

Advocacy for Vaccine in LMICs: Focusing on typhoid

Samir K Saha, Ph.D

Child Health Research Foundation

Dhaka Shishu Hospital

Dhaka, Bangladesh

11th International Conference on Typhoid and Other Invasive Salmonelloses March 26-28, 2019 in Hanoi, Vietnam



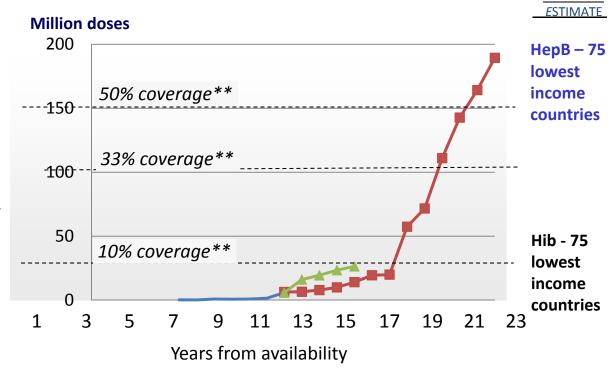


Slide 1

Starting editing from here Samir K Saha, 1/31/2019 SKS1

Why Advocacy and Why we have a dedicated session for this?

- Features of vaccine prevented/eliminated devastating diseases are forgotten
 - Small Pox, Polio, tetanus, Hib disease, etc
 - Mostly true for developed countries
- We are now ambitious
 - Do not want to wait for 20+ years
 - PCV10/13 came to LMIC with 2 years of being in developed country
- Strategy of advocacy needs to the changed as world is changing







The World is Changing!

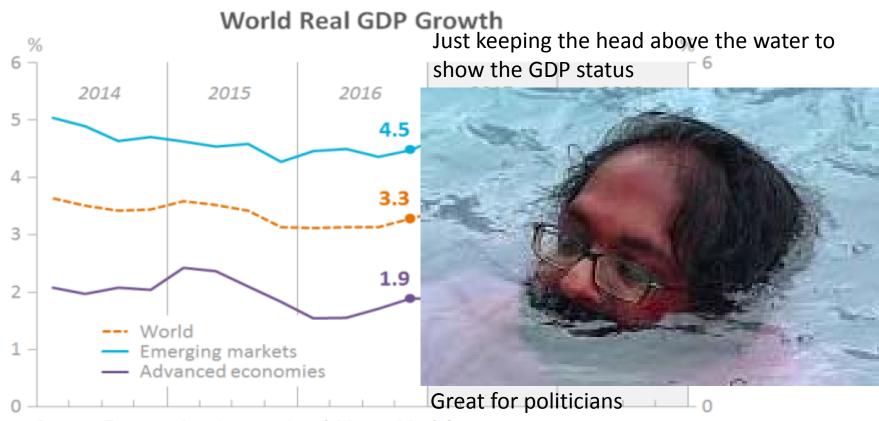
WHY LOW MIDDLE INCOME COUNTRIES (LMIC)?







Growth of the Low Income/Emerging Countries



Source: Euromonitor International Macro MocChallenge to get Gavi support for live saving for vaccine



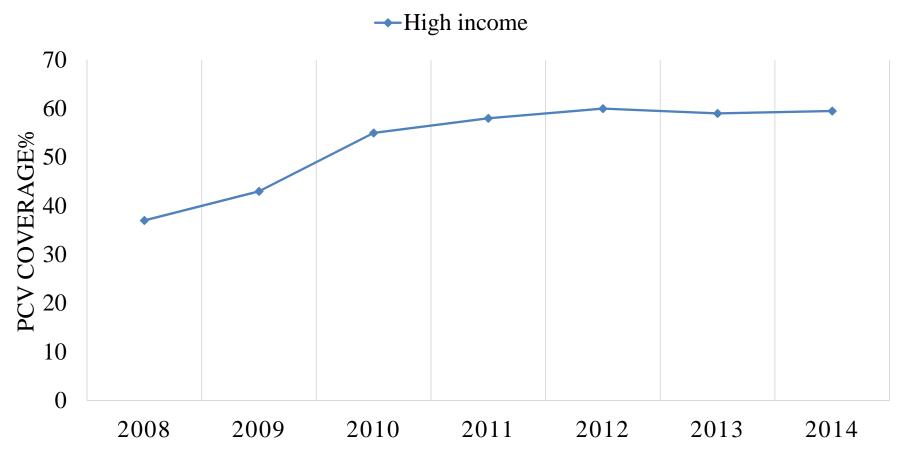
Slide 4

SKS5 Need to remake this slide for animation

Samir K Saha, 2/6/2019

SKS6 Can we find an updates slide on this? Samir K Saha, 2/6/2019

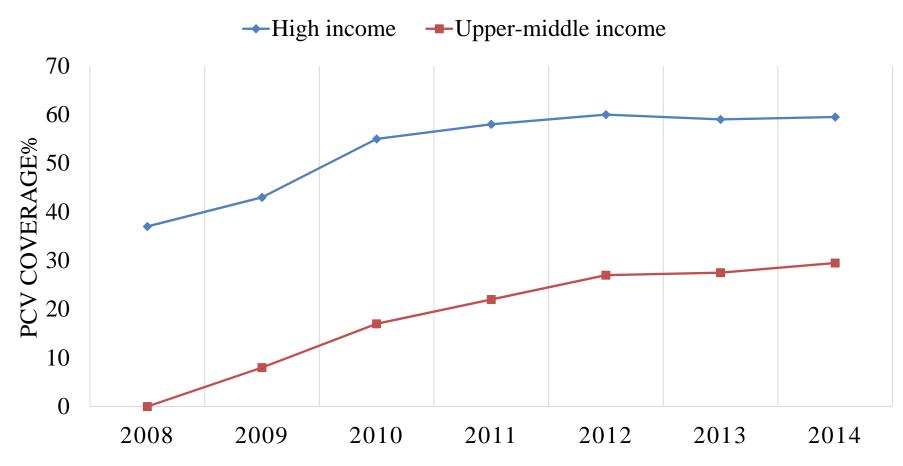
Impact of GDP on Vaccine Uptake







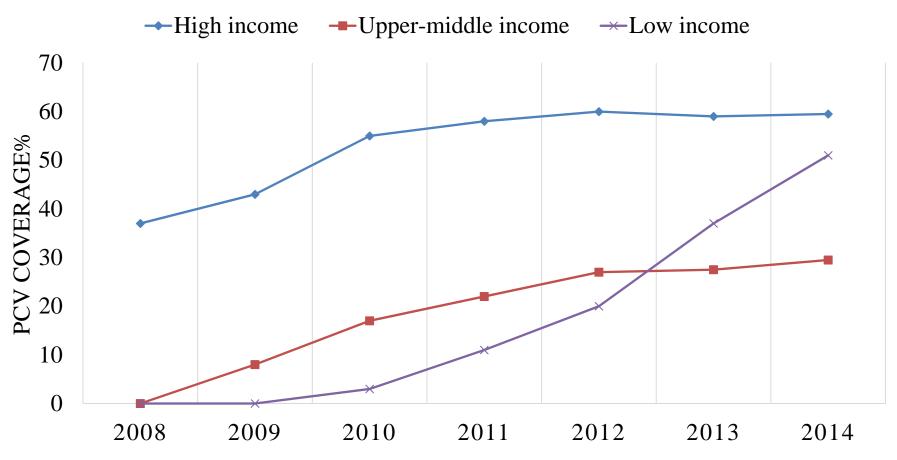
Why Low Middle Income Countries (LMIC)?







Why Low Middle Income Countries (LMIC)?

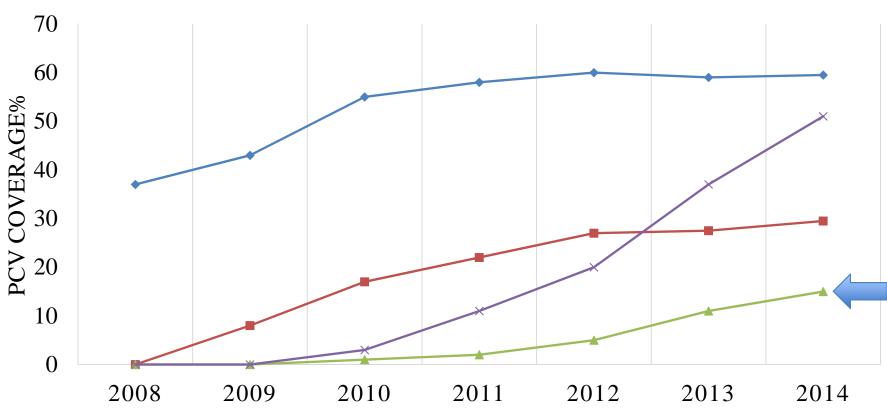






Why Low Middle Income Countries (LMIC)?

→ High income → Upper-middle income → Lower-middle income → Low income







Advocacy then and now LMICS ARE CHANGING DUE TO THE DECLINE OF CHILD MORTALITY





Advocacy then and now THE MAIN ADVOCACY TOOLS WERE DEATHS AND DISABILITIES





Our Days in the Laboratory in 1980s

- Diphtheria cases everyday
- Tetanus was not uncommon
- Pneumococcus and Hib diseases were many though only few laboratories could detect them





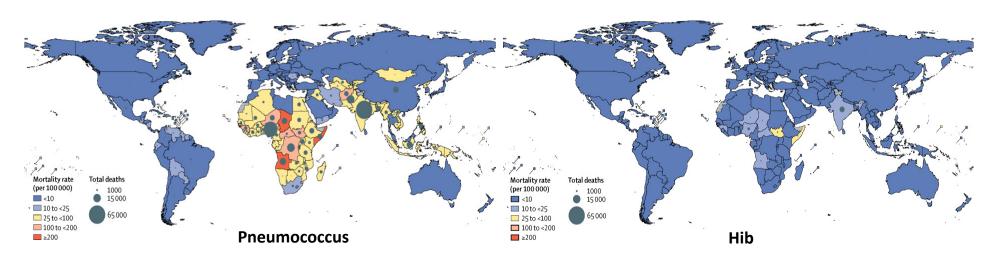
Introduction of vaccines

SIGNIFICANT DECLINE IN MORTALITY. MORE SPECIFICALLY





Country-specific mortality rates and deaths attributable to Pneumococcus and Hib in 2015



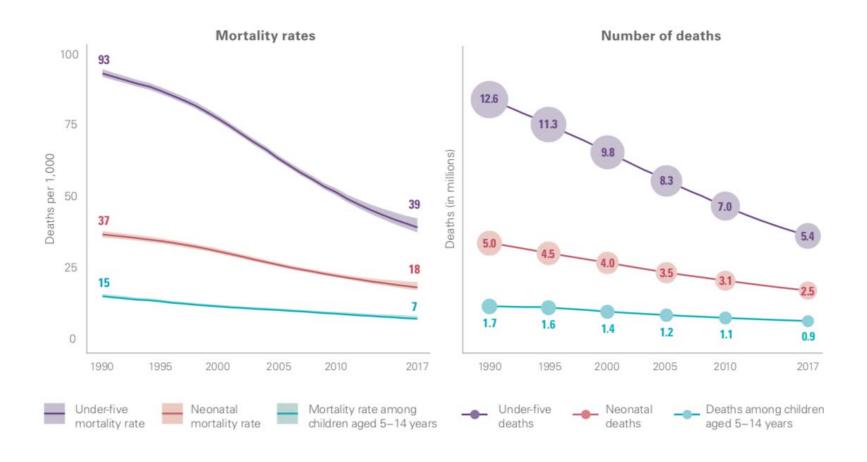
Two vaccines have saved 1.45 million children's lives in the last 15 years

Wahl et al Lancet Glob Hlth 2018





Over all Decline in Child Mortality







What are the barriers to Typhoid Vaccine Introduction

WE ARE STILL LOOKING FOR DEATHS, SEVERITIES AND COMPLICATIONS!!





THE WORLD IS CHANGING – SPECIFICALLY THE DEVELOPING WORLD

MDG

SDG

	1990	2015 (MDG 4)
/year	12.7 million	5.9 million

Aiming to achieve "Good Health and Wellbeing" SDG 3





Typhoid does not with either. It is important we consider the health system implications. Otherwise deaths will be in a Plato, despite the prevention high mortality diseases

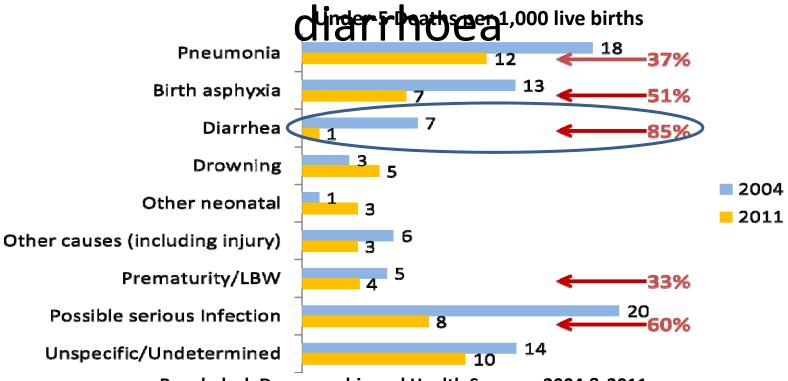
DEATHS ARE USED AS THE TOOL AND SOMETIMES DISABILITIES







Bangladesh - Most of the causes of <5 deaths are declining – remarkably









Slide 18

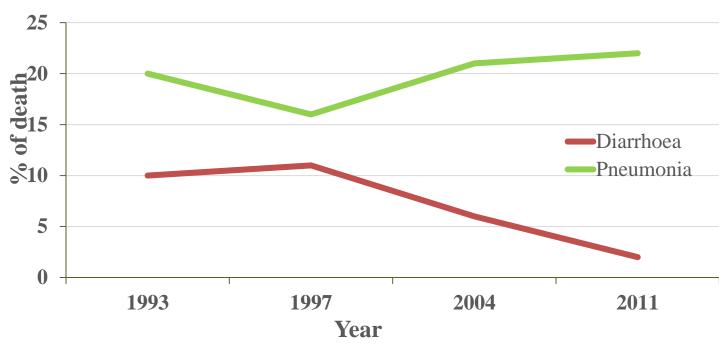
SKS10 Disappointing to see that we are only talking about death not the well beings
Samir K Saha, 2/6/2019

SKS14 We need to calculate the deaths in LMICs

Samir K Saha, 2/8/2019



Proportion of <5 death due to Pneumonia and Diarrhea in Bangladesh









Slide 19

SKS11 May be not required Samir K Saha, 2/6/2019

Possible hesitancy among the policy makers – Why?

- Minimal or no deaths among the Typhoid cases
 - 0.05% (3/6136)

- Advocates need to find a strategies to convince the policy makers and help them to make the right decision(s)
- All needs to be done with evidences → Data
- It should be simpler than Hib and Pneumococcal diseases
 - Few blood culture positive cases
 - Clinical signs were non-specific
 - Diverse aetiology of Pneumonia
 - We had to have vaccine probe studies and so on





Possible challenge of introducing a new vaccine like Typhoid Samir K Saha, 2/6/2019 SKS12

For policy makers

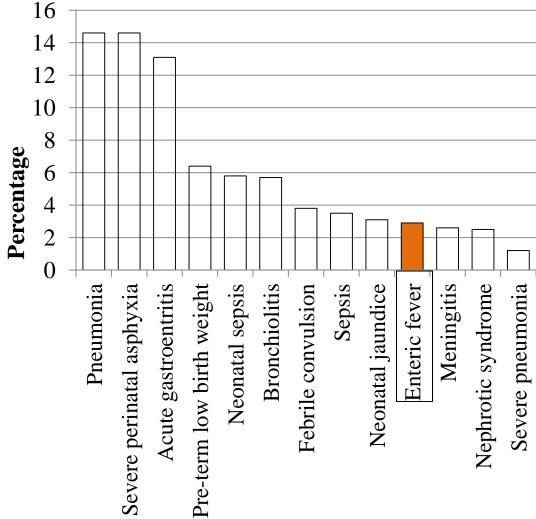
WE CAN EXPLORE THE BURDEN OF DISEASES AT HOSPITALS (OPD & IPD) AND POSSIBLE IMPACT ON "HEALTH SYSTEM"





Admission at Dhaka Shishu Hospital (N=23,064) – the largest pediatric hospital (2017)

- In 2017 to 23,000 admission, 15% of them are pneumonia
- Typhoid is only 3%
- Based on such data, vaccines against pneumonia and meningitis have rightly been prioritized.
- However,

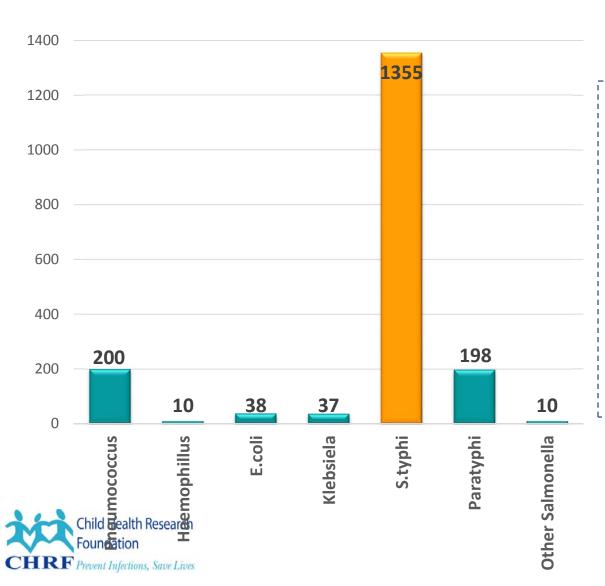






Typhoid – Microbiologically Strong:

Invasive bacterial disease surveillance



Number of blood cultures (17,511) (age

- >2months)
- 1355 S. Typhi
- -72% of all isolates

Predominance of *S.* Typhi

True for other hospitals



Consider Hospital Stay of Typhoid Cases

Fierce competition for beds in public hospitals•In Bangladesh we have only 3 beds per 10,000 population, incomparison to 31 in the US•This leads to refusal of cases that require hospitalization11We hypothesize that refused cases are more vulnerableto death and disability





Competition for Bed and Impact on Health System

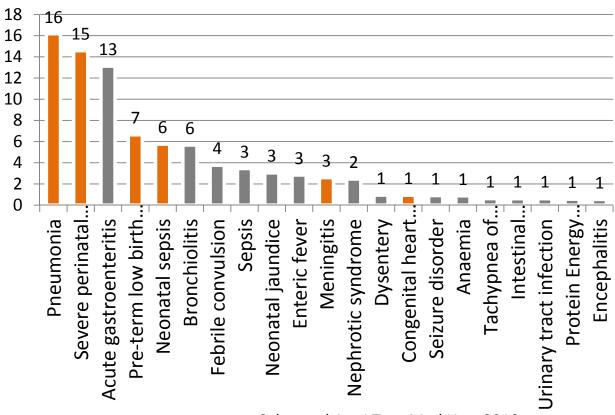
- Bed Occupancy by Typhoid Cases
 - Average hospital stay 6 days (3 -7 days)
 - 15 to 30 beds are occupied by enteric fever cases.





Impact of typhoid on the health systempossible impact of vaccine

- Fierce competition for beds in public hospitals
- At Resource poor setting, only 3 beds per 10,000 population, in comparison to 31 in the US
- This leading to refusal of cases, just by putting a stamp
 - "BED NOT AVAILABLE"
 - Huge burden on Health System
- In 2017 to 6000 admissible cases were refused
- A huge burden on the "Health System"
- Refused cases are more severe and vulnerable to deaths and disabilities
 - Care seeking issues



Saha et al Am J Trop Med Hyg, 2018

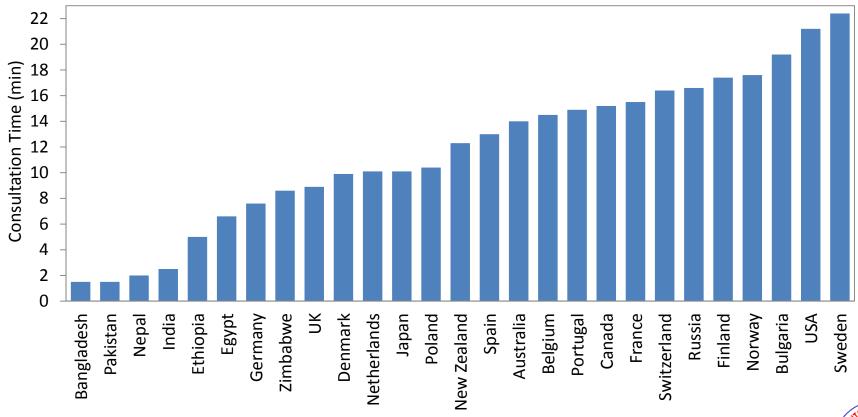




One Step Further

- Consultation time
 - Ranged from 48 sec to 22 mins
 - Typhoid is the most common diagnosis at OPD and private clinics
 - Patients will get more time if we can prevent typhoid









Consider the AMR issues – It can be advocacy tool too!

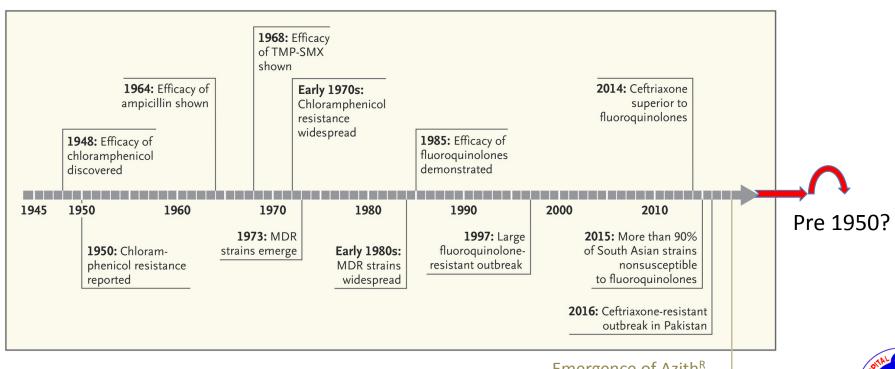
TCV INTRODUCED IN PAKISTAN TO PREVENT THE SPREAD OF XDR





Rise in Antimicrobial resistance in *Salmonella* Typhi - Are we heading to Pre-antibiotic era?

- Typhoid Deaths in Pre-antibiotic Era
 - 1545 Mexico -> more than 7 million
 - 1870 German -> 7000
 - 1935 Italy-Ethiopia war -> 20000 (Ethiopia)





Emergence of Azith^R
Saha et al unpublished



Advocacy – "Do" and "Do Not"

Do

- Generate Data
- Show the data in a simple way
- Bring Human face of Typhoid cases
- Talk about Health System
- Talk from your heart
 - Better if you have local champion who contributed in generating the data

Do Not

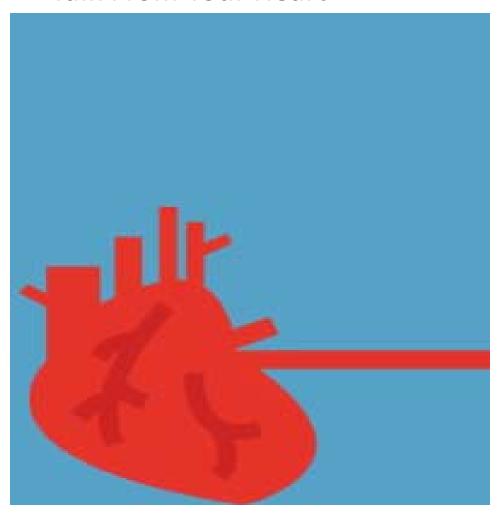
- Don't talk about complex adjustments
- Don't try to be a champion for all vaccines
- Don't do advocacy for multiple vaccines at a time
- Do not make any unrealistic commitments

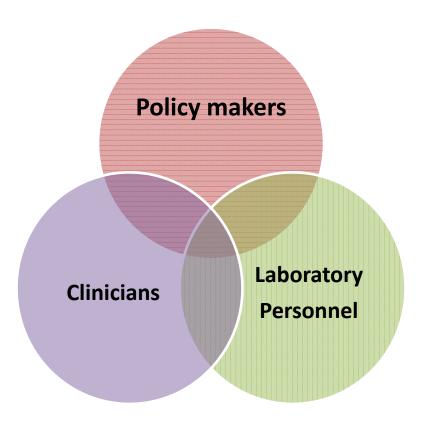




Advocacy amplifies voices – However, it may counteract too!

Talk From Your Heart





THANK YOU!



