

You help protect travelers against typhoid with VIVOTIF. What about chikungunya?



Help protect your patients who travel to areas of elevated risk against chikungunya with VIMKUNYA.

Chikungunya is a mosquito-borne illness with no specific treatment¹ and potentially debilitating effects.² Similar to typhoid prevention, you can help protect your traveler with vaccination alongside traditional prevention methods.^{3,4}



Learn about
VIVOTIF

The only oral typhoid vaccine^{4,5}

- Administered in 4 oral doses.⁵
- **ACIP-recommended** for travelers going to areas where risk for exposure to *S. typhi* is recognized.⁶
- May provide protection* for up to 5 years after the 4-dose regimen is completed.⁵
- Backed by more than 150 million doses marketed globally and over 1.4 million doses in clinical trials.⁵

*Not all recipients of VIVOTIF will be fully protected against typhoid fever.



Learn about
VIMKUNYA

The only non-live VLP vaccine for chikungunya is available for order now^{3,7}

- Administered in a single-dose, pre-filled syringe (no reconstitution required).³
- **ACIP-recommended** for individuals 12 years and older traveling to a region where a chikungunya outbreak is occurring or areas with elevated risk.⁷
- After 6 months, 85.5% of people ages 12–64 and 75.5% of people 65+ achieved a seroresponse.^{3,†}
- Demonstrated safety profile from 2 clinical trials.³

†A main objective for two Phase 3 trials was to compare the anti-chikungunya virus serum neutralizing antibody response to VIMKUNYA and placebo at Day 22, as measured by geometric mean titer (GMT) and clinically relevant difference in seroresponse rate (VIMKUNYA minus placebo) at Day 22. Among people ages 12–64, 97.8% (n=2503/2559) achieved a seroresponse at Day 22 with VIMKUNYA vs 1.2% (n=5/424) with placebo; among those ≥65, 87.3% (n=165/189) achieved a seroresponse at Day 22 with VIMKUNYA vs 1.1% (n=2/183) with placebo.^{3,8,9}

VLP=virus-like particle.

Have a conversation about travel health vaccination with your traveler.

VIVOTIF INDICATION AND USAGE

VIVOTIF is indicated for immunization of adults and children greater than 6 years of age against disease caused by *Salmonella typhi*.

Routine typhoid vaccination is not recommended in the United States of America. Selective immunization against typhoid fever is recommended for the following groups: 1) travelers to areas in which there is a recognized risk of exposure to *S. typhi*; 2) persons with intimate exposure (e.g., household contact) to an *S. typhi* carrier; and 3) microbiology laboratorians who work frequently with *S. typhi*. There is no evidence to support the use of typhoid vaccine to control common source outbreaks, disease following natural disasters, or in persons attending rural summer camps.

Not all recipients of VIVOTIF will be fully protected against typhoid fever. Vaccinated individuals should continue to take personal precautions against exposure to typhoid organisms. The vaccine will not afford protection against species of *Salmonella* other than *Salmonella typhi* or other bacteria that cause enteric disease. The vaccine is not suitable for treatment of acute infections with *S. typhi*.

VIVOTIF IMPORTANT SAFETY INFORMATION

Contraindications

VIVOTIF is contraindicated in patients with a hypersensitivity to any component of the vaccine or the enteric-coated capsule. The vaccine should not be administered to persons during an acute febrile illness. Safety of the vaccine has not been demonstrated in persons deficient in their ability to mount a humoral or cell-mediated immune response, due to either a congenital or acquired immunodeficient state including treatment with immunosuppressive or antimetabolic drugs. The vaccine should not be administered to these persons regardless of benefits.

VIMKUNYA INDICATIONS AND USAGE

VIMKUNYA is a vaccine indicated for the prevention of disease caused by chikungunya virus in individuals 12 years of age and older.

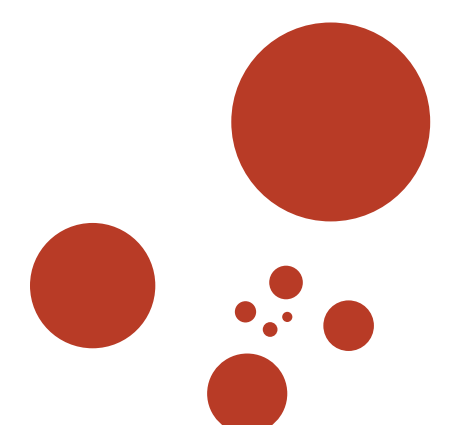
The indication is approved under accelerated approval based on anti-chikungunya virus neutralizing antibody levels. Continued approval for this indication may be contingent upon verification of clinical benefit in a confirmatory trial.

VIMKUNYA IMPORTANT SAFETY INFORMATION

Contraindications

Do not administer VIMKUNYA to individuals with a history of a severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine.

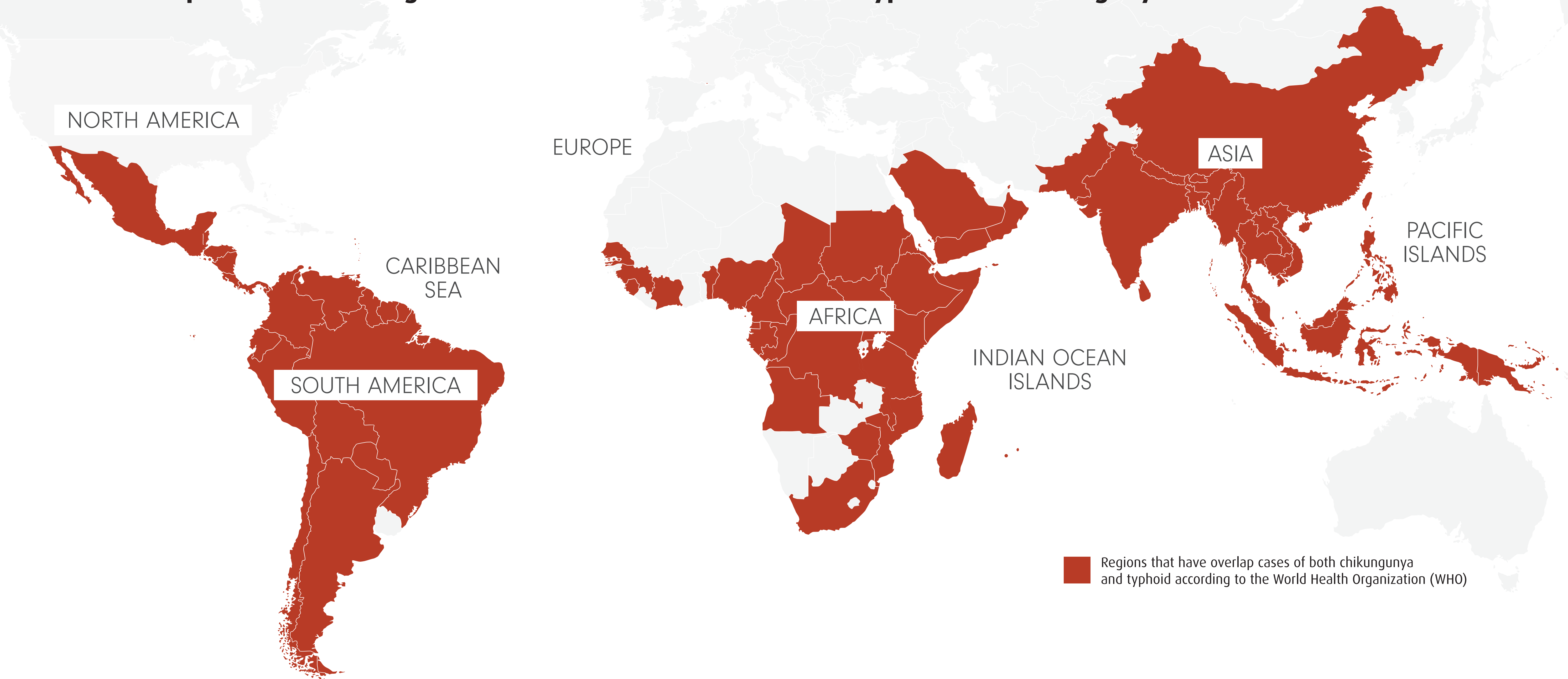
Please see full Important Safety Information for VIVOTIF and VIMKUNYA on the last page.



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Where are your patients going?

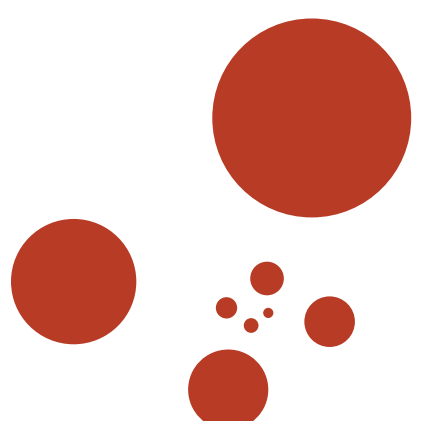
Check the map to see WHO-designated areas of elevated risk for both typhoid and chikungunya.^{4,10}



Have a conversation about travel health vaccination with your traveler.

References:

1. Mourad O, Makhani L, Chen LH. Chikungunya: an emerging public health concern. *Curr Infect Dis Rep.* 2022;24(12):217-228.
2. Chikungunya. World Health Organization. Published April 14, 2025. Accessed July 23, 2025. <https://www.who.int/news-room/fact-sheets/detail/chikungunya>
3. VIMKUNYA Prescribing Information. Bavarian Nordic; 2025.
4. Typhoid and paratyphoid fever. CDC Yellow Book 2026. Accessed September 3, 2025. <https://www.cdc.gov/yellow-book/hcp/travel-associated-infections-diseases/typhoid-and-paratyphoid-fever.html>
5. VIVOTIF (Typhoid Vaccine Live Oral Ty21a) [package insert].
6. Jackson BR, Iqbal S, Mahon B. Updated recommendations for the use of typhoid vaccine — Advisory Committee on Immunization Practices, United States, 2015. *MMWR Morb Mortal Wkly Rep.* 2015;64(11):305-308.
7. Chikungunya vaccine information for healthcare providers. Centers for Disease Control and Prevention. August 6, 2025. Accessed August 7, 2025. <https://www.cdc.gov/chikungunya/hcp/vaccines/index.html>
8. Richardson JS, Anderson DM, Mendy J, et al. Chikungunya virus VLP vaccine: phase 3 trial in adolescents and adults. Posted October 15, 2024. doi:10.1101/2024.10.11.24315179
9. Tindale LC, Richardson JS, Anderson DM, et al. Chikungunya virus virus-like particle vaccine safety and immunogenicity in adults older than 65 years: a phase 3, randomised, double-blind, placebo-controlled trial. *Lancet.* 2025;405(10487):1353-1361.
10. Global distribution of chikungunya virus. World Health Organization. 2022. Accessed November 12, 2024. <https://cdn.who.int/media/images/default-source/health-topics/chikungunya/chikungunya.png>



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IMPORTANT SAFETY INFORMATION

Contraindications

Do not administer VIMKUNYA to individuals with a history of a severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine.

Warnings and Precautions

- Appropriate medical treatment must be immediately available to manage potential anaphylactic reactions.
- Immunocompromised individuals, including individuals receiving immunosuppressive therapy, may have a diminished immune response to VIMKUNYA.
- Syncope (fainting) may occur in association with administration of injectable vaccines including VIMKUNYA. Procedures should be in place to avoid injury from fainting.

Adverse Reactions

In clinical studies, the most common solicited adverse reactions (>10%) in individuals 12 through 64 years of age were pain at the injection site (23.7%), fatigue (19.9%), headache (18%), and myalgia (17.6%). The most commonly reported solicited adverse reactions (>5%) in individuals 65 years of age and older were injection site pain (5.4%), myalgia (6.3%), and fatigue (6.3%).

Use in Specific Populations

There are no clinical studies of VIMKUNYA in pregnant individuals.

To report SUSPECTED ADVERSE REACTIONS, contact Bavarian Nordic Inc. at 1-833-365-9596 or drug.safety@bavarian-nordic.com or VAERS at 1-800-822-7967 or www.vaers.hhs.gov.

Please see accompanying full Prescribing Information, or at <https://bavariannordic.io/uploads/Vimkunya-pi.pdf>.



Learn about
VIMKUNYA



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Warnings and Precautions

Acute Gastrointestinal Illness: VIVOTIF is not to be taken during an acute gastrointestinal illness.

Concomitant Administration With Sulfonamides and Antibiotics: The vaccine should not be administered to individuals receiving sulfonamides and antibiotics since these agents may be active against the vaccine strain and prevent a sufficient degree of multiplication to occur in order to induce a protective immune response.

Administration in Patients With Diarrhea or Vomiting: Vaccination should be postponed if persistent diarrhea or vomiting is occurring.

Need to Complete the Entire Vaccination Series of 4 Doses on the Correct Schedule: Unless a complete immunization schedule is followed, an optimum immune response may not be achieved. Not all recipients of VIVOTIF will be fully protected against typhoid fever.

Not All Recipients Will Be Protected — Need for Safety Vigilance: Not all recipients of VIVOTIF will be fully protected against typhoid fever. Vaccinated individuals should continue to take personal precautions against exposure to typhoid organisms (i.e., travelers should take all necessary precautions to avoid contact or ingestion of potentially contaminated food or water).

Concomitant Administration With Anti-malarial Drugs: Several anti-malaria drugs, such as mefloquine, chloroquine, and proguanil (approved in the United States as 1 of the 2 active ingredients in Malarone and its generic equivalents) possess anti-bacterial activity, which may interfere with the immunogenicity of VIVOTIF. A study in healthy adults showed that mefloquine and chloroquine can be administered together with VIVOTIF. Proguanil should be administered only if 10 days or more have elapsed since the final dose of VIVOTIF was ingested.

Pregnancy/Nursing: It is not known whether VIVOTIF can cause fetal harm when administered to pregnant women or can affect reproduction capacity. VIVOTIF should be given to a pregnant woman only if clearly needed. There are no data to warrant the use of this product in nursing mothers. It is not known if VIVOTIF is excreted in human milk.

Adverse Reactions

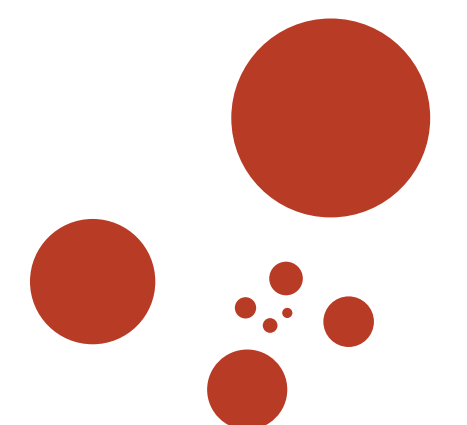
In 2 trials conducting active surveillance for adverse reactions in persons receiving 3 doses (VIVOTIF recipients in the safety dataset, n=483), the most common adverse reactions were abdominal pain (6.4%), nausea (5.8%), headache (4.8%), fever (3.3%), diarrhea (2.9%), vomiting (1.5%), and skin rash (1.0%). Only the incidence of nausea occurred at a statistically higher frequency in the vaccinated group as compared to the placebo group. Reports to the manufacturer from early post-marketing clinical experience (1991-1995), during which time over 60 million doses (capsules) were administered, included all the adverse reactions identified above, as well as urticaria in the trunk and/or extremities (n=13), and 1 isolated, non-fatal case of anaphylactic shock considered to be an allergic reaction to the vaccine.

To report SUSPECTED ADVERSE REACTIONS, contact Bavarian Nordic at 1-833-365-9596 or the US Department of Health and Human Services by either visiting www.vaers.hhs.gov/reportevent.html or calling 1-800-822-7967.

Please see accompanying full Prescribing Information.



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