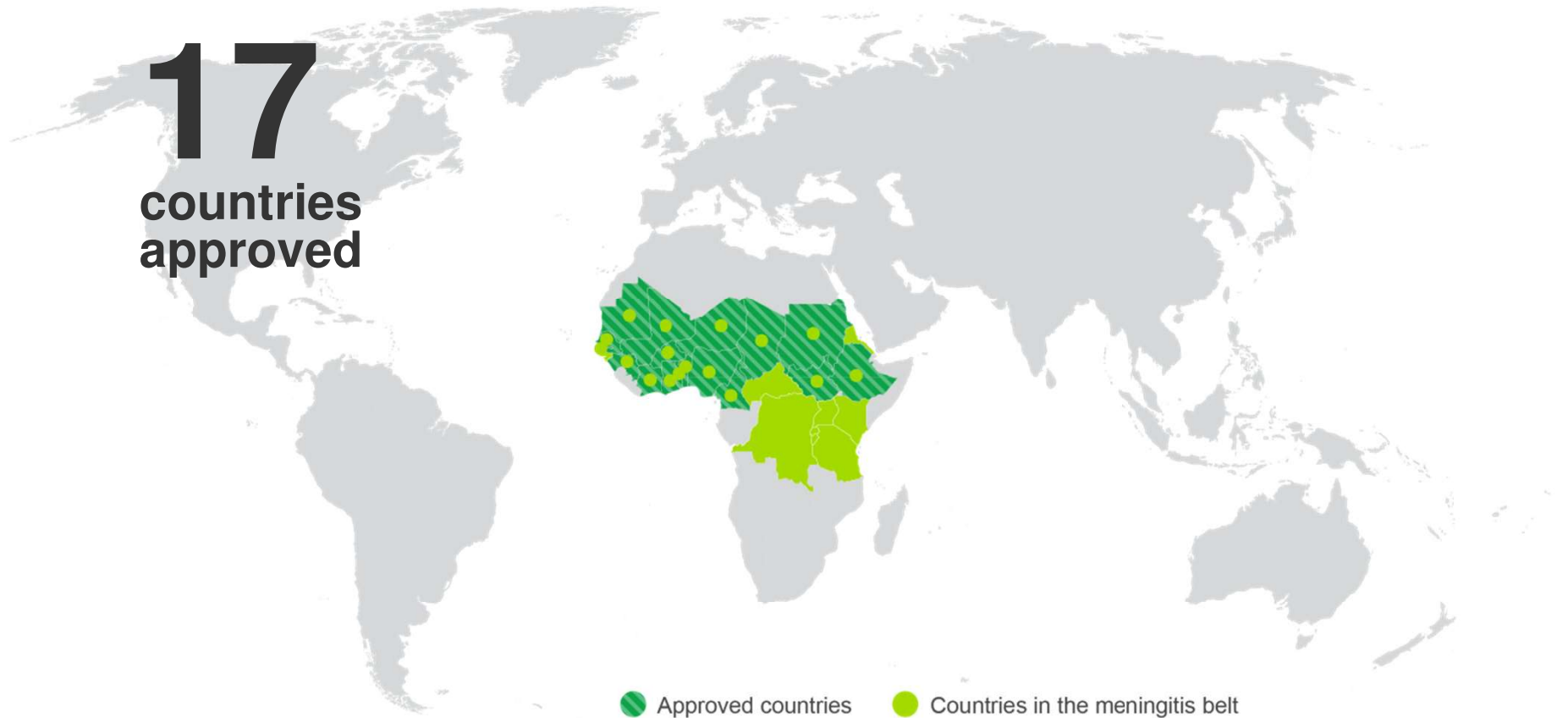
- **MR, increasing campaign and routine use**
- **MR, dependent on one manufacturer worldwide**

Source: UNICEF SD MMR Market Note, January 2015

MENINGOCOCCAL A

Vaccine campaign support; routine immunisation to follow

17
countries
approved



Source: Gavi data as of 31 December 2015.

*Approved for introduction grant to introduce rubella vaccine into the routine system.

Source: Gavi data as of 31 December 2015.

MENINGOCOCCAL

**Gavi support is for meningococcal conjugate A.
Combination vaccines (A,C,W,Y) are available but not
routinely funded through Gavi**

**Funding for meningococcal conjugate A,C,Y,W was
evaluated in 2013**

- incremental health impact not favorable for routine
- expected high cost
- recognise potential impact on epidemic disease

**Switch from menA conjugate not recommended given
relatively low “value for money”**

COMBINATION VACCINES

Large benefits, but also risks to consider in the context of use.

Supply security aspects –

Increased impact if supply disrupted.

Bulk vaccine supply should be considered.

Program considerations –

Combinations should be appropriate for local setting

Cost considerations –

Is the additional antigen cost-effective ?

COMBINATION VACCINES

Benefits can outweigh risks

Supply security aspects –

Risk of supply interruption can be mitigated and managed

Program considerations –

Strong benefits on efficiency of immunisation, coverage

Region specific combinations exist and are powerful

Combinations can “make space” for other prevention

Cost considerations –

Is the additional antigen cost-effective ?

Market convergence on broadly used combinations can drive cost efficiency

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THANK YOU



Gavi/2013/Evelyn Hockstein



www.gavi.org