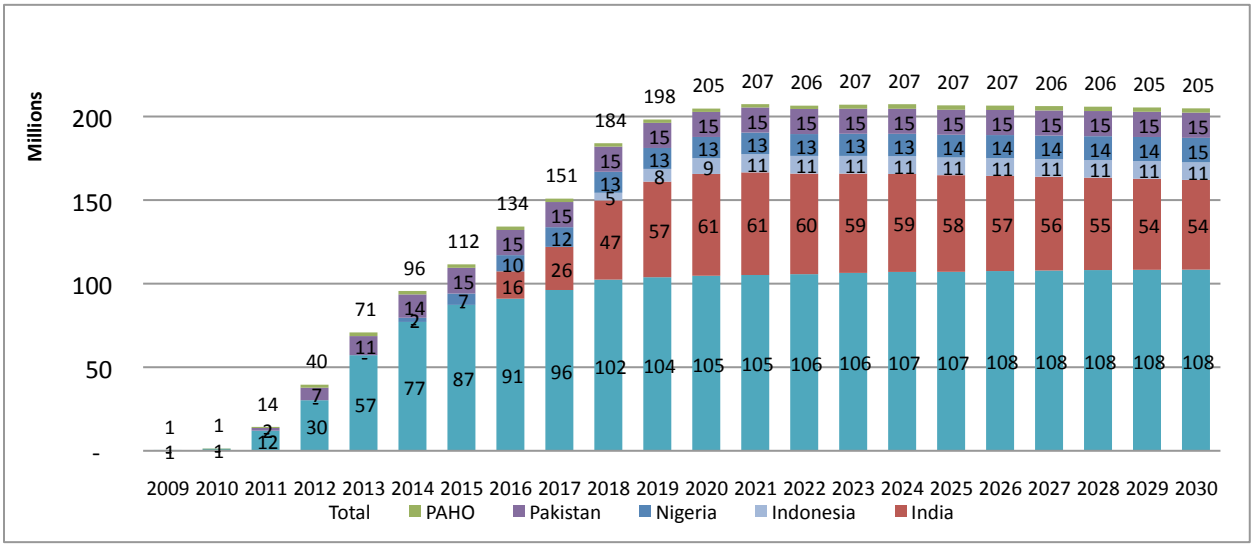
ACCELERATE VACCINE INTRODUCTION – PNEUMOCOCCAL VACCINE
Strategic Demand Forecast (Required Supply)
Version 3.0 – updated as per March 2011
Published – 11 March 2011

This version 3.0 is issued in accordance with the AVI Forecasting Standard Operating Procedure. The forecast captures all AMC-eligible demand including countries that: introduce with GAVI support, graduate from GAVI support, and are fully self-financed.

Pneumococcal Vaccine - AMC Required Supply (72 GAVI eligible countries) by country



Strategic Demand Forecast corresponds to AMC Required Supply = demand + buffer stocks + wastage

Disclaimer: Except for countries which have already applied to GAVI for support for introduction of Pneumococcal Vaccines or are in the process of doing so, this forecast reflects the best possible estimates on countries' expected time of introduction. The forecasted timeline for future introductions is not subject to approval by country representatives and, as such, does not constitute any commitment or obligation for any of the countries.

CHANGES VS. VERSION 0.1 (published in August 2009)

- **India delayed to phased introduction in 2016 financed locally beyond GAVI cap – 11 states to introduce in 2016, remaining states after 2 yrs.**
- **Indonesia loses GAVI eligibility in 2011 and is not expected to apply before graduating, locally financed introduction delayed to 2018.**

KEY ASSUMPTIONS

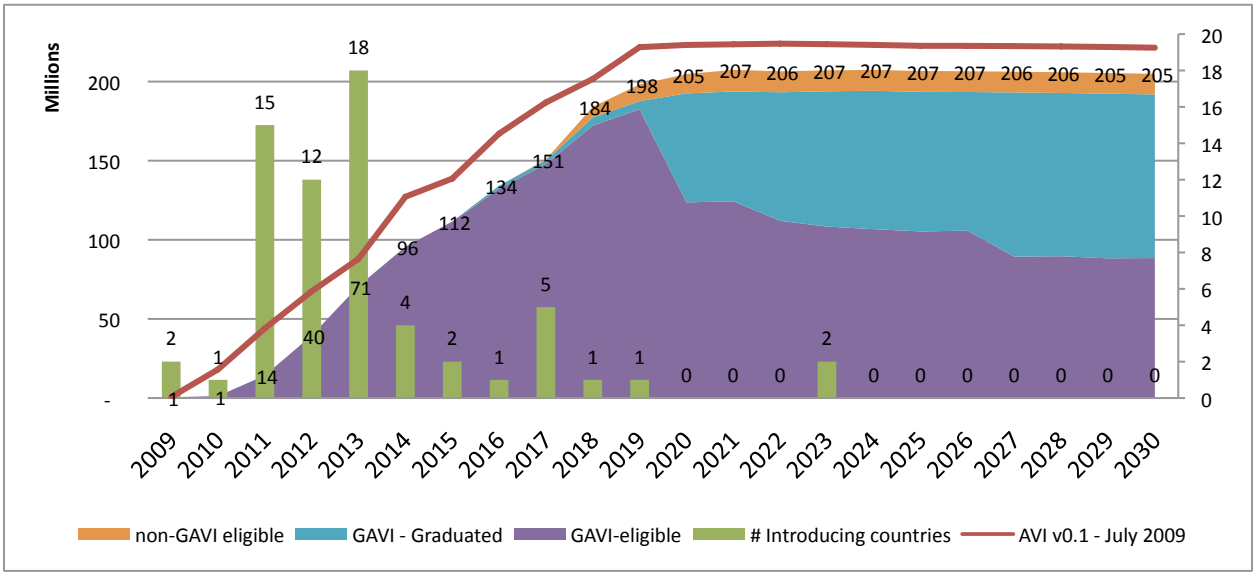
- **Available financing for the entire forecast duration for product purchase and introduction expenses; no changes in eligibility criteria; sufficient production capacity to meet demand; all prequalified products meet or exceed TPP and have suitable presentation; no impact/resolution of PAHO single price clause.**
- **Successful cold chain up scaling at central & local level in all countries where required.**
  Source: SVS sub team
- **Introduction 12 months after application; 54 countries introducing by 2015 (19 already approved; 26 applications expected in May 2011 including 5 conditionally approved and 1 resubmission).**
- **Large countries: Pakistan to introduce in second half of 2011; Nigeria to introduce in 2014; India phased introduction starting in 2016; Indonesia introduction in 2018 financed from local government.**
  Source: WHO New & Underused Vaccine Introduction (NUVI) regional calls and other input
- **Time to match reference coverage aligned with HepB/Penta analogue (Pneumo introduced with same schedule as Penta): 24 months for small countries / 36 for medium/large countries (>1 mln SI) / 48 months for very large countries (>3.5 mln SI)**

Source: SVS sub team

- **PCV3 (3rd dose) coverage projected to increase up to 90%.**
  Source: SVS sub team projection based on DTP3 WHO-UNICEF Best Estimate
- **Wastage = 10% based on WHO guidance (to reflect an unknown mix of presentations ranging from 1 to >2 doses per vial) – for countries introducing Prevnar13 5% wastage assumed; Buffer stocks = 25% of Δ between forecast years.**
  Source: GAVI Secretariat
- **Population, crude birth rate & infant mortality rates as per medium variant.**
  Source: 2008 UN population prospect

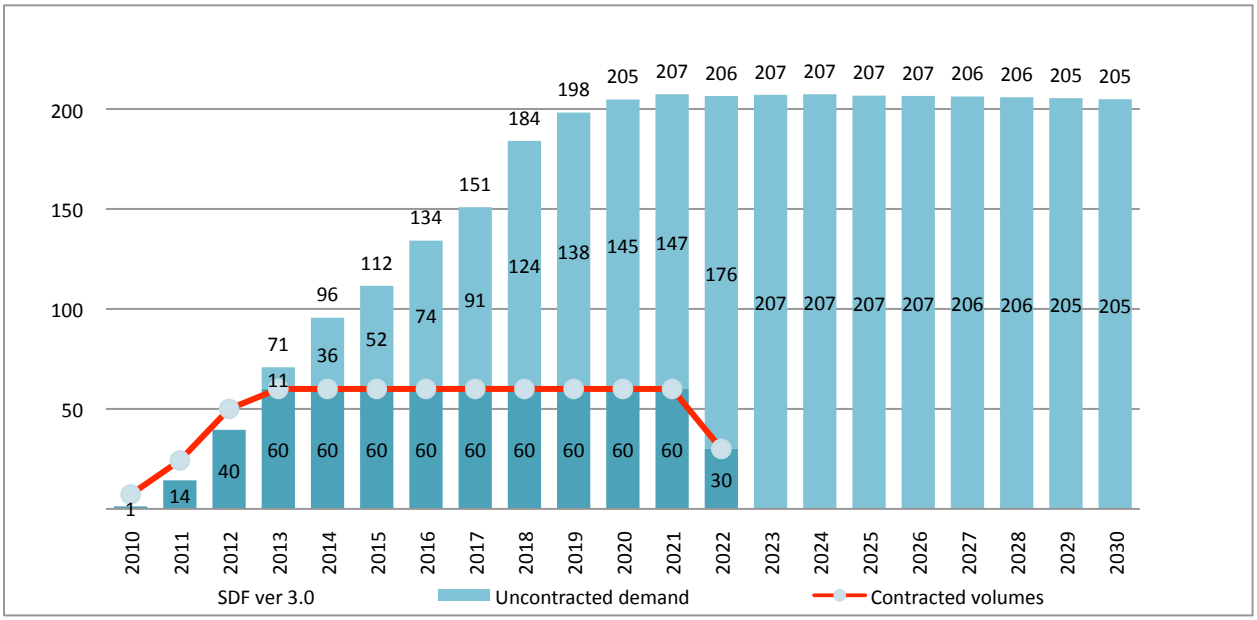
UNICEF SUPPLY DIVISION WILL ISSUE A CALL FOR OFFERS WITHIN 20 IBRD BUSINESS DAYS AFTER PUBLICATION OF THIS FORECAST ON THE AMC WEBSITE.

Pneumococcal Vaccine - Required Supply (72 GAVI Eligible Countries) by type of demand



Note – Rwanda and Gambia introduced in 2009 benefitting from donated product. Both countries will start receiving pneumococcal vaccines through the AMC from 2011.

Pneumococcal Vaccine – Estimated Supply of AMC Eligible Vaccines



Note: The Estimated Supply is based on the AMC Supply Agreements signed in March 2010.
http://www.vaccineamc.org/supply_agreements.html

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