

## RTS,S MEDICAL AND SCIENTIFIC QUESTIONS & ANSWERS

**For internal use only - NOT FOR DISTRIBUTION**

### Disclaimer

The primary focus of this resource is to be an internal training tool for RTS,S malaria vaccine candidate, containing related data in the format of a Q&A for Medical Affairs personnel. Information presented here is not for external distribution.

Whilst this document can be inspirational for reactive responses to experts or medical enquiries, local regulations, the GSK Code of Practice, scientific engagement principles and/or medical information processes should be followed appropriately.

### Please Note

- For media enquiries, please refer to the specific reactive Q&A for Media Enquiries and notify the Global Pipeline Communications team before you respond to a request for an interview so that they can help you to prepare (contact person: Aoife Pauley at [aoife.x.pauley@gsk.com](mailto:aoife.x.pauley@gsk.com)).
- The vaccine RTS,S/AS01 has completed phase 3 clinical program and positive regulatory assessment from the European Medicines Agency, but is not yet authorized for marketing in any country. The RTS,S vaccine is being developed in Public Private Partnership with PATH-MVI, as an additional tool to be added to the currently available malaria preventive interventions and for implementation through the national immunization programs in malaria endemic regions in sub-Saharan African countries.
- When referencing clinical data on RTS,S any statements should be prefaced by "In this study...", to make it clear that it is too early to make any general statement on the vaccine profile outside the context of the ongoing clinical trials.
- Have you found what you were looking for? If you have any suggestions for information which should be included in this tool please contact us at the following address: Carys Calvert at [carys.calvert@gsk.com](mailto:carys.calvert@gsk.com).

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**If anti-malaria drugs have greater efficacy in preventing malaria than that seen with the RTS,S vaccine candidate, why don't we simply provide them to all children in sub-Saharan Africa?**

Prophylactic use of anti-malaria drugs is a medical practice that has been used for decades and is still widely used to protect travellers moving to malaria endemic regions. Prophylactic anti-malaria drugs are recommended by the WHO for targeted risk groups<sup>(a)</sup> such as pregnant women (Intermittent Preventive Treatment in pregnancy or IPTp) and in some circumstances infants (IPTi) or young children (Seasonal Malaria Chemoprophylaxis or SMC). Discussions are ongoing about whether this recommendation should be further extended, since there are concerns that the wider use of anti-malaria treatments may increase the risk of developing and/or spreading resistance of the malaria parasite against the drugs used for prevention.

a. [www.who.int/malaria/areas/high\\_risk\\_groups/en/index.html](http://www.who.int/malaria/areas/high_risk_groups/en/index.html)