

THE LANCET

Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

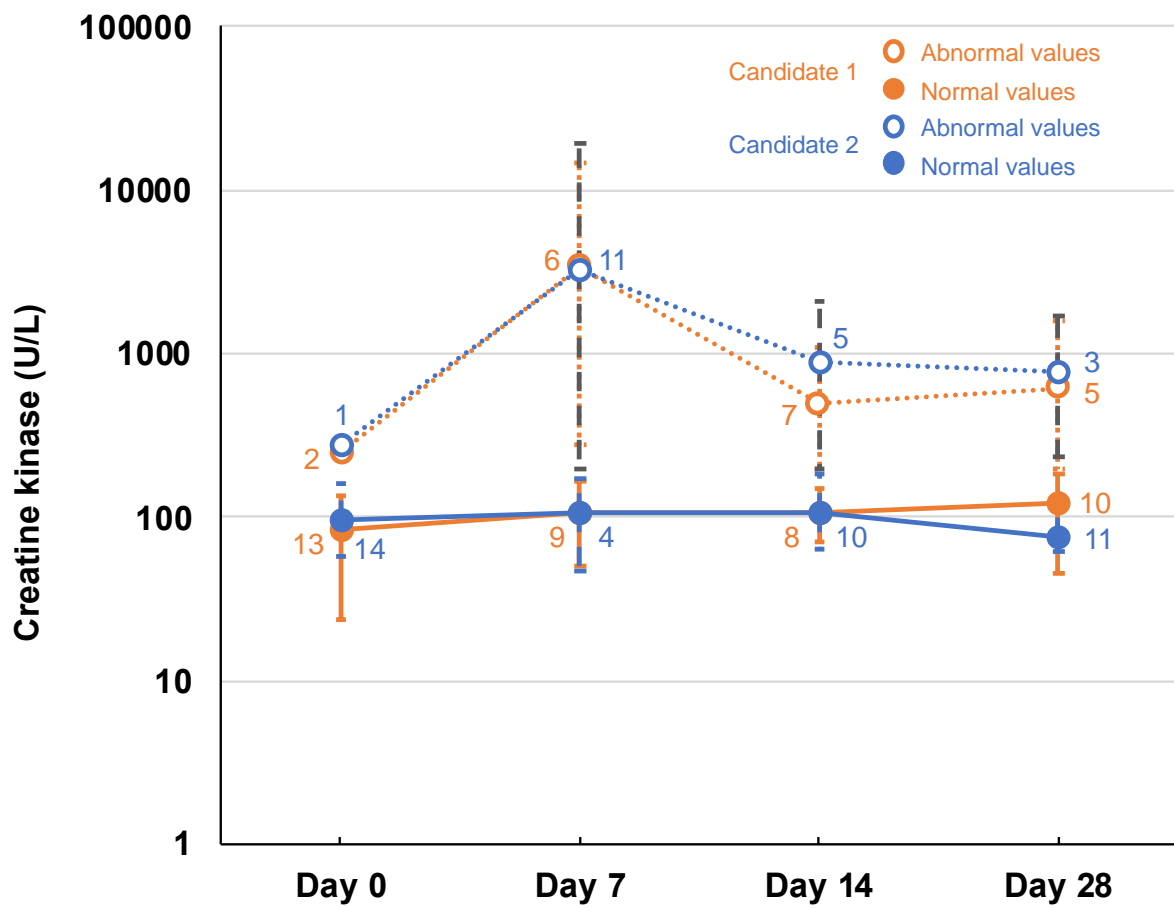
Supplement to: Van Damme P, De Coster I, Bandyopadhyay AS, et al. The safety and immunogenicity of two novel live attenuated monovalent (serotype 2) oral poliovirus vaccines in healthy adults: a double-blind, single-centre phase 1 study. *Lancet* 2019; published online June 4. [http://dx.doi.org/10.1016/S0140-6736\(19\)31279-6](http://dx.doi.org/10.1016/S0140-6736(19)31279-6).

Supplementary Figures.

1. Group creatine kinase levels over the 28-day containment period.
2. Proportions of EES samples causing mouse paralysis.

Supplementary Figure 1.

Creatine kinase levels. Values show mean levels grouped according to being in the normal range (closed symbols) and abnormal ranges (open symbols) for candidate 1 (orange) and candidate 2 (blue). Error bars show ranges of values for each group.



Supplementary Figure 2.

Mouse paralysis proportion for Exploratory Endpoint Samples (EES), as well as clinical trial material (“Vaccine”) in a single-dose ($4.0 \log_{10}$ [CCID₅₀] intraspinal inoculum) transgenic mouse model. Ten mice per sample were assayed, alongside controls, with three replicates each. Points indicate samples/subjects (combined over each replicate), with diamonds indicating the overall means and horizontal lines indicating the median across subjects

* Reference range of 70–90% paralysis developed from repeated assay (n=5) of a type-2-containing sample from an infant vaccinee who received mOPV2 at 40 weeks, following bOPV at 6/10/14 weeks and IPV at 14/36 weeks in a prior clinical trial.²¹ Sample collected 7 days post-challenge and selected based on high reversion (89% 481G).

