

What's new on the global vaccine policy agenda?

Joachim Hombach, WHO , 5th June

Christoph Steffen, WHO, 12th June

ARVAC 2024 vaccinology refresher



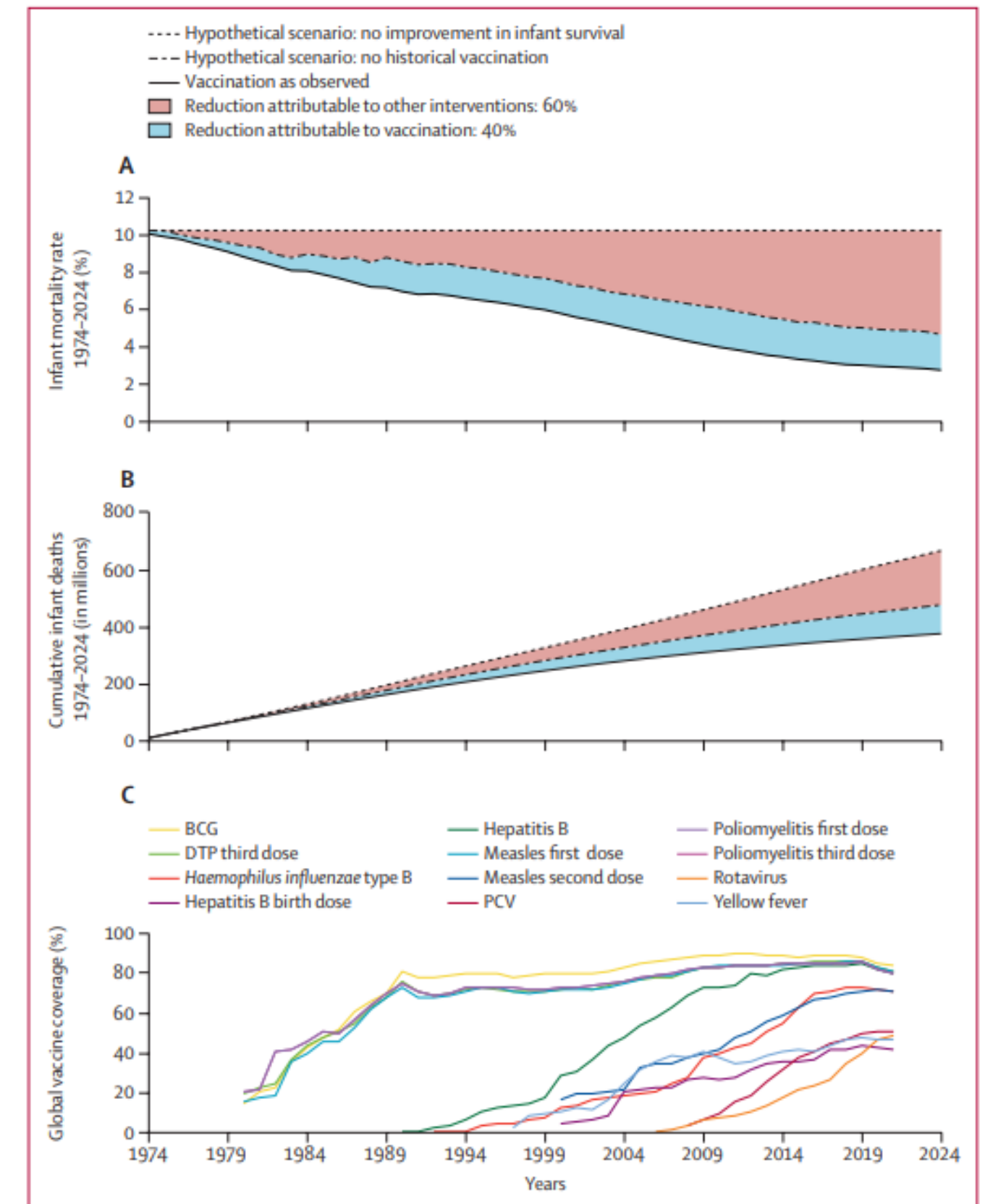
IVB report: 50 years EPI....

Contribution of vaccination to improved survival and health: modelling 50 years of the Expanded Programme on Immunization

Andrew J Shattock, Helen C Johnson, So Yoon Sim, Austin Carter, Philipp Lambach, Raymond C W Hutubessy, Kimberly M Thompson, Kamran Badizadegan, Brian Lambert, Matthew J Ferrari, Mark Jit, Han Fu, Sheetal P Silal, Rachel A Hounsell, Richard G White, Jonathan F Mosser, Katy A M Gaythorpe, Caroline L Trotter, Ann Lindstrand, Katherine L O'Brien, Naor Bar-Zeev

EPI@50 impact modeling analysis published in *the Lancet*:

- Since 1974, vaccination has averted over 154 million deaths and 10.2 billion years of full health were gained (disability-adjusted life years averted)
- Measles vaccination accounts for 60% (94 million deaths averted)
- Vaccination has accounted for 40% of the reduction in infant deaths globally, and over 50% in the African region.
- In 2024, a child younger than 10 years is 40% more likely to survive to their next birthday than if no vaccinations had occurred since 1974.
- Benefits of vaccination continue up to and beyond 50 years of age

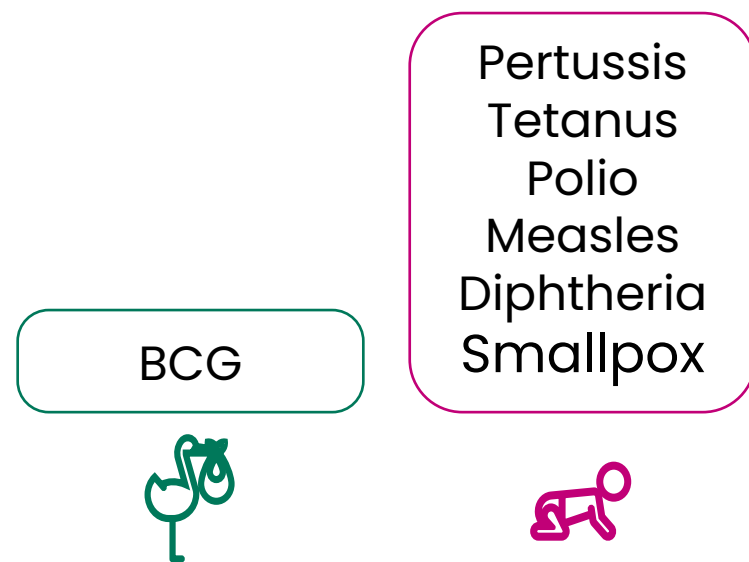


[https://doi.org/10.1016/S0140-6736\(24\)00850-X](https://doi.org/10.1016/S0140-6736(24)00850-X)

The #vaccine preventable diseases has massively expanded

From 7 VPDs in 1974..... to >13 in 2024

7 Global VPDs



1974

Expanded Programme on Immunization **Founded**

acellular
Pertussis
Influenza
RSV

JE
TCV
Meningitis
YF
Malaria
Rabies

RSV
Mumps
Cholera
TBE
Varicella
Hep A

COVID-19
Influenza
Meningitis
Cholera
Rabies

Zoster
RSV
Dengue
Influenza
Meningitis
Mpox
Pneumococcus
Cholera
Rabies

17+
Context
Specific
VPDs

Diphtheria
Tetanus
Pertussis
Hep B
Polio
Measles
Rubella
Hib
PCV
Rotavirus

Diphtheria
Tetanus
Pertussis
Hep B
HPV

COVID-19

13
Global VPDs

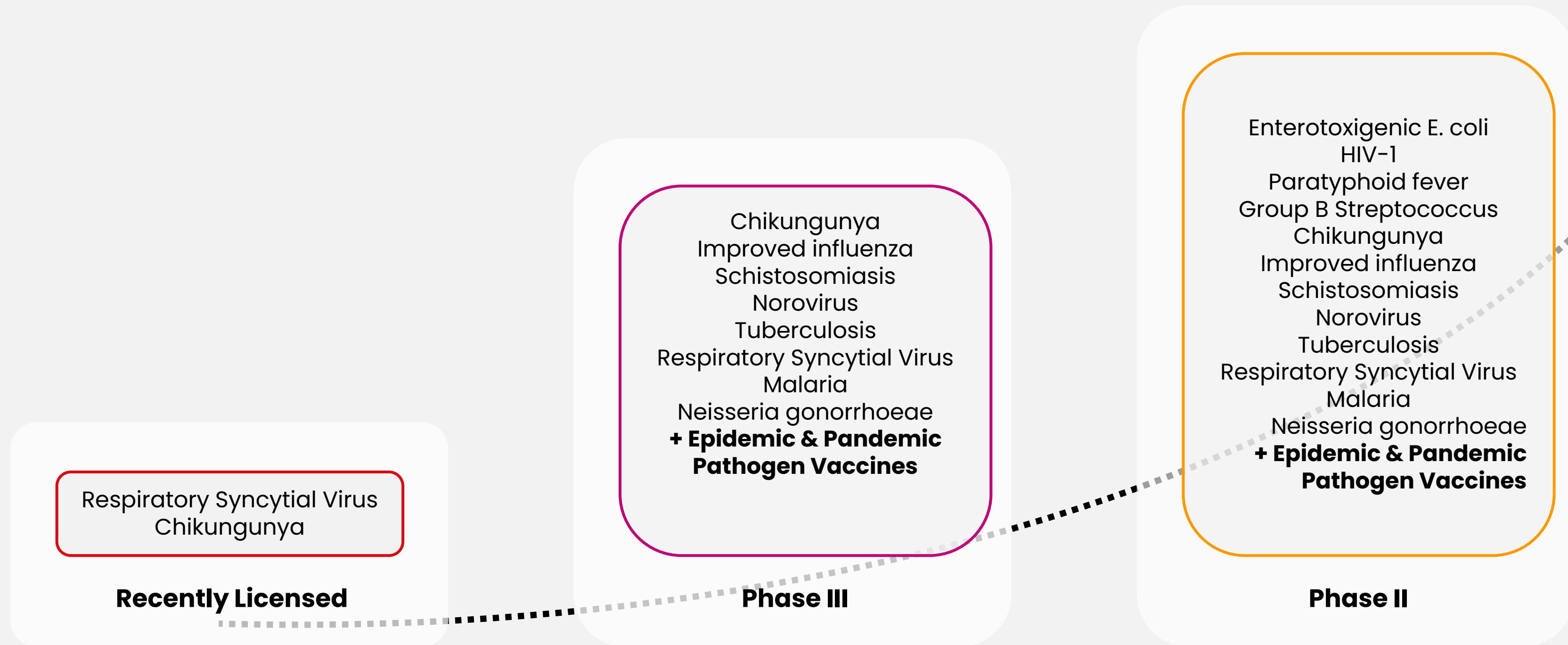
2024

Essential Programme on Immunization
life-course vaccines

Note: *BCG: bacillus Calmette–Guérin; Hib: Haemophilus influenzae type b; HPV: human papillomavirus; JE: Japanese Encephalitis; PCV: pneumococcal conjugate vaccine; RSV: respiratory syncytial virus; TBE: Tick-Borne Encephalitis; TCV: typhoid conjugate vaccine; YF: yellow fever.



And will continue to expand in the short and medium term...



Policy updates released and in preparation/planning

Policy positions released

- Multivalent ACWYX Conj. Vaccine in the meningitis belt, Jan. 2024
- Mumps, March 2024
- Dengue, May 2024
- Malaria, May 2024
- C19 update, May 2024 SAGE meeting report

Policy positions under review or in planning phase

- Ebola, June 2024
- Mpox and smallpox, Aug. 2024
- RSV, end of 2024
- Global MCMCV and Men B, end of 2024/beginning 2025
- Varicella Zoster, end of 2024

2025 and beyond

- Typhoid, end of 2025
- Pneumococcus, end of 2025
- HPV, end of 2025
- Chikungunya, end of 2025
- Yellow Fever, 2026?
- Japanese Encephalitis, 2026?

Major issues ahead

Life-course vaccination options becoming a reality

HPV, MCV2, malaria, dengue, typhoid, pneumococcus adult, influenza, zoster, RSV adult, etc.

Increasing need for country prioritization

- In light of :
 - Ever increasing vaccine portfolio
 - Variable burden of disease and cost effectiveness between countries and within countries
 - Limited fiscal space and absorption capacities of countries
 - Schedule, programme, acceptability and logistic considerations
- NEED for countries to assess different options on objective criteria:
 - Weigh between possible new vaccines introductions
 - Increase coverage of existing vaccines
 - Focus on particular risk groups