



## Value of immunogenicity studies of influenza vaccine in resource-limited settings

The studies<sup>1,2</sup> of Russian-backbone live attenuated influenza vaccine (LAIV) in children from Senegal and Bangladesh in *The Lancet Global Health* are welcome, in view of the high burden of influenza-associated morbidity and mortality in resource-limited settings. Although the lack of immunogenicity data is highlighted as a limitation by the authors, we feel that the importance of generating such data in future studies is underplayed. With the exception of one study<sup>3</sup> including children from South Africa, to our knowledge, no paediatric immunogenicity data exist from sub-Saharan Africa for the Ann Arbor-based LAIV. This amounts to a significant gap in knowledge of how an intranasal LAIV performs immunologically in these settings. Parallels can be drawn with the well-described poorer performance of live oral vaccines in resource-limited settings.

The lack of a single identified correlate of protection for LAIV should not deter future immunogenicity studies in resource-limited settings, especially using systems vaccinology approaches designed to dissect the complex interplay of innate and adaptive pathways following vaccination.<sup>4</sup> John C Victor<sup>1</sup> and colleagues propose that differences in nasopharyngeal ecology could explain differential LAIV performance. As methods to interrogate and integrate complex datasets evolve, testing such hypotheses becomes increasingly possible.

Although further efficacy studies of this vaccine in resource-limited settings are vital, in our view, studies probing more mechanistic aspects of LAIV performance are also crucial. Not only might such studies offer some explanation for the lack of efficacy seen in Senegal, but they

might also underpin the design of future generations of LAIV for use in resource-limited settings.

We declare no competing interests.

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