

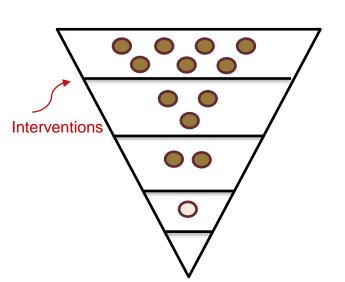
## Control, elimination and eradication goals and targets –

Vaccine preventable diseases

Dr Laila Khawar | April 18, 2024

### Infectious disease control

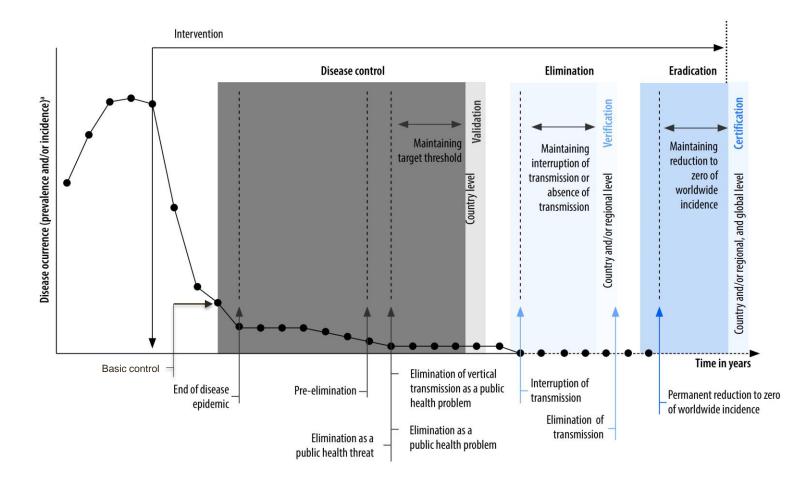
## Impact and process targets



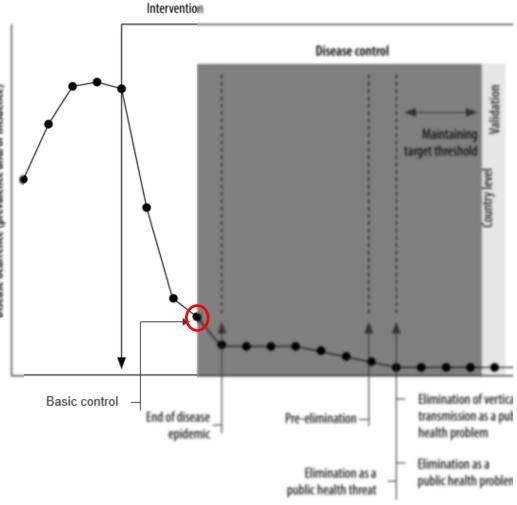
Elimination targets	Elimination of chronic HB as a public health problen		
2030 GHSS relative reduction reference targets (compared to 2015)	Incidence 95% reduction	Mortality 65% reduction	Impact – i.e. reduction in incidence, prevalence, mortality etc.
HBV- and HCV-specific absolute prevalence, incidence and mortality targets	HBV EMTCT ≤0.1% HBsAg prevalence in ≤5 year olds <sup>a,b</sup> Additional target: ≤2% MTCT rate (where use of targeted HepB-BD) <sup>c</sup>	Annual mortality <sup>g</sup> (HBV) ≤4/100 000	
Programmatic targets <sup>d</sup>	Countries with universal HBV vaccine birth dose (BD) ≥90% HepB3 vaccine coverage ≥90% HepB timely hepatitis B BD (HepB-BD) coverage <sup>e</sup>	Testing and treatment ≥90% of people with HBV diagnosed ≥80% of people diagnosed with HBV and eligible for treatment are treated <sup>h</sup>	Process – e.g. 90% vaccination coverage



### Goals



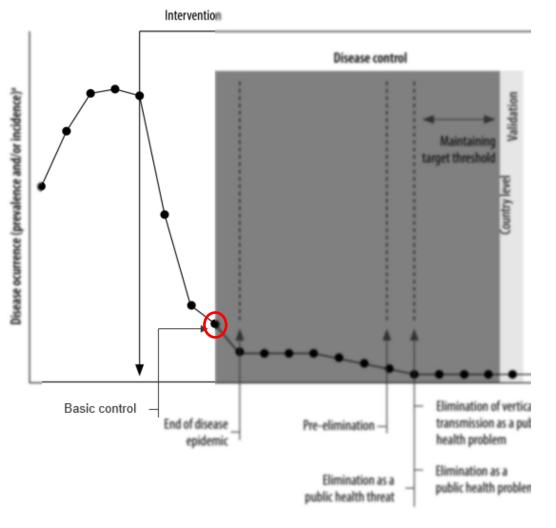




### Vaccine-preventable infectious diseases

- 1. Diphtheria
- 2. Pertussis
- 3. Tetanus
- 4. Varicella (Chickenpox)
- 5. Herpes Zoster (Shingles)
- 6. Hepatitis A
- 7. Influenza
- 8. COVID-19
- 9. Rotavirus
- 10. Tick-borne encephalitis
- 11. Mpox



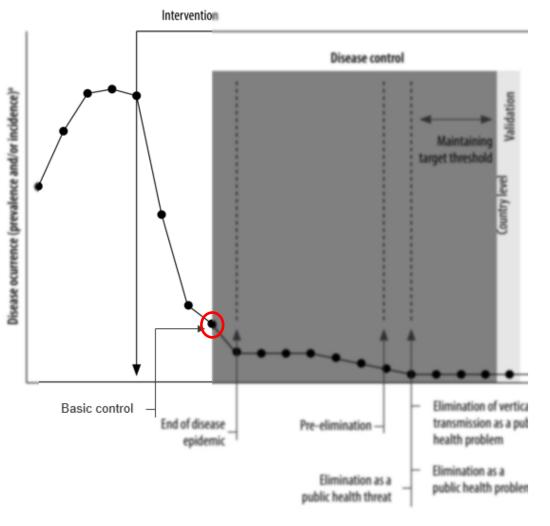


#### Diphtheria, pertussis, tetanus (DPT)

- <u>Impact target:</u> Not specified (exception: maternal & neonatal tetanus)
- Process target for vaccination: DPT3: Global target of 90%<sup>3</sup> (the Immunization Agenda 2030 highlights the need to expand immunization delivery across the life course)

WHO recommendations for vaccination in adults: WHO recommendations for vaccination in adults: Pertussis<sup>6</sup>: • Pregnant women • HCWs.





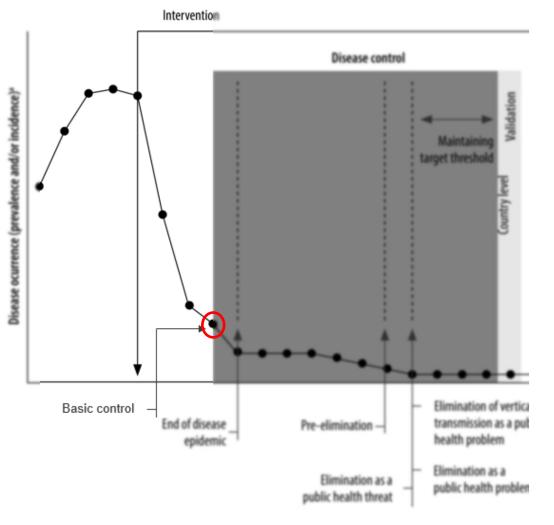
#### Varicella (chickenpox)

- Impact target: Not specified
- Process target for vaccination: vaccine coverage ≥80% (Countries where varicella is an important public health burden)
- <u>Vaccination target for adults:</u> None

### WHO recommendations for vaccination in adults:

- Countries with a high average age (≥15 years of age) of acquisition of infection.
- Potentially susceptible HCWs





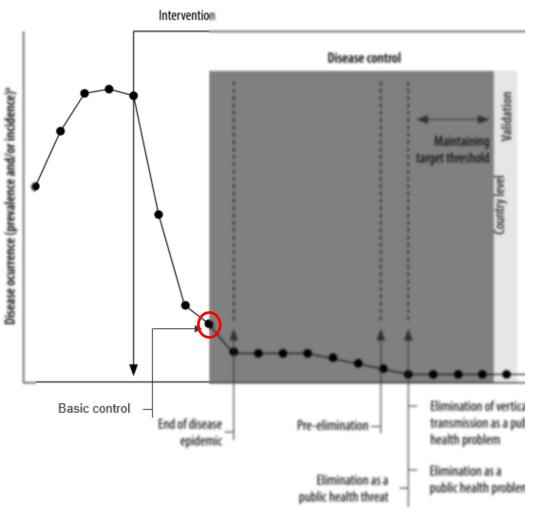
### Hepatitis A & Herpes Zoster (Shingles)

- Impact target: Not specified
- <u>Process target for vaccination</u>: Not specified
- <u>Vaccination target for adults:</u> None

WHO recommendations for vaccination in adults (HAV)<sup>8</sup>:

- an increasing trend over time of <u>WHO recommendations for</u> <u>vaccination in adults (HZ)<sup>7</sup></u>:
- Immunocompetent individuals aged ≥50 years





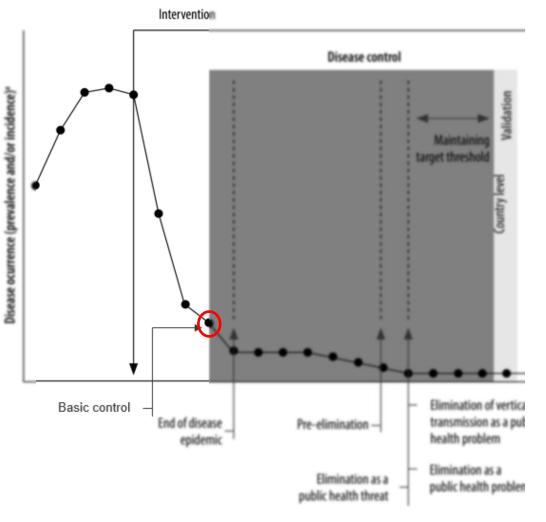
#### Influenza

- Impact target: None
- Process target for vaccination: Not specified
- <u>Vaccination target for adults:</u> ≥75% among the elderly (≥65 y)<sup>9</sup>

### WHO recommendations for vaccination in adults<sup>10</sup>:

- Pregnant women as the most important risk group for inactivated seasonal influenza vaccination.
- HCWs
- Those with high-risk conditions





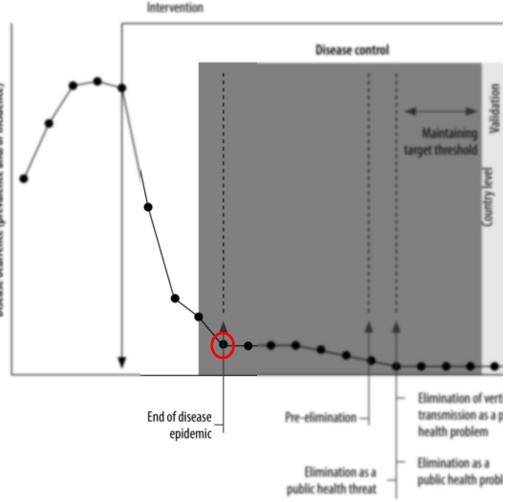
#### COVID-19

- Impact target: None
- Process target for vaccination: Not specified (COVID-19 vaccination coverage will potentially be included in the 90% target set by the Immunization Agenda 2030 on vaccination coverage<sup>3</sup>)

#### WHO recommendations for vaccination in adults<sup>11</sup>: To reach high coverage with the primary vaccination series and a first booster dose among all eligible people



#### End of disease epidemic



### Vaccine-preventable infectious diseases

- 1. Bacterial meningitis
- 2. Yellow fever
- 3. Cholera
- 4. Tuberculosis (high-incidence countries)

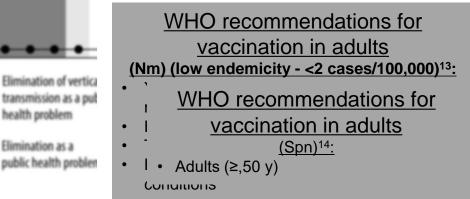


#### End of disease epidemic

Intervention **Disease control** isease ocurrence (prevalence and/or incidence)\* target threshol Elimination of vertica End of disease transmission as a put Pre-elimination -health problem epidemic

#### Meningitis (Nm, Spn, Hib & GBS)

- Impact target: Reduce cases of vaccine preventable bacterial meningitis by 50% & deaths by 70% by 2030<sup>12</sup>
- Process target for vaccination: 90% coverage by 2030<sup>12</sup>
- Vaccination target for adults: None

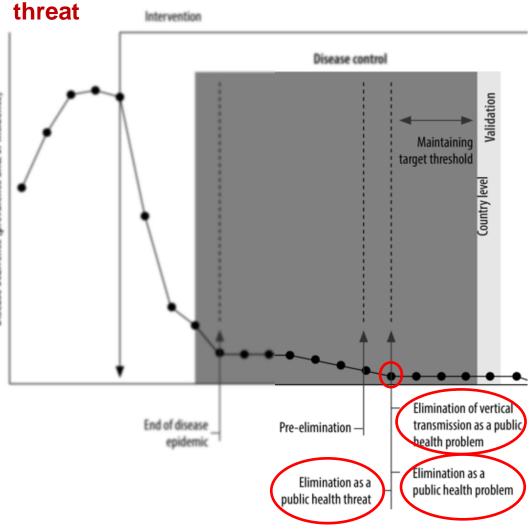


Elimination as a

Elimination as a

public health threat

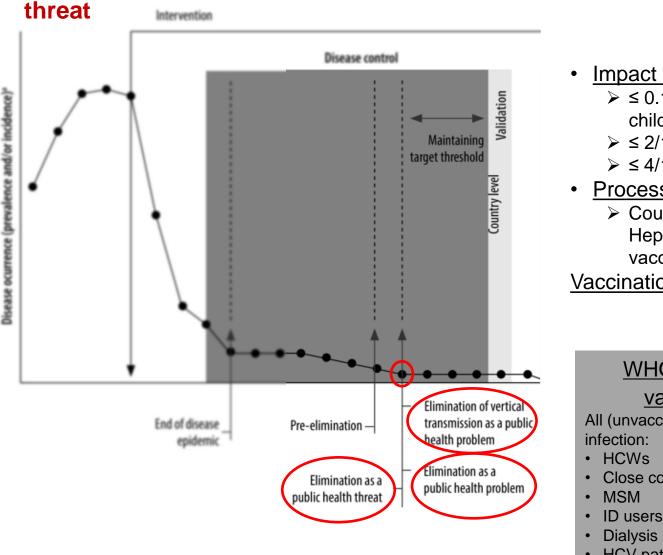




### Vaccine-preventable infectious diseases

- 1. Hepatitis B
- 2. Maternal and neonatal tetanus
- 3. HPV related cervical cancer
- 4. Tuberculosis (low incidence countries)
- 5. Rabies (dogs)
- 6. Leprosy



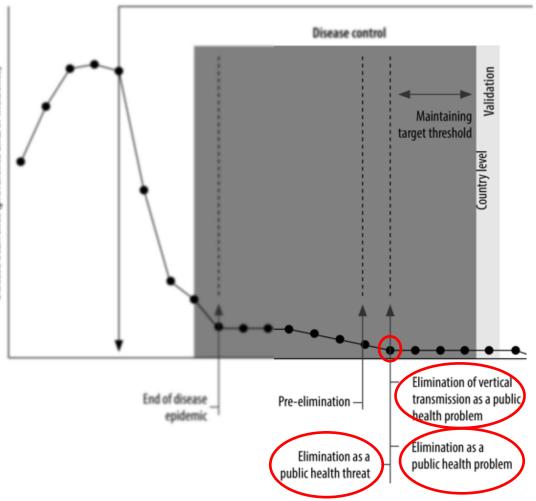


#### Hepatitis **B**

- Impact target<sup>15</sup>:  $\geq$  0.1% HBsAg prevalence in children 0-5 years by 2030;  $\geq$  2/100 000 cases/yr by 2030;  $> \le 4/100\,000$  deaths/yr by 2030 • Process target for vaccination<sup>15</sup>: Countries with universal timely HepB-BD – BD ≥90%; HepB3 vaccine coverage ≥90% Vaccination target for adults: None WHO recommendations for vaccination in adults<sup>16</sup>: All (unvaccinated) adults at higher risk for Close contacts of chronic HBV patients
  - **Dialysis** patients
  - HCV patients etc.



threat Intervention



#### Maternal and neonatal tetanus

• <u>Impact target<sup>17</sup>:</u> <1 case of neonatal tetanus per 1000 live births per year in all districts of a country

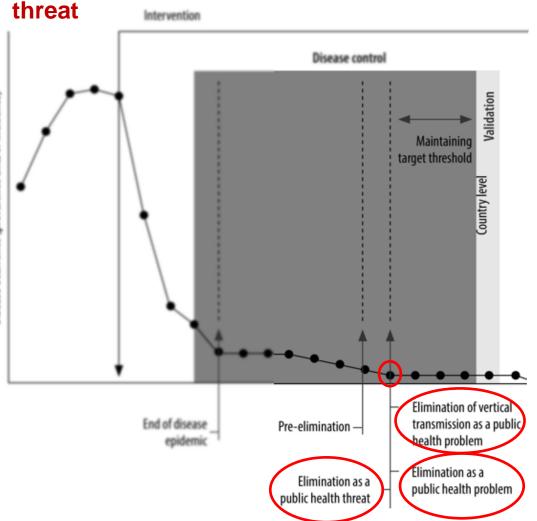
#### Process target for vaccination<sup>17</sup>:

- ≽ ≥80% of pregnant women in every district (≥2 doses)
- ➢ High-risk districts: ≥80% coverage with ≥2 doses of tetanus toxoidcontaining vaccine among women of reproductive age

#### WHO recommendations for vaccination in adults (low-incidence countries)<sup>5</sup>:

All pregnant women should have their tetanus vaccination history reviewed at their first antenatal care contact and any missing doses should be provided at that contact and at subsequent contacts, as may be indicated



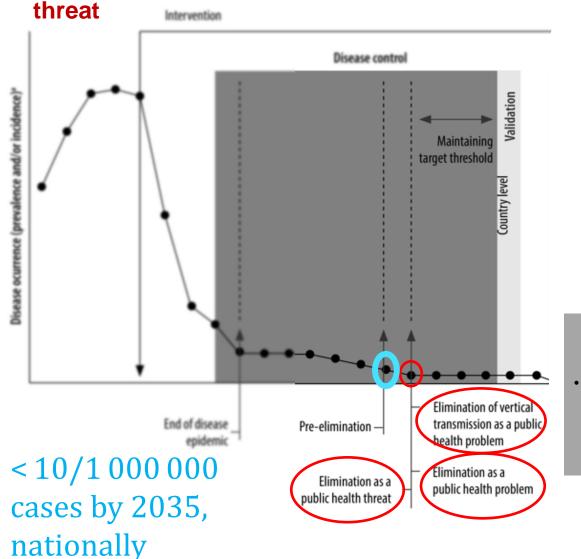


#### **HPV** related cervical cancer

- <u>Impact target<sup>18</sup></u>: An incidence of 4 per 100 000 women-years globally by the end of century (global)
- Process target for vaccination<sup>18</sup>: 90% of girls fully vaccinated with HPV vaccine by age 15 years by 2030

<u>WHO recommendations for</u> <u>vaccination in adults<sup>19</sup>:</u> Vaccination of secondary target populations, e.g. females aged ≥15 years (≤45 y), boys, older males or MSM





### Tuberculosis (low incidence countries)

- Impact target<sup>20;21</sup>: <1 TB case per million population by 2050
- Process target for vaccination: None

(to limit BCG vaccination to neonates and infants of recognised high-risk groups for tuberculosis<sup>20</sup>)

Vaccination target for adults: None

#### WHO recommendations for

#### vaccination in adults<sup>22</sup>:

- Unvaccinated TST/IGRA-negative:
  - Those moving from low to high TB incidence/ leprosy burden settings
  - Persons at risk of occupational exposure



#### **Disease control** Elimination Verification Maintaining target thresho interruption of transmission or Country and/or regional level absence of transmission Elimination of vertical Interruption of transmission as a public Pre-elimination -transmission health problem Elimination of Elimination as a transmission Elimination as a public health problem public health threat

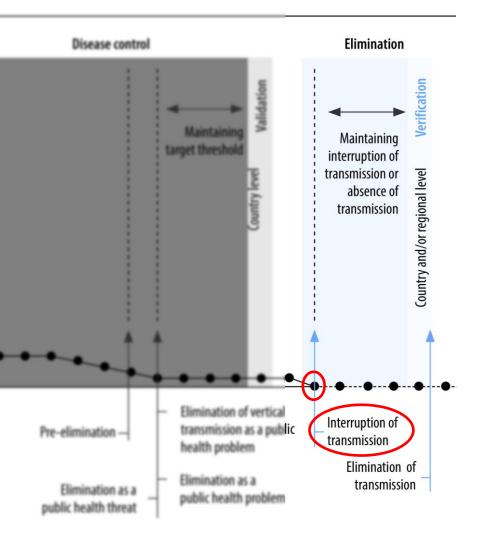
#### Interruption of transmission

### Vaccine-preventable infectious diseases

- 1. Measles
- 2. Rubella and congenital rubella syndrome
- 3. Rabies (dogs)
- 4. Cholera
- 5. Leprosy
- 6. Malaria



#### Interruption of transmission



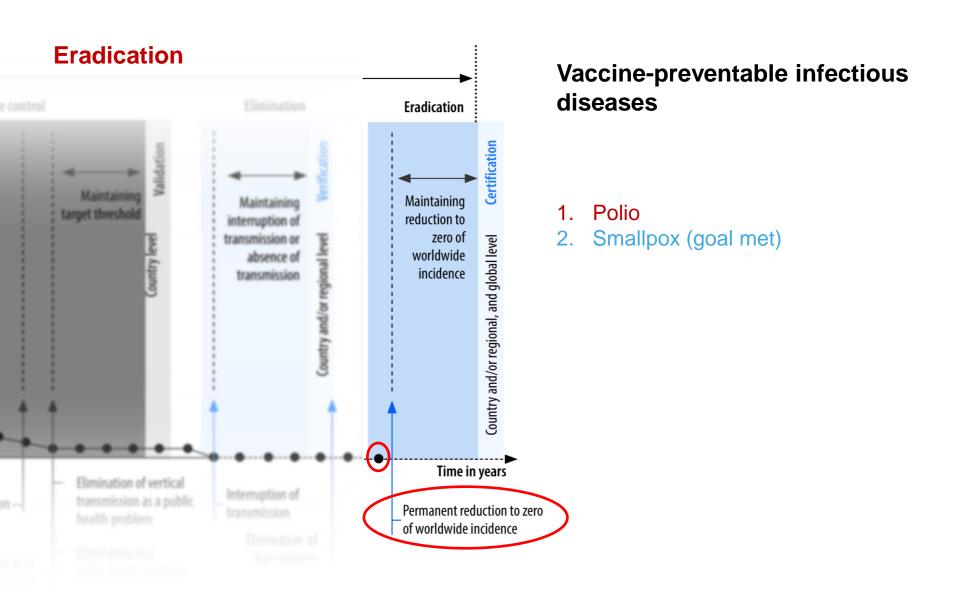
### Measles, Rubella and congenital rubella syndrome

- Impact target<sup>23</sup>: Zero indigenous measles & rubella & CRS cases for at least a continuous 12 months period in the presence of a high-quality surveillance system
- Process target for vaccination<sup>23</sup>: ≥95% coverage of 2-doses of MRCV in each district and nationally

### WHO recommendations for vaccination in adults<sup>24;25</sup>:

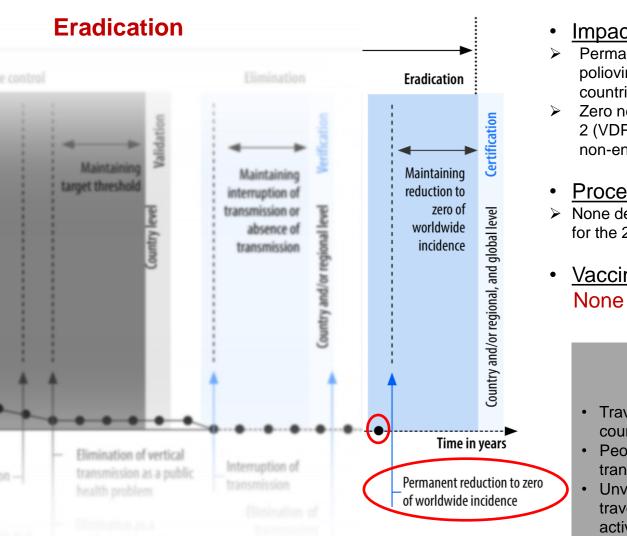
- <u>Measles: all susceptible adults</u> particularly, travellers to measles-endemic countries, HCWs &PLHIV
- <u>Rubella:</u> All non-pregnant women of reproductive age who are not already vaccinated or who are seronegative for rubella







#### Polio



- Impact target<sup>26</sup>:
- Permanently interrupt (zero cases) all wild poliovirus type 1 (WPV1) transmission in endemic countries
- Zero new cases of vaccine-derived poliovirus type 2 (VDPV2) transmission and prevent outbreaks in non-endemic countries
- Process target for vaccination<sup>26</sup>:
- None defined in the new polio eradication strategy for the 2022-2026 period
- <u>Vaccination target for adults:</u> None

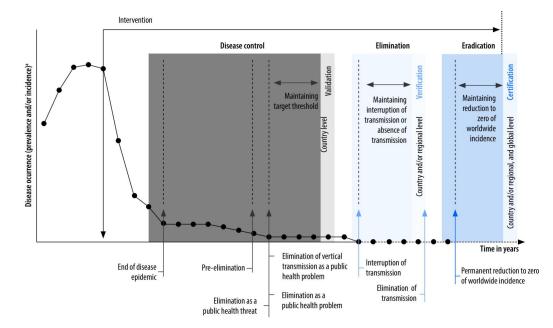
#### WHO recommendations for

- vaccination in adults<sup>27,28</sup>:
- Travellers from polio-free to polio-endemic countries
- People living in countries with active transmission of vaccine-derived virus
- Unvaccinated pregnant / lactating persons travelling to a country where WPV or VDPV is actively circulating



# Challenges in setting and achieving targets

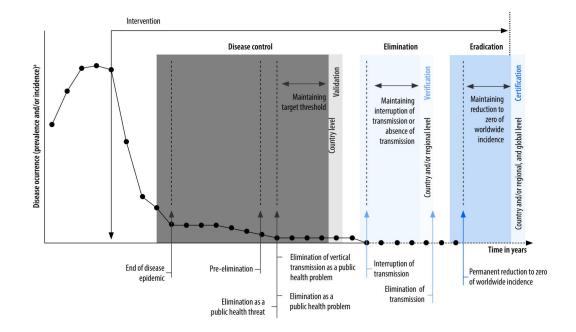
- Vaccine hesitancy and misinformation leading to suboptimal vaccination coverage in adults.
- Socioeconomic disparities impacting access to vaccination and healthcare
- Health system fragmentation across countries, hindering coordinated efforts.
- Surveillance and reporting on indicators data quality
- Emerging infectious diseases and antimicrobial resistance pose ongoing threats.





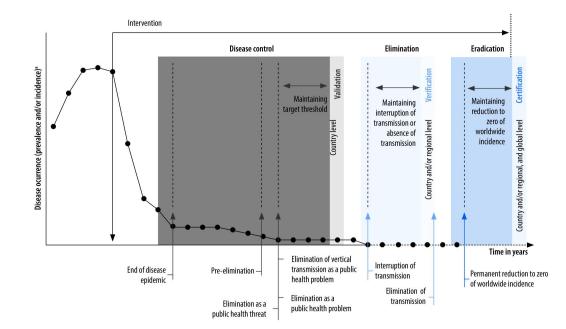
### Where to from here...

- Strengthening vaccine confidence targeted communication and education campaigns.
- Addressing social determinants of health to reduce disparities
- Enhancing cross-border cooperation and harmonisation of vaccination policies
- Investing in surveillance systems timely detection and response
- Promoting R&D of new vaccines and innovative vaccine delivery strategies





### Thank you



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