

Rwanda introduces vaccine for pneumococcal disease

KIGALI: International leaders in global health will join Rwandan government officials at a press conference in the coming days in Kigali to announce the first national immunisation programme against pneumococcal disease in a developing country.

Pneumococcal disease, which can cause potentially life-threatening illnesses such as pneumonia, meningitis and sepsis, is the leading vaccine-preventable killer of children younger than five worldwide.

On Saturday, 25 April, 2009 international leaders joined Dr. Richard Sezibera, Rwanda's Minister of Health, and a group of doctors and nurses at a rural clinic east of Kigali to administer the first doses of Wyeth's pneumococcal conjugate vaccine, Prevenar*, to Rwandan children. The event marked the first step in the rollout of the national pneumococcal immunisation programme, which aims to vaccinate nearly all Rwandan children younger than one by the end of 2009, and all Rwandan infants on a routine basis, thereafter.

"This is a proud day for Rwanda and an important milestone for the developing world," said Dr. Sezibera. "We are committed to saving the lives and improving the health of our most precious national resource - our children. With the introduction of this vaccine, our goal of significantly reducing child death in Rwanda will now be within reach."

A major step forward for developing countries

While 35 high- and middle-income countries, including South Africa, currently provide routine childhood immunisation against pneumococcal disease, the introduction of the vaccine in Rwanda signals a new era in vaccine access and delivery in the developing world. Thanks to the partnership between developing countries, donor governments and industry, the GAVI Alliance will be able to offer the same access to life-saving, new-generation vaccines currently utilized throughout the industrialised world.

"We applaud the Rwandan government for taking this step, and we are proud to join them in launching a new era in the delivery of vaccines designed to close the gap between rich and poor countries and improve child mortality throughout the developing world. If fully rolled out in GAVI countries, the pneumococcal vaccine could save the lives of more than 440,000 children by 2015. This would help achieve Millennium Development Goal 4," said Dr. Julian Lob-Levyt, CEO of the GAVI Alliance. "Today's event would not be possible without the commitment of public and private partners who are making vaccines available to the poorest countries."

"Combating the burden of serious disease globally is an important part of Wyeth's mission," said Bernard Poussot, Chairman, President and CEO of Wyeth, which donated Prevenar to Rwanda and the Gambia through the GAVI Alliance. "Wyeth is committed to protecting current and future generations from pneumococcal disease and continuing to expand access to Wyeth's pneumococcal conjugate vaccine around the world. It is in that tradition that Wyeth is honoured to provide GAVI with more than three million doses of Prevenar to help Rwanda and the Gambia protect its children against the potentially devastating consequences of this disease."

The millennium development goal (MDG) related to child health, MDG4, addresses a serious disparity in child mortality, which is much higher in poor versus wealthy nations, and which is significantly driven by lack of access to appropriate health care, including treatment and prevention of serious infections. The routine use of new vaccines against the two leading killers of children under age five, pneumonia and diarrheal diseases, could save more than 800,000 lives by 2015 and put low-income countries significantly closer to reaching their MDG4 targets.

To help make this program possible in Rwanda, and in the Gambia in June of this year, Wyeth contributed more than three million doses of the pneumococcal vaccine through GAVI. Prevenar, originally introduced by Wyeth Pharmaceuticals in the United States in 2000, is the first new generation vaccine to be introduced to the developing world by the GAVI Alliance. The United States Agency for International Development (USAID) has provided extensive technical support and worked closely with the Rwandan Ministry of Health to make the rollout of pneumococcal vaccine a possibility. In addition, the World Health Organisation provided technical support and USAID donated cold storage equipment where the vaccine is kept until it is administered.

The devastating toll of pneumococcal disease

Pneumococcal disease takes the lives of 1.6 million people each year - including up to one million children under five years of age. More than 90% of these deaths occur in developing countries. Pneumonia, the most common form of serious pneumococcal disease, accounts for one in every four child deaths, making it the leading cause of death among children younger than five years of age.

A sustainable strategy for reducing child mortality

Since 2000, GAVI, a global partnership that includes WHO, UNICEF, the World Bank and funded by donor countries and the Bill and Melinda Gates Foundation, has achieved remarkable success in creating and implementing new methods of development assistance for health. Its focus has been to provide innovative financial support to accelerate the introduction of basic vaccines and strengthen health systems in developing countries, including in Rwanda. As a result, more than 200 million children in 72 countries have been immunised against as many as six common, life-threatening diseases. The Alliance is now expanding its support for new generation vaccines including against pneumococcal and rotavirus.

The promise of next generation pneumococcal vaccines

To ensure the sustainable supply of pneumococcal vaccines to countries in the future, GAVI has launched a unique financing mechanism known as the Advance Market Commitment (AMC). The governments of Italy, the United Kingdom, Canada, Norway, and Russia, and the Bill and Melinda Gates Foundation launched a pilot AMC against pneumococcal disease with a collective US\$1.5 billion commitment. The pilot is expected to begin implementation in the next few months. New pneumococcal vaccines currently under development may be eligible for AMC funding.

"Financial barriers to vaccines have been overcome," said Dr. Orin Levine, executive director of GAVI's Pneumococcal Accelerated Development and Introduction Plan (PneumoADIP). "The price of action will be measured in dollars. The price of inaction will be measured by the number of children who will lose their lives to a preventable disease."

Private industry continues its efforts to deliver new vaccines that offer protection against the strains of pneumococcal disease that are most prevalent in the developing world. "Wyeth applauds GAVI, the World Bank, and donors for developing innovative finance instruments such as the Advance Market Commitment to spur the development of new vaccines for countries in need. We look forward to working together with GAVI and other global partners to help make the AMC pilot a reality," added Poussot.

*Important Safety Information for Prevenar

In clinical trials, the most frequently reported adverse events included injection site reactions, fever (=38°C/100.4°F), irritability, drowsiness, restless sleep, decreased appetite, vomiting, diarrhea, and rash. Risks are associated with all vaccines, including Prevenar. Hypersensitivity to any vaccine component, including diphtheria toxoid, is a contraindication to its use. Prevenar does not provide 100% protection against vaccine serotypes or protect against non-vaccine serotypes.

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