27es JNI 2026 PARIS
et la région Ile de France Palais des Congrès
Journées Nationales d'Infectiologie
du jeudi 18 juin au samedi 20 juin 2026
Journée Nationale de Formation des Paramédicaux en Infectiologie
Vendredi 19 juin 2026

Préparation, formation et l'implication communautaire pour une campagne de vaccination de masse: expérience en vie réelle

Preparation, training, and community engagement for a mass vaccination campaign: Real-life experience

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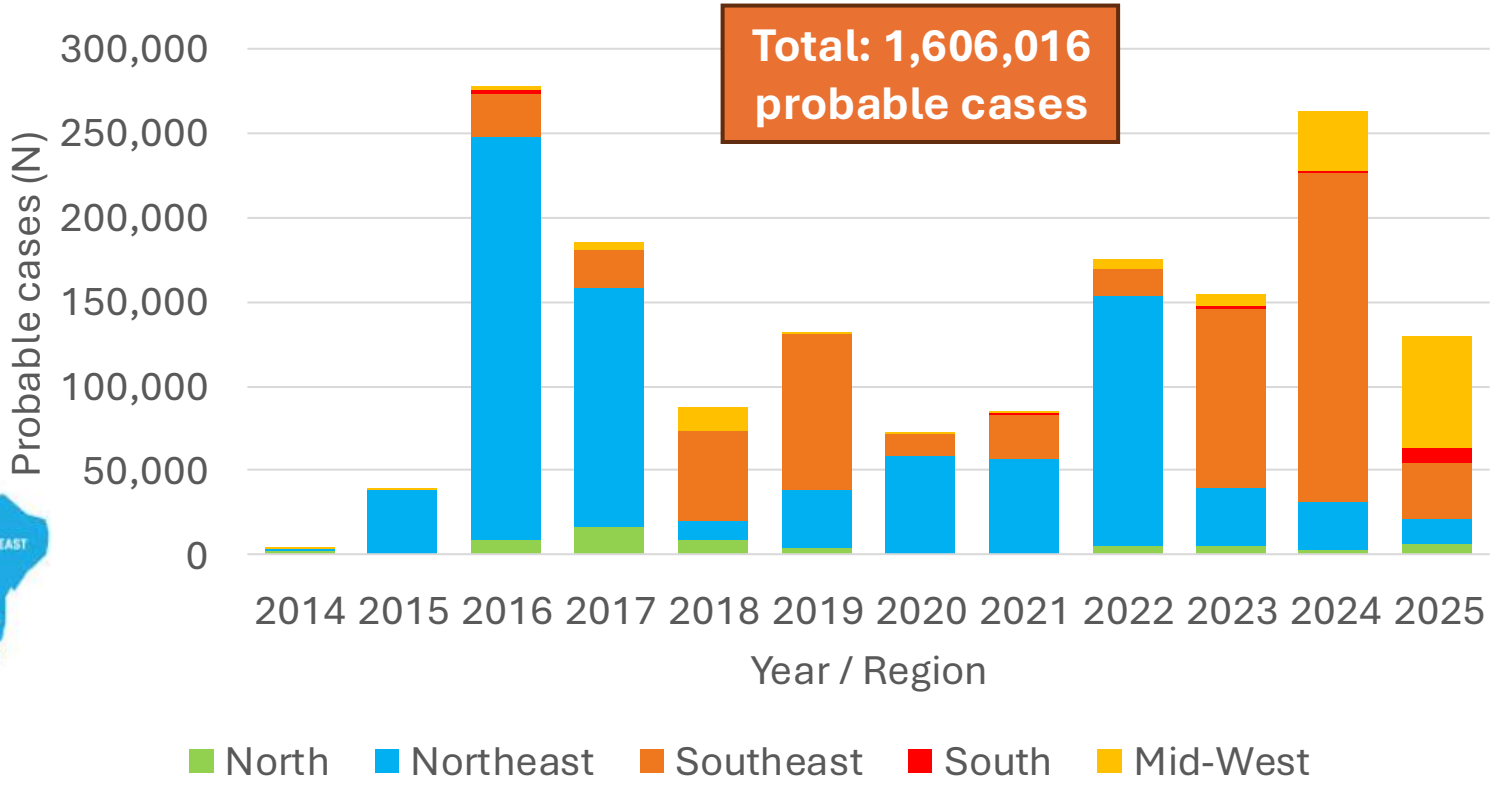
FR-CH-2600007

Conflict of Interest Disclosure (2014–2026)

Employee: Fundação Butantan / Instituto Butantan

Chikungunya - Time series, 2014-2025, Brazil



Sources: https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/c/chikungunya/situacao-epidemiologica/serie-historica-casos-provaveis-de-chikungunya-2014-2023/view
https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/a/aedes-aegypti/monitoramento-das-arboviroses

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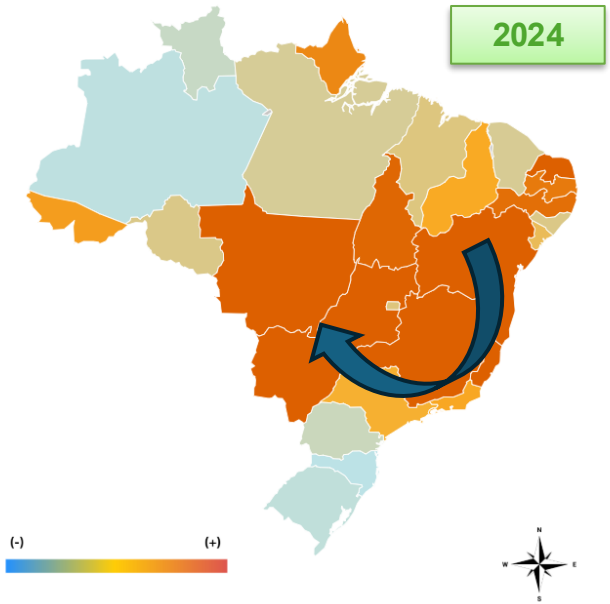
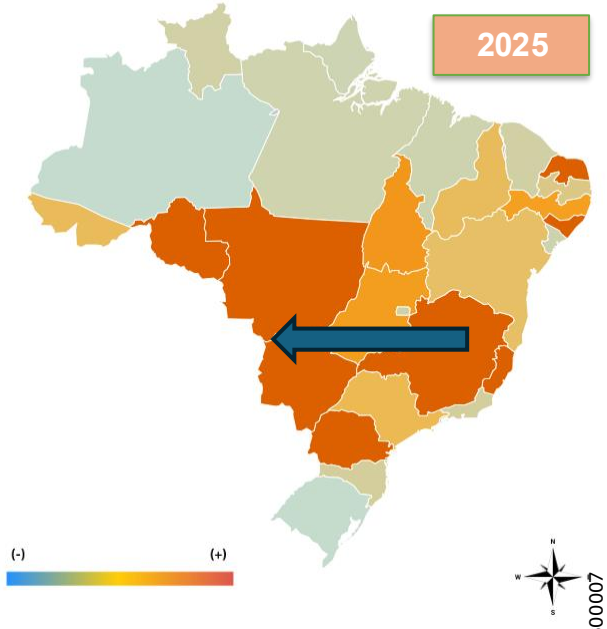
Chikungunya - Geographic distribution, 2023-2025, Brazil

Probable cases: 158,060
Incid. rate: 74.7/100k inhab.

Probable cases: 263,502
Incid. rate: 124.0/100k inhab.



Probable cases: 129,311
Incid. rate: 60.8/100k inhab.



Source: Painel de Monitoramento das Arboviroses – Ministério da Saúde, Brasil. https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/a/aedes-aegypti/monitoramento-das-arboviroses. Access: Feb/2026

Media Impact & Public Health Emergency (2024)

agência Brasil

CULTURA DIREITOS HUMANOS ECONOMIA EDUCAÇÃO ESPORTES GERAL INTERNACIONAL JUSTIÇA MEIO AMBIENTE

Saúde

Brasil tem 254 mil casos de chikungunya; doença matou 161 este ano

Maioria das infecções foi registrada entre mulheres (60%)

MENU ASSINE

FOLHA DE S.PAULO 105

saúde > equilíbrio todas ciência cotidiano

Oferta Especial: R$1,90 no 1º mês

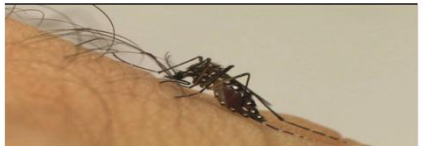
R7 MENU | BRASÍLIA CASA DO PATRÃO ENTRETÉ ESPORTES JR 24H RECORD RECORD NEWS

Casos de chikungunya disparam 42% em meio à epidemia de dengue

Em janeiro de 2024, o governo registrou 29 mil casos prováveis de chikungunya e 4 mortes; 30 óbitos estão em fase de investigação

CIDADES | Hellen Leite, do R7, em Brasília
18/02/2024 - 02H00 (ATUALIZADO EM 19/04/2024 - 21H55)

A+ A-



Os casos de chikungunya no Brasil cresceram 42% em janeiro de 2024, em comparação com o mesmo período do ano passado. O aumento dos casos ocorre no momento em que o país enfrenta uma epidemia de dengue, com 75 mortes pela doença registrados do início do ano até esta quinta-feira (15).

Conselho Federal de Farmácia

Institucional Comunicação Farmacêutico Fale com o CFF Ouv

Notícias Gerais

DENGUE · MUDANÇA CLIMÁTICA

Chikungunya matou mais até agosto deste ano do que em todo 2023, alerta

JNI 2026, PARIS

Com 102 mortes, chikungunya tem letalidade maior que dengue no Brasil

Informação foi divulgada pelo Ministério da Saúde

Por Ministério da Saúde 15/05/2024

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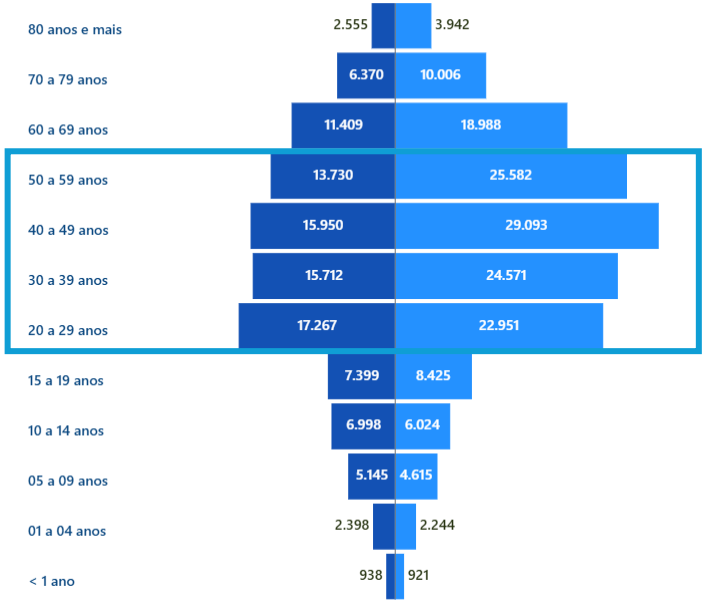
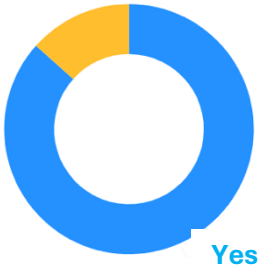
Cases distribution by age group and clinical outcomes (Epidemic year, 2024, Brazil)

Cases by age group and gender

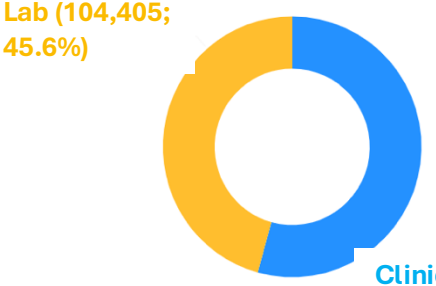


40% Male **60% Female**

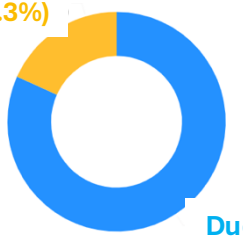
Confirmed cases



Confirmation criteria



Deaths (n=301)



Source: Painel de Monitoramento das Arboviroses – Ministério da Saúde, Brasil. https://www.gov.br/saude/pt-br/assuntos/saude-de-a-a-z/a/aedes-aegypti/monitoramento-das-arboviroses

Pilot Vaccination Strategy adapted to Product Profile

- **Platform:** Live-attenuated virus (LAV)
- **Regimen:** Single-dose intramuscular (IM) injection
- **Presentation:** Lyophilized active viral powder vial + pre-filled diluent syringe
- **Storage:** Controlled cold chain (+2°C to +8°C)

Source: IXCHIQ label, ANVISA. Published on 04/Feb/2026. https://consultas.anvisa.gov.br/#/bulario/detalhe/3693633?numeroRegistro=122340056

Regulatory Approvals and Requirements

2022/ 2023

- **Regulatory requirements (e.g. EMA) –** Post-marketing requirement for accelerated approval
- Agreement to perform a Pilot Vaccination Strategy (PVS) to serve as the basis for post-marketing commitment studies to confirm effectiveness and to optimize description of the safety profile
- **ANVISA (Brazilian Regulatory Agency)** Formal submission initiated on Dec/2023

2024

- VALNEVA agrees to donate up to ~500k doses of IXCHIQ to Instituto Butantan (IB) to implement vaccination in Brazil, a country with CHIKV transmission.
- Strategic partnership with the Ministry of Health (MoH): co-design of the Pilot Vaccination Strategy (PVS)

2025

ANVISA - Regulatory approval – April/25: ≥ 18 Years of age

2026

ANVISA updates the vaccine label

- Target age restricted: 18 to 59 years old
- Contraindications: ≥ 2 comorbidities or 1 poorly controlled

Pilot Vaccination Strategy (PVS) - Site Selection Criteria

- **1st Wave Selection (Proactive Approach — 2025):**
  - **Demographics:** Population size between 50,000 and 200,000 inhabitants.
  - **Epidemiology:** High historical CHIKV circulation with imminent outbreak risk.
  - **Logistics:** Established local cold chain storage and distribution capacity.
  - **Operations:** Demonstrated capability for rapid, short-term campaign deployment.
  - **Surveillance:** Commitment to enhanced case tracking and active pharmacovigilance.

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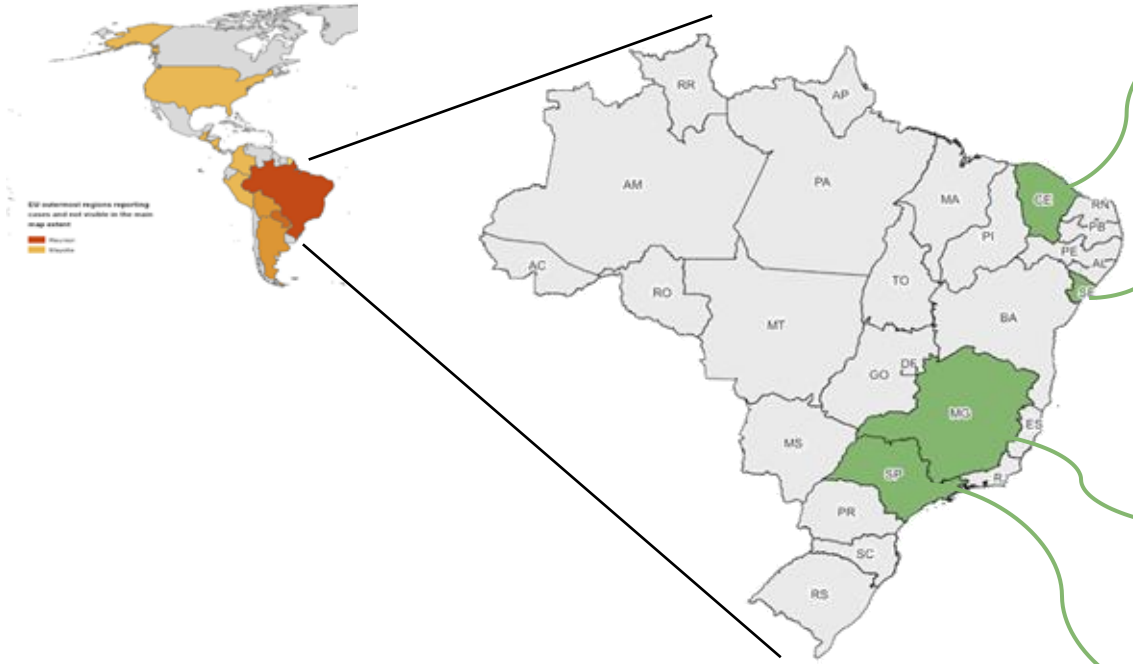
1st wave: 10 selected municipalities, 4 states, 2 geographic regions



Ceará Stat
1. [illegible]
2. [illegible]

Unable to participate due to a severe concurrent Influenza A outbreak

Sergipe State – Northeast
3. Simão Dias
4. Barra dos Coqueiros
5. Lagarto

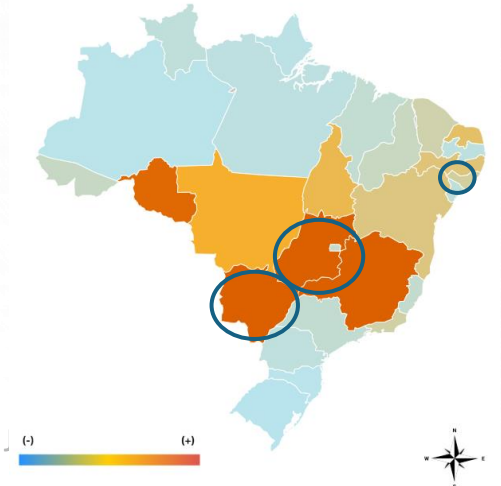
Minas Gerais State - Southeast
6. Santa Luzia
7. Sabará
8. Sete Lagoas
9. Congonhas

São Paulo State – Southeast
10. Mirassol

Pilot Vaccination Strategy (PVS) - Expansion phase

2nd & 3rd Waves Selection (Reactive Approach — 2026):

- **Trigger:** Active CHIKV outbreak with high incidence and high laboratory confirmation rates.
- **Scale-up:** 13 additional municipalities across 3 new states* (MS, GO, AL) and 1 new geographic region (Midwest).



2nd wave (end of Mar/April)	3rd wave (April/May/June)
Mato Grosso do Sul (MS)*: Dourados and Itaporã	**MS**: Douradina, Sete Quedas, Amambaí, Batayporã
Goiás (GO)*: Caldas Novas	**Alagoas (AL)*:** Anadia, Olho D'agua das Flores
Minas Gerais (MG): Uberlândia and Araguari	**SP**: São José do Rio Preto
São Paulo (SP): Bady Bassitt	

* New states

Pilot Vaccination Strategy (PVS) – Core Pillars

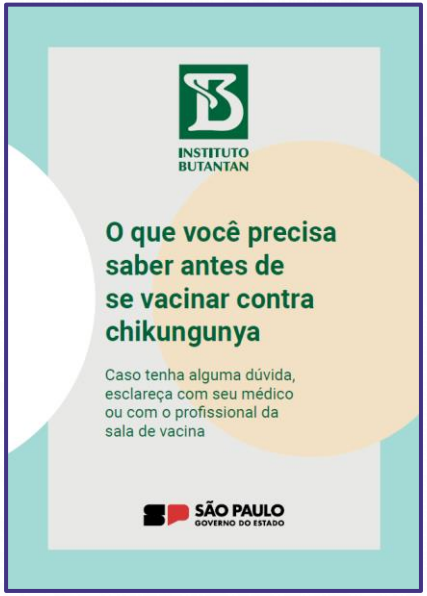
- **Target Population:** Adults aged 18–59 years (strict adherence to label indications).
- **Logistics:** MoH cold chain deployment from national depot to municipal level.
- **CHIKV Surveillance Enhancement:**
  - Highly sensitive case definition (fever + arthralgia or arthritis).
  - Mandatory sample collection for RT-PCR, even during outbreaks.
  - Improved data quality across epidemiological and laboratory registries.
- **Safety Monitoring:** Sentinel hospitals established per municipality for SAE and AESI detection.

PVS – Capacity Building & Training

- **Local immunization, surveillance and lab teams' training**
  - Microplanning – routine and extramural vaccination activities
  - Logistics (cold chain) – delivery and storage temperature
  - Pharmacovigilance – routine (passive) and active approaches
  - CHIK surveillance (epi and lab sectors)
- **In-Person Sessions** (Aug–Sept 2025): **10** trainings | **585** healthcare professionals trained.
- **Virtual Sessions** (Jan–May 2026): **15** trainings | **538** professionals trained | **224** immunization rooms certified.
- **Sustainability**: Continuous, on-demand training framework established.

PVS – Communication Strategy

❖ Communication materials customized per municipality

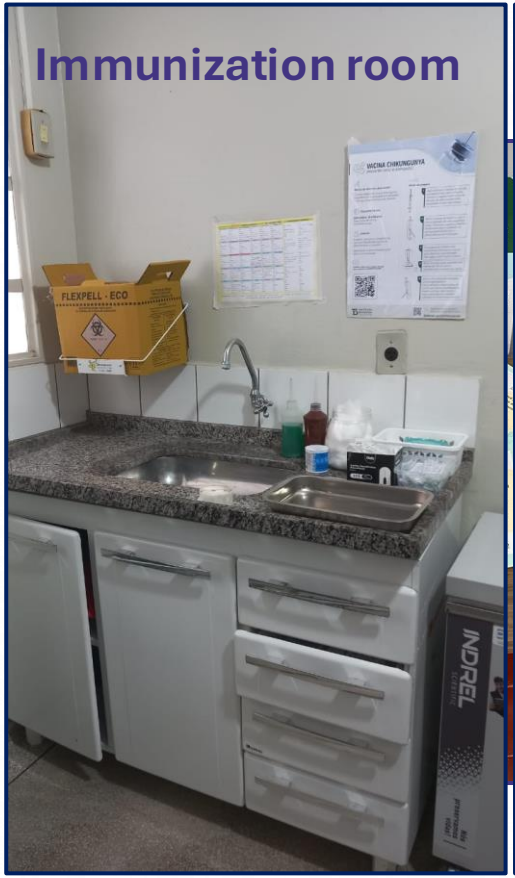


Public Engagement (Flyers): 40,000 flyers distributed to address vaccine hesitancy and outline benefits

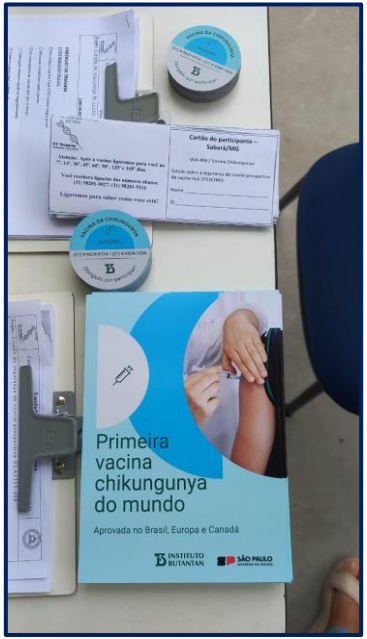
Clinical Guidance (Posters): 1,170 posters placed inside immunization rooms to guide healthcare staff

PVS – Communication Strategy in Practice

Health Units Entrances



Immunization room entrances



Source: Personal archives

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PVS – Communication Preparedness

- **Institutional Voice:** Designated, pre-defined spokesperson per participating municipality.
- **Governance**: Standardization of communication content prepared and customized for each municipality by the Butantan Communication team
- **Multi-Channel Media Mix**:
  - Digital: Targeted campaigns on social platforms (Instagram, Facebook).
  - Traditional: Tailored audio jingles developed specifically for local sound cars.
  - Public Relations: Official press releases coordinated with regional journalism.
- **Community Engagement**: Public mobilization driven strictly through validated official media.

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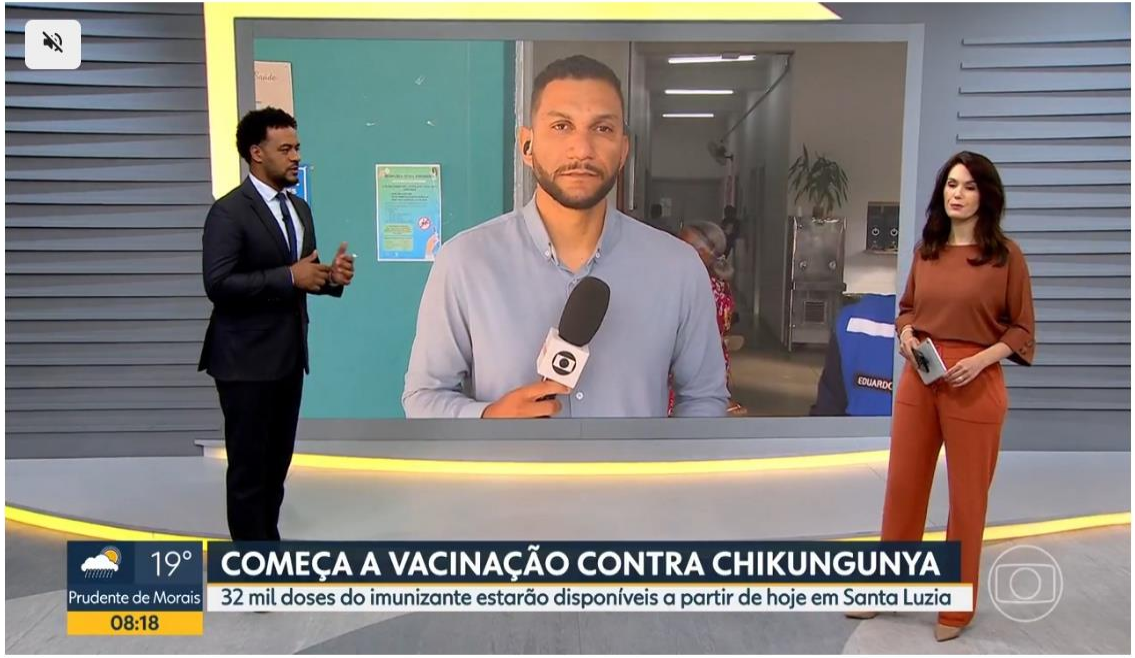
PVS – Community Engagement – Official Media

Official websites

MENU g1 MINAS GERAIS BUSC



Official social media

TV News & websites

MG começa a aplicar vacina contra chikungunya desenvolvida pelo Instituto Butantan

Em 2025, o país teve quase 130 mil casos prováveis de chikungunya e 121 mortes. Em 2026, já são mais de 8 mil casos e uma morte confirmada.

Por Jornal Nacional
23/02/2026 22h50 · Atualizado há 3 meses

Minas Gerais começa a aplicar vacina contra chikungunya

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PVS – Phased Implementation & Safety Oversight

1st wave				2nd wave	3rd wave	4th wave
2nd FEB	23th FEB	11st MAR	25th MAR	April-May	May-Jun	Jun-Jul
1 mun.	3 mun.	1 mun.	2 mun.	6 mun.	8 mun.	TBD

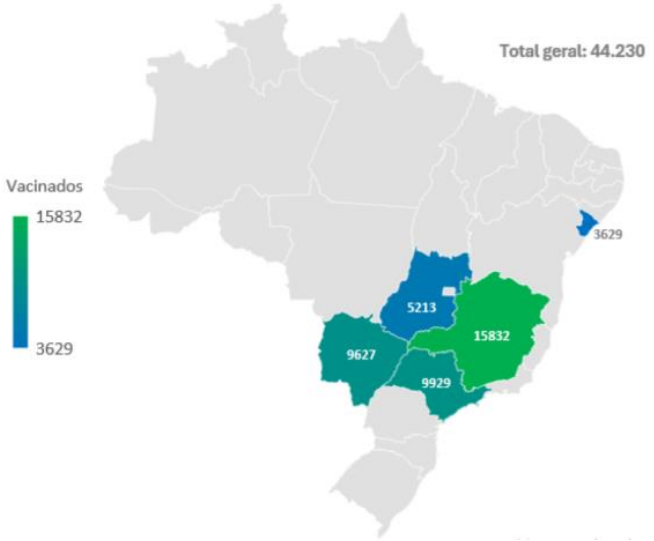
- **Oversight body**: Inter-institutional Committee for Pharmacovigilance of Vaccines and Immunobiologicals (CIFAVI).
- **Safety Checkpoints (Orange Stars):** Every expansion wave (2-4 weeks) is strictly conditioned upon a formal data review.
- **By April 28, 2026:** 5 CIFAVI meetings completed since PVS inception (~24,000 vaccinated individuals evaluated).
  - **Outcome**: no safety signals identified so far; board recommended uninterrupted deployment.

PVS – Extramural Vaccination Activities

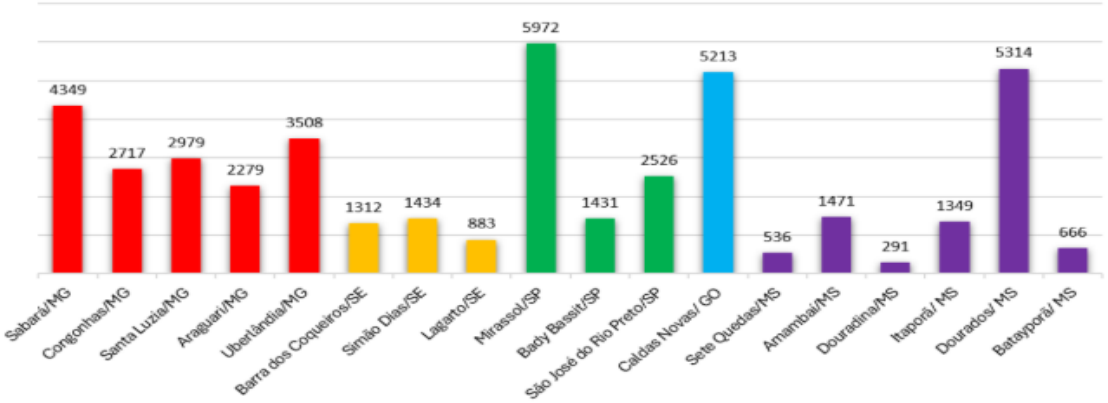
- Extramural vaccination is an important strategy for the 18-59 age group, as it is an active population with less time to go to vaccination units.

Photos provided by the local teams and edited by AI to conceal the individuals' identities.

PVS – Implementation Status



- In total, ~220k doses were delivered to the MoH for the PVS
- **44,230** vaccinated individuals by 5th June.
- PVS is ongoing in **18 municipalities** across **5 Brazilian states.**
- Projected scale-up to at least **21 municipalities** by June.



Source: DEMAS, MoH. Data extraction: 08June2026

PVS – Implementation Challenges

- **Low Initial Uptake:** Suboptimal adherence observed during the first 3 months of the PVS.
- **Regulatory Constraints:** Strict label restriction to healthy adults aged 18–59 without comorbidities.
- **Risk Perception Dissociation:**
  - Program launched during low seasonal CHIKV circulation (1st wave).
  - Novelty hesitancy regarding side effects required continuous, transparent communication.
- **Operational & Structural Barriers:**
  - Standard clinic hours conflicted with working and student cohorts.
  - Concurrent influenza and dengue campaigns overwhelmed local healthcare capacity.

Conclusions and Lessons Learned

- Chikungunya remains an unpredictable endemic burden in Brazil.
- Large-scale deployment paired with enhanced pharmacovigilance ensures careful safety monitoring.
- PVS real-world strategies must remain adaptive to local infrastructure constraints.
- Close communication with regulators is paramount to generating high-quality real-world evidence.

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Merci! Thank you! Obrigada!

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