

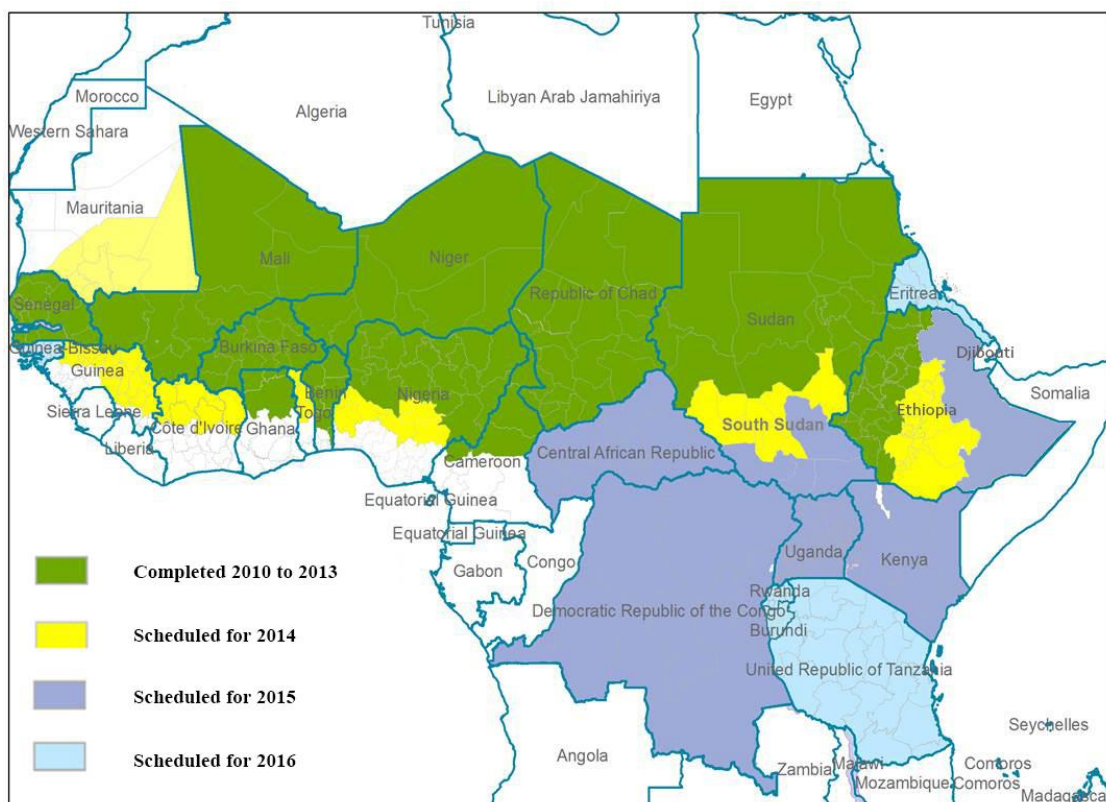
Dear partners, friends, and colleagues:

The following is a summary of recent, current, and upcoming activities at the Meningitis Vaccine Project (MVP). We welcome your comments and suggestions at [info@meningvax.org](mailto:info@meningvax.org) and encourage you to forward this update to friends or colleagues who might be interested in learning about MVP's progress.

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### Vaccine introduction and communication activities

- Seven countries are preparing for MenAfriVac® rollout this coming fall. Starting in October, Serum Institute of India Ltd.'s (SIIL) vaccine will be deployed in countries at opposite ends of the African continent (Mauritania and Ethiopia) and reach more southerly parts of the belt, including Côte d'Ivoire and South Sudan.



MenAfriVac rollout in Africa: in green, countries/regions vaccinated in 2010–2013; in yellow, countries/regions tentatively scheduled for 2014; in blue, countries/regions tentatively scheduled for 2015–2016. As in previous years, MenAfriVac campaigns will only target areas that risk assessment and district prioritization exercises have classified “at risk” of meningitis A epidemics. Data as of June 30, 2014.

Credit: World Health Organization (WHO).

- Bimonthly multipartner teleconferences conducted by the WHO prepare the way for the continued introduction of MenAfriVac in Nigeria (phase 4 of 4) and Ethiopia (phase 2 of 3) and for the first introduction of the vaccine in Côte d'Ivoire, Guinea, Mauritania, South Sudan, and Togo. Some 55 million people are expected to receive one dose of MenAfriVac in 2014 (a record), bringing the total number of vaccinees in the African meningitis belt to more than 200 million since vaccine launch in 2010.

- The GAVI Alliance has approved funding for all the MenAfriVac mass vaccination campaigns to be conducted this year; funds are being transferred to the seven concerned countries.
- The WHO Intercountry Support Team conducted advocacy visits to two of the countries that are scheduled to introduce MenAfriVac in 2015: Uganda (June 12–21) and Kenya (June 22–27). The main purpose of the visits was to guide national authorities in their district prioritization exercises for the 2015 vaccination campaigns.

### **Regulatory activities**

- MenAfriVac manufacturer SIIIL submitted the pediatric license variation dossier in parallel to Indian regulatory authorities and the WHO prequalification team on July 18. The license variation will make it possible to integrate MenAfriVac into routine vaccination schedules, providing countries with sustainable strategies to protect new birth cohorts and maintain population protection against meningitis A disease.

### **Surveillance and epidemic preparedness activities**

- Not a single case of group A meningitis has been so far reported among the 153 million individuals who received one dose of MenAfriVac in 2010–2013. Isolated meningitis A cases have been reported this year in Guinea where the vaccine has not yet been introduced.
- Médecins sans Frontières conducted a preventive campaign in the refugee camp of Gore in Chad. A total of 19,302 individuals aged 1–29 years (refugees from Central African Republic and local residents) received one dose of MenAfriVac during the campaign that ran from April 15–23.
- The 19 countries with an enhanced disease surveillance system notified 11,650 meningitis cases at week 23, 2014. *Streptococcus pneumoniae* is the main causal germ.

### **Clinical activities**

- The [seven clinical trials](#) related to licensing and prequalification of MenAfriVac for use in 1- to 29-year olds and/or infants have been successfully completed.
- A refresher training on good clinical practice and good clinical laboratory practices principles related to closure of clinical trials and sponsor responsibilities took place at the PATH office in Ferney-Voltaire, France, on June 25–26. The training, which was led by Rita Walt Consulting GmbH, provided the MVP clinical team an opportunity to ensure that all MVP trial closure activities were duly performed according to applicable regulations.
- Preparations are under way for community and scientific meetings for [PsA-TT-007](#) and the [persistence study](#) in Mali. The meetings are organized in close collaboration with Center for Vaccine Development-Mali, MVP's clinical site in Bamako.

### **Thank you and good bye**

- The MVP team and partners say thank you and goodbye to Flore Pallardy and Jean-Marie Préaud. Flore served as MVP's clinical assistant from July 2011 till May 2014. Jean-Marie was MVP's senior technical officer for pharmaceutical operations; he had been with MVP since March 2003.

### **Celebrating success**

- MVP's project closure conference "Ending and New Beginnings" will take place in Addis-Abbaba, Ethiopia, on December 3–5. Organized in collaboration with the African Conference on Immunization, the meeting will serve two purposes: (a) formally close the 13.5 year-project through celebrations of success and achievements, and sharing of experiences and results; and (b) map new beginnings through continued support for the remaining mass vaccination campaigns and the transition of MenAfriVac into routine immunization programs.

### **Preparing the after MVP**

- Proposals for a post-MVP transition period of three years have been submitted to the Bill & Melinda Gates Foundation on July 11 (PATH) and 15 (WHO).

That's all for now from the MVP team. Stay tuned for our next news digest in three months' time. We look forward to receiving your comments at [info@meningvax.org](mailto:info@meningvax.org).

Created in 2001, the Meningitis Vaccine Project is a partnership between WHO and PATH. The mission of MVP is to eliminate epidemic meningitis as a public health problem in sub-Saharan Africa through the development, testing, introduction, and widespread use of conjugate meningococcal vaccines.

For more information on MVP, please visit our website at <http://www.meningvax.org>.