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# Field efficacy trials *versus* laboratory challenge experiments

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# Evidence-based veterinary medicine (EBVM)

- *EBVM is the conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients*
- ABCD uses a classification of the levels of evidence in veterinary medicine:

- ✦ **EBM grade I** This is the best evidence, comprising data obtained from properly designed, randomised controlled clinical trials in the target species
- ✦ **EBM grade II** Data obtained from properly designed, randomised controlled studies in the target species with spontaneous disease in an experimental setting;
- ✦ **EBM grade III** Data based on non-randomised clinical trials, multiple case series, other experimental studies, and dramatic results from uncontrolled studies;
- ✦ **EBM grade IV** Expert opinion, case reports, studies in other species, pathophysiological justification. **If no grade is specified, the EBM level is grade IV.**

**EBVM ranks controlled field trials (grade 1) better than experimental studies (grade 2)**

# EBVM *versus* Koch's postulates paradigm

- Laboratory challenge trial principle is based on the paradigm of the 3 Koch's postulates
- However the field situation is obviously more complex
- Proposal (Sultana et al., 2017) :

Koch's hypothesis: « 1 pathogen + 1 host = disease »

is therefore better formulated as:

« X (pathogen/s) + Y (local milieu) +  
Z (individual host susceptibility) = disease »

The laboratory challenge experiment could not be well representative of the complex field situation

# Factors influencing the efficacy of veterinary vaccines

- Variability of pathogen
  - Low variability: the challenge strain fits well
  - High variability: the challenge strain *might* be poorly representative of the pathogen population
  - Multiple challenge for multifactorial diseases
- Diversity of target animal
  - Young – adult - senior animal
  - Healthy – chronic illness
  - Immunocompetent – immunocompromised
- Density and size of the target population (epidemiological diversity)
  - Single household vs multiple household animals
  - Production animals vs companion animals

The laboratory challenge experiment explores only few of these factors

# The « challenge » of the field trial

- Reflection of a complex « natural » situation (is it true?)  
(Veterinary Vaccinology, Pastoret et al., 1997, Elsevier, p.165)
- Quality (GCP)
  - Randomisation and blinding
  - Controlled studies
    - Negative vs positive controls (in the case of existing vaccine)
  - Sample quality
- Waiting for the natural challenge
- Right cohort size
  - Allowing enough precision (reduction of prevalence/incidence)
  - « N » may be high (especially with « positive » controls)
- Statistical significance depending on
  - Significant decrease in prevalence/incidence in vaccinated group vs control group

The outcomes of field efficacy trials are often disappointing

# How to reconcile the accurate measurement of vaccine efficacy with the estimate of its efficacy in field conditions?

- Good challenge model
  - Representative challenge strain / multiple challenge
  - Reproduction of the disease
  - Pathogen excretion / other measurable parameters (specific immune response)
  - Possibility of OOI and DOI studies
- Surrogates of field trials
  - Epidemiological modelling
  - Meta-analyses
  - Proposal: PEUR : **Periodic Efficacy Update reports**
    - Reflecting the true use of the vaccine in the field
    - Hampered by the likelihood of natural challenge
    - Need for a scientific assessment

# In conclusion

- Importance of a precise assessment of vaccine efficacy: laboratory challenge experiment
- Importance of the investigation of the pathogen, host and environment diversity
  - But poor cost-benefit ratio of field efficacy trial
  - Try alternative ways
    - e.g. data obtained by post-autorisation surveillance (supported by epidemiological data on the incidence of the relevant pathogens)
    - Highly dependent on the quality of data