Planning for OPV2 withdrawal: status of pre-requisites and Polio Working Group priorities for 2013-14

Liz Miller, Chair, SAGE Polio Working Group

9 April, 2013
SAGE recommended that all countries should introduce at least 1 dose of IPV into their routine EPI to mitigate risks associated with withdrawal of OPV2

SAGE noted that it will review progress on achieving pre-requisites for OPV2 withdrawal at every meeting to ensure the earliest possible date for OPV2 withdrawal is established
SAGE oversight for OPV2 withdrawal

*Objective 2 of GPEI Strategic Plan*

- Polio WG conference call (14 March) reviewed the 6 detailed workstreams on pre-requisites for OPV2 withdrawal:

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<th>Oversight: SAGE</th>
<th>Oversight: Certification Groups</th>
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<td>• outbreak response</td>
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<td>• bOPV and IPV introduction</td>
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Potential WHA timeline for OPV2 withdrawal

2014: *WHA information paper*

2015: *potential WHA resolution*

Major elements:

• Containment timing and potential interim criteria for SABIN type 2 viruses
• Response protocol for type 2 viruses (post OPV2)
• International notification of type 2 poliovirus (under IHR)
• Date for last OPV2 use globally
Major work areas - Polio WG 2013

1. IPV schedules (incl. timing for 1-dose)
2. IPV supply and financing strategy (incl. for middle income countries)
3. Containment policy (GAP III) and timing
4. Response protocol for type 2 virus detection (following OPV2 withdrawal)
bOPV + IPV introduction

- Assuring access to IPV for all OPV-using countries (long term)
  - Facilitate development + implementation of IPV supply + financing strategy
  - Guide development of IPV/bOPV schedules and IPV introduction strategies
  - Support drafting protocol to withdraw and destroy remaining tOPV globally

- Role for SAGE
  - IPV schedule recommendations (SAGE - Nov. 2013)
  - Consideration of potential date for last OPV2 use (SAGE - Nov. 2014)
• bOPV + IPV introduction recommendations will be informed by development timelines for these products
bOPV and IPV development + licensing
Outbreak response post-OPV2 cessation

• Major elements of workstreams
  – mOPV stockpiles (contracts, composition, timeline)
  – Response protocols post-OPV2 cessation (incl. use of live mOPV2 vaccine following type 2 virus detection)

• Role of SAGE
  – review of draft response protocol by November 2013
  – recommendation on final response protocol by April (Nov.) 2014
Laboratory containment

- **Major elements of workstreams**
  - By end-2013, align Global Action Plan (GAP III) with endgame plan - technical oversight by *Ad-hoc Committee on Biosafety*
  - Specific containment policy for vaccine producers and OPV stockpile

- **Role of SAGE**
  - GAP III timing and strategy to be reviewed by SAGE in Nov. 2013
Major work areas - Polio WG 2013

1. **IPV schedules**
   - timing of 1-dose IPV strategy in relation to existing routine EPI, balancing vaccine efficacy and programmatic needs

2. **IPV supply and financing strategy**
   - working with key countries, GAVI, other donors and manufacturers to assure sufficient IPV supply for accelerated introduction globally (incl. in MICs)

3. **Containment policy (GAP III)**
   - Review Global Action Plan III, alignment with endgame plan (on advice of Ad-hoc Committee on Biosafety)

4. **Response protocol for type 2 virus detection post-OPV2**
   - advise on protocol for responding to a type 2 virus detection after OPV2 cessation globally
High-level timeframe towards OPV2 withdrawal

11/2013: SAGE recommendations on IPV schedules, draft response protocol, draft IPV supply and financing strategy

5/2014: WHA information paper and possible technical briefing on OPV2 withdrawal

11/2014: SAGE recommendation on final response protocol and potential target date for last OPV2 use

5/2015: WHA resolution on key OPV2 withdrawal issues
Question to SAGE:

• Is SAGE comfortable with this aggressive timeline and workplan to guide OPV2 cessation?