Combination Vaccines Working Group Advisory Committee on Immunization Practices (ACIP)

Arthur Reingold, MD

University of California – Berkeley Chair, ACIP Combination Vaccine Working Group

June 25, 2015



National Center for Immunization & Respiratory Diseases

Division of Bacterial Diseases

Background

Combination vaccines

- Combine equivalent component vaccines into single products to prevent more than one disease or to protect against multiple strains of infectious agents causing the same disease
- Reduce the number of injections
- Reduce concern regarding number of injections
- Improve coverage and timeliness

Terms of Reference

1. Review published and unpublished data related to the safety and immunogenicity of the

- **1.** Quadracel DTaP IPV vaccine for children 4 through 6 years
- 2. Investigational hexavalent pediatric vaccine (DTaP5-IPV-Hib-HepB) 3 dose series for children at 2, 4, and 6 months

Quadracel

- Diphtheria and Tetanus Toxoids and Acellular Pertussis Adsorbed and inactivated Poliovirus Vaccine (Sanofi Pasteur)
- Second DTaP-IPV vaccine licensed for use in children 4 through 6 years of age
- Indicated for use as fifth dose in DTaP series and fourth or fifth dose in IPV series, in children who have received 4 doses of Pentacel or Daptacel
- Biologics License Application (BLA) submitted to FDA 3/24/2014
- BLA accepted by FDA for review 5/22/2014
- **FDA** approved licensure 3/24/2015

Quadracel – Immunogencity and Safety

- Pre-licensure Pivotal Clinical Trial: M5102
- Multicenter, randomized, controlled, Phase 3 clinical trial comparing DTaP-IPV (Quadracel) to separately administered DTaP (Daptacel) and IPV (IPOL[®]) vaccines in children 4-6 years who were primed with 4 doses of Daptacel or Pentacel
 - Quadracel induced non-inferior antibody responses compared to separately administered Daptacel and IPOL vaccines for all evaluated immunogenicity parameters
 - Rates of solicited injection-site and systemic reactions, unsolicited AEs, and SAEs were comparable among the vaccination groups

Investigational Pediatric Hexavalent Vaccine

Sanofi Pasteur and Merck

- Diphtheria, Tetanus, Pertussis (DTaP5), Polio (IPV), Haemophilus influenzae type b (Hib; PRP-OMPC), Hepatitis B (HepB)
- 3 dose series (2, 4, 6 months)
- Biologics License Application (BLA) accepted by FDA for review in October 2014
- Licensure anticipated Fall of 2015
- July September: Merck and Sanofi present to WG; review of safety and immunogenicity data
- October: present hexavalent pediatric vaccine to ACIP, VFC vote
- November/December: draft MMWR Notice to Readers

Work Group Members

ACIP Members Art Reingold, Chair

Ex Officio Member Ann Schwartz, FDA

Liaison Representatives Elizabeth Miller, AAPA Elizabeth Rosenblum, AAFP

CDC Co-leads Gina Mootrey Kathy Edwards, AAP Patsy Stinchfield, NAPNAP

Jennifer Liang

Marietta Vázquez

Work Group Members - SMEs

- Elizabeth Briere Hib
- Andrew Kroger General recommendations, Immunization program
- Jennifer Liang Pertussis
- Pedro Moro Immunization safety
- Sarah Schillie Hepatitis
- Tej Tiwari Diphtheria, Tetanus
- **Greg Wallace Polio**