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***African Health Officials from 13 Countries Outline
Decision-Making Process for Inclusion of
Malaria Vaccine in Future African Vaccine Programs***

Cotonou, Benin (January 24, 2006) – As the world moves closer to developing a vaccine that reduces malaria-related deaths and illness in Africa, where the disease remains the largest killer of children, the pace is also quickening for countries and partner organizations to plan for the most rapid, appropriate use of a vaccine as soon as the first is available.

To this end, health ministry and public health officials from 13 African countries are meeting with multilateral and bilateral partners on January 24 to 26 in Cotonou, Benin, to define processes and data needed for early decisions on the role of a successful vaccine in national health systems and as part of ongoing efforts to prevent and control malaria.

The Benin consultation will outline key preparatory steps for policymakers in a plan called the National Decision-Making Framework for Malaria Vaccines. This framework will help countries anticipate issues that will be raised by the introduction of a vaccine, according to the meeting's main sponsors, the Ministry of Health of Benin, the World Health Organization (WHO), the US-based PATH Malaria Vaccine Initiative (MVI), and the United States Agency for International Development.

Critical issues include the vaccine's potential impact on a population's overall health, its cost-effectiveness and affordability, how the vaccine would be integrated into other health services, and communities' perceptions of the vaccine.

“We’re working now to close the traditional gap between having a vaccine and actually saving children’s lives in Africa,” said MVI director Dr. Melinda Moree. “Early planning is key to avoiding the delays seen in introducing life-saving vaccines into immunization programs in Africa. A malaria vaccine will create a unique set of questions and challenges for national, regional, and international policymakers. The framework will help pinpoint the key issues, identify critical gaps in information that need to be filled, and allow early planning.”

Scientists have worked for decades to develop a malaria vaccine, yet none currently exists. The scientific community has set 2015 as the target for developing a viable, safe, and effective product. Recent advances in field testing suggest that a vaccine from among the more than 15 candidates in clinical trials could beat this target and be licensed for use as early as 2011.

“The current timeframe means that a licensed malaria vaccine could be an option for countries within the next five or so years,” said Benin’s Minister of Health, Professor Dorothée Kinde-Gazard. “The process of considering how this new vaccine would fit into current health programs related to immunization and malaria control must therefore begin well before the vaccine actually becomes available.”

Once introduced, a vaccine is expected to complement the use of insecticide-treated bednets and other tools to reduce the impact of malaria, which kills more than one million people—primarily young African children—every year.

According to Dr. Magda Robalo of WHO’s Regional Office for Africa, “Experience with other vaccines, insecticide-treated bednets, and new antimalarial drugs has demonstrated the need to begin preparations a number of years before an intervention is actually ready to be used.”

Recent developments have provided the malaria vaccine community with some confidence that the current time frame could be met and that long sought-after malaria vaccines may be on the horizon. In late 2004, GlaxoSmithKline Biologicals (GSK Bio), the Hospital Clinic of the University of Barcelona, the Manhica Health Research Centre in Mozambique, and MVI released new data on the world’s most advanced malaria vaccine candidate, GSK Bio’s RTS,S vaccine. A trial in southern Mozambique had found that the RTS,S vaccine protected children from malaria for at least six months. According to the study, vaccine efficacy against clinical malaria was 30 percent. Efficacy against malaria infection was 45 percent, and efficacy against severe disease was 58 percent.

More recent findings, published in the November 15, 2005, online edition of the British medical journal *The Lancet*, showed that the vaccine remained effective over an 18-month observation period.

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PATH is an international, nonprofit organization that creates sustainable, culturally relevant solutions, enabling communities worldwide to break longstanding cycles of poor health. For more information, visit www.path.org. The PATH Malaria Vaccine Initiative (MVI) is a global program established through an initial grant of \$50 million from the Bill & Melinda Gates Foundation, which has since awarded it an additional \$207.6 million, including \$107.6 million to complete development of the RTS,S vaccine. MVI’s mission is to accelerate the development of promising malaria vaccines and ensure their availability and accessibility in the developing world. For more information, visit www.malariavaccine.org.