

The effect of vitamin A provided in campaign may depend on vaccination status: Observational study from Guinea-Bissau



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WHO recommends



Guideline:

Vitamin A supplementation in infants and children 6–59 months of age

Target group	Dose
Infants 6 to 11 months	100 000 IU
Children 12 to 59 months	200 000 IU

Every 4-6 months in areas where Vitamin A deficiency is a public health problem





Vitamin A supplementation (VAS)





VAS to children after 6 months of age reduces

overall mortality by 24%

Cochrane meta-analysis, Imdad 2010



BMJ, August 2011

Implications for future research

The effectiveness of vitamin A supplementation is so well established that further placebo controlled studies are not required.





Vitamin A supplementation (VAS)



DEVTA trial: VAS or placebo to 1,000,000 children



No benefit of VAS: MRR: 0.96 (95%CI: 0.88-1.05)



Vitamin A supplementation (VAS)



Ghana VAST: MRR 0.81 (0.68-0.98)





Ghana VAST, reanalysis



The VAS effect differed in children with (N=6,656) and without (N=5,066) a health card (P=0.06) – due to differential effect of VAS in girls (P<0.01)









Setting

- Two VAS campaigns in urban Guinea-Bissau
 - December 2007
 - June 2008
- Prospective follow up of all children 6-36 months





Methods



Methods



Methods









Methods -2007



Methods -2007



Methods -2007









Results - background

		2007		2008			
		VAS	No VAS	P for diff. dist.	VAS	No VAS	P for diff. dist.
Nun	nber	3009	2191		3520	1683	
Sex	(Male)¤	1514 (50)	1096 (50)	0.84	1780 (51)	861 (51)	0.69
Age at campaign / months (median (interquartile range))		20.0 (12.5-27.1)	19.6 (12.5-26.3)	0.10	19.5 (12.7-27.4)	19.5 (12.6-27.2)	0.47
Vac	cine information						
See	n vaccination card¤	2700 (90)	1765 (81)	<0.001	3088 (88)	1259 (75)	<0.001
Las	t vaccine at the time of th	e campaign					
	BCG / unvaccinated	13 (0)	11 (1)	0.05	18 (1)	15 (1)	0.23
	OPV	606 (22)	352 (20)		760 (25)	306 (24)	
	MV	927 (34)	604 (34)		923 (30)	361 (29)	
	DTP	1095 (41)	736 (42)		1311 (42)	540 (43)	
	DTP+MV	62 (2)	62 (4)		76 (2)	37 (3)	





Results - background

		2007			2008					
	VAS	No VAS	P for diff. dist.	VAS	No VAS	P for diff. dist.				
Socio-economic background										
Electricity in the household			0.91			0.09				
Yes	854 (28)	634 (29)		1000 (28)	519 (31)					
No	2130 (71)	1539 (70)		2507 (71)	1154 (69)					
No information	25 (1)	18 (1)		13 (0)	10 (1)					
Bathroom			0.72			0.06				
Inside the house	417 (14)	322 (15)		495 (14)	276 (16)					
Outside the house	2560 (85)	1850 (84)		3007 (85)	1395 (83)					
None	1 (0)	1 (0)		0 (0)	1 (0)					
No information	31 (1)	18 (1)		18 (1)	11 (1)					
Type of roofing			0.50			0.26				
Straw	122 (4)	75 (3)		119 (3)	48 (3)					
Hard	2862 (95)	2098 (96)		3389 (96)	1625 (97)					
No information	25 (1)	18 (1)		12 (0)	10 (1)	so de a				





Results - background

		2007					
		VAS	No VAS	P for diff. dist.	VAS	No VAS	P for diff. dist.
Soc	io-economic background		-	-			
Mat	ernal education			0.003			<0.001
	Any	1988 (66)	1354 (62)		2386 (68)	1000 (59)	
	None	791 (26)	627 (29)		837 (24)	497 (30)	
	No information	230 (8)	210 (10)		297 (8)	186 (11)	
Ethr	nic group			<0.001			<0.001
	Pepel	985 (33)	634 (29)		1067 (30)	456 (27)	
	Fula/Mandinga	602 (20)	619 (28)		759 (22)	534 (32)	
	Manjaco/Mancanha	627 (21)	380 (17)		703 (20)	269 (16)	
	Other	795 (26)	558 (25)		991 (28)	424 (25)	





Results – Mortality

		Adjusted Mortality Rate Ratio (95% CI)*					
	Rate per 1000 PYRS (Deaths / PYRS)	All	Boys	Girls			
All							
VAS	15.3 (44 / 2873)	0.78 (0.46-1.34)	0.73 (0.37-1.43)	0.89 (0.37-2.14)			
No VAS	15.9 (20 / 1260)	1 (ref)	1 (ref)	1 (ref)			
No information	32.5 (8 / 227)	2.10 (0.75-5.89)	1.96 (0.59-6.57)	2.35 (0.53-10.4)			





		Adjusted Mortality Rate Ratio (95% CI)*					
	Rate per 1000 PYRS (Deaths/PYRS)	All	Boys	Girls			
2007							
VAS	4.4 (6 / 1352)	0.38 (0.13-1.10)	0.52 (0.15-1.79)	0.16 (0.02-1.59)			
No VAS	10.9 (8 / 731)	1 (ref)	1 (ref)	1 (ref)			
2008							
VAS	24.4 (38 / 1521)	1.02 (0.53-1.96)	0.86 (0.38-1.96)	1.32 (0.44-3.94)			
No VAS	21.7 (12 / 529)	1 (ref)	1 (ref)	1 (ref)			
P for same effect of VAS in 2007 and 2009		0.12	0.50	0.11			





	Campaign information	Rate / 1000 PYRS (Deaths/PYRS)	MRR (95%CI)*	Boys: MRR (95%CI)	Girls: MRR (95%CI)
Last receiv	ed vaccine b	efore the campaig	n		
OPV	VAS	14.1 (8 / 569)			
	No VAS	0 (0 / 203)	P=0.09	P=0.05	P=0.19
MV	VAS	11.3 (10 / 882)	0.34	0.31	0.41
	No VAS	26.9 (9 / 335)	(0.14-0.85)	(0.10-0.96)	(0.09-1.85)
DTP	VAS	20.1 (21 / 1041)	1 29	1.37	1 21
	No VAS	14.5 (6 / 414)	(0.52-3.22)	(0.39-4.93)	(0.33-4.43)
DTP+ MV	VAS	16.5 (1 / 61)	0.21		
	No VAS	63.3 (2 / 32)	(0.02-2.30)	0	NA







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Test of different effect of campaign participation: MV vs OPV: p=0.02; MV vs. DTP: p=0.04



*Adjusted for sex, campaign, ethnicity and maternal education



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Discussion

- The benefit of VAS may be less than assumed
- The effect may vary with season in line with a previous study from Bissau, VAS may be beneficial in the dry season but not in the rainy season.
- The effect may vary by vaccination status.
 VAS provided after DTP did not reduce mortality.





Conclusion

The effect of VAS may depend on the vaccination profile in the population

The potential interactions between VAS and vaccines require further investigation





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Thank You!



