

**Strep A Vaccine Global Consortium**

**<https://savac.ivi.int/>**

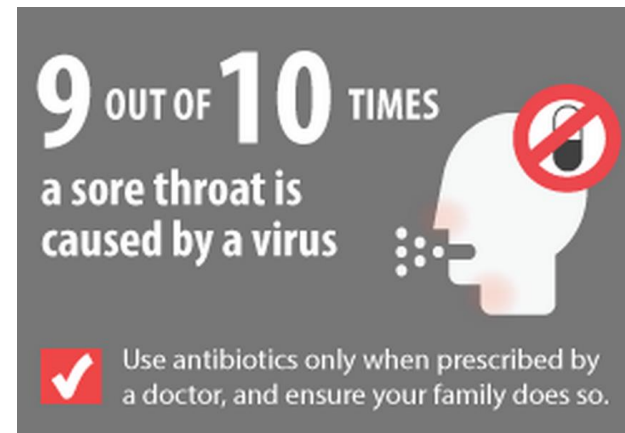
**New vaccines could play a valuable role in reducing antibiotic consumption**

**Antibiotic consumption may have unintended consequences**

- **Antibiotic resistance**
- **Microbiome disruption**

**The impact that Strep A vaccines will have on antibiotic consumption is unknown**

**Of all diseases caused by Strep A, sore throat is the most common disease, and one of the most common reasons for antibiotic consumption**



# Aims

- 1. Estimate how many antibiotic courses are consumed globally in the treatment of sore throat and what proportion is attributable to Strep A**
- 2. Explore the potential impact of Strep A vaccination on antibiotic consumption for sore throat**



# Aim 1: Global antibiotic consumption

## Systematic review of the literature

- Studies published from 2000
- Studies describing
  1. The **population rate** of antibiotic prescribing for sore throat
  2. The proportion of prescriptions due to Strep A sore throat among all prescriptions for sore throat

## Analyses

- Calculated the arithmetic and the population-weighted mean prescribing rates for sore throat
- Conducted a random-effects meta-analysis of the proportion of prescriptions for **sore throat** that was **attributable to Strep A based on linked diagnostic testing**
- Estimated the number of antibiotic prescriptions for sore throat based on the 2020 global population





**Prescribing rates:** 46 studies from 19 countries

Of the 19 countries with prescribing rates,

- 12 countries reported rates for all ages
- 11 countries reported rates among children
- 6 countries reported rates among adults

**Prescriptions attributable to Strep A:** 18 studies from 9 countries

# Antibiotic prescribing rates for sore throat



Data removed

# Antibiotic prescribing rates for sore throat

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# Prescriptions attributable to Strep A: All ages



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# Prescriptions attributable to Strep A: Children

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# Global antibiotic prescribing for sore throat



**Estimated numbers of antibiotic courses prescribed to treat sore throat based on 2020 population estimates (and courses attributable to Strep A in parentheses)**

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# Aim 2: Potential impact of Strep A vaccination

## Scenarios for changes to prescribing practices

- 1: No change in prescribing practices (minimum estimate of averted prescriptions)
- 2: Change in prescribing practices in HICs (reduced to the prescribing rate observed in the Netherlands), no change in LMICs
- 3: Global change in prescribing practices (maximum estimate of averted prescriptions)

## Effectiveness of vaccination

- 80% reduction in Strep A pharyngitis
- 10-year efficacy – no waning – from vaccination at 5 years of age
- 90% coverage



# Estimated reductions in antibiotic prescriptions

Data removed

# Summary

- Sore throat is a common reason for antibiotic consumption
- For the population covered by this review, an estimated
  - .
  - .
- For the global population, an estimated
  - .
  - .
- An effective Strep A vaccine could avert
  - .
- Limitations
  - Lack of consumption data from LMICs
  - Majority of studies report data for prescribing rather than consumption
  - Range of case definitions; e.g., sore throat, pharyngitis, tonsillitis, and (unconfirmed) streptococcal pharyngitis
  - Unknown vaccine/vaccination parameters

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**HARVARD**  
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**SCHOOL OF PUBLIC HEALTH**



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