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Supplemental Material to:

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Cost-effectiveness of vaccination against meningococcal B among Dutch infants
Crucial impact of changes in incidence

2013; 9(5)
http://dx.doi.org/10.4161/hv.23888

www.landesbioscience.com/journals/vaccines/article/23888

Supplemental Figure 1. Schematic representation of the model.

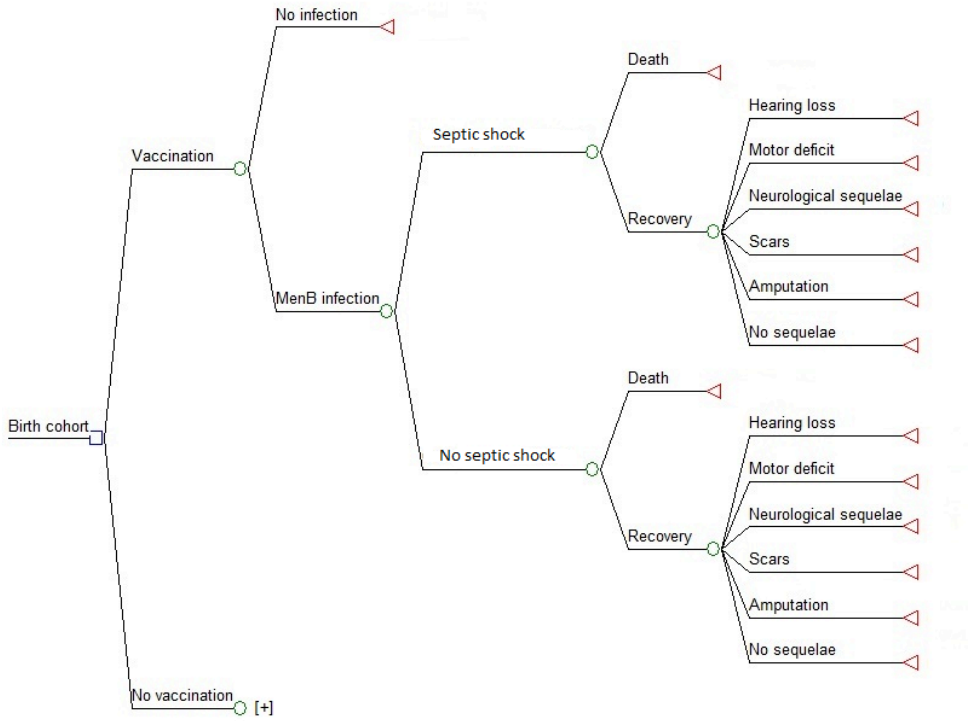

Fig. S1. Schematic representation of one cycle of the model estimating the impact of a meningococcal B vaccine. [+] indicates that this tree is similar to the tree for vaccinees, with the exception of different transition probabilities. A square denote decision branches (vaccination vs. no vaccination). Circles represent chance nodes and triangles denote end nodes.

Supplemental Figure 2. Meningococcal B disease incidences

This appendix describes the age-specific incidence of meningococcal B disease in The Netherlands. Figures S2A and S2B both show the incidence seen during 2005-2009 compared to 1990-1993, by age in years and months for those under two years, respectively. The incidence seen during 2005-2009 was used in our base-case analysis to represent the current incidence. The incidence seen during 1990-1993, representative of the high incidence during 1989-2001, was used for scenario analyses.

Figure S2A shows the meningococcal B disease incidence per 100,000 person-years. The incidence is highest in children below 1 year of age and decreases towards a relatively low incidence at 11 years of age. A second, less marked incidence peak is seen in children aged 12-19 years. This second peak was more pronounced during 1990-1993 than in 2005-2009. In Figure S2B, the meningococcal B disease incidence per 100,000 person-months for children aged 0-23 months old is shown. This graph illustrates that vaccination at a young age is most appropriate for vaccines resulting in direct protection only, because the meningococcal B disease incidence is already high during the first months of life.

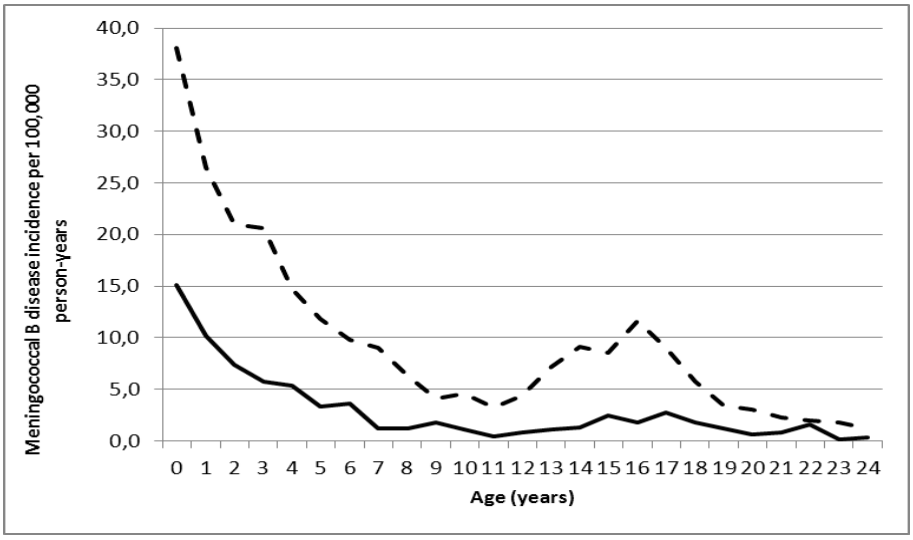

Fig. S2A. Meningococcal B disease incidence per 100,000 person-years for children aged 0-24 years in the Netherlands. The incidence is corrected for underreporting using the estimate of the Netherlands Reference Laboratory for Bacterial Meningitis. The solid line represents the average MenB disease incidence seen during 2005-2009. The dashed line represents the average MenB disease incidence seen during 1990-1993.

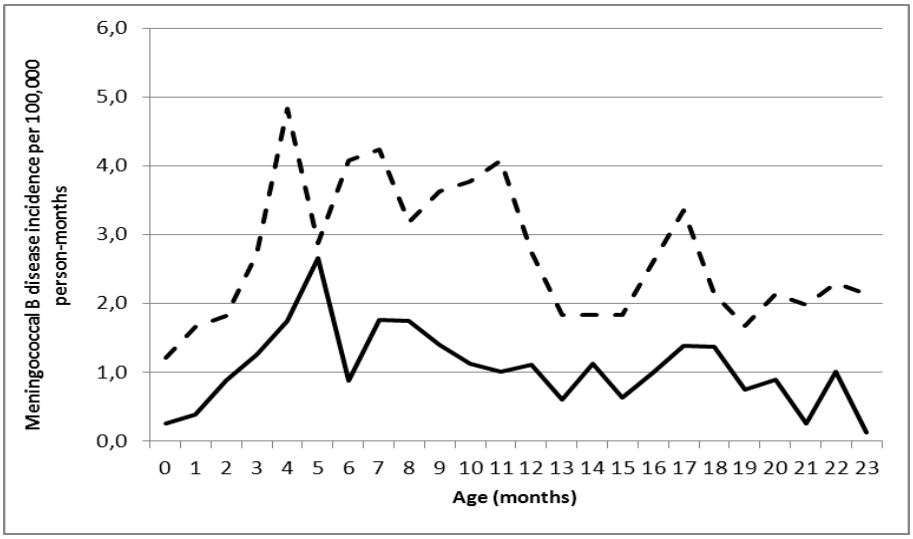

Fig. S2B. Meningococcal B disease incidence per 100,000 person-months for children aged 0-23 months in the Netherlands. The incidence is corrected for underreporting using the estimate of the Netherlands Reference Laboratory for Bacterial Meningitis. The solid line represents the average MenB disease incidence seen during 2005-2009. The dashed line represents the average MenB disease incidence seen during 1990-1993.