A phase II, double-blind, randomised, controlled, dose ranging study to evaluate the safety, immunogenicity, dose response and schedule response of a meningococcal A conjugate vaccine administered concomitantly with local expanded program on immunisation (EPI) vaccines in healthy infants

Submission date	Recruitment status	[X] Prospectively registered		
06/08/2008	No longer recruiting	Protocol		
Registration date	Overall study status	Statistical analysis plan		
06/08/2008	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
05/03/2019	Nervous System Diseases			

Plain English summary of protocol

Background and study aims

Meningitis is an infection that causes inflammation of the meninges (the protective lining that cover the brain and spinal cord). Meningitis can be bacterial or viral, but bacterial meningitis is far more serious. If bacterial meningitis is not treated in time, then it can cause severe brain damage and infect the blood (septicaemia) leading to death. In Africa, more than 90% of meningitis epidemics are caused by a bacterial variety commonly referred to as group A meningitis, which mainly affects children. Due to the widespread devastation this disease has caused, a vaccine has been produced for use against meningitis A in sub-Saharan Africa, known as MenAfriVac. An important part in the development of new vaccines is to measure how effective they are, and how long the immunity gained from them lasts for. This information provides useful information about vaccination programmes and schedules (i.e. if "booster" injections are needed). The aim of this study is to determine the safest dose of the MenAfriVac vaccine and whether it is more effective when given alone or with the recommended vaccines for children (EPI vaccines).

Who can participate?

Healthy children aged between 14 and 18 weeks, who have received all of the recommended (EPI) vaccines for their age.

What does the study involve?

Participants are randomly allocated into four groups. The first group receive doses of MenAfriVac at 14 weeks and 9 months of age, the second group receive a dose at 9 months of

age, the third group receive a dose at 12 months of age and the fourth group only receives the recommended vaccines (EPI). After 28 days, a blood sample is taken so that the immunity against group A meningitis is measured.

What are the possible benefits and risks of participating?

There is no direct benefit of participating in the study, however if any of the children involved have any sudden illnesses, then this will be treated straight away. There are no notable risks of participating other than possible discomfort during blood tests.

Where is the study run from?
Navrongo Health Research Centre (Ghana)

When is the study starting and how long is it expected to run for? August 2008 to December 2017

Who is funding the study?
Bill and Melinda Gates Foundation (USA)

Who is the main contact? Dr Marie-Pierre Preziosi preziosim@who.int

Contact information

Type(s)

Scientific

Contact name

Dr Marie-Pierre Preziosi

Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

RPC258

Study information

Scientific Title

A phase II, double-blind, randomised, controlled, dose ranging study to evaluate the safety, immunogenicity, dose response and schedule response of a meningococcal A conjugate vaccine administered concomitantly with local expanded program on immunisation (EPI) vaccines in healthy infants

Study objectives

The aim of this Phase II dose-ranging clinical study is to evaluate the safety and immunogenicity of three different formulations of the PsA-TT vaccine (2.5, 5 or 10 µg concentration of Men A polysaccharide).

Ethics approval required

Old ethics approval format

Ethics approval(s)

- 1. Western Institutional Review Board, 30/11/2007, ref: 1095050)
- 2. Ghana Health Service Ethical Review Committee, 12/06/2008, ref: GHS-ERC 01/1/08
- 3. Navrongo Health Research Centre Institutional Review Board, 07/07/2008, ref: NHRCIRB070
- 4. Food and Drugs Board (Ghana), 25/07/2008, ref: FDB/CT/803

Study design

Phase II double-blind randomised dose-ranging controlled clinical study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Other

Study type(s)

Prevention

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Bacterial meningitis

Interventions

All participants are given the Expanded Programme on Immunization (EPI) vaccines. OPV and Pentavalent DTwPHBVHib vaccines are given at 6 weeks (with completion of a 10 and 14 week schedule), a single dose of yellow fever and measles vaccine is administered at 9-12 months, and a booster of pentavalent DTwPHBVHib vaccine is given at 12-18 months. Participants are then randomly allocated into one of four groups:

Group 1: EPI vaccines concomitantly with two doses of the study vaccine (PsA-TT) in infancy at 14 weeks and 9 months of age

Group 2: EPI vaccines concomitantly with one single dose of the study vaccine (PsA-TT) in infancy at 9 months of age

Group 3: EPI vaccines concomitantly with one single dose of the study vaccine (PsA-TT) in the first year of life at 12 months of age

Group 4: EPI vaccines only

Intervention Type

Biological/Vaccine

Phase

Phase II

Drug/device/biological/vaccine name(s)

PsA-TT

Primary outcome measure

To compare the immunogenicity at 28 days after vaccination of range dosages of the PsA-TT vaccine, when administered to infants in a two-dose schedule at 14 weeks and 9 months of age concomitantly with EPI vaccines.

Secondary outcome measures

- 1. Safety of range dosages of the PsA-TT vaccine, when administered to healthy infants in a two-dose schedule at 14 weeks and 9 months of age concomitantly with EPI vaccines (i.e. diphtheria, tetanus, whole cell pertussis, hepatitis B, Hib, and oral poliomyelitis at 14 weeks; measles and yellow fever at 9 months)
- 2. Immunogenicity of the EPI vaccines in all vaccines groups, when administered alone or concomitantly with the PsA-TT vaccine at 14 weeks, 9 months, and 12 months of age 3. Immunogenicity at 28 days, at 12 and 24 months (i.e. at 24 and 36 months of age) after a single dose of the PsA-TT vaccine administered at 12 months of age concomitantly with EPI vaccines

Overall study start date

18/08/2008

Completion date

31/12/2012

Eligibility

Key inclusion criteria

- 1. Aged 14 to 18 weeks old
- 2. Free of obvious health problems as established by medical history including physical examination and clinical judgment of the investigator
- 3. Guardian capable and willing to bring their child or to receive home visits for their child for all follow-up visits
- 4. Residence in the study area

5. Fully vaccinated according to the local EPI schedule (Bacillus Calmette-Guerin [BCG] and OPV at birth, two doses of diphtheria, tetanus, whole cell pertussis, haemophilus influenzae type B and hepatitis B virus [DTwPHibHBV] and OPV at 6 and 10 weeks of age)

Participant type(s)

Healthy volunteer

Age group

Child

Lower age limit

14 Weeks

Upper age limit

18 Weeks

Sex

Both

Target number of participants

Initial study: 1200,

Kev exclusion criteria

- 1. Previous vaccination against serogroup A Neisseria meningitidis
- 2. Known exposure to serogroup A N. meningitidis since birth
- 3. History of allergic disease or known hypersensitivity to any component of the study vaccines
- 4. History of serious adverse reactions following administration of vaccines included in the local program of immunisation
- 5. Administration of any vaccine other than EPI vaccines within 30 days prior to administration of study vaccines or planned vaccination during the first four weeks after the study vaccination 6. Use of any investigational or non-registered drug since birth
- 7. Administration of immunoglobulins and/or any blood products since birth or planned administration during the study period
- 8. Chronic administration (defined as more than 14 days) of immunosuppressant or other immune-modifying agents since birth (including systemic or inhaled corticosteroids, this means prednisone, or equivalent, greater than 0.5 mg/kg/day; topical steroids are allowed)
- 9. A family history of congenital or hereditary immunodeficiency
- 10. History of meningitis or seizures or any neurological disorder
- 11. Major congenital defects or serious chronic illness, including malnutrition (as per investigator's judgment). Minimum weight should be of 4 kg at the time of enrolment in the study (at 14 18 weeks of age).
- 12. Acute disease at the time of enrolment (acute disease is defined as the presence of a moderate or severe illness with or without fever) is a temporary exclusion
- 13. Acute or chronic, clinically significant pulmonary, cardiovascular, hepatic, or renal functional abnormality, as determined by medical history, physical examination or laboratory tests, which in the opinion of the investigator, might interfere with the study objectives
- 14. Any condition or criteria that in the opinion of the investigator might compromise the well being of the subject or the compliance with study procedures or interfere with the outcome of the study
- 15. Non-residence in the study area or intent to move out within 2 years

Date of first enrolment

18/08/2008

Date of final enrolment

31/12/2017

Locations

Countries of recruitment

Ghana

Study participating centre Navrongo Health Research Centre

Ghana Health Service Navrongo Ghana

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Sponsor information

Organisation

Serum Institute of India Limited

Sponsor details

212/2, Hadapsar Pune India 411 028 +91 (0)20 699 3900 contact@seruminstitute.com

Sponsor type

Research organisation

Website

http://www.seruminstitute.com

ROR

https://ror.org/04jk2xb11

Funder(s)

Funder type

Funder Name

Bill and Melinda Gates Foundation (USA)

Alternative Name(s)

Bill & Melinda Gates Foundation, Gates Foundation, BMGF, B&MGF, GF

Funding Body Type

Government organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

United States of America

Results and Publications

Publication and dissemination plan

Publication of the initial study is planned by 2016.

Intention to publish date

31/12/2016

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	15/11/2015		Yes	No
Results article	results	15/11/2015		Yes	No
Results article	results	15/11/2015		Yes	No
Results article	results	15/11/2015		Yes	No