

TB vaccines, anything but warp speed



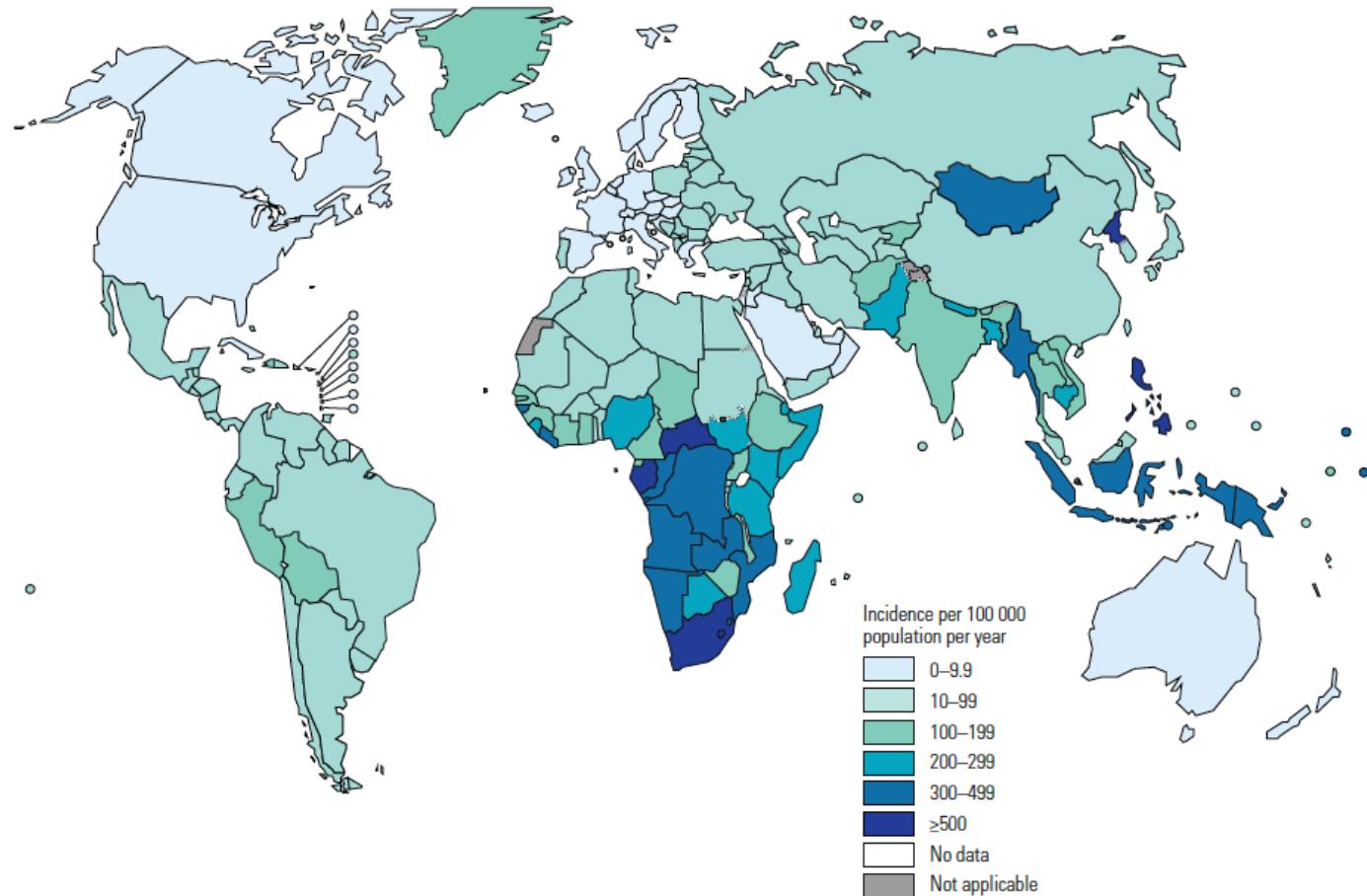
Tom Scriba, University of Cape Town

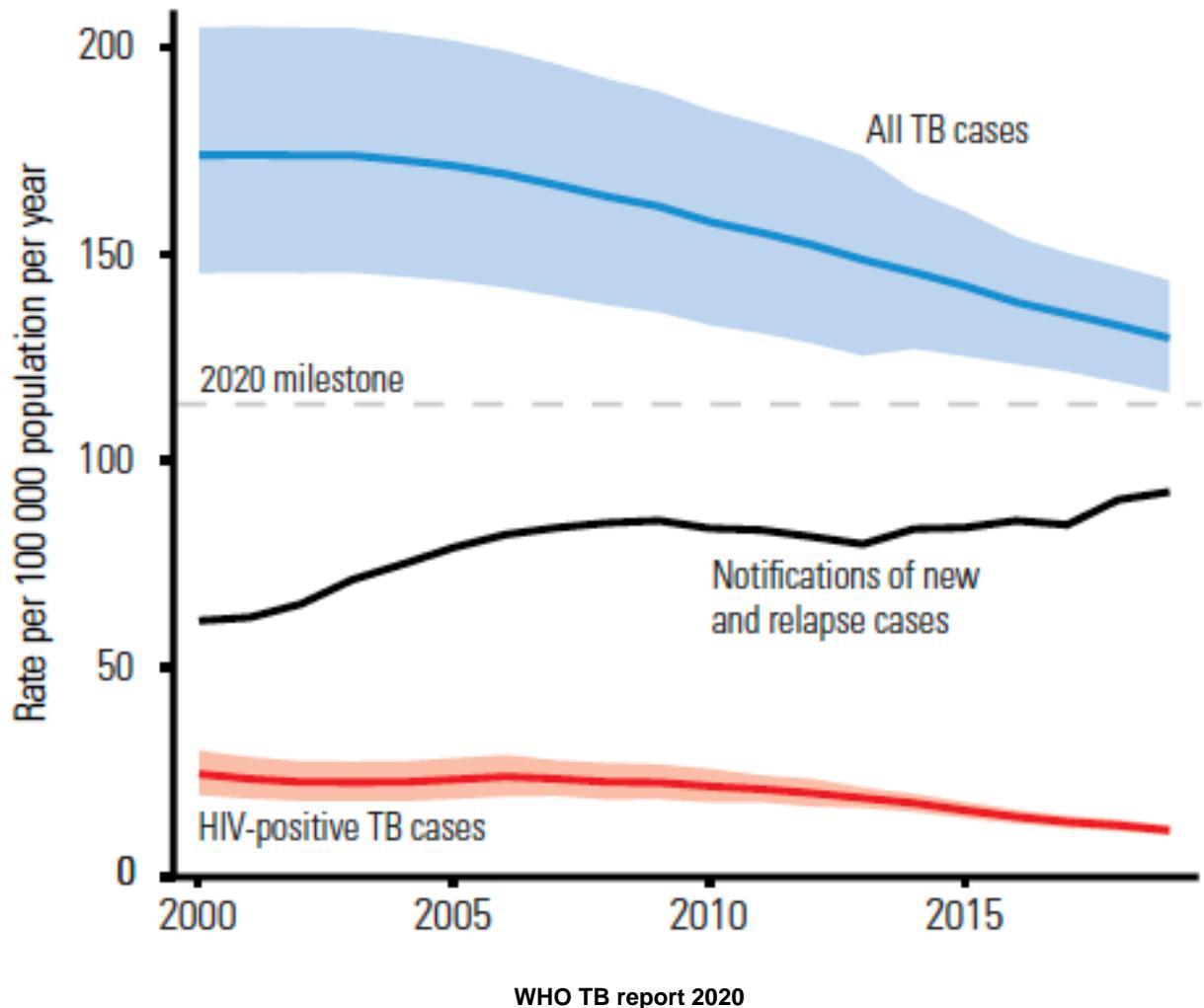


28 trials of 9 TB vaccine candidates plus BCG



10 million TB cases, 1.4 million deaths

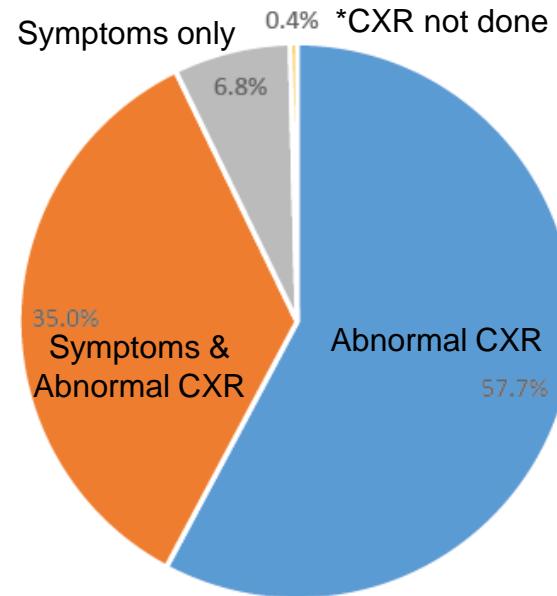




The First National TB Prevalence Survey

South Africa 2018

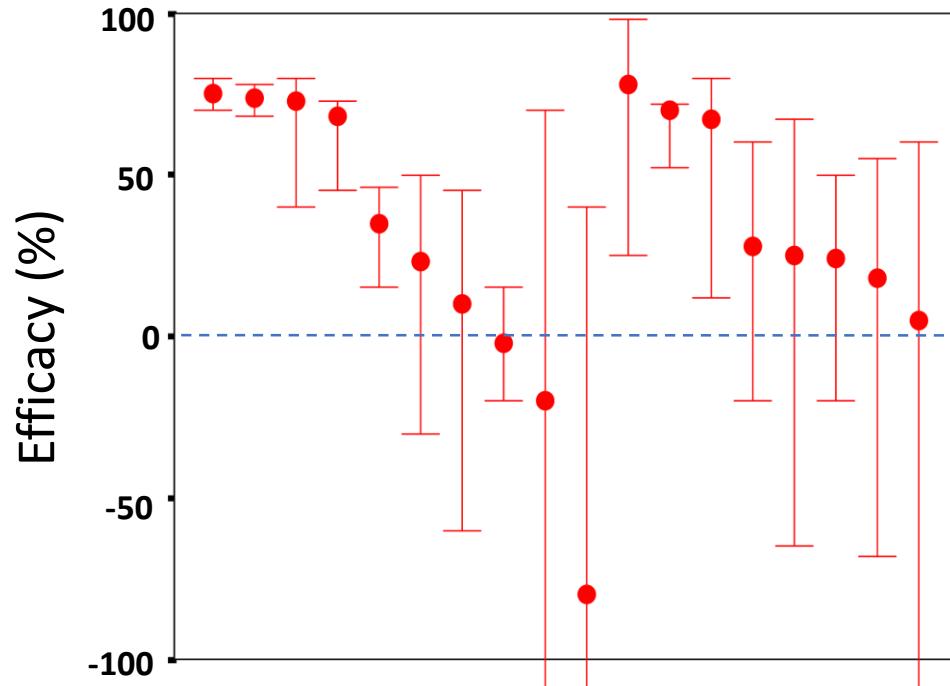
Prevalence per 100,000 population		95% CI
Sex		
Male	1,094	835 – 1,352
Female	675	494 - 855
Age group (years)		
15-24	432	232 - 632
25-34	902	583 – 1,221
35-44	1,107	703 – 1,511
45-54	1,063	682 – 1,443
55-64	845	505 – 1,186
≥65	1,104	680 – 1,528
All	852	679 – 1,026



BCG – 100 years and counting!

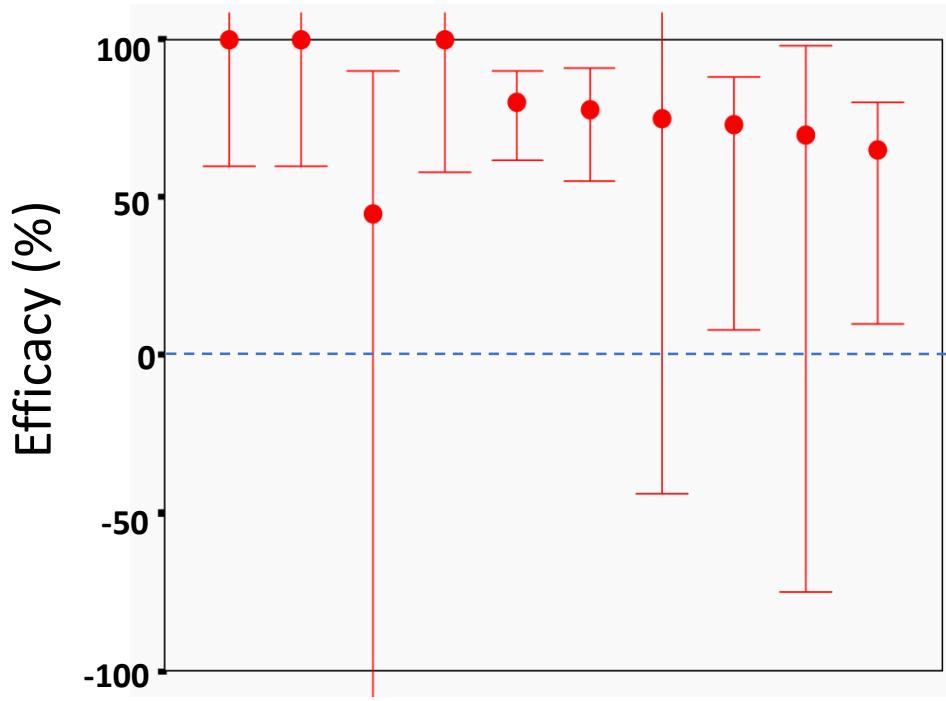


BCG-induced protection against pulmonary TB is variable



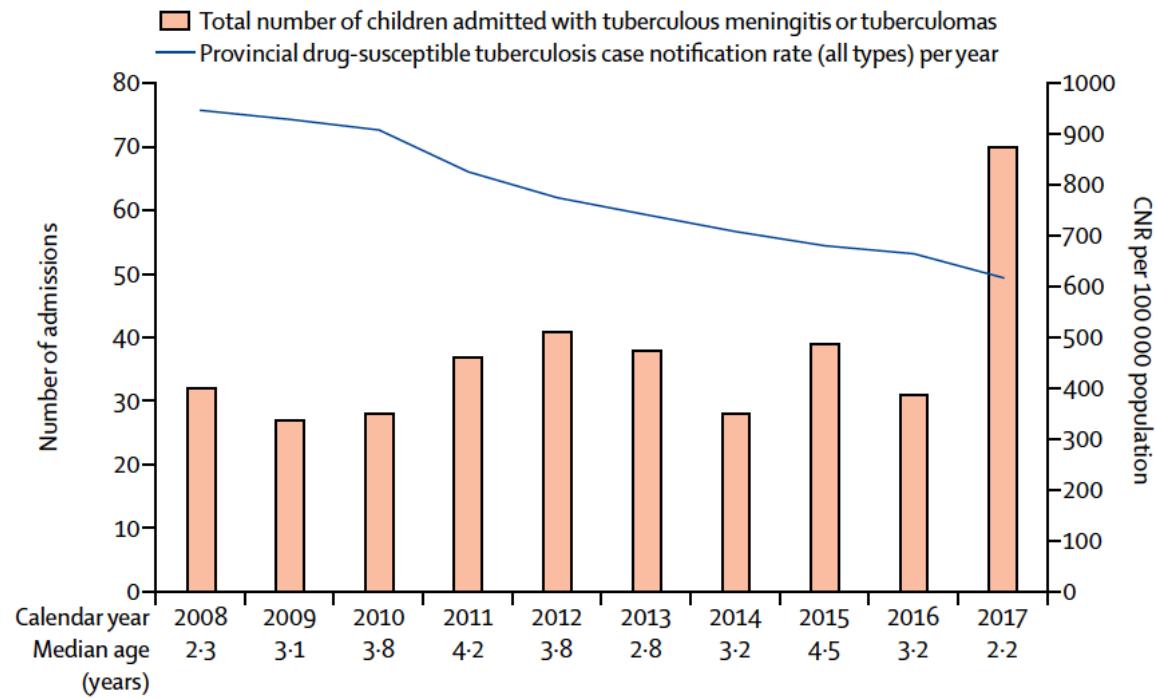
*P. Fine. 2000. BCG Vaccines and Vaccination. In: L. B. Reichman and E. S. Hershfield. Tuberculosis. A comprehensive International Approach. 2nd Edition.

BCG protects against disseminated forms of TB in infants



*P. Fine. 2000. BCG Vaccines and Vaccination. In: L. B. Reichman and E. S. Hershfield. Tuberculosis. A comprehensive International Approach. 2nd Edition.

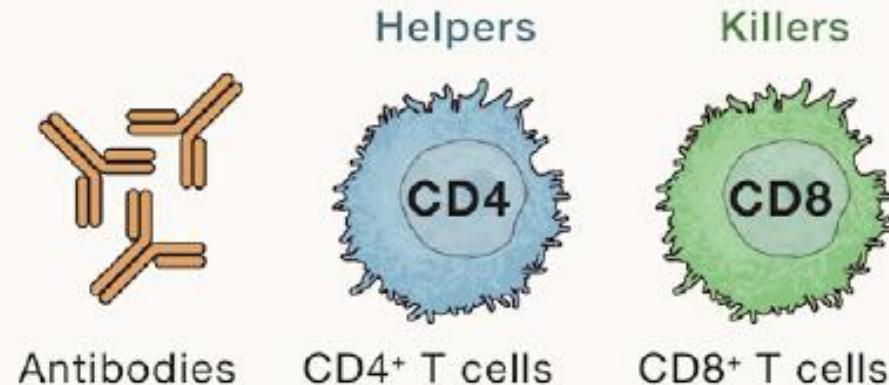
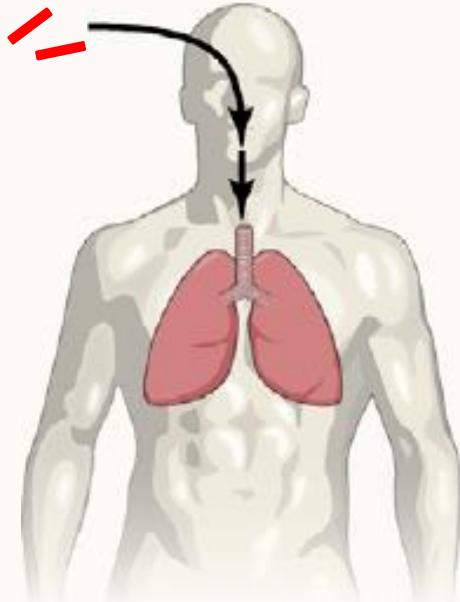
BCG protects against disseminated forms of TB in infants



Vaccine design

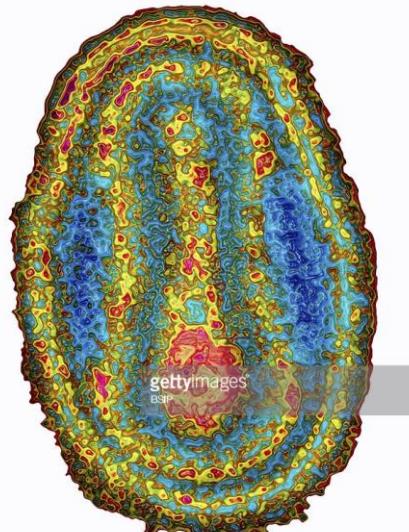
Which type of immune response protects against *M. tuberculosis*?

M. tuberculosis

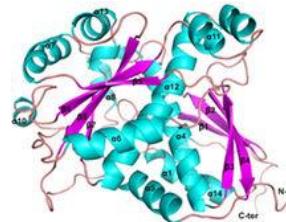


MVA85A – a good Th1 inducing vaccine candidate

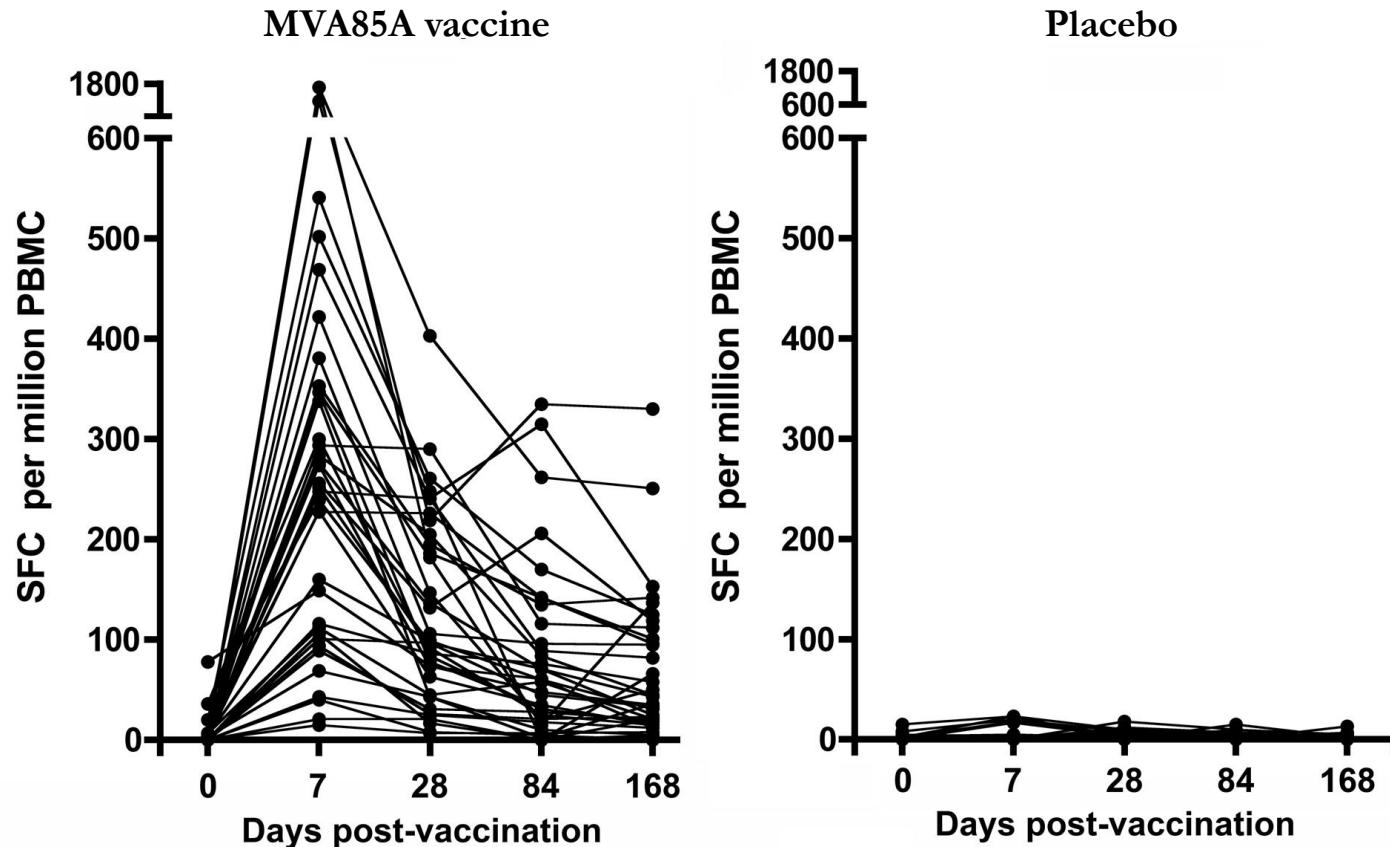
Modified vaccinia virus Ankara



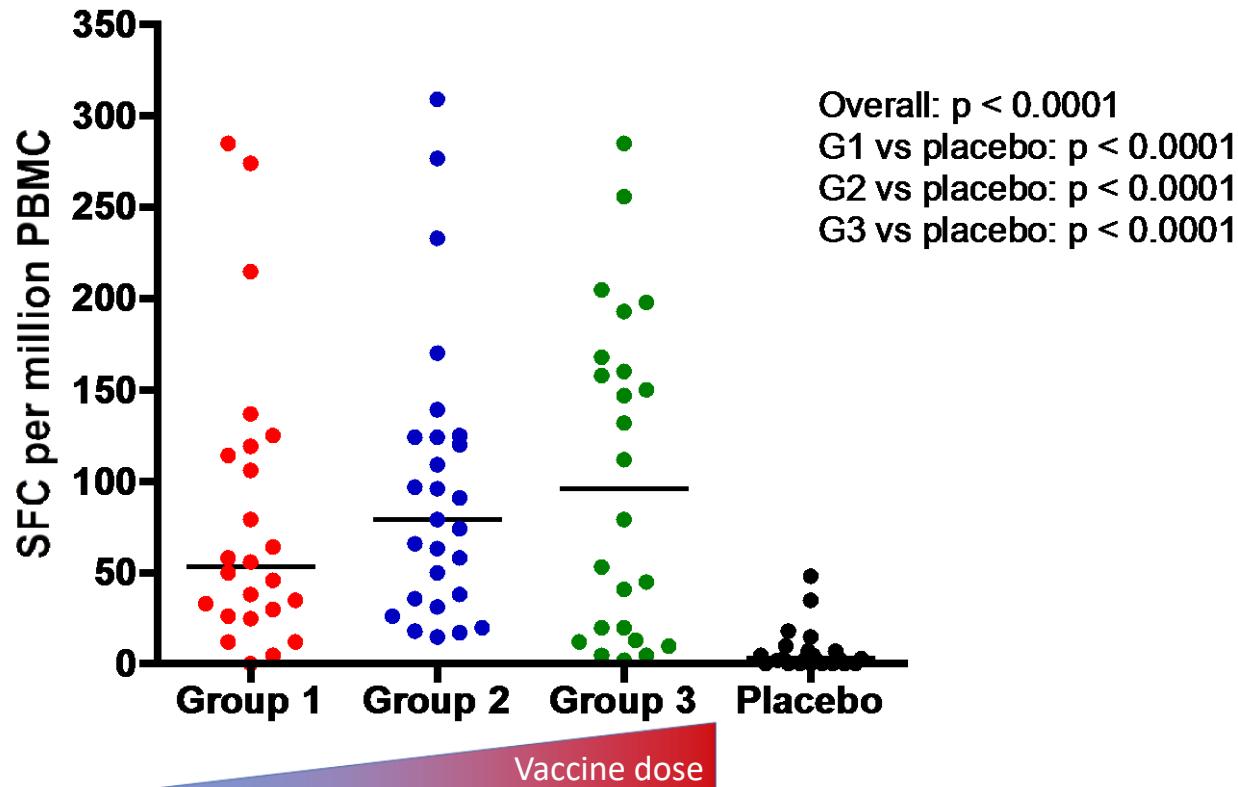
Ag85A
Mycolyl transferase
gene ("blueprint")



Evaluating T cell immunity

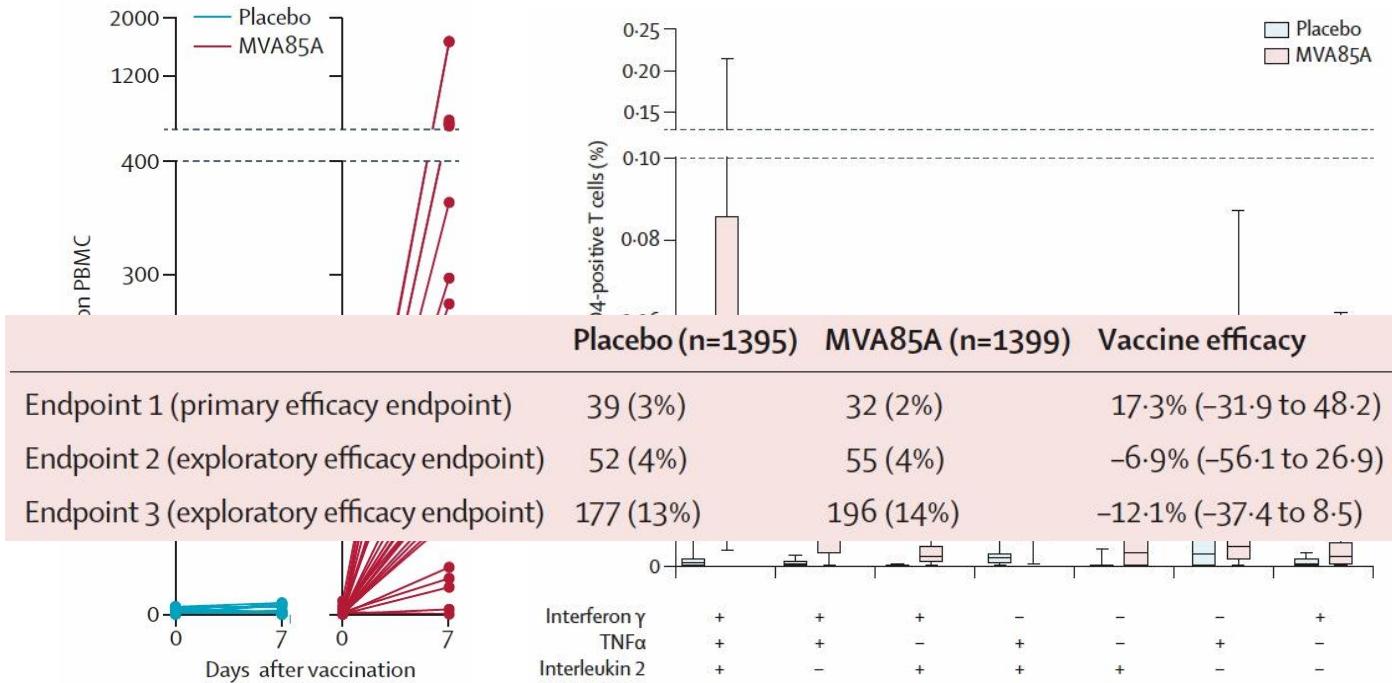


Infant responses >3 years after MVA85A vaccination

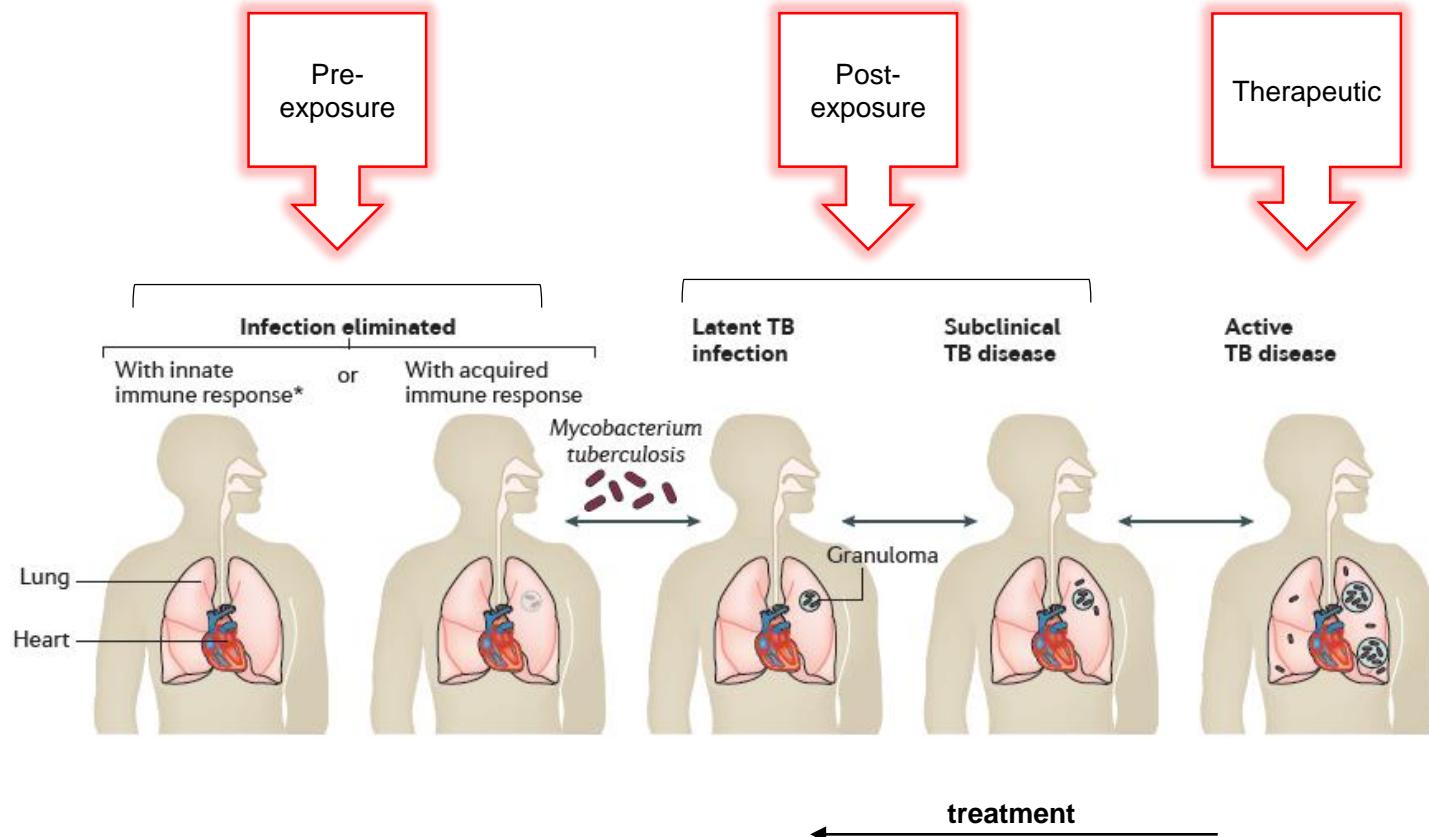


Safety and efficacy of MVA85A, a new tuberculosis vaccine, in infants previously vaccinated with BCG: a randomised, placebo-controlled phase 2b trial

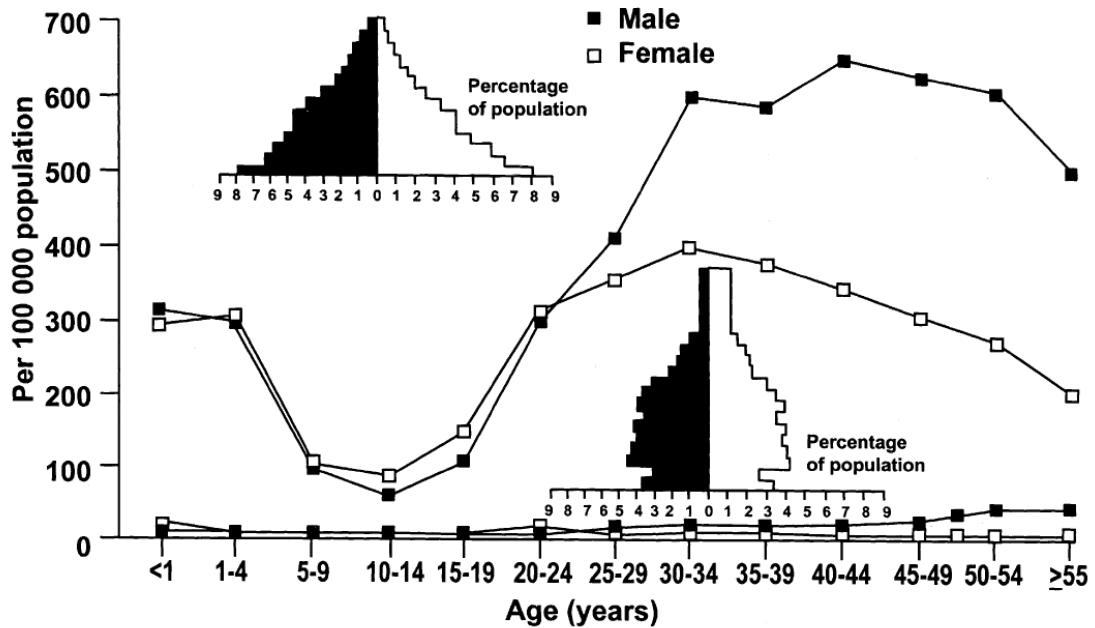
Michele D Tameris*, Mark Hatherill*, Bernard S Landry, Thomas J Scriba, Margaret Ann Snowden, Stephen Lockhart, Jacqueline E Shea, J Bruce McClain, Gregory D Hussey, Willem A Hanekom, Hassan Mahomed†, Helen McShane†, and the MVA85A 020 Trial Study Team



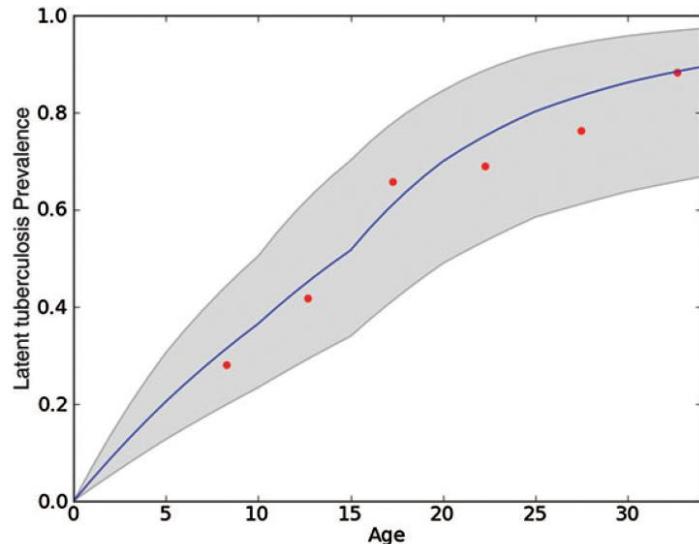
New vaccination strategies



Can vaccination protect against infection?

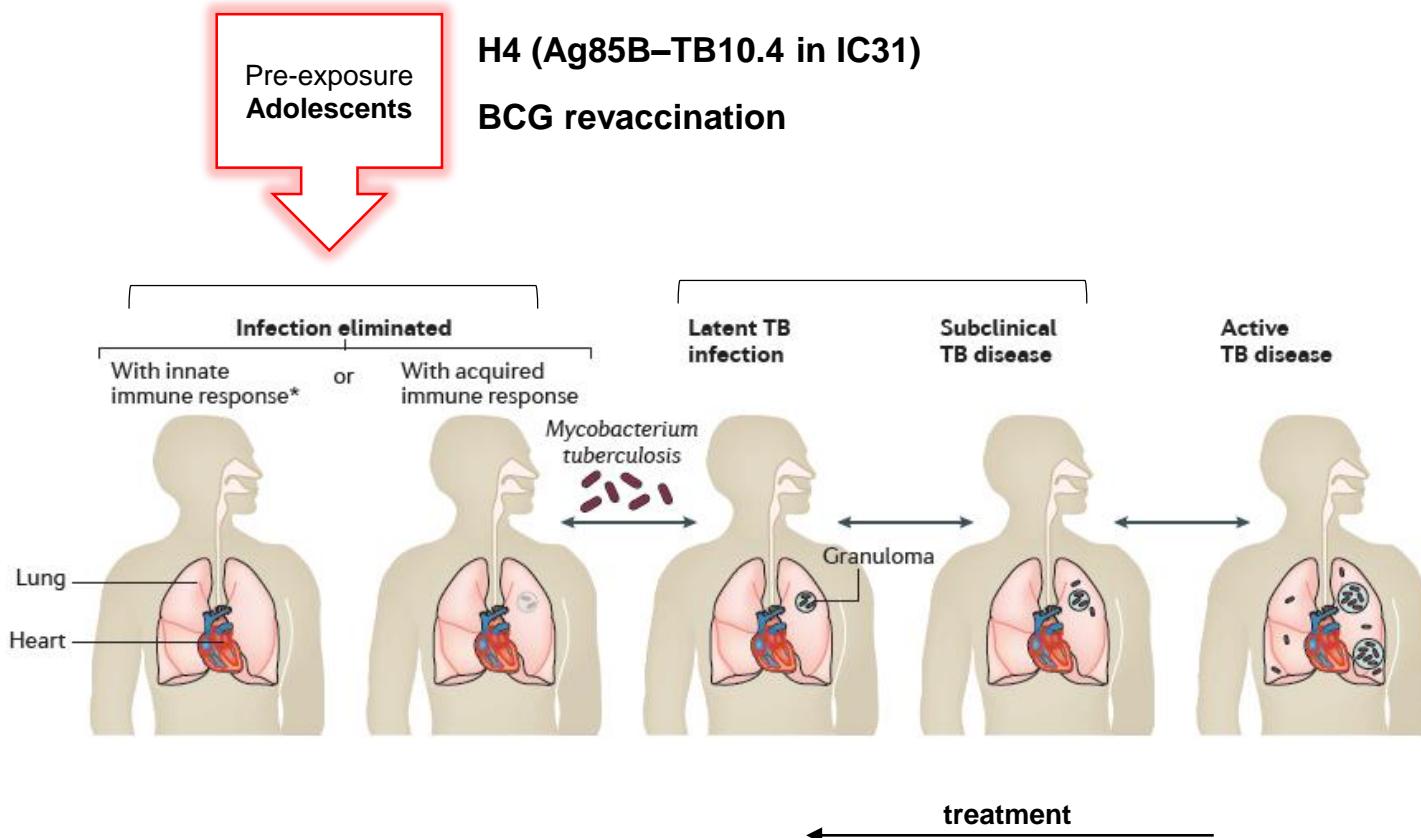


Donald, et al. IJTL 2004



Andrews et al., JID 2014

Can vaccination prevent against *M. tuberculosis* infection?



Clinical trial of BCG re-vaccination to protect against M.tb infection

QFT- adolescents
N = 990

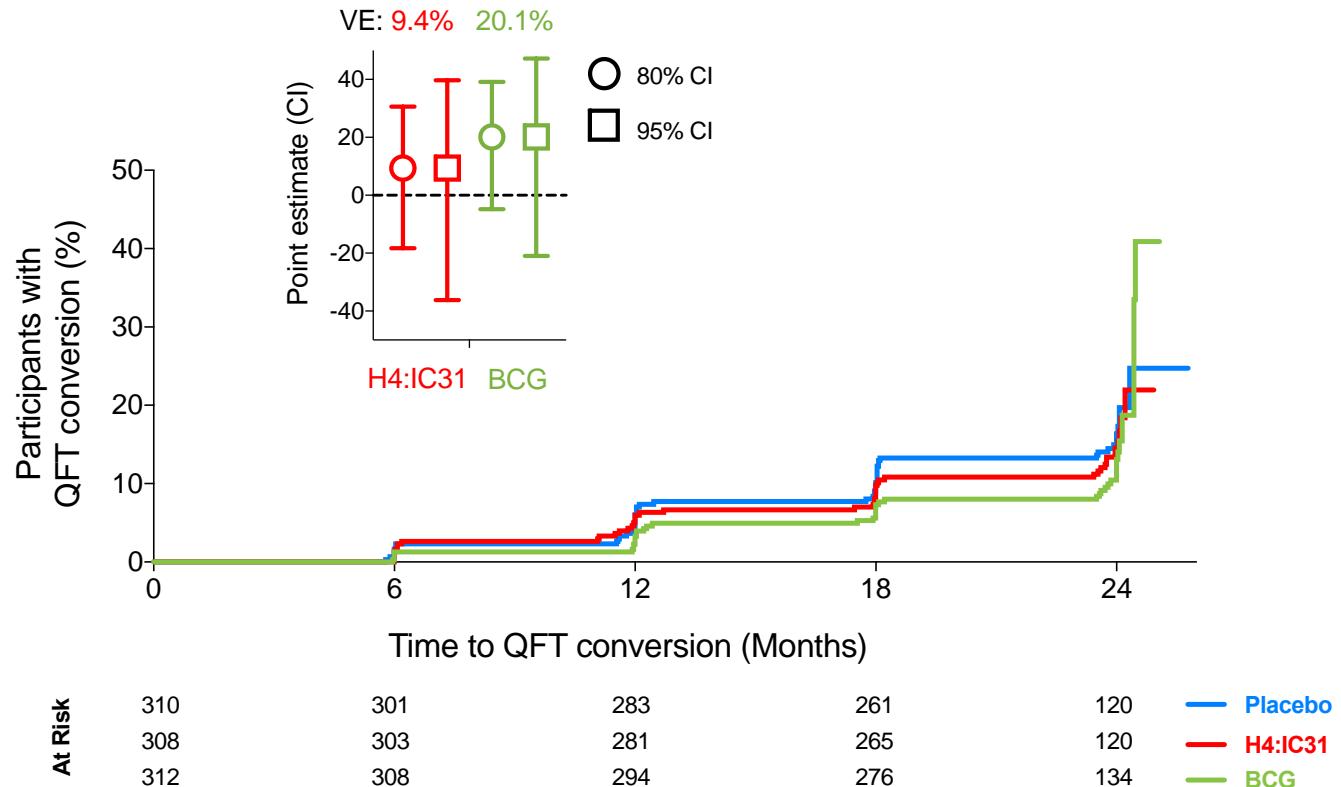
Placebo
BCG revacc.
H4:IC31

24 month follow-up
Endpoint: QFT

Prevention of *M. tuberculosis* Infection with H4:IC31 Vaccine or BCG Revaccination

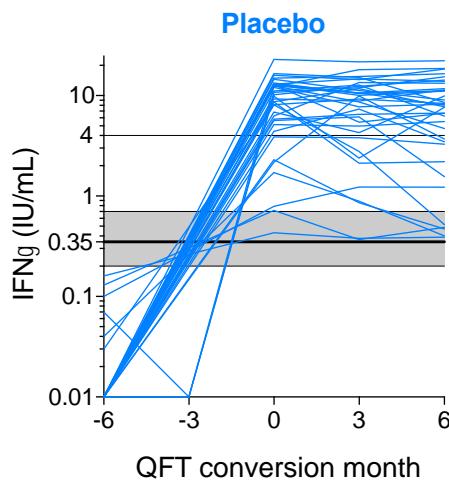
E. Nemes, H. Geldenhuys, V. Rozot, K.T. Rutkowski, F. Ratangee, N. Bilek,
S. Mabwe, L. Makhetha, M. Erasmus, A. Toefy, H. Mulenga, W.A. Hanekom,
S.G. Self, L.-G. Bekker, R. Ryall,* S. Gurunathan, C.A. DiazGranados, P. Andersen,
I. Kromann, T. Evans, R.D. Ellis, B. Landry, D.A. Hokey, R. Hopkins,
A.M. Ginsberg, T.J. Scriba, and M. Hatherill, for the C-040-404 Study Team†

Efficacy: QFT conversion (Initial infection)

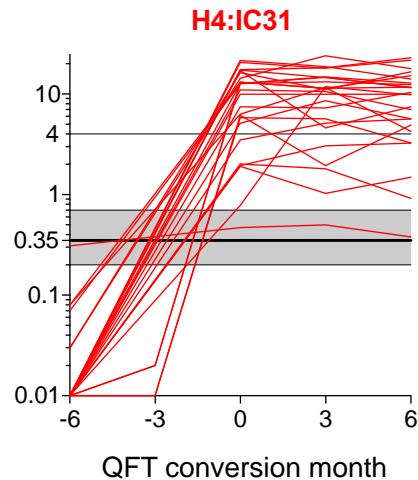


Efficacy: Sustained QFT conversion (Sustained infection)

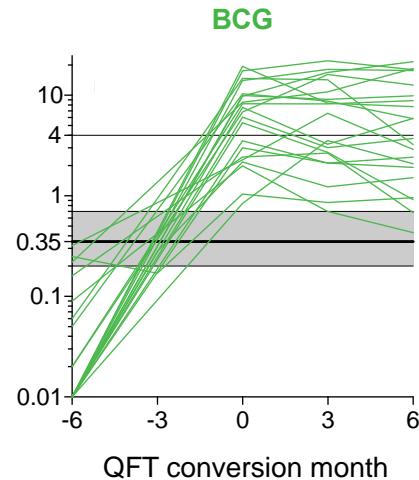
**82 QFT conversions from $\text{IFN}\gamma < 0.35$ to $\geq 0.35 \text{ IU/mL}$ after Day 84,
without reversion through 6 months post-conversion**



$n = 36/310 (12\%)$

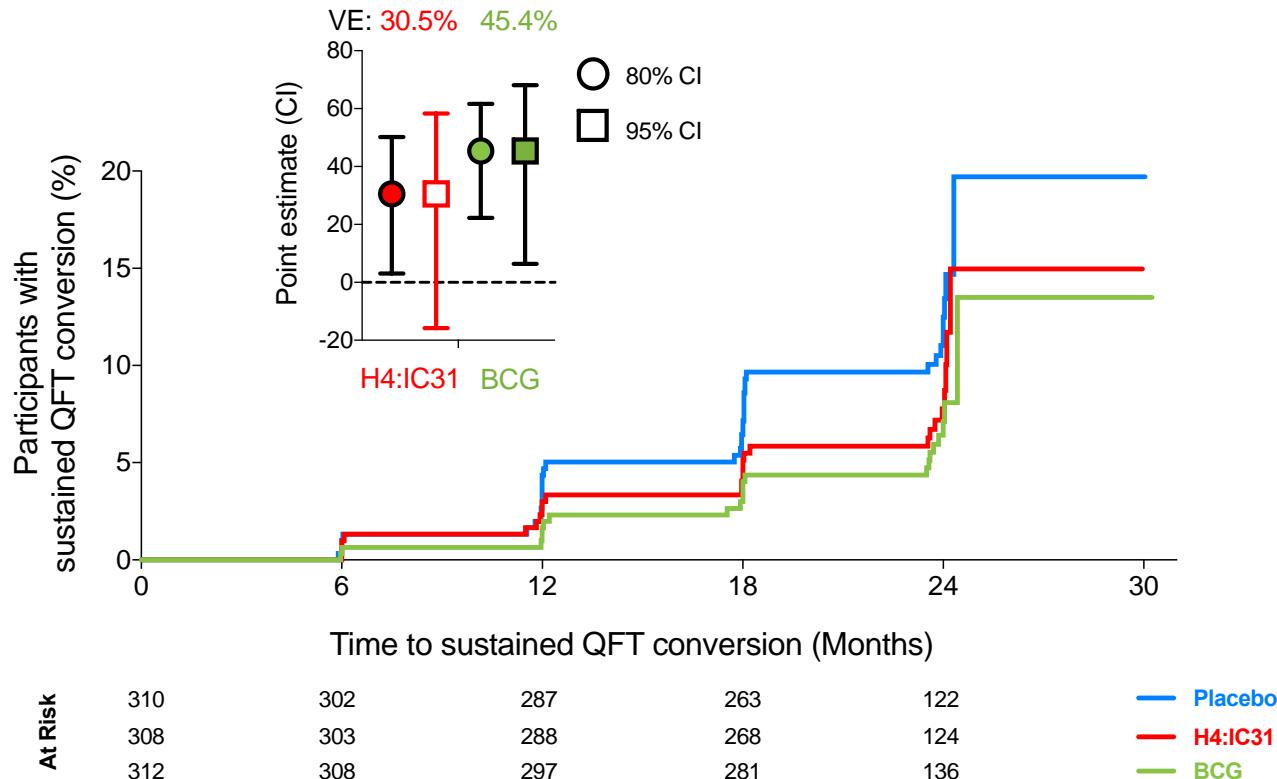


$n = 25/308 (8\%)$

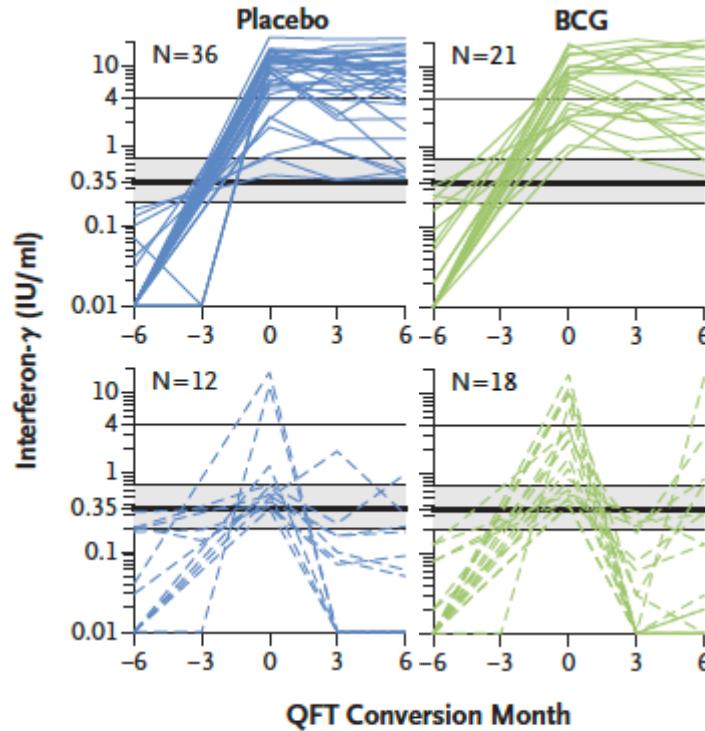


$n = 21/312 (7\%)$

Efficacy: Sustained QFT conversion (Sustained infection)

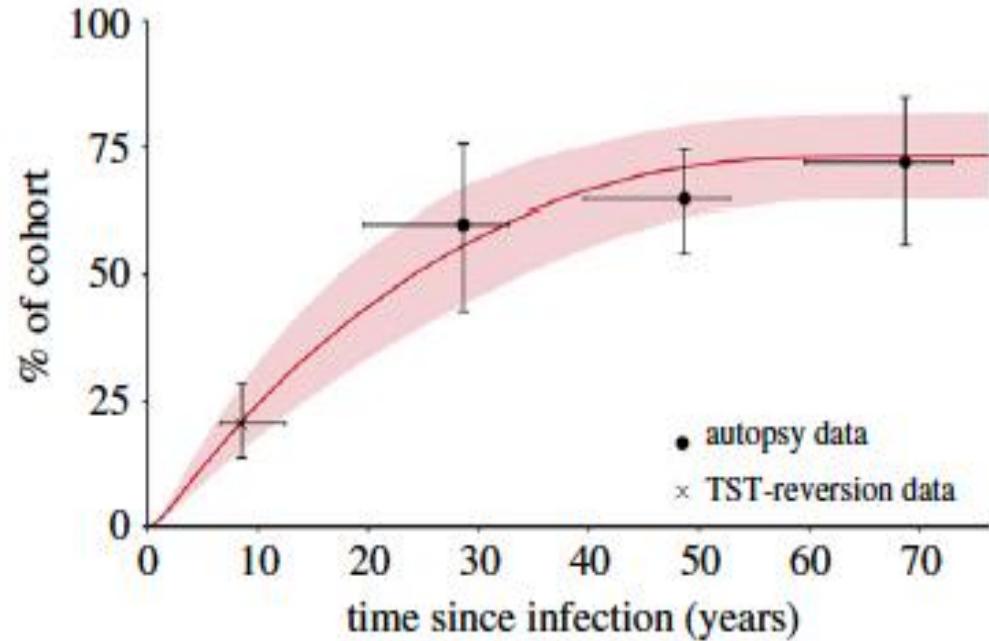


What is transient or sustained Mtb infection?



Nemes et al., NEJM. 2018

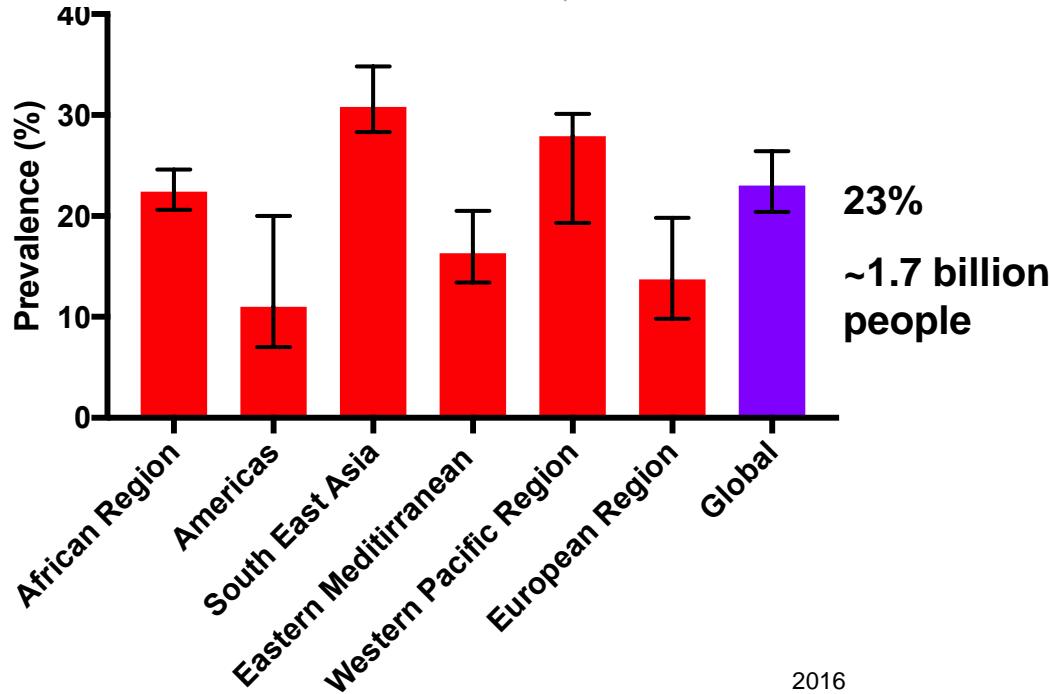
cumulative self-cleared *Mtb* infection



Emery et al., Proceed. B Royal Soc. 2021

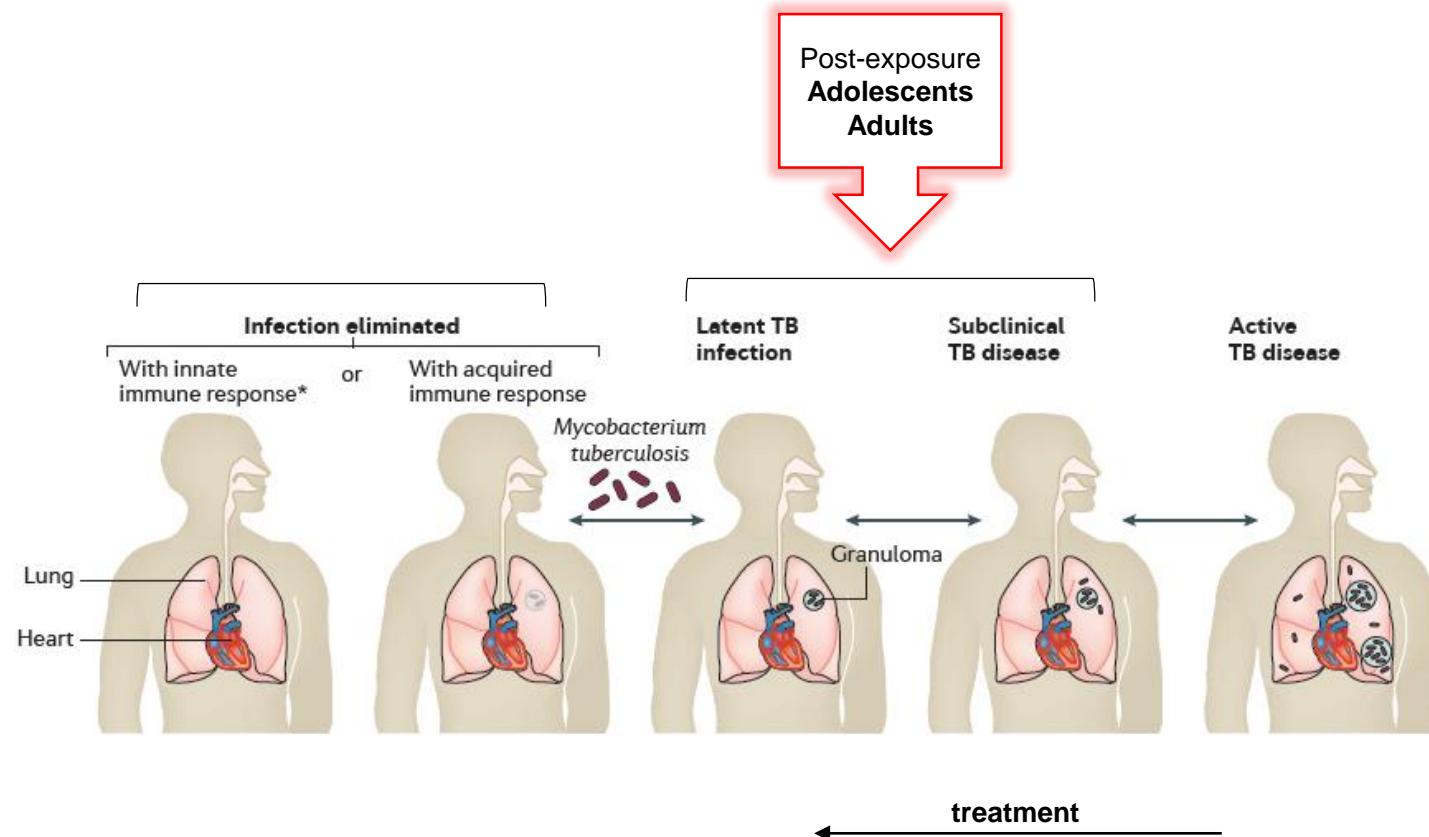
RESEARCH ARTICLE

The Global Burden of Latent Tuberculosis Infection: A Re-estimation Using Mathematical Modelling

Rein M. G. J. Houben^{1,2*}, Peter J. Dodd³

2016

Can TB vaccination protect infected individuals against TB disease?



M72 in ASO1_E

M72



10 mg M72 polyprotein dissolved
in 0.5 mL ASO1_E adjuvant

25 mg MPL (3-O-desacyl-4'-
monophosphoryl lipid A)

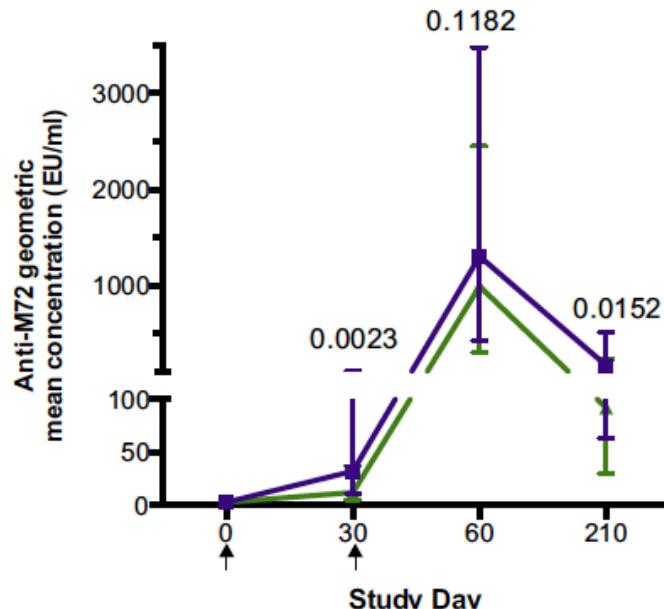
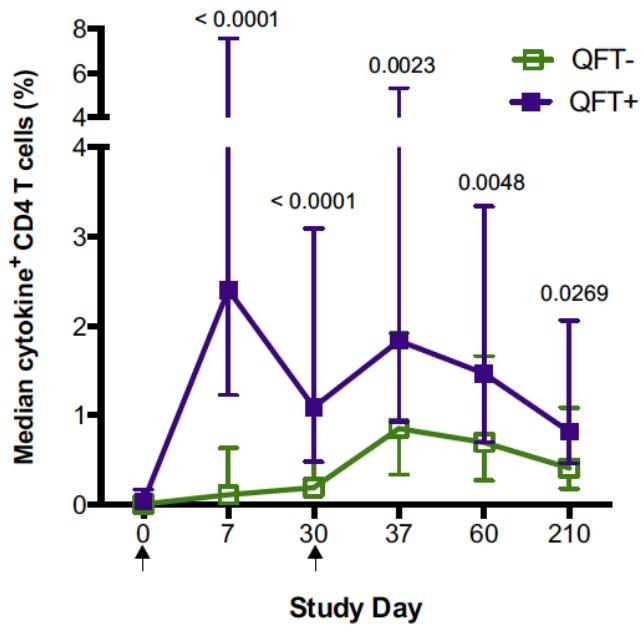
25 mg QS21 (glycoside purified from
bark of *Quillaja saponaria*)

Adjuvants in suspension of liposomes in
PBS

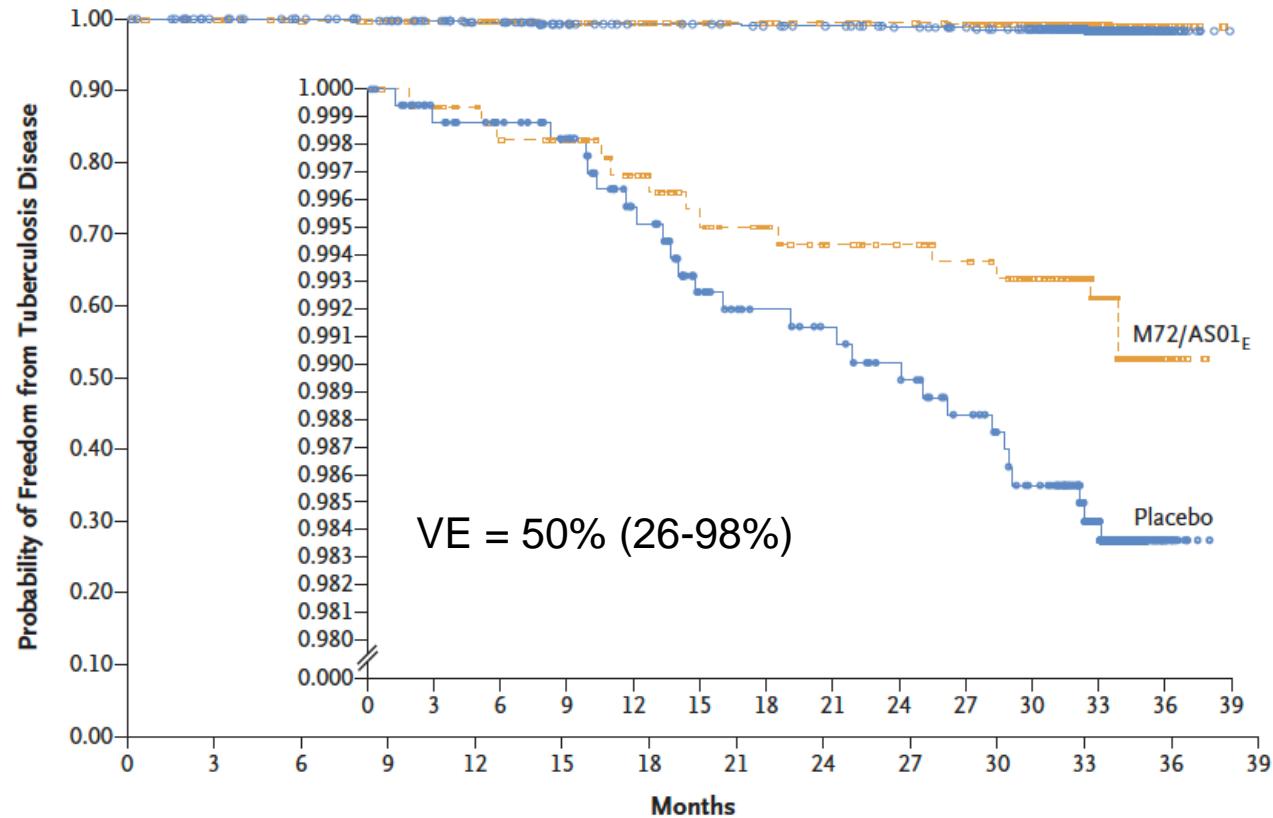


Soap Bark Tree
(*Quillaja saponaria*)

M72:AS01_E is very immunogenic



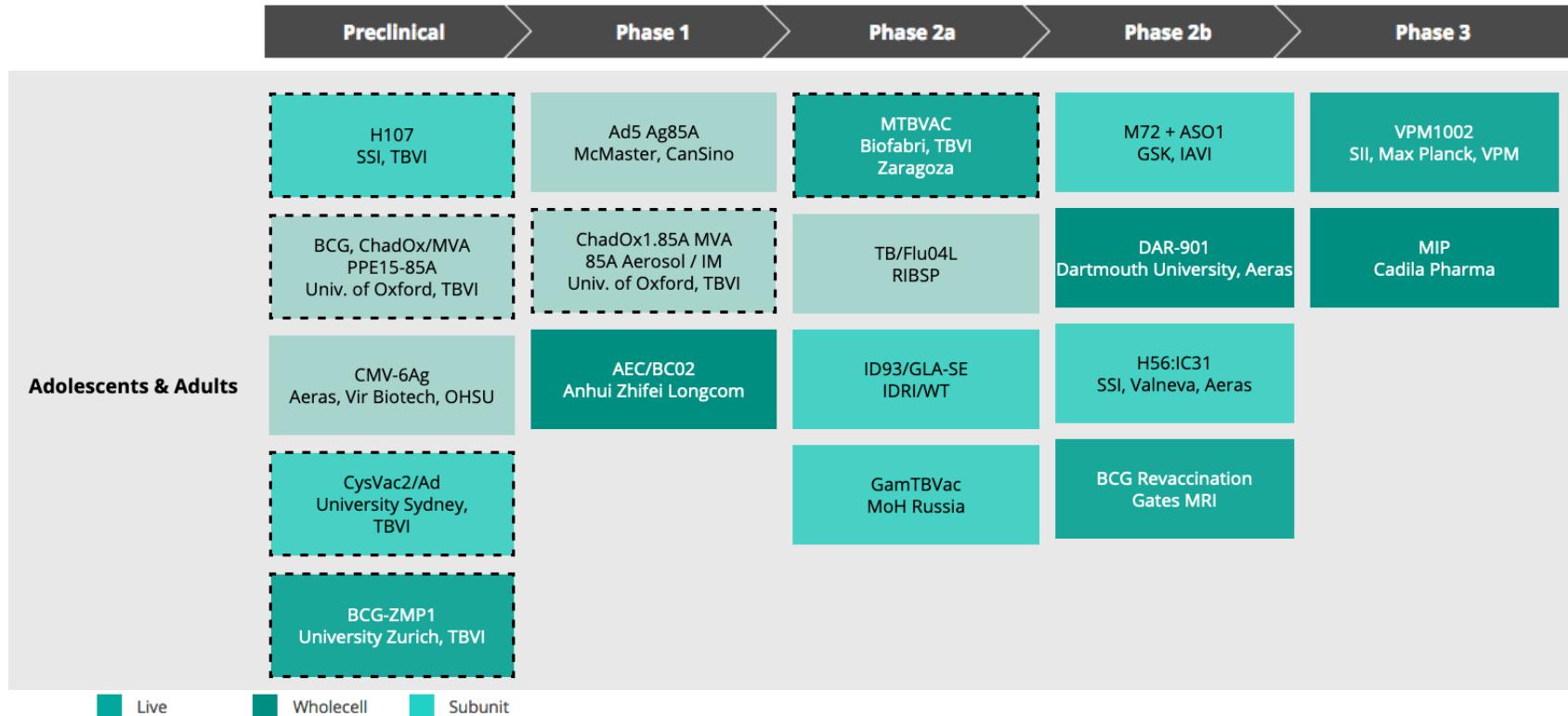
50% protection against TB disease in *M. tuberculosis*-infected adults



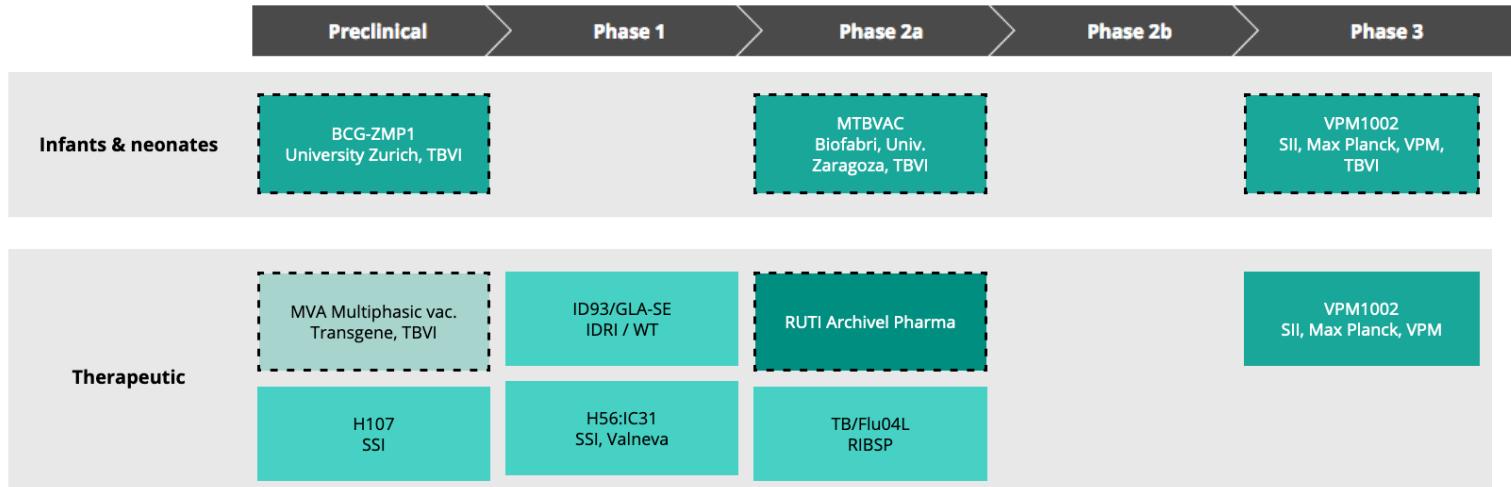
No. at Risk

M72/AS01 _E	1626	1621	1614	1609	1592	1580	1573	1566	1561	1557	1542	1468	12
Placebo	1663	1650	1642	1632	1610	1586	1576	1571	1564	1553	1539	1460	19

The TB vaccine development pipeline (adolescent and adults)



The TB vaccine development pipeline (infants and therapeutic indications)



Live

Wholecell

Subunit

Take home

- The burden of TB is enormous
- The complexity and heterogeneity of TB pathogenesis is considerable
- We need better tools to define this heterogeneity for effective vaccine development
- Natural immunity provides clues about protective mechanisms
- There is a “vibrant” pipeline of TB vaccine candidates
- Rational (data driven) advancement of candidates is critical
- Recent successes provide renewed impetus



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Miguel Rodo
Helen Mearns

Many, many others!

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