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# Vaccines: Reaching for Higher Branches after the Low Hanging Fruit has been Picked

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nal Institutes of Health



*Courtesy Leon Farrant, graphic designer*  JAMA Intern Med. 2014;():. doi:10.1001/jamainternmed.2014.190

#### Table 1. Americans Agreeing With Various Medical Conspiracy Theories, 2013<sup>a</sup>

		Res (	pondents, % <sup>b</sup> N = 1351)	
Medical Conspiracy Narrative	Heard Before	Agree	Neither Agree nor Disagree	Disagree
The Food and Drug Administration is deliberately preventing the public from getting natural cures for cancer and other diseases because of pressure from drug companies.	63	37	31	32
Health officials know that cell phones cause cancer but are doing nothing to stop it because large corporations won't let them.	57	20	40	40
The CIA deliberately infected large numbers of African Ameri- cans with HIV under the guise of a hepatitis inoculation program.	32	12	37	51
The global dissemination of genetically modified foods by Monsanto Inc is part of a secret program, called Agenda 21, launched by the Rockefeller and Ford foundations to shrink the world's population.	19	12	46	42
Doctors and the government still want to vaccinate children even though they know these vaccines cause autism and other psychological disorders.	69	20	36	44
Public water fluoridation is really just a secret way for chemi- cal companies to dump the dangerous byproducts of phos- phate mines into the environment.	25	12	41	46

Abbreviations: CIA, Central Intelligence Agency; HIV, human immunodeficiency virus.

<sup>a</sup> Percentages may not total 100% because of rounding.



93.4% Reported children receiving vaccine

79.8% Believed vaccines important to child health

79.0% Confident about vaccine safety



Tested 4 interventions:

- Lack of evidence for autism link
- Disease dangers
- Disease images
- Dramatic narrative

"decreased intent to vaccinate among parents who had the least favorable vaccine attitudes"

#### CALCULATING RISKS

Some vaccines have risks that are common but mild. A few have more serious risks, but these are very rare.



From Nature 473:436 (2011)

## 21<sup>st</sup> Century Prophylaxis

- Vaccine
- Manufacturing
- Vaccination
- Host Response
- Preparedness

## **Vaccine Directions**

- Antigen discovery and selection (including *in silico*)
- Common epitope approaches (universal vaccines)
- Targeting organisms for which drug resistance is emerging
- Novel vaccine concepts to address chronic infectious diseases
- Passive vaccination approaches

# **Manufacturing Directions**

- Unique and diverse expression systems (beyond an egg and free living organisms)
  - Bacteria
  - Eukaryotic cells
  - Baculo- / insect lines
  - Plants
  - Synthetic / Cell free translation
- Disposable, large scale platforms
- Synthetic generation of agent

## **Vaccination Directions**

- Adjuvants
  - Reduce number of doses
  - Reduce antigen load
  - Fine tune immune response
- Stabilization
  - Eliminate refrigeration requirement
  - Enhance shelf life
  - Enable novel packaging and devices
- Alternative delivery devices
  - Reduce trained health care worker need
  - Increase compliance
  - Improve throughput

## **Host Response Directions**

- Murine immune system is at best a very crude model of human immunity (concomitantly, murine pathogenesis is an even cruder approximation of human disease)
- Animal models are focusing on identification of correlates and even true immunological surrogates
- Immunity is more than neutralizing antisera
- Improved assessment tools for human immune status and responses

# Ancillary Issues

- Discovery, characterization, and validation of biomarkers for immune status
- Clinical endpoints
- Robust, reproducible cellular assays
- In vitro / ex vivo predictive systems
- Utilization of "correlates" versus "a correlate"

#### **Global Examples of Emerging and Re-Emerging** Infectious Diseases



#### **Global Examples of Emerging and Re-Emerging Infectious Diseases**





Infectious Diseases

KE Jones, Peter Daszak, et al.

"In the global human population, we report the emergence of 335 infectious diseases between 1940 and 2004."

#### **SARS: A New Challenge to Global Health**





A Reporter at Large

### **NATURE'S BIOTERRORIST**

Is there any way to prevent a deadly avian-flu pandemic?

**By Michael Specter** 



## The Mashington Post

Tuesday, April 28, 2009

### **World's Swine Flu Concerns Escalate**

As the World Health Organization raised its alert level to phase 4, indicating a significantly increased risk of pandemic, global markets tumbled for a second day. . .



#### **First Reports of MERS – 2012**

INEW England	
Inew England	
INEW England	

### Isolation of a Novel Coronavirus from a Man with Pneumonia in Saudi Arabia

AM Zaki, RAM Fouchier, et al.

AS Fauci/NIAID



Erica Saphire, Scripps Research Institute



#### **Brazil links Zika fever to birth defects**

DeLorme, GEBCO, NOAA NGDC/and other con GEBCO, NOAA, National-Geographic, DeLorme names org. and other contributors

O 29 November 2015 | Latin America & Caribbean

(autochthonous transmission) in the Americas, 2015-2016.

Countries and territories with confirmed cases of Zika virus

#### Selected efforts underway:

- Characterize virus
- Improve diagnostic specificity
- Test antivirals
- Develop animal models
- Natural history studies
- Evaluate the Zika & dengue interface
- Develop vaccine



### Preparedness

• Emerging infectious diseases present unique challenges

• Surveillance systems are crude and limited

• Conduct of research is difficult even under optimal conditions

• Existing regulatory frameworks are not optimal for outbreaks

## What do we need to prepare for?

(with apologies to Donald Rumsfeld)

- Expected knowns
  - Pandemic Influenza
- Unexpected knowns
  - Ebola (or any filovirus)
- Unknown knowns
  - Zika
- Unknown unknowns
  - ???

# Expected knowns (flu)

- History suggests this can and will occur
- Experience with similar vaccines allows for straightforward (although not necessarily simple or easy) vaccine development in a timeline that can potentially align with the outbreak
- Existing infrastructure can be co-opted for development
- Safety will always be an issue
  - Dose and regimen
  - Special populations

# Unexpected knowns (Ebola)

- Even with extensive microbiological and pathogenesis information, socioeconomic / cultural factors can dramatically impact disease transmission and severity
- New clinical experience may alter prevention & treatment
- Exogenous factors such as climate change, urban versus rural population centers, greater local and distant mobility, varying degrees of public health infrastructure, etc.
- Variable degrees of development efforts will need increased resources and streamlining

# Unknown knowns (Zika)

- Extremely difficult to be prepared, mostly due to a long list of agents that have been identified with higher priority
- Need to rely on expert panels to identify candidate lists (pandemic / epidemic wanna-be's)
- Likely need to be already working on vaccine candidates to impact future outbreaks
- Pandemic / epidemic potential may evolve to endemic
- Resource limitations major impediment

# For Consideration

- WHO Workshop on Prioritization of Pathogens (12/8-9/2015)
  - Urgent
    - Crimean-Congo hemorrhagic fever
    - Filoviruses (EVD & Marburg)
    - Highly pathogenic emerging Coronaviruses (MERS Co-V & SARS)
    - Lassa Fever
    - Nipah
    - Rift Valley Fever
  - Serious
    - Chikungunya
    - Severe Fever with Thrombocytopenia Syndrome
    - Zika

## So what's an unknown unknown?

- Basically, something we've never seen before
- Little precedence with known infectious agents
- No information regarding natural immunity
- Sparse human pathogenesis
- Limited information from animal models
- Initially, mostly sequence information
- How can we be prepared?



#### Preparedness 101: Zombie Apocalypse

Posted on May 16, 2011 by Ali S. Khan (http://blogs.cdc.gov/publichealthmatters/authors/ali-s-khan)



(http://blogs.cdc.gov/publichealthmatters/files/2011/05/blogbanner\_zombieprep\_560x140.jpg)

#### Walking Dead fans, check out our latest post: http://go.usa.gov/Q4J (http://go.usa.gov/Q4J)

There are all kinds of emergencies out there that we can prepare for. Take a zombie apocalypse for example. That's right, | said z-o-m-b-i-e a-p-o-c-a-l-y-p-s-e. You may laugh now, but when it happens you'll be happy you read this, and hey, maybe you'll even learn a thing or two about how to prepare for a *real* emergency.

#### A Brief History of Zombies

We've all seen at least one movie about flesh-eating zombies taking over (my personal favorite is <u>Resident Evil</u> (<u>http://www.imdb.com/title/tt0120804/</u>) ), but where do zombies come from and why do they love eating brains so much? The word zombie comes from Haitian and New Orleans voodoo origins. Although its meaning has changed slightly over the years, it refers to a human corpse mysteriously reanimated to serve the undead. Through ancient voodoo and folk-lore traditions, shows like the Walking Dead were born.

#### (U) CONPLAN 8888

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#### HEADQUARTERS UNITED STATES STRATEGIC COMMAND

CDRUSSTRATCOM CONPLAN 8888-11 "COUNTER-ZOMBIE DOMINANCE" 30 APR 2011

Classified by: N/A

Reason: N/A

Declassify on: N/A



#### Zombie Threat Summary

- Pathogenic zombies (PZ)
  - PZs are zombie life forms created after an organism is infected by a virus or bacteria or some other form of contagion
- Radiation zombies
- Evil Magic zombies
- Space zombies
- Weaponized zombies
- Symbiant-Induced zombies
- Vegetarian zombies
- Chicken zombies

### ZOMBIE APOCALYPSE

#### WHAT YOU THINK IT LOOKS LIKE:



#### WHAT IT ACTUALLY LOOKS LIKE:



# **Moving Faster**

- Initiate early development on experts' derived lists
- Don't wait for specimens; work from sequences
- Platform selection for ease of candidate selection & manufacturing

   Several vaccine manufacturers are offering proposals
- Move towards universal / broadly protective responses
- Rate limiting issues:
  - Sequence breadth
  - Animal models
  - Assay development
  - Clinical trial capacity in theater

### **Possible additional considerations**

• Broad spectrum antivirals

• Passive vaccination / prophylaxis





# **Questions?**



