THE ASSISTANT SECRETARY OF DEFENSE

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WASHINGTON, DC 20301-1200

APR 15 2008

HEALTH AFFAIRS

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (M&RA)
ASSISTANT SECRETARY OF THE NAVY (M&RA)
ASSISTANT SECRETARY OF THE AIR FORCE (M&RA)

SUBJECT: Department of Defense Participation in ACAM2000™ Smallpox Vaccine Post-Marketing Research Requirements

I endorse efforts between the vaccine manufacturer Acambis and the Department of Defense (DoD) for participation in ACAM2000™ smallpox vaccine post-marketing research requirements, and request that the Services support the efforts in meeting this goal. Support and participation in these studies has national importance. ACAM2000™ will shortly become the only U.S. Food and Drug Administration (FDA) licensed smallpox vaccine in the U.S. It represents a significant piece of our national bio-preparedness strategy. This vaccine is stored in the Centers for Disease Control and Prevention's Strategic National Stockpile and offers the advantage of having a continuous manufacturing base of supply. The vaccine comes from the same New York City Board of Health strain as Dryvax® and is created using contemporary vaccine manufacturing practices. Phase 3 pre-licensure trials have shown its side effect profile is similar to the Dryvax® smallpox vaccine.

The FDA identified five post-marketing requirements that must be met by Acambis in order to ensure the continued licensure of ACAM2000™. These combined requirements form a Risk Management Action Plan (RiskMap). The individual elements of this RiskMap that Acambis is responsible for completing are:

(a) Conduct a Phase 4 prospective cohort study in the military population receiving the vaccine. Study groups will include approximately 15,000 ACAM2000™ vaccinees and an appropriately sized control group.

(b) Implement an enhanced surveillance program to ascertain at least 75 percent of symptomatic cases of myocarditis and pericarditis after vaccination with ACAM2000™.

(c) Implement a myo/pericarditis registry with cases identified from routine surveillance, the Phase 4 study, and the enhanced surveillance program.

(d) Submit a protocol describing the methods to be used to annually evaluate the RiskMap for ACAM2000™.

(e) Conduct a study to examine how effectively DoD adheres to its own screening procedures to identify potential vaccinees that have risk factors for more serious adverse events after vaccination, and therefore should not be vaccinated.

The Military Vaccine Agency will coordinate DoD efforts to meet these requirements with the manufacturer and the FDA. The Naval Health Research Center will take the lead in managing the cornerstone of the RiskMap, the Phase 4 prospective cohort study. The Army Forces Health Surveillance Center will participate in the surveillance aspects of the RiskMap by generating routine reports of potential adverse events and assisting with the identification of myo/pericarditis cases following vaccination. The Vaccine Healthcare Centers will administer an enhanced DoD myo/pericarditis registry that will function as a national registry. The U.S. Army Medical Research and Materiel Command Office of Research Protections Office, Human Research Protection Office, will evaluate the protocols to ensure that DoD requirements are addressed and assist in coordination with the various sites to encourage economies in the Institutional Review Board review process.

Three conditions are imperative for DoD's collaboration and participation in this RiskMap. Studies will be conducted in full compliance with all human research subject protection rules and FDA regulations. Acambis will be responsible for funding the RiskMap activities that are beyond the current mission requirements of participating DoD organizations. DoD participation will not adversely affect the primary mission of the volunteers who participate.

Preserving the health and safety of our Service members is our top priority. Through participation with the manufacturer in these post-marketing requirements, DoD can better understand the safety profile of ACAM2000™. This will in turn enhance the effectiveness of the DoD's Smallpox Vaccination Program and the national preparedness posture. My point of contact for this matter is Colonel Keith Vesely, who can be reached at (703) 845-3310 or Keith.Vesely@tma.osd.mil.

S. Ward Casscells, MD

cc:
Commandant of the U.S. Coast Guard
Surgeon General of the Army
Surgeon General of the Navy
Surgeon General of the Air Force
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