

Meeting of the Strategic Advisory Group of Experts (SAGE) on Immunization 23-26 September 2024 Hybrid Meeting/ WHO HQ

Draft Agenda

Time CET	Session	Purpose of session, target outcomes and questions for SAGE	Duration
9:00	Closed SAGE meeting	Preparation of the sessions of the day.	1h 45 min.
10:45	Break	Break	15 min.
11:00	Opening and welcome – introduction of participants		20 min.
	K. O'BRIEN. Director Immunization, Vaccines and Biologicals (IVB). World Health Organization (WHO).		
	J. HOMBACH. SAGE Secretariat. WHO.		
	H. NOHYNEK. SAGE chair.		
11:15	Global reports – Session 1	FOR INFORMATION	1h 30
	Report from the Director of IVB. K. O'BRIEN. WHO. 20 min.		min.
	Update from Gavi. S. NISHTAR. Chief Executive Officer Gavi, the Vaccine Alliance. 20 min.		
	Discussion. 50 min.		
12:45	Lunch Break	Break	1h
13:45	IA2030 and Regional updates – Session 2 Introduction, F. OLAYINKA, SAGE member, 5 min.	FOR DISCUSSION	1h (3h00 in
	Regional progress against IA2030 Targets. Presentations from AFRO, EMRO, EURO, PAHO, SEARO, WPRO. 5 min./region	Independent technical review of the annual results of global IA2030 Monitoring and Evaluation (M&E) Framework, including analyses of global and regional progress towards IA2030 impact goal	total)
	Q&A. 55 min.	targets, and strategic priority objectives. Review is supplemented by assessment of progress against region-specific goals and targets.	
14:45	Break	Break	15 min.
15:00	IA2030 and Regional updates — Session 2 (continued)	FOR DISCUSSION	2h
	Global progress against IA2030 Impact Goals and Strategic Priority indicators. N. BAR-ZEEV & T. CERNUSCHI. WHO 30 min.		
	Discussion. 90 min.		

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9:00	Closed SAGE meeting	Development of recommendations of day 1. Preparation of the sessions of the day. Other important discussion items.	1h 45 min.
10:45	Break	Break	15 min.
11:00	RSV – Session 3	FOR RECOMMENDATION	1h 5 min. (4h in total)
	Introduction to session, K. NEUZIL. SAGE RSV WG chair. 5 min.	SAGE is being asked to consider if passive immunization should be recommended as an	
	RSV global burden of disease, epidemiology & seasonality. P. MUNYWOKI. US CDC Kenya. 15 min.	effective strategy for preventing disease caused by RSV in young infants. Two approaches to passive immunization will be presented to SAGE for recommendation, including vaccines administered to pregnant persons and long-acting monoclonal antibodies administered to infants. Product-specific evidence related to effectiveness and safety for both products will be presented, as well as programmatic considerations.	
	Nirsevimab phase III trial, licensure status, post- authorization data and GRADE tables. E. SPARROW. WHO. 35 min.		
	Q&A. 15 min		
12:15	Lunch Break	Break	1h
13:15	RSV – Session 3 (continued)	FOR RECOMMENDATION	1h 45
	RSV maternal vaccine phase III trial, licensure	The specific questions for SAGE are the following:	min.
	status, and post-authorization data. D. FEIKIN. WHO. 30 min.	 Should the RSV pre-F vaccine (Abrysvo®, Pfizer) be recommended for use in pregnant people in a single-dose schedule to prevent severe RSV disease in infants? Should a single dose of the RSV long-acting human recombinant monoclonal antibody (mAb) (nirsevimab) be recommended for infants born during or entering their first RSV season to prevent severe disease? 	
	GRADE and EtR framework maternal vaccine. T. CHERIAN. MMGH. 15 min.		
	Benefit: Risk analysis of maternal vaccination with RSVPreF in South Africa. M. JIT. LSHTM. 10 min.		
	RSV maternal vaccine impact study update, S. MAHDI. SAGE member. 10 min.		
	Cost-effectiveness analysis of both products, C. PECENKA. PATH. 10 min.		
	Implementation of products in LMIC settings: GA determination, seasonality, ANC delivery, birth dose delivery. R. KARRON. JHSPH. 15 min.		
	Q&A. 20 min.		
15:00	Break	Break	15 min
15:15	RSV – Session 3 (continued)	FOR RECOMMENDATION	1h 20 min.
	Global market study on RSV immunization products, T. PRASAD. WHO. 5 min.		
	Draft Recommendations from Working Group, K. NEUZIL. SAGE member. 20 min.		
	Discussion. 1h		
16:35	Cholera – Session 4	FOR DISCUSSION	1h
	Update on the cholera situation and update on recent data P. BARBOZA. WHO. 5 min.	With continued pressure on the global vaccine supply and countries facing major outbreaks, SAGE will be informed on the current cholera epidemiology, vaccine availability and forecast.	

17:35	End of day 2	
	Discussion. 35 min.	
	Q&A. 10 min.	
	Progress and Challenges. P. BARBOZA. WHO. 5 min.	(OCV) Supply and Demand Commission, which was established in 2022/2023.
	Market shaping, supply and procurement. A. OTTOSEN, UNICEF SD and O.BULLOCK, Gavi. 5 min.	SAGE will also be presented with the recommendations of the Oral Cholera Vaccine

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9:00	Closed SAGE meeting	Development of recommendations of day 2. Preparation of the sessions of the day. Other important discussion items.	1h 45 min.
10:45	Break	Break	15 min.
11:00	Polio – Session 5 Session overview. S. MADHI. SAGE POLIO WG chair. 5 min. Update from the Global Polio Eradication Initiative. A. QUDDUS. WHO. 10 min. Q&A. 20 min. Proposed policy framework for the bOPV Cessation Planning. O. MACH. WHO. 15 min. Proposed IPV related recommendations for outbreak response and routine immunization. O. MACH. WHO. 15 min. Q&A. 40 min.	SAGE will be informed on the current status of the polio eradication program and of the implementation of the new polio eradication strategy. SAGE will be asked to endorse the policy framework including triggers and enablers for bOPV cessation planning. SAGE will be updated on the use and clinical development of novel OPVs including new data on concomitant use of nOPV2 and bOPV. SAGE will be asked to review and consider for endorsement:	1h 30 min. (3h in total)
	Update on novel OPVs and new data on concomitant use of nOPV2 and bOPV. A. BANDYOPADHYAY. BMGF. 10 min. Report from SAGE Polio Working Group including proposed recommendations. S. MADHI. SAGE POLIO WG chair. 15 min. Discussion. 50 min.	Policy framework for bOPV cessation planning Revised recommendations on IPV use Recommendation on concomitant use of bOPV and nOPV2	
12:30	Lunch Break	Break	1h
13:30	Polio – Session 5 (continued)	FOR RECOMMENDATION	1h 30 min.
15:00	Break	Break	15 min.

15:15 Congenital rubella syndrome (CRS) prevention -Session 6

Background and context. S. MADHI. SAGE member and N. CROWCROFT, WHO, 10 min.

Q&A. 5 min.

Feasibility of implementing Rubella Containing Vaccine (RCV) introduction in the African region. B. MASRESHA & R. LUCE. WHO AFR. 15 min.

Q&A. 5 min.

Feasibility of implementing RCV introduction in the Eastern Mediterranean region. M. FARID & Q. HASAN, WHO EMR. 10 min.

Q&A. 5 min.

Summary of modeliing the introduction of RCV: Implications of different levels of routine coverage, demography, and wide age-range RCV introduction catchup campaign on the risk of increasing CRS burden. M. FERRARI. Penn State University. K. FREY. Institute for Disease Modeling (IDM). E. VYNNYCKY. UK Health Security Agency and A. WINTER. U. of Georgia in Athens. 20 min.

Q&A. 5 min.

CRS prevention and inequity reduction though RCV Introduction: M&RP guidelines. L. ZIMMERMAN, Chair of IA2030 M&RP Task Team on RCV Introduction. 10 min.

Q&A. 5 min.

Discussion. 30 min.

FOR RECOMMENDATION

2h

20 min.

SAGE is requested to provide their independent recommendation on universal rubella vaccine introduction as recommended by the Measles & Rubella Partnership for the prevention of the current high and increasing burden of congenital rubella syndrome in those countries that have not yet introduced a rubella containing vaccine.

17:15 Session 7: Update on H5N1 and mpox

Update on H5N1 and mpox. M. VAN KERKHOVE. WHO. 15 min.

O&A. 5 min.

SAGE will be informed on the current status of H5N1 and mpox

End of day 3

17:35

ET	Session	Purpose of session, target outcomes and questions for SAGE	Duration
8:30	Closed SAGE meeting (part 1)	Development of recommendations of day 3. Preparation of the sessions of the day. Other important discussion items.	1h 45
10:15	Break	Break	15 min.
10:30	COVID-19 – Session 8	FOR DISCUSSION	2h
	Burden of COVID-19 in 2024 according to priority use groups and Number needed to vaccine. M. VAN KERKHOVE. WHO. 20 min.	Present updated evidence on the burden of disease and recent trends in target populations, as defined in the roadmap. Present data on the cost-effectiveness or NNV metrics on C19 vaccination in target group. Review the performance of vaccines against currently circulating variants. Discuss the plan of work towards the development a vaccine position paper in 2025, and assess the need for policy updates or refinements in the interim.	
	Discussion. 10 min.		
	Review of current vaccine demand, uptake and coverage rates, including GAVI's plans to discontinue funding COVID-19 vaccines in 2025. D. BROOKS. WHO. 15 min.		
	Discussion. 10 min.		
	Vaccine effectiveness against currently circulating variants, by priority-use groups. A. VARMA. WHO. 15 min.		
	Discussion. 10 min.		
	Discussion on Roadmap and next steps. S. KOCHHAR. SAGE COVID-19 WG chair. 40 min.		
12:30	CLOSING		5 min.
12:35	END OF THE PLENARY MEETING		
	Lunch Break	Break	55 min.
12:35	Lunch Dieak	Dieak	oo min.
12:35 13:30	Closed SAGE meeting (part 2)	Any outstanding closed session items not covered previously.	1h 30 min.
		Any outstanding closed session items not covered	1h 30
13:30	Closed SAGE meeting (part 2)	Any outstanding closed session items not covered previously.	1h 30 min. 15 min. 1h 30
13:30 15:00	Closed SAGE meeting (part 2) Break	Any outstanding closed session items not covered previously. Break	1h 30 min. 15 min.