

## Potential of typhoid conjugate vaccines in The Gambia

Typhoid, a serious enteric fever spread through contaminated food and water, is a substantial public health issue that disproportionately impacts children and marginalized populations in Asia and sub-Saharan Africa. The Global Burden of Disease (GBD) study estimates that, in 2017, there were nearly 11 million typhoid cases and more than 116,000 typhoid deaths worldwide.<sup>1</sup> Additionally, strains of drug-resistant typhoid are spreading, causing global concern.<sup>2</sup>

### TYPHOID CONJUGATE VACCINES

Typhoid vaccination can reduce the need for antibiotics, slow expansion of drug-resistant strains, and save lives. Newly licensed and World Health Organization (WHO)-prequalified typhoid conjugate vaccines (TCVs) have several advantages over earlier typhoid vaccines. They:

- provide longer-lasting protection;
- require only one dose; and
- are suitable for young children over 6 months.

These qualities will allow better protection for younger children and expanded coverage through inclusion in routine childhood immunization programs.

### WHO RECOMMENDATION AND GAVI SUPPORT

In March 2018, WHO recommended that typhoid-endemic countries introduce prequalified TCVs into routine childhood immunization programs as a single dose for infants and children over 6 months of age, accompanied by catch-up vaccination campaigns for children up to 15 years of age, where feasible. Additionally, WHO recommended prioritizing countries with a high burden of disease and/or a growing burden of drug-resistant typhoid, and in response to confirmed typhoid outbreaks. Gavi, the Vaccine Alliance has earmarked US\$85 million to support the introduction of TCVs into routine immunization programs and is accepting applications for financial support, with introductions anticipated as soon as 2019.



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### AN OPPORTUNITY FOR THE GAMBIA

TCVs could have a substantial benefit in The Gambia, where typhoid inflicts a significant public health burden. The latest GBD analysis estimates that, in 2017, The Gambia had:

- **2,215 typhoid cases** or **104 cases per 100,000 population**, 61 percent of which were in children under 15 years of age; and
- **34 typhoid deaths**, 69 percent of which were in children under 15 years of age.<sup>1</sup>

Typhoid likely also imposes an economic burden. Analyses from other settings in sub-Saharan Africa have found that the average cost of a typhoid case borne by families can amount to two months of average family income.<sup>3</sup> Preliminary findings from an economic analysis predict that, even in the absence of a Gavi subsidy, a catch-up campaign followed by routine childhood immunization with TCVs would potentially be cost-effective in The Gambia.<sup>4</sup>

### References

1. Global Burden of Disease. *The Lancet*. 2018.
2. Wong VK, Baker S, Pickard DJ, et al. Phylogeographical analysis of the dominant multidrug-resistant H58 clade of *Salmonella* Typhi identifies inter- and intracontinental transmission events. *Nature Genetics*. 2015;47:632-639.
3. Riewpaiboon A, Piatti M, Ley B, et al. Cost of illness due to typhoid fever in Pemba, Zanzibar, East Africa. *Journal of Health, Population and Nutrition*. 2014;32(3):377-385.
4. Bilcke J, et al. Setting global performance standards for a cost-effective typhoid conjugate vaccine strategy: a modelling study. *In prep*.

Learn more and join the effort at [www.takeontyphoid.org](http://www.takeontyphoid.org).

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