Expectations on the Controlled Temperature Chain in MSF context

TechNet Conference, May 2015
Aitana Juan – Florence Fermon
MSF in 2013

• 66 countries, 387 projects, 215 (55%) in unstable contexts

• Expenses: €612 M (± 90% funding private, non-governmental sources)

• Vaccination policy clearly establish in 2007
  – Priority countries to strengthen RI
  – Extend vaccination package in emergencies according to risk assessment (WHO Dec.2013 recommendations)
Vaccination interventions - 2014

**OUTBREAK and HUMANITARIAN emergencies responses**

- **Outbreak response**
  - 25 measles vaccination campaigns (eg. DRC, Guinea, South Sudan, ...), > 1 million doses
- **Humanitarian emergencies**
  - Refugee camps in Ethiopia, Uganda, South Sudan, Chad,
  - OCV, PCV, DTP-HepB-Hib, Polio, Measles, MenA ( > 850,000 doses administered)

**ROUTINE VACCINATION**

- **Social/political crisis**
- **Vulnerable groups:** malnourished, HIV+
- **Support EPI** in stable contexts if needed
Challenges

- Vaccination in crisis settings and in remote areas
- Supply chain much more complex (bulky vaccines, more vaccines, various thermo-sensitivity, high cost)
- Cold chain and logistics: implementation, especially at the last distribution point
CTC advantages in MSF context

• Reduce logistics workload and cold chain burden
• Make easier/faster the implementation of vaccination activities in emergency context
• Reduce risk of freezing of freeze sensitive vaccines
• May reduce the cost
• Increase the access to the population in remote and hard to reach areas
CTC main challenges

- Manufacturers commitment to share data on heat stability
- Review Prequalification procedures
- Clear guidance on CTC implementation (WHO?)
- Prequalified Peak T° indicator
- Implementation in countries
  - CTC non compliance for every antigen
  - CTC promotion, communication
  - change of practices, resistances, contradictory messages, Staff training and supervision
  - Documentation and evaluation.
- ...

Way forwards

- The current cold chain recommendations for storage and transportation restrict access to some population.

- The heat stability data, the technology/equipment allow some vaccines to be taken out of the traditional cold chain for the last stretch of the journey.

*It is time to change our practices.*