Vaccines and Global Health: The Week in Review
1 August 2020 :: Number 562
Center for Vaccine Ethics & Policy (CVEP)

This weekly digest targets news, events, announcements, articles and research in the vaccine and global health ethics and policy space and is aggregated from key governmental, NGO, international organization and industry sources, key peer-reviewed journals, and other media channels. This summary proceeds from the broad base of themes and issues monitored by the Center for Vaccine Ethics & Policy in its work: it is not intended to be exhaustive in its coverage.

Vaccines and Global Health: The Week in Review is published as a PDF and scheduled for release each Saturday evening at midnight [0000 GMT-5]. The PDF is posted and the elements of each edition are presented as a set of blog posts at https://centerforvaccineethicsandpolicy.net. This blog allows full-text searching of over 9,000 entries.

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Contents [click on link below to move to associated content]
A. Milestones :: Perspectives :: Featured Journal Content
B. Emergencies
C. WHO; CDC [U.S., Africa, China]
D. Announcements
E. Journal Watch
F. Media Watch

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Statement on the fourth meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of coronavirus disease (COVID-19)
1 August 2020  Statement
[Excerpts]
The fourth meeting of the Emergency Committee convened by the WHO Director-General under the International Health Regulations (IHR) (2005) regarding the coronavirus disease (COVID-19) took place on Friday, 31 July 2020 from 12:00 to 17:45 Geneva time (CEST).

...the Committee unanimously agreed that the pandemic still constitutes a public health emergency of international concern and offered advice to the Director-General.

The Director-General declared that the outbreak of COVID-19 continues to constitute a PHEIC. He accepted the advice of the Committee to WHO and issued the Committee’s advice to States Parties as Temporary Recommendations under the IHR (2005).

The Emergency Committee will be reconvened within three months, at the discretion of the Director-General. The Director-General thanked the Committee for its work.

Advice to the WHO Secretariat
1. Continue to distill and rapidly communicate lessons learned and best practices from the COVID-19 pandemic and national intra-action reviews.
2. Continue to coordinate and mobilize global and regional multilateral organizations, partners and networks for robust political commitment and resourcing of COVID-19 pandemic preparedness and response, including for development of vaccines and therapeutics.
3. Provide nuanced, pragmatic guidance on criteria for appropriate COVID-19 response activities to reduce the risk of response fatigue in the context of socio-economic pressures.
4. Continue to support State Parties and partners in conducting active and community-based COVID-19 surveillance, through technical and operational resources, such as guidance, tools, and trainings on case definitions and identification, contact tracing, and death certifications; encourage State Parties to continue reporting relevant data to WHO through platforms such as the Global Influenza and Surveillance Response System.
5. Accelerate research into remaining SARS-CoV-2 critical unknowns, such as the animal source and potential animal reservoirs, and improve understanding of the epidemiology and severity of COVID-19 (including its long-term health effects; viral dynamics such as modes of transmission, shedding, potential mutations; immunity and correlates of protection; co-infection; as well as risk factors and vulnerabilities) and the effectiveness of public health measures.
6. Continue to work with partners to counter mis/disinformation and infodemics by developing and disseminating clear, tailored messaging on the COVID-19 pandemic and its effects; encourage and support individuals and communities to follow recommended public health and social measures.
7. Support diagnostics, safe and effective therapeutics and vaccines’ rapid and transparent development (including in developing countries) and equitable access through the Access to COVID-19 Tools (ACT) Accelerator; support all countries to implement the necessary clinical trials and to prepare for the rollout of therapeutics and vaccines.

8. Work with partners to revise WHO’s travel health guidance to reinforce evidence-informed measures consistent with the provisions of the IHR (2005) to avoid unnecessary interference with international travel; proactively and regularly share information on travel measures to support State Parties’ decision-making for resuming international travel.

9. Support State Parties, particularly vulnerable countries, in strengthening their essential health services and accompanying supply chains as well as preparing for and responding to concurrent outbreaks, such as seasonal influenza.

Temporary recommendations to State Parties

1. Share best practices, including from intra-action reviews, with WHO; apply lessons learned from countries that are successfully re-opening their societies (including businesses, schools, and other services) and mitigating resurgence of COVID-19.

2. Support multilateral regional and global organizations and encourage global solidarity in COVID-19 response.

3. Enhance and sustain political commitment and leadership for national strategies and localized response activities driven by science, data, and experience; engage all sectors in addressing the impacts of the pandemic.

4. Continue to enhance capacity for public health surveillance, testing, and contact tracing.

5. Share timely information and data with WHO on COVID-19 epidemiology and severity, response measures, and on concurrent disease outbreaks through platforms such as the Global Influenza Surveillance and Response System.

6. Strengthen community engagement, empower individuals, and build trust by addressing mis/disinformation and providing clear guidance, rationales, and resources for public health and social measures to be accepted and implemented.


8. Implement, regularly update, and share information with WHO on appropriate and proportionate travel measures and advice, based on risk assessments; implement necessary capacities, including at points of entry, to mitigate the potential risks of international transmission of COVID-19 and to facilitate international contact tracing.

9. Maintain essential health services with sufficient funding, supplies, and human resources; prepare health systems to cope with seasonal influenza, other concurrent disease outbreaks, and natural disasters.

EMERGENCIES

Coronavirus [COVID-19]
Public Health Emergency of International Concern (PHEIC)
Situation report - 194
Coronavirus disease 2019 (COVID-19)
1 August 2020

Confirmed cases :: 17 396 943 [week ago: 15 581 009]
Confirmed deaths :: 675 060 [week ago: 635 173]

**Highlights [selected]**
:: The fourth meeting of the International Health Regulations (2005) Emergency Committee regarding COVID-19 was convened by the WHO Director-General on 31 July 2020. The Director-General declared that the outbreak of COVID-19 continues to constitute a public health emergency of international concern (PHEIC). The recommendations from the Emergency Committee highlight the need for response efforts to continue over the long term.

:: WHO has updated the interim guidance on Water, sanitation, hygiene (WASH), and waste management for SARS-CoV-2. The document provides additional details on risks associated with excreta and untreated sewage, on hand hygiene, on protecting WASH workers and on supporting the continuation and strengthening of WASH services, especially in underserved areas.

:: WHO has published a draft for Target Product Profiles (TPP) for COVID-19 therapeutics. The three sets of TPPs describe the preferred and minimally acceptable profiles for therapeutic agents for the treatment of those with COVID-19, ranging from mild through critically ill patients. Comments on this document are welcomed by submitting a comment form. All forms should be completed with the details of the individual or organization providing the comment.

:: For World Breastfeeding Week, WHO and UNICEF are calling on governments to protect and promote women’s access to skilled breastfeeding counselling. This is a critical component of breastfeeding support and, amidst the COVID-19 pandemic, it is even more important to find innovative solutions to ensure that access to these essential services is not disrupted.

::: COVID-19 Vaccines – Access/Procurement/Supply

**92 low- and middle-income economies eligible to get access to COVID-19 vaccines through Gavi COVAX AMC**
:: Gavi Board agrees scope of COVAX Advance Market Commitment (AMC), which aims to secure doses of COVID-19 vaccines for 92 low- and middle-income countries and economies at the same time as wealthier nations
:: The Gavi COVAX AMC forms part of the COVAX Facility, a mechanism hosted by Gavi, the Vaccine Alliance, designed to guarantee rapid, fair and equitable access to COVID-19 vaccines for every country in the world, rich and poor
:: Dr Ngozi Okonjo-Iweala: "We are facing the most severe contraction of the economy since World War Two, and this crisis will have a terrible impact on the poorest and emerging economies.”
Geneva, 31 July 2020 – A total of 92 low- and middle-income countries and economies will be able to access COVID-19 vaccines through Gavi’s COVAX Advance Market Commitment (AMC), the Gavi Board agreed yesterday. The Board also agreed that the Gavi secretariat will host and administer the COVAX Facility, the umbrella mechanism to which 78 countries have already submitted written expressions of interest.

“We are facing the most severe contraction of the economy since World War Two, and this crisis will have a terrible impact on the poorest and emerging economies,” said Dr Ngozi Okonjo-Iweala, Chair of the Gavi Board. “These countries will have limited resources to access future COVID-19 vaccines; it is our duty to support them. Without this support the majority of the world’s population will continue to suffer from this disease even after we’ve developed a tool to tackle it. We now can stop this from happening.”

The 92 low- and middle-income countries and economies approved by the Gavi Board will be able to access vaccines through the COVAX AMC, which will also cover at least part of the cost. The COVAX AMC launched the 4th of June at the Global Vaccine Summit draws from the lessons of the successful Pneumococcal AMC. It forms part of the COVAX Facility, a mechanism designed to guarantee rapid, fair and equitable access to COVID-19 vaccines worldwide. COVAX will enable countries to have access to the world’s largest and most diverse COVID-19 vaccine portfolio. This means that, even if separate bilateral deals with vaccine manufacturers exist, through the Facility countries stand a far better chance of getting access to the vaccine or vaccines that prove to be most effective.

The high- and middle-income economies that have already submitted expressions of interest in the COVAX Facility will need now to enter into a legally binding agreement to purchase doses through the Facility. This commitment will need to be confirmed in the next month by making upfront financial contributions, enabling the Facility to enter into manufacturer agreements for future vaccine supply.

“We now have the framework in place to ensure that every economy, particularly the poorest nations, don’t get left behind in the race for a COVID-19 vaccine,” said Dr Seth Berkley, CEO of Gavi, the Vaccine Alliance. “This disease has spread at lightning speed across the globe, which means nobody is safe until everybody is safe. That’s why we now need support and vital funding to ensure that, once a safe, effective vaccine is ready, we can work on protecting the world and not just the lucky few. Gavi will work with governments, international organisations, manufacturers and civil society organisations to ensure doses get to those who need them.”

The goal is by the end of 2021 to deliver two billion doses of safe, effective vaccines to all participating countries including the 92 AMC-eligible economies. Once a vaccine has been approved by regulatory agencies and/or prequalified by the WHO, the COVAX Facility will then purchase these vaccines with a goal to try and initially provide doses for an average of 20% of each country’s population, focusing on health care workers and the most vulnerable groups. Further doses will be made available based on financing, country need, vulnerability and potential threat, and a buffer of doses will also be maintained for emergency and humanitarian use.

The list of 92 AMC-eligible economies includes all economies with Gross National Income (GNI) per capita under US$ 4,000 plus other World Bank International Development Association
IDA)-eligible economies. While close to US$ 600 million has already been raised for the AMC, this innovative financing mechanism requires seed funding of US$ 2 billion before the end of the year to secure and guarantee doses for the 92 AMC-eligible economies. A minimum of an additional US$ 3.4 billion is estimated to be required to procure around one billion doses by the end of 2021.

The Gavi COVAX Facility forms a key part of the COVAX pillar (COVAX) of the Access to COVID-19 Tools (ACT) Accelerator, a ground-breaking global collaboration to accelerate the development, production, and equitable access to COVID-19 tests, treatments, and vaccines. COVAX is co-led by Gavi, the Coalition for Epidemic Preparedness Innovations (CEPI) and WHO, working in partnership with developed and developing country vaccine manufacturers. According to the latest estimates published by WHO, over 16.5 million people have been infected with COVID-19 and over 655,000 people have died from the disease.

Notes to editors
List of 92 Gavi COVAX AMC-eligible countries and economies (based on 2018 and 2019 World Bank GNI data)


Additional IDA eligible: Dominica, Fiji, Grenada, Guyana, Kosovo, Maldives, Marshall Islands, Samoa, St. Lucia, St. Vincent and the Grenadines, Tonga, Tuvalu.

Of the 78 countries that have expressed written interest in the Gavi COVAX Facility, 39 have agreed to be named publicly:
Andorra, Argentina, Armenia, Botswana, Brazil, Canada, Chile, Colombia, Croatia, Czech Republic, Estonia, Finland, Greece, Iceland, Ireland, Israel, Japan, Jordan, Kuwait, Lebanon, Luxembourg, Mauritius, Mexico, Monaco, Montenegro, New Zealand, North Macedonia, Norway, Palau, Portugal, Qatar, Republic of Korea, San Marino, Saudi Arabia, Seychelles, Switzerland, United Arab Emirates, United Kingdom of Great Britain & Northern Ireland, Venezuela.

Pfizer and BioNTech to Supply Japan with 120 Million Doses of their BNT162 mRNA-based Vaccine Candidate
:: Supply of 120 million doses to be provided in the first half of 2021, subject to regulatory approval
:: Agreement is part of Pfizer’s and BioNTech’s global commitment to help address the pandemic
:: Pfizer and BioNTech began a Phase 2b/3 safety and efficacy trial and remain on track to seek regulatory review as early as October 2020, and manufacture globally up to 100 million doses by the end of 2020 and approximately 1.3 billion doses by the end of 2021.

July 31, 2020

NEW YORK & MAINZ, Germany--(BUSINESS WIRE)--Pfizer Inc. (NYSE: PFE) and BioNTech SE (Nasdaq: BNTX) today announced an agreement with the Ministry of Health, Labour and Welfare (MHLW) in Japan to supply 120 million doses of BNT162 mRNA-based vaccine candidate against SARS-CoV2, subject to clinical success and regulatory approval, beginning in 2021.

Financial details of the agreement were not disclosed, but the terms were based on the timing of delivery and the volume of doses. As requested by the Government of Japan, deliveries of the vaccine candidate are planned for the first half of 2021...

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HHS, DOD Partner With Sanofi and GSK on Commercial-Scale Manufacturing Demonstration Project to Produce Millions of COVID-19 Investigational Vaccine Doses

BARDA News, July 31 2020

The U.S. Department of Health and Human Services (HHS) and Department of Defense (DoD) today announced agreements with Sanofi and GlaxoSmithKline (GSK) to support advanced development including clinical trials and large-scale manufacturing of 100 million doses of a COVID-19 investigational adjuvanted vaccine.

By funding the manufacturing effort, the federal government will own the doses that result from the demonstration project. The adjuvanted vaccine doses could be used in clinical trials or, if the U.S. Food and Drug Administration (FDA) authorizes use, as outlined in agency guidance, the doses would be distributed as part of a COVID-19 vaccination campaign.

“The portfolio of vaccines being assembled for Operation Warp Speed increases the odds that we will have at least one safe, effective vaccine as soon as the end of this year,” said HHS Secretary Alex Azar. “Today’s investment supports our latest vaccine candidate, an adjuvanted product being developed by Sanofi and GSK, all the way through clinical trials and manufacturing, with the potential to bring hundreds of millions of safe and effective doses to the American people.”

The manufacturing demonstration project will take place while clinical trials are underway. Working in parallel this way expedites the traditional vaccine development timeline. This step builds toward the U.S. government’s Operation Warp Speed goal to begin delivering millions of doses of safe and effective vaccines to the American people by the end of the year.

The Biomedical Advanced Research and Development Authority (BARDA), part of the HHS Office of the Assistant Secretary for Preparedness and Response, collaborated with the DoD Joint Program Executive Office for Chemical, Biological, Radiological and Nuclear Defense and the Army Contracting Command to provide approximately $2 billion to support late-stage development, clinical trials including a large-scale phase 3 efficacy clinical trial, and the manufacturing demonstration project. The U.S. government also has the ability to acquire up to 500 million additional doses.
The project also includes fill-finish manufacturing in the United States so that vaccine doses are packaged and ready to ship immediately if clinical trials are successful and FDA authorizes use. If these doses are used in a COVID-19 vaccination campaign, the vaccine would be available to the American people at no cost. As is customary with government-purchased vaccines, healthcare professionals could charge for the cost of administering the vaccine.

Both companies have long-standing relationships with BARDA. Today’s effort with Sanofi builds on initial vaccine development work undertaken through a flexible agreement between BARDA and Protein Sciences, part of Sanofi, and work with GSK on adjuvant for pandemic influenza vaccines.

The vaccine candidate uses an antigen from Sanofi, which stimulates the body’s immune response against the virus, based on recombinant DNA technology and is being developed using an adjuvant from GSK to enhance the immune response, reduce the amount of antigen required per dose, and improve the chances of delivering an effective vaccine that can be manufactured at scale. GSK’s manufacturing scale is supported through U.S.-based reactivation efforts funded by BARDA since 2018.

*About Operation Warp Speed (OWS):*
OWS is a partnership among components of the Department of Health and Human Services and the Department of Defense, engaging with private firms and other federal agencies, and coordinating among existing HHS-wide efforts to accelerate the development, manufacturing, and distribution of COVID-19 vaccines, therapeutics, and diagnostics.

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COVID-19 Vaccines – Discovery

**Pfizer and BioNTech Choose Lead mRNA Vaccine Candidate Against COVID-19 and Commence Pivotal Phase 2/3 Global Study**

- Companies advance nucleoside-modified messenger RNA (modRNA) candidate BNT162b2, which encodes an optimized SARS-CoV-2 full-length spike glycoprotein, at a 30 µg dose level in a 2 dose regimen into Phase 2/3 Study
- Candidate and dose level selection informed by preclinical and clinical data obtained in Phase 1/2 studies conducted in the U.S. (C4591001) and Germany (BNT162-01)
- The Phase 2/3 study protocol follows all the U.S. Food and Drug Administration (FDA) guidance on clinical trial design for COVID-19 vaccine studies.
- Phase 2/3 study of up to 30,000 participants aged 18–85 years started in the U.S. and expected to include approximately 120 sites globally
- Trial regions to include areas with significant expected SARS-CoV-2 transmission to assess whether investigational vaccine candidate, BNT162b2, is effective in preventing COVID-19
- Assuming clinical success, Pfizer and BioNTech on track to seek regulatory review as early as October 2020 and, if regulatory authorization or approval is obtained, plan to supply up to 100 million doses by the end of 2020 and approximately 1.3 billion doses by the end of 2021

July 27, 2020 05:15 PM Eastern Daylight Time
NEW YORK & MAINZ, Germany--(BUSINESS WIRE)--Pfizer Inc. (NYSE: PFE) and BioNTech SE (Nasdaq: BNTX) today announced the start of a global (except for China) Phase 2/3 safety and efficacy clinical study to evaluate a single nucleoside-modified messenger RNA (modRNA) candidate from their BNT162 mRNA-based vaccine program against SARS-CoV-2.

After extensive review of preclinical and clinical data from Phase 1/2 clinical trials, and in consultation with the U.S. Food and Drug Administration’s Center for Biologics Evaluation and Research (CBER) and other global regulators, Pfizer and BioNTech have chosen to advance their BNT162b2 vaccine candidate into the Phase 2/3 study, at a 30 µg dose level in a 2 dose regimen. BNT162b2, which recently received U.S. Food and Drug Administration (FDA) Fast Track designation, encodes an optimized SARS-CoV-2 full length spike glycoprotein (S), which is the target of virus neutralizing antibodies.

“Our selection of the BNT162b2 vaccine candidate and its advancement into a Phase 2/3 study are the culmination of an extensive, collaborative and unprecedented R&D program involving Pfizer, BioNTech, clinical investigators, and study participants with a singular focus of developing a safe and effective COVID-19 RNA vaccine. The Phase 2/3 study protocol follows all the U.S. Food and Drug Administration (FDA) guidance on clinical trial design for COVID-19 vaccine studies,” said Kathrin U. Jansen, Ph.D., Senior Vice President and Head of Vaccine Research & Development, Pfizer. “The initiation of the Phase 2/3 trial is a major step forward in our progress toward providing a potential vaccine to help fight the ongoing COVID-19 pandemic, and we look forward to generating additional data as the program progresses.”

::: MODERNAA ANNONCES PHASE 3 COVE STUDY OF mRNA VACCINE AGAINST COVID-19 (mRNA-1273) BEGINS :::

July 27, 2020

Moderna, Inc., (Nasdaq: MRNA) a clinical stage biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines to create a new generation of transformative medicines for patients, today announced that the Phase 3 study of its mRNA vaccine candidate (mRNA-1273) against COVID-19 has begun dosing participants. The Phase 3 study, called the COVE (Coronavirus Efficacy) study, is being conducted in collaboration with the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health (NIH) and the Biomedical Advanced Research and Development Authority (BARDA), part of the Office of the Assistant Secretary for Preparedness and Response at the U.S. Department of Health and Human Services.

Moderna Announces Expansion of BARDA Agreement to Support Larger Phase 3 Program for Vaccine (mRNA-1273) Against COVID-19

July 26, 2020

Moderna, Inc. (Nasdaq: MRNA), a clinical stage biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines to create a new generation of transformative medicines for patients, today announced a modification to its contract with the Biomedical Advanced Research and Development Authority (BARDA) for an additional commitment of up to $472 million to support late stage clinical development including the expanded Phase 3 study of the Company’s mRNA vaccine candidate (mRNA-1273) against COVID-19...
Single Dose of Johnson & Johnson COVID-19 Vaccine Candidate Demonstrates Robust Protection in Pre-clinical Studies

Jul 30, 2020

:: Study published in Nature shows J&J's investigational SARS-CoV-2 vaccine elicits a strong immune response that protects against subsequent infection
:: First-in-human Phase 1/2a clinical trial now underway in United States and Belgium; Phase 3 clinical trial expected to commence in September

COVID-19 Vaccines Logistics/Delivery – Opinion/Analysis

What the government must do to successfully administer a covid-19 vaccine

Opinion by Ezekiel J. Emanuel and Topher Spiro
Washington Post   July 31, 2020 at 1:48 p.m. EDT
Ezekiel J. Emanuel is vice provost of the University of Pennsylvania and a member of Joe Biden's public health advisory committee. Topher Spiro is the vice president for health policy at the Center for American Progress.

In the all-important search for a covid-19 vaccine, the news seems promising. Several candidates have been found that increase antibodies with tolerable side effects. Worldwide, six have reached the final stage of testing and are now being administered to thousands of subjects to assess the vaccines’ effectiveness and safety.

But once a vaccine is found, the process of packaging, distributing and administering it to achieve herd immunity also presents significant challenges. Many months will pass between proving a vaccine is effective and being able to offer injections to 300 million Americans. Given the country’s covid-19 response so far, it’s not surprising that we are already behind.

Projections are that we will need to administer two vaccine doses, one month apart. And if the vaccine’s effectiveness is temporary, which seems likely, we may have to repeat this every 12 months. What does our government have to do to make that happen? In a report for the Center for American Progress, “A Comprehensive COVID-19 Vaccine Plan,” we identify four major potential bottlenecks — and solutions.

First, “fill and finish.” Vaccines must be put into specialized glass vials, and so far, the government has only contracted for 164 million glass vials, with the timing unknown. Corning, the major U.S. manufacturer, is expanding capacity, but it is likely to be able to produce only an additional 14 million or so vials a month with current funding.

The plants necessary to put vaccine into the vials are also highly specialized; they must be 100 times more sterile than a hospital operating room. Worldwide, these fill-finish plants are collectively operating at near-capacity. It is unclear precisely how much capacity there is in the
United States, but in October 2018, a government assessment concluded “operational capability has not been adequately developed.”

It takes up to five years to build one fill-finish plant from scratch, but we can expand existing plants by installing new lines faster. Pfizer is retrofitting existing facilities for about $40 million per facility, and other companies are expanding or could expand their facilities.

We recommend that the government invest in retrofitting existing facilities, at an estimated cost of $400 million, and expanding the production of glass vials, as well as building new fill-finish facilities for 100 million doses, for $1.4 billion. Critically, the Defense Production Act must be invoked to free up and coordinate the nation’s existing manufacturing capabilities.

**Second, syringes and needles.** Once the vaccine is made and shipped, it has to be injected, requiring 650 million to 850 million syringes and needles. These are also in short supply. The five existing manufacturers produce 663 million injection devices per year, but most are already earmarked for many other medical purposes. The government has entered into contracts with BD, the largest manufacturer, to build production lines for an additional 320 million units. But this will take 12 months — and further production capacity is needed. The government needs to quickly invest at least $70 million to build two new manufacturing lines. It should also look into alternative delivery devices.

**Third, payment.** Paying for vaccines is a complex system involving physicians, pharmacies, insurers, Medicare and Medicaid, with lots of Americans falling through the cracks. In the early 1990s, Congress established the Centers for Disease Control and Prevention’s Vaccines for Children program for uninsured and low-income families. In 2009, the federal government provided free H1N1 vaccines.

The same has to occur for covid-19, and it will be comparatively cheap. The government should pay a maximum of $20 per dose — well within the range of existing CDC vaccine prices — meaning it would cost less than $20 billion to vaccinate the whole country.

**Fourth, delivery.** Traditionally, we administer vaccines through a patchwork of physician offices, pharmacies and public health clinics, with mixed success. Only about 45 percent of adults get an annual flu shot. To quell covid-19, we need to get 70 percent immunity, which probably means about 90 percent of Americans need to be vaccinated. To reach this goal, we calculate that we will need at least 7,300 community vaccination clinics, each providing nearly 30,000 doses per month. Some could be run by community health centers, CVS, Walmart and other existing vaccination or testing sites. But many new sites would also be needed. Collectively, we estimate these clinics would cost about $10 billion.

We all hope that by early 2021, pharmaceutical companies will be manufacturing an effective covid-19 vaccine. But it will do us no good unless we can package, ship and administer it to 300 million Americans — twice. We estimate that altogether it will cost less than $45 billion — an insignificant amount for a disease that has cost trillions of dollars in economic losses. More of a challenge is the need for a well-coordinated federal government effort to do the job. We need stronger leadership to ensure all Americans can get a vaccine and we can return to normalcy by fall 2021.
Editorial
The COVID-19 infodemic

The Lancet Infectious Diseases
“We're not just fighting a pandemic; we're fighting an infodemic,” said Tedros Adhanom Ghebreyesus, WHO's director-general, at the 2020 Munich Security Conference. Fake news, misinformation, and conspiracy theories have become prevalent in the age of social media and have skyrocketed since the beginning of the COVID-19 pandemic. This situation is extremely concerning because it undermines trust in health institutions and programmes. On June 29, WHO formally began the conversation on the global effects and management of infodemics with its 1st Infodemiology Conference that convened international experts from diverse scientific and political backgrounds.

Immediate and widespread sharing of medical and other scientific information outside of expert circles before it has been thoroughly vetted (eg, preprints) can be dangerous, especially in a pandemic. A pandemic is a rapidly evolving setting, in which researchers and medical professionals are constantly learning and contributing to dynamic adjustments in government policy. Compounding this information vortex is the fact that governments rarely make policy decisions solely on the basis of empirical evidence; political interest is key, and the two are frequently at odds. Governments want to be perceived as being in control and are too quick to provide false reassurances, as Saad Omer, director of the Yale Institute for Global Health, pointed out in one of his Infodemiology Conference talks. Consequently, incoherent government messaging and reversals in recommendations on the basis of newly emerging evidence, for example on whether masks are protective against transmission, can be misconstrued as incompetence. Comparisons have been drawn between solid leadership based on clear communication, empathy, and alignment of science and politics, such as that shown by New Zealand's Prime Minister Jacinda Ardern or German Chancellor Angela Merkel, and shambolic, self-serving, and sometimes deliberately misleading reactions, such as those of US President Donald Trump or Brazilian President Jair Bolsonaro. Such miscommunication is not helped by mass media, which are often guilty of favouring quick, sensationalist reporting rather than carefully worded scientific messages with a balanced interpretation. The outcome is erosion of public trust and a sense of helplessness, the perfect conditions for the spread of harmful misinformation that begins a vicious circle.

We and many other journals have found ourselves at the centre of the infodemic. Never before has the output of medical journals been subject to such scrutiny. From impartial communicators of peer-reviewed reports, our editorial identities are now conflated with the content that we publish because we are reaching experts and non-experts alike in an emotionally charged global environment. Although we have long worked with authors and media outlets to create factually correct, unbiased stories fit for public consumption, perhaps now is the time for a more
proactive response. Journals (including this one) should consider actively countering misinformation about themselves and the work that they publish.

Misinformation confuses by diluting the pool of legitimate information. Conspiracy theories work because they provide the comfort of an explanation in times of uncertainty and anxiety. Their messaging revolves around core emotions and values and hijacks the mental cues that we use to decide whether the source is legitimate and thus trustworthy. The most pervasive and damaging of conspiracy theories incorporate grains of truth. But who benefits from this misinformation? Claire Wardle, co-founder and director of FirstDraft identifies three aspects: financial gain, political gain, and experimental manipulation. The anti-vaccination industry is a notable example of the first: a report from the Centre for Countering Digital Hate shows that wellness and nutritional supplement companies are major backers of, and directly profit from, anti-vaccination campaigns. Worse, anti-vaccination content reaches up to 58 million online followers and is deliberately retained by social media giants, creating a cumulative advertising revenue of US$1 billion. Unfortunately, as a UNICEF analysis of the so-called Peshawar incident of April 22, 2019, shows, hesitancy against one vaccine is quickly transposed onto all vaccines and is excruciatingly difficult to reverse. None of this bodes well for the acceptance of vaccination against COVID-19.

A state of affairs cannot continue where, for example, the very existence of the COVID-19 pandemic is denied. Immediate, coordinated action is needed from the global political, corporate, and scientific community to maintain the integrity and credibility of professional expertise and rebuild public trust.

Nature Reviews Immunology
Volume 20 Issue 8, August 2020
https://www.nature.com/nri/volumes/20/issues/8

Comment | 02 July 2020
A call to arms: helping family, friends and communities navigate the COVID-19 infodemic
In this Comment, Heidi Larson discusses the COVID-19 'infodemic' and suggests the ways in which scientists can help to mitigate the spread of misinformation.
Heidi J. Larson

Emergencies

Ebola – DRC+
Public Health Emergency of International Concern (PHEIC)

Last WHO Situation Report published 23 June 2020
Emergencies

POLIO
Public Health Emergency of International Concern (PHEIC)

Polio this week as of 29 July 2020
:: As of March 2020, the programme started a spotlight focus on women leaders that have contributed to the efforts of global polio eradication. The “Women Leaders in Polio Eradication” series aims to highlight women’s leadership and their roles across the polio programme, providing insight into their work and life.
:: Eye on Eradication is a new monthly publication produced by Global Polio Eradication Initiative’s Hub for Afghanistan and Pakistan. Each month, the publication will focus on a different topic related to our collective efforts to eradicate polio from the last two polio-endemic countries: Afghanistan and Pakistan. Take a look at the first edition.

Summary of new WPV and cVDPV viruses this week (AFP cases and environmental samples):
:: Afghanistan: 10 cVDPV2 positive environmental samples
:: Pakistan: 12 WPV1 positive environmental samples, two cVDPV2 cases and five cVDPV2 positive environmental samples
:: Ghana: three cVDPV2 positive environmental samples
:: Chad: Four cVDPV2 cases
:: Democratic Republic of the Congo (DR Congo): two cVDPV2 cases
:: Guinea: eight cVDPV2 cases

:: WHO Grade 3 Emergencies, [to 1 Aug 2020]
Democratic Republic of the Congo - No new digest announcements identified
Mozambique floods - No new digest announcements identified
Nigeria - No new digest announcements identified
Somalia - No new digest announcements identified
South Sudan - No new digest announcements identified
Syrian Arab Republic - No new digest announcements identified
Yemen - No new digest announcements identified

:: WHO Grade 2 Emergencies, [to 1 Aug 2020]
Afghanistan - No new digest announcements identified
Angola - No new digest announcements identified
Burkina Faso [in French] - No new digest announcements identified
Burundi - No new digest announcements identified
Cameroun - No new digest announcements identified
Central African Republic - No new digest announcements identified
Ethiopia - No new digest announcements identified
Iran floods 2019 - No new digest announcements identified
Iraq - No new digest announcements identified
Libya - No new digest announcements identified
Malawi - No new digest announcements identified
Measles in Europe - No new digest announcements identified
MERS-CoV - No new digest announcements identified
Myanmar - No new digest announcements identified
Niger - No new digest announcements identified
occupied Palestinian territory - No new digest announcements identified
HIV in Pakistan - No new digest announcements identified
Sao Tome and Principe Necrotizing Cellulitis (2017) - No new digest announcements identified
Sudan - No new digest announcements identified
Ukraine - No new digest announcements identified
Zimbabwe - No new digest announcements identified

WHO Grade 1 Emergencies [to 1 Aug 2020]
Chad - No new digest announcements identified
Djibouti – Page not responding at inquiry
Kenya - No new digest announcements identified
Mali - No new digest announcements identified
Namibia - viral hepatitis - No new digest announcements identified
Tanzania - No new digest announcements identified

UN OCHA – L3 Emergencies
The UN and its humanitarian partners are currently responding to three ‘L3’ emergencies. This is the global humanitarian system’s classification for the response to the most severe, large-scale humanitarian crises.

Syrian Arab Republic
:: Syrian Arab Republic: North East Syria: Al Hol camp (as of 26 July 2020)
:: Recent Developments in Northwest Syria - Situation Report No. 18 - As of 25 July 2020

Yemen - No new digest announcements identified

UN OCHA – Corporate Emergencies
When the USG/ERC declares a Corporate Emergency Response, all OCHA offices, branches and sections provide their full support to response activities both at HQ and in the field.

East Africa Locust Infestation
:: Desert Locust situation update - 29 July 2020

COVID-19

WHO & Regional Offices [to 1 Aug 2020]
1 August 2020  News release
**COVID-19 Emergency Committee highlights need for response efforts over long term**
[See Milestones above for detail]

1 August 2020  Statement
**Statement on the fourth meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of coronavirus disease (COVID-19)**
[See Milestones above for detail]

31 July 2020  Statement
**World Breastfeeding Week 2020 Message**

27 July 2020  Statement
**WHO statement on heated tobacco products and the US FDA decision regarding IQOS**

Weekly Epidemiological Record, 31 July 2020, vol. 95, 31 (pp. 361–368)
Progress in hepatitis B control – South-East Asia Region, 2016–2019
COVID-19 update

WHO Regional Offices
Selected Press Releases, Announcements

**WHO African Region AFRO**
::  **Tackling COVID-19 fear and stigma**  23 July 2020
Hesitancy to get tested, avoiding contact tracers or wariness of what the neighbours will say: the COVID-19 pandemic has triggered a variety of reactions among some Ouagadougou residents that have complicated timely response.
::  **Striving to keep health worker infections at bay**  23 July 2020
Accra – Evelyn Narki Dowuona bears a great responsibility at Ga East Municipal Hospital in the Ghanaian capital Accra, where, as in much of the world, the COVID-19 pandemic has raised the risks of health care work. Drawing on more than 10 years of nursing experience, the quality and safety manager ensures that measures to curb infection are strictly observed. “We want to cause no harm to the patients while giving them care. We also want to ensure that our staff are safe in their working environment,” she says.

**WHO Region of the Americas PAHO**
WHO South-East Asia Region SEARO
No new digest content identified

WHO European Region EURO
:: Cooperation and coordination to improve maternal and infant health in the Russian Federation 31-07-2020
:: Russian experts to support COVID-19 laboratory capacity in Tajikistan 31-07-2020

WHO Eastern Mediterranean Region EMRO
:: Africa closes in on one million COVID-19 cases
   Brazzaville/Cairo, 30 July 2020 – COVID-19 infections in Africa will exceed one million cases in the coming days as the pandemic surges in several hotspot countries. In a little more than 3 weeks, the number of cases on the continent almost doubled to 889 457, with 18 806 deaths...
:: Statement by WHO’s Regional Director on the need for continued vigilance during the COVID-19 pandemic 29 July 2020
:: Safe practices during Eid al-Adha in the context of COVID-19 28 July 2020
:: Member States must take action to ensure the safety and health of migrant and displaced populations, warn WHO and IOM

WHO Western Pacific Region
No new digest content identified

CDC/ACIP [to 1 Aug 2020]
http://www.cdc.gov/media/index.html
https://www.cdc.gov/vaccines/acip/index.html
Latest News Releases
Study highlights importance of CDC mitigation strategies
Friday, July 31, 2020
Today’s MMWR on SARS-CoV-2 transmission at an overnight camp in Georgia found efficient spread of the virus among campers and staff while noting key steps to minimize the risk for SARS-CoV-2 introduction and transmission in camps were not strictly followed.

The camp adopted some mitigation steps found in CDC Suggestions for Youth and Summer Camps to minimize the risk for SARS-CoV-2 introduction and transmission to include cohorting of attendees by cabin and enhanced cleaning and disinfection. However, the camp did not require the 363 campers to wear masks, only the staff. Additionally, camp attendees engaged in a variety of indoor and outdoor activities that included daily vigorous singing and cheering, which might have contributed to transmission.

Settings, like multi-day, overnight summer camps, pose a unique challenge when it comes to preventing the spread of infectious diseases considering the amount of time campers and staff members spend in close proximity. Correct and consistent use of cloth masks, rigorous cleaning and sanitizing, social distancing, and frequent hand washing strategies, which are
recommended in CDC’s recently released guidance to reopen America’s schools, are critical to prevent transmission of the virus in settings involving children and are our greatest tools to prevent COVID-19.

For research on disease transmission in a congregate setting SARS-CoV-2 Infections and Serologic Responses from a Sample of U.S. Navy Service Members — USS Theodore Roosevelt, April 2020.

**CMS and CDC announce provider reimbursement available for counseling patients to self-isolate at time of COVID-19 testing**
Thursday, July 30, 2020

**MMWR News Synopsis Friday, July 31, 2020**
Progress Toward Hepatitis B Control — South-East Asia Region, 2016–2019

Rebound in Routine Childhood Vaccine Administration Following Decline During the COVID-19 Pandemic — New York City, March 1 – June 27, 2020


::::::

**Africa CDC** [to 1 Aug 2020]
http://www.africacdc.org/
News

Africa CDC Receives COVID-19 test kits donation from Government of Germany
29 July 2020

::::::

**China CDC**
http://www.chinacdc.cn/en/

No new digest content identified.

**National Health Commission of the People's Republic of China**
http://en.nhc.gov.cn/
News

**August 1: Daily briefing on novel coronavirus cases in China**
2020-08-01

On July 31, 31 provincial-level regions and the Xinjiang Production and Construction Corps on the Chinese mainland reported 45 new cases of confirmed infections (6 imported cases, 4 in Shanghai municipality and 2 in Guangdong province; 39 indigenous cases, 31 in Xinjiang Uygur autonomous region and 8 in Liaoning province), no new cases of suspected infections, and no deaths...
As previously agreed, two WHO experts came to China in mid-July to have preparatory discussions for scientific cooperation on COVID-19 origin-tracing, said Foreign Ministry spokesperson Wang Wenbin at a regular press conference on 29 July. During quarantine, the WHO experts had multiple video meetings with their Chinese counterparts, where they had an in-depth review of the latest global research on the population, environmental, molecular and zoonotic sources of the virus and its transmission routes. They also discussed future research plans.

Wang noted that China and WHO share the basic understanding that origin-tracing of COVID-19 is a scientific matter and should be left to scientists to find out through international scientific research and cooperation. It is also an ongoing process that may involve multiple countries and localities, and WHO will conduct similar trips to other countries and regions if necessary. "We hope that all relevant countries will take the same, positive approach and cooperate with WHO", said Wang.

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**Announcements**

**Paul G. Allen Frontiers Group**  [to 1 Aug 2020]
News
No new digest content identified.

**BARDA – U.S. Department of HHS**  [to 1 Aug 2020]
https://www.phe.gov/about/barda/Pages/default.aspx
BARDA News
July 31, 2020: HHS, DOD Partner With Sanofi and GSK on Commercial-Scale Manufacturing Demonstration Project to Produce Millions of COVID-19 Investigational Vaccine Doses
[See Milestones above for detail]

**BMGF - Gates Foundation**  [to 1 Aug 2020]
http://www.gatesfoundation.org/Media-Center/Press-Releases
No new digest content identified.

**Bill & Melinda Gates Medical Research Institute**  [to 1 Aug 2020]
https://www.gatesmri.org/
The Bill & Melinda Gates Medical Research Institute is a non-profit biotech organization. Our mission is to develop products to fight malaria, tuberculosis, and diarrheal diseases—three major causes of mortality, poverty, and inequality in developing countries. The world has unprecedented scientific tools at its disposal; now is the time to use them to save the lives of the world's poorest people
CARB-X  [to 1 Aug 2020]
https://carb-x.org/
CARB-X is a non-profit public-private partnership dedicated to accelerating antibacterial research to tackle the global rising threat of drug-resistant bacteria.
No new digest content identified.

CEPI – Coalition for Epidemic Preparedness Innovations  [to 1 Aug 2020]
http://cepi.net/
Latest News
No new digest content identified.

EDCTP  [to 1 Aug 2020]
http://www.edctp.org/
The European & Developing Countries Clinical Trials Partnership (EDCTP) aims to accelerate the development of new or improved drugs, vaccines, microbicides and diagnostics against HIV/AIDS, tuberculosis and malaria as well as other poverty-related and neglected infectious diseases in sub-Saharan Africa, with a focus on phase II and III clinical trials
Latest news
No new digest content identified.

Emory Vaccine Center  [to 1 Aug 2020]
http://www.vaccines.emory.edu/
Vaccine Center News
No new digest content identified.

European Medicines Agency  [to 1 Aug 2020]
News & Press Releases
News: Global regulatory workshop on COVID-19 real-world evidence and observational studies
Last updated: 31/07/2020
Vaccines surveillance and vigilance, collaboration on pregnancy studies and building international patient cohorts were the main topics discussed during the 3rd workshop on observational studies of real-world data in the context of COVID-19. The workshop, organised under the umbrella of the International Coalition of Medicines Regulatory Authorities (ICMRA), was co-chaired by Health Canada and the European Medicines Agency (EMA) and took place on 22 July 2020. The main findings of the workshop are summarised in a report.

News: Global regulatory workshop on COVID-19 therapeutics #2: agreement on acceptable endpoints for clinical trials
Last updated: 31/07/2020
News: Meeting highlights from the Committee for Medicinal Products for Human Use (CHMP) 20-23 July 2020
CHMP, Last updated: 24/07/2020

European Vaccine Initiative [to 1 Aug 2020]
http://www.euvaccine.eu/
Latest News
No new digest content identified.

FDA [to 1 Aug 2020]
https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/default.htm
Press Announcements
July 31, 2020 - Coronavirus (COVID-19) Update: FDA Authorizes First Tests that Estimate a Patient’s Antibodies from Past SARS-CoV-2 Infection

July 31, 2020 - Coronavirus (COVID-19) Update: Daily Roundup July 31, 2020

July 30, 2020 - Coronavirus (COVID-19) Update: Daily Roundup July 30, 2020


July 29, 2020 - Coronavirus (COVID-19) Update: FDA Posts New Template for At-Home and Over-the-Counter Diagnostic Tests for Use in Non-Lab Settings, Such as Homes, Offices or Schools


Fondation Merieux [to 1 Aug 2020]
http://www.fondation-merieux.org/
News, Events
No new digest content identified.

Gavi [to 1 Aug 2020]
https://www.gavi.org/
News releases
31 July 2020
92 low- and middle-income economies eligible to get access to COVID-19 vaccines through Gavi COVAX AMC
[See Milestones above for detail]

27 July 2020
Gavi helps immunise 65 million children in 2019, though COVID-19 puts progress under pressure

:: New analysis of WHO/UNICEF data by Gavi, the Vaccine Alliance, shows the gap in vaccine coverage between Gavi-supported lower-income countries and wealthier countries has shrunk to record lows

:: Coverage for newer vaccines, such as those that tackle pneumonia and diarrhoea, now higher in Gavi-supported countries than the global average

:: COVID-19 pandemic makes the task of reaching those children still missing out on vaccines even more urgent

GHIT Fund [to 1 Aug 2020]
https://www.ghitfund.org/newsroom/press
GHIT was set up in 2012 with the aim of developing new tools to tackle infectious diseases that No new digest content identified.

Global Fund [to 1 Aug 2020]
COVID-19 Information
28 July 2020
Situation Report
... The Global Fund is providing up to US$1 billion and operational flexibility to help countries fight COVID-19, shore up health systems and mitigate the impacts on lifesaving HIV, TB and malaria programs. Emergency funding is available through the US$500 million COVID-19 Response Mechanism and additional grant flexibilities of up to US$500 million...
...The COVID-19 Guidance Note on Community, Rights and Gender is also available in Spanish, French and Russian...

Hilleman Laboratories [to 1 Aug 2020]
http://www.hillemanlabs.org/
No new digest content identified.

Human Vaccines Project [to 1 Aug 2020]
http://www.humanvaccinesproject.org/media/press-releases/
No new digest content identified.

IAVI [to 1 Aug 2020]
https://www.iavi.org/newsroom
Features
July 31, 2020
Contributing to HIV Vaccine Research in Africa: USAID-Funded Science Capacity Building Partnership with IAVI
International Coalition of Medicines Regulatory Authorities [ICMRA]
Selected Statements, Press Releases, Research
No new digest content identified.

International Generic and Biosimilar Medicines Association [IGBA]
https://www.igbamedicines.org/
News
No new digest content identified.

IFFIm
http://www.iffim.org/
Announcements
No new digest content identified.

IFRC  [to 1 Aug 2020]
Selected Press Releases, Announcements
Bahamas
Red Cross in Bahamas preparing for Hurricane Isaias, while balancing COVID-19 response and Hurricane Dorian recovery
Panama/Port of Spain, 31 July 2020 — The International Federation of Red Cross and Red Crescent Societies (IFRC) is working alongside the Bahamas Red Cross to prepare for Hurricane Isaias. A hurricane warning is in effect in the Bahamas with storm surg ...
31 July 2020

International Red Cross and Red Crescent Movement urges all nations to end the nuclear era
Geneva, 31 July 2020 –Seventy-five years ago, on the morning of August 6, 1945, a B-29 warplane released a terrifying new weapon on Hiroshima. The nuclear bomb wiped out the city, instantly killing an estimated 70,000 people and leaving tens of thousand ...
31 July 2020

Europe
Red Cross calls on people to check on neighbours and loved ones during dangerous heatwave
As temperatures soar across Europe, the International Federation of Red Cross and Red Crescent Societies (IFRC) is calling on the public to check on neighbours and loved ones who might struggle to cope with the searing heat.
29 July 2020

Asia Pacific, Philippines
Philippines: Red Cross urges greater vigilance as COVID-19 cases fill hospitals
Manila, 28 July 2020 – Red Cross is urging everyone in the Philippines to be even more vigilant as COVID-19 cases continue to jump by more than a thousand each day following the easing of quarantine restrictions. More than 80,000 people in the country ...

28 July 2020

**IVAC** [to 1 Aug 2020]
https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html

**Updates**

**Joint Statement on COVID-19 Vaccines & Older Adults**
July 2020

As WHO, CEPI, and Gavi meet and consider how best to manage the planning and deployment of a COVID-19 vaccine, we feel the voice of older adults, one of the most vulnerable, important, and essential groups should feature prominently in the COVAX process.

In keeping with COVAX’s stated goal of equity, we recommend:

[1] Prioritizing development of a COVID-19 vaccine that elicits a strong immune response in older adults, going beyond the stated minimum efficacy in the target product profile efficacy. To this end, recruitment of older adults in the development process is essential.

[2] Including a broader range of stakeholders with expertise in older adults both within and outside of the immunization and health sector on COVAX working groups to represent important perspectives relevant to low- and middle-income countries, particularly for vulnerable populations.

[3] Supporting efforts to evaluate current preparedness of health systems and other channels to safely deliver a COVID-19 vaccine specifically to adults and those most vulnerable.

[4] Gavi should consider support for influenza vaccines for older populations now to gain experience immunizing older groups and other vulnerable populations to protect them against further impact due to COVID-19. Global partners should also prioritize support for certain countries to strengthen their program.

These key recommendations are proposed as being part of the solution, and we strongly believe many hands and minds across sectors and disciplines are required to successfully deploy vaccines to older adults.

[Download Joint Statement Here](https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html)

**IVI** [to 1 Aug 2020]
http://www.ivi.int/

**Selected IVI News & Announcements**

No new digest content identified.

**JEE Alliance** [to 1 Aug 2020]
https://www.jeealliance.org/

**Selected News and Events**

No new digest content identified.
Libya: “They were shot and killed as they fled arbitrary detention”
Project Update 31 Jul 2020

Greece
MSF forced to close COVID-19 centre on Lesbos
Press Release 30 Jul 2020

Coronavirus COVID-19 pandemic
Diagnostic company Cepheid charging four times more than it should for COVID-19 tests
Press Release 28 Jul 2020
MSF urges Cepheid to stop profiteering off the COVID-19 pandemic and lower the price of desperately-needed COVID-19 tests.

National Vaccine Program Office - U.S. HHS [to 1 Aug 2020]
https://www.hhs.gov/vaccines/about/index.html
NVAC Meetings
September 23-24, 2020 Meeting (Virtual)
February 4-5, 2021 NVAC Meeting
June 16-17, 2021 NVAC Meeting

NIH [to 1 Aug 2020]
Selected News Releases
NIH delivering new COVID-19 testing technologies to meet U.S. demand
Friday, July 31, 2020
The National Institutes of Health is investing $248.7 million in new technologies to address challenges associated with COVID-19 testing (which detects SARS-CoV-2 coronavirus). NIH’s Rapid Acceleration of Diagnostics (RADx) initiative has awarded contracts to seven biomedical diagnostic companies to support a range of new lab-based and point-of-care tests that could significantly increase the number, type and availability of tests by millions per week as early as September 2020. With national demand estimated to be millions more tests per day above current levels, these technologies are expected to make a significant contribution to expanding the nation’s testing capacity.

Experimental COVID-19 vaccine protects upper and lower airways in nonhuman primates
July 28, 2020 — NIH-led study of mRNA vaccine supports advance to Phase 3 human trials. Two doses of an experimental vaccine to prevent coronavirus disease 2019 (COVID-19) induced robust immune responses and rapidly controlled the coronavirus in the upper and lower airways of rhesus macaques exposed to SARS-CoV-2, report scientists from the National
Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health. SARS-CoV-2 is the virus that causes COVID-19. The candidate vaccine, mRNA-1273, was co-developed by scientists at the NIAID Vaccine Research Center and at Moderna, Inc., Cambridge, Massachusetts.

**NIH to invest $58M to catalyze data science and health research innovation in Africa**
July 27, 2020 — The new five-year program will leverage existing data and technologies to develop solutions for the continent’s most pressing clinical and public health problems.

**Phase 3 clinical trial of investigational vaccine for COVID-19 begins**
July 27, 2020 — *Multi-site trial to test candidate developed by Moderna and NIH.*

A Phase 3 clinical trial designed to evaluate if an investigational vaccine can prevent symptomatic coronavirus disease 2019 (COVID-19) in adults has begun. The vaccine, known as mRNA-1273, was co-developed by the Cambridge, Massachusetts-based biotechnology company Moderna, Inc., and the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health. The trial, which will be conducted at U.S. clinical research sites, is expected to enroll approximately 30,000 adult volunteers who do not have COVID-19.

**PATH** [to 1 Aug 2020]
https://www.path.org/media-center/

*Selected Announcements*

**Lifesaving umbilical cord product receives pre-qualification from West African Health Organization**
July 30, 2020 by PATH
Chlorxy-G Gel, a 7.1% chlorhexidine digluconate gel manufactured in Nigeria, receives approval for introduction in 15 countries

**Sabin Vaccine Institute** [to 1 Aug 2020]
http://www.sabin.org/updates/pressreleases

*Statements and Press Releases*

No new digest content identified.

**UNAIDS** [to 1 Aug 2020]
http://www.unaids.org/en

*Selected Press Releases/Reports/Statements*
30 July 2020

**Celebrating the life of Inviolata Mbwavi, Kenyan AIDS activist**
29 July 2020

**Guyana community organization serves sex workers on the edge during COVID-19**
28 July 2020

**#TogetherWeWin: inspiring examples of solidarity during the COVID-19 outbreak in eastern Europe and central Asia**
**UNICEF** [to 1 Aug 2020]

https://www.unicef.org/media/press-releases

**Selected Press releases/Announcements**

**Press release**

07/30/2020

**UNICEF and faith groups release new guidance on how to support communities in times of COVID-19**

Guidance advises faith leaders and communities on how to practice faith safely, fight misinformation, and support children and vulnerable populations

**Press release**

07/29/2020

**A third of the world’s children poisoned by lead, new groundbreaking analysis says**

UNICEF and Pure Earth call for urgent action to abolish dangerous practices including the informal recycling of lead acid batteries

**Statement**

07/28/2020

**Five children killed and nine injured in an attack on a village in West Darfur, Sudan**

Statement from Mohammed Ould Bouasria, Acting UNICEF Representative in Sudan

**Press release**

07/27/2020

**UNICEF: An additional 6.7 million children under 5 could suffer from wasting this year due to COVID-19**

As part of its Reimagine campaign, UNICEF calls for accelerated action to prevent and treat malnutrition caused by pandemic as humanitarian community appeals for $2.4 billion to improve maternal and child nutrition

**Unitaid** [to 1 Aug 2020]

https://unitaid.org/

**Featured News**

28 July 2020

**Unitaid celebrates progress against hepatitis C through simpler medicines and tests**

Geneva – On the occasion of World Hepatitis Day, Unitaid celebrates the progress made in the fight against Hepatitis C in the past few years. Notably, thanks to quality medicines and tests that are simpler to administer, affordable and adapted to the needs of people in low- and middle-income countries.

Close to 400,000 people continue dying of Hepatitis C globally each year. Antiviral medicines can cure more than 95 percent of people with the infection, but access to diagnosis and treatment has typically been low. Less than a decade ago, Hepatitis C was difficult and expensive to treat even in high-income countries, and new medicines where out of reach for people in lower-income countries...
Vaccination Acceptance Research Network (VARN) [to 1 Aug 2020]
https://vaccineacceptance.org/news.html#header1-2r
Announcements
No new digest content identified.

Vaccine Confidence Project [to 1 Aug 2020]
http://www.vaccineconfidence.org/
Latest News & Archive
Public sentiments and emotions around COVID-19
1 Aug 2020

Vaccine Education Center – Children’s Hospital of Philadelphia [to 1 Aug 2020]
http://www.chop.edu/centers-programs/vaccine-education-center
No new digest content identified.

Wellcome Trust [to 1 Aug 2020]
https://wellcome.ac.uk/news
Opinion | 29 July 2020
How can we make social media a healthier platform for health information?
Carla Ross, Research and Evidence Lead, Wellcome
It’s time to see health misinformation differently. We’re calling for the health and research sector to step up and play its role in creating a healthier internet.

The Wistar Institute [to 1 Aug 2020]
Press Releases
Jul. 28, 2020
The Wistar Institute and Cheyney University Forge Strategic Collaboration to Expand Life Science Research Training and Business Development Opportunities in Pennsylvania
Collaboration extends impact of Wistar’s biomedical science and workforce development programs and Cheyney University’s educational and entrepreneurial communities

WFPHA: World Federation of Public Health Associations [to 1 Aug 2020]
https://www.wfpha.org/
Latest News
No new digest content identified.

World Organisation for Animal Health (OIE) [to 1 Aug 2020]
No new digest content identified.
ARM [Alliance for Regenerative Medicine] [to 1 Aug 2020]
Press Releases
Alliance for Regenerative Medicine Calls for Multi-Stakeholder Pan-European Initiative to Fast-Track Real World Evidence in Support of Patient Access to Advanced Therapies
July 29, 2020

BIO [to 1 Aug 2020]
Press Releases
No new digest content identified.

DCVMN – Developing Country Vaccine Manufacturers Network [to 1 Aug 2020]
http://www.dcvmn.org/
News; Upcoming events
No new digest content identified.

IFPMA [to 1 Aug 2020]
http://www.ifpma.org/resources/news-releases/
Selected Press Releases, Statements, Publications
IFPMA Points to Consider for Virtual GMP Inspections - an Industry perspective
29 July 2020

ICBA – International Council of Biotechnology Associations [to 1 Aug 2020]
https://internationalbiotech.org/
News
No new digest content identified.

PhRMA [to 1 Aug 2020]
http://www.phrma.org/
Selected Press Releases, Statements
No new digest content identified.

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Journal Watch
Vaccines and Global Health: The Week in Review continues its weekly scanning of key peer-reviewed journals to identify and cite articles, commentary and editorials, books reviews and other content supporting our focus on vaccine ethics and policy. Journal Watch is not intended
to be exhaustive, but indicative of themes and issues the Center is actively tracking. We selectively provide full text of some editorial and comment articles that are specifically relevant to our work. Successful access to some of the links provided may require subscription or other access arrangement unique to the publisher.

If you would like to suggest other journal titles to include in this service, please contact David Curry at: david.r.curry@centerforvaccineethicsandpolicy.org

American Journal of Infection Control
August 2020 Volume 48, Issue 8, p859-974
http://www.ajicjournal.org/current
State of the Science Review
Infection control practices in children during COVID-19 pandemic: Differences from adults
İlker Devrim, Nuri Bayram
p933–939
Published online: May 25, 2020
Highlights
:: High rate of asymptomatic children may increase the spreading of the disease.
:: Healthcare workers in the pediatric hospitals are under great risk for exposure.
:: Infection control precautions play crucial role to prevent the transmissions to HCWs.
:: Personal protective equipment use is a very important strategy for protection of HCWs.

American Journal of Preventive Medicine
August 2020 Volume 59, Issue 2, p149-308
http://www.ajpmonline.org/current
Research Briefs
Rhode Island Human Papillomavirus Vaccine School Entry Requirement Using Provider-Verified Report
Erika L. Thompson, Melvin D. Livingston III, Ellen M. Daley, Debbie Saslow, Gregory D. Zimet
p274–277
Published online: May 16, 2020

Review Articles
Immunogenicity of Hepatitis B Vaccine in Preterm or Low Birth Weight Infants: A Meta-Analysis
Wei Fan, Miao Zhang, Yi-Min Zhu, Ying-Jie Zheng
p278–287
Published online: June 18, 2020

American Journal of Public Health
August 2020 110(8)
http://ajph.aphapublications.org/toc/ajph/current
VULNERABLE POPULATIONS
Nonrelocatable Occupations at Increased Risk During Pandemics: United States, 2018
The COVID-19 Pandemic: A Watershed Moment to Strengthen Food Security Across the US Food System
Chronic Disease, Other Chronic Disease, Nutrition/Food, Infections, Socioeconomic Factors, Epidemiology, Other Infections
Carmen Byker Shanks, Melanie D. Hingle, Courtney A. Parks and Amy L. Yaroch
110(8), pp. 1126–1132

Strategies Mitigating the Impact of the COVID-19 Pandemic on Incarcerated Populations
Mental Health, Infections, Health Law, Community Health, Health Reform
Lauren K. Robinson, Reuben Heyman-Kantor and Cara Angelotta
110(8), pp. 1133–1134

Policy Recommendations to Address High Risk of COVID-19 Among Immigrants
Immigration, Health Policy, Community Health
Brent A. Langellier
110(8), pp. 1135–1136

Free Vaccinations for All Is, Morally and Economically, the Right Way to Prepare for Pandemic and Seasonal Respiratory Infections
Global Health, Immunization/Vaccines, Infections, Prevention, Community Health, Other Infections
Ryan P. Gilley and Peter H. Dube
110(8), pp. 1143–1144

WHO
COVID-19, China, the World Health Organization, and the Limits of International Health Diplomacy
Global Health, Public Health Practice, Epidemiology
Theodore M. Brown and Susan Ladwig
110(8), pp. 1149–1151

ETHICS
Ethical Pandemic Control Through the Public Health Code of Ethics
Public Health Practice, Public Health Workers, Health Policy, Epidemiology, Ethics
James C. Thomas and Nabarun Dasgupta
110(8), pp. 1171–1172

American Journal of Tropical Medicine and Hygiene
Volume 103, Issue 1, July 2020
http://www.ajtmh.org/content/journals/14761645/103/1
[Reviewed earlier]
Annals of Internal Medicine
21 July 2020  Volume 173, Issue 2
http://annals.org/aim/issue

Special Article
Should Clinicians Use Chloroquine or Hydroxychloroquine Alone or in Combination With Azithromycin for the Prophylaxis or Treatment of COVID-19? Living Practice Points From the American College of Physicians (Version 1)
FREE
Amir Qaseem, MD, PhD, MHA, Jennifer Yost, RN, PhD, Itziar Etxeandia-Ikobaltzeta, PharmD, PhD, ... et al.

Clinicians must have access to the best available evidence to inform point-of-care decisions about the use of chloroquine and hydroxychloroquine, with or without azithromycin, in patients with COVID-19. This article provides advice from the American College of Physicians for clinicians and will be updated as new evidence becomes available.

Artificial Intelligence – An International Journal
Volume 285  August 2020
[Reviewed earlier]

BMC Cost Effectiveness and Resource Allocation
http://resource-allocation.biomedcentral.com/
(Accessed 1 Aug 2020)
[No new digest content identified]

BMJ Global Health
July 2020 - Volume 5 - 7
https://gh.bmj.com/content/5/7
[Reviewed earlier]

BMC Health Services Research
http://www.biomedcentral.com/bmchealthservres/content
(Accessed 1 Aug 2020)
The current landscape of pre-exposure prophylaxis service delivery models for HIV prevention: a scoping review
Strengthening HIV prevention is imperative given the continued high HIV incidence worldwide. The introduction of oral PrEP as a new biomedical HIV prevention tool can be a potential game changer because of its...
Authors: Jef Vanhamel, Anke Rotsaert, Thijs Reyniers, Christiana Nöstlinger, Marie Laga, Ella Van Landeghem and Bea Vuylsteke
Citation: BMC Health Services Research 2020 20:704
Content type: Research article
Mapping the situation of research on coronavirus disease-19 (COVID-19): a preliminary bibliometric analysis during the early stage of the outbreak

The novel coronavirus, named as 2019-nCoV or coronavirus disease 2019 (COVID-19), has recently appeared in China and has spread worldwide, presenting a health threat to the global community. Therefore, it is i...

Authors: Sa’ed H. Zyoud and Samah W. Al-Jabi
Citation: BMC Infectious Diseases 2020 20:561
Content type: Research article
Published on: 1 August 2020

Identifying and combating the impacts of COVID-19 on malaria

The COVID-19 pandemic has resulted in millions of infections, hundreds of thousands of deaths and major societal disruption due to lockdowns and other restrictions introduced to limit disease spread. Relativel...

Authors: Stephen J. Rogerson, James G. Beeson, Moses Laman, Jeanne Rini Poespoprodjo, Timothy William, Julie A. Simpson and Ric N. Price
Citation: BMC Medicine 2020 18:239
Content type: Opinion
Published on: 30 July 2020
Refugees and COVID-19: achieving a comprehensive public health response
— Qais Alemi, Carl Stempel, Hafifa Siddiq & Eunice Kim
http://dx.doi.org/10.2471/BLT.20.271080

Millions of refugees worldwide are exposed to violence, family separation, culture loss and exile. The coronavirus disease 2019 (COVID-19) exposes these populations to a new threat, one that could prove to be more devastating than the events forcing them to flee their homelands.

Refugees are vulnerable to COVID-19,1 as they live in conditions that disproportionately increase their risk of contagion. For example, in densely populated refugee camps, social distancing is challenging and if basic sanitation is lacking, proper hand hygiene is close to impossible.2 Projections in Cox’s Bazar, Bangladesh, which hosts over 600 000 Rohingya refugees, suggest that a COVID-19 outbreak could exhaust medical resources and overwhelm camp hospitals within 58 days, which would lead to a rise in deaths from other infectious diseases, such as malaria.2 Although limited evidence exists on whether infectious diseases increase the risk of COVID-19, the World Health Organization anticipates that people who have both COVID-19 and other infectious diseases, such as tuberculosis, may have poorer treatment outcomes, especially if tuberculosis treatment is interrupted.3 This prediction is alarming, considering that tuberculosis and malaria are highly prevalent in refugee populations, as are noncommunicable diseases, such as type 2 diabetes,4,5 known to increase susceptibility to severe COVID-19. This situation is compounded by language barriers that refugees face in host communities and their limited access to health care for obtaining health information, testing and treatment, which some may even avoid out of fears of being deported.4...

POLICY & PRACTICE
Personal digital health hubs for multiple conditions
— Mellick J Chehade, Lalit Yadav, Asangi Jayatilaka, Tiffany K Gill & Edward Palmer
http://dx.doi.org/10.2471/BLT.19.249136

PERSPECTIVES
**Value-sensitive design and global digital health**  
— Karin R Jongsma & Fleur Jongepier  
http://dx.doi.org/10.2471/BLT.19.237362

**Child Care, Health and Development**  
Volume 46, Issue 4  
Pages: 397-536  
July 2020  
https://onlinelibrary.wiley.com/toc/13652214/current  
[Reviewed earlier]

**Clinical Pharmacology & Therapeutics**  
Volume 108, Issue 1  
Pages: 1-161  
July 2020  
https://ascp.onlinelibrary.wiley.com/toc/15326535/2020/108/1  
[Reviewed earlier]

**Clinical Therapeutics**  
http://www.clinicaltherapeutics.com/current  
[Reviewed earlier]

**Clinical Trials**  
Volume 17 Issue 3, June 2020  
https://journals.sagepub.com/toc/ctja/17/3  
[Reviewed earlier]

**Conflict and Health**  
http://www.conflictandhealth.com/  
[Accessed 1 Aug 2020]  
[No new digest content identified]

**Contemporary Clinical Trials**  
Volume 94  
July 2020  
[New issue; No digest content identified]

**The CRISPR Journal**  
Volume 3, Issue 3  
June 2020  
https://www.liebertpub.com/toc/crispr/3/3  
[Reviewed earlier]

**Current Genetic Medicine Reports**
Volume 8, Issue 2, June 2020
https://link.springer.com/journal/40142/8/2
[Reviewed earlier]

Current Opinion in Infectious Diseases
August 2020 - Volume 33 - Issue 4
https://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx
[Reviewed earlier]

Developing World Bioethics
Volume 20, Issue 2 Pages: 61-114 June 2020
https://onlinelibrary.wiley.com/toc/14718847/current
[Reviewed earlier]

Development in Practice
Volume 30, Issue 4, 2020
http://www.tandfonline.com/toc/cdip20/current
[Reviewed earlier]

Disaster Medicine and Public Health Preparedness
Volume 14 - Issue 2 - April 2020
https://www.cambridge.org/core/journals/disaster-medicine-and-public-health-preparedness/latest-issue
[Reviewed earlier]

Disasters
Volume 44, Issue 3 Pages: 433-618 July 2020
https://onlinelibrary.wiley.com/toc/14677717/current
[Reviewed earlier]

EMBO Reports
Volume 21 Issue 7 3 July 2020
https://www.embopress.org/toc/14693178/current
[Reviewed earlier]

Emerging Infectious Diseases
Volume 26, Number 8—August 2020
http://wwwnc.cdc.gov/eid/
[Reviewed earlier]
Epidemics
Volume 31 June 2020
https://www.sciencedirect.com/journal/epidemics/vol/31/suppl/C
[Reviewed earlier]

Epidemiology and Infection
Volume 148 - 2020
https://www.cambridge.org/core/journals/epidemiology-and-infection/latest-issue
[Reviewed earlier]

Ethics & Human Research
Volume 42, Issue 4  Pages: 1-40  July–August 2020
https://onlinelibrary.wiley.com/toc/25782363/current
Pregnant Women  Covid-19  Vaccine Challenge Trials  Lotteries
[Reviewed earlier]

The European Journal of Public Health
Volume 30, Issue Supplement_2, June 2020
https://academic.oup.com/eurpub/issue/30/Supplement_2
[Reviewed earlier]

Gates Open Research
https://gatesopenresearch.org/browse/articles
[Accessed 1 Aug 2020]
[No new digest content identified]

Genome Medicine
https://genomemedicine.biomedcentral.com/articles
[Accessed 1 Aug 2020]
[No new digest content identified]

Global Health Action
Volume 12, 2019  Issue 1
https://www.tandfonline.com/toc/zgha20/12/sup1?nav=tocList
[Reviewed earlier]

Global Health: Science and Practice (GHSP)
2020 | Volume 8 | Number 2  June 30, 2020
http://www.ghspjournal.org/content/current
[Reviewed earlier]
Globalization and Health
http://www.globalizationandhealth.com/
Commentary    Open Access
The International Health Regulations (2005), the threat of populism and the COVID-19 pandemic
The global response to the COVID-19 pandemic has laid bare weaknesses and major challenges in the international approach to managing public health emergencies. Populist sentiment is spreading globally as democratic nations are increasing their support for or electing governments that are perceived to represent “traditional” native interests. Measures need to be taken to proactively address populist sentiment when reviewing the IHR (2005) effectiveness in the COVID-19 pandemic. We discuss how populism can impact the IHR (2005) and conversely how the IHR (2005) may be able to address populist concerns if the global community commits to helping states address public health threats that emerge within their borders.
Authors: Kumanan Wilson, Sam Halabi and Lawrence O. Gostin
Citation: Globalization and Health 2020 16:70
Content type: Commentary
Published on: 28 July 2020

Health Affairs
Vol. 39, No. 7   July 2020
https://www.healthaffairs.org/toc/hlthaff/current
Food, Income, Work & More
[Reviewed earlier]

Health and Human Rights
Volume 22, Issue 1, June 2020
Special Section: Mental Health and Human Rights
[Reviewed earlier]

Health Economics, Policy and Law
Volume 15 - Issue 3 - July 2020
https://www.cambridge.org/core/journals/health-economics-policy-and-law/latest-issue
[Reviewed earlier]

Health Policy and Planning
Volume 35, Issue 6, July 2020
Responding to Ebola in the Democratic Republic of Congo
by Humanitarian Practice Network

This edition of Humanitarian Exchange, co-edited with Anne Harmer, focuses on the response to the Ebola outbreak in the Democratic Republic of Congo (DRC). Although at the time of publication the outbreak appeared to have ended, over its course it claimed 2,200 lives, with more than 3,300 infected, making this the world’s second largest outbreak ever.

In the lead article, Natalie Roberts reflects on the extent to which humanitarian actors have applied learning from the outbreak in West Africa in 2014–2016. Richard Kojan and colleagues report on the NGO ALIMA’s flexible, patient-centred approach to reducing mortality, Marcela Ascuntar reflects on lessons learned from community feedback and Bernard Balibuno, Emanuel Mbuna Badjonga and Howard Mollett highlight the crucial role faith-based organisations have played in the response. In their article, Theresa Jones, Noé Kasali and Olivia Tulloch outline the work of the Bethesda counselling centre in Beni, which provides support to grieving families. Reflecting on findings from a recent assessment by Translators without Borders, Ellie Kemp describes the challenges involved in providing clear and accessible information on Ebola and the response, and Sung Joon Park and colleagues explain how humane care and treatment can help increase trust and confidence in the response. Stephen Mugamba and his co-authors highlight the importance of community involvement in Ebola research, and Gillian McKay and her co-authors examine the impact of the Ebola outbreak and response on sexual and reproductive health services.

Stacey Mearns, Kiryn Lanning and Michelle Gayer present an Ebola Readiness Roadmap to support NGOs in preparing for an outbreak, while Edward Kumakech, Maurice Sadlier, Aidan Sinnott and Dan Irvine report on a Gap Analysis tool looking at the communication, community engagement and compliance tracking activities that need to be in place before an Ebola vaccine is deployed. Emanuele Bruni and colleagues describe the development of a new monitoring and evaluation framework for strategic response planning. The edition ends with an article by
Adelicia Fairbanks, who argues for an acceptance strategy in the DRC to improve security and access for responding agencies.

**Human Vaccines & Immunotherapeutics** (formerly Human Vaccines)
Volume 16, Issue 6, 2020
http://www.tandfonline.com/toc/khvi20/current
[Reviewed earlier]

**Infectious Agents and Cancer**
http://www.infectagentscancer.com/content
[Accessed 1 Aug 2020]
[No new digest content identified]

**Infectious Diseases of Poverty**
http://www.idpjournal.com/content
[Accessed 1 Aug 2020]
[No new digest content identified]

**International Health**
Volume 12, Issue 4, July 2020
https://academic.oup.com/inthealth/issue/12/4
[Reviewed earlier]

**International Journal of Community Medicine and Public Health**
Vol 7, No 7 (2020) July 2020
https://www.ijcmph.com/index.php/ijcmph/issue/view/64
[Reviewed earlier]

**International Journal of Epidemiology**
Volume 49, Issue Supplement_1, April 2020
https://academic.oup.com/ije/issue/49/Supplement_1

**Big Data, Small Area**
[Reviewed earlier]

**International Journal of Human Rights in Healthcare**
Volume 13 Issue 3 2020
https://www.emerald.com/insight/publication/issn/2056-4902/vol/13/iss/3
Table of Contents
[Reviewed earlier]
COVID-19 Update August 1, 2020
These articles on COVID-19 were published across the JAMA Network in the last week.

Research Letter
Hyun Jin Song, MPharm, PhD; Patrick Squires, PharmD; Debbie Wilson, PhD; et al.
This study uses national pharmacy claims data to describe trends in prescriptions for HIV preexposure prophylaxis (PrEP) overall and by specialty between 2012 and 2018.

Viewpoint
A Proposed Lottery System to Allocate Scarce COVID-19 Medications - Promoting Fairness and Generating Knowledge
Douglas B. White, MD, MAS; Derek C. Angus, MD, MPH
This Viewpoint proposes creation of state-level central lotteries for allocating drugs like remdesivir to hospitalized patients with COVID-19, which, if paired with demographic and outcome registry data, would enable equitable treatment allocation and facilitate actionable intelligence about the drugs’ treatment effectiveness through a natural experiment.

COVID-19: Beyond Tomorrow
The Dual Epidemics of COVID-19 and Influenza-Vaccine Acceptance, Coverage, and Mandates
Lawrence O. Gostin, JD; Daniel A. Salmon, MPH, PhD
This Viewpoint proposes policy responses to boost influenza vaccination uptake and reduce the anticipated morbidity and mortality of an influenza–COVID-19 co-epidemic in fall 2020.

Cognitive Bias and Public Health Policy During the COVID-19 Pandemic
Scott D. Halpern, MD, PhD; Robert D. Truog, MD; Franklin G. Miller, PhD
This Viewpoint reviews common cognitive biases that led health centers and the public to favor patient- over population health–oriented policy responses to the initial COVID-19
pandemic, and proposes messaging to better articulate the rationale for more effective population health responses.

**JAMA Pediatrics**
July 2020, Vol 174, No. 7, Pages 633-736
http://archpedi.jamanetwork.com/issue.aspx
[Reviewed earlier]

**JBI Database of Systematic Review and Implementation Reports**
July 2020 - Volume 18 - Issue 7
https://journals.lww.com/jbisrir/Pages/currenttoc.aspx
[Reviewed earlier]

**Journal of Adolescent Health**
August 2020 Volume 67, Issue 2, p145-308
https://www.jahonline.org/issue/S1054-139X(20)X0007-3
*Original Articles*
**The COVID-19 Pandemic and Rapid Implementation of Adolescent and Young Adult Telemedicine: Challenges and Opportunities for Innovation**
Angela Barney, Sara Buckelew, Veronika Mesheriakova, Marissa Raymond-Flesch
p164–171
Published online: May 14, 2020

**Tailored Messages Addressing Human Papillomavirus Vaccination Concerns Improves Behavioral Intent Among Mothers: A Randomized Controlled Trial**
Catherine A. Panozzo, Katharine J. Head, Melanie L. Kornides, Kristen A. Feemster, Gregory D. Zimet
p253–261
Published online: March 18, 2020

**Journal of Artificial Intelligence Research**
Vol. 68 (2020)
https://www.jair.org/index.php/jair
[Reviewed earlier]

**Journal of Community Health**
Volume 45, Issue 4, August 2020
https://link.springer.com/journal/10900/45/4
[Reviewed earlier]

**Journal of Development Economics**
Volume 145   June 2020
Journal of Empirical Research on Human Research Ethics
Volume 15 Issue 3, July 2020
http://journals.sagepub.com/toc/jre/current
[Reviewed earlier]

Journal of Epidemiology & Community Health
August 2020 - Volume 74 - 8
https://jech.bmj.com/content/74/8
[Reviewed earlier]

Journal of Evidence-Based Medicine
Volume 13, Issue 2 Pages: 89-177 May 2020
https://onlinelibrary.wiley.com/toc/17565391/current
[Reviewed earlier]

Journal of Global Ethics
Volume 16, Issue 1, 2020
http://www.tandfonline.com/toc/rjge20/current
[Reviewed earlier]

Journal of Health Care for the Poor and Underserved (JHCPU)
Volume 31, Number 2, May 2020
https://muse.jhu.edu/issue/42391
[Reviewed earlier]

Journal of Immigrant and Minority Health
Volume 22, Issue 4, August 2020
https://link.springer.com/journal/10903/22/4
[Reviewed earlier]

Journal of Immigrant & Refugee Studies
Volume 18, 2020, Issue 3
https://www.tandfonline.com/toc/wimm20/current
[New issue; No digest content identified]

Journal of Infectious Diseases
Volume 222, Issue 3, 1 August 2020
https://academic.oup.com/jid/issue/222/3
[Reviewed earlier]

Journal of Medical Ethics
August 2020 - Volume 46 - 8
http://jme.bmj.com/content/current
COVID 19 Current Controversies
Relational ethical approaches to the COVID-19 pandemic (10 June, 2020) Free
David Ian Jeffrey

Multivalue ethical framework for fair global allocation of a COVID-19 vaccine (12 June, 2020) Free
Yangzi Liu, Sanjana Salwi, Brian C Drolet

Ethical guidelines for deliberately infecting volunteers with COVID-19 (27 May, 2020) Free
Adair D Richards

Journal of Patient-Centered Research and Reviews
Volume 7, Issue 3 (2020)
https://digitalrepository.aurorahealthcare.org/jpcrr/
[New issue; No digest content identified]

Journal of Pediatrics
August 2020 Volume 223, p1-236
http://www.jpeds.com/current
The Editors' Perspectives
Subtle forms of vaccine hesitancy affecting children and adolescents are unreasonable and risky
Sarah S. Long
p1–5
Published in issue: August 2020

Original Articles
Vaccine Hesitancy and Low Immunization Rates in Children with Down Syndrome
Diane L. Langkamp, Anna Dusseau, Mirades F. Brown
p64–67.e2
Published online: May 14, 2020

Journal of Pharmaceutical Policy and Practice
https://joppp.biomedcentral.com/
[Accessed 1 Aug 2020]
[No new digest content identified]
The Lancet
Aug 01, 2020  Volume 396  Number 10247  p291-360, e12
https://www.thelancet.com/journals/lancet/issue/current

Editorial
The truth is out there, somewhere
The Lancet
The tidal wave of information on the internet concerning the COVID-19 pandemic has resulted in difficulties in discerning truth from fiction. This so-called infodemic, defined by WHO as an “overabundance of information—some accurate and some not—that makes it harder for people to find trustworthy sources and reliable guidance when needed”, has become a major
threat to public health. Infection rates will rise if people are confused about restrictions and patients may be harmed if they use unproven treatments or bogus remedies.

An urgent call for action to gauge, map, and develop a means of combating this problem was explored at a WHO-organised conference held across April, June, and July. The meeting, which focused on so-called infodemiology—the science behind managing infodemics—brought together experts from a range of disciplines, including epidemiology, public health, applied mathematics, and data science...

Comment

US withdrawal from WHO is unlawful and threatens global and US health and security
Lawrence O Gostin, et al

After COVID-19, a future for the world’s children?
The WHO–UNICEF–Lancet Commissioners

Perspectives

Book

Why vaccine rumours stick—and getting them unstuck
Bruce Gellin

...Heidi Larson’s compelling new book *Stuck: How Vaccine Rumors Start—and Why They Don't Go Away* looks at the dynamics of the evolving debate through the lens of an anthropologist who has been studying vaccine confidence for decades. Largely written before COVID-19 surfaced, this book is timely as the world has its eyes longingly set on a COVID-19 vaccine. As Larson notes, “the quality of life that most of us enjoy today is dependent on vaccines. In many ways it is one of the biggest worldwide social experiments in collectivism and cooperation in modern times. The challenge is that it depends on a social contract whose fabric is eroding in a broader context of anti-globalization, nationalism, and populism. Vaccines can, as they have in the past, serve as a form of soft diplomacy to keep at least a fundamental level of global cooperation alive and well.”

...Larson's book draws from a vast array of findings from her Vaccine Confidence Project that has established an information surveillance system for early detection of public concerns around vaccines. From this large body of work, Larson explores several important themes in Stuck: rumour, dignity, distrust, risk, emotional contagion, choice, the power of beliefs over facts, and the power of stories over data. Her analysis of these issues covers a broad range of events, settings, and countries, including Ebola virus vaccine trials in west Africa, routine MMR vaccination in the Somali community in Minnesota, USA, human papillomavirus vaccination in Japan and Columbia, dengue vaccine introduction in the Philippines, and the ramifications of a CIA-inspired sham hepatitis vaccination campaign in Pakistan as part of the hunt for Osama bin Laden.

...But Larson asks that we do more because it isn't only about getting the facts right. As she frames the core problem: “we don't have a misinformation problem, we have a relationship problem”. The misinformation can be deleted, but the underlying distrust that has caused it and allowed it to stick remains. Rather than countering and dismissing rumours, Larson encourages the health community and other stakeholders to listen to these rumours and recognise what people are saying. These analyses can reveal deeper issues such as the feeling of being disenfranchised and not being heard. It is from these insights, she argues, “lie the cues to building new and more trusting relationships”...
**Health Policy**

*Digital tools against COVID-19: taxonomy, ethical challenges, and navigation aid*
Urs Gasser, Marcello Ienca, James Scheibner, Joanna Sleigh, Effy Vayena

**Summary**

Data collection and processing via digital public health technologies are being promoted worldwide by governments and private companies as strategic remedies for mitigating the COVID-19 pandemic and loosening lockdown measures. However, the ethical and legal boundaries of deploying digital tools for disease surveillance and control purposes are unclear, and a rapidly evolving debate has emerged globally around the promises and risks of mobilising digital tools for public health. To help scientists and policy makers to navigate technological and ethical uncertainty, we present a typology of the primary digital public health applications that are in use. These include proximity and contact tracing, symptom monitoring, quarantine control, and flow modelling. For each, we discuss context-specific risks, cross-sectional issues, and ethical concerns. Finally, recognising the need for practical guidance, we propose a navigation aid for policy makers and other decision makers for the ethical development and use of digital public health tools.

**Viewpoint**

*Applications of digital technology in COVID-19 pandemic planning and response*
Sera Whitelaw, Mamas A Mamas, Eric Topol, Harriette G C Van Spall

**Summary**

With high transmissibility and no effective vaccine or therapy, COVID-19 is now a global pandemic. Government-coordinated efforts across the globe have focused on containment and mitigation, with varying degrees of success. Countries that have maintained low COVID-19 per-capita mortality rates appear to share strategies that include early surveillance, testing, contact tracing, and strict quarantine. The scale of coordination and data management required for effective implementation of these strategies has—in most successful countries—relied on adopting digital technology and integrating it into policy and health care. This Viewpoint provides a framework for the application of digital technologies in pandemic management and response, highlighting ways in which successful countries have adopted these technologies for pandemic planning, surveillance, testing, contact tracing, quarantine, and health care.

**Lancet Global Health**

Aug 2020 Volume 8 Number 8 e973-e1100
http://www.thelancet.com/journals/langlo/issue/current

**Articles**
Achieving coordinated national immunity and cholera elimination in Haiti through vaccination: a modelling study
Elizabeth C Lee, et al

Summary

Background
Cholera was introduced into Haiti in 2010. Since then, more than 820,000 cases and nearly 10,000 deaths have been reported. Oral cholera vaccine (OCV) is safe and effective, but has not been seen as a primary tool for cholera elimination due to a limited period of protection and constrained supplies. Regionally, epidemic cholera is contained to the island of Hispaniola, and the lowest numbers of cases since the epidemic began were reported in 2019. Hence, Haiti may represent a unique opportunity to eliminate cholera with OCV.

Methods
In this modelling study, we assessed the probability of elimination, time to elimination, and percentage of cases averted with OCV campaign scenarios in Haiti through simulations from four modelling teams. For a 10-year period from January 19, 2019, to Jan 13, 2029, we compared a no vaccination scenario with five OCV campaign scenarios that differed in geographical scope, coverage, and rollout duration. Teams used weekly department-level reports of suspected cholera cases from the Haiti Ministry of Public Health and Population to calibrate the models and used common vaccine-related assumptions, but other model features were determined independently.

Findings
Among campaigns with the same vaccination coverage (70% fully vaccinated), the median probability of elimination after 5 years was 0–18% for no vaccination, 0–33% for 2-year campaigns focused in the two departments with the highest historical incidence, 0–72% for three-department campaigns, and 35–100% for nationwide campaigns. Two-department campaigns averted a median of 12–58% of infections, three-department campaigns averted 29–80% of infections, and national campaigns averted 58–95% of infections. Extending the national campaign to a 5-year rollout (compared to a 2-year rollout), reduced the probability of elimination to 0–95% and the proportion of cases averted to 37–86%.

Interpretation
Models suggest that the probability of achieving zero transmission of Vibrio cholerae in Haiti with current methods of control is low, and that bolder action is needed to promote elimination of cholera from the region. Large-scale cholera vaccination campaigns in Haiti would offer the opportunity to synchronise nationwide immunity, providing near-term population protection while improvements to water and sanitation promote long-term cholera elimination.

Funding

Comment
Cholera remains a public health threat in Haiti
Jeannot Francois

Lancet Infectious Diseases
Aug 2020 Volume 20 Number 8 p875-992, e180-e214
http://www.thelancet.com/journals/laninf/issue/current
Editorial
The COVID-19 infodemic
The Lancet Infectious Diseases
[See Milestones above for full text]

Lancet Public Health
Jul 2020 Volume 5 Number 7 e361-e413
https://www.thelancet.com/journals/lanpub/issue/current
[Reviewed earlier]

Lancet Respiratory Medicine
Jun 2020 Volume 8 Number 6 p527-646, e43-e54
http://www.thelancet.com/journals/lanres/issue/current
[Reviewed earlier]

Maternal and Child Health Journal
Volume 24, Issue 8, August 2020
https://link.springer.com/journal/10995/24/8
[New issue; No digest content identified]

Medical Decision Making (MDM)
Volume 40 Issue 5, July 2020
http://mdm.sagepub.com/content/current
Reviews
Lauren Hoefel, Annette M. O'Connor, Krystina B. Lewis, Laura Boland, Lindsey Sikora, Jiale Hu, Dawn Stacey
First Published July 13, 2020; pp. 555–581
Abstract
Background. The Ottawa Decision Support Framework (ODSF) has been used for 20 years to assess and address people's decisional needs. The evidence regarding ODSF decisional needs has not been synthesized.
Objectives. To synthesize evidence from ODSF-based decisional needs studies, identify new decisional needs, and validate current ODSF decisional needs.
Methods. A mixed-studies systematic review. Nine electronic databases were searched.
Inclusion criteria: studies of people's decisional needs when making health or social decisions for themselves, a child, or a mentally incapable person, as reported by themselves, families, or practitioners. Two independent authors screened eligibility, extracted data, and quality appraised studies using the Mixed Methods Appraisal Tool. Data were analyzed using narrative synthesis.
Results. Of 4532 citations, 45 studies from 7 countries were eligible. People's needs for 101 unique decisions (85 health, 16 social) were reported by 2857 patient decision makers (n = 36 studies), 92 parent decision makers (n = 6), 81 family members (n = 5), and 523 practitioners
(n = 21). Current ODSF decisional needs were reported in 2 to 40 studies. For 6 decisional needs, there were 11 new (manifestations): 1) information (overload, inadequacy regarding others’ experiences with options), 2) difficult decisional roles (practitioner, family involvement, or deliberations), 3) unrealistic expectations (difficulty believing outcome probabilities apply to them), 4) personal needs (religion/spirituality), 5) difficult decision timing (unpredictable), and 6) unreceptive decisional stage (difficulty accepting condition/need for treatment, powerful emotions limiting information processing, lacking motivation to consider delayed/unpredictable decisions). Limitations. Possible publication bias (only peer-reviewed journals included). Possible missed needs (non-ODSF studies, patient decision aid development studies, 3 ODSF needs added in 2006).

Conclusion. We validated current decisional needs, identified 11 new manifestations of 6 decisional needs, and recommended ODSF revisions.

The Milbank Quarterly
A Multidisciplinary Journal of Population Health and Health Policy
Volume 98, Issue 2  Pages: 223-617  June 2020
https://onlinelibrary.wiley.com/toc/14680009/current
[Reviewed earlier]

Nature
Volume 583 Issue 7818, 30 July 2020
http://www.nature.com/nature/current_issue.html

ENCODE
This week marks the publication of results from phase three of the Encyclopedia of DNA Elements (ENCODE) project. Nine articles in this issue of Nature, along with papers published online and in several other journals, examine the most comprehensive catalogue yet of the candidate functional elements in the human and mouse genomes. In an overview paper, the ENCODE Project Consortium offers a summary of the new elements in the encyclopedia, which have been compiled with data sets from some 6,000 experiments. Much of the work published in this issue examines DNA regions called candidate cis-regulatory elements (cCREs), which may regulate gene transcription. Three papers — from Joseph Ecker, Bing Ren, Barbara Wold and their colleagues — look at cCREs during embryonic development in the mouse. Two papers from Wouter Meuleman, Jeff Vierstra, John Stamatoyannopoulos and colleagues map cCREs and transcription factor footprints in hundreds of human cell and tissue types. Michael Snyder and colleagues map chromatin loops in 24 human cell types; Eric Mendenhall and co-workers map the genome-wide binding of almost one-quarter of all chromatin-associated proteins active in a human liver cell line; and Brenton Graveley and colleagues integrate multiple assays to produce a comprehensive analysis of RNA-binding proteins and their functional elements.

Finally, in a Perspective article, the project team puts the multiple phases of ENCODE in context

Editorial | 28 July 2020
The Trump administration must stop sidelining the CDC
The US government needs to strengthen the agency charged with preventing the spread of disease — not undermine it.
**Nature Biotechnology**
Volume 38 Issue 7, July 2020
https://www.nature.com/nbt/volumes/38/issues/7
*Focus on CRISPR tools and therapies*
[Reviewed earlier]

**Nature Communications**
https://www.nature.com/subjects/health-sciences/ncomms
(Accessed 1 Aug 2020)
[No new digest content identified]

**Nature Genetics**
Volume 52 Issue 7, July 2020
https://www.nature.com/ng/volumes/52/issues/7
[Reviewed earlier]

**Nature Medicine**
Volume 26 Issue 7, July 2020
https://www.nature.com/nm/volumes/26/issues/7
[Reviewed earlier]

**Nature Reviews Genetics**
Volume 21 Issue 8, August 2020
https://www.nature.com/nrg/volumes/21/issues/8
*Review Article* | 31 March 2020
**Electronic health records and polygenic risk scores for predicting disease risk**
Electronic health records (EHRs) linked to biobanks provide new opportunities for developing and applying polygenic risk scores in the clinic. The authors review the opportunities and challenges that arise when using EHR data for the systematic evaluation of patient disease susceptibilities.
Ruowang Li, Yong Chen[...] & Jason H. Moore

**Nature Reviews Immunology**
Volume 20 Issue 8, August 2020
https://www.nature.com/nri/volumes/20/issues/8
*Comment* | 02 July 2020
**A call to arms: helping family, friends and communities navigate the COVID-19 infodemic**
In this Comment, Heidi Larson discusses the COVID-19 'infodemic' and suggests the ways in which scientists can help to mitigate the spread of misinformation.
Heidi J. Larson

*Comment* | 17 June 2020
**Optimizing safety surveillance for COVID-19 vaccines**

Rebecca Chandler from the Uppsala Monitoring Centre discusses how the COVID-19 pandemic could be the catalyst that propels vaccine safety surveillance into the twenty-first century.

Rebecca E. Chandler

*Viewpoint* | 27 May 2020

**The non-specific and sex-differential effects of vaccines**

In this Viewpoint article, members of the Optimmunize consortium discuss the evidence for non-specific and sex-differential effects of vaccines and how this information might inform vaccine design and policy, including in relation to the COVID-19 pandemic.

Peter Aaby, Christine Stabell Benn & Frank Shann

**Nature Reviews Drug Discovery**

Volume 19 Issue 8, August 2020

https://www.nature.com/nrd/volumes/19/issues/8

*Comment* | 20 April 2020

**Boosting delivery of rare disease therapies: the IRDiRC Orphan Drug Development Guidebook**

The International Rare Diseases Research Consortium (IRDiRC) has created a Guidebook to facilitate drug development for rare diseases by organizing available tools into a standardized framework.

Anneliene Hechtelt Jonker, Virginie Hivert & Diego Ardigo

**New England Journal of Medicine**

July 30, 2020  Vol. 383 No. 5

http://www.nejm.org/toc/nejm/medical-journal

[New issue; No digest content identified]

**Pediatrics**

Vol. 146, Issue 2  1 Aug 2020

https://pediatrics.aappublications.org/

[New issue; No digest content identified]

**Pharmaceutics**

Volume 12, Issue 6 (June 2020) – 114 articles

https://www.mdpi.com/1999-4923/12/5

[Reviewed earlier]

**PharmacoEconomics**

Volume 38, Issue 8, August 2020

https://link.springer.com/journal/40273/38/8

[New issue; No digest content identified]
**Overview**

There is an urgent need to advance safe and affordable COVID-19 vaccines for low- and middle-income countries of Asia, Africa, and Latin America. Such vaccines rely on proven technologies such as recombinant protein–based vaccines to facilitate its transfer for emerging market vaccine manufacturers. Our group is developing a two-pronged approach to advance recombinant protein–based vaccines to prevent COVID-19 caused by SARS-CoV-2 and other coronavirus infections. One vaccine is based on a yeast-derived (Pichia pastoris) recombinant protein comprised of the receptor-binding domain (RBD) of the SARS-CoV formulated on alum and referred to as the CoV RBD219-N1 Vaccine. Potentially, this vaccine could be used as a heterologous vaccine against COVID-19. A second vaccine specific for COVID-19 is also being advanced using the corresponding RBD of SARS-CoV-2. The first antigen has already undergone current Good Manufacturing Practices (cGMP) manufacture and is therefore “shovel ready” for advancing into clinical trials, following vialing and required Good Laboratory Practice (GLP) toxicology testing. Evidence for its potential efficacy to cross-protect against SARS-CoV-2 includes cross-neutralization and binding studies using polyclonal and monoclonal antibodies. Evidence in support of its safety profile include our internal assessments in a mouse challenge model using a lethal mouse-adapted SARS strain, which shows that SARS-CoV RBD219-N1 (when adsorbed to aluminum hydroxide) does not elicit eosinophilic lung pathology. Together, these findings suggest that recombinant protein–based vaccines based on the RBD warrant further development to prevent SARS, COVID-19, or other coronaviruses of pandemic potential.
Estimation of COVID-19 spread curves integrating global data and borrowing information
Se Yoon Lee, Bowen Lei, Bani Mallick
Research Article | published 29 Jul 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0236860

Trait reactance and trust in doctors as predictors of vaccination behavior, vaccine attitudes, and use of complementary and alternative medicine in parents of young children
Research Article | published 27 Jul 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0236527

PLoS Pathogens
http://journals.plos.org/plospathogens/
[Accessed 1 Aug 2020]
[No new digest content identified]

PNAS - Proceedings of the National Academy of Sciences of the United States of America
http://www.pnas.org/content/early/
Eco-evolutionary control of pathogens
Michael Lässig and Ville Mustonen

Significance
Vaccinations and therapies targeting evolving pathogens aim to curb the pathogen and to steer it toward a controlled evolutionary state. Control is leveraged against the pathogen’s intrinsic evolutionary forces, which in turn, can drive an escape from control. Here, we analyze a simple model of control, in which a host produces antibodies that bind the pathogen. We show that the leverages of host (or external intervention) and pathogen are often highly imbalanced: an error threshold separates parameter regions of efficient control from regions of compromised control, where the pathogen retains the upper hand. Because control efficiency can be predicted from few measurable fitness parameters, our results establish a proof of principle how control theory can guide interventions against evolving pathogens.

Interdependence and the cost of uncoordinated responses to COVID-19
David Holtz, Michael Zhao, Seth G. Benzell, Cathy Y. Cao, Mohammad Amin Rahimian, Jeremy Yang, Jennifer Allen, Avinash Collis, Alex Moehring, Tara Sowrirajan, Dipayan Ghosh, Yunhao Zhang, Paramveer S. Dhillon, Christos Nicolaides, Dean Eckles, and Sinan Aral
Significance
As local governments relax shelter-in-place orders worldwide, policy makers lack evidence on how policies in one region affect mobility and social distancing in other regions and the consequences of uncoordinated regional policies adopted in the presence of such spillovers. Our analysis suggests the contact patterns of people in one region are significantly influenced by the policies and behaviors of people in other, sometimes distant, regions. When just one-third of a state’s social and geographic peer states adopt shelter-in-place policies, it creates a reduction in mobility equal to the state’s own policy decisions, highlighting the need for national coordination. The paper gives governors a roadmap for coordination in the absence of national leadership and applies globally to other regions lacking coordination.

Social distancing responses to COVID-19 emergency declarations strongly differentiated by income
Joakim A. Weill, Matthieu Stigler, Olivier Deschenes, and Michael R. Springborn

Noninvasive wearable electroactive pharmaceutical monitoring for personalized therapeutics
Shuyu Lin, Wenzhuo Yu, Bo Wang, Yichao Zhao, Ke En, Jialun Zhu, Xuanbing Cheng, Crystal Zhou, Haisong Lin, Zhaoqing Wang, Hannaneh Hojajji, Christopher Yeung, Carlos Milla, Ronald W. Davis, and Sam Emaminejad

Significance
To achieve the mission of personalized medicine, centering on delivering the right drug to the right patient at the right dose, therapeutic drug monitoring solutions are necessary. By devising a surface engineering strategy, we created a voltammetric sensing interface, featuring an “undistorted potential window,” within which the target electroactive drug’s voltammetric response is dominant and interference is eliminated, rendering reliable target quantification in noninvasively retrievable biofluids (sweat and saliva). Leveraging this sensing interface, a fully integrated, wearable solution was constructed to seamlessly render drug readouts with minute-level temporal resolution. To inform its clinical utility, the solution was utilized to demonstrate noninvasive pharmacokinetic monitoring of a pharmaceutical (here, acetaminophen, a widely used analgesic and antipyretic) in a wearable format.

Prehospital & Disaster Medicine
Volume 35 - Issue 4 - August 2020
https://www.cambridge.org/core/journals/prehospital-and-disaster-medicine/latest-issue
[Reviewed earlier]

Preventive Medicine
Volume 137  August 2020
Research article  Open access
Impact of a vaccine intervention on county-level rates of acute hepatitis B in West Virginia, 2011–2018
Stacy R. Tressler, Gordon S. Smith, Brian M. Hendricks
Extract
We are in the midst of a global pandemic caused by the novel SARS-CoV-2 virus. Millions of people have been infected, hundreds of thousands have died and health care systems have been stretched to breaking point. Unprecedented work is going on around the world to discover effective treatments and vaccines. In their absence, we are reliant upon traditional public health measures that aim to both prevent transmission (through the use of isolation, quarantine, physical distancing, restrictions on movement, shutting of borders, etc.) and detect infected individuals and those possibly exposed to infection (through testing and contact tracing, etc.). The implementation of such actions, particularly physical distancing, has caused massive disruption to social life and economic activity,...
Vaccines are some of the most cost-effective public health interventions for reducing disease burden and mortality. However, in recent years, health systems have faced a growing challenge with increasing number of parents who choose not to vaccinate their children. This decision has important implications for the health of communities worldwide, and despite a considerable amount of research that reinforces vaccine effectiveness and safety, there is uncertainty surrounding the factors that may encourage vaccine hesitancy in parents. In this interpretive review of 34 qualitative studies, we examine the factors that bolster vaccine hesitancy, rejection, and delay, and identify the overlaps and relationships between these factors. We depict our findings using the metaphor of a gear train where each gear represents one of seven factors: previous experiences; “natural” and “organic” living; perceptions of other parents; experiences interacting with health care providers; information sources, challenges, and preferences; distrust in health system players; and mandatory vaccine policies.

Research Ethics
Volume 16 Issue 1-2, January-April 2020
http://journals.sagepub.com/toc/reab/current
[Reviewed earlier]

Reproductive Health
http://www.reproductive-health-journal.com/content
[Accessed 1 Aug 2020]
[No new digest content identified]

Revista Panamericana de Salud Pública/Pan American Journal of Public Health (RPSP/PAJPH)
https://www.paho.org/journal/en
Latest articles
Perinatal COVID-19 in Latin America
Sola et al. 31 Jul 2020
Objective.
To evaluate and report the clinical characteristics and outcomes of SARS-CoV-2 infection in pregnant women and newborns in Latin America.
Methods.
Descriptive study based on the prospective report of the units of the Ibero-American Society of Neonatology Network.
Results.
Of 86 pregnant women with COVID-19 confirmed by RT-PCR in seven countries (6 from Latin America, and Equatorial Guinea) 68% (59) were asymptomatic. Of 32% of symptomatic women, 89% (24) had mild symptoms and 3.5% (3) had severe respiratory symptoms. No women died. The cesarean section rate was 38%; gestational age was < 37 weeks in 6% of cases. RT-PCR was performed on all newborns between 16 and 36 hours of age; 6 (7%) were positive. All of them presented mild and transient respiratory distress; none died. Two newborns with negative RT-PCR died from other causes. Breastfeeding was authorized in only 24% of mothers; in 13% milk was expressed and 63% of newborns were fed with formula. In 76% of cases the motherchild pair was separated, and in 95% of cases the mother could not be accompanied at delivery or during the postpartum period.

Conclusions.
The lack of maternal accompaniment, the low rate of breastfeeding and the frequent separation of the mother-child dyad are of concern. The health care team must reflect on the need to defend humanized and family-centered care during this pandemic.

Risk Analysis
Volume 40, Issue 7 Pages: 1321-1506 July 2020
https://onlinelibrary.wiley.com/toc/15396924/current
[New issue; No digest content identified]

Risk Management and Healthcare Policy
[Accessed 1 Aug 2020]
[No new digest content identified]

Science
Editorial
Cautious optimism
By H. Holden Thorp
Science 31 Jul 2020 : 483
Summary
The first half of 2020 has seen extraordinary accomplishments in science. The international scientific community has described the genomic sequence of the virus that causes coronavirus disease 2019 (COVID-19) and structures of its important proteins, elucidated principal aspects of the immune response, identified neutralizing antibodies that can serve as therapeutics, and developed promising vaccines. There is much more to learn about COVID-19 and its cause, but the achievements so far are remarkable. So why doesn't this progress feel like the triumph that it is?

Science Translational Medicine
29 July 2020 Vol 12, Issue 554
https://stm.sciencemag.org/
**Report**

**Using influenza surveillance networks to estimate state-specific prevalence of SARS-CoV-2 in the United States**

By Justin D. Silverman, Nathaniel Hupert, Alex D. Washburne

Science Translational Medicine 29 Jul 2020 Open Access

Analysis of influenza-like illness surveillance data estimates that most SARS-CoV-2 infections in the United States went undetected in March 2020.

**Perspective**

**Scientific considerations for global drug development**

By Jennifer L. Wilson, Kit Wun Kathy Cheung, Lawrence Lin, Elizabeth A. E. Green, Analia I. Porrás, Ling Zou, David Mukanga, Paul A. Akpa, Delese Mimi Darko, Rae Yuan, Sheng Ding, Wiltshire C. N. Johnson, Howard A. Lee, Emer Cooke, Carl C. Peck, Steven E. Kern, Dan Hartman, Yoshikazu Hayashi, Peter W. Marks, Russ B. Altman, Murray M. Lumpkin, Kathleen M. Giacomini, Terrence F. Blaschke

Science Translational Medicine 29 Jul 2020 Restricted Access

**Abstract**

Requiring regional or in-country confirmatory clinical trials before approval of drugs already approved elsewhere delays access to medicines in low- and middle-income countries and raises drug costs. Here, we discuss the scientific and technological advances that may reduce the need for in-country or in-region clinical trials for drugs approved in other countries and limitations of these advances that could necessitate in-region clinical studies.

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**Social Science & Medicine**

Volume 258 August 2020


**Discussion Open access**

**Stigma in African genomics research: Gendered blame, polygamy, ancestry and disease causal beliefs impact on the risk of harm**

Jantina de Vries, Guida Landouré, Ambroise Wonkam

Article 113091

**Highlights**

:: Gendered blame, polygamy and supernatural causal beliefs relate to stigma.
:: African genomics research intersects with pre-existing stigma and may cause harm.
:: Genomics can reveal sensitive information about group ancestry.
:: Genomics researchers need to be culturally competent to minimize risk of harm.

**Abstract**

A recurring concern in genomics research is the possibility that it could lead to stigma for participants, their families and the population groups they belong to. Little evidence exists to explain how and when this ought to be a concern in genomics research in Africa whilst there is growing international evidence drawing into question the direct link between stigma and genetics. In this paper, we interrogate practical instances from African genomics research where stigma was identified as a concern in an attempt to nuance and refine accounts of when stigma should be considered as an ethical issue. The paper describes examples involving gendered blame, polygamy, beliefs in supernatural disease causation and sensitive information about group lineage. We propose that the concern may not be about stigma so much as broader research-related harm, including for instance reputational harm to population groups.
Furthermore, we propose to shift the analytical gaze from establishing causal relationships to exploring the intersection of genomics with pre-existing stigma. Finally, we emphasize the importance of ensuring genomics researchers are culturally competent, meaning able to recognise when cultural factors impact on the possibility that genomics research could cause harm.

**Systematic Reviews**
https://systematicreviewsjournal.biomedcentral.com/articles
[Accessed 1 Aug 2020]
[No new digest content identified]

**Travel Medicine and Infectious Diseases**
Volume 35  May–June 2020
[Reviewed earlier]

**Tropical Medicine & International Health**
Volume 25, Issue 7  Pages: i-iv, 751-904  July 2020
https://onlinelibrary.wiley.com/toc/13653156/current
[Reviewed earlier]

**Vaccine**
Volume 38, Issue 34  Pages 5389-5562 (22 July 2020)
https://www.sciencedirect.com/journal/vaccine/vol/38/issue/34

*Discussion  Full text access*
**Logistical challenges for potential SARS-CoV-2 vaccine and a call to research institutions, developers and manufacturers**
Umit H. Kartoglu, Kelly L. Moore, John S. Lloyd

*Discussion  Full text access*
**Allocation criteria for an initial shortage of a future SARS-CoV-2 vaccine and necessary measures for global immunity**
Wolfram Henn

*Discussion  Full text access*
**Use of seasonal influenza and pneumococcal polysaccharide vaccines in older adults to reduce COVID-19 mortality**
Deus Thindwa, Maria Garcia Quesada, Yang Liu, Julia Bennett, ... Stefan Flasche
Pages 5398-5401

*Research article  Abstract only*
**Facilitators and barriers of Hepatitis B screening and vaccination**
Si Heng Sharon Tan, DaoBo Wang, Win Jim Tan, Nur Azizah Allameen, Ngan Phoon Fong
Pages 5447-5453
Research article Open access

**Landscape analysis of pharmacovigilance and related practices among 34 vaccine manufacturers’ from emerging countries**

Katharina Hartmann, Sonia Pagliusi, Alexander Precioso
Pages 5490-5497

Vaccines — Open Access Journal
http://www.mdpi.com/journal/vaccines
(Accessed 1 Aug 2020)

Open Access Review

**Pneumococcal Vaccination for Children in Asian Countries: A Systematic Review of Economic Evaluation Studies**

by Neily Zakiyah, Widya N. Insani, Auliya A. Suwantika, Jurjen van der Schans and Maarten J. Postma
Vaccines 2020, 8(3), 426; https://doi.org/10.3390/vaccines8030426 (registering DOI) - 30 Jul 2020

Background: Evidence on costs and health benefits of pneumococcal conjugate vaccine (PCV) for children in Asian countries is limited but growing. As a region with a considerably high burden of pneumococcal disease, it is prominent to have a comprehensive overview on the cost-effectiveness [...]

Value in Health
June 2020 Volume 23, Issue 6, p677-826
https://www.valueinhealthjournal.com/issue/S1098-3015(20)X0008-8
[Reviewed earlier]

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**Media/Policy Watch**

This watch section is intended to alert readers to substantive news, analysis and opinion from the general media and selected think tanks and similar organizations on vaccines, immunization, global public health and related themes. Media Watch is not intended to be exhaustive, but indicative of themes and issues CVEP is actively tracking. This section will grow from an initial base of newspapers, magazines and blog sources, and is segregated from Journal Watch above which scans the peer-reviewed journal ecology.

We acknowledge the Western/Northern bias in this initial selection of titles and invite suggestions for expanded coverage. We are conservative in our outlook in adding news sources which largely report on primary content we are already covering above. Many electronic media sources have tiered, fee-based subscription models for access. We will provide full-text where content is published without restriction, but most publications require registration and some subscription level.

The Atlantic
**When a Vaccine Arrives, People Will Ignore the Anti-Vaxxers**
Even if some Americans opt out, the country will still reach herd immunity against COVID-19. July 31, 2020

**BBC**

No new, unique, relevant content

**The Economist**

No new, unique, relevant content

**Financial Times**

**A coronavirus vaccine could split America**
In the battle between public science and anti-vaxxer sentiment, science is heavily outgunned
Edward Luce  July 30 2020

**Pfizer chief says Trump price threats distract from vaccine progress**
July 28, 2020

**Forbes**

**Trust Is The Vaccine Infrastructure We Need**
The promise of a vaccine is the failsafe for millions of Americans nostalgic for normalcy but will communities trust us enough to take it?
By Lisa Fitzpatrick  Contributor

**Scientists Sequence DNA From Civil War Era Smallpox Vaccines**
DNA sequenced from 150-year-old smallpox vaccination kits sheds some light on the evolutionary history of the viral strains used in smallpox vaccines.
By Kiona N. Smith  Contributor

**CDC Director: White House Stripped Agency Of Covid-19 Data With No Warning**
The CDC director says he wasn’t told hospitals must now report directly to Trump administration until the decision was made.
By Jemima McEvoy  Contributor
FDA Chief: We’ll Consider Emergency Use Authorization For Covid-19 Vaccines
The head of the U. S Food and Drug Administration said he would consider an “emergency use authorization” to expedite getting a vaccine against the Coronavirus strain Covid-19 to Americans.
By Bruce Japsen Senior Contributor

Foreign Affairs
http://www.foreignaffairs.com/
Accessed 1 Aug 2020
Essay July 27, 2020
The Tragedy of Vaccine Nationalism
Global cooperation on vaccine allocation would be the most efficient way to disrupt the spread of the virus
Thomas J. Bollyky and Chad P. Bown

Foreign Policy
http://foreignpolicy.com/
Accessed 1 Aug 2020
Document of The Week: Global Plan for Sharing Vaccines [COVAX]
An alliance of international health organizations are competing with the United States and other rich countries in an effort to secure vaccines for the world’s neediest.
Colum Lynch

The Guardian
http://www.guardiannews.com/
[No new, unique, relevant content]

New Yorker
http://www.newyorker.com/
Accessed 1 Aug 2020
[No new, unique, relevant content]

New York Times
http://www.nytimes.com/
Accessed 1 Aug 2020
Asia Pacific
Indian Billionaires Bet Big on Head Start in Coronavirus Vaccine Race
The world’s largest vaccine producer, the Serum Institute, announced a plan to make hundreds of millions of doses of an unproven inoculation. It’s a gamble with a huge upside. And huge risks.
By Jeffrey Gettleman
PRINT EDITION  August 2, 2020

Europe
Russia Preparing Mass Vaccination Against Coronavirus for October
Russia's health minister is preparing a mass vaccination campaign against the novel coronavirus for October, local news agencies reported on Saturday, after a vaccine completed clinical trials.
By Reuters  Aug. 1

*Europe*

**Sanofi, Glaxo Advance Talks to Supply Up to 300 Million COVID-19 Vaccine Doses to Europe: Companies**
Sanofi SA and GlaxoSmithKline Plc on Friday said they are in advanced discussions with the European Commission to supply up to 300 million doses of the drugmakers's experimental COVID-19 vaccine.
By Reuters  July 31

*Asia Pacific*

**Impact of Coronavirus Will Be Felt for Decades to Come, WHO Says**
The global coronavirus outbreak is the sort of disaster whose effects will last far into the future, World Health Organization Director General Tedros Adhanom Ghebreyesus said on Friday.
By Reuters  July 31

*U.S.*

**Trump Planning for U.S. Rollout of Coronavirus Vaccine Falling Short, Officials Warn**
As scientists and pharmaceutical companies work at breakneck speed to develop a vaccine for the novel coronavirus, public health officials and senior U.S. lawmakers are sounding alarms about the Trump administration's lack of planning for its nationwide distribution.
By Reuters  July 31

*Europe*

**Large U.S. COVID-19 Vaccine Trials Will Exclude Pregnant Women for Now**
The first two COVID-19 vaccines to enter large-scale U.S. trials will not be tested in pregnant women this year, raising questions about how this vulnerable population will be protected from the coronavirus, researchers told Reuters.
By Reuters  July 31

*Europe*

**Pfizer, BioNTech to Supply 120 Million Doses of Coronavirus Vaccine to Japan**
Pfizer Inc and BioNTech SE have agreed to supply Japan with 120 million doses of their experimental coronavirus vaccine in the first half of 2021, the companies said on Friday.
By Reuters  July 31

*Washington Post*

https://www.washingtonpost.com/

*Accessed 1 Aug 2020*
[No new, unique, relevant content]
Brookings
http://www.brookings.edu/
Accessed 1 Aug 2020
[No new relevant content]

Center for Global Development  [to 1 Aug 2020]
http://www.cgdev.org/page/press-center
Accessed 1 Aug 2020
[No new relevant content]

Chatham House  [to 1 Aug 2020]
https://www.chathamhouse.org/
[No new relevant content]

CSIS
https://www.csis.org/
Accessed 1 Aug 2020
Report
Covid-19 Reshapes the Future
July 28, 2020 | By Samuel Brannen

Commentary
Digital in the Time of the Coronavirus: Data Science and Technology as a Force for Inclusion
July 28, 2020 | By Aleem Walji

Commentary
Co-Chairs' Statement: Vaccine Confidence, Social Media Misinformation, and National Security within the Covid-19 Crisis
July 27, 2020 | By Katherine E. Bliss, J. Stephen Morrison

Council on Foreign Relations
http://www.cfr.org/
Accessed 1 Aug 2020
[No new relevant content]

Kaiser Family Foundation
https://www.kff.org/search/?post_type=press-release
Accessed 1 Aug 2020
[No new relevant content]
Vaccines and Global Health: The Week in Review is a service of the Center for Vaccine Ethics and Policy (CVEP)/GE2P2 Global, which is solely responsible for its content, and is an open access publication, subject to the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by-nc/3.0/). Copyright is retained by CVEP.

CVEP is a program of the GE2P2 Global Foundation – whose purpose and mission is to advance ethical and scientific rigor in research and evidence generation for governance, policy and practice in health, human rights action, humanitarian response, heritage stewardship, education and sustainable development. The Foundation serves governments, international agencies, INGOs, civil society organizations (CSOs), commercial entities, consortia and alliances. CVEP maintains an academic affiliation with the Division of Medical Ethics, NYU School of Medicine, and an operating affiliation with the Vaccine Education Center of Children’s Hospital of Philadelphia [CHOP].

Support for this service is provided by the Bill & Melinda Gates Foundation; PATH, and industry resource members Janssen/J&J, Pfizer, Sanofi Pasteur U.S., Takeda, Moderna Therapeutics (list in formation).

Support is also provided by a growing list of individuals who use this membership service to support their roles in public health, clinical practice, government, NGOs and other international institutions, academia and research organizations, and industry.