Meningitis Research Foundation 2021 13th International Conference Agenda

Approved for 11 CPD credits by the Federation of the Royal Colleges of Physicians of the United Kingdom (Code: 137377)

Monday 1st November (13.00-17.30), Tuesday 2nd November (13:00-17.30) & Wednesday 3rd November (9.00-12.50) time in GMT
Virtual but linking to hybrid ISSAD 2021
Shared session Wednesday 3rd November 13.30, *Group B Streptococcus: Accelerating Evidence-based Action for Every Family Everywhere*

Day 1: Monday 1st November

Time	Topic
13.00-13.10	Welcome – **Vinny Smith, CEO of Meningitis Research Foundation (MRF) and Confederation of Meningitis Organisations (CoMO)**
	Impact of meningitis, patient experience and support and aftercare
13.10-13.35	Patient experience of meningitis and septicaemia in high and low to middle income regions – **Jo Kirwin, UK member of MRF** AND **Adelaide Bortier, Ghana**
13.35-14.00	Long-term impact of meningitis– what is known now and the research challenge for the Defeating Meningitis by 2030 Roadmap – **Dr Nicoline Schiess, World Health Organization (WHO)**
14.00-14.25	What follow up care after meningitis is expected, provided, and needed in high and low to middle income settings? – **Professor Charles Newton, KEMRI Wellcome Trust**
14.25-14.40	**BREAK**
WHO Global Roadmap to Defeat Meningitis by 2030	
14.40-15.05	Implementing the Global Roadmap – how are we going to do it (including the research priorities within the global roadmap: what this means for the research community) – **Dr Marie-Pierre Preziosi, WHO**
15.05-15.30	Ending Cryptococcal Meningitis Deaths by 2030 – Strategic Framework – **Professor Nelesh Govender, National Institute of Communicable Diseases**
15.30-15.55	Defeating Paediatric Tuberculous Meningitis: Applying the WHO "Defeating Meningitis by 2030: Global Roadmap" – **Dr Robin Basu Roy, London School of Hygiene and Tropical Medicine**
15.55-16.10	**BREAK**
	Lessons and impact for meningitis in the COVID-19 era
16.10-17:00	**PANEL DISCUSSION -** Will meningitis rebound as COVID restrictions end? What needs to happen next? Moderator**: Professor Adam Finn, University of Bristol** Panellists from around the world will take part in a discussion contrasting models predicting a prolonged herd protection effect from social distancing vs the immunity gap due to reduced immunisation and reduced natural acquisition/ boosting of immunity.

	• **Professor Marco Safadi, Santa Casa de São Paulo School of Medical Sciences, Brazil** – Findings from the IRIS initiative, with a focus on Brazil, and commenting on the situation in Latin America.
	• **Professor Shabir Madhi**, **University of the Witwatersrand, Johannesburg** – African perspective on COVID impact
	• **Dr Caroline Trotter, University of Cambridge** – Models of COVID impact on meningitis infections:
	  ○ The relative predicted effect of social distancing on carriage vs lower vaccine coverage on IMD and IPD in the UK, and
	  ○ The potential impact of MenAfriVac disruption on meningococcal A infection
	• **Professor Muhamed-Kheir Taha, Institut Pasteur, Paris–** The immunity gap in childhood due to the COVID-19 pandemic.
	
	Audience voting at the beginning and end on whether meningitis infections will rebound as Covid restrictions end

17:00-17:25	Using COVID vaccine technology to make faster, cheaper meningitis vaccines, and regulatory lessons from COVID- **Professor Sir Andrew Pollard, University of Oxford**

DAY 2: Tuesday 2nd November

Improving data for meningitis: recognition, diagnosis and surveillance - closing the ascertainment gap between people affected and laboratory surveillance	
13.00-13.25	Advocacy and awareness raising activity in the Defeating Meningitis Roadmap – TBC
13.25-13.50	Challenges of improving laboratory confirmation of bacterial meningitis by increasing proportion of patients who have lumbar puncture and viable samples reaching laboratories – TBC
13.50-14.15	Developing and deploying RDTs for the main meningitis pathogens: where we are now and what's happening next - **Dr Xin Wang, Centres for Disease Control and Prevention**
14.15-14.40	Distinguishing bacterial infections using a host signature: PERFORM- DIAMONDS studies – **Dr Jethro Herberg, Imperial College London**
14.40-15.05	Discriminatory host transcripts in the blood of adults with bacterial meningitis: TRIM study – **Dr Mike Griffiths, University of Liverpool**
15.05-15.20	**BREAK**
Genomics: the frontier of learning	
15.20-15.45	Pneumococcal genomics, vaccines and AMR – **Dr William Hanage, Harvard T. H. Chan School of Public Health**
15.45-16.10	Hypervirulence and Group B Streptococcal Infection - TBC
16.10-16.30	How this will be made accessible through the Global Meningitis Genome Partnership – **Professor Robert Heyderman, University College London**
16.30-16.40	**BREAK**
16.40-17:30	**POSTER PRESENTATIONS – THREE PARALLEL SESSIONS**

DAY 3: Wednesday 3rd November

Prevention and epidemic control	
9.00-9:10 .	Latest results on impact of Bexsero on invasive IMD and gonorrhoea in S Australian routine programme and update on Australian studies of impact of Bexsero on carriage of *Neisseria meningitidis* and *Neisseria gonorrhoeae* in teenagers – **Professor Helen Marshall, University of Adelaide**
9:10-10.00 Combined with the above session	**PANEL DISCUSSION:** Potential for adolescent MenB immunisation programmes to control meningococcal B infection and gonorrhoea. Moderator: **Associate Professor Matthew Snape, University of Oxford** • **Professor Federico Martinón Torres, Hospital Clínico Universitario de Santiago de Compostela, Spain** -Case for teenage MenB prevention • TBC– Case for gonococcal prevention • **Dr Sami Gottlieb, WHO** – WHO perspective • **Dr Hannah Christensen, University of Bristol** – Health economics perspective • **Professor Helen Marshall**, **University of Adelaide**– Follow up/Q&A from preceding talk Including live discussion, audience Q&A Audience voting at the beginning and the end on 'Should we introduce Bexsero into teenage immunisation programmes now?'
10:00-10:10	Potential use of MenABCWY vaccines - **Associate Professor Matthew Snape, University of Oxford**
10:10-10:20	**BREAK**
10.20-10.45	Conclusions of P-SERENADE project- implications for pneumococcal vaccine policy and what is happening next – **Dr Maria Knoll, Johns Hopkins Bloomberg School of Public Health**
10.45-11.45	**PANEL DISCUSSION:** Optimal schedules for control of pneumococcal infection in countries with high and low carriage **Moderator –** TBC Moderated panel discussion on policy issue: switch from 3+0 to 2+1, will it make a difference to control? Is it a necessary step to establish herd protection? • **Professor Lay-Myint Yoshida, Nagasaki University, Japan** AND **Prof Shrijana Shrestha, Patan Academy of Health Sciences, Nepal** – What is the best PCV schedule for LMIC? results from trials in Asian countries • **Professor David Goldblatt, UCL** – What we have learned from the UK on 1+1 vs 2+1 • **Professor Anthony Scott, KEMRI Wellcome Trust** – Role of catch up campaigns • **Professor Stefan Flasche, LSHTM** – Caveats for PCV schedules that rely on herd effects in countries with intensive transmission • **Dr Brenda Kwambana Adams, UCL** – Prevention of ST-1 pneumococcal outbreaks in the meningitis belt Including live discussion, Q&A, audience voting
11:45-12:00	**BREAK**
12:00-12:45	**PANEL DISCUSSION** How should MenACWYX vaccine be used in the meningitis belt? Is more research needed to inform strategy?

	Moderator: **Professor James Stuart, WHO and University of Bristol** • **Professor Samba Sow, Center for Vaccine Development, Mali** – The importance of MenACWYX vaccine for meningitis belt countries • **Dr Lee Hampton, Gavi,the Vaccine Alliance, Geneva** – GAVI view on the use of MenACWYX in the meningitis belt • **Dr Caroline Trotter, University of Cambridge** – Which age groups should be targeted for mass vaccination campaigns? Results from modelling studies • **Dr Matt Coldiron, Epicentre / Médecins Sans Frontières** – The need for a cluster randomised trial on impact on carriage to inform vaccination strategy Including live discussion, audience Q&A, and voting on 2 questions: 1. Once licensed and WHO prequalified, MenACWYX vaccine should immediately replace MenA in EPI programmes A. without any mass campaigns B. with mass campaigns e.g. ages 2-19 years across the meningitis belt C. with mass campaigns e.g. ages 2-19 years but only in highest risk countries 2. A cluster-randomised trial is needed now to measure the impact of MenACWYX vaccine on carriage to support decisions on vaccination strategy A. Yes B. No
12:45-12:50	Close - **Vinny Smith, MRF and CoMO**

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