



International
Vaccine
Institute

Developing Countries Vaccine Manufacturers Network

Annual General Meeting
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Sao Paulo, Brazil

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IVI



IVI: Who we are -- where we work -- what we do

IVI is an UN-chartered international organization dedicated to accelerating vaccine R&D for global health

Our mission

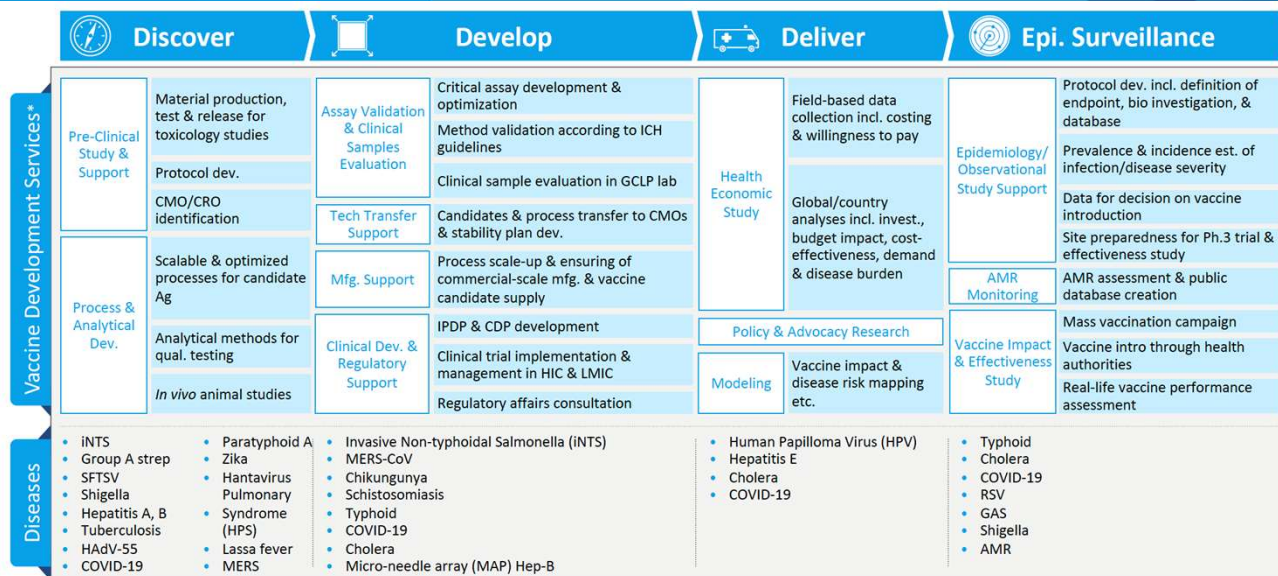
... is to discover, develop and deliver safe, effective and affordable vaccines to enable the world's most vulnerable people to have full, productive lives

Next step

... is to expand our global presence and expand our partnerships and innovative capabilities

Together

... we can achieve our **VISION** of developing countries of suffering from infectious disease



*in-progress application



Impact for a healthier future

IVI's model of market access:

- Affordability (global access requirements)
- Work with global, regional and local entities
- Facilitation with data generation (surveillance, economics, impact assessment, clinical)
- Advocacy and coordination: GTFCC, TyVAC, PDVI, DVI
- Collaboration and technology transfer for local access
- Innovative technologies to reach the last-mile (MAP)



First ever low-cost oral cholera vaccine



150 million+ doses shipped globally



Vaccine discovery and development



180+ projects completed since 2015



Epidemiology and impact studies



20+ projects completed since 2015



Technology transfer and Clinical development



14 tech transfer projects with **6** vaccines and **40+** clinical trials sponsored by IVI since 2005



Prequalification



5 vaccine products pre-qualified by the WHO



Training



8,000+ professionals trained on-site and online













Knowledge production



1,400+ publications, **625** since 2015

IVI Vaccines Bring *Affordable* Innovation to Global Health

		Cost	Funder	Manufacturer
	Vaccine #1 Oral cholera vaccine	Cost thru PQ: \$28M	BILL & MELINDA GATES foundation	 Shanchol PQ 2011  Euvichol® PQ 2016 Euvichol®- Plus PQ 2018 Euvichol®-S PQ 2024
	Vaccine #2 Vi-DT TCV (Typhoid)	Cost thru PQ ¹ : \$29M	BILL & MELINDA GATES foundation	 SK bioscience KMFDS approved, WHO PQ 2024  biofarma BPOM approved 11/23
	Vaccine #3 Non-typhoidal Salmonella Shigella	IVI internal invest. preclinical POC; Wellcome: \$3.2M	 	

1. Estimated

Salmonella Vaccine Development Status

MacLennan et al 2023

Different stages of development:

- Multiple TCVs licensed and WHO PQed
- iNTS (Typhimurium and Enteritidis) alone or in combination with TCV in early clinical trials
- Paratyphi A alone in pre-clinical/ early clinical development
- Pan-Salmonella vaccine (TCV, Para A + iNTS) concept stage work in progress

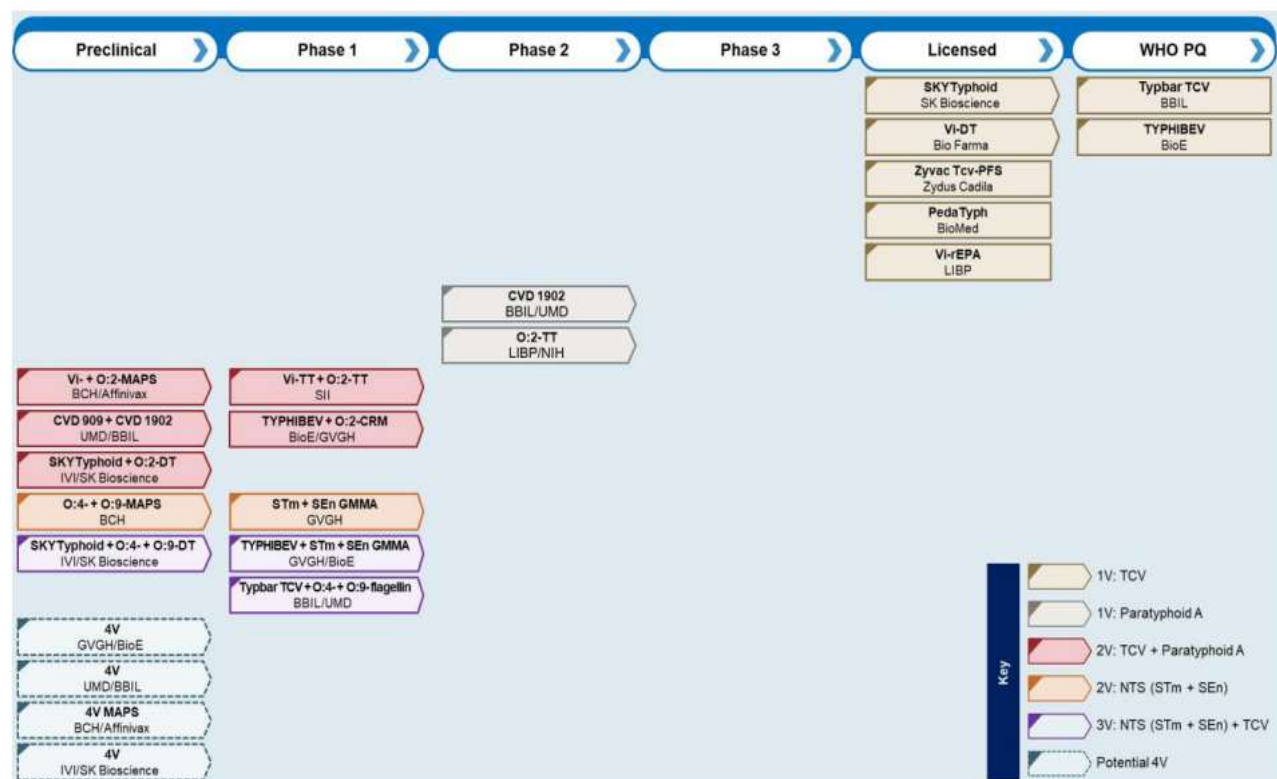
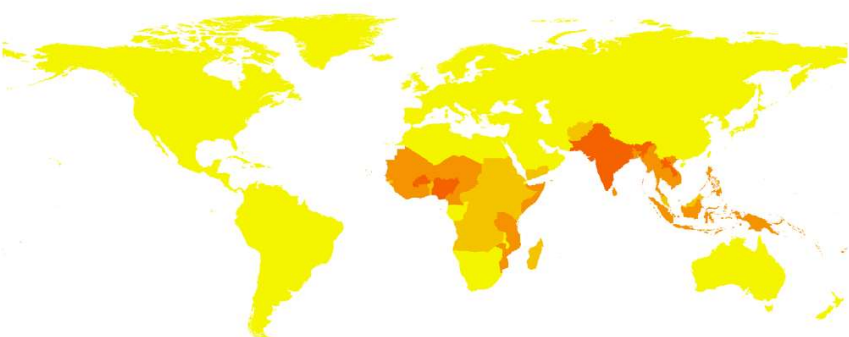


Figure 1. *Salmonella* combination vaccine pipeline including licensed and World Health Organization–prequalified typhoid conjugate vaccines, monovalent paratyphoid A vaccines in clinical development, and potential quadrivalent *Salmonella* vaccines. Arrowed boxes indicate ongoing development. Abbreviations: 1V, monovalent; 2V, bivalent; 3V, trivalent; 4V, quadrivalent; BBIL, Bharat Biotech International Ltd; BCH, Boston Children’s Hospital; BioE, Biological E; GMMa, generalized modules for membrane antigens; GVGH, GlaxoSmithKline Vaccines Institute for Global Health; IVI, International Vaccine Institute; LIBP, Lanzhou Institute of Biological Products; NIH, National Institutes of Health; NTS, nontyphoidal *Salmonella*; PQ, prequalified; SE, *Salmonella* Enteritidis; STm, *Salmonella* Typhimurium; SII, Serum Institute of India; TCV, typhoid conjugate vaccine; UMD, University of Maryland; WHO, World Health Organization.

Salmonella Vaccine Development Strategy Considerations

DALYs due to paratyphoid in 2016



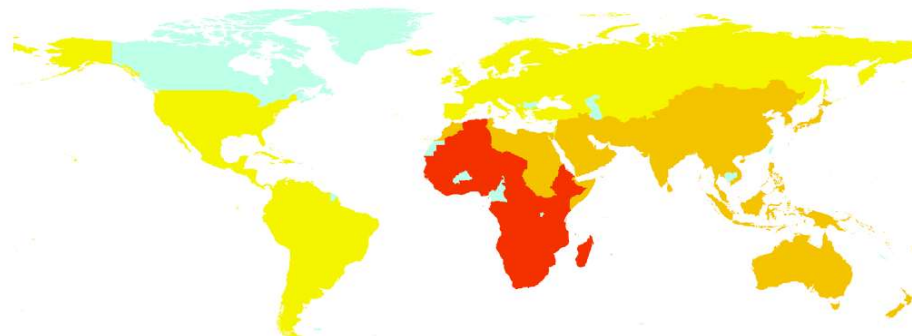
Paratyphoid (DALYs/100k)



Source: JS Lee using IHME estimates

Different
Geographic
distribution

DALYs due to iNTS in 2010



iNTS (DALYs/100k)



Source: JS Lee using Kirk et al.'s estimates

Note: DALYs due to iNTS were only available at the 2010 WHO regional-level by Kirk et al., thus the map should not be interpreted at the country-level.

- **Unclear Regulatory pathway for licensure:** Need for efficacy study? Possible for iNTS, but not for Para A. Role of CHIM?
- **Unclear use-case scenario:** TCV monovalent vs TCV-Para A bivalent vs TCV-iNTS trivalent vs Pan-Salmonella (TCV-Para A-iNTS)
- **Immune inhibition for multiple combination antigens:** Need for process optimization and adjuvants
- **Different target age-groups and vaccination regimes**
- **Longevity of immune responses and need for multiple/ booster doses**
- **COGS for combination vaccines:** Too expensive for targeted countries?
- **Financing:** TCV under Gavi funding, iNTS potentially can, but unclear on Para A based on the endemic countries