

Session 4:
Immunogenicity and efficacy of polysaccharide and polysaccharide-protein conjugate vaccines in neonates

Pneumococcal Vaccine in the Newborn

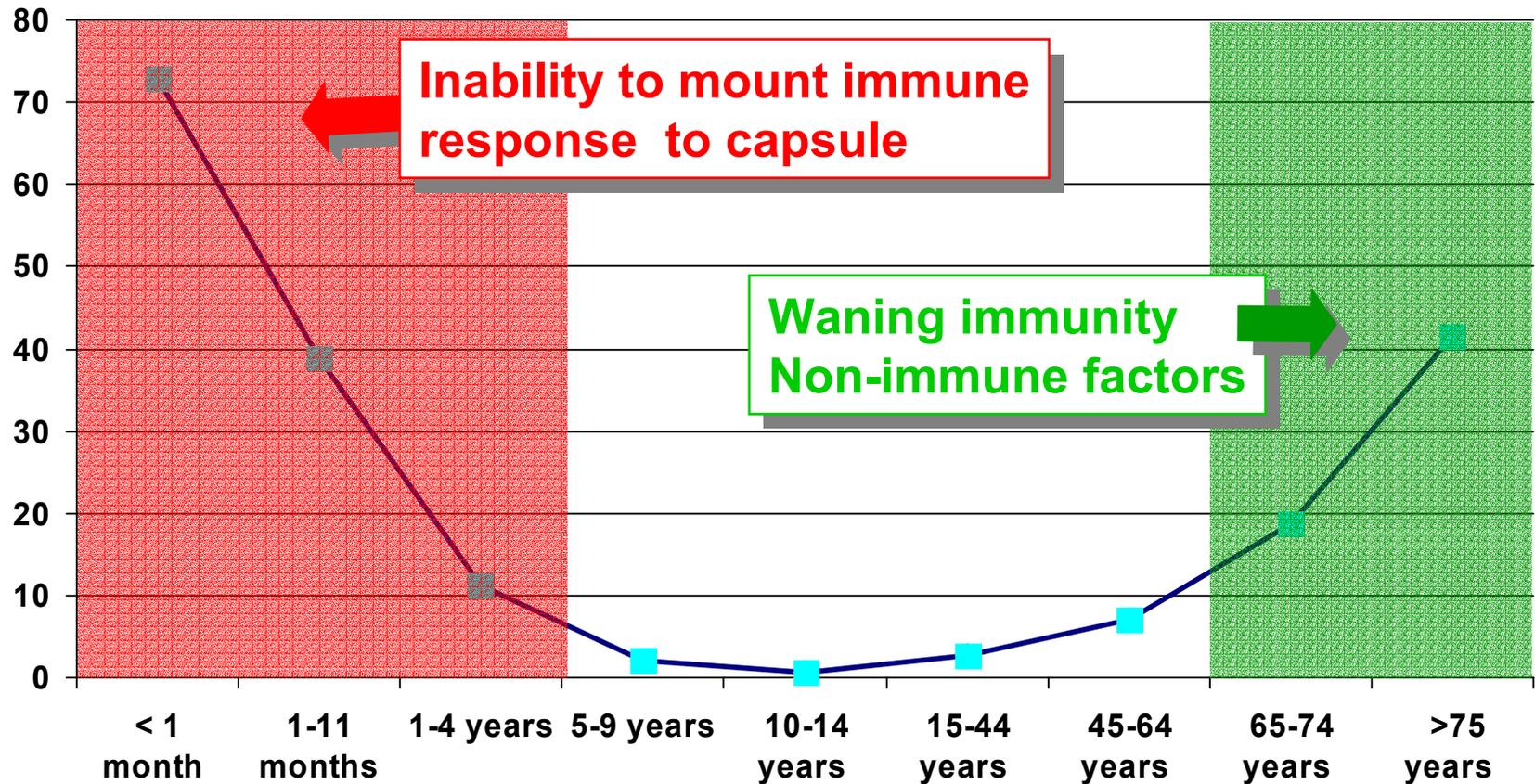
- Mathu Santosham: Burden of disease
- Dan Granoff: Utility of Hib conjugate vaccines in early life
- Alex Lucas: Molecular Mechanisms



Pneumococcal Vaccine in the Newborn

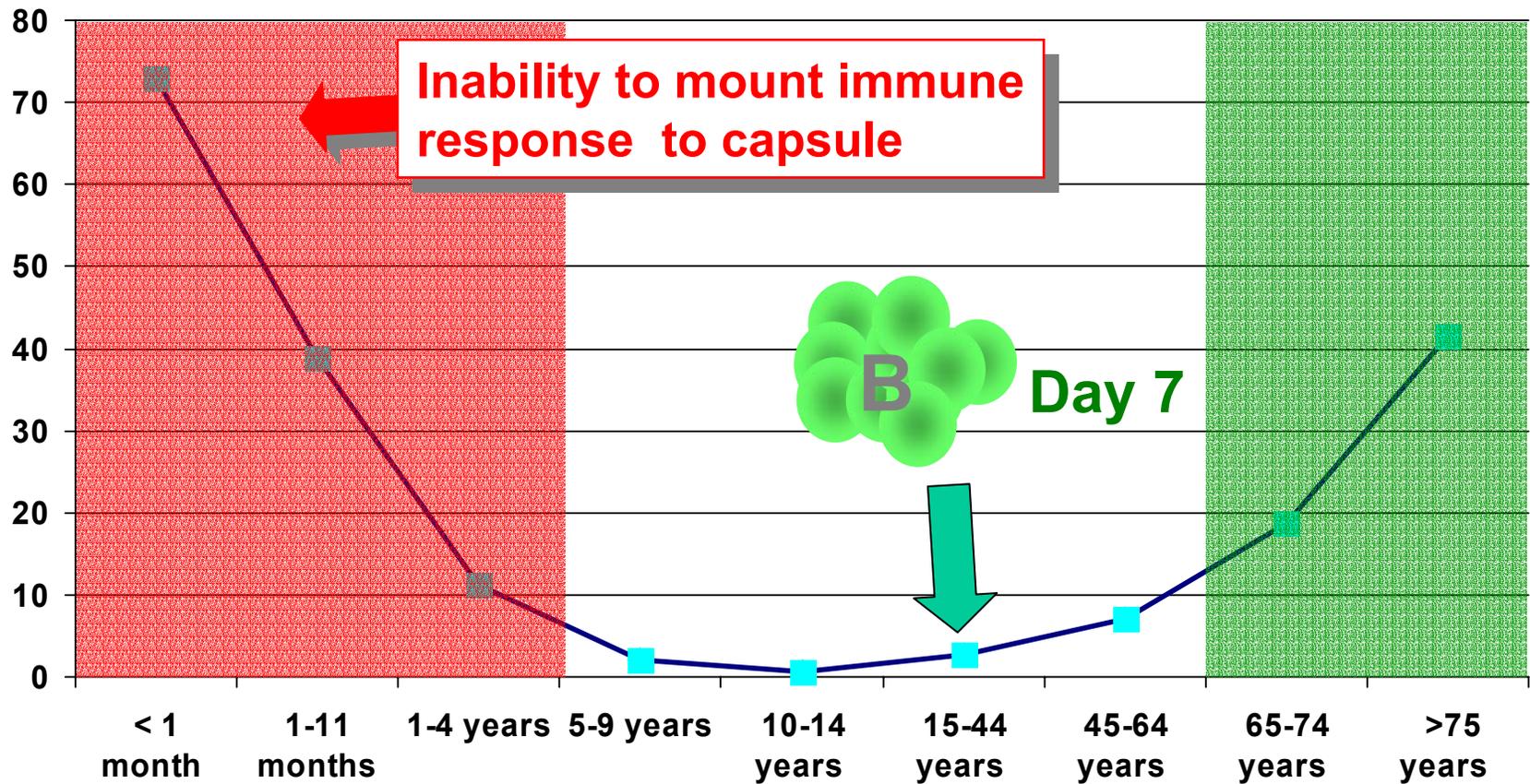
- **The basis for natural immunity in adults**
- **Pneumococcal carriage in early life**
- **The case for neonatal vaccination**
- **Design of a study to evaluate pneumococcal conjugates at birth**

Invasive Pneumococcal infection, England & Wales, Incidence per 100,000 by age group 2000



Slide provided by Dr Rob George, RSIL, HPA

Incidence per 100,000 by age group 2000 Invasive Pneumococcal infection, England & Wales



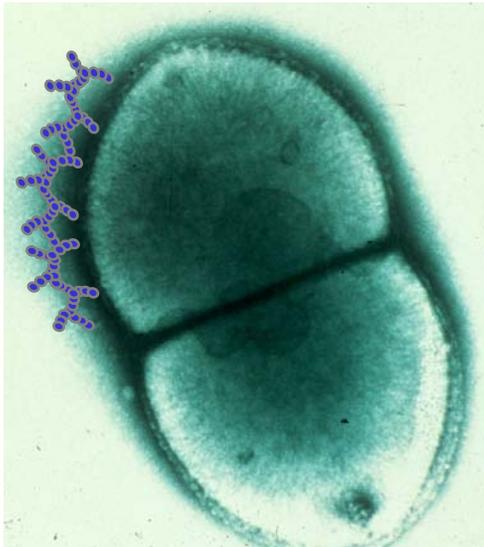
Circulating pneumococcal specific B cells
isolated 7 days after a
first pneumococcal conjugate

or

polysaccharide vaccines in adults were

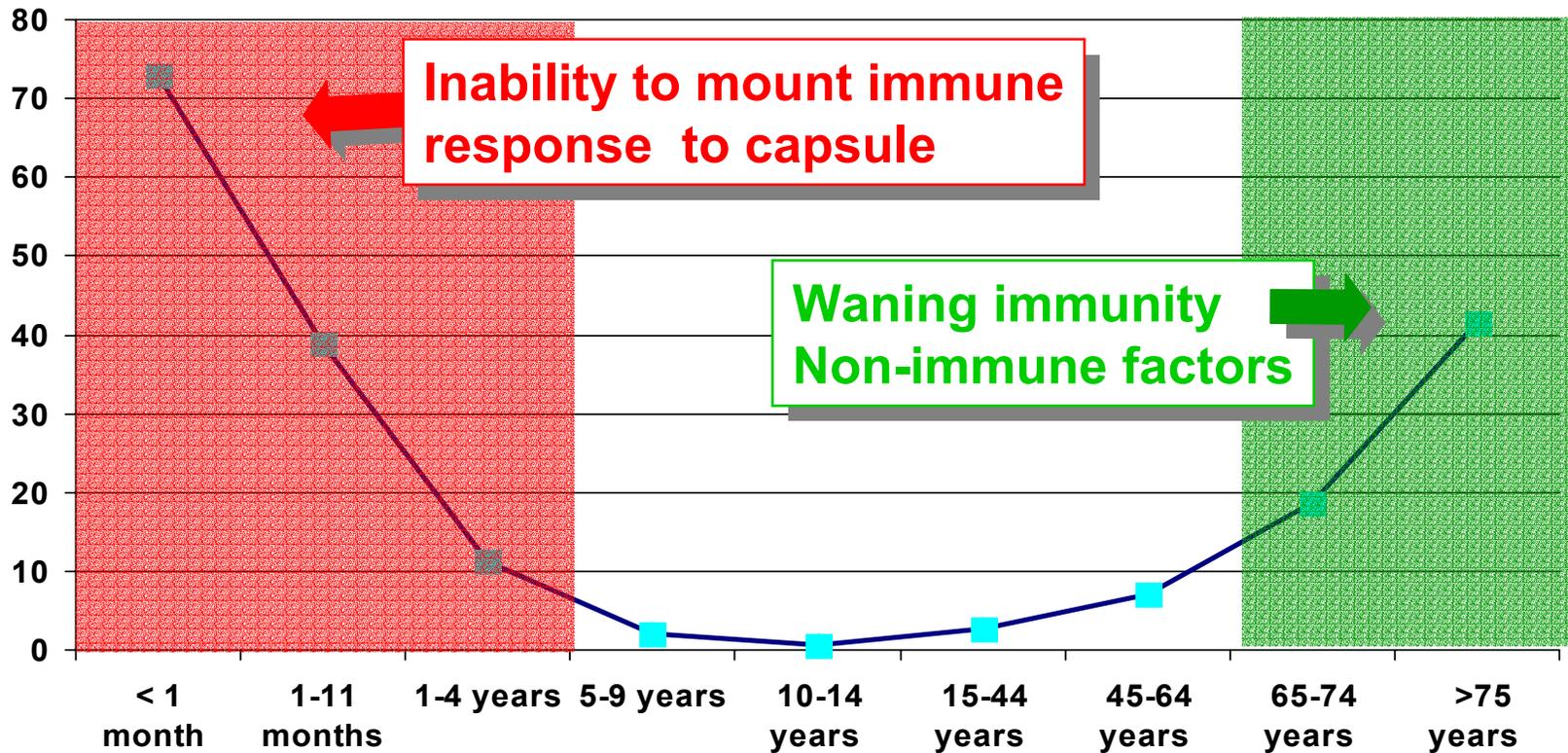
restimulated

memory B cells

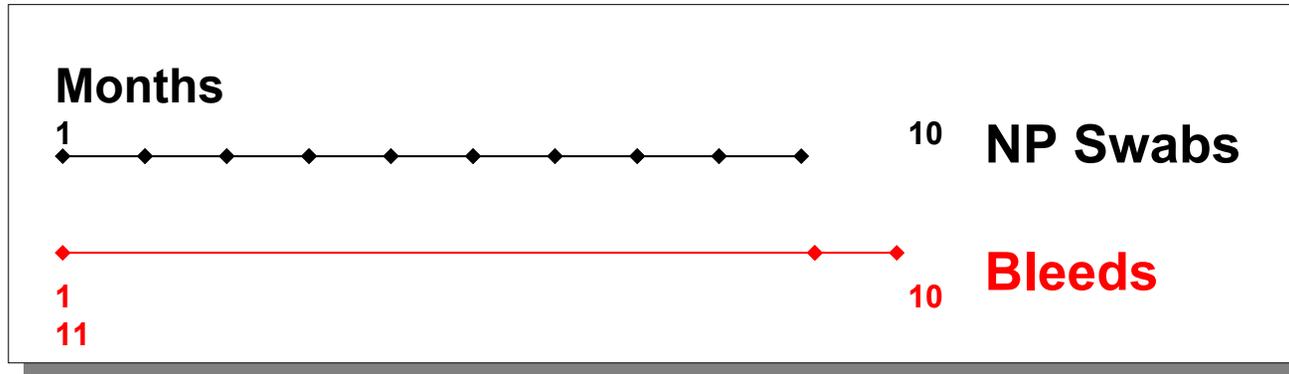


Baxendale et al Eur J Immunol 2000
Lucas et al Inf & Immun 2001
Janoff et al ISPPD 2002

Invasive Pneumococcal infection, England & Wales, Incidence per 100,000 by age group 2000



Overall Study Design:



Results:

129 families recruited

Swabs: 3753 swabs taken

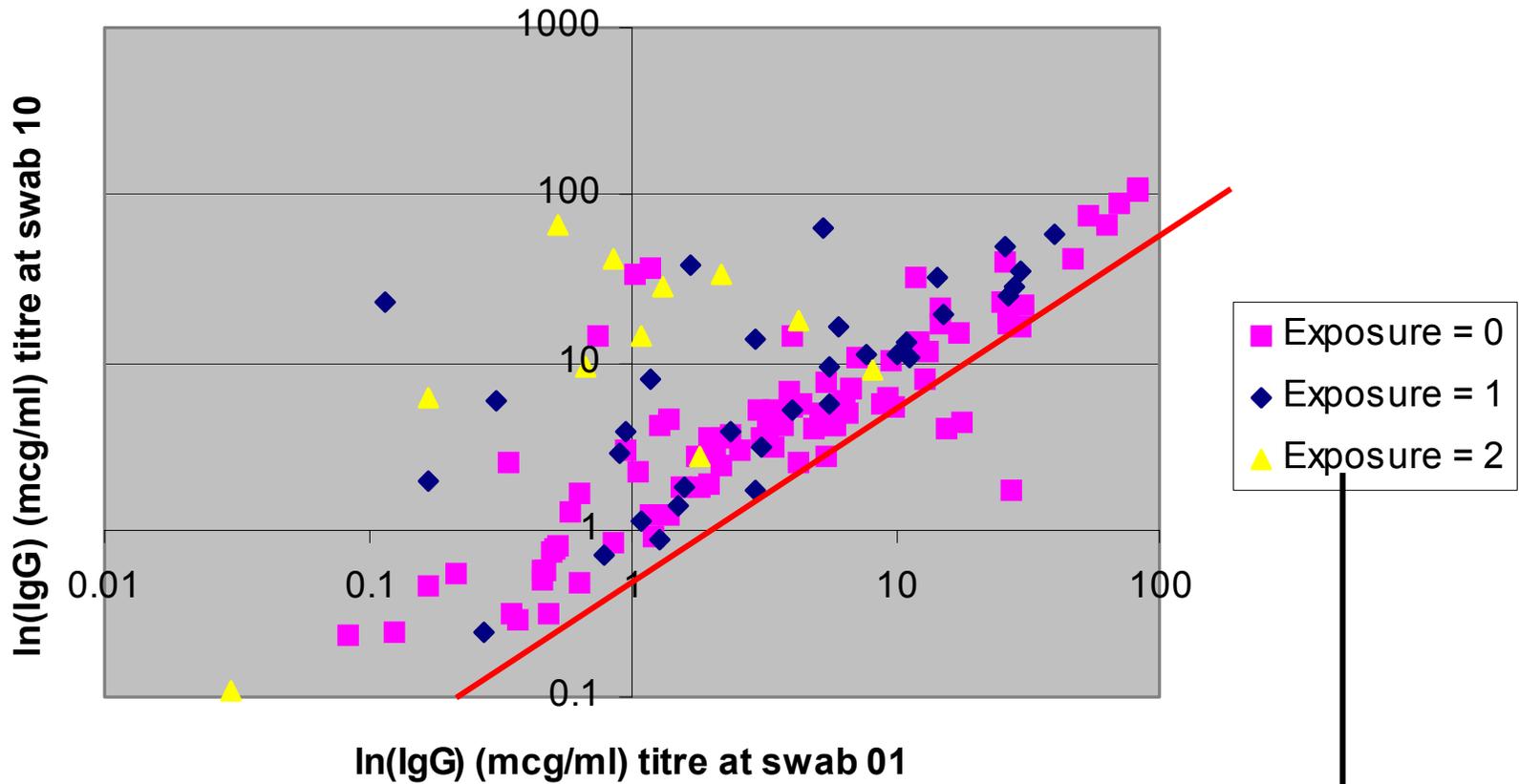
932 (25%) were positive

EC PNCEuro Collaboration

ICH/HPA/KTL

Unpublished

Type 14



1 = carriage in the family
2 = carriage by individual

<1 month
18%
(Lehman et al ISPPD 02)

1 month
50%

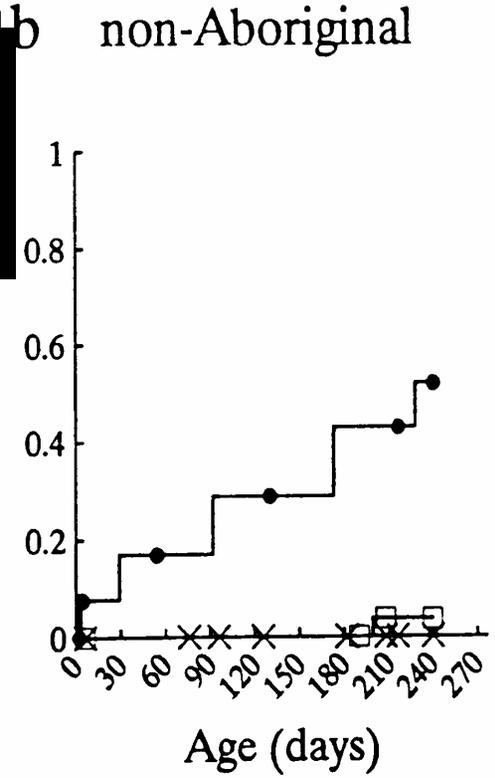
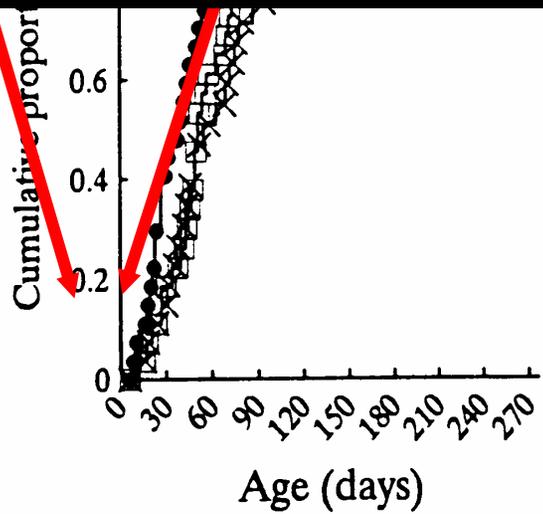
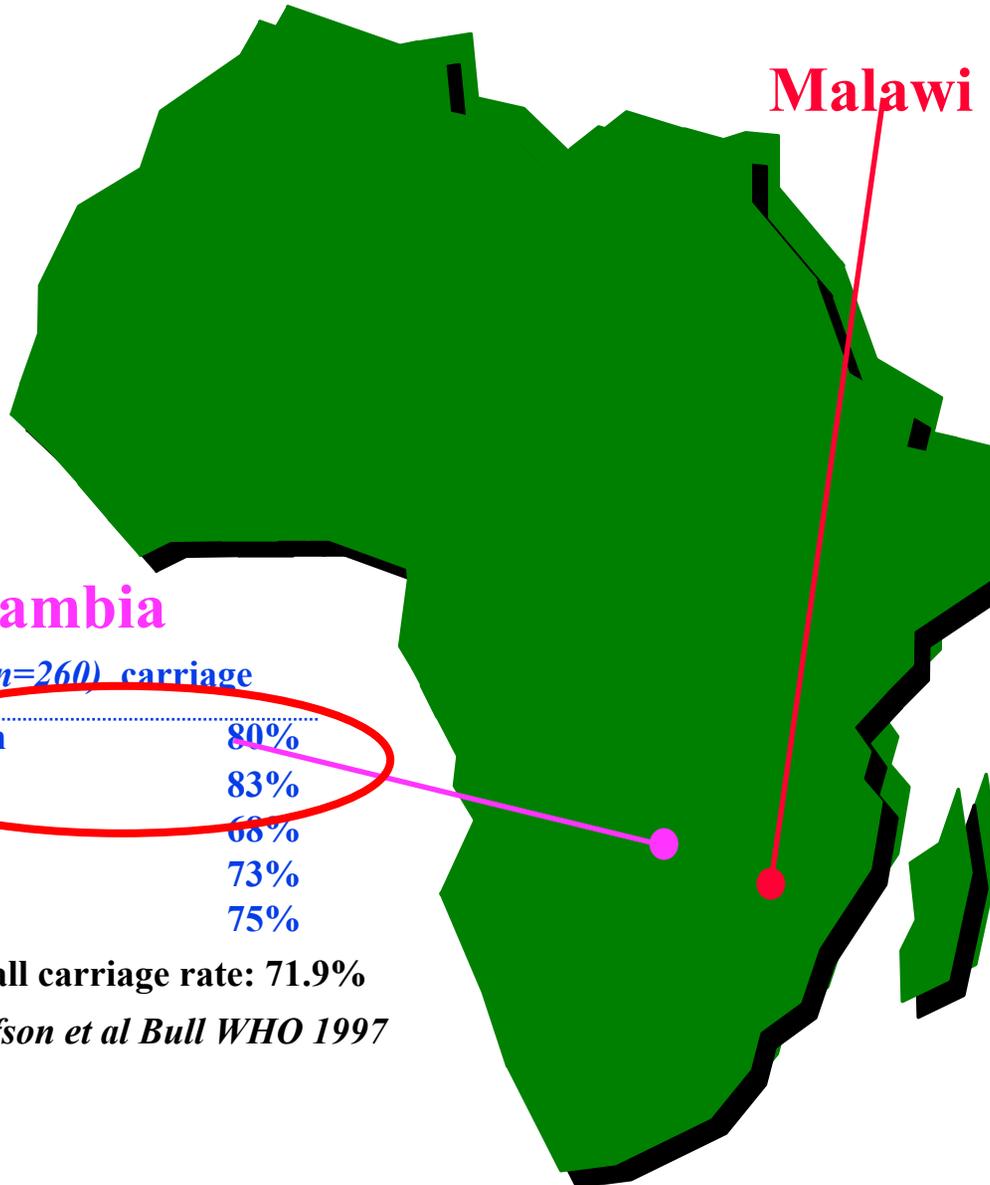


FIG. 2. Cumulative proportion of infants with nasopharyngeal colonization by bacterial species and age (days). ●, *Moraxella catarrhalis*; ■, *Haemophilus influenzae*; ×, *Streptococcus pneumoniae*.



Malawi

Age	n	carriers (%)
0-2m	47	16 (34)
3-5m	53	27 (51)
6-8m	37	19 (51)
9-11m	31	18 (58)
1-5y	32	15 (47)

Overall carriage rate: 47.5%
ono et al Ann Trop Paed 1997

Zambia

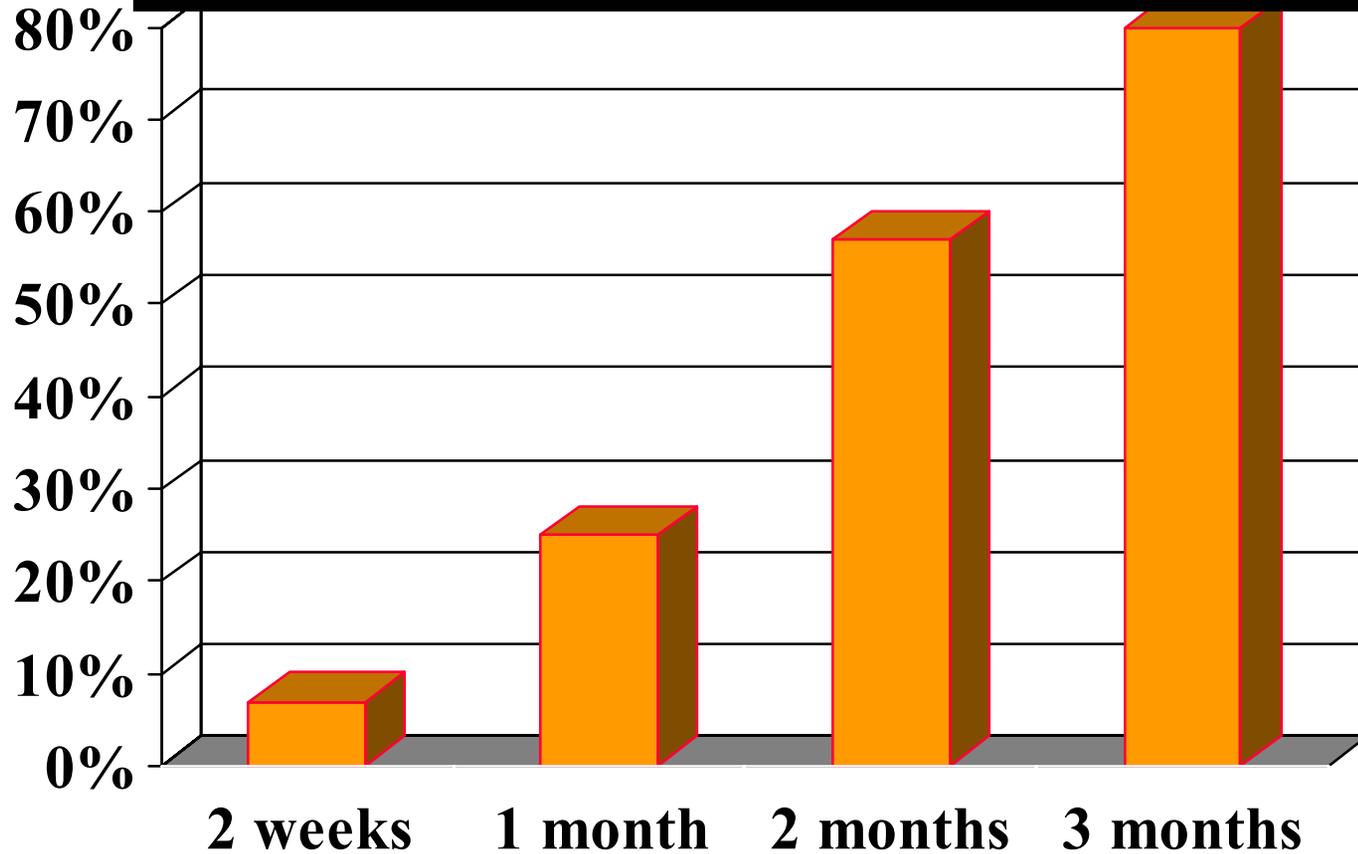
Age (n=260) carriage

by 3m	80%
6m	83%
9m	68%
12m	73%
24m	75%

Overall carriage rate: 71.9%

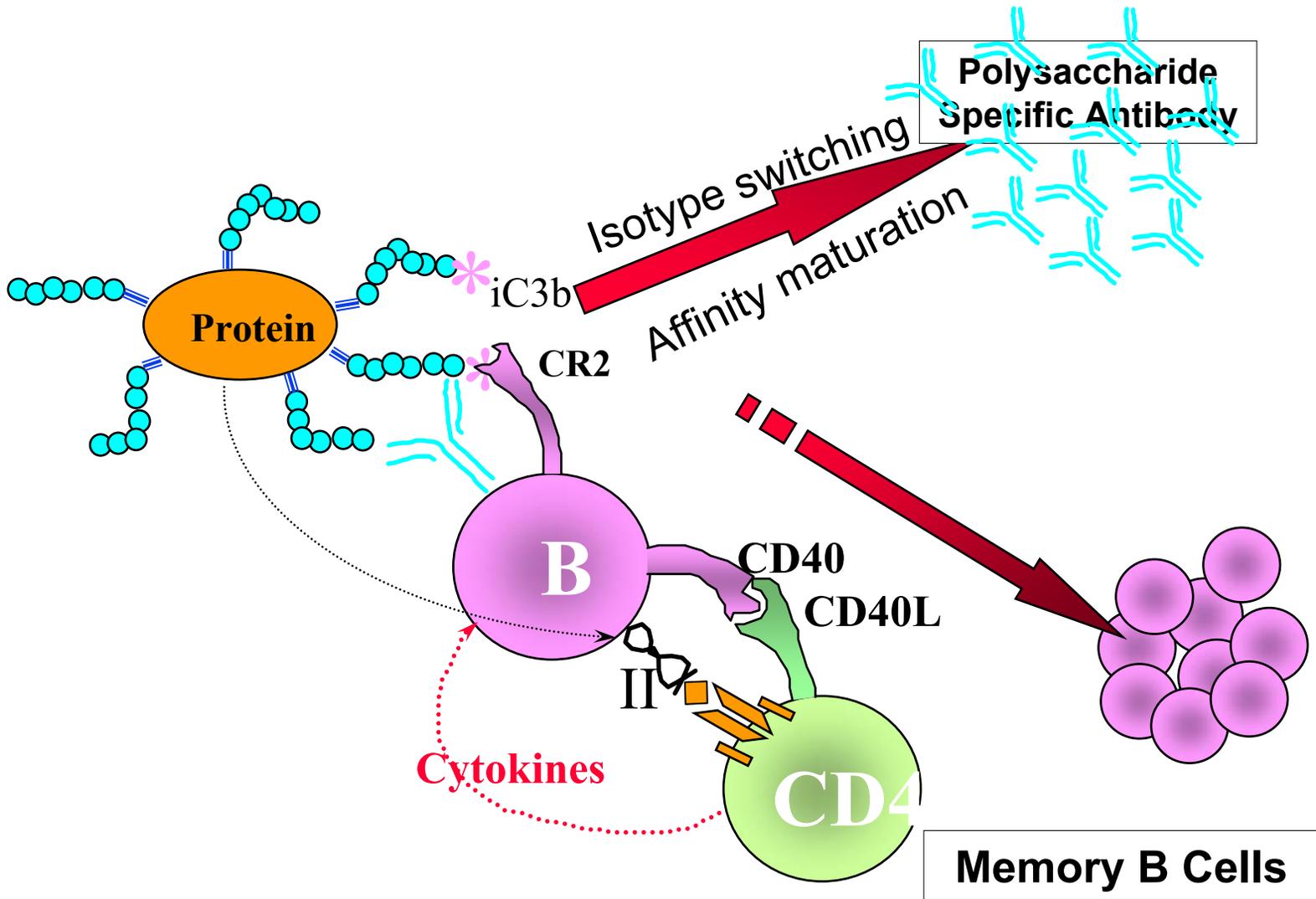
Woolfson et al Bull WHO 1997

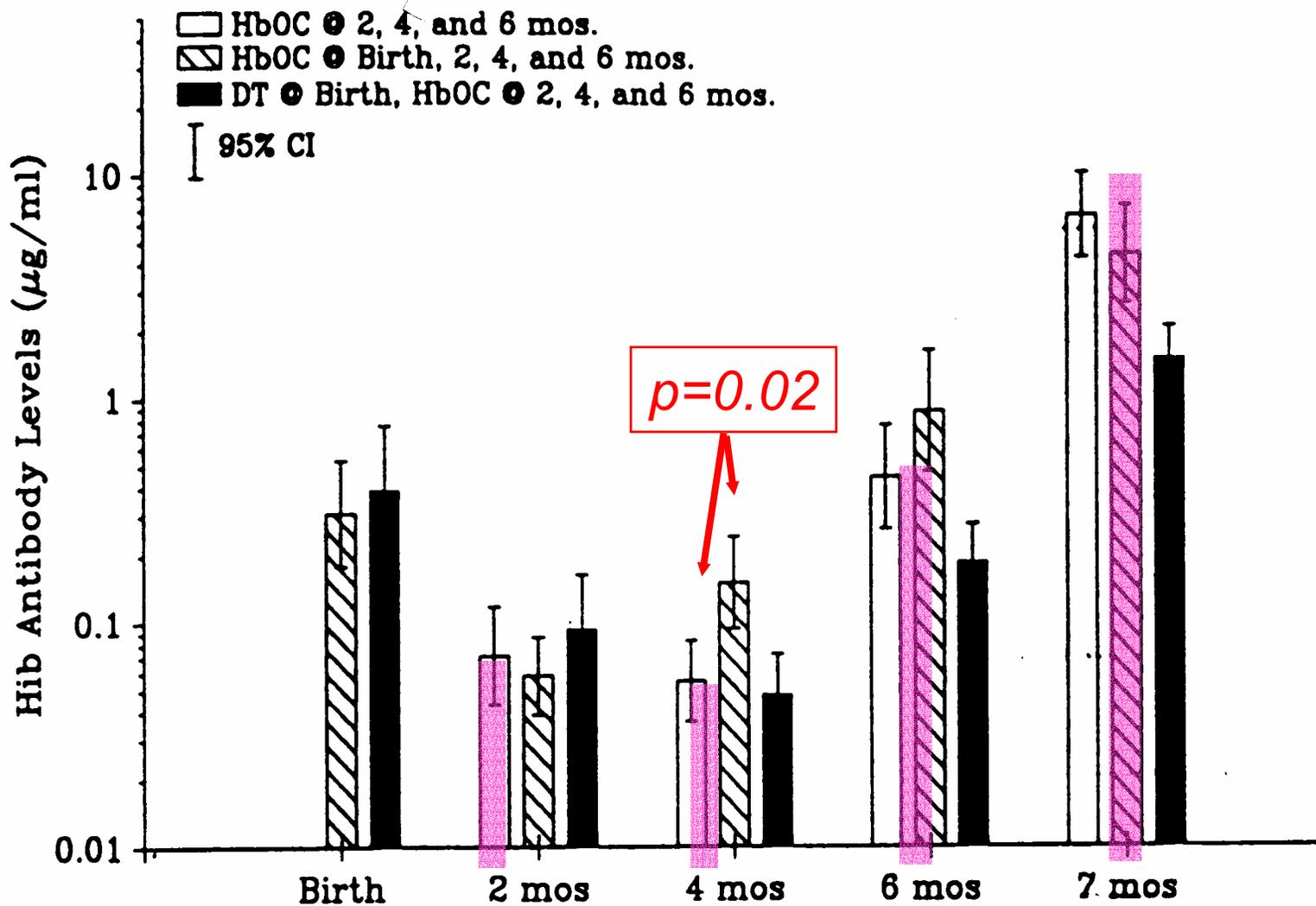
Pneumococcal Carriage in Bangladesh



Age

Zakaria et al ISPPD 02





Neonatal PRP-T

recipients classified:

Non-responders ($n=24$)

Responders ($n=31$)

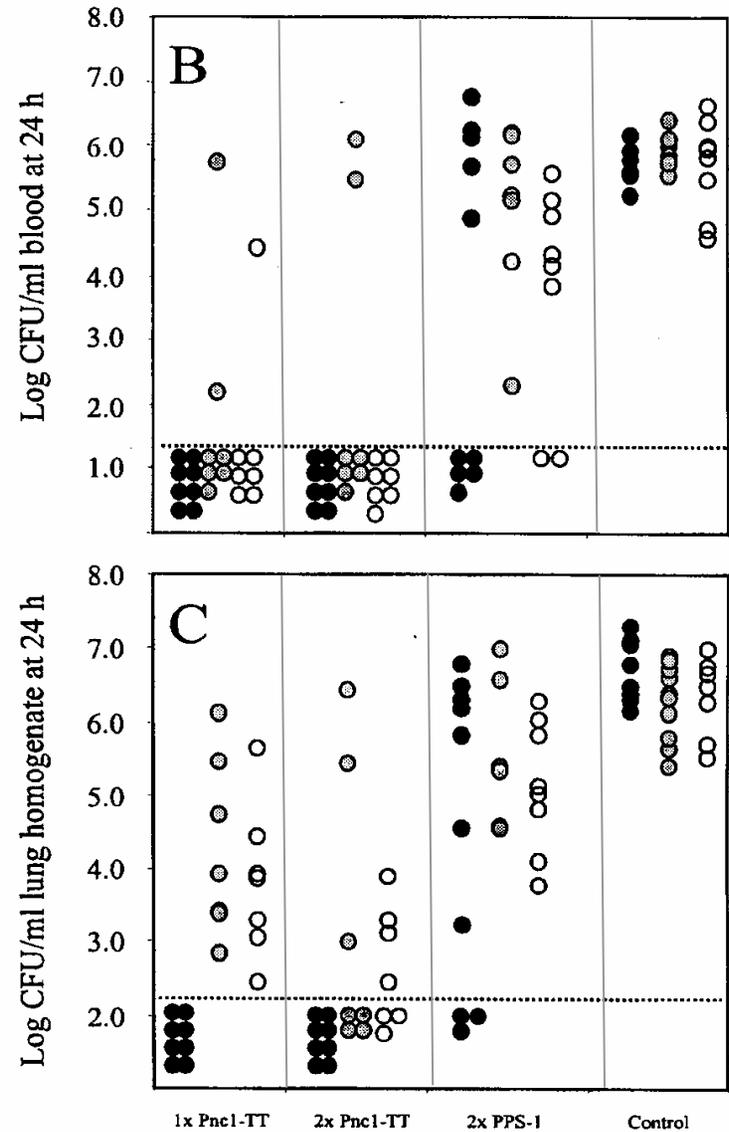
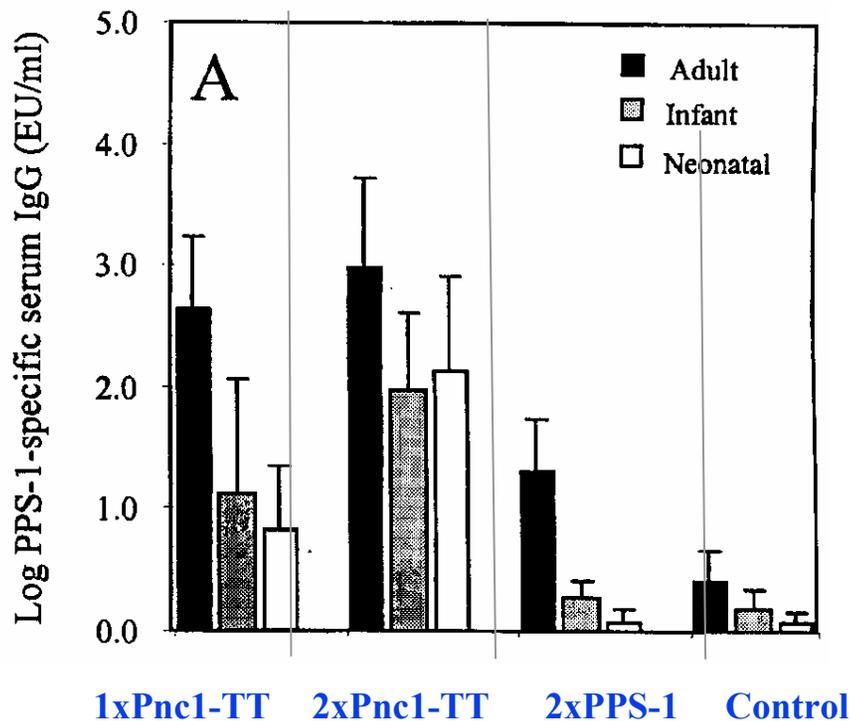
All ($n=55$)

Anti-Hib PS responses
2 months after Hib PS booster
given at 2 months of age

Neonatal PRP-T
Recipients classified:

	<u>≥ 2 fold</u>	<u>≥ 4 fold</u>	<u>≥ 10 fold</u>
Non-responders (<i>n</i> =24)	9 (37%)	4 (17%)	1 (4%)
Responders (<i>n</i> =31)	25 (81%)	16 (52%)	7 (23%)
All (<i>n</i> =55)	34 (62%)	20 (36%)	8 (14%)

Pnc1-TT is immunogenic in infant & neonatal mice when administered s.c. and provides protection against lethal pneumococcal infections after i.n. challenge

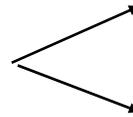


Jakobsen et al I&I 2002

Evaluation of Neonatal Immunisation with Pneumococcal Conjugate Vaccine

- Safety

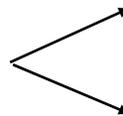
- Primary Immunogenicity



Neonatal Immunity

Maternal Antibodies

- Priming

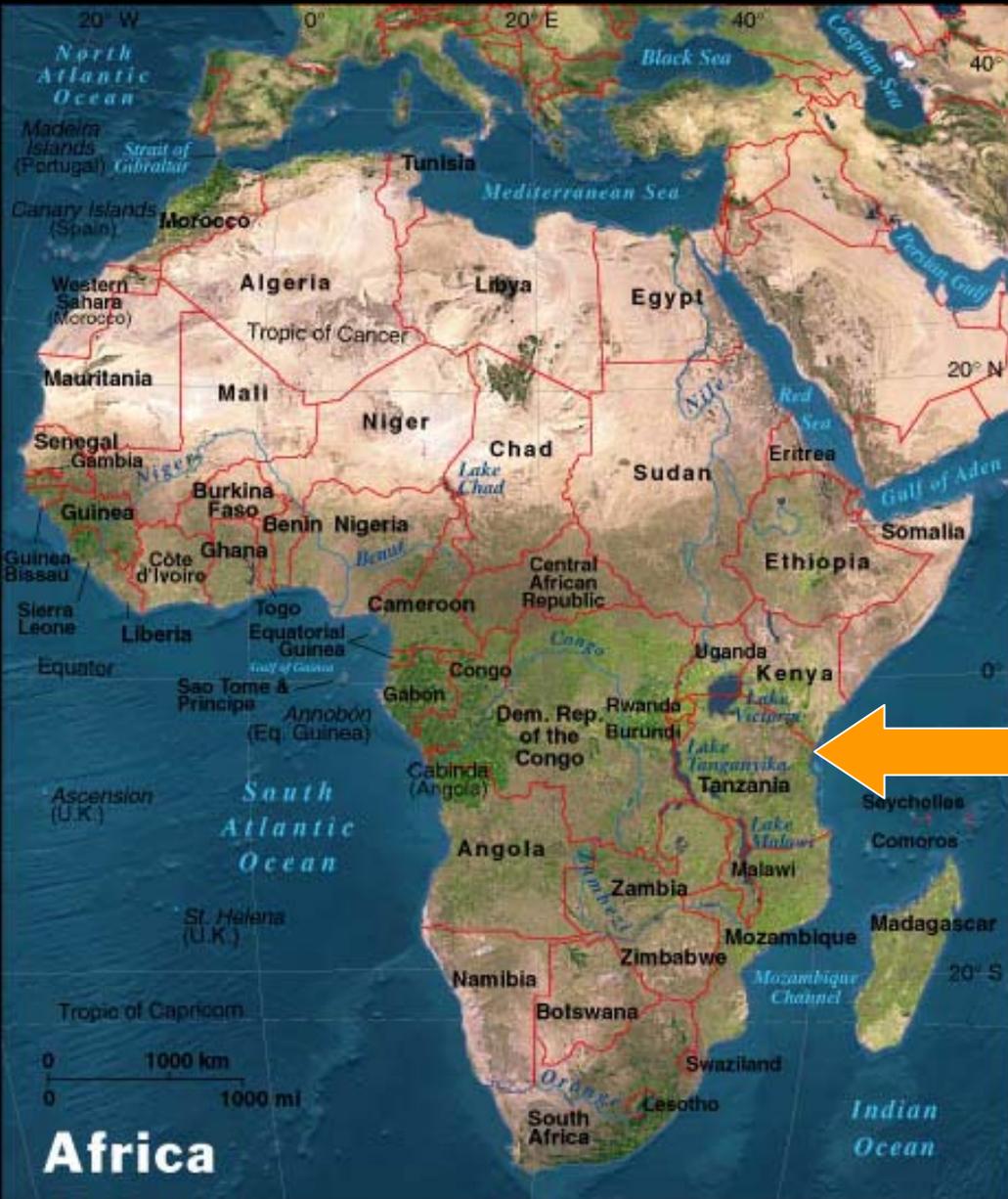


Immunological Memory

Hyporesponsiveness

- Efficacy?

Effect on carriage







The case for pneumococcal conjugate at birth in Kenya

- **16% of pneumo deaths in under 2's occur before 6 weeks of age**
- **23% occur under 14 weeks of age**
- **Only 70% have received a 2nd DPT by 14w**
- **Conversely, 70% receive BCG by 6w of age**

PHASE I	Age in weeks				
	0	6	10	14	18
<i>Group 1 (n=30)</i>					
PNC [♦]	✓		✓	✓	
Hib [♥]		✓	✓	✓	
BCG	✓				
DPT&P/HBV		✓	✓	✓	
<i>Group 2 (n=30)</i>					
PNC		✓	✓	✓	
Hib [♥]		✓	✓	✓	
BCG	✓				
DPT&P/HBV		✓	✓	✓	
<i>All Groups</i>					
Blood samples	✓ [†]	✓ [‡]	✓ [‡]	✓ [‡]	✓

PHASE II	Age in weeks						
	0	6	10	14	18	36 (9 months)	37
<i>Group 1 (n=150)</i>							
PNC [♦]	✓		✓	✓		✓*	
Hib [♥]		✓	✓	✓			
BCG	✓						
DPT&P/HBV		✓	✓	✓			
Measles						✓	
<i>Group 2 (n=150)</i>							
PNC		✓	✓	✓		✓*	
Hib [♥]		✓	✓	✓			
BCG	✓						
DPT&P/HBV		✓	✓	✓			
Measles						✓	
<i>All Groups</i>							
NP swabs					✓	✓	
Blood samples	✓	✓‡	✓‡	✓‡	✓	✓	✓

Randomised to pneumococcal conjugate or a fractional dose of pneumococcal polysaccharide (0.1ml/5µg)

Summary

- Hib conjugates appear to prime for subsequent responses when given close to birth
- Animal models of neonatal responses to pneumo polysaccharides are encouraging too.
- Priming neonates for responses to pneumo polysaccharides may result in boosted immunity rather than disease following colonisation in early life
- A clinical study will start in 6-8 weeks to test these hypotheses.

PROS

In developing country settings:
Potential to provide earlier protection
Possibly help improve vaccine coverage



CONS

Potential safety issues
Potential failure to induce responses
Potential negative effects on subsequent responses