Leading Experts Unite to Understand the Burden of Pneumococcal Disease

*International summit highlights importance of preventing up to one million child deaths*

Dhaka, Bangladesh, 18 January 2005 – Leaders in the fight against pneumococcal disease ended a two-day meeting today by emphasising the importance of preventing unnecessary child deaths from *Streptococcus pneumoniae* – a bacterium that causes pneumonia and meningitis which currently kills 1.6 million people every year, mostly in developing countries.

Researchers and policy makers from around the world met in Bangladesh to share results of their research and to discuss ways to accelerate the prevention of pneumococcal disease in developing countries. The meeting was organised by the World Health Organisation and GAVI’s PneumoADIP (Pneumococcal Vaccines Accelerated Development and Introduction Plan).

Serious pneumococcal infections occur throughout life, but young children (especially those under 2 years old) and the elderly are at the highest risk for severe pneumococcal disease. Serious pneumococcal infections are a major global health problem, and a major problem in Bangladesh. Preliminary data from Dhaka Shishu Hospital shows that 35% of all meningitis cases are caused by the pneumococcus and that 55% of those patients die or are permanently disabled.

Delegates heard from experts carrying out vital work in these countries including Dr Samir Saha, Professor of Microbiology at Bangladesh Institute of Child Health and a Senior Consultant in Microbiology at Dhaka’s Shishu Hospital. Dr Saha runs a disease surveillance project, funded by PneumoADIP, which aims to enhance laboratory capacity, create awareness, and prepare for the introduction of a pneumococcal vaccine in Bangladesh.

“Establishing local evidence of the burden of pneumococcal disease in Bangladeshi children is essential to the effort to prevent these infections”, said Dr. Saha.
New vaccines to prevent deadly pneumococcal infections are now available and widely used in many countries in North America and Europe. As Dr. Orin Levine, Executive Director of GAVI’s PneumoADIP explained: “These vaccines are both safe and highly effective. The routine use of these vaccines in developing countries could substantially improve child survival and contribute to achieving the United Nation’s Millennium Development Goals.”

[ENDS]

Notes to Editors

Pneumococcal Disease

Pneumococcal disease is an infection caused by *Streptococcus pneumoniae*. When these bacteria invade the lungs, they cause the most common kind of bacterial pneumonia and can then invade the bloodstream (bacteremia) and/or the tissues and fluids surrounding the brain and spinal cord (meningitis).

According to WHO, pneumococcal pneumonia and meningitis are responsible for 800,000 to 1 million child deaths each year and more than 90 percent of pneumococcal pneumonia deaths in children occur in developing countries. Furthermore, approximately 500,000 children die each year from diarrhoeal disease caused by rotavirus, and another 2 million are hospitalized. Since rotavirus diarrhoea is a global infection, nearly every child in the world will suffer an episode of diarrhoea caused by rotavirus before 5 years of age.

The Global Alliance for Vaccines and Immunization (GAVI) and The Vaccine Fund

The GAVI Alliance was launched in 2000 to increase immunization rates and reduce widening global disparities in access to vaccines among the world’s poorest countries. It is a unique public-private partnership between governments in industrialised and developing countries, UNICEF, WHO, the World Bank, non-governmental organizations, foundations, vaccine manufacturers and public health and research institutions.

Thanks to its rapid start-up and early achievements, and its working private and public partnership model, by the end of 2003 GAVI/The Vaccine Fund had committed about 95% of its available resources. Since 2000, GAVI and the Vaccine Fund have disbursed US$ 429 million to 70 countries, with over 9 million more children reached with basic vaccines¹ and nearly 50 million more children immunized with new vaccines.² The Vaccine Fund’s goal is to raise US$ 400 million annually from government and private sources to fully fund GAVI’s commitments to the 75 poorest countries.

Pneumococcal Vaccines Accelerated Development and Introduction Plan (PneumoADIP)

The goal of PneumoADIP is to shorten the time between the use of a new vaccine in industrialized countries and its introduction in developing countries by reducing demand uncertainty and achieving an affordable, sustainable supply of vaccines. This novel approach is funded by the Global Alliance for Vaccines and Immunization (GAVI) through its partner the Vaccine Fund. PneumoADIP is located at the Johns Hopkins Bloomberg School of Public Health. The mission of PneumoADIP is to improve child survival and health by accelerating the evaluation of and access to new life saving pneumococcal vaccines for the world’s children. For more information, please visit: www.preventpneumo.org

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¹ Including diphtheria, tetanus, pertussis, BCG, measles and polio  
² Including hepatitis B, Hib and yellow fever