

# How well is the 23vPPV working in the non-Indigenous Elderly?

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# Background

## ➤ Effectiveness against IPD

- ~50% in elderly
- Higher in younger adults
- Lower in those with immunosuppression and chronic disease

# 23vPPV in Australia

- 1983:
  - Licensed
- 1997
  - Recommended by NHMRC for all  $\geq 65$  years
  - Available on PBS
- 1998:
  - Funded in Victoria for  $\geq 65$  years
- 1999:
  - Funded nationally for Indigenous adults  $\geq 50$  years and 15-49 with risk factors
- 2005:
  - Funded nationally for  $\geq 65$  years
  - Concurrent with national 7vPCV program

# Methods

## ➤ Impact on IPD notifications

- 2002-2007
- Aged  $\geq 65$  years
- Excluding Victoria
- Excluding Indigenous
- Other published data

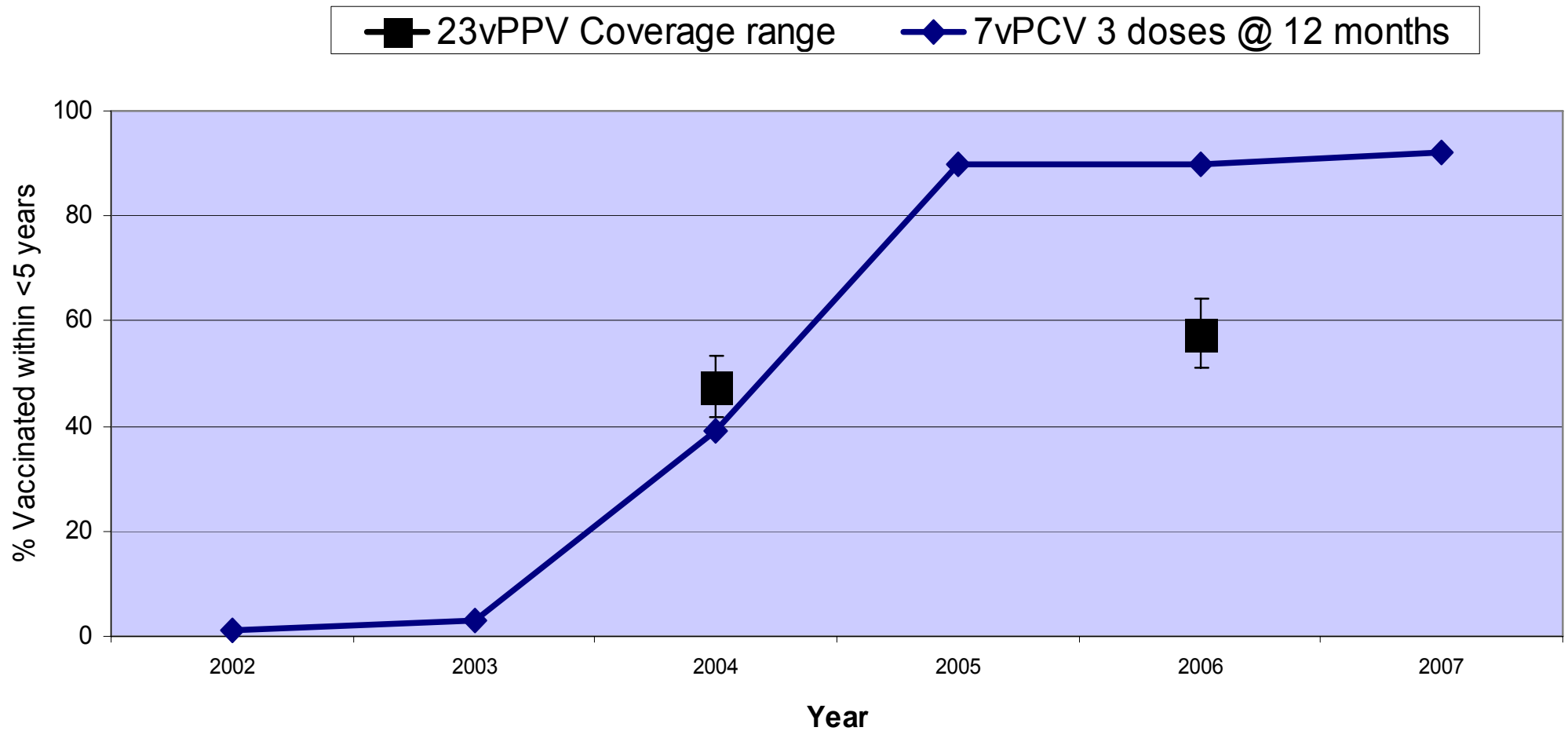
## ➤ Vaccination coverage

- National CATI surveys 2004, 2006
- “Have you been vaccinated for pneumonia in the previous five years?”
- By jurisdiction

## ➤ Vaccine Effectiveness

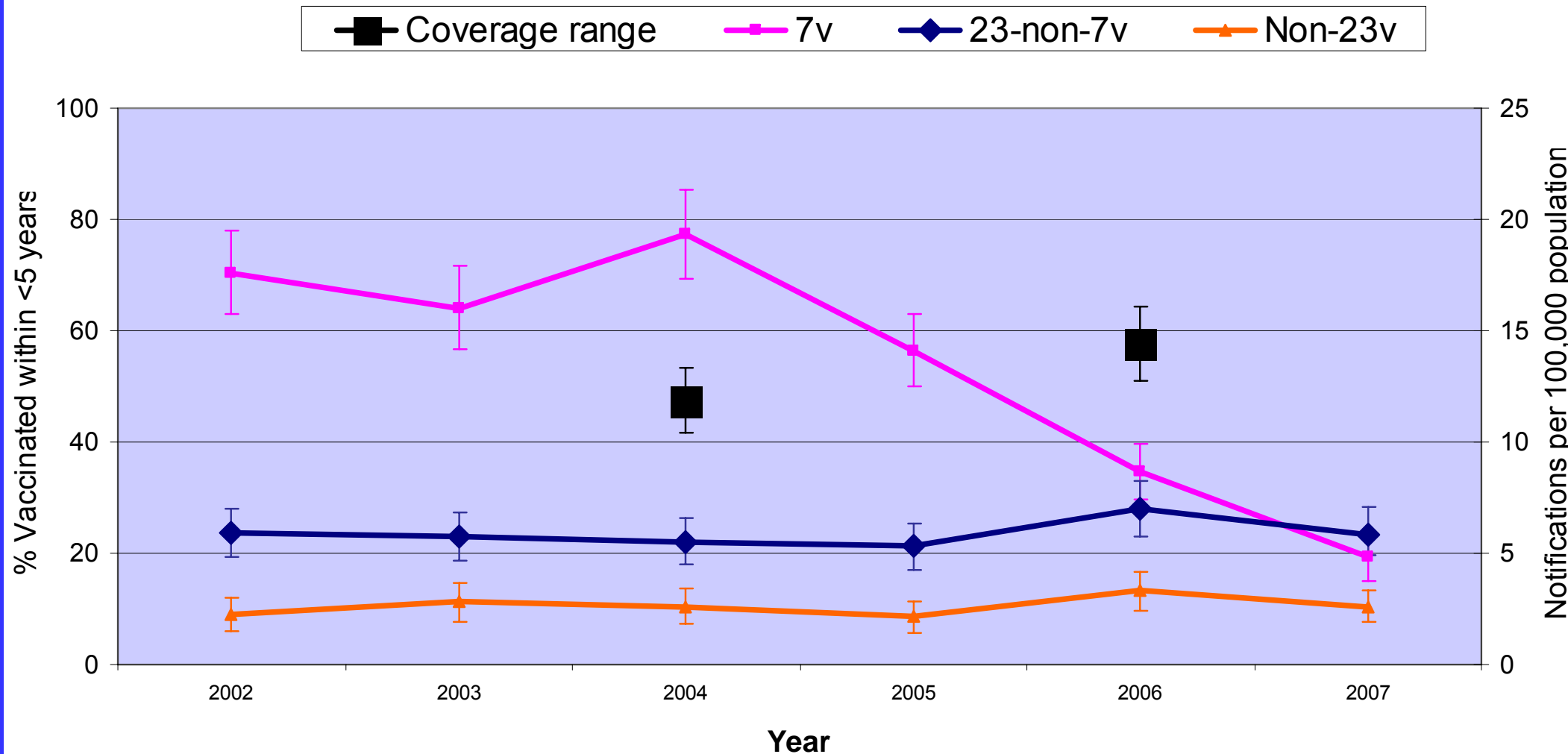
- Screening method
- Indirect Cohort method

# IPD notification rates\*, aged 65+ years, and self-reported pneumococcal vaccination coverage



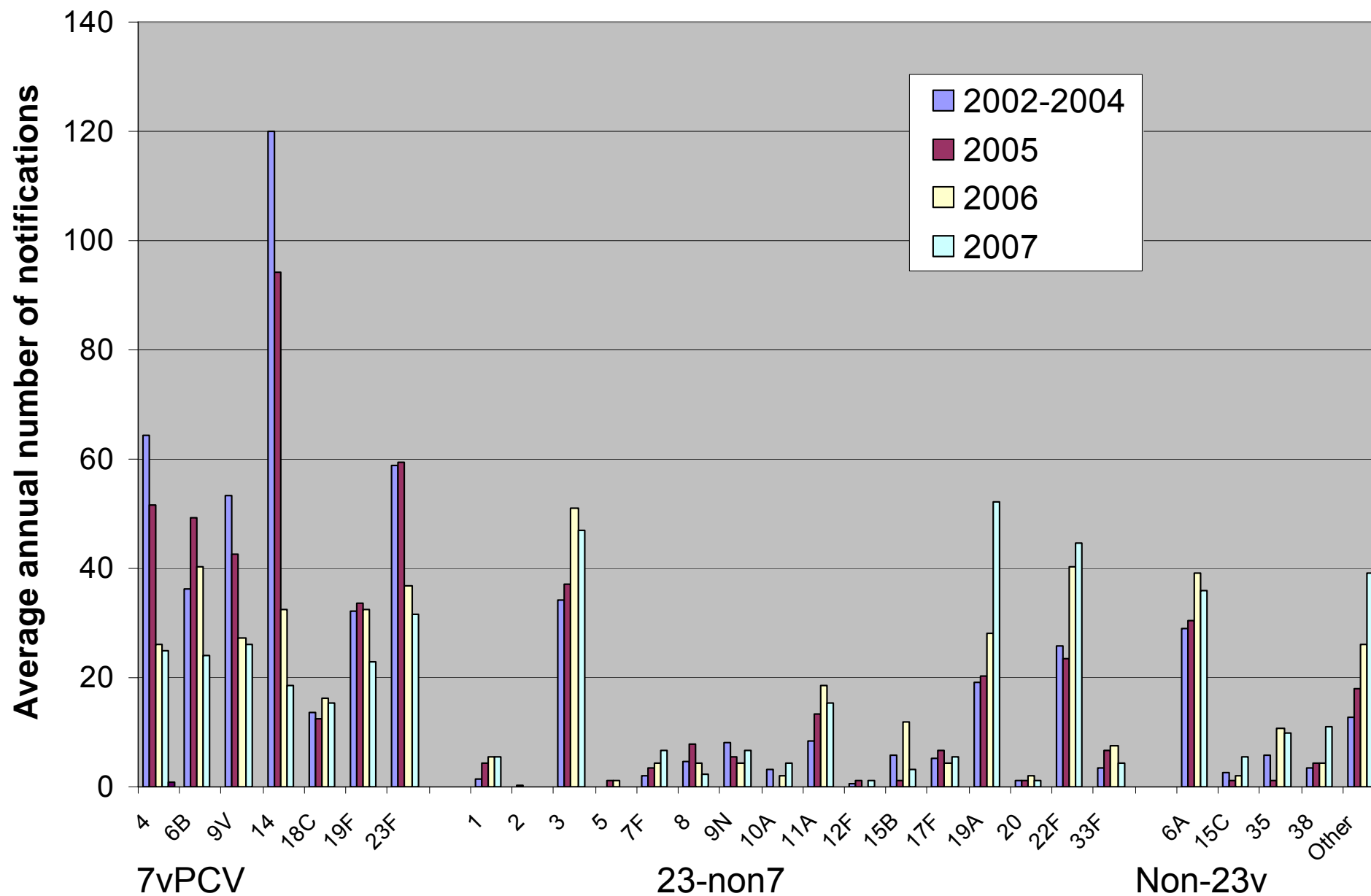
\* Adjusted for untyped cases. Cases recorded as Indigenous or from Victoria are excluded

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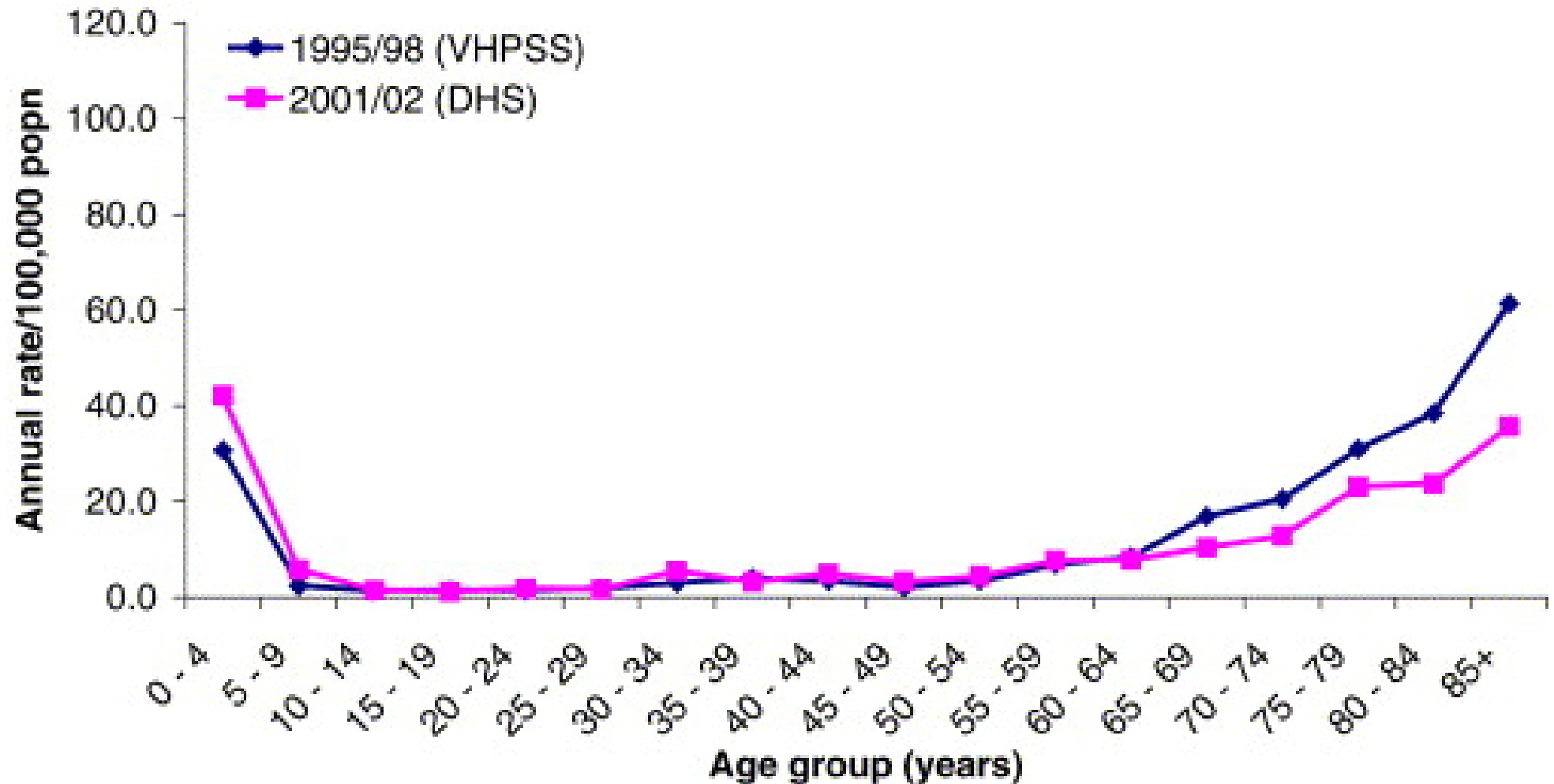
# IPD notifications by serotype



# Impact of 23vPPV in the US

- Incremental increases in coverage 1989-2003
- Concurrent increases in influenza vaccine coverage
- 7vPCV introduced 2000-01
  
- All-age pneumococcal deaths declined 3% 1989-1998
  - Pneumo, flu vaccines or something else?
  
- IPD hospitalisations in elderly decreased 2001/02
  - Associated with 7vPCV, not 23vPPV
  
- IPD in elderly decreased in 2002-03 vs 1998-99
  - In 7vPCV serotypes
  - Not in 23v-non7v serotypes

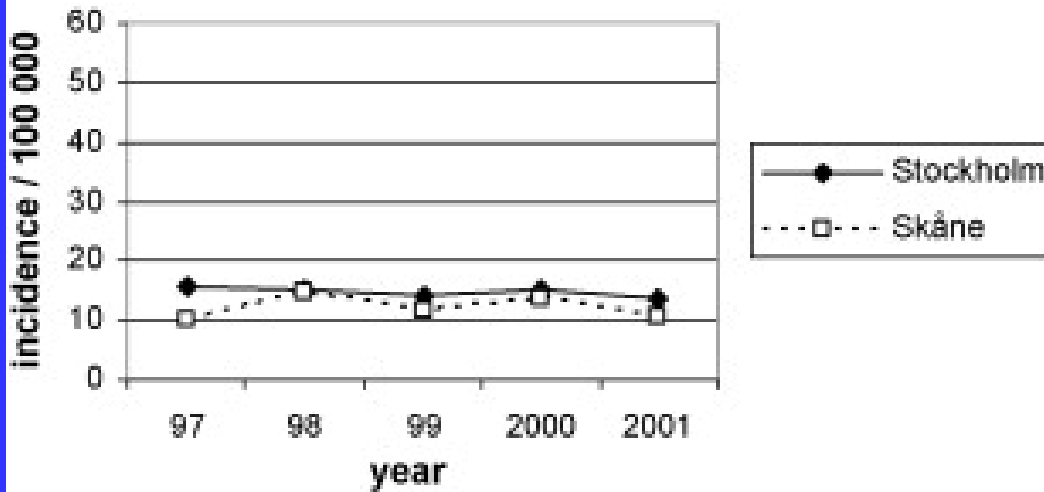
# Settings without 7vPCV use: Victoria



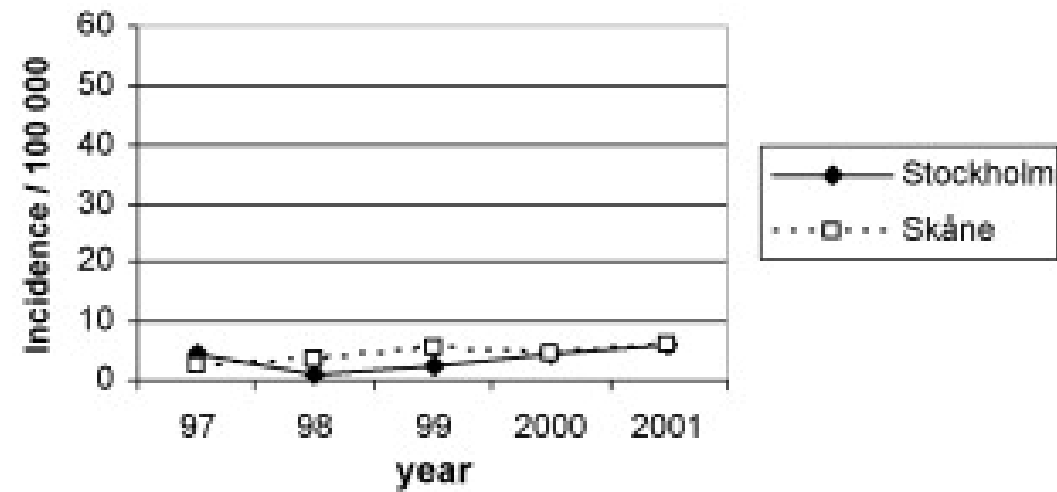
Source: Andrews et al. Vaccine 2004;23:132-138

# Settings without 7vPCV use: Sweden

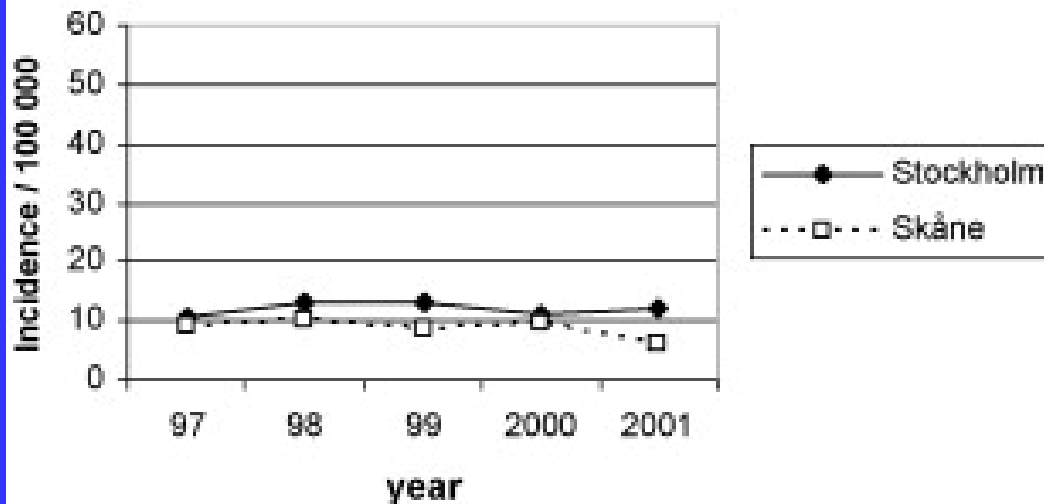
(a) Total Incidence of IPD all age groups



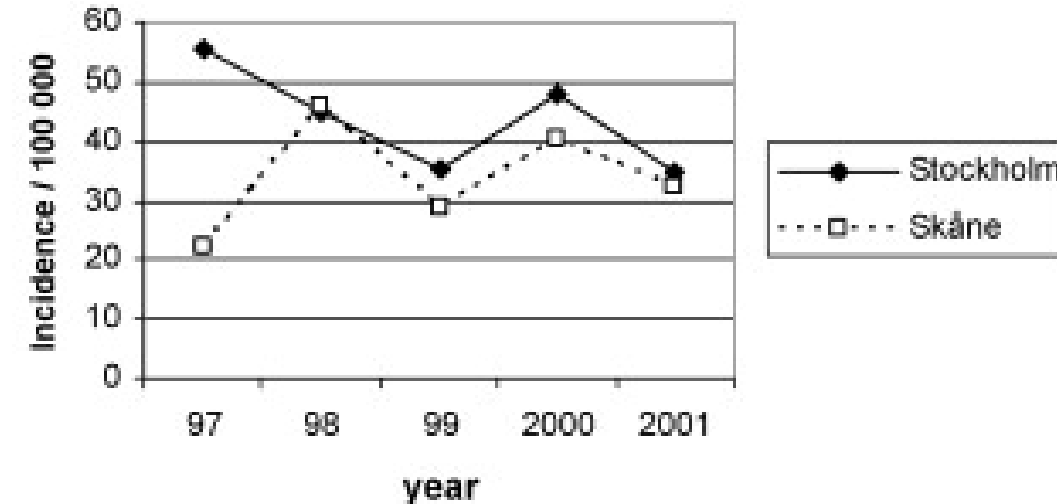
(b) Total Incidence of IPD age 0-18



(c) Total Incidence of IPD age 19-64



(d) Total Incidence of IPD age >64

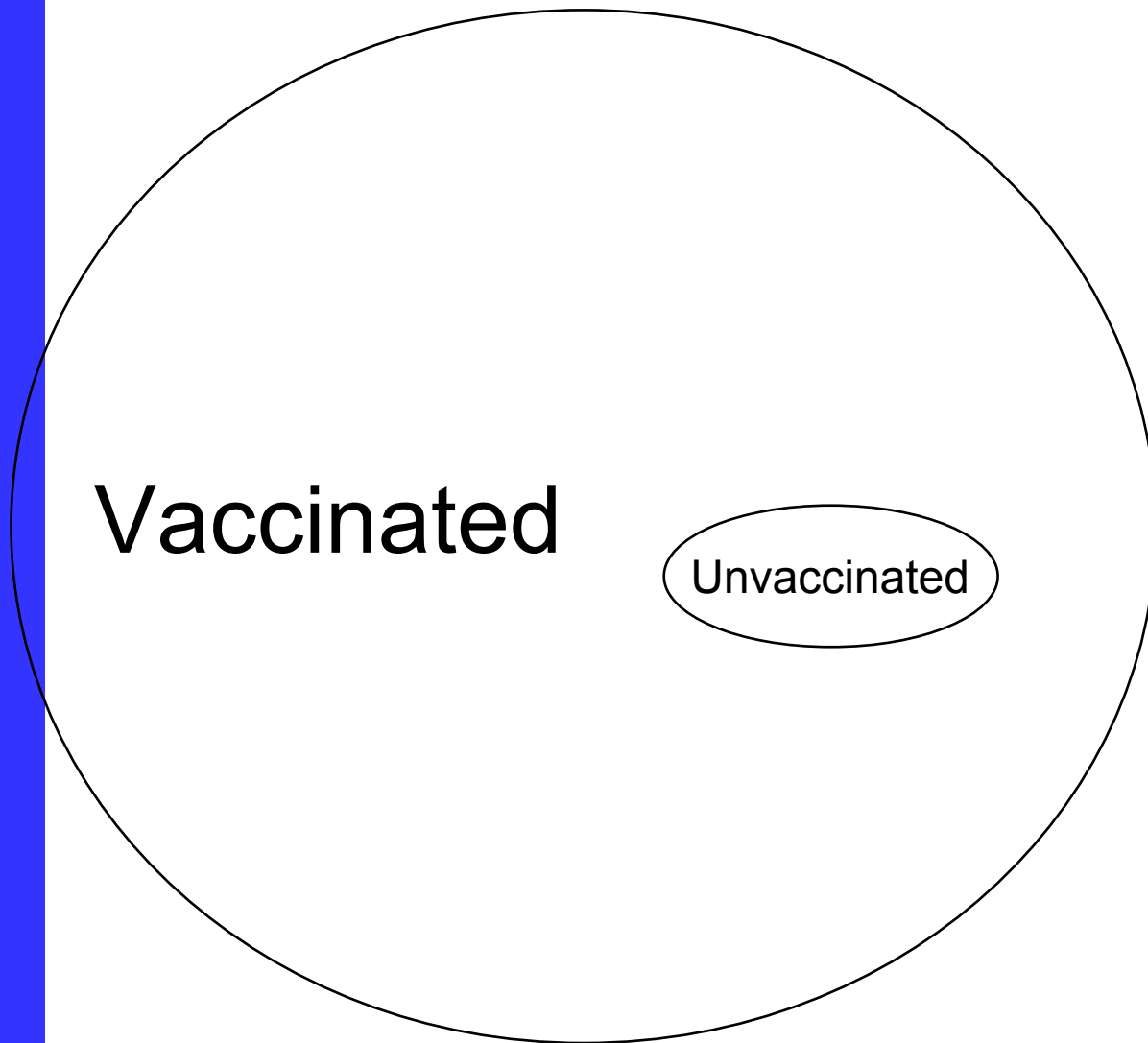


# VE estimation

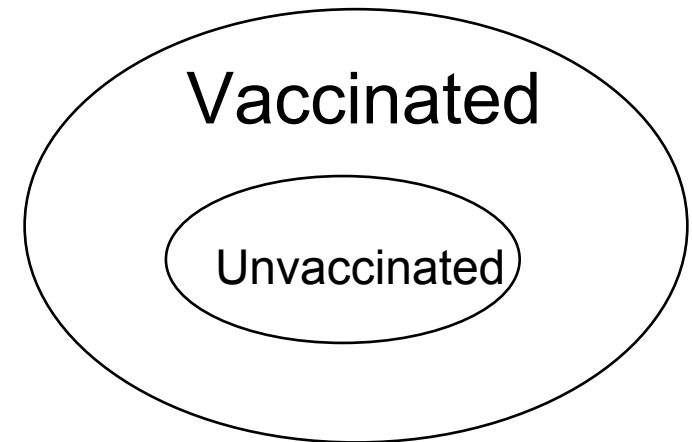
- Indirect cohort method
- Screening method

# The Screening method – Vaccination coverage in cases versus the population

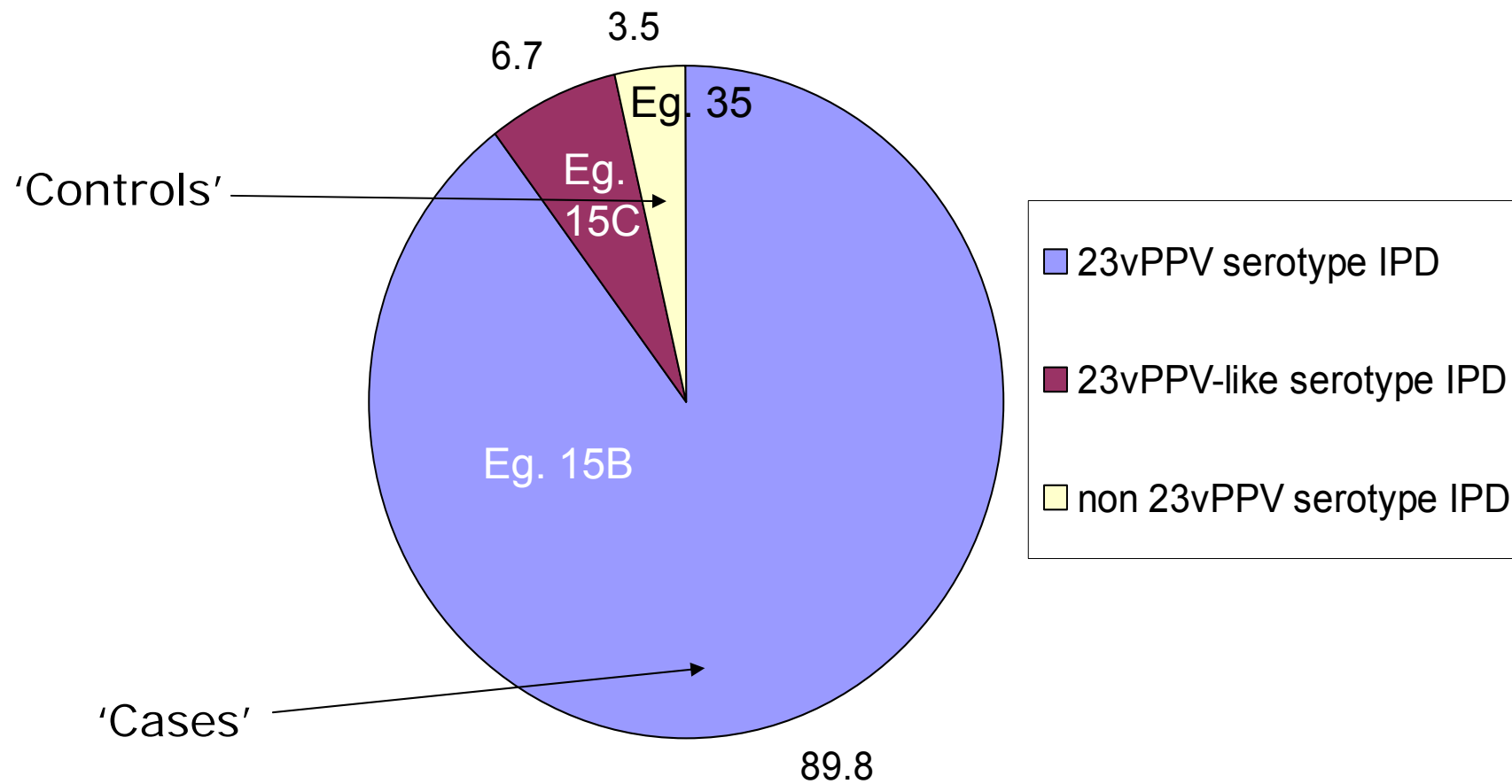
Population



Cases



# Indirect Cohort Method: using IPD notifications only



# 23vPPV estimates of effectiveness against vaccine-type IPD

Country	Method	Age group			
		62-73	74-79	80+	All
England & Wales*	Screening <sup>†</sup>	24% (14-24)	37% (28-45)	38% (32-44)	34% (29-38)
	Indirect Cohort <sup>†</sup>	40% (13-59)	25% (-12-49)	8% (-21-30)	23% (6-36)
Scotland		65-74	75+	All	
	Screening <sup>†</sup>	54 (20-74)	69 (52-80)	62 (45-73)	
	Indirect Cohort <sup>†</sup>			51% (-278 – 94)	
Australia	Screening <sup>‡</sup>	45% (28-58)	66% (58-73)	57% (42-68)	
	Indirect Cohort <sup>‡</sup>	67% (7-88)	4% (-97-53)	33% (-20 – 62)	
	Indirect Cohort <sup>†</sup>	58% (-17 – 85)	0% (-99-49)	24% (-33 – 57)	

\* Unpublished data provided by E. Miller and N. Andrews, Health Protection Agency, United Kingdom.

† Ever vaccinated

‡ Fully vaccinated, according to handbook recommendations

# Conclusions

- Limited evidence of impact of 23vPPV on IPD in Australia
  - Swamped by effect of 7vPCV?
  - Incremental increase in coverage
- Some evidence of population impact when 7vPCV not used
- VE estimates  $>0$

# Acknowledgements

- Enhanced IPD Surveillance Working Group
- Nick Andrews, UK Health Protection Agency