



**DT CHALLENGE SINGLE DILUTION ASSAY: PROS AND
CONS OF AN ANIMAL REDUCTION OPPORTUNITY
– VIEW FROM THE BELGIAN OMCL**

AFSA DTP WORKSHOP JAN. 30, 2025

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Outline

- Background:
 - DTaP vaccines
 - The 'old way': MD challenge assays
 - SDA : Rationale & Guidelines

- Implementation of an SDA in practice
 - Conditions
 - Advantages
 - Limitations

- Other perspectives:
 - DTaP serology
 - *In vitro* alternatives

DTaP vaccines

- Category = detoxified adjuvanted vaccines
- Classified as « old » vaccines
 - **Developed in the 1930s' and authorized in the 50s'**
- Several combinations of antigens
 - Diphtheria, Tetanus, Pertussis (+ IPV and/or HepB and/or Hib)
- Confer active immunity against Diphtheria, Tetanus and Pertussis
- **Up to recently, limited alternatives to *in vivo* testing for potency assessment**



The 'old way': MD challenge assays

➤ Diphtheria & Tetanus toxin challenges

Day 0



Day 28



Day 29 to 32



Mice (T)
Guinea Pigs (D)
Vaccination



SC injection of

Reference vaccine
Tested vaccine



Lethal Challenge

SC Injection of
Toxin solution



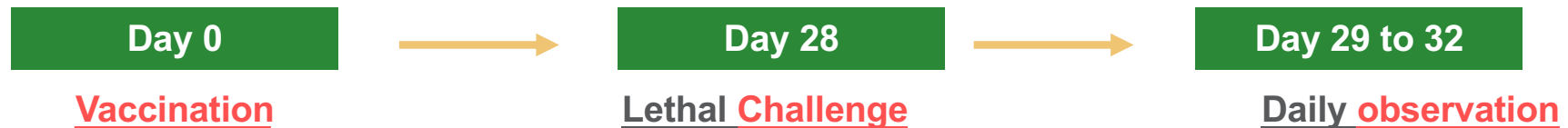
Daily observation

→ Humane
endpoints
Dead animals count



The 'old way': MDA challenge assays

- **Goal ?** To distinguish between potent and sub-potent products
- **How ?** By comparing the effective dose of reference and test vaccine



Diphtheria / Tetanus	
Several dilution levels	* 4 Dilutions / reference
	* 4 Dilutions / tested vaccine
	* 12 - 16 animals / dilution
	* Toxin activity Control: 3 dilutions of the challenge dose with 5 animals
	* Challenge Dose Control: 5 animals

Ref. vaccine dilutions

Test vaccine dilutions

Date of Immunization	05-08-20
Test code	DIMU-20-06
Reference vaccine	Reference (BRP)
→ Dilution 1	1/16
Number of survivors/12	12
→ Dilution 2	1/32
Number of survivors/12	12
→ Dilution 3	1/64
Number of survivors/12	6
→ Dilution 4	1/128
Number of survivors/12	0
Tested vaccine	Vaccine Type
Lot number	Vaccine lot
→ Dilution 1	1/20
Number of survivors/12	12
→ Dilution 2	1/40
Number of survivors/12	11
→ Dilution 3	1/80
Number of survivors/12	6
→ Dilution 4	1/160
Number of survivors/12	0

survivors

survivors

Relevance of implementing an SDA

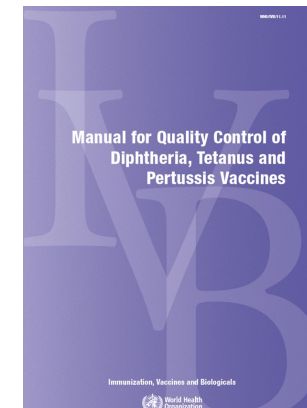
➤ Context: 3R Principles – Replace, Reduce & Refine

- As encouraged by WHO since 1980 and the EU Directive 2010/63/EU
- Target a drastic reduction in the use of laboratory animals
- Less animal suffering

➤ Guidelines: When can we use an SDA?

(WHO/IVB/11.11– Manual for Quality Control of DTP Vaccines)

- For a specific product which shows consistency in production and testing
- Adequate experience with MDA on a specific product
- With an adequate assay validation

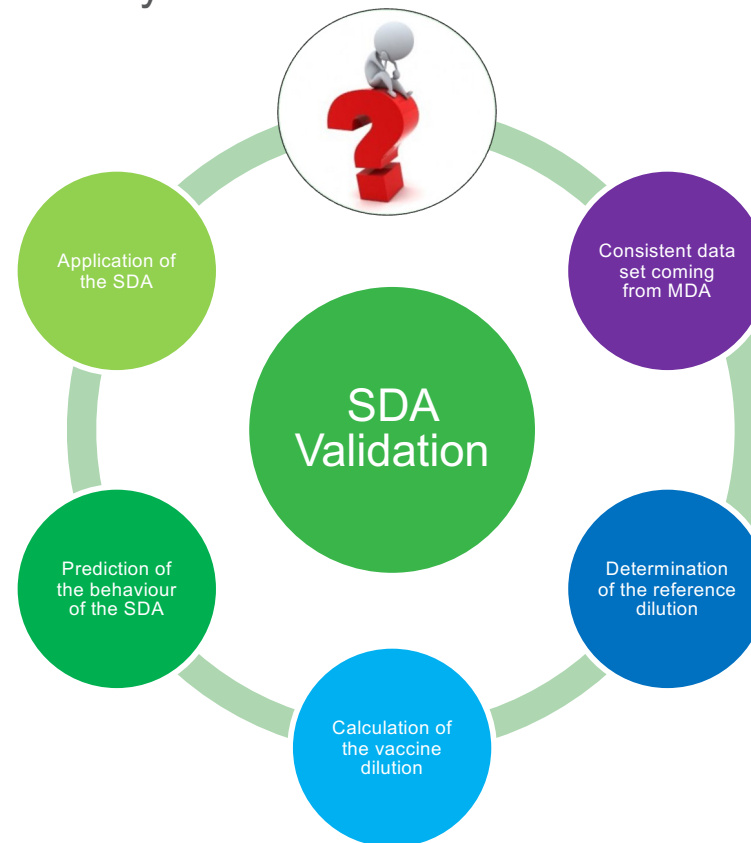


Implementation of an SDA in practice : Conditions

➤ Adequate experience with MDA on a specific product

- Very good hands-on experience with the MDA assay (product specific)
- Validated method (repeatability, reproducibility, robustness,...)
- Evidence of good data consistency

➤ Adequate SDA assay validation



Implementation of an SDA in practice : Advantages

➤ Implementation of the 3R principles

Multiple Dilutions Assay

- * 3 or 4 dilutions / reference
- * 3 or 4 dilutions / tested vaccine
- * 12, 15 or 16 animals/dilution

- * Challenge Dose Control:
5 animals/test
- * Toxin activity Control: each test
5 animals & 3 dilutions

- * Calculations
ED50 & LD50 determination

- * Results
Potency in IU/Dose



Single Dilution Assay

- * 1 Dilution / reference
- * 1 Dilution / tested vaccine
- * 12, 15 or 16 animals/dilution

- * Challenge Dose Control: 2 times/year
5 animals
- * Toxin activity Control: 2 times/year
5 animals & 3 dilutions

- * Calculations
Fisher's probability test

- * Results
PASS / FAIL

Decreasing the number of animals used by ~80%

Implementation of an SDA in practice : Advantages

➤ Other advantages

- Higher number of vaccines which can be tested in one run
- Reduction of costs and resources
- Less space required in the animal facilities
- Saves time for the operators and the animal caretakers

Limitations and other perspectives

➤ Limitations

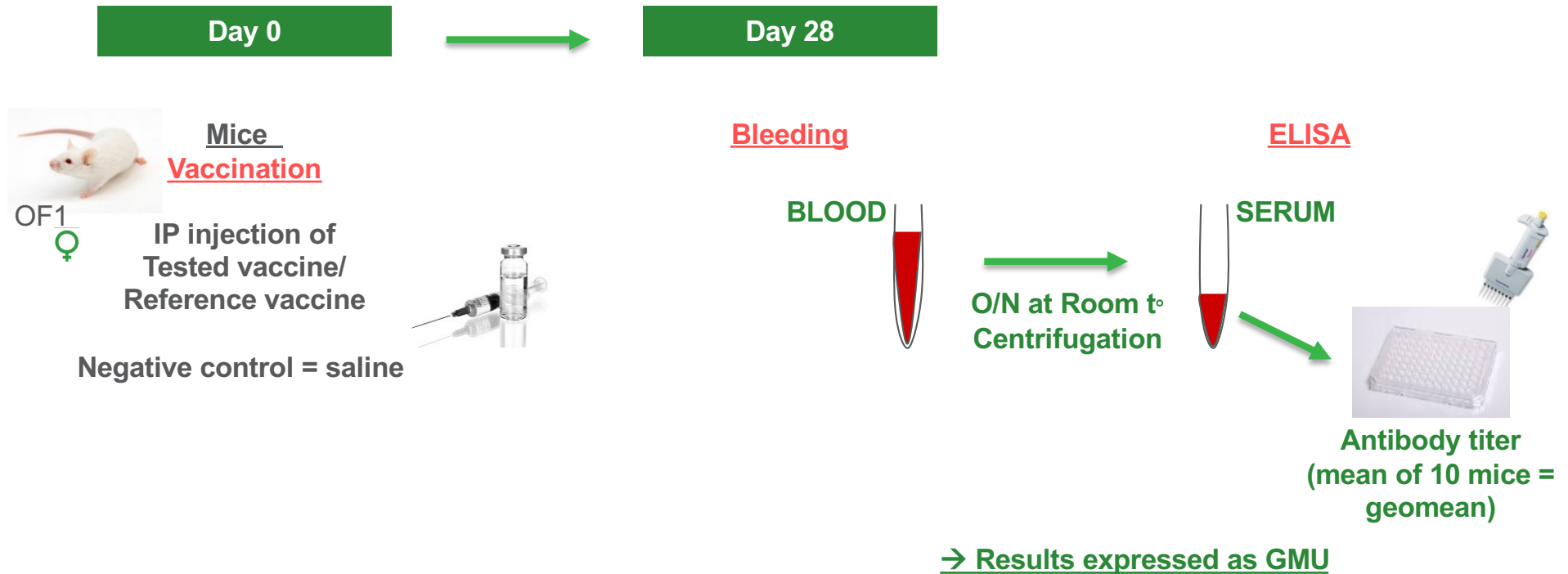
Necessity to have adequate experience with MDA on a specific product + good data consistency;

STILL AN *IN VIVO* METHOD = USING LAB ANIMALS

STILL A CHALLENGE ASSAY = INVOLVING ANIMAL SUFFERING

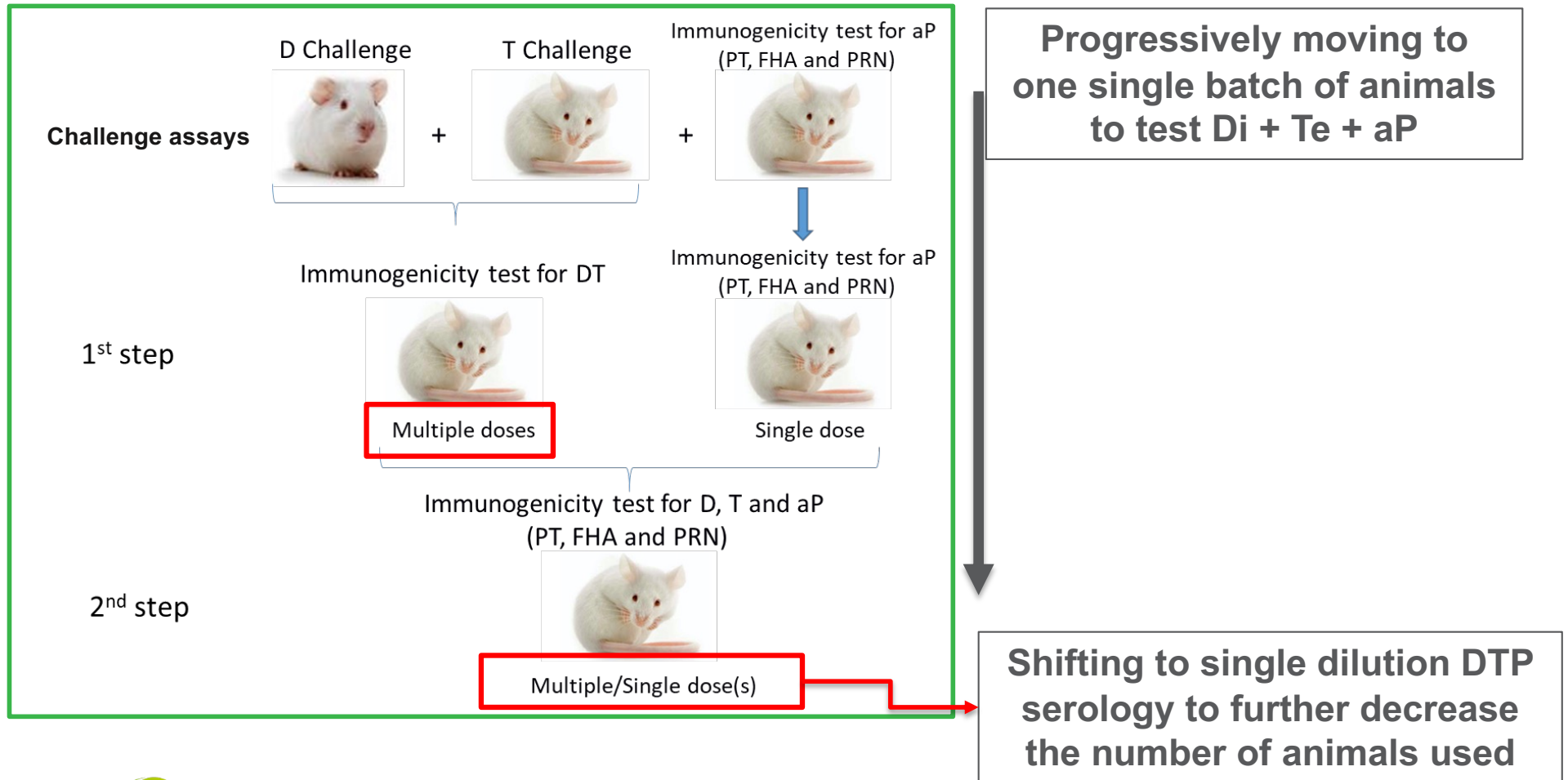
What are the alternatives?

Limitations and other perspectives: DTP serology

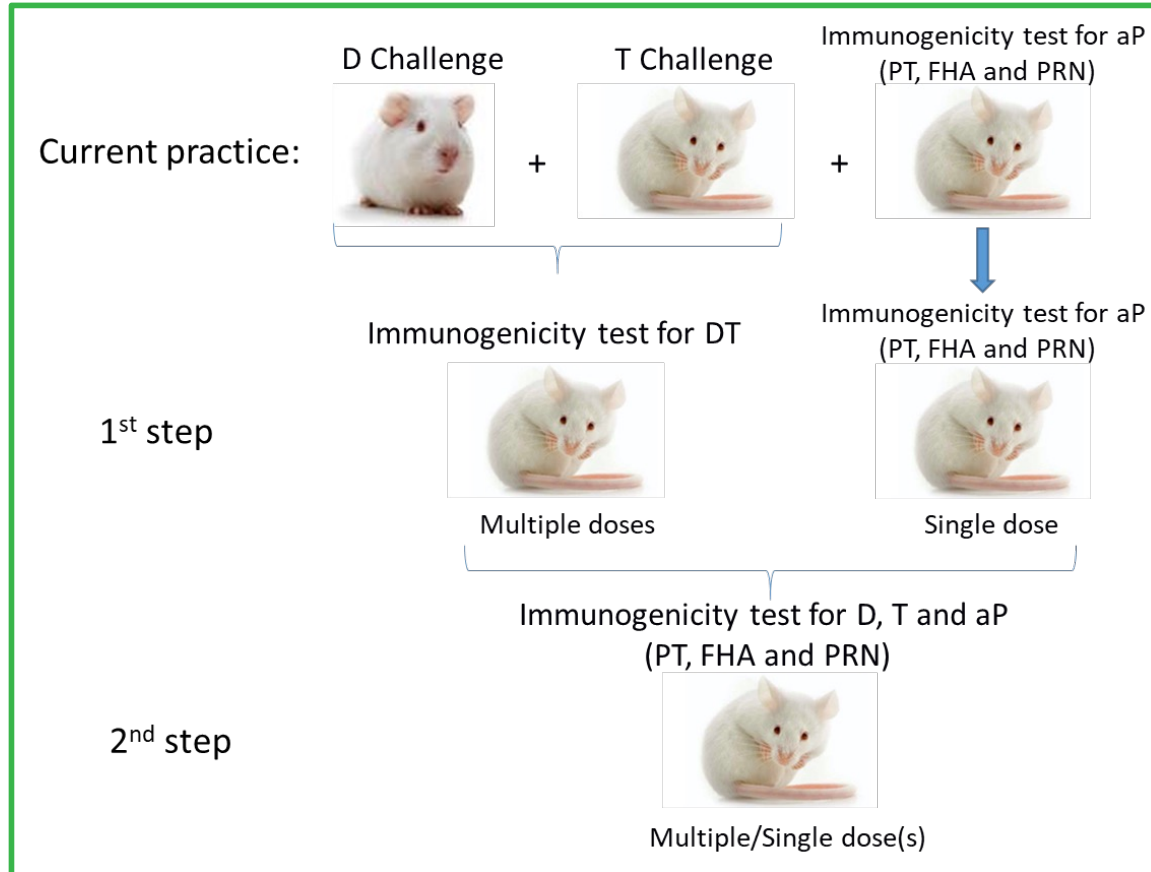


Mostly addressing animal **SUFFERING**
compared to SDA challenge assays...

Limitations and other perspectives: DTP serology



Animal number decrease overview



DT MDA challenge assay + aP serology :

$$164 + 164 + 35 = \mathbf{363}$$

DT SDA challenge assay + aP serology:

$$36 + 36 + 35 = \mathbf{107}$$

DTP serology MDA:

135

DTP serology SDA:

45

Limitations and other perspectives: *in vitro* alternatives

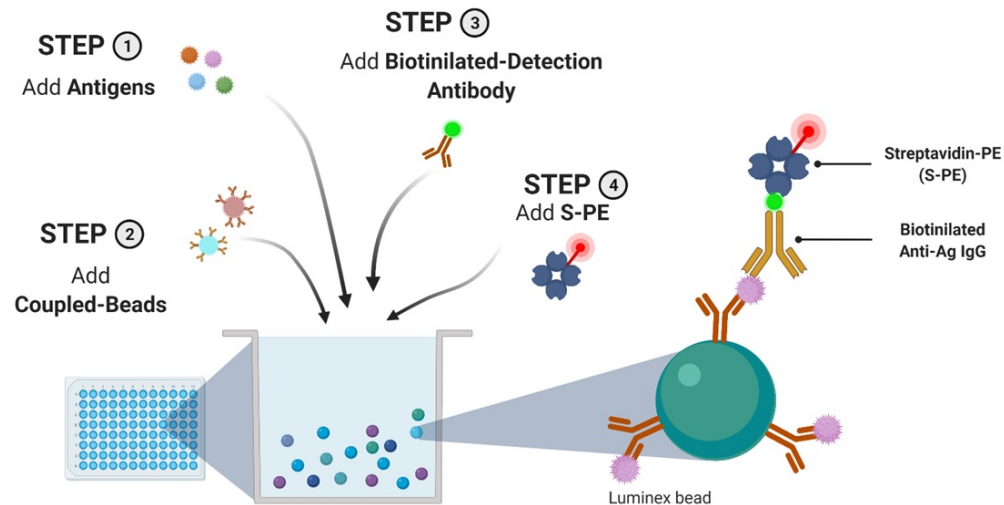
➤ In vitro alternatives advantages

- **Animal-free** + saving time (± 30 days to 1 day) and costs
- 1 run to assess all antigens
- Lower variability than *in vivo* methods (5-10% vs 30-50%)

Multiplex assays (cf. VAC2VAC project)

ELISA (cf. NIBSC: reagents available on demand)

See next presentations...



Conclusions

➤ Advantages of SDA

- Drastic reduction in animal numbers
- More vaccines tested in one run
- Reduction of time, costs and resources
- Less space required in the animal facilities

➤ SDA limitations:

- PASS/FAIL read-out
- Still an *in vivo* method
- Still a toxin challenge

Further progress available with DTP serology and *in vitro* alternatives

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