

Vaccination Coverage & Impact of Vaccination on Disease Epidemiology: Focus on Africa

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Happy 10th Anniversary to Vaccinology Course

| Date | Event and related notes |
|----------------|--|
| May 4, 2004 | The National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institute of Health (NIH), awarded a new license agreement for RotaShield, an oral rotavirus vaccine, created by NIAID scientists in the 1980s. The licensed was awarded to BIOVIRx, Inc., of Minneapolis, MN, which planned global commercialization of RotaShield. |
| May 2004 | Contracts were awarded to Aventis Pasteur and to Chiron to develop vaccine against the H5N1 avian influenza virus. |
| 2004 | The 8th and final report of the Immunization Safety Review Committee was issued by the Institute of Medicine. The report concluded that the body of epidemiological evidence favors rejection of a causal relationship between the MMR vaccine (and thimerosal-containing vaccines) and autism. |
| March 24, 2004 | Tetanus and diphtheria toxoids adsorbed for adult use (Decavac by Aventis Pasteur), preservative-free, was licensed. |



<http://www.immunize.org/timeline/>



Global programs to increase vaccination

- 1) Expanded Programme on Immunization (EPI): 1974
- 2) Universal Childhood Immunisation: 1977-1984
- 3) Global Alliance for Vaccines and Immunisation (GAVI): 2000
- 4) Millennium Development Goals (MDGs): 2000
- 5) Global Immunisation Vision and Strategy (GIVS): 2006



Policy Forum

Strengthening the Expanded Programme on Immunization in Africa: Looking beyond 2015

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DTP3 coverage in Africa: 1980-2010

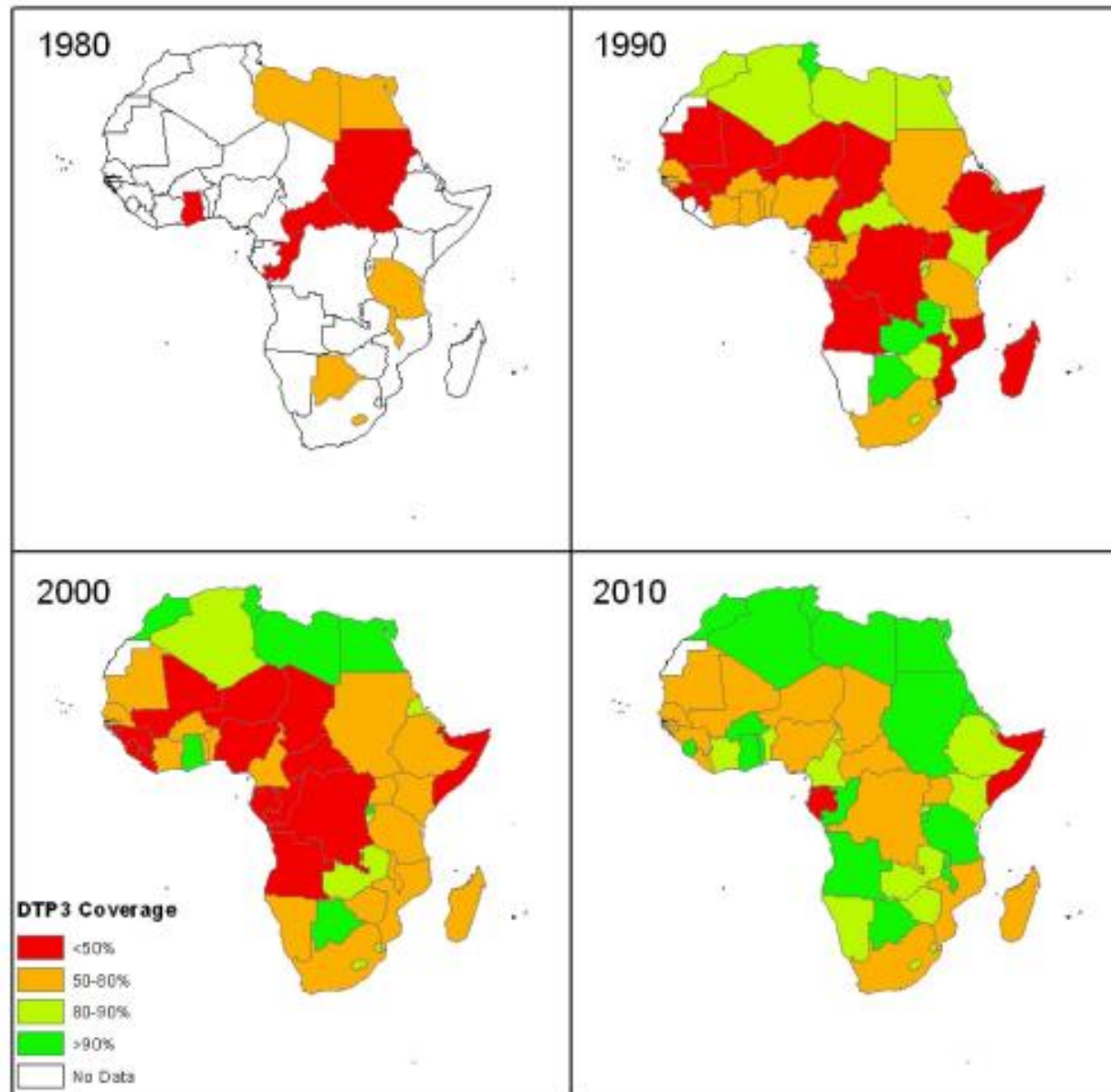
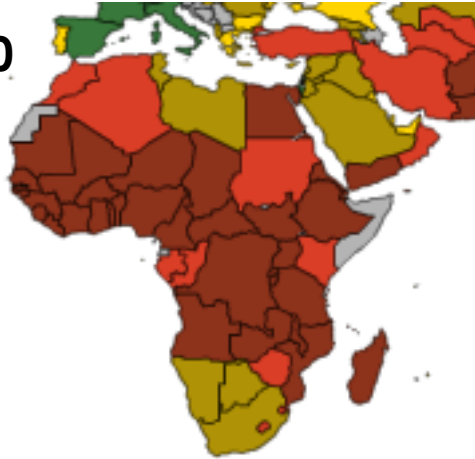


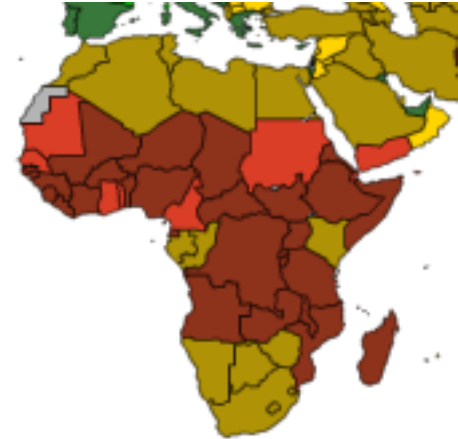
Figure 1. Colour-coded maps of Africa showing national coverage with the third dose of the diphtheria-tetanus-pertussis vaccine (DTP3) at the end of each decade since 1974. (Source of data: World Health Organization [10].) doi:10.1371/journal.pmed.1001405.g001

<5years old mortality rates in Africa

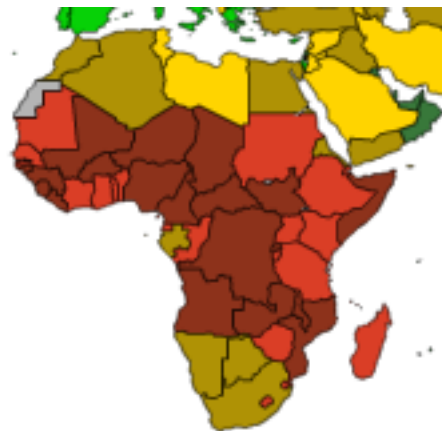
1980



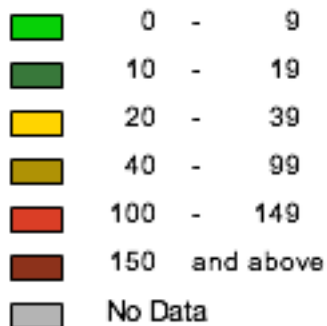
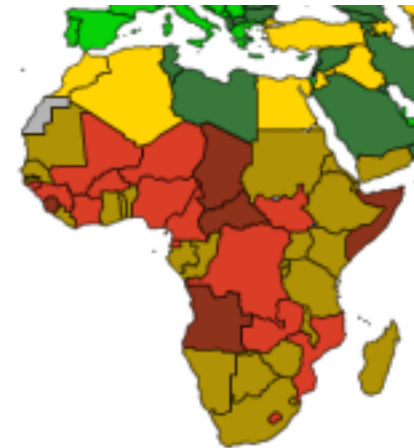
1990



2000



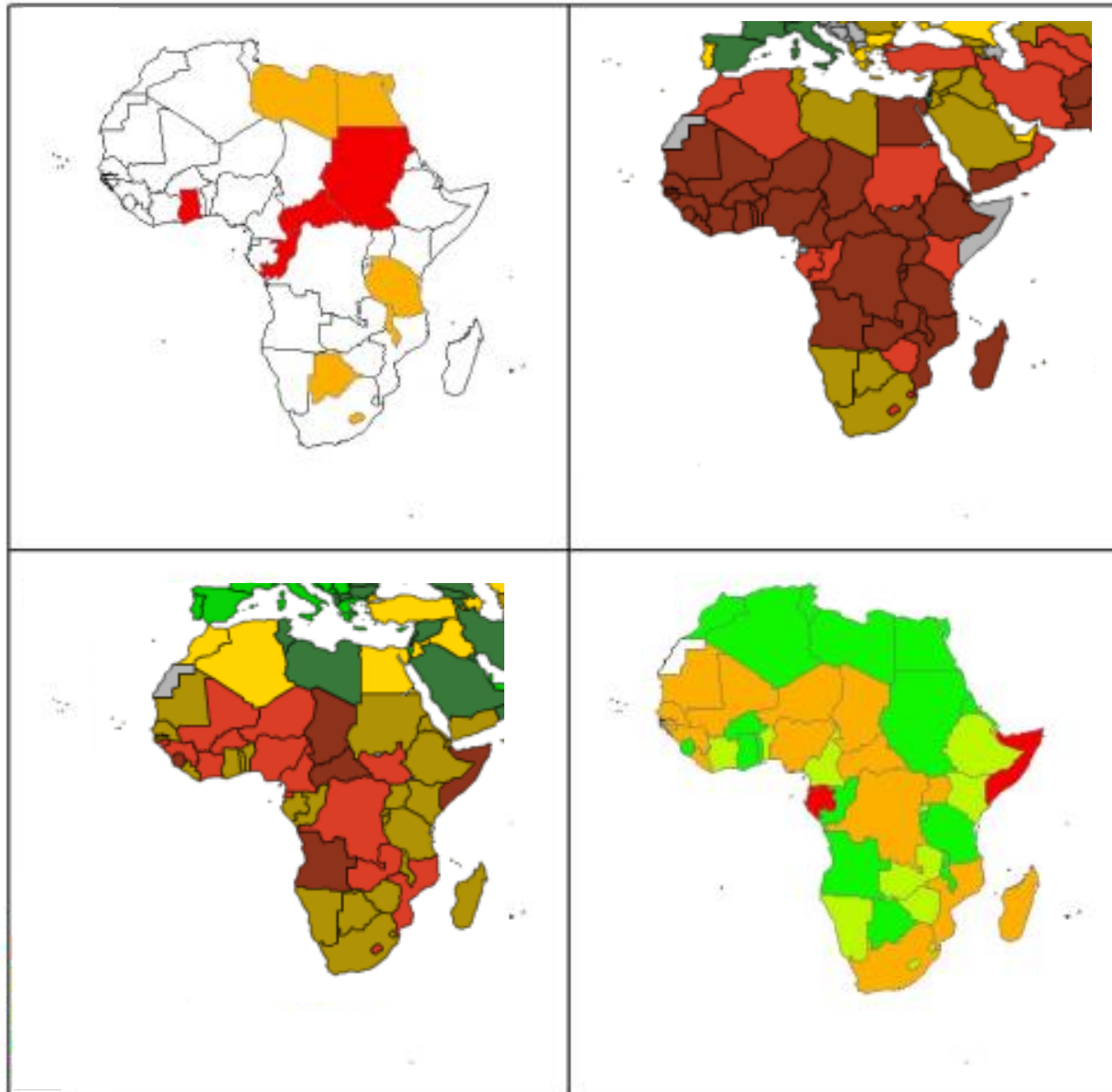
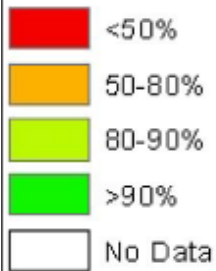
2010



<http://www.childmortality.org/index.php?r=site/map>

DTP3 coverage Vs <5yrs mortality: 1980 & 2010

DTP3 Coverage

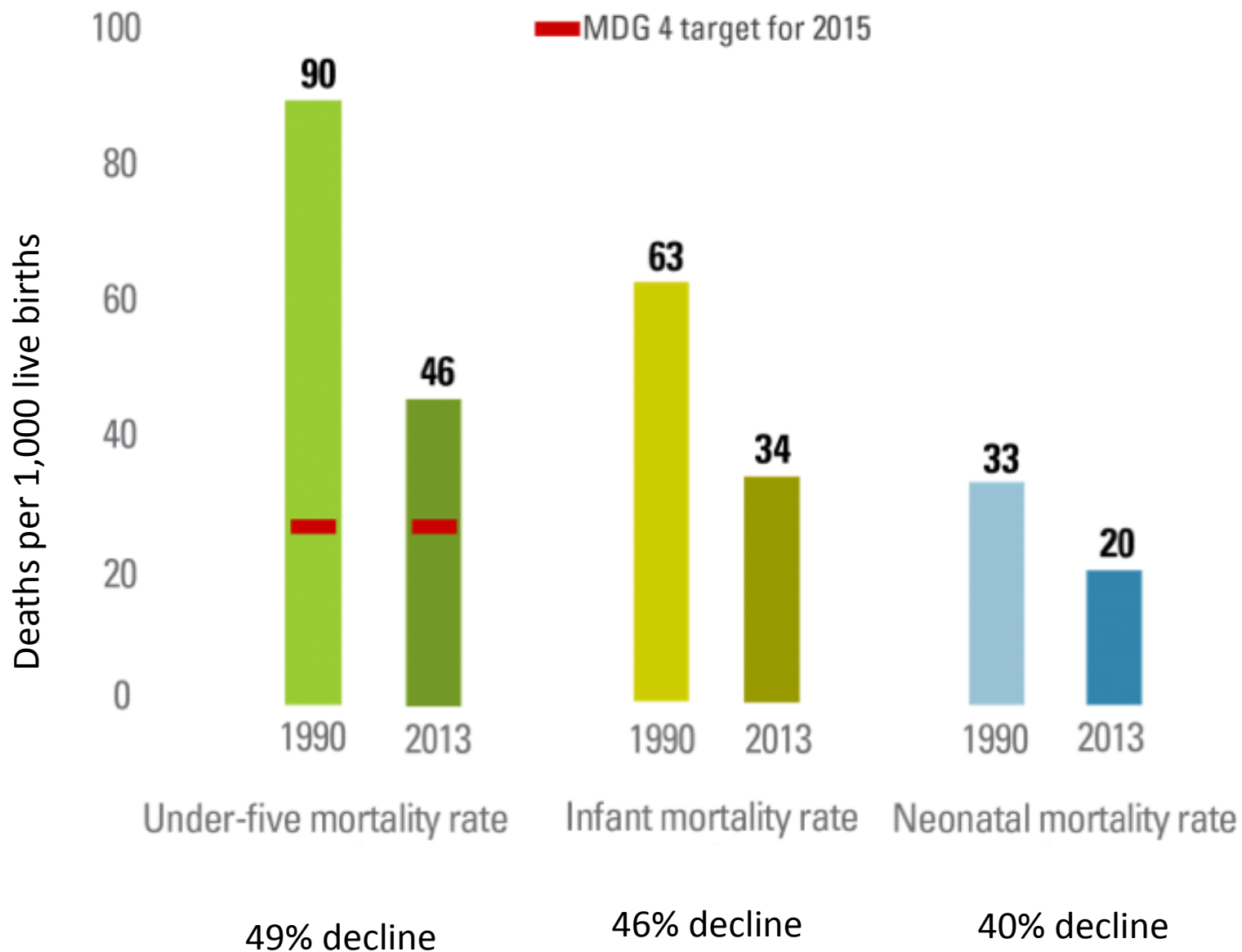


1980

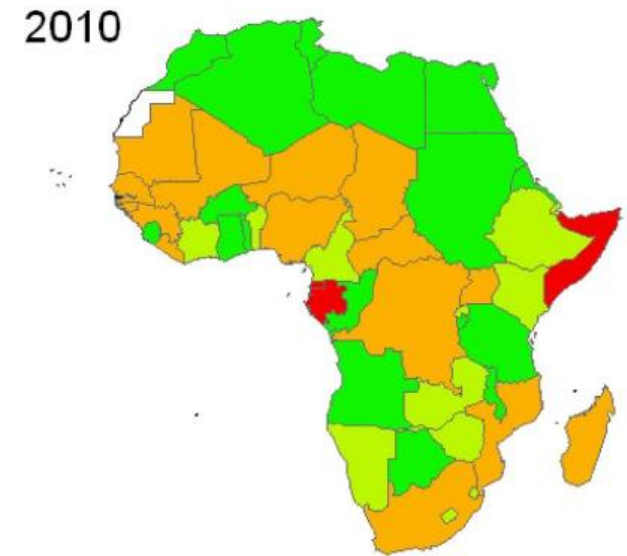
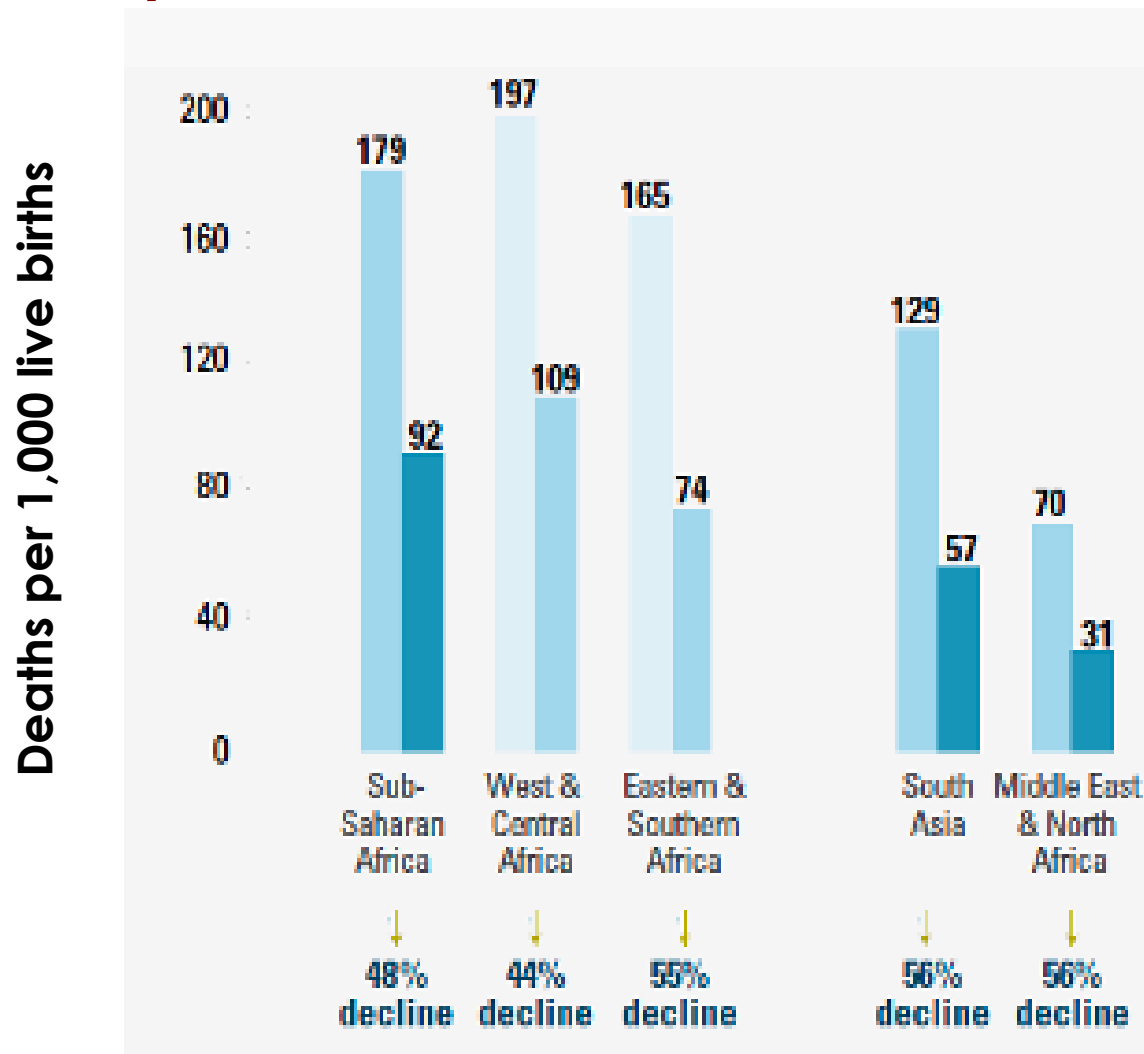
2010



Figure 1. Colour-coded maps of Africa showing national coverage with the third dose of the diphtheria-tetanus-pertussis vaccine (DTP3) at the end of each decade since 1974. (Source of data: World Health Organization [10].)
doi:10.1371/journal.pmed.1001405.g001



<5 mortality rates by region, 1990 Vs 2013, and % declines



**There appears to be an association:
Increase in vaccination coverage with
decreased <5yrs old mortality rates!!!!**

Makes sense because.....



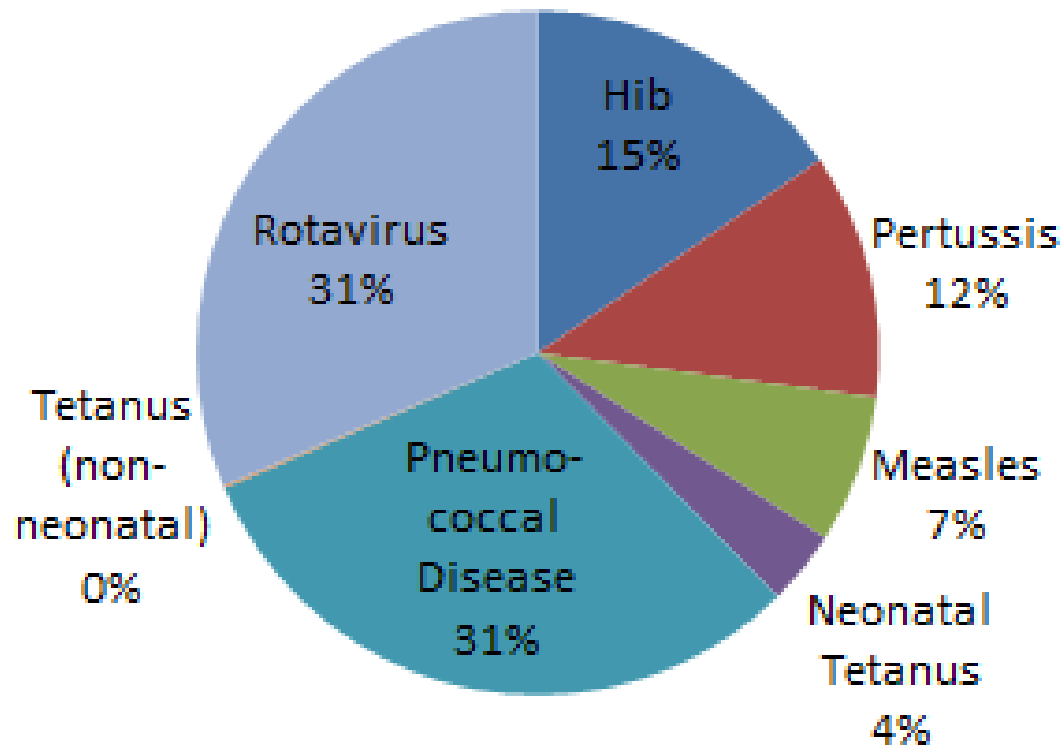
According to WHO.....

- Globally, it is estimated that 7.6millions children <5yrs old die each year
- 50% of global under <5yrs old deaths occur in Africa
- 30-40% of deaths among 1-59 months old children are vaccine preventable

Mmmmmhhhhh....now makes more sense because.....



Vaccine Preventable Deaths in <5 years: 2008



Objective 1 of the vaccinology course

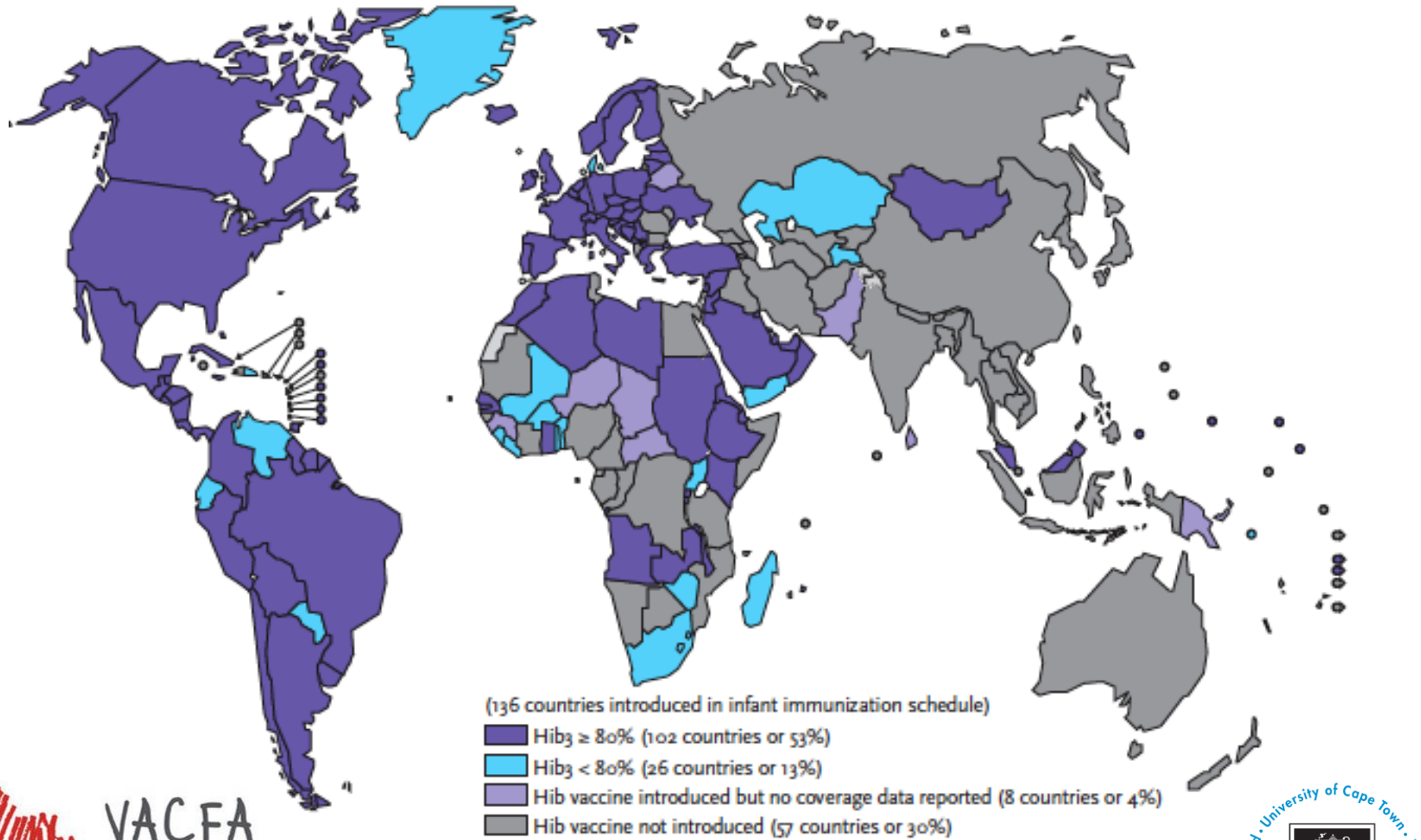
- Importance of immunisation on human health and development



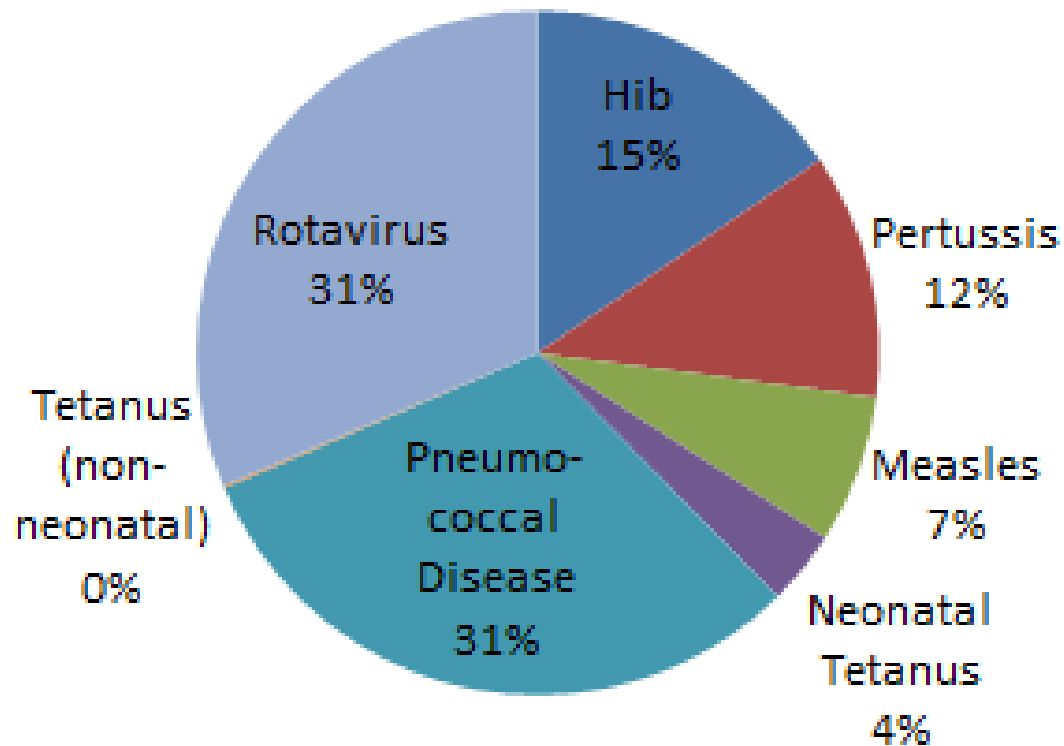
Hib epidemiology



Hib introduction and coverage in infants, 2008



Vaccine Preventable Deaths in <5 years: 2008

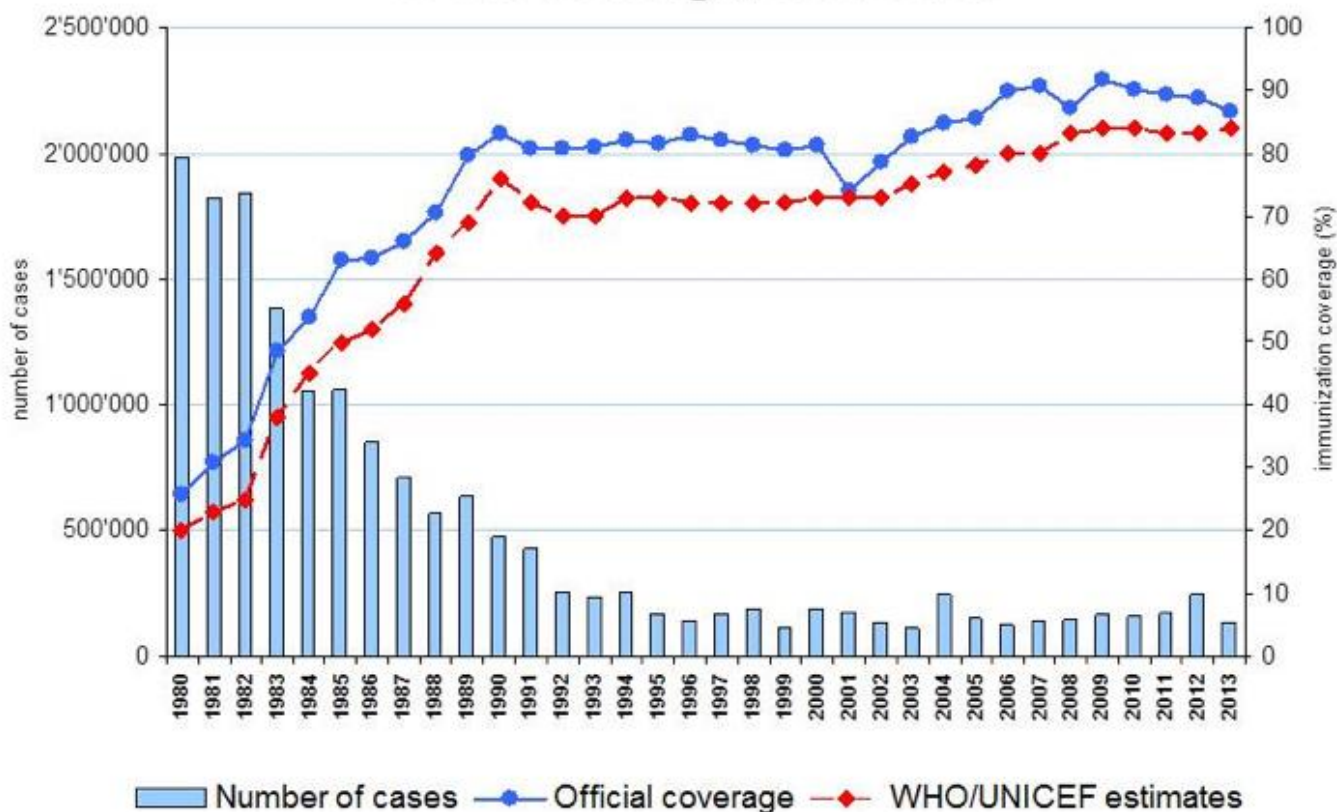


Pertussis epidemiology



WHO estimate of global burden of pertussis

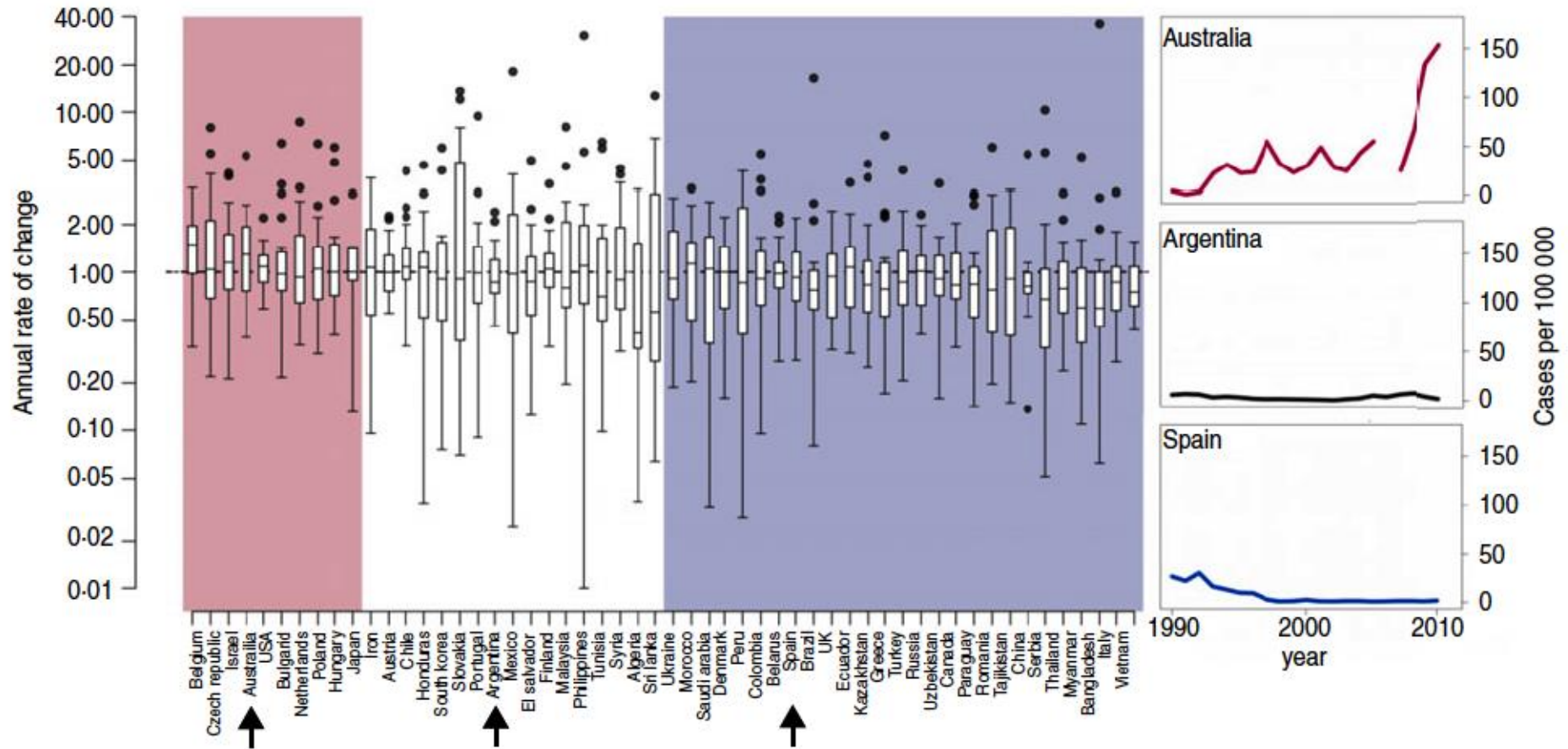
Pertussis global annual reported cases and
DTP3 coverage, 1980-2013



Source: WHO/IVB database, 2014
194 WHO Member States.
Data as of July 2014

Date of slide: 15 July 2014

Pertussis epidemiology varies with settings



- What about Africa?
- Epidemiology data incomplete/missing: possible epidemic!!
- Need for vaccination policy review??



Measles epidemiology



Vaccine Preventable Deaths in <5 years: 2008

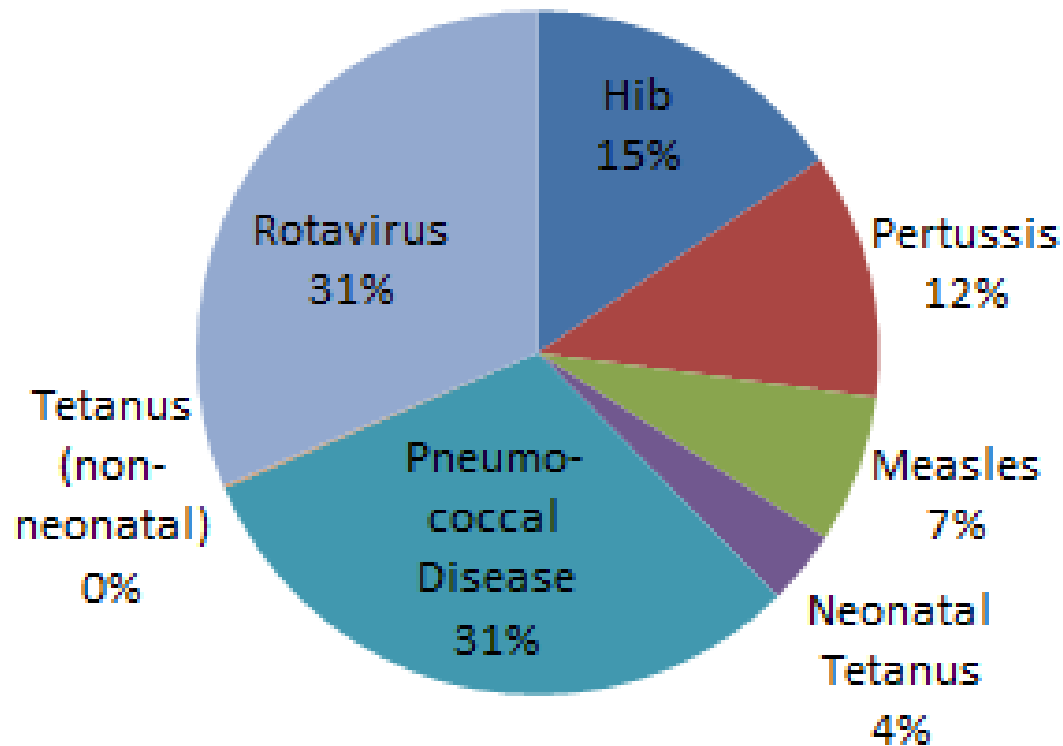
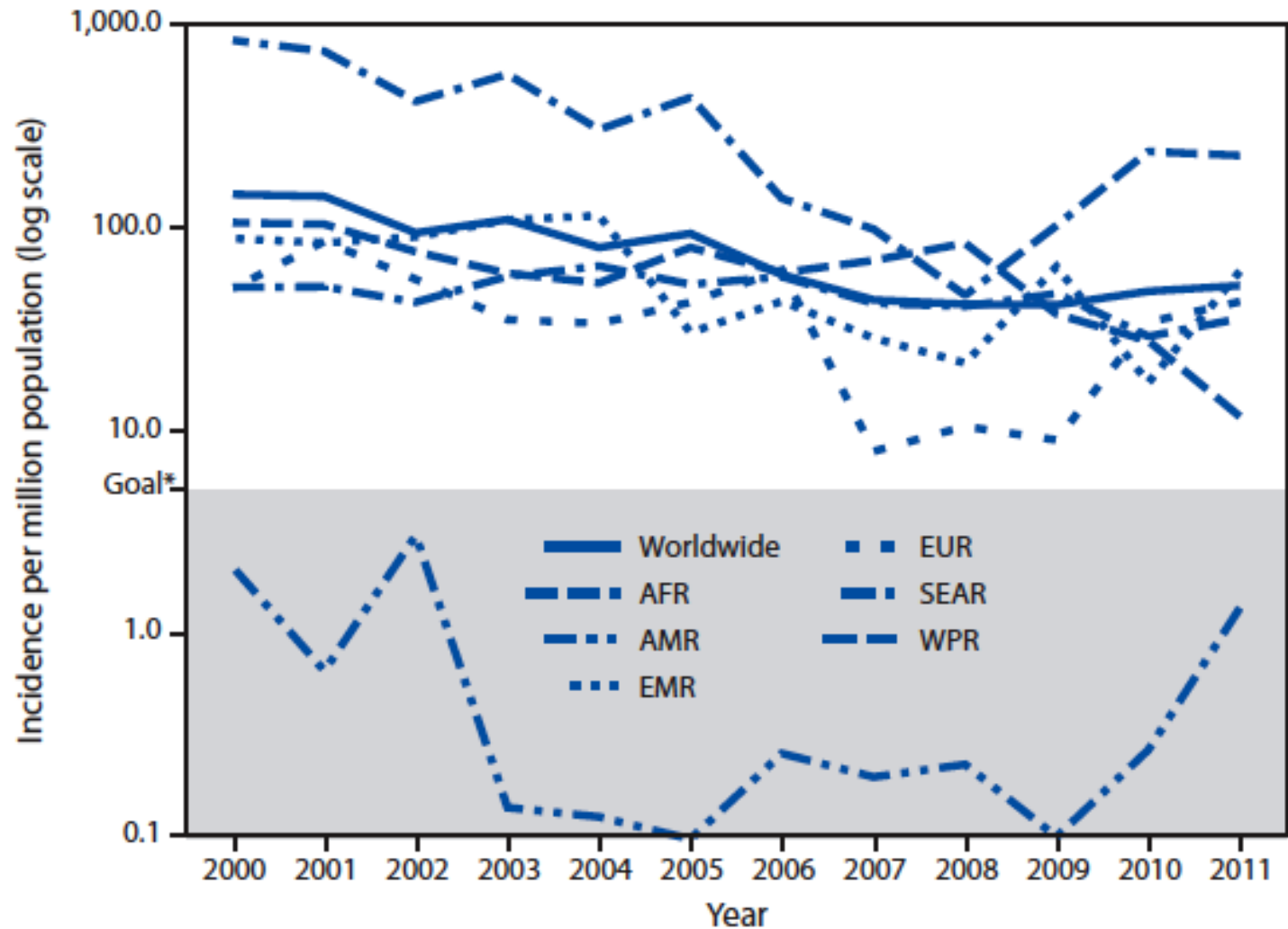


FIGURE. Reported measles incidence per million population, by World Health Organization region and worldwide, 2000–2011

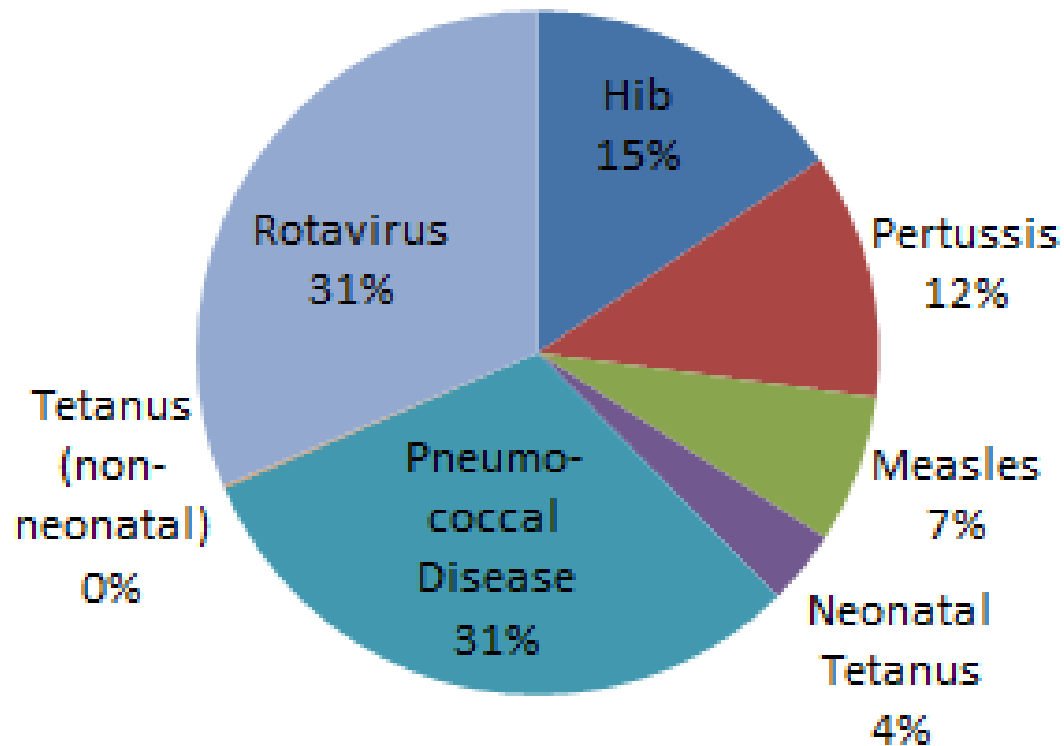


Abbreviations: AFR = African; AMR = Americas; EMR = Eastern Mediterranean; EUR = European; SEAR = South-East Asia; WPR = Western Pacific.

* As a milestone to measles eradication, the World Health Organization has set a goal of reducing the global incidence of measles to <5 cases per million population by 2015.

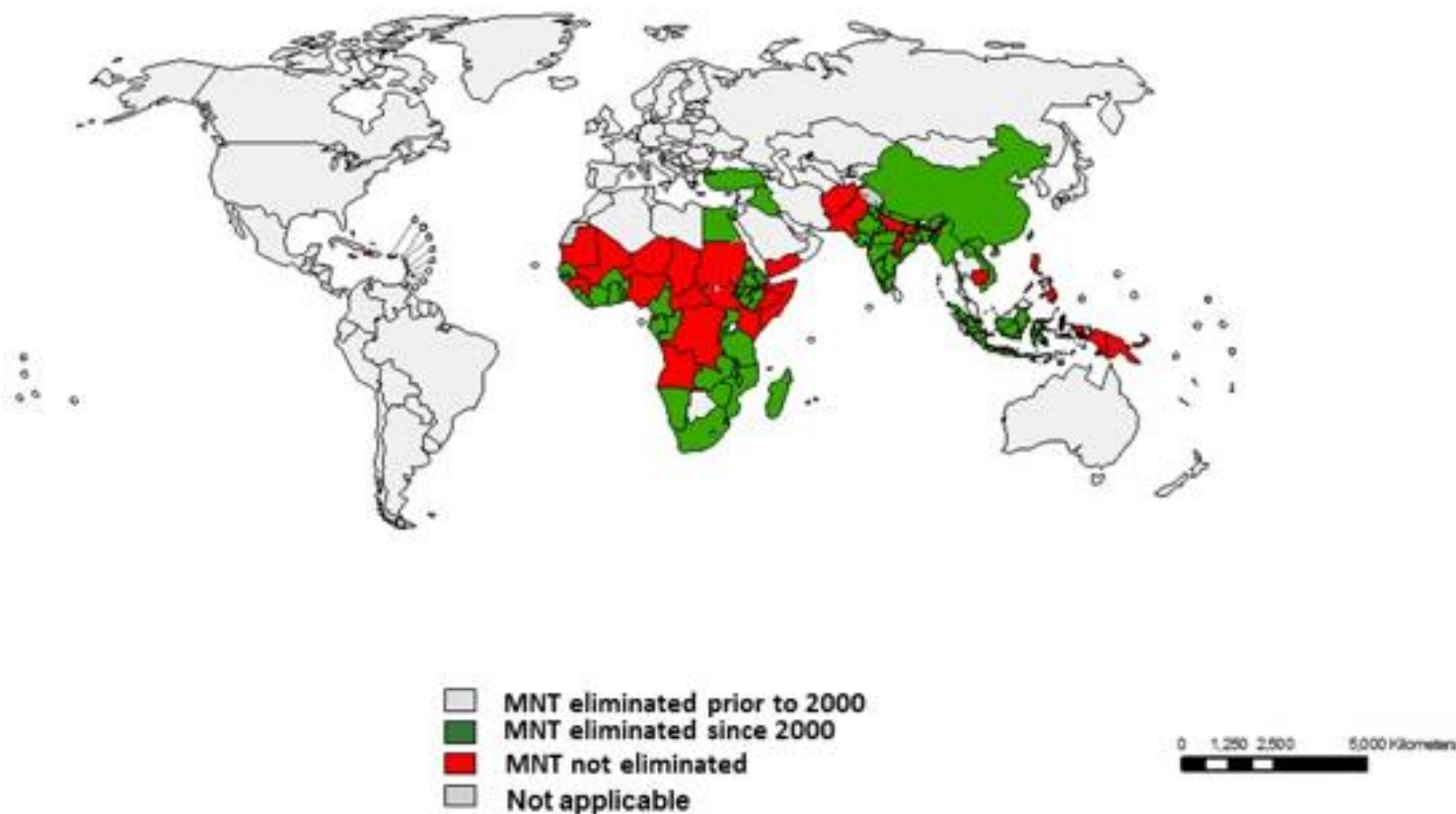
Tetanus epidemiology

Vaccine Preventable Deaths in <5 years: 2008



35 Countries eliminated MNT between 2000 & June 2014

*(Plus 23 States out of 35 in India, Ethiopia all except Somali region and 29 provinces out of 33 in Indonesia) leaving 24 countries yet to eliminate MNT



Data Source: WHO/UNICEF database, May 2014

194 WHO Member States.

Map production: Immunization Vaccines and Biologicals, (IVB), World Health Organization

Date of Slide: 20 June 2014

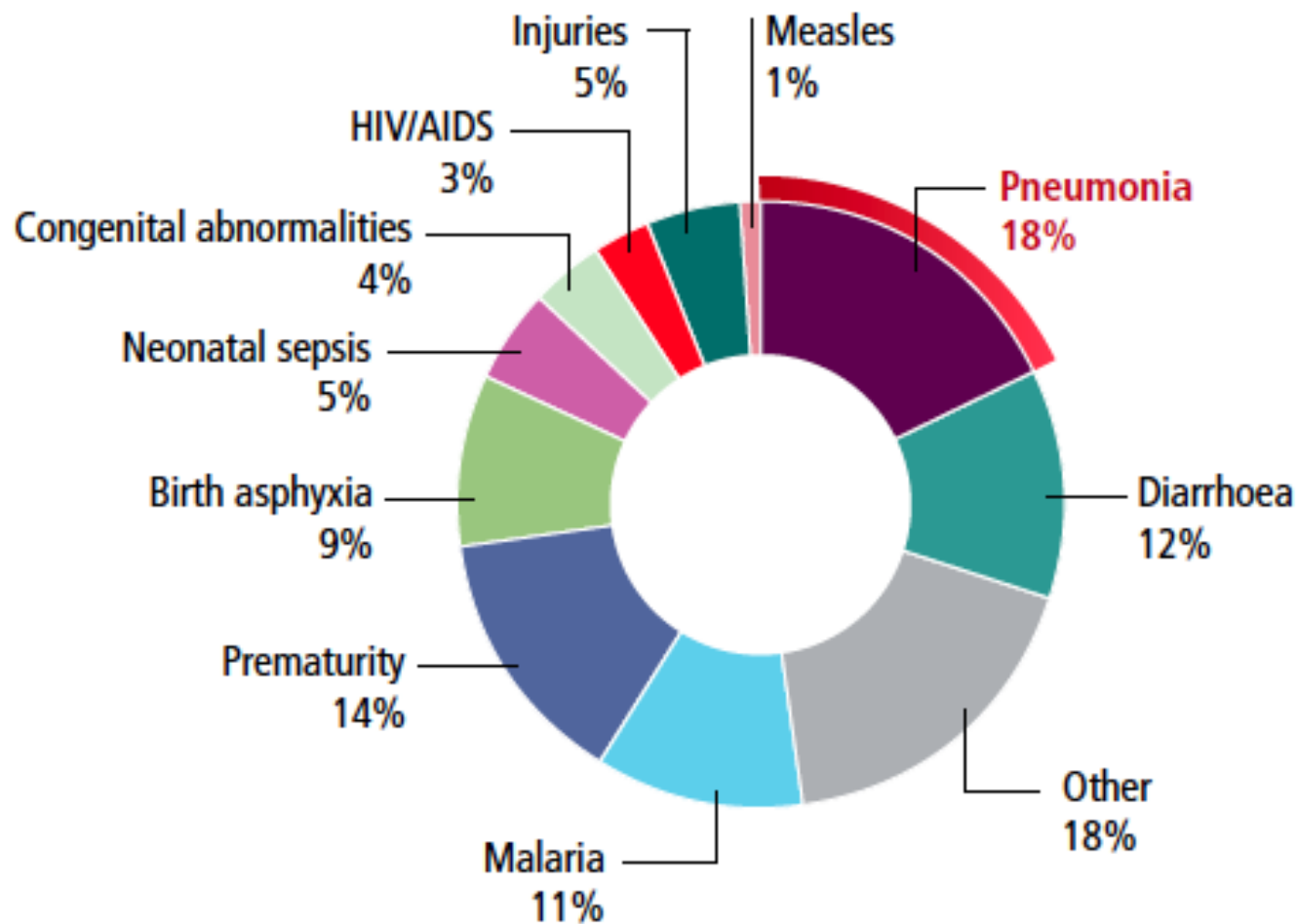
The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area, or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.
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http://www.unicef.org/health/index_43509.html

Pneumococcal epidemiology

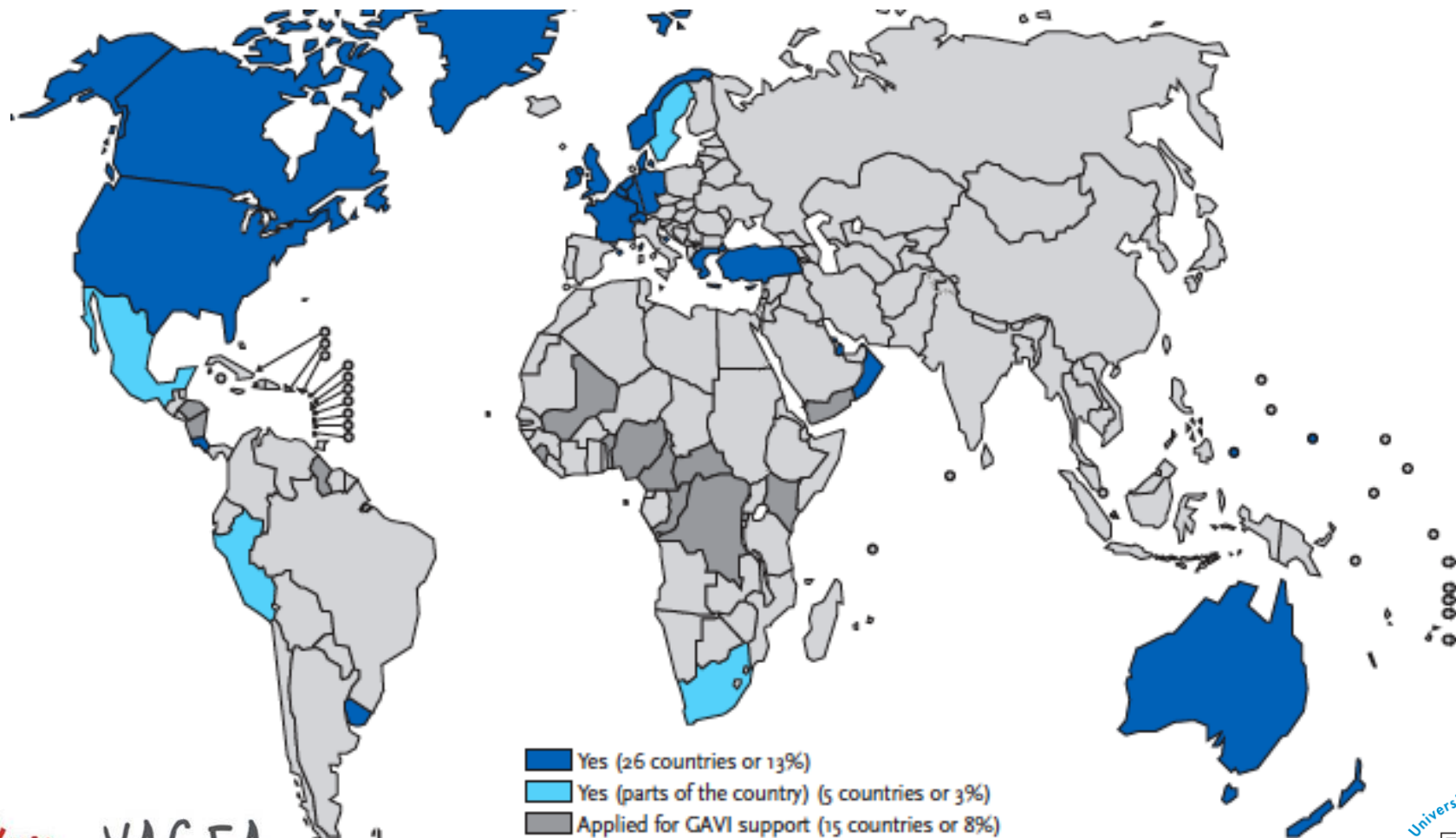


Causes of deaths in <5 years: 2012



Source: WHO, World Health Statistics 2012

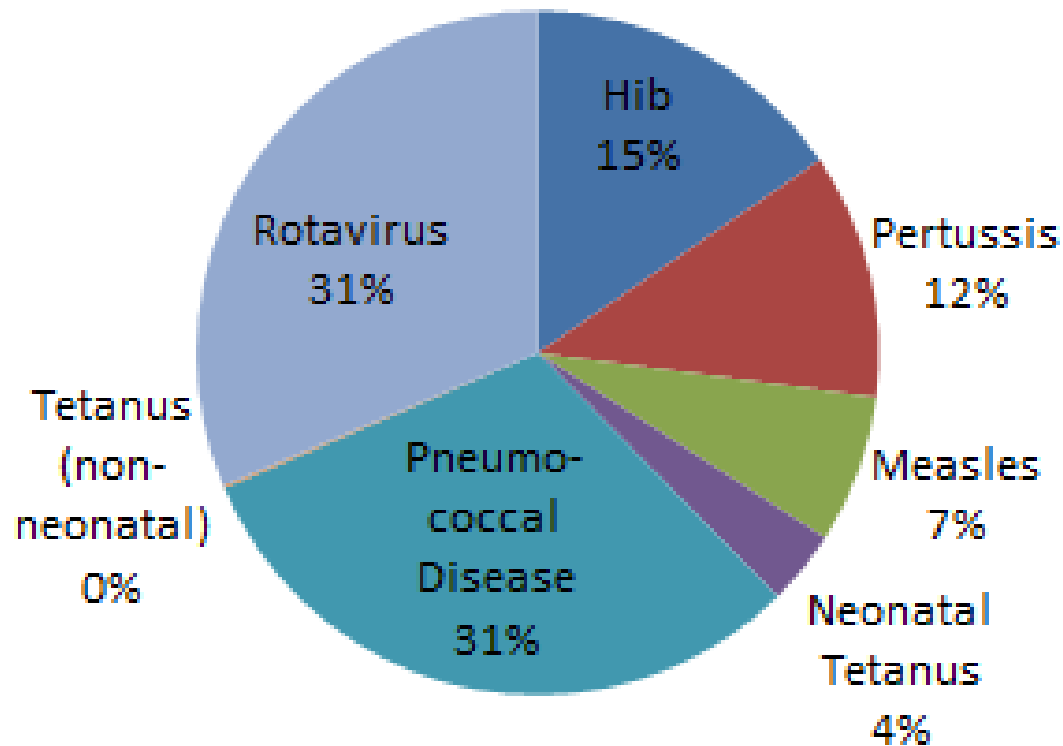
PCV introduction in the national Immunization programs, 2008



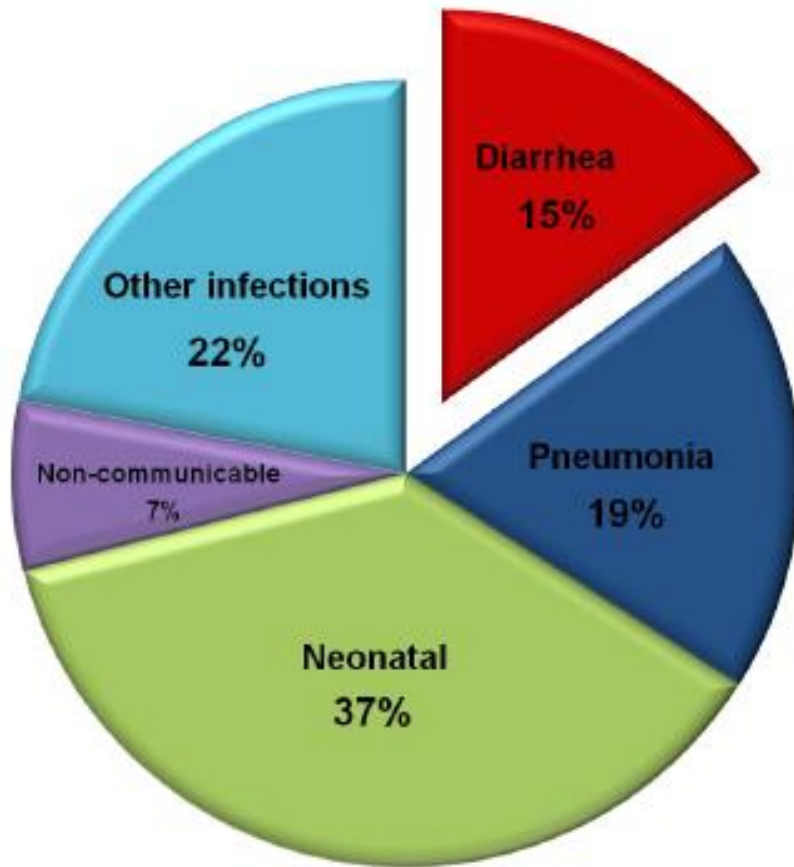
Rotavirus epidemiology



Vaccine Preventable Deaths in <5 years: 2008



Global childhood deaths due to diarrhea



- In 2008, 15% of all deaths in children <5 years of age due to diarrhea
 - ~1.3 million (0.8 to 2.1 million) childhood diarrhea deaths globally

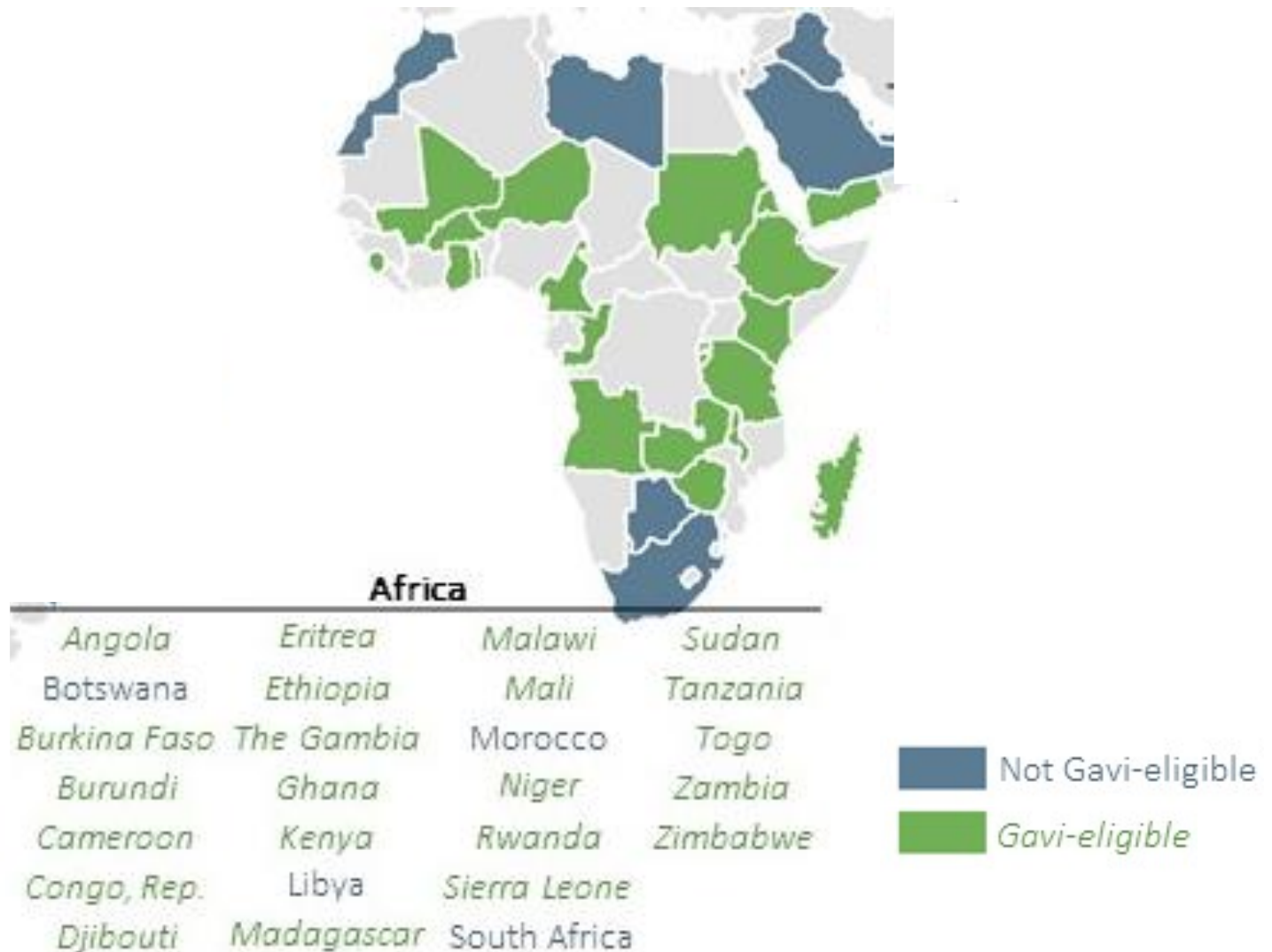
Black et al 2010 Lancet



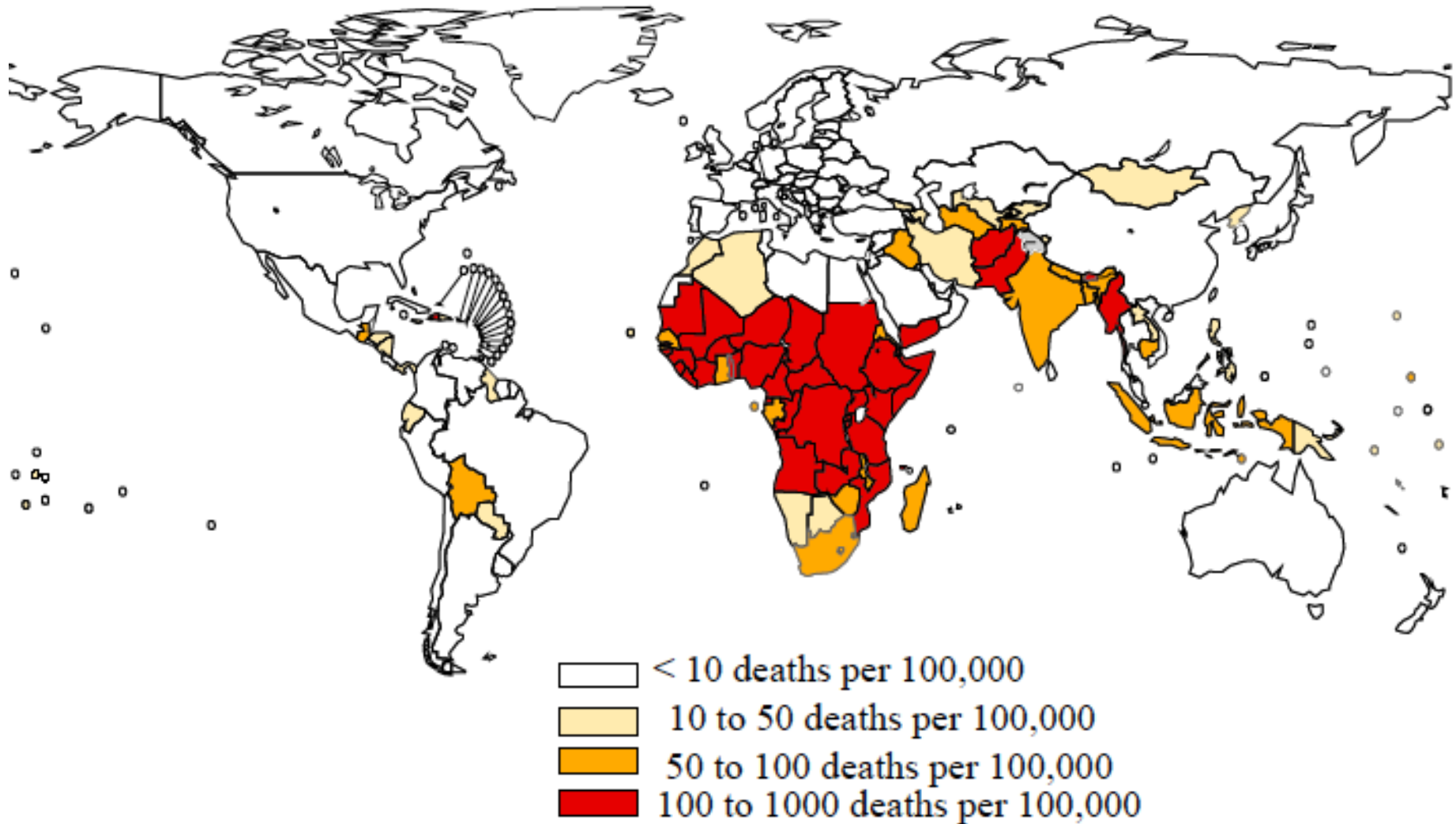
<http://www.sabin.org/sites/sabin.org/files/Jacqueline%20Tate.pdf>



National RV introduction as of 1st Sep 2014

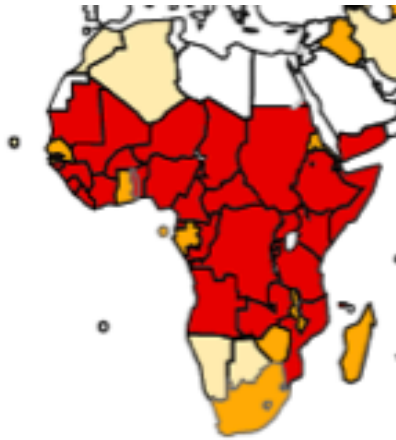


Rates of rotavirus mortality by country, 2008



<http://www.sabin.org/sites/sabin.org/files/Jacqueline%20Tate.pdf>

National RV introduction as of 1st Sep 2014



Africa

| | | | |
|--------------|------------|--------------|----------|
| Angola | Eritrea | Malawi | Sudan |
| Botswana | Ethiopia | Mali | Tanzania |
| Burkina Faso | The Gambia | Morocco | Togo |
| Burundi | Ghana | Niger | Zambia |
| Cameroon | Kenya | Rwanda | Zimbabwe |
| Congo, Rep. | Libya | Sierra Leone | |
| Djibouti | Madagascar | South Africa | |

 Not Gavi-eligible
 Gavi-eligible

Polio eradication endgame plan by WHO

Figure 4: Circulating vaccine-derived poliovirus cases by type, 2010-2012



◆ cVDPV1

◆ cVDPV2

◆ cVDPV3

Data as of 19 February 2013

Three major deadlines missed prompted a critical review of the programme:

- Interruption of transmission by 2000
- Certification of eradication in 2005
- Interruption of transmission by 2012



In conclusion

- Improved vaccination coverage results to reduced mortality associated with VPD
- Africa has made steady progress in increasing vaccination coverage
- Most countries have sub-optimal coverage
- Many more lives can be saved in Africa through improved vaccines uptake
- We all have responsibilities to save these lives. Know your role! Take up your role!

