Supplementary Information for

Environmental distribution of certain modified live-virus vaccines with a high safety profile presents a low-risk, high-reward to control zoonotic diseases

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Supplementary text
Figs. S1
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Supplementary Information Text

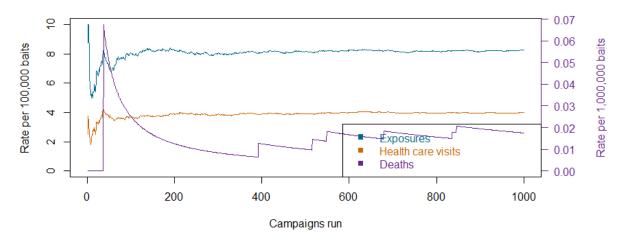
Methods.

Supplementary tables in this document provide the mathematical equations and associated parameter values, governing the probability of movement of a bait, animal, or human between the compartments shown in the diagram in Figure 1 of the text. They contain information on each parameter value used in the mathematical equation as well as their justification for use, based on literature or laboratory results. Results of laboratory studies examining shedding of the rabies virus in dog saliva as well as the challenge studies of mice with both SAD-B19 and SPBN GASGAS oral rabies vaccines are included here.

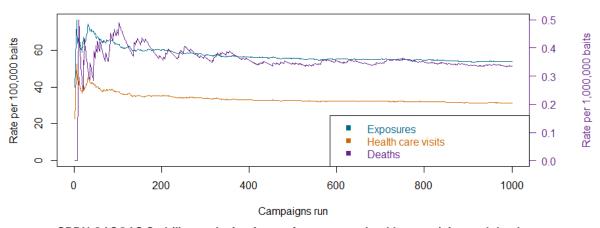
Results.

A figure showing that rates of exposures, health care visits and deaths stabilizes as more and more campaigns are simulated is provided as justification that the model was run a sufficient number of simulations.

SAD-B19 for Foxes Stability analysis of rate of exposures, health care visits, and deaths



SAD-B19 for Dogs Stability analysis of rate of exposures, health care visits, and deaths



SPBN GASGAS Stability analysis of rate of exposures, health care visits, and deaths

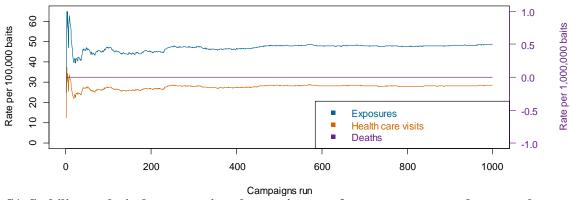


Fig. S1. Stability analysis demonstrating changes in rate of outcomes measured per number of simulations run

Table S1. Mathematical equations describing rate of movement between each model compartment

#	Rate Equation	Description	#	Rate Equation	Description
1	$DiR \bullet P_{rec} \bullet (1-(P_{SWALLOW} \bullet P_{I,T} + P_{I,NT}))$, if B > 0, 0 else	recovery of baits in enryironment	48	(1-PC _L)•Platent•PSAE _{M,nIC} •H _{L,nIC}	nIC with mucosal lick gets SAE
2	P _{reuse} •B _r	reuse of recovered bait	49	(1-PC _B)•P _{latent} •PSAE _{T,nIC} •H _{TB,nIC}	nIC with transdermal bite gets SAE
3	(1/DeR)•(1-P _{reuse})•B _{R time, t = DeR} ,	destruction of recovered bait	50	(1 - P _{SB})•P _{latent} •PSAE _{P,nlC} •H _{SB,nlC}	nIC with severe bite gets SAE
	if $B_R > 0$ & time, $t \ge DeR$, 0 else		51	(1 - PC _B)•PSAE _{RB,IC} •H _{RB,nIC}	nIC gets SAE after rabid animal bite
4	$DiR \bullet (1-P_{rec}) \bullet (1-(P_{SWALLOW} \bullet P_{I,T} + P_{I,NT})), if B > 0, 0$	bait left in environment	52	(1 - PC _{MC} - PSAE _{M,IC}) • H _{MC,IC}	IC with mucosal contact avoids SAE w/o care
	else				
5	(1/DeR)• B _{V time, t = DeR} ,	decay of left bait	53	(1-PC _{TC} - PSAE _{T,IC})•H _{TC,IC}	IC with transdermal contact avoids SAE w/o care
	if $B_V > 0$ & time, $t \ge DeR$, 0 else, 0 else		54	$(1-PC_L-(P_{latent} \bullet PSAE_{M,IC})) \bullet H_{L,IC}$	IC with mucosal lick avoids SAE w/o care
6	$DiR \bullet P_{I,T}$, if B > 0, 0 else	target ingests bait	55	$(1-PC_B-(P_{latent} \bullet PSAE_{T,IC})) \bullet H_{TB,IC}$	IC with transdermal bite avoids SAE w/o care
7	$(1/RP) \bullet (1-P_{RAB}) \bullet T_{V time, t=RP}$	target stops shedding in oral cavity	56	$(1-PC_{SB}-(P_{latent} \bullet PSAE_{P,IC})) \bullet H_{SB,IC}$	IC with severe bite avoids SAE w/o care
	if $T_V > 0$ & time, $t \ge RP$, 0 else		57	(1-PC _B -PSAE _{RB,nIC})•H _{RB,nIC}	IC bitten by rabid dog avoids SAE without care
8	P _{RAB} •T _{NV}	target becomes rabid	58	(1 - PC _{MC} - PSAE _{M,nic})•H _{MC,nic}	nIC with mucosal contact avoids SAE w/o care
9	(1-P _{RAB})•T _{NV}	target becomes seroconverts	59	(1-PC _{TC} - PSAE _{T,nIC})•H _{TC,nIC}	nIC with transdermal contact avoids SAE w/o care
10	$\delta_R \bullet T_R$	death of rabid target animal	60	$(1-PC_L-(P_{latent} \bullet PSAE_{Mn,IC})) \bullet H_{L,nIC}$	nIC with mucosal lick avoids SAE w/o care
11	DiR \bullet P _{I,NT} , if B > 0, 0 else	non-target ingests bait	50	$(1 - P_{SB}) \bullet P_{Iatent} \bullet PSAE_{P,nIC} \bullet H_{SB,nIC}$	nIC with severe bite gets SAE
12	$(1/RP) \bullet (1-P_{RAB}) \bullet NT_{V time, t=RP}$	non-target stops shedding in oral cavity	62	$(1-PC_{SB}-(P_{latent} \bullet PSAE_{P,IC})) \bullet H_{SB,IC}$	nIC with severe bite avoids SAE w/o care
	if $NT_V > 0$ & time, $t \ge RP$, 0 else		63	(1-PC _B -PSAE _{RB,IC})•H _{RB,IC}	nIC bitten by rabid dog avoids SAE without care
13	P _{RAB} •NT _{NV}	non-target becomes rabid	64	$\alpha \bullet PSAE_{M,IC} \bullet H_{C,MC,IC}$	IC with mucosal contact gets SAE after seeking care
14	(1-P _{RAB})•NT _{NV}	non-target seroconverts	65	$\alpha \bullet PSAE_{T,IC} \bullet H_{C,TC,IC}$	IC with transdermal contact gets SAE after seeking care
15	$\delta_R \bullet NT_R$	death of rabid non-target animal	66	$\alpha \bullet P_{latent} \bullet PSAE_{M,IC} \bullet H_{C,L,IC}$	IC with mucosal lick gets SAE after seeking care
16	(1-P _{nIC})•K•P _{MC} •B _V	IC exposed mucosally (direct contact)	67	$\alpha \bullet P_{latent} \bullet PSAE_{T,IC} \bullet H_{C,TB,IC}$	IC with transdermal bite gets SAE after seeking care
17	$(1-P_{nIC}) \bullet K \bullet P_{TC} \bullet B_V$	IC exposed transdermally (direct contact)	68	$\alpha_p \bullet P_{latent} \bullet PSAE_{P,IC} \bullet H_{C,SB,IC}$	IC with severe bite gets SAE after seeking care
18	$(1-P_{nIC}) \bullet LR_T \bullet P_{MME} \bullet T_V + (1-P_{nIC}) \bullet LR_{NT} \bullet P_{MME} \bullet NT_V$	IC exposed via lick on mucosal membranes	69	$[(P_{SB} \bullet \alpha_p \bullet PSAE_{P,IC}) + ((1-P_{SB}) \bullet \alpha \bullet PSAE_{RB,IC}))] \bullet H_{C,RB,IC}$	IC with rabid bite gets SAE after seeking care
19	$(1-P_{nIC}) \bullet BR_T \bullet (1-P_{SB}) \bullet T_V + (1-P_{nIC}) \bullet BR_{NT} \bullet (1-P_{SB}) \bullet NT_V$	IC exposed via transdermal bite	70	$\alpha \bullet PSAE_{M,nIC} \bullet H_{C,MC,nIC}$	nIC with mucosal contact gets SAE after seeking care
20	$(1-P_{nIC}) \bullet BR_T \bullet P_{SB} \bullet T_V + (1-P_{nIC}) \bullet BR_{NT} \bullet P_{SB} \bullet NT_V$	IC exposed via severe bite	71	$\alpha \bullet PSAE_T,IC \bullet H_C,TC,IC$	nIC with transdermal contact gets SAE after care
21	$(1-P_{nIC}) \bullet (RBR_T \bullet BR_{0,T} \bullet T_D + RBR_{NT} \bullet BR_{0,NT} \bullet NT_D)$	IC bitten by vaccine-induced rabid animal	72	$\alpha \bullet P_{latent} \bullet PSAE_{M,IC} \bullet H_{C,L,IC}$	nIC with mucosal lick gets SAE after care
22	$P_{nIC} \bullet K \bullet P_{MC} \bullet B_V$	nIC exposed mucosally (direct contact)	73	$\alpha \bullet P_{latent} \bullet PSAE_{T,IC} \bullet H_{C,TB,IC}$	nIC with transdermal bite gets SAE after care
23	$P_{nIC} \bullet K \bullet P_{TC} \bullet B_V$	nIC exposed transdermally (direct contact)	74	$\alpha_p \bullet P_{latent} \bullet PSAE_{P,IC} \bullet H_{C,SB,IC}$	nIC with severe bite gets SAE after seeking care
24	$P_{nIC} \bullet LR_T \bullet P_{MME} \bullet T_V + P_{nIC} \bullet LR_{NT} \bullet P_{MME} \bullet NT_V$	nIC exposed via lick on mucosal membranes	75	$[(P_{SB} \bullet \alpha_p \bullet PSAE_{P,IC}) + ((1-P_{SB}) \bullet \alpha \bullet PSAE_{RB,IC}))] \bullet H_{C,RB,IC}$	nIC with rabid bite gets SAE after seeking care
25	$P_{nIC} \bullet BR_T \bullet (1-P_{SB}) \bullet T_V + P_{nIC} \bullet BR_{NT} \bullet (1-P_{SB}) \bullet NT_V$	nIC exposed via transdermal bite	76	(1- α•PSAE _{M,IC})•H _{C,MC,IC}	IC with mucosal contact seeks care and avoids SAE
26	$P_{nIC} \bullet BR_T \bullet P_{SB} \bullet T_V + P_{nIC} \bullet BR_{NT} \bullet P_{SB} \bullet NT_V$	nIC exposed via severe bite	77	(1- α•PSAE _{T,IC})•H _{C,TC,IC}	IC with transdermal contact seeks care and avoids SAE
27	$P_{nIC} \bullet (RBR_T \bullet BR_{0,T} \bullet T_D + RBR_{NT} \bullet BR_{0,NT} \bullet NT_D)$	nIC bitten by vaccine-induced rabid animal	78	(1- α•PSAE _{M,IC})•H _{C,L,IC}	IC with mucosal lick seeks care and avoids SAE
28	РСмс∙Нмс,іс	IC exposed mucosally gets care	79	(1- α•PSAE _{T,IC})•H _{C,TB,IC}	IC with transdermal bite seeks care and avoids SAE
29	PC _{TC} •H _{TC,IC}	IC exposed transdermally gets care	80	$(1-\alpha_p \bullet PSAE_{P,IC}) \bullet H_{C,SB,IC}$	IC with severe bite seeks care and avoids SAE
30	PC _L •H _{L,IC}	IC with mucosal lick gets care	81	$[(1-(P_{SB}\bullet\alpha_p\bullet PSAE_{P,IC}+(1-P_{SB})\bullet\alpha\bullet PSAE_{RB,IC}))]\bullet H_{C,RB,IC}$	IC with rabid bite seeks care and avoids SAE
31	PC _B •H _{TB,IC}	IC with transdermal bite gets care	82	(1- α•PSAE _{M,nIC})•H _{C,MC,nIC}	nIC with mucosal contact seeks care and avoids SAE
32	$PC_{SB} \bullet H_{SB,IC}$	IC with severe bite gets care	83	(1- α•PSAE _{T,nIC})•H _{C,TC,nIC}	nIC with transdermal contact seeks care and avoids SAE
33	PC _B •H _{RB,IC}	IC with rabid animal bite gets care	84	(1- α•PSAE _{M,nic})•H _{C,L,nic}	nIC with mucosal lick seeks care and avoids SAE
34	PC _{MC} •H _{MC,nlC}	nIC exposed mucosally gets care	85	(1- α•PSAE _{T,nIC})•H _{C,TB,nIC}	nIC with transdermal bite seeks care and avoids SAE
35	PC _{TC} •H _{TC,nlC}	nIC exposed transdermally gets care	86	(1- α _p •PSAE _{P,nIC})•H _{C,SB,nIC}	nIC with severe bite seeks care and avoids SAE
36	PC _L •H _{L,nlC}	nIC with mucosal lick gets care	87	$[(1-(P_{SB}\bullet\alpha_p\bullet PSAE_{P,niC}+(1-P_{SB})\bullet\alpha\bullet PSAE_{RB,niC}))]\bullet H_{C,RB,niC}$	nIC with rabid bite seeks care and avoids SAE
37	PC _B •H _{TB,nIC}	nIC with transdermal bite gets care	88	PC _{SAE} •H _{SAE,IC}	IC with SAE seeks care
38	PC _{SB} •H _{SB,nlC}	nIC with severe bite gets care	89	PC _{SAE} • H _{SAE,nIC}	nIC with SAE seeks care

39	PC _B •H _{RB,nIC}	nIC with rabid animal bite gets care	90	Ysae,ic•Hsae,ic	IC with SAE recovers w/o care
40	(1-PC _{MC})•PSAE _{M,IC} •H _{MC,IC}	IC with mucosal contact gets SAE	91	Y _{SAE,nIC} •H _{SAE,nIC}	nIC with SAE recovers w/o care
41	(1-PC _{TC})•PSAE _{T,IC} •H _{TC,IC}	IC with transdermal contact gets SAE	92	Y _{C,IC} •H _{C,SAE,IC}	IC with SAE recovers after care
42	$(1-PC_L) \bullet P_{latent} \bullet PSAE_{M,IC} \bullet H_{L,IC}$	IC with mucosal lick gets SAE	93	Y _{C,nIC} •H _{C,SAE,nIC}	nIC with SAE recovers after care
43	$(1-PC_B) \bullet P_{latent} \bullet PSAE_{T,IC} \bullet H_{TB,IC}$	IC with transdermal bite gets SAE	94	(1-Y _{SAE,IC})•H _{SAE,IC}	IC with SAE dies w/o additional care
44	$(1-P_{SB}) \bullet P_{latent} \bullet PSAE_{P,IC} \bullet H_{SB,IC}$	IC with severe bite gets SAE	95	(1-Y _{SAE,nIC})•H _{SAE,nIC}	nIC with SAE dies w/o additional care
45	$(1-PC_B) \bullet PSAE_{RB,IC} \bullet H_{RB,IC}$	IC gets SAE after rabid animal bite	96	(1-Y _{C,IE})•H _{C,SAE,IC}	IC with SAE dies after care
46	(1-PC _{MC}) • PSAE _{M,nIC} • H _{MC,nIC}	nIC with mucosal contact gets SAE	97	(1-Y _{C,nIE})•H _{C,SAE,nIC}	nIC with SAE dies after care
47	(1-PC _{TC})•PSAE _{T,nIC} •H _{TC,nIC}	nIC with transdermal contact gets SAE			

IC = immune competent
nIC = not immune competent (immune compromised)

Table S2. Parameter values for each parameter in Table SA1, along with justification for values used in the oral rabies vaccination comparison

Parameter	Description		Value (Range)	Source/Justification		
		SAD B19 in foxes	SAD B19 in dogs	SPBN GASGAS in dogs		
Pic	Proportion of immuno- compromised individuals	4.814E-3 (4.094E-3, 2.728E-2)	4.814E-3 (4.094E-3, 2.728E-2)	4.814E-3 (4.094E-3, 2.728E-2)	Based on the number of persons living with HIV ¹ and depressed CD4 count ^{2,3} , primary immune deficiency disorder ⁴ , or blood cancers ⁵ ; Sensitivity analysis considers HIV rate in South Africa and Europe	
P _{vax}	Proportion of people vaccinated against disease	0 (fixed)	0 (fixed)	0 (fixed)	Most conservative estimate; Varies geographically	
H _s 0	Total human population	4,400,000 (fixed)	4,400,000 (fixed)	4,400,000 (fixed)	Based on a global average human to dog ratio of 11:1 ⁶ ; Varies geographically	
B ₀	Total amount of bait	400,000 (fixed)	400,000 (fixed)	400,000 (fixed)	20% of total dog population are "inaccessible" dogs	
DiR	Daily distribution rate of baits	6,667 (fixed)	6,667 (fixed	6,667 (fixed)	400,000 baits over 60 day campaign	
P _{rec}	Proportion of non-ingested baits recovered from environment	0 (fixed)	0.263 (0.10 – 0.51)	0.263 (0.10 – 0.51)	DOG: Campaign results from Haiti ⁷ ; Sensitivity analysis is 95% confidence interval around the proportion	
P _{reuse}	Proportion of baits reused after recovery	N/A	0.50 (fixed)	0.50 (fixed)	Expert opinion	
DeR	Number of days vaccine is viable in environment	10.0 (3, 30)	10.0 (3, 30)	10.0 (3, 30)	Laboratory field tests ⁸	
P _{I,T}	Proportion of baits ingested (punctured or swallowed) by target animal	0.20 (0.10, 0.30)	0.931 (0.89, 0.96)	0.931 (0.89, 0.96)	Results from previous campaigns 7,9-16. Sensitivity analysis is 95% confidence interval around the proportion	
Pswallow	Among those baits ingested, proportion of fully swallowed	1 (fixed)	1 (fixed)	1 (fixed)	Held to isolate effect of animal consumption in this model	
P _{I,NT}	Proportion of baits ingested by non-target animal	0.55 (0.40, 0.70)	3.436E-3 (2.0E-4, 2.2E-2)	3.436E-3 (2.0E-4, 2.2E-2)	Results from previous campaigns 7,9-16. Sensitivity analysis is 95% confidence interval around the proportion	
K	Daily human contact rate with the bait in the environment	4.847E-5 (2.891E-6, 7.358E-5)	1.107E-4 (6.6E-6, 1.68E-4)	1.107E-4 (6.6E-6, 1.68E-4)	DOG: Center and range drawn from data on calls about exposure from multistate ORV surveillance systems ¹⁷ and results of wildlife campaign in Ohio ¹⁸ . FOX: multiplied dog values by an adjustment factor to account for less dense applications ¹⁹⁻²²	
P _{MC}	Probability the contact event results in mucosal inoculation	0.0714 (0.013, 0.31)	0.0714 (0.013, 0.31)	0.0714 (0.013, 0.31)	Results of exposure types from wildlife campaign in Ohio 18; Sensitivity analysis is 95% confidence interval around proportion.	
P _{TC}	Probability the contact event results in transdermal inoculation	0.071 (0.013, 0.31)	0.071 (0.013, 0.31)	0.071 (0.013, 0.31)	Results of exposure types from wildlife campaign in Ohio ¹⁸ ; Sensitivity analysis is 95% confidence interval around proportion.	
LR _T	Daily probability of being licked by an animal from the target population	5.480E-12 (2.736E-12, 8.208E-12)	4.110E-4 (2.055E-4, 6.164E-4)	4.110E-4 (2.055E-4, 6.164E-4)	FOX: Based on bite rate and rare event justification; Sensitivity analysis (±50% of estimate).	

					DOG: Based on expert opinion from prevalence of dog ownership ²³ and bite rate in Haiti ²⁴ ; Sensitivity analysis (±50% of estimate).
LR _{NT}	Daily probability of being licked by an animal from the non-target population	3.726E-5 (1.863E-5, 5.589E-5)	4.110E-6 (1.027E-6, 9.247E-6)	4.110E-6 (1.027E-6, 9.247E-6)	FOX: Based on weighted average of lick rate for dogs and wild animals; Sensitivity analysis (±50% of estimate). DOG: Assumed 1% of target population; Sensitivity analysis (±50% of estimate).
RP	Days vaccine stays in oral cavity	0.5 (0.167, 1)	0.5 (0.167, 1)	0.5 (0.167, 1)	Shedding studies (Supplemental Table 2) 25
P _{MME}	Probability of mucous membrane or wound exposure to saliva	6.667E-4 (6.667E-6, 6.667E-3)	6.667E-4 (6.667E-6, 6.667E-3)	6.667E-4 (6.667E-6, 6.667E-3)	Considered rare event
BR _T	Daily bite rate of target population	8.219E-8 (4.110E-8, 1.233E-7)	8.219E-5 (4.110E-5, 1.233E-4)	8.219E-5 (4.110E-5, 1.233E-4)	DOG: Household survey in Haiti ²⁴ ; Sensitivity analysis (±50% of estimate). FOX: Adjustment from dog bite rate based on percent of rabid bites attributable to foxes ²⁶ ; Sensitivity analysis (±50% of estimate).
BR _{NT}	Daily bite rate of non-target population	8.151E-06 (4.075E-06, 1.223E-05)	9.863E-6 (2.466E-6, 2.219E-5)	9.863E-6 (2.466E-6, 2.219E-5)	FOX: Based on weighted average of lick rate for dogs and wild animals ²⁶ ; Sensitivity analysis (±50% of estimate). DOG: Based on bite data from Los Angeles, CA ²⁷ ; Sensitivity analysis (±50% of estimate).
P _{SB}	Proportion of animal bites with cranial or peritoneal inoculation	5.60E-5 (2.80E-5, 1.68E-4)	5.60E-5 (2.80E-5, 1.68E-4)	5.60E-5 (2.80E-5, 1.68E-4)	Based on data from Los Angeles, CA regarding percentages of bites that resulted in hospitalization and to the face ²⁷ and data from Paris on face bites that break the bone ²⁸ ; Sensitivity analysis (±50% of estimate).
P _{RAB}	Proportion of animals that develop vaccine induced rabies	2.360E-6 (2.360E-7, 2.360E-5)	4.332E-6 (4.332E-7, 4.332E-5)	0 (fixed)	FOX: Results of ORV campagins in foxes ¹³ DOG: Adjustment from 6/277 million to account for underreporting; Sensitivity analysis (factor of 10 above and below estimate).
δ_{R}	Death rate of rabid animal	7.14E-2 (3.5E-2, 1.07)	7.14E-2 (3.5E-2, 1.07)	N/A	Death rate of rabid animals ²⁹ ; Sensitivity analysis (±50% of estimate).
RBR_T	Percent of rabid target animals that bite another human	3.653E-6	0.5 (0.25, 0.75)	0.5 (0.25, 0.75)	Expert opinion; Sensitivity analysis (±50% of estimate).
RBR _{NT}	Percent of rabid non-target animals that bite another human	4.5E-2 (2.0E-2, 7.5E-2)	3.653E-6 (3.653E-7, 3.653E-5)	3.653E-6 (3.653E-7, 3.653E-5)	Expert opinion; Sensitivity analysis (factor of 10 above and below estimate).
BR _{0,T}	Daily bite rate of rabid target animals (among those that bite)	7.14E-2 (3.5E-2, 1.07)	1.429E-1 (7.14E-2, 2.143E-1)	1.429E-1 (7.14E-2, 2.143E-1)	Expert opinion; Sensitivity analysis (±50% of estimate).
BR _{0,NT}	Daily bite rate of rabid non-target animals (among those that bite)	7.793E-2 (3.896E-2, 1.169E-1)	7.14E-2 (3.5E-2, 1.07)	7.14E-2 (3.5E-2, 1.07)	Expert opinion; Sensitivity analysis (±50% of estimate).
PSAE _{M,IC}	Probability of a severe adverse event if mucous membranes are exposed to vaccine in an immune competent person	7.4E-3 (3.15E-3, 5.5E-1)	7.4E-3 (3.15E-3, 5.5E-1)	9.0E-5 (9.0E-7, 9.0E-3)	Mouse challenge studies (SAD-B19: Supplemental Table 3; SPBN GASGAS: Supplemental Table 4) 30
PSAE _{M,nIC}	Probability of a severe adverse event if mucous membranes are exposed to vaccine in an immune compromised person	4.84E-2 (2.1E-3, 1.7E-1)	4.84E-2 (2.1E-3, 1.7E-1)	3.78E-2 (1.1E-2, 3.78E-1)	Mouse challenge studies (SAD-B19: Supplemental Table 3; SPBN GASGAS: Supplemental Table 4) 30

PSAE _{T,IC}	Probability of a severe adverse	2.9E-3 (1.0E-5, 5.0E-2)	2.9E-3 (1.0E-5, 5.0E-2)	9.0E-5 (9.0E-7, 9.0E-3)	Mouse challenge studies (SAD-B19: Supplemental
	event with transdermal exposure to vaccine in an immune competent person				Table 3; SPBN GASGAS: Supplemental Table 4) 30
PSAE _{T,nIC}	Probability of a severe adverse event with transdermal exposure to vaccine in an immune compromised person	9.98E-2 (6.15E-2, 9.2E-1)	9.98E-2 (6.15E-2, 9.2E-1)	1.42E-2 (1.42E-3, 1.42E-1)	Mouse challenge studies (SAD-B19: Supplemental Table 3; SPBN GASGAS: Supplemental Table 4) 30
PSAE _{P,IC}	Probability of a severe adverse event with peritoneal or cranial exposure to vaccine in an immune competent person	9.99E-3 (7.51E-3, 9.5E-1)	9.99E-3 (7.51E-3, 9.5E-1)	9.0E-5 (9.0E-7, 9.0E-3)	Mouse challenge studies (SAD-B19: Supplemental Table 3; SPBN GASGAS: Supplemental Table 4) 30
PSAE _{P,nlC}	Probability of a severe adverse event with peritoneal or cranial exposure to vaccine in an immune compromised person	1E-1 (8.32E-2, 1.0)	1E-1 (8.32E-2, 1.0)	7.79E-2 (7.79E-1, 3.66E-2)	Mouse challenge studies (SAD-B19: Supplemental Table 3; SPBN GASGAS: Supplemental Table 4) 30
PSAE _{RB,IC}	Probability of a severe adverse event with following a bite from a rabid animal in an immune competent person	0.18 (0.09, 0.27)	0.18 (0.09, 0.27)	0.18 (0.09, 0.27)	Report ³¹ ; Sensitivity analysis (±50% of estimate).
PSAE _{RB,nIC}	Probability of a severe adverse event with following a bite from a rabid animal in an immune compromised person	0.36 (0.18, 0.54)	0.36 (0.18, 0.54)	0.36 (0.18, 0.54)	Twice that for immune competent individuals (expert opinion).
P _{latent}	Probability animal had latent immune response	0.20 (0.10- 0.30)	0.20 (0.10- 0.30)	0.20 (0.10- 0.30)	Shedding studies (Supplemental Table 2) ²⁵
PC _{MC}	Probability an exposed person sought care after mucosal contact with vaccine	0.43 (0.05, 0.64)	0.43 (0.05, 0.64)	0.43 (0.05, 0.64)	Household survey on health-care seeking behavior in Haiti ³² ; Sensitivity analysis based on before and after values
TC _{TC}	Probability an exposed person sought care after transdermal contact with vaccine	0.43 (0.05, 0.64)	0.43 (0.05, 0.64)	0.43 (0.05, 0.64)	Household survey on health-care seeking behavior in Haiti ³² ; Sensitivity analysis based on before and after values
PC _L	Probability an exposed person sought care after licked on a mucosal membrane or fresh wound	0.44 (0.11, 0.80)	0.44 (0.11, 0.80)	0.44 (0.11, 0.80)	Household survey on health-care seeking behavior in Haiti ³² ; Sensitivity analysis based on before and after values
PC _B	Probability an exposed person sought care after bite	0.60 (0.44, 0.99)	0.60 (0.44, 0.99)	0.60 (0.44, 0.99)	Household survey on health-care seeking behavior in Haiti ³² ; Sensitivity analysis based on before and after values
PC _{SB}	Probability an exposed person sought care after severe bite resulting in cranial or peritoneal inoculation	0.90 (0.44, 0.99)	0.90 (0.44, 0.99)	0.90 (0.44, 0.99)	Household survey on health-care seeking behavior in Haiti ³² ; Sensitivity analysis based on before and after values
PC _{SAE}	Probability a person with an SAE seeks care	0	0	0	For rabies only: assumed a person with an SAE dies
α	Probability of SAE after care is given, for a non cranial or peritoneal innoculation	0	0	0	For rabies only: assumed PEP is 100% effective if administed

α_P	Probability of SAE after care is	0.70 (0.60, 0.80)	0.70 (0.60, 0.80)	0.70 (0.60, 0.80)	Expert opinion; sensitivity analysis ± 10%
	given, for a cranial or peritoneal				
	innoculation				
Y _{SAE,IC/nIC}	Probability of recovery in persons	0	0	0	For rabies only: assumed a person with an SAE dies
	with an SAE who don't seek care				
Y _{SAE,IC/nIC}	Probability of recovery in persons	0	0	0	For rabies only: assumed a person with an SAE dies
	with an SAE after seeking care				

Table S3. Experimental data on shedding (saliva) studies with SPBN GASGAS 25 . All samples examined were pre-screened with PCR, and only PCR-positive samples were examined by RTCIT (hr – hours after vaccine administration).

Hours after exposure	Number of animals examined	Number of animals with rabies virus detected in saliva
1	24	4
2	104	13
4	105	21
24	168	0
48	163	0
72	147	0
120	32	0
168	62	0
240	35	0
336	42	0

Table S4. Laboratory results of mice safety studies with SAD-B19 and associated model parameter choices

Type of exposure to	# mice	#	% of mice	Lower confidence	Lower confidence	Model lower	Model central	Model upper
vaccine:	exposure	deaths	who died	Interval*	Interval*	bound	bound	bound
Immune competent mice:								
mucosal membrane	20	11	0.55	0.32	0.754	0.00315	0.00754	0.55
transdermal	20	1	0.05	0.00	0.249	0.00001	0.00249	0.05
peritoneal or cranial	30	29	0.97	0.75	0.999	0.00751	0.00999	0.95
Immune compromised or								
not yet immune competent								
(suckling) mice:								
mucosal membrane	12	2	0.17	0.02	0.484	0.0021	0.0484	0.17
transdermal	12	11	0.92	0.62	0.998	0.0615	0.0998	0.92
peritoneal or cranial	20	20	1.00	0.83	1	0.0832	0.1	1

^{*}Determined using fisher's exact test

Table S5. Results of mice safety studies with SPBN GASGAS and associated model parameter choices

	# mice exposed	# deaths	% of mice	Lower confidence	Lower confidence	Model lower	Model central	Model upper
Type of exposure to vaccine:	сировец	deaths	who died	Interval*	Interval*	bound	bound	bound
Immune competent mice:								
mucosal membrane	20	0	0.00	0.00	0.168	0	0.00009	0.009
transdermal	87	0	0.00	0.00	0.041	0	0.00009	0.009
peritoneal or cranial	418	0	0.00	0.00	0.009	0	0.00009	0.009
Immune compromised or not yet immune competent (suckling) mice:								
mucosal membrane	44	10	0.23	0.11	0.378	0.011	0.0378	0.378
transdermal	24	0	0.00	0.00	0.142	0	0.0142	0.142
peritoneal or cranial	24	14	0.58	0.37	0.779	0.0366	0.0779	0.779

^{*}Determined using fisher's exact test

References

- Fettig, J., Swaminathan, M., Murrill, C. S. & Kaplan, J. E. Global Epidemiology of HIV. *Infectious disease clinics of North America* **28**, 323-337, doi:10.1016/j.idc.2014.05.001 (2014).
- 2 Kranzer, K., Lawn, S. D., Johnson, L. F., Bekker, L.-G. & Wood, R. Community viral load and CD4 count distribution among people living with HIV in a South African township: implications for treatment as prevention. *Journal of acquired immune deficiency syndromes* (1999) **63**, 498-505, doi:10.1097/QAI.0b013e318293ae48 (2013).
- Malaza, A., Mossong, J., Bärnighausen, T., Viljoen, J. & Newell, M.-L. Population-Based CD4 Counts in a Rural Area in South Africa with High HIV Prevalence and High Antiretroviral Treatment Coverage. *PloS one* **8**, e70126, doi:10.1371/journal.pone.0070126 (2013).
- 4 Kobrynski, L., Powell, R. W. & Bowen, S. Prevalence and morbidity of primary immunodeficiency diseases, United States 2001-2007. *Journal of clinical immunology* **34**, 954-961, doi:10.1007/s10875-014-0102-8 (2014).
- 5 Leukemia and Lymphoma Society. *Facts and statistics*, < http://www.lls.org/facts-and-statistics (2018).
- Wallace, R. M., Undurraga, E. A., Blanton, J. D., Cleaton, J. & Franka, R. Elimination of Dog-Mediated Human Rabies Deaths by 2030: Needs Assessment and Alternatives for Progress Based on Dog Vaccination. *Frontiers in veterinary science* **4**, 9, doi:10.3389/fvets.2017.00009 (2017).
- Smith, T. G. *et al.* Evaluation of immune responses in dogs to oral rabies vaccine under field conditions. *Vaccine*, doi:https://doi.org/10.1016/j.vaccine.2017.09.096 (2017).
- 8 Vos, A. & Neubert, A. Thermo-stability of the oral rabies virus vaccines SAD B19 and SAD P5/88. *DTW. Deutsche tierarztliche Wochenschrift* **109**, 428-432 (2002).
- 9 Steelman, H. G., Henke, S. E. & Moore, G. M. Bait delivery for oral rabies vaccine to gray foxes. *Journal of wildlife diseases* **36**, 744-751, doi:10.7589/0090-3558-36.4.744 (2000).
- Brochier, B. et al. A field trial in Belgium to control fox rabies by oral immunisation. Vol. 123 (1989).
- Wandeler, A. I., Pfotenhauer, P. & Stocker, C. Über die Verwendung von Ködern zu biologischen Untersuchungen an Füchsen. *Revue suisse Zool* **82**, 335-348 (1975).
- Paquot, A., Brochier, B., Thomas, I. & Pastoret, P. P. Campagnes de vaccination antirabique du renard roux (vulpes vulpes) menées en Belgique: mise en evidence de l'ingestion d'appats vaccinaux par le cerf rouge (Cervus elaphus), le chevreuil (Capreolus capreolus) et le sanglier (Sus scrofa). *Ann Med Vet* **132**, 697-702 (1988).
- Müller, T. *et al.* Analysis of vaccine-virus-associated rabies cases in red foxes (Vulpes vulpes) after oral rabies vaccination campaigns in Germany and Austria. *Archives of virology* **154**, 1081-1091, doi:10.1007/s00705-009-0408-7 (2009).
- Müller, T. *et al.* Testung eines neuen Köders für die orale Immunisierung des Rotfuchses (Vulpes vulpes) gegen Tollwut Berl. *Munch. Tierarztl. Wochenschr.* **106**, 41-46 (1993).
- Dedek, J., Loepelmann, H., Loepelmann, F., Kühne, L. & Rex, M. Praxisbericht über den Nachweis von Oxytetracyclin in Knochenspänen von Wildtieren mittels Fluoreszenzmikroskopie. *Monatsh. Veterinarmed.* **46**, 8-10 (1991).
- Stöhr, K., Stöhr, P. & Müller, T. Orale Fuchsimpfung gegen Tollwut Ergebnisse und Erfahrungen aus den ostdeutschen Bundesländern. *Tierarztl. Umsch.* **4**, 203-211 (1994).

- Roess, A. A. *et al.* National surveillance for human and pet contact with oral rabies vaccine baits, 2001-2009. *Journal of the American Veterinary Medical Association* **240**, 163-168, doi:10.2460/javma.240.2.163 (2012).
- 18 Kellog, F. *et al.* Human contacts with oral rabies vaccine baits distributed for wildlife rabies management Ohio, 2012. *Morbidity and Mortality Weekly Report* **62**, 267-269 (2013).
- Müller, T. F., Schröder, R., Wysocki, P., Mettenleiter, T. C. & Freuling, C. M. Spatiotemporal Use of Oral Rabies Vaccines in Fox Rabies Elimination Programmes in Europe. *PLOS Neglected Tropical Diseases* **9**, e0003953, doi:10.1371/journal.pntd.0003953 (2015).
- Freuling, C. M. *et al.* Efficacy of the oral rabies virus vaccine strain SPBN GASGAS in foxes and raccoon dogs. *Vaccine*, doi: https://doi.org/10.1016/j.vaccine.2017.09.093 (2017).
- Update on oral vaccination of foxes and raccoon dogs against rabies. *EFSA Journal* **13**, 4164, doi:doi:10.2903/j.efsa.2015.4164 (2015).
- European Commission. The oral vaccination of foxes against rabies. *Report of the Scientific Committee on Animal Health and Animal Welfare* (2002).
- Fielding, W. J., Gall, M., Green, D. & Eller, W. S. Care of Dogs and Attitudes of Dog Owners in Port-au-Prince, the Republic of Haiti. *Journal of Applied Animal Welfare Science* **15**, 236-253, doi:10.1080/10888705.2012.683760 (2012).
- Schildecker, S. *et al.* Dog Ecology and Barriers to Canine Rabies Control in the Republic of Haiti, 2014-2015. *Transboundary and emerging diseases* **64**, 1433-1442, doi:10.1111/tbed.12531 (2017).
- Vos, A. *et al.* An assessment of shedding with the oral rabies virus vaccine strain SPBN GASGAS in target and non-target species. *Vaccine* **36**, 811-817, doi:https://doi.org/10.1016/j.vaccine.2017.12.076 (2018).
- Babazadeh, T. *et al.* Epidemiology of acute animal bite and the direct cost of rabies vaccination. *Journal of Acute Disease* **5**, 488-492, doi:https://doi.org/10.1016/j.joad.2016.08.019 (2016).
- 27 Lyu, C. *et al.* Burden of Bites by Dogs and Other Animals in Los Angeles County, California, 2009-2011. *Public Health Reports* **131**, 800-808, doi:10.1177/0033354916675148 (2016).
- Touré, G., Angoulangouli, G. & Méningaud, J.-P. Epidemiology and classification of dog bite injuries to the face: A prospective study of 108 patients. *Journal of Plastic, Reconstructive & Aesthetic Surgery* **68**, 654-658, doi:https://doi.org/10.1016/j.bjps.2015.01.001 (2015).
- Tepsumethanon, V. *et al.* Survival of Naturally Infected Rabid Dogs and Cats. *Clinical Infectious Diseases* **39**, 278-280, doi:10.1086/421556 (2004).
- Faber, M. *et al.* A Single Amino Acid Change in Rabies Virus Glycoprotein Increases Virus Spread and Enhances Virus Pathogenicity. *Journal of Virology* **79**, 14141-14148, doi:10.1128/jvi.79.22.14141-14148.2005 (2005).
- Babes, V. Traité de la rage. in: BN Fields, DM Knipe (Eds.) Virology. 2nd edn., (Raven Press, New York, NY, 1990).
- Etheart, M. D. *et al.* Effect of counselling on health-care-seeking behaviours and rabies vaccination adherence after dog bites in Haiti, 2014–15: a retrospective follow-

up survey. *The Lancet Global Health* **5**, e1017-e1025, doi:10.1016/S2214-109X(17)30321-2.