



**International Coordination Group on Vaccine
Provision for Cholera**

Report of the Annual Meeting

Geneva

19 September 2018

© World Health Organization 2019

Some rights reserved. This work is available under the Creative Commons Attribution-Non-commercial-Share Alike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization.

Suggested citation. International Coordination Group on Vaccine Provision for Cholera: report of the annual meeting, Geneva, 19 September 2018. Geneva: World Health Organization; 2018 (WHO/WHE/IHM/2019.3). Licence: CC BY-NC-SA 3.0 IGO.

This publication contains the report of the meeting of International Coordinating Group on Vaccine Provision for Cholera and does not necessarily represent the decisions or policies of WHO.

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

Sales, rights and licensing. To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <http://www.who.int/about/licensing>.

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Table of contents

Table of contents	iii
List of abbreviations.....	iv
Executive summary	1
Introduction.....	2
1. Epidemiological update 2018.....	4
Background.....	4
The epidemiological situation in 2017/2018.....	4
PAHO Region update.....	5
2. ICG response and performance outcomes	6
3. Vaccine supply, procurement, forecasting and deployment	9
Vaccine procurement	10
Manufacturer updates	10
OCV use	11
Vaccine investment strategy	12
The GTFCC and the 2030 Roadmap	12
4. Evaluation of the ICG.....	12
The ICG Governance and Oversight Committee	13
The ICG Accountability Framework.....	13
5. Discussion	15
6. Action points.....	16
Annex 1: Meeting agenda.....	17
Annex 2. List of participants.....	19

List of tables

Table 1. Summary of emergency requests to the ICG for cholera vaccines	6
Table 2. Summary of ICG performance indicators for emergency cholera vaccine requests.....	7

List of abbreviations

AFRO	WHO Regional Office for Africa
CFR	Case fatality rate
Gavi	Gavi, the Vaccine Alliance
GTFCC	Global Task Force on Cholera Control
ICG	International Coordinating Group
MSF	Médecins sans Frontières
OCV	Oral cholera vaccine
SD	Supply Division of UNICEF
UNICEF	United Nations Children's Fund
WaSH	Water, sanitation and hygiene
WHO	World Health Organization

Executive summary

The meeting of the International Coordinating Group (ICG) on Vaccine Provision for Cholera was held on 19 September 2018 in Geneva as part of three days of back-to-back meetings from 18–20 September. The aims of the meeting were for partners and stakeholders to: review relevant epidemic response activities in 2017 and 2018, including lessons learned in terms of campaign implementation; discuss the anticipated demand for OCV and stockpile size for the coming years; and exchange information with the extended group of ICG partners and stakeholders, including vaccine manufacturers.

After the opening remarks, participants were updated on the epidemiological situation and vaccine shipments from the ICG cholera stockpile. This included an overview of recent campaigns, including missed opportunities, and a presentation on monitoring and evaluation activities during emergency campaigns. UNICEF-SD gave its update on vaccine shipments during 2017 and 2018, and the ICG Secretariat a review of its key performance indicators. WHO Headquarters then presented progress towards implementing its 2030 roadmap, while Gavi, the Vaccine Alliance, shared its vaccine demand forecast and details of its vaccine investment strategy for cholera. After lunch, UNICEF-SD presented its procurement update and availability timeline. This was followed by a discussion by participants on the size of the global cholera stockpile and the minimum size of the reserve for emergency campaigns. Vaccine manufacturers then gave their production forecasts for the period 2018–2022. Finally, the ICG Secretariat presented the results of the recent external evaluation of the ICG mechanism, and its proposals for its Governance and Oversight Committee and new ICG Mechanism Accountability Framework.

During 2018 cholera outbreaks occurred in a number of countries including the DRC, Malawi, Nigeria, Niger and Zimbabwe, in addition to the ongoing humanitarian crisis in Bangladesh. A total of 10 requests were made from January to August for a total of 7,891,326 vaccine doses. Of these, nine requests for 4,295,750 doses were approved for response to outbreaks and humanitarian emergencies in the DRC, Malawi, Bangladesh, Nigeria, South Sudan and Lao PDR. The ICG's key performance outcomes in 2018 were comparable with the previous two years.

All participants agreed that ICG and UNICEF Supply Division (SD) should establish a working group on delivery lead times and to identify and evaluate bottlenecks in the procurement and delivery process. Importantly, ICG members and partners recommended that the stockpile of OCV should contain a revolving buffer of 8 million doses, of which 3 million available at all time. (as a lowest acceptable level)

It was also agreed that presentations from countries participants on campaign implementation and use of vaccines on the ground should be part of the annual meeting. The participants also highlighted the need for vaccination campaigns to take place as part of multi-sectorial strategies integrating long-term measures for risk reduction—particularly in known “hotspots” where outbreaks are predictable and recur on a regular basis.

Efforts are also underway to implement the recommendations of the external review of the ICG, which was presented to the ICG Secretariat in October 2017. The ICG has established its new Governance and Oversight Committee and is beginning to implement the ICG Accountability Framework, which will be effective from 2019 onwards.

Introduction

Cholera is an acute diarrhoeal infection caused by the bacterium *Vibrio cholerae*. While control measures include treatment of cases with rehydration therapy, treatment with antibiotics and use of oral cholera vaccines (OCVs), improving water, sanitation and hygiene (WaSH) conditions is essential for a sustained reduction in risk.

The ICG brings together four founding agencies: The International Federation of Red Cross and Red Crescent Societies, Médecins Sans Frontières (MSF), the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO). It also consults with extended partners including technical experts and vaccine suppliers. Gavi, the Vaccine Alliance, is the principal funder of the three vaccine stockpiles.

The ICG's objectives are:

- To rapidly deliver vaccines in response to infectious disease outbreaks.
- To provide equitable vaccine allocation through careful and objective assessment of risk, based on epidemiological and operational criteria
- To coordinate the deployment of limited quantities of vaccines and other essential medicines.
- To minimize wastage of vaccines and other supplies.
- To advocate for readily-available, low-cost vaccines and medicines.
- To work with manufacturers through UNICEF SD and WHO to guarantee availability of vaccine emergency stock supplies at the global level.
- To follow standard operating procedures and establish financial mechanisms to purchase emergency vaccine supplies and ensure the sustainability of stocks.

The 2018 annual meeting of the ICG on Vaccine Provision for cholera was held on 19 September in Geneva. Participants included representatives of the World Health Organization (WHO) headquarters (HQ), including ICG Secretariat, the WHO Regional Office for Africa (AFRO), the Pan American Health Organization (PAHO), United Nations Children's Fund (UNICEF), with participants both from HQ and the Supply Division (SD), Médecins sans Frontières, the International Federation of Red Cross and Red Crescent Societies (IFRC) and

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_25388

