



ProVac Initiative's progress and rationale for Extended Cost-effectiveness Analysis

Jon K. Andrus
Barbara Jauregui
Cara Janusz
Gabriela Felix

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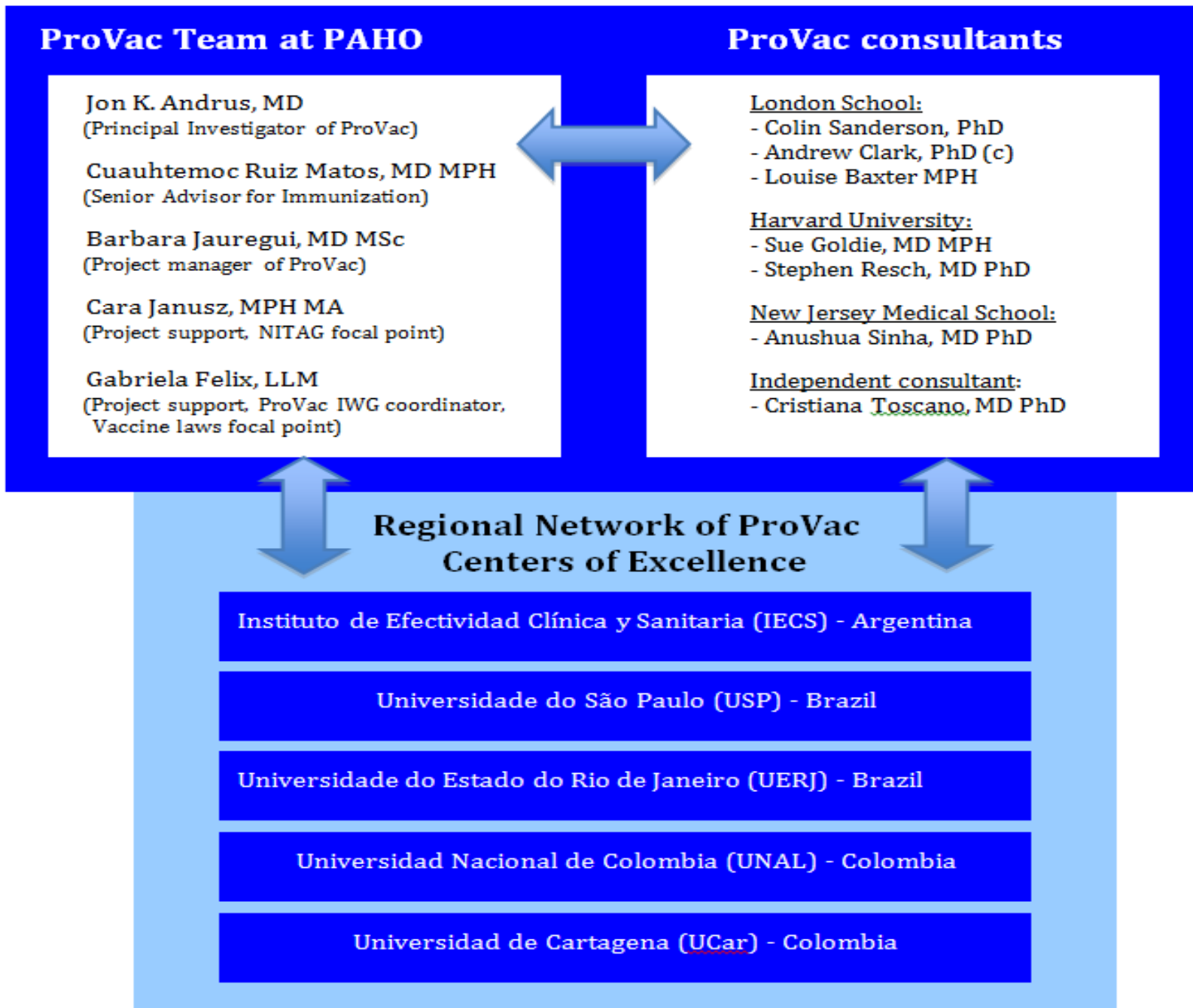


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ProVac: basic information

- ProVac's Goal: strengthen national capacity to make informed, evidence-based decisions regarding vaccine introduction.
- Current focus on 4 vaccines:
 - Rotavirus
 - Pneumococcal conjugate
 - HPV
 - Influenza
 - (in the future: polio, hep A, pneumo, meningo, dengue & others)

The ProVac team and consultants



ProVac Toolkit

TOOLS

- **TRIVAC**, CEA Model for Hib, PCV and RV
- **CERVIVAC**, CEA Model for HPV vaccines and cxca screening strategies
- **COSTVAC**, EPI Costing Tool

DATA

- **OLIVES**, immunization statistics and economic data repository

METHODS

- **Methodological guides** to estimate:
 - ✓ Pneumo and rotavirus disease burden
 - ✓ Pneumo and rotavirus cost-of-illness
 - ✓ Immunization program costing



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Countries that requested ProVac support thus far

From LAC (16):

- Argentina
- Bahamas
- Belize
- Brazil
- Bolivia
- Costa Rica
- Ecuador
- El Salvador
- Guatemala
- Honduras
- Jamaica
- Nicaragua
- Paraguay
- Peru
- Suriname
- Uruguay
- Venezuela

From other regions (11):

- Albania
- Azerbaijan
- Botswana
- Croatia
- Egypt
- Estonia
- Georgia
- Iran
- Senegal
- Tunisia

ProVac progress

To date, ProVac has received 43 requests for support from 27 countries (16 from LAC, 11 other regions).

Of these 43 requests:

- 20 CEA of conj. Pneumococcal vaccine
- 5 CEA of rotavirus vaccine
- 12 CEA of HPV vaccine
- 6 EPI costing studies

And:

- **18 studies have been successfully finalized,**
- **8 studies are currently ongoing,**
- **17 requests for support are still pending to begin between 2013 and 2014.**

ProVac in other regions of the world: the ProVac International Working Group

- To transfer ProVac tools and methods to other WHO Regions:
 - AFRO
 - EMRO
 - EURO
- Two-year pilot phase (2012-13)
- Partners: AMP, CDC, PATH, Sabin, WHO



Key remarks

- ProVac is slowly changing the culture for decision making in LAC and the world
- ProVac is the opposite to "*consultants parachuting in*": it is all about capacity building at the country level
- New PAHO Resolution will provide guidance for the future of ProVac



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New PAHO Resolution on ProVac

1. Institutionalization of the evidence-based decision making process regarding new vaccine introduction.
2. Integration of EPI costing and planning
3. **Expansion of the evidence base beyond cost-effectiveness**

Framework of evidence for decision making

Technical Criteria:

- Disease burden
- Characteristics of the vaccine (efficacy, immunity, security, etc)
- Adverse events and post-marketing vigilance
- Cost-effectiveness analysis and other economic evaluations

Programmatic and Operational Criteria:

- Supply
- Logistical and operational questions
- Financing strategy(s)

Social Criteria:

- Risk Perception
- Political Commitment
- Equity in access

Expanding the evidence base beyond cost-effectiveness

Evaluate other criteria (operational, financial, social), with emphasis on:

- Financial sustainability analysis
- Equity considerations

Generation of country-owned evidence can:

- Influence political will with evidence (MoH and other stakeholders)
- Help with negotiations with MoF (solid justification for investment including an estimation of returns)
- Speed up introduction of the most valuable new vaccines
- Change the culture for decision making:
 - MoH and MoF get used to receiving evidence on NUVI and begin demanding it for new health interventions
 - Politicians feel safer about making decisions supported by evidence
 - Society gets used to decisions based on evidence and will not allow for policies not informed by evidence



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