



DEPARTMENT OF DEFENSE
ARMED FORCES EPIDEMIOLOGICAL BOARD
5109 LEESBURG PIKE
FALLS CHURCH, VA 22041-3258



REPLY TO
ATTENTION OF

AFEB (15-1a) 98-3

09 January 1998

MEMORANDUM FOR THE ASSISTANT SECRETARY OF DEFENSE (HEALTH AFFAIRS)
THE SURGEON GENERAL, DEPARTMENT OF THE ARMY
THE SURGEON GENERAL, DEPARTMENT OF THE NAVY
THE SURGEON GENERAL, DEPARTMENT OF THE AIR FORCE

SUBJECT: Recommendation for a Research Study on Pneumococcal
Vaccine

1. To assess whether a single dose of the 23 valent pneumococcal polysaccharide vaccine should be recommended for routine use in military recruits, data are needed on the likely impact of the vaccine. Factors which make the pneumococcal vaccine likely to be useful in the recruit/training setting include:

- a. Documented outbreaks of pneumococcal disease in recruits (i.e. Camp Pendleton, Rangers).
- b. Data showing substantial pneumonia morbidity based on medical record review, with morbidity particularly increased during the initial recruit period. While definitive diagnosis of most pneumonias is difficult, many of these cases may be of pneumococcal etiology.
- c. A controlled vaccine trial of the pneumococcal vaccine is a way to estimate what proportion of pneumonia is preventable in recruits by use of pneumococcal vaccine, as well as the expected impact on pneumonia, sick days, and costs.
- d. Increasing antimicrobial resistance in pneumococcal isolates worldwide, including the United States, is substantially increasing the risk and cost of treating pneumococcal disease.

2. Therefore, the Infectious Disease Subcommittee, with the approval from the full Board of the AFEB, recommends that:

A CONTROLLED STUDY OF THE IMPACT OF PNEUMOCOCCAL POLYSACCHARIDE VACCINE IN RECRUITS BE UNDERTAKEN. CAREFUL ATTENTION SHOULD BE GIVEN IN DESIGNING THE STUDY TO ADDRESS POTENTIAL EFFECTS OF SEASONALITY, COINCIDENT OUTBREAKS OF OTHER RESPIRATORY DISEASES, IMPACT OF OTHER VACCINES SUCH AS ADENOVIRUS AND INFLUENZA, AND THE POSSIBLE HERD EFFECT OF VACCINATION.

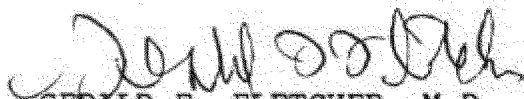
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3. This recommendation was approved by the full Board on
12 December 1997.

FOR THE ARMED FORCES EPIDEMIOLOGICAL BOARD:



GERALD F. FLETCHER, M.D.
AFEB President



VICKY L. FOGELMAN
Colonel, BSC, USAF
AFEB Executive Secretary

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