Advisory Committee on Immunization Practices:
Influenza Session

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Presented at the National Influenza Vaccine Summit
June 30th, 2009
Dallas, Texas

Influenza Vaccine Working Group Members
Kathy Neuzil, Chair

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- Lance Chilton
- Nana Bennett (NACCHO)
- Hank Bernstein (AAP)
- Douglas Campos-Outcalt (AAFP)
- Jeff Duchin (NACCHO)
- Stanley Gall (ACOG)
- Steven Gordon (SHEA)
- Elyse Olishen Kharbanda (SAM)
- Susan Lett (CSTE)
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- Rob Schechter (AIM)
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- Joe Bresee (CDC)
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- Karen Broder (CDC)
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- David Delozier (CDC)
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- Jeanne Santoli (CDC)
- David Shay (CDC)
- Jean Clare Smith (CDC)
- Ray Strikas (NVPO)
- Mary Vernon-Smith (CDC)
- Tim Uyeki (CDC)
Workgroup Activities 2009

• Seasonal vaccine safety data updates

• Presentations from vaccine manufacturers
  – Adjuvanted seasonal and H5N1 vaccines

• Antiviral issues
  – Antiviral resistance among seasonal H1N1
  – Interim guidelines for pandemic H1N1 treatment
  – Annual treatment and chemoprophylaxis recommendations

• Pandemic H1N1 discussions
  – Immunology
  – Epidemiology
  – Vaccine development
  – Program planning

Special ACIP Influenza Session: Goals

• Discuss and vote on antiviral guidance for both seasonal and pandemic H1N1 virus infections

• Provide background on pandemic H1N1 issues for ACIP in preparation for activities and decisions in summer and fall 2009
Considerations for Pandemic A/H1N1 Vaccination Program

• Need for clear program goals, roles and responsibilities
• Timelines for a vaccine program must consider the possibility of an “early wave”
  – What vaccines are likely to be available, when, and in what quantities?
  – What basic information is needed to inform recommendations on use of a vaccine, preferably a licensed vaccine? When will it be available?
• How might a pandemic influenza vaccine program co-exist with a seasonal program?

Major Outcomes of Influenza Session

• Epidemiology and virology
  – Pandemic H1N1 virus circulation continues in many parts of United States
  – Pandemic H1N1 morbidity largely among children and younger adults
  – Large proportion of young population likely susceptible
  – Co circulation of seasonal and pandemic viruses possible later in 2009

• Pandemic H1N1 vaccine development
  – Proceeding as planned
  – Timelines for availability and supply not certain and depend on formulation and production constraints
  – Initial vaccine likely to be similar to seasonal vaccine formulations (not adjuvanted)
Major Outcomes of Influenza Session

• Vaccine program implementation
  – Plan for near simultaneous seasonal and H1N1 vaccine programs
  – Communication of complex vaccination recommendations will be challenging
  – Uncertainties re availability, formulation, program scale and demand

• Assessment
  – Vaccine effectiveness and safety plans in place

Early use of seasonal vaccine

• Current ACIP guidelines indicate use can begin when vaccine available
  – Provides protection even when early circulation of influenza viruses
  – No evidence for clinically important waning immunity among those vaccinated in late summer and early fall
  – Reduces overlap between pandemic and seasonal vaccine campaigns
Manufacturers' projections for availability of 2009-10 seasonal influenza vaccines*

• Total ~120 Million doses
  – ~15 M doses available by mid August
  – ~40M doses available by Sep 1

• >90% shipped by November 1

• Preservative-free and infant-toddler doses formulations included in early releases

*Aggregated data for planning purposes

ACIP role and plans

• Review epidemiologic data, vaccine studies, and program planning

• Develop and review plans for vaccination targeting and early receipt of vaccine
  – Need to reassess existing vaccine prioritization plan

• Suggest ways to reduce impact on seasonal vaccination program

• Begin development of guidance for pandemic influenza H1N1 vaccine use

• Likely July or August public meeting