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Meeting report

Implementing efficient and sustainable collaboration between National Immunization Technical Advisory Groups: Report on the 3rd International Technical Meeting, Paris, France, 8–9 December 2014*

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ABSTRACT

Many experts on vaccination are convinced that efforts should be made to encourage increased collaboration between National Immunization Technical Advisory Groups on immunization (NITAGs) worldwide. International meetings were held in Berlin, Germany, in 2010 and 2011, to discuss improvement of the methodologies for the development of evidence-based vaccination recommendations, recognizing the need for collaboration and/or sharing of resources in this effort. A third meeting was held in Paris, France, in December 2014, to consider the design of specific practical activities and an organizational structure to enable effective and sustained collaboration. The following conclusions were reached:

- (i) The proposed collaboration needs a core functional structure and the establishment or strengthening of an international network of NITAGs.
- (ii) Priority subjects for collaborative work are background information for recommendations, systematic reviews, mathematical models, health economic evaluations and establishment of common frameworks and methodologies for reviewing and grading the evidence.
- (iii) The programme of collaborative work should begin with participation of a limited number of NITAGs which already have a high level of expertise. The amount of joint work could be increased progressively through practical activities and pragmatic examples. Due to similar priorities and already existing structures, this should be organized at regional or subregional level. For example, in the European Union a project is funded by the European Centre for Disease Prevention and Control (ECDC) with the aim to set up a network for improving data, methodology and resource sharing and thereby supporting NITAGs. Such regional networking activities should be carried out in collaboration with the World Health Organization (WHO).
- (iv) A global steering committee should be set up to promote international exchange between regional networks and to increase the involvement of less experienced NITAGs. NITAGs already collaborate at the global level via the NITAG Resource Centre, a web-based platform developed by the Health Policy and Institutional Development Unit (WHO Collaborating Centre) of the Agence de Médecine Préventive (AMP-HPID). It would be appropriate to continue facilitating the coordination of this global network through the AMP-HPID NITAG Resource Centre.
- (v) While sharing work products and experiences, each NITAG would retain responsibility for its own decision-making and country-specific recommendations.

1. Background

WHO establishes global vaccination policy recommendations but priorities may widely differ from one country to another, due to differences in the epidemiology of vaccine preventable diseases, and also to the level of national income [1,2]. An independent group of experts has become a standard basis for making recommendations concerning vaccination in public health policies

at national level. Following the example of some countries with long-established experience, WHO encourages the creation of such National Immunization Technical Advisory Groups on Immunization (NITAGs) in all countries worldwide [3,4]. Currently, an effort is being made to ensure that all countries have sufficient support from NITAGs. To further advance this global effort, several groups of experts are working on the methodology and development of evidence-based recommendations in the field of vaccination policy in order to improve vaccination policy decision-making [5–9].

In November 2010, an international workshop was organized by the Robert Koch Institute in Berlin, Germany, with funding from the German Federal Ministry of Health, to discuss improved methods and harmonization of methodology for the development of evidence-based vaccination recommendations [10]. The

[☆] **Organizers**: Haut Conseil de la Santé Publique (High Council of Public Health of France), in collaboration with the World Health Organization (WHO) and the Health Policy and Institutional Development Unit (WHO Collaborating Centre) of the Preventive Medicine Agency (Agence de Médecine Préventive).

objectives of the workshop were to review current procedures and experiences of NITAGs, discuss the applicability of methods such as Grading of Recommendations Assessment, Development and Evaluation (GRADE), and to identify opportunities for international collaboration to support NITAGs in the development of their country-specific vaccination recommendations. The participants concluded that (i) GRADE or a modification of this methodology is suitable for the grading of quality of evidence related to vaccine effectiveness and safety, and that (ii) international cooperation would facilitate the design of a common methodological framework for the development of national immunization recommendations in order to avoid duplication of efforts, build on existing strengths, and support NITAGs in all countries. Importantly, because vaccination decisions are not made in isolation but as part of a broader health sector policy, and policy on funding for vaccination varies in different countries, the relationship between NITAGs and their national health authorities needs to be examined and taken into account. As the characteristics and practices of NITAGs are heterogeneous, the potential of collaboration with other NITAGs may vary among countries. In an evaluation carried out in 28 European countries, 25 saw potential for such collaboration, but most often mentioned structural concerns due to differences in the organization of NITAGs and of countries' health care systems [11].

A second international workshop, also arranged by the Robert Koch Institute, was held in Berlin in September 2011 [12]. A broad international range of NITAGs and international organizations and expert groups were represented. The main conclusions were the following:

- (i) In view of the work load involved in developing evidencebased vaccination recommendations, there is a need to share resources, results, and skills between the different countries.
- (ii) Systematic reviews are the prerequisite for all evidence-based decisions and create the biggest workload for NITAG secretariats
- (iii) A common methodology such as GRADE would facilitate understanding of the decision-making processes of NITAGs, and the sharing of relevant documents (e.g. evidence tables, systematic reviews).
- (iv) GRADE methodology is considered suitable to take into account relevant issues such as herd immunity, surrogate markers, passive disease surveillance, and post-marketing observational studies on vaccine effectiveness and rare adverse events following vaccination.
- (v) Following the use of the GRADE system to establish the quality of evidence on vaccine effectiveness and safety, additional analyses of country-specific issues are required for the development of precise country-specific recommendations.

The first step, the evaluation of existing evidence on the effectiveness and safety of a vaccine, could be conducted in a collaborative international effort. In the second step, country-specific issues such as values, preferences, local epidemiology and disease burden as well as costs need to be considered individually by each NITAG. An international institution or working group (possibly at a regional level) is needed to coordinate these efforts and to identify minimum requirements for the preparation of relevant documents (such as systematic reviews) by each NITAG. As WHO regions are heterogeneous, the collaboration may start at a subregional level.

There was a general consensus at the Berlin workshops that collaboration would be the basis for progressing to an improved and harmonized methodology for the development of vaccination recommendations. Experts and/or authorities from several countries expressed willingness to take part in this collaboration.

2. Objectives of the 3rd international workshop

The main purpose of the third workshop was to move forward, based on the consensus reached in Berlin, to delineate working arrangements and priority activities. The first objective was to determine the content of the collaboration between NITAGs and their secretariats and its operational terms. The second objective was to define the institution or the network of institutions which could coordinate and facilitate this collaboration in the long term, i.e. a core functional structure and the establishment or the strengthening of an international network of NITAGs, possibly based on a series of regional networks.

Representatives of institutions involved in vaccination or public health policies were invited to give their opinions. In plenary sessions, following an overview of the two Berlin meetings, the participants reviewed the current issues, the identified needs and their possibilities for involvement in a common process. Workshops were organized to better define the tasks which could be shared and to agree on a chart of inter-NITAG collaboration. The main recommendations and conclusions reached during the meeting are presented below.

3. Formalizing the networking of the NITAGs

Two levels of collaboration were identified: (i) collaboration to systematically exchange and share final "work products" widely via a joint platform, and (ii) collaboration to jointly develop or commission "products" such as systematic reviews, generic disease transmission models, studies, protocols, publications, etc. It is necessary to identify a host institution (or institutions) for coordination and management, and a funding source for both of these levels of collaboration. While the first level of collaboration can be achieved at global level, the enhanced collaboration (second level) seems more feasible if organized at regional or subregional level based on existing infrastructures and involving NITAGs with similar priorities. Particularly for the enhanced collaboration, a code of conduct would have to be agreed upon to govern the sharing of unpublished results, and working procedures defined. Each NITAG that is part of the network should continue its activities but the sharing of information should be facilitated. It may be possible to begin with a pilot mechanism that could be adapted and improved with experience. It is also necessary to set out the main objectives and outputs for each participating structure.

Expansion of the network will be important, bringing in more countries with broader geographic representation, including countries with limited resources and experience in this domain, with the ultimate aim of creating a global NITAG collaborative network, possibly based on a series of regional networks. NITAGs already collaborate at the global level via the NITAG Resource Centre, a web-based platform developed by the Health Policy and Institutional Development Unit (WHO Collaborating Centre) of the Agence de Médecine Préventive (AMP-HPID). It would be appropriate to continue facilitating the coordination of this global network through the AMP-HPID NITAG Resource Centre [13]. Since in the European Union (EU) there are already advanced discussions on a regional network to support NITAG work, the following section will focus on the EU. In other regions, similar activities could be carried out.

4. The possible role of existing international institutions in Europe

4.1. European Centre for Disease Prevention and Control

A work package of the ECDC-funded "Vaccine European New Integrated Collaboration Effort" (VENICE) III project has as its aim

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