A note from the Chair:

Dear IPAC members and observers,

It’s great to know that we will soon be meeting in person at the 2015 IPAC face-to-face meeting. I am looking forward to seeing old (in experience only!) and new members when we catch up in Geneva later this month.

Thanks for your participation by email and TechNet-21 over the past few months. Most recently, we have appreciated those who have given feedback on the Cascade Training document that was circulated by email and posted on the discussion forum.

The secretariat and I are also very grateful for those who have supported the process of seeking new members in the second round of requesting expressions of interest in serving on IPAC. It has been very helpful to receive suggestions and encouraging to see the range of experts who have shown their interest in supporting immunization practice in this way. We are currently working through the detail of these applications and hope to announce some expansion of our group very soon.

The external evaluation of IPAC’s past functioning and future potential has now completed and the findings are being analysed and collated. Thanks to everyone for supporting this assessment. You will have seen in the meeting agenda that we will get a chance to review and discuss the outcome of this evaluation in a closed session for members.

Other items on the agenda will lead us through a range of immunization practice, many of which (modelling vaccine wastage for example) have been the subject of discussion on TechNet-21 and in other forums. It will be especially good to receive updates on progress in polio eradication, from the Immunization Management Group, given the acceleration in pace which that program is seeing, and discuss the important links to broader immunization strengthening that is an explicit part of the ‘polio legacy’. It is also interesting to see that some items (such as use of vaccination data for system strengthening) overlap with the work of other advisory committees and we appreciate Brad Gessner’s update from IVIRAC in this newsletter – a real advantage that Brad sits on both committees.

All the best, and see you soon...

Chris Morgan

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From the Working Group frontlines

Chris Morgan on the SAGE WG on deployment of new Ebola vaccine candidates:

The results of the Guinea ring vaccination trial have had a major influence on this group’s deliberations. I’m sure IPAC members have noted the publications on this (for example Lancet 2015; 386: 857–66), and the news report from early September flagging the extension of the trial to Sierra Leone. The working group had a face-to-face meeting in mid-August during which the range of efficacy and safety data were considered, as well as some of the practical issues of ring vaccination - the fact that a trial of this nature was feasible during an outbreak is especially noteworthy. Since there has been very active discussion by email to formulate a conclusion and draft recommendation that can be presented to the SAGE October meeting (which takes place one week after IPAC).

Alejandro Ramirez (WHO/EPI) on the Polio SAGE WG:

The 68th World Health Assembly endorsed the Strategic Advisory Group of Experts (SAGE) recommendation for a synchronized switch from tOPV to bOPV in all 155 OPV using countries and territories during a two week period in April 2016 (April 17-May 1, 2016, to be endorsed by SAGE in its meeting of October 2015).

The SAGE is monitoring the progress on polio eradication on an ongoing basis and will review the status of IPV introductions globally, as well as all other readiness criteria—and in particular, the progress towards interruption of persistent cVDPV type 2 outbreaks—to confirm the planned dates for the switch.

The SAGE Working Group on Polio, in a meeting convened in Geneva in September 2015, examined the status of preparedness for the globally synchronized switch, and unanimously agreed to recommend to SAGE, at its October 2015 meeting, that the switch is confirmed for April 2016.

The members of the working group commended the immense work done in preparation for the switch. However, the group’s report emphasised three areas of particular risk that need to be addressed:

- Containment – which they will say needs acceleration;
- Pakistan – they will express concern that Pakistan has not planned sufficient tOPV rounds before the switch, and welcome Pakistan’s plan to review this, in consultation with its TAG; and
- Current VDPV2 outbreaks – they will emphasise the importance of the current VDPV2 outbreaks being stopped within the stipulated four-month window.

The working group will report to SAGE on 20 October, and SAGE will make the final recommendation.

First two VMH Modules published

After years of extensive work on numerous iterations and thanks in great part to the expertise and diligence of the late Andrew Garnett, WHO/EPI’s Programme Operations team was delighted to recently announce the finalization and publication of its first two modules of the Vaccine Management Handbook series:

(1) How to monitor temperatures in the vaccine supply chain (WHO/IVB/15.04)
http://apps.who.int/iris/bitstream/10665/183583/1/WHO_IVB_15.04_eng.pdf

(2) How to use passive containers and coolant-packs for vaccine transport and outreach operations (WHO/IVB/15.03)
http://apps.who.int/iris/bitstream/10665/183584/1/WHO_IVB_15.03_eng.pdf

An additional three modules are near finalization on the following subjects:

- Stock Management
- Cold Chain Capacity
- Repair and Maintenance
VPPAG Highlights - by D. Kristensen

The Vaccine Presentation and Packaging Advisory Group (VPPAG) continues to advance constructive dialogue between industry and the public sector to improve the presentation, packaging, and delivery of vaccine products and to harness new innovation and maximize the appropriateness of immunization products for public-sector use.

The VPPAG barcode working group is assessing adoption by vaccine manufacturers of GS1 standard barcodes on secondary and tertiary vaccine packaging which was agreed to and included in the WHO PSPQ version 2, understanding country-level interest to use barcodes for track & trace, and is in early stage conversations with UNICEF on next steps for serializing the primary packaging (e.g., vial) in line with US and EU requirements.

The VPPAG delivery technology working group was created this year following recommendations from the WHO Next Generation Vaccine Technology meeting held in February 2014 as well as the VPPAG face-to-face meeting held in New Delhi in October 2014. The working group will focus on new delivery and primary container technologies in support of VPPAG’s core mission. Initial topics for the working group include microneedle technologies, bundling of multi-component (e.g., lyophilized vaccine and diluent) products, and novel primary containers. The working group’s draft terms of reference are being finalized this month and include:

- Provision of guidance around individual technology categories,
- Developing generic preferred product profiles for delivery technologies, combination products, and primary container packaging where needed, and
- Holding bilateral consultations between technology developers and the public sector.

The VPPAG packaging working group is directing its energies to vaccine product inserts and insulated pallet shipping containers. For both scopes of work, assessment of country needs is paramount with the VPPAG packaging working group driving the assessment for product inserts and UNICEF Supply Division handling the assessment for insulated pallet shipping containers.

Update on WHO’s Immunization and Vaccine Implementation Research Advisory Committee (IVIR-AC) - by Brad Gessner

WHO’s Immunization and Vaccine Implementation Research Advisory Committee (IVIR-AC) held its annual meeting during June 2015.

Topics included 1) Non-specific immunological effects of vaccines; 2) polio vaccine modeling; 3) Decade of Vaccine Economic evaluation; 4) impact evaluation of hepatitis B vaccines; 5) pertussis impact modeling comparison; 6) dengue vaccine modeling comparison exercise; 7) research methods for community vaccine acceptance studies; 8) proposed analysis of EPI surveys, included assessment of missed opportunities for immunization (MOI); and 9) research to improve methods for monitoring of immunization programmes. The last three sessions were of particular interest to the IPAC audience.

For community vaccine acceptance studies, IVIR-AC decided to establish a subgroup to assist in the development of a comprehensive framework, which should include an underlying chain-of-causeality dynamic model of the processes and behaviors that are reflect in data collection, assessment of the effectiveness of interventions to improve vaccine acceptance, and translating research outcomes into programmatic actions.

For analysis of EPI surveys, IVIR-AC concluded that more robust methods were needed, especially for MOI assessment, including a clear definition and algorithm for identifying MOIs (e.g., early doses are likely to be effective and should not be considered MOIs), correlation between MOIs and resulting impact on immunization coverage, reasons for MOIs, an assessment of the need for geographic and temporal repetition of results, use of qualitative methods, and use of new technology such as mobile phones.

For monitoring of immunization programmes, IVIR-AC concluded that documentation for field workers should be brief, teams should be selected on their skill rather than organizational affiliation, scope and outcomes should be defined in advance, qualitative data collection should be considered. Use of data from electronic data collection systems should be prioritized as these systems are replacing paper-based systems, and research should aim to provide information to guide countries with similar immunization programme profiles so that comprehensive evaluations do not need to be replicated in all settings.
More guidance documents on the horizon:

- WHO Guidance Note: Vaccine Diluents - Revision 2015 “The Proper Handling and Use of Vaccine Diluents”
- Introducing solar-powered vaccine refrigerator and freezer systems - A guide for managers in national immunization
- Application of the WHO multi-dose vial policy (MDVP) to bivalent Oral Polio Vaccine(bOPV) in routine immunization practices - WHO Information Bulletin – August 2015

Other immunization news:

WHO’s Vision and Mission in Immunization and Vaccines: 2015 – 2030

This recently finalized document describes WHO’s strategic focus and key roles in achieving the goals of the Global Vaccine Action Plan, across all areas of work and all levels of the organization continuing into the next 15 years.

The strategic directions described in the VMIV document are consistent with ongoing WHO reform and aligned with the Sustainable Development Goals. They reinforce WHO’s longstanding role as an international leader, setting norms, establishing policies, and reaching international agreement on health priorities. They also bring forward more focused roles for WHO in providing technical assistance and managing knowledge and data.

WHO’s Vision and Mission illustrates how the organization plans to evolve its critical role in immunizations and vaccines to meet the needs of future health programmes. It will be used to guide internal decisions about where to focus resources, at what level of the organization, and in which strategic directions.

Upcoming Meetings / Events:

⇒ October 14-15, 2015:
  Geneva, Switzerland – IPAC Meeting
⇒ October 20-22, 2015:
  Geneva, Switzerland – SAGE Meeting
⇒ December 8-9, 2015:
  Geneva, Switzerland – WHO Microneedle Patch Product Development Workshop

A final word from the IPAC Secretariat

We wish to echo Chris Morgan’s thanks to all of you for generously offering your time and feedback as part of the recent evaluation conducted on IPAC. The analysis is just wrapping up and we look forward to a presentation by Burke Fishburn of Big Think Partners at our upcoming meeting, in order to hear about the results.

We are confident that this meeting will offer opportunities for rich discussion both on technical issues and on IPAC operations. Also on the agenda for the closed session reserved for you will be a brief training session on how better to utilize the IPAC Group forum on TechNet.

Please be reminded that we will be having a group dinner at 7PM on the first night of the meeting (Wednesday, October 14th) at the “Duo Coté Restaurant” located in the Hotel Royal (where the meeting is also taking place). Kindly mark your calendars and inform Giselle Richardson (richardsong@who.int) of any dietary restrictions of which we should be aware.

Meanwhile, meeting updates and the finalized agenda are available for consultation and downloading through our IPAC Group site on TechNet. We look forward to welcoming you in Geneva and wish you all safe travels over.

The IPAC Secretariat Team