



# JE Newsbriefs

*A periodic update on Japanese encephalitis (JE) disease, JE vaccines, and PATH's Japanese Encephalitis Project*

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*In this second issue of JE Newsbriefs, we are pleased to report on progress being made toward the control of JE. We also provide an update on the SA 14-14-2 vaccine produced in China and share a new, interactive JE learning tool.*

*This month marks the occasion of a major meeting, the WHO bi-regional JE meeting in Bangkok March 30 and 31. As a meeting highlight, new WHO JE surveillance guidelines will be launched. We are looking forward to this opportunity to share with countries and partners.*

*We also wish to acknowledge that at this time many countries in Asia continue to struggle with the tragedy and aftermath of the tsunami that struck in late December 2004. The heightened international exposure to the region as a result has helped increase awareness of various infectious diseases in the region, as fear of vector-borne diseases arise with changes in the environment and population shifts. So far, there are no reports of outbreaks or associated cases of JE. It is a challenging time for the region, but it also offers an opportunity for countries to seek greater attention to underlying health problems, as the global community has renewed its commitment to health and development issues in Asia.*

*We hope you enjoy this issue and look forward to continued collaboration.*

*Dr. Julie Jacobson, Project Director, and the JE team*  
[JEproject@path.org](mailto:JEproject@path.org)

## Vaccines to Prevent Japanese Encephalitis: The SA 14-14-2 live attenuated vaccine

The JE Project sponsored an international team of experts to visit the Chengdu Institute of Biological Products (CDIBP) in Chengdu, China. The team consisted of experts in clinical research, Good Manufacturing Practices, vaccine production, and regulatory issues. The team reviewed cumulative, pre-clinical and clinical SA 14-14-2 safety studies from China and other countries, involving over 1 million children over the past 20 years. They also met with Institute staff, reviewed effectiveness studies with 6 and 11 year follow up and evaluated the production facility. The team concluded that, in general, the data were sufficient to prove the safety and efficacy of the vaccine for single dose use in endemic settings.

The manufacturers plan to submit the vaccine file for WHO pre-qualification. The JE Project is working with them to ensure that a sufficient supply of vaccine is available in future.

In our next issue we will report on ChimeriVax-JE from Acambis.



*The SA 14-14-2 vaccine is licensed in several countries outside of China, including South Korea, Sri Lanka and Nepal*

For more on JE vaccines, visit  
[http://childrensvaccine.org/html/v\\_enceph\\_vac.htm](http://childrensvaccine.org/html/v_enceph_vac.htm)



*PATH and Stanford University recently launched a new training module on JE*

### New JE e-learning tool available on web and CD-ROM

In December 2004, PATH and SUMMIT (Stanford University Medical Media and Information Technologies) launched a set of Advanced Immunization Management (AIM) e-Learning modules, including "[Considerations for Introduction of New and Underutilized Vaccines: Japanese encephalitis](#)".

With input from many partners and advisors, AIM e-Learning brings together a wide range of best practices and published information and uses interactive learning techniques so that national immunization managers and other decision makers can make well-informed management and implementation decisions.

Other AIM modules include "Considerations for Introduction of New and Underutilized Vaccines: Hepatitis B" and "Immunization Financing". A rotavirus vaccine module will be added in 2005, along with additional translations.

To request an AIM CD-ROM, or for additional information, contact Anne McArthur ([amcarth@path.org](mailto:amcarth@path.org)). The AIM homepage is <http://aim-e-learning.stanford.edu>.

## **WHO bi-regional Japanese encephalitis meeting: March 30-31, 2005**

The WHO bi-regional Japanese encephalitis meeting will be held March 30 and 31, 2005 in Bangkok, Thailand. The goal is to address progress towards the control of Japanese encephalitis in Asia. Participants will include health officials from countries in WHO's Southeast Asian and Western Pacific regions (SEARO and WPRO), and those from other organizations.

The meeting will provide an opportunity to discuss progress towards control of JE since the last such meeting in 2002. Presentations will include updates on JE vaccines and diagnostics, ratification of the new WHO surveillance guidelines for JE, and new learning and sharing tools, including the JE AIM module, and the web-based JE Prevention Network (JEPN). The forum will also allow countries to describe their own experiences and challenges, and to discuss solutions.

### **Nepal prepares the way for better JE control**

Nepal is making strides towards JE control through improved surveillance and immunization. Their encephalitis surveillance system was recently integrated with the Acute Flaccid Paralysis (AFP) surveillance system. It involves Ministry of Health/WHO surveillance medical officers in multiple sites. Clinical surveillance is enhanced by testing for JE at selected referral laboratories. The data are analyzed to provide policy makers with quality information on high-risk areas in the southern Terai region, age and sex distribution of cases, and other information helpful for planning effective JE control.

The United States Agency for International Development (USAID) provides support for JE surveillance. And in August 2004, Nepal received funding approval from the World Bank for a health sector program that includes JE immunization.

In the past, JE campaigns took place only in limited areas of the Terai, but the additional donor support provides a major boost for a more comprehensive JE immunization program.

### **Partner profile: AFRIMS in Bangkok, Thailand**

AFRIMS, the Armed Forces Research Institute of Medical Sciences, based in Bangkok, Thailand, has for decades been an important partner contributing to a better understanding of JE and its control throughout Asia.

AFRIMS developed one of the original ELISA-based diagnostics for JE, and has provided diagnostic support and training to numerous countries in the region. Currently AFRIMS, with support from PATH's JE Project, is evaluating three simplified JE ELISA kits for usability and accuracy. We hope these tests will allow for more effective diagnosis of JE, especially in low-resource settings. Because the tests require only a few hours to complete, they should relieve overburdened health care workers. Results of the study are expected in April.

In addition to its work on diagnostics, AFRIMS, with the Thai Ministry of Public Health, conducted a pivotal trial of the inactivated, mouse brain-derived JE vaccine. The results led to U.S. Food and Drug Administration licensure and to the eventual introduction of JE vaccine into routine immunization in Thailand. AFRIMS continues to evaluate new vaccine candidates, including those that are now replacing the inactivated, mouse brain-derived vaccine.

AFRIMS website: [www.afrims.org](http://www.afrims.org)

**Who's who at the JE Project:  
Dr. Raj Shankar Ghosh and Ms. Srilatha Sivalenka**



Raj Shankar Ghosh, MD, is a physician who has worked in public health for the past 12 years. He is Senior Program Manager of PATH's JE Project in India, based in the PATH office in New Delhi. Dr. Ghosh provides technical assistance on JE disease surveillance and control to some JE-endemic states of India and in the region. Several Indian states are considering introducing JE vaccine into their programs in the near future. Dr. Ghosh works closely with program managers in these states to map the disease, estimate disease burden and plan immunization programs. Prior to joining the JE Project in June 2004, Dr. Ghosh was a member of the National Polio Surveillance Project-India. His work in polio eradication and clinical JE elimination follows a family tradition: Dr. Ghosh's father was involved in the smallpox eradication program in India decades ago!



Ms. Srilatha Sivalenka is a JE Project Program Manager based in PATH's office in Andhra Pradesh (AP) state, central India. Since 2003, Ms. Sivalenka has been providing technical assistance on JE to the state government, including support to JE disease burden assessments and improved JE surveillance. Ms. Sivalenka is a registered nurse and midwife, and holds a Master's in Public Personnel Management. She was also trained in health policy research and was a visiting Takemi Fellow in International Health at Harvard University. For the JE Project, Ms. Sivalenka's activities include training key personnel about JE, preparing communication and training materials, and facilitating use of up-to-date JE diagnostics.

**JE resources**

**JE Project web site**

Check out the "Resources" section of the website.

[www.JEproject.org](http://www.JEproject.org)

**Japanese encephalitis online training module (AIM series)**

<http://aim-e-learning.stanford.edu/en/vaccines/je/index.html>

**CDC Japanese encephalitis home page**

A comprehensive overview of the disease.

[www.cdc.gov/ncidod/dvbid/jencephalitis/index.htm](http://www.cdc.gov/ncidod/dvbid/jencephalitis/index.htm)

**WHO Position Paper on JE**

[www.childreenvaccine.org/files/JE\\_position\\_paper\\_WHO.pdf](http://www.childreenvaccine.org/files/JE_position_paper_WHO.pdf)

**Preformatted PubMed searches:**

**General Japanese encephalitis search**

[www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=search&db=pubmed&term=japanese+encephalitis](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=search&db=pubmed&term=japanese+encephalitis)

**JE vaccine search**

[www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=search&db=pubmed&term=japanese+encephalitis+vaccines](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=search&db=pubmed&term=japanese+encephalitis+vaccines)