



**Vaccines and Global Health: The Week in Review  
1 December 2018  
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 also **posted in pdf form** and as a set of blog posts at <https://centerforvaccineethicsandpolicy.net>. This blog allows full-text searching of over 8,000 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](#)

## Milestones :: Perspectives

### [Gavi Board starts framing Alliance's approach to 2021-2025 period](#)

*Gavi Board approves in principle a set of new and expanded vaccine programmes.*

Geneva, 29 November 2018 – The Gavi Board has made a series of decisions that will help shape the Alliance's approach for the period 2021-2025 during a two-day meeting in Geneva's Global Health Campus. The Board will adopt the 2021-2025 strategic goals at its next meeting in June 2019.

"The Board had extensive discussions on Gavi's future direction which will lead to intense work over the coming months to develop a strategy for the 2021-2025 period – the fifth in Gavi's existence," said Dr Ngozi Okonjo-Iweala, Gavi Board Chair. "The global landscape has changed fundamentally since Gavi was created in 2000 and the Alliance is changing with it. While for Gavi the core focus remains on its current mission of accelerating access to vaccines and increasing equitable coverage in the world's poorest countries, Gavi is also adapting to meet the challenges of the future."

**As part of its Vaccine Investment Strategy (VIS), the Gavi Board approved a future investment in six new and expanded vaccine programmes**, contingent on the final parameters of Gavi's 2021-2025 strategy (Gavi 5.0) and sufficient funding being made available after Gavi's next replenishment. Following a thorough evaluation of current and future vaccines, the final VIS prioritised:

- :: **hepatitis B birth dose** – to prevent chronic hepatitis B virus (HBV) infection, which develops in as many as 90% of infants infected with HBV at birth or in the first year of life and can lead to liver cancer,

- :: **diphtheria, pertussis & tetanus containing boosters** - given at 12-24 months, 4-7 years and 9-15 years, these three boosters offer continued protection from those diseases beyond the primary series administered in the first year,

- :: **oral cholera vaccine (OCV)** – to proactively reduce incidence of a disease that mainly affects poor and marginalised people,

- :: **human rabies vaccine for post-exposure prophylaxis** - to provide equitable access to human rabies prevention following a suspected dog bite,

- :: **meningococcal conjugate vaccine** - multivalent A,C,W-containing vaccine to expand serogroups protection beyond meningitis A,

- :: and **respiratory syncytial virus (RSV)** - to prevent one of the most common causes of bronchiolitis and pneumonia in children under 1 year of age.

"Unlike previous vaccine investment strategies, these vaccines will involve building new delivery platforms which will strengthen primary healthcare as a whole," said Dr Berkley. "This life-course immunisation approach can help lay the foundation for strengthening primary healthcare as a whole by providing more moments in which a child, adolescent or adult is in contact with health workers."...

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### [Measles cases spike globally due to gaps in vaccination coverage: New report](#)

*Press release*

GENEVA/ATLANTA/NEW YORK, 29 November 2018: Reported measles cases spiked in 2017, as multiple countries experienced severe and protracted outbreaks of the disease. This is according to a new report published today by leading health organizations:

*Weekly Epidemiological Record, 30 November 2018, vol. 93, 48 (pp. 649–660)*  
*Progress towards regional measles elimination – worldwide, 2000–2017*

**Because of gaps in vaccination coverage, measles outbreaks occurred in all regions, while there were an estimated 110,000 deaths related to the disease.**

Using updated disease modelling data, the report provides the most comprehensive estimates of measles trends over the last 17 years. It shows that since 2000, over 21 million lives have been saved through measles immunizations. **However, reported cases increased by more than 30 percent worldwide from 2016.**

The Americas, the Eastern Mediterranean Region, and Europe experienced the greatest upsurges in cases in 2017, with the Western Pacific the only World Health Organization (WHO) region where measles incidence fell.

“The resurgence of measles is of serious concern, with extended outbreaks occurring across regions, and particularly in countries that had achieved, or were close to achieving measles elimination,” said Dr Soumya Swaminathan, Deputy Director General for Programmes at WHO. “Without urgent efforts to increase vaccination coverage and identify populations with unacceptable levels of under-, or unimmunized children, we risk losing decades of progress in protecting children and communities against this devastating, but entirely preventable disease.”...

“The increase in measles cases is deeply concerning, but not surprising,” said Dr Seth Berkley, CEO of Gavi, the Vaccine Alliance. “Complacency about the disease and the spread of falsehoods about the vaccine in Europe, a collapsing health system in Venezuela and pockets of fragility and low immunization coverage in Africa are combining to bring about a global resurgence of measles after years of progress. Existing strategies need to change: more effort needs to go into increasing routine immunization coverage and strengthening health systems. Otherwise we will continue chasing one outbreak after another.”

Responding to the recent outbreaks, health agencies are calling for sustained investment in immunization systems, alongside efforts to strengthen routine vaccination services. These efforts must focus especially on reaching the poorest, most marginalized communities, including people affected by conflict and displacement.

The agencies also call for actions to build broad-based public support for immunizations, while tackling misinformation and hesitancy around vaccines where these exist...

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**Ebola - Democratic Republic of the Congo**

## [Clinical trial of investigational Ebola treatments begins in the Democratic Republic of the Congo](#) [NIH]

November 27, 2018

— Study is enrolling patients of any age with confirmed Ebola virus disease.

An international research team has begun patient enrollment in a clinical trial testing multiple investigational Ebola therapies in the Democratic Republic of the Congo (DRC). The randomized, controlled trial is enrolling patients of any age with confirmed Ebola virus disease (EVD) at a treatment unit in the city of Beni operated by [ALIMA \(link is external\)](#) (The Alliance for International Medical Action), a medical humanitarian organization.

The trial, which will expand to additional DRC districts, is organized through an international research consortium coordinated by the World Health Organization (WHO). It is led and funded by the [National Institute for Biomedical Research \(INRB\) \(link is external\)](#), part of the [DRC Ministry of Health \(link is external\)](#), and the National Institute of Allergy and Infectious Diseases (NIAID), part of the U.S. National Institutes of Health, and also involves several additional international partners.

“Combatting Ebola requires a comprehensive response that draws on the strengths of all areas of public health. Biomedical research can lead to critical new tools, such as potentially life-saving therapies,” said NIAID Director Anthony S. Fauci., M.D. “Through scientifically and ethically sound clinical trials, we hope to efficiently and definitively establish the safety and efficacy of these investigational Ebola treatments, offering new ways to save lives.”

On Aug. 1, 2018, the DRC Ministry of Health declared the country’s 10th outbreak of EVD. As of Nov. 25, 2018, 240 deaths out of 419 confirmed and probable cases of EVD have been reported in the northeastern provinces of North Kivu and Ituri. Under the leadership of the DRC Ministry of Health, the WHO has coordinated the outbreak response with several international partners. NIAID, along with the U.S. Centers for Disease Control and Prevention, the U.S. Agency for International Development (USAID), and other U.S. government partners, have provided guidance and support to the multi-sectoral outbreak response.

“We urgently need a safe and effective treatment for this deadly disease,” said DRC Minister of Health Oly Ilunga Kalenga, M.D., Ph.D. “As we face a 10th outbreak of Ebola, we hope this clinical trial will give us more information about how best to treat patients.”

The trial aims to compare mortality among patients who receive one of three investigational Ebola drugs with a control group of patients who receive the investigational monoclonal antibody cocktail treatment ZMapp, developed by Mapp Biopharmaceutical, Inc. The therapies being tested include: [mAb114](#), a single monoclonal antibody developed by NIAID, with early support from the INRB; and remdesivir (also known as GS-5734), an antiviral drug developed by Gilead Sciences, Inc. The trial has been approved to begin enrolling patients in these three groups, and plans are underway to amend the trial to include REGN-EB3 (also known as REGN3470-3471-3479), a monoclonal antibody cocktail developed by Regeneron Pharmaceuticals, Inc.

The participating Ebola treatment units will continue to provide all participants with supportive care for EVD. Ebola care includes supportive oral and/or intravenous fluids, electrolyte replacement, maintaining oxygen status and blood pressure, and pain management. The investigational treatments have varying levels of data to support their use from testing in the laboratory, animals, and humans. However, none has been approved for treating EVD.

ZMapp is the only investigational treatment previously tested in a randomized, controlled efficacy trial. [Results](#) from that study, conducted in the U.S. and West Africa during the 2014 to 2016 outbreak, suggested that ZMapp appeared to be beneficial, but as the outbreak waned, the trial ultimately could not enroll enough participants to definitively establish the drug's efficacy.

The investigational treatments also have been administered to most of the Ebola patients in the current outbreak in the DRC under an ethical framework developed by the WHO called [Monitored Emergency Use of Unregistered and Investigational Interventions \(MEURI\)](#) ([link is external](#)). However, this emergency-use mechanism cannot yield generalizable evidence on how well the treatments work.

"A randomized, controlled clinical trial is necessary to obtain reliable data about the safety and efficacy of investigational Ebola treatments," said H. Clifford Lane, M.D., director of NIAID's Division of Clinical Research. "It is possible to conduct rigorous clinical research in an outbreak setting, and we anticipate this trial will provide useful data."

Professor Jean-Jacques Muyembe-Tamfum, M.D., Ph.D., director-general of the INRB, and Richard T. Davey, Jr., M.D., deputy director of NIAID's Division of Clinical Research, are co-principal investigators for the study.

Trial participants will be randomly assigned to receive one of the investigational treatments by intravenous infusion. Site clinicians will monitor patients' symptoms and take blood samples for laboratory tests. Patients will remain in the Ebola treatment unit until they fully recover from the disease. They will be asked to return to the clinic approximately two months after receiving treatment for a check-up and to provide additional blood samples for laboratory tests.

Plans are underway to expand the trial beyond the ALIMA site in Beni to additional Ebola treatment units operated by medical humanitarian organizations, including International Medical Corps. The trial also may be adapted to continue across more than one outbreak and in several countries. The number of participants enrolled in the trial ultimately will depend on the evolution of Ebola outbreaks. The study is designed to enroll 112 patients per arm, potentially over multiple outbreaks.

"This clinical trial marks a significant and important step forward for the DRC and our international partners," said Dr. Muyembe. "We are eager to learn more about each of these investigational treatments as we continue to work tirelessly to identify new cases, trace contacts and control the spread of disease."

An independent data and safety monitoring board will regularly review the study data. For more information, visit [ClinicalTrials.gov](https://ClinicalTrials.gov) and search identifier [NCT03719586](https://ClinicalTrials.gov/ct2/show/study/NCT03719586).

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### **17: Situation report on the Ebola outbreak in North Kivu**

28 November 2018

*[Excerpt]*

*...Case Management*

The ETCs continue to provide therapeutics under the monitored emergency use of unregistered and experimental interventions (MEURI) protocol, in collaboration with the MoH and the Institut National de Recherche Biomédicale (INRB) together with supportive care measures. WHO is providing technical clinical expertise on-site and is assisting with the creation of a data safety management board...

### **DONs Ebola virus disease – Democratic Republic of the Congo**

29 November 2018

*[Excerpt]*

...The risk of the outbreak spreading to other provinces in the Democratic Republic of the Congo, as well as to neighbouring countries, remains very high. Over the course of the past week, alerts have been reported from South Sudan and Uganda; EVD has been ruled out for all alerts to date...

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## **Emergencies**

### **POLIO**

*Public Health Emergency of International Concern (PHEIC)*

**Polio this week as of 27 November 2018** [GPEI]

*Summary of new viruses this week:*

***Afghanistan*** – advance notification of one wild poliovirus type 1 (WPV1) case and six positive WPV 1 environmental samples

***Pakistan*** – two WPV1 positive environmental samples.

***Niger*** – one case of circulating vaccine-derived poliovirus type 2 (cVDPV2).

### **Statement of the Nineteenth IHR Emergency Committee Regarding the International Spread of Poliovirus**

30 November 2018

*[Excerpts; Editor's text bolding]*

The nineteenth meeting of the Emergency Committee under the International Health Regulations (2005) (IHR) regarding the international spread of poliovirus was convened by the Director General on 27 November 2018 at WHO headquarters with members, advisers and invited Member States attending via teleconference.

The Emergency Committee reviewed the data on wild poliovirus (WPV1) and circulating vaccine derived polioviruses (cVDPV). The Secretariat presented a report of progress for affected IHR States Parties subject to Temporary Recommendations. The following IHR States Parties

provided an update on the current situation and the implementation of the WHO Temporary Recommendations since the Committee last met on 15 August 2018: Afghanistan, Democratic Republic of the Congo (DR Congo), Nigeria, Niger, Papua New Guinea (PNG), and Somalia...

...*Conclusion*

**The Committee unanimously agreed that the risk of international spread of poliovirus remains a Public Health Emergency of International Concern (PHEIC), and recommended the extension of Temporary Recommendations for a further three months.** The Committee considered the following factors in reaching this conclusion:

:: Although the declaration of the PHEIC and issuance of Temporary Recommendations has reduced the risk of international spread of WPV, progress is fragile, and should international spread now occur, the impact on WPV eradication would be even more grave in terms of delaying certification and prolonging requirements for dedicated human and financial resources in support of the eradication effort. The reversal in progress in Afghanistan and the stagnation in Pakistan with exportation of WPV continuing between the two countries, heighten concerns.

:: There is a risk of global complacency as the numbers of WPV cases remains low and eradication becomes a tangible reality, and a concern that removal of the PHEIC now could contribute to greater complacency.

:: **Many countries remain vulnerable to WPV importation.** Gaps in population immunity in several key high-risk areas is evidenced by the current number of cVDPV outbreaks of all serotypes, which only emerge and circulate when polio population immunity is low as a result of deficient routine immunization programmes.

:: **The international outbreak of cVDPV2 affecting Somalia and Kenya, with a highly diverged cVDPV2 that appears to have circulated undetected for up to four years, highlights that there are still high-risk populations** in South and Central zones of Somalia where population immunity and surveillance are compromised by conflict.

:: Similarly the new spread of cVDPV2 between Nigeria and Niger highlights the significant risk of persisting type 2 outbreaks two years after OPV2 withdrawal, and the inability so far to prevent further spread within and outside Nigeria through application of consistently high quality mOPV2 SIAs is a concern.

:: **The difficulty in controlling spread of cVDPV2 in DR Congo heightens these concerns and demonstrates significant gaps in population immunity at a critical time in the polio endgame;** the low coverage with routine IPV vaccination in several countries neighboring DR Congo heightens the risk of international spread, as population immunity is rapidly waning.

:: **Inaccessibility continues to be a major risk,** particularly in several countries currently infected with WPV or cVDPV, i.e. Afghanistan, Nigeria and Somalia, which all have sizable populations that have been unreached with polio vaccine for prolonged periods.

**:: The increasing number of countries in which immunization systems have been weakened or disrupted by conflict and complex emergencies pose another risk.**  
Populations in these fragile states are vulnerable to outbreaks of polio.

**:: The risk is amplified by population movement**, whether for family, social, economic or cultural reasons, or in the context of populations displaced by insecurity and returning refugees. There is a need for international coordination to address these risks. A regional approach and strong cross border cooperation is required to respond to these risks, as much international spread of polio occurs over land borders.

...Based on the current situation regarding WPV1 and cVDPV, and the reports provided by Afghanistan, DR Congo, Nigeria, Niger, Papua New Guinea and Somalia, **the Director-General accepted the Committee's assessment and on 27 November 2018 determined that the situation relating to poliovirus continues to constitute a PHEIC**, with respect to WPV1 and cVDPV...

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***Editor's Note:***

*WHO has posted a [refreshed emergencies page](#) which presents an updated listing of Grade 3,2,1 emergencies as below.*

**WHO Grade 3 Emergencies** [to 1 Dec 2018]

**Democratic Republic of the Congo**

**:: Malaria control campaign launched in Democratic Republic of the Congo to save lives and aid Ebola response**

28 November 2018 | BENI: A spike in malaria cases is threatening the health of people in parts of the eastern Democratic Republic of the Congo (DRC) where health workers are also battling an Ebola outbreak. In response, a four-day mass drug administration (MDA) campaign was launched today in the Northern Kivu province town of Beni, with a target to reach up to 450 000 people with anti-malarial drugs combined with the distribution of insecticide-treated mosquito nets...

**:: 17: Situation report on the Ebola outbreak in North Kivu** 28 November 2018

**:: DONs Ebola virus disease – Democratic Republic of the Congo** 29 November 2018

*[See Milestones above for more detail]*

**Bangladesh - Rohingya crisis**

**:: Weekly Situation Report 52 -22 November 2018**

***Key Highlights***

... The fourth round of oral cholera campaign was launched on 17 November 2018 under the leadership of DGHS in collaboration WHO, UNICEF and other health sector partners.

**Syrian Arab Republic**

**:: WHO update on reported chemical event in Aleppo, Syria** 29 November 2018

Myanmar - *No new announcements identified*

Nigeria - *No new announcements identified*

Somalia - *No new announcements identified*  
South Sudan - *No new announcements identified*  
Yemen - *No new announcements identified*

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### **WHO Grade 2 Emergencies** [to 1 Dec 2018]

#### **Iraq**

:: WHO and health partners step up efforts to provide urgent support for victims of flooding in Iraq 26 November 2018

Brazil (in Portuguese) - *No new announcements identified*  
Cameroon - *No new announcements identified*  
Central African Republic - *No new announcements identified*  
Ethiopia - *No new announcements identified*  
Hurricane Irma and Maria in the Caribbean - *No new announcements identified*  
occupied Palestinian territory - *No new announcements identified*  
Libya - *No new announcements identified*  
MERS-CoV - *No new announcements identified*  
Niger - *No new announcements identified*  
Sao Tome and Principe Necrotizing Cellulitis (2017) - *No new announcements identified*  
Sudan - *No new announcements identified*  
Ukraine - *No new announcements identified*  
Zimbabwe - *No new announcements identified*

### **WHO-AFRO: Outbreaks and Emergencies Bulletin, Week 46: 1- 23 November 2018**

The WHO Health Emergencies Programme is currently monitoring 53 events in the region. This week's edition covers key ongoing events, including:

- :: Ebola virus disease in the Democratic Republic of the Congo
- :: Anthrax (suspected) in Namibia
- :: Measles in Madagascar
- :: Typhoid fever in Zimbabwe
- :: Humanitarian crisis in Mali.

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### **WHO Grade 1 Emergencies** [to 1 Dec 2018]

Afghanistan  
Chad  
Indonesia - Sulawesi earthquake 2018  
Kenya  
Lao People's Democratic Republic  
Mali  
Namibia - viral hepatitis  
Peru  
Philippines - Typhoon Mangkhut  
Tanzania

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### **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.*

Yemen - *No new announcements identified.*

Syrian Arab Republic - *No new announcements identified.*

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### **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.*

#### **Ethiopia**

:: Ethiopia: Humanitarian Response Situation Report No.19 (November 2018) 26 Nov 2018

Somalia - *No new announcements identified.*

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### **“Other Emergencies”**

**Indonesia: Central Sulawesi Earthquake** –*No new announcements identified.*

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#### ***Editor’s Note:***

*We will cluster these recent emergencies as below and continue to monitor the WHO webpages for updates and key developments.*

#### **EBOLA/EVD** [to 1 Dec 2018]

<http://www.who.int/ebola/en/>

:: 16: Situation report on the Ebola outbreak in North Kivu 21 November 2018

:: DONs Ebola virus disease – Democratic Republic of the Congo 22 November 2018

*[See Milestones above for more detail]*

#### **MERS-CoV** [to 1 Dec 2018]

<http://who.int/emergencies/mers-cov/en/>

- *No new announcements identified.*

#### **Yellow Fever** [to 1 Dec 2018]

<http://www.who.int/csr/disease/yellowfev/en/>

- *No new announcements identified.*

#### **Zika virus** [to 1 Dec 2018]

<http://www.who.int/csr/disease/zika/en/>

- No new announcements identified.

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## **WHO & Regional Offices** [to 1 Dec 2018]

1 December 2018

### **[Why the HIV epidemic is not over](#)**

1 December 2018 marks the 30th anniversary of World AIDS Day – a day created to raise awareness about HIV and the resulting AIDS epidemics. Since the beginning of the epidemic, more than 70 million people have acquired the infection, and about 35 million people have died. Today, around 37 million worldwide live with HIV, of whom 22 million are on treatment...

29 November 2018

*News Release*

### **[Measles cases spike globally due to gaps in vaccination coverage](#)**

*[See Milestones above for more detail]*

26 November 2018

*News Release*

### **[Democratic Republic of the Congo begins first-ever multi-drug Ebola trial](#)**

*[See Milestones above for more detail]*

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## **[Weekly Epidemiological Record, 30 November 2018, vol. 93, 48 \(pp. 649–660\)](#)**

Progress towards regional measles elimination – worldwide, 2000–2017

Monthly report on dracunculiasis cases, January–October 2018

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## **WHO Regional Offices**

*Selected Press Releases, Announcements*

### **[WHO African Region AFRO](#)**

*Selected Featured News*

:: [Tailoring services to people at higher risk of HIV in Nigeria](#) 30 November 2018

:: [Self-testing for HIV is getting high marks in Zimbabwe](#) 30 November 2018

:: [South Sudan declares Yellow fever outbreak in Sakure, Nzara County, Gbudue State](#) 29 November 2018

:: [With WHO support, South Sudan enhances meningitis preparedness and response](#) 28 November 2018

### **[WHO Region of the Americas PAHO](#)**

:: [PAHO and Ministers of Health from the Americas identified a series of actions that seek to improve the health of migrants in the Region \(11/30/2018\)](#)

:: [PAHO urges testing as the first step towards preventing HIV and halting the AIDS epidemic \(11/30/2018\)](#)

:: Violence against women affects almost 60% of women in some countries of the Americas (11/29/2018)

:: PAHO launches campaign to prevent cervical cancer (11/27/2018)

:: Countries in the Americas commit to continuing to collaborate in strengthening regulatory systems to ensure safe, effective and quality medicines (11/26/2018)

### **WHO South-East Asia Region SEARO**

- *No new announcement identified*

### **WHO European Region EURO**

:: New HIV diagnoses at alarmingly high levels in the European Region despite progress in EU/EEA 28-11-2018

:: Countries of eastern Europe and central Asia improve access to HIV, TB and viral hepatitis diagnostic technologies and medicines 27-11-2018

:: WHO and EU commit to work together to accelerate progress on health 27-11-2018

### **WHO Eastern Mediterranean Region EMRO**

:: Twentieth polio case reported in Afghanistan: the highest number since 2015 29 November 2018

:: Lifesaving medical supplies reach Shirqat for Iraqi flood victims 28 November 2018

:: Strengthening the health system response to gender-based violence in the Region 25 November 2018

### **WHO Western Pacific Region**

- *No new announcement identified*

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**CDC/ACIP** [to 1 Dec 2018]

<http://www.cdc.gov/media/index.html>

<https://www.cdc.gov/vaccines/acip/index.html>

### **MMWR News Synopsis for Friday November 30, 2018**

**Implementation of the Treat All Policy Among Persons Living with HIV Enrolled in Care but Not on Antiretroviral Therapy — India, May 2017–June 2018**

This report describes India's implementation of the Treat All policy, which recommends that all people living with HIV (PLHIV) begin antiretroviral treatment as soon as possible after diagnosis. India's experience suggests that active tracking and tracing of people with HIV infection who are enrolled in HIV care but not on ART, combined with education about the benefits of early HIV treatment, can facilitate ART initiation. India, which has the world's third largest burden of HIV infection (2.1 million people), adopted Treat All on April 28, 2017. From May 1, 2017, through June 30, 2018, India's National AIDS Control Organization (NACO), CDC, and other partners conducted activities to facilitate ART initiation among people enrolled in care (but not on ART because of ineligibility based on previous guidelines) at 46 ART centers supported by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) in the six most populated districts in two states. Among 25,007 people enrolled, 9,898 (40%) initiated ART after the Treat All policy adoption. Of those, 6,315 (64%), including 1,635 (17%) people lost to

follow-up while awaiting ART initiation, initiated ART only after they were reached and educated about ART benefits. Active tracking and tracing of people with HIV infection who are enrolled in HIV care but not on ART, combined with education about the benefits of early HIV treatment, can facilitate ART initiation.

#### [Multistate Infestation with an Exotic Disease-Vector Tick \*Haemaphysalis longicornis\* — United States, August 2017–September 2018](#)

The Asian longhorned tick (*Haemaphysalis longicornis*) is new to the United States and can transmit pathogens found in the United States. In August 2017, a tick common to eastern Asia was discovered on a sheep in New Jersey. This tick, known as the Asian longhorned tick or *Haemaphysalis longicornis*, is not native to the United States. As of October 2, 2018, Asian longhorned ticks have been found in nine states: Arkansas, Connecticut, Maryland, North Carolina, New Jersey, New York, Pennsylvania, Virginia, and West Virginia. While ticks collected in the United States have not been found infected with any pathogens, in other parts of the world the tick can spread viruses, bacteria, and parasites known to infect people and animals, causing severe disease and death. To date, there is no evidence that the tick has spread pathogens to people or animals in the United States. A single female tick can reproduce offspring without mating. As a result, hundreds to thousands of ticks may be found on a single animal or in the surrounding environment.

#### [Outbreak of Dengue Virus Type 2 — American Samoa, November 1, 2016 – October 31, 2018](#)

Dengue continues to be a public health burden throughout the tropics. After recent outbreaks of dengue, chikungunya, and Zika viruses in the U.S. territory of American Samoa, another dengue outbreak occurred starting in late 2016 and lasted through October 2018. During this outbreak, more than 1,000 dengue cases were confirmed, and more than one-third of people with dengue were hospitalized. This outbreak further demonstrates that additional approaches to the control of mosquito-transmitted diseases are urgently needed.

#### [Progress Toward Regional Measles Elimination — Worldwide, 2000–2017](#)

During 2000–2017, increased vaccination coverage with measles-containing vaccine administered through routine immunization programs, supplementary immunization activities, and other global measles elimination efforts contributed to an 83 percent drop in reported measles incidence and an 80 percent reduction in estimated measles mortality. The increasing number of countries verified as having achieved measles elimination indicates progress toward interruption of measles virus transmission globally. Continuing to increase coverage with first dose of measles-containing vaccine (MCV1) and second dose of measles-containing vaccine (MCV2) is critical to both the achievement and sustainability of global and regional measles goals. During 2000–2017, MCV1 coverage increased globally from 72 percent to 85 percent due to routine immunization programs, supplemental immunization activities (SIAs), and other global measles-elimination efforts. Measles vaccination prevented an estimated 21.1 million deaths during this period, with the majority of deaths averted in the WHO African region and among Gavi, the Vaccine Alliance-eligible countries. Estimated MCV2 coverage increased globally from 15 percent in 2000 to 67 percent in 2017, largely due to an increase in the number of countries providing MCV2 nationally from 98 (51%) in 2000 to 167 (86%) in 2017. Despite progress made, global milestones have not been achieved: MCV1 coverage has stagnated for nearly a decade; global MCV2 coverage is only at 67 percent despite steady increases in coverage; and several regions are experiencing a measles resurgence.

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**Africa CDC** [to 1 Dec 2018]

<https://au.int/en/africacdc>

*No new digest content identified.*

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**China CDC**

<http://www.chinacdc.cn/en/>

*New website launched...no "news" or "announcements" page identified.*

**National Health Commission of the People's Republic of China**

<http://en.nhfpc.gov.cn/>

*Selected Updates/ Press Releases/ Notices*

*Updated: 2018-12-01*

**[Gene-edited babies: Chinese Academy of Medical Sciences' response and action](#)**

*(The Lancet )*

*Updated: 2018-11-30*

**[Researcher who edited human gene suspended](#)**

*(China Daily)*

He Jiankui, the Chinese researcher who claimed to have created the world's first gene-edited babies, has been suspended from any scientific activities amid mounting questions from government agencies and academicians about the experiment.

Using a fertilized human egg cell, He sought to disable a gene that forms a protein doorway that allows the HIV to enter, intending to make the resulting person resistant to the virus. "The case, as media have reported, is a blatant violation of China's laws and regulations, and it breaks the bottom line of academic morality and ethics," Xu Nanping, vice-minister of science and technology, said on Thursday in an interview with China Central Television. "It's shocking and unacceptable."

Xu said the ministry has ordered relevant authorities to suspend all scientific activity of people involved with the case, and will mete out punishments together with other authorities based on the results of the investigation...

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**[Announcements](#)**

**BMGF - Gates Foundation** [to 1 Dec 2018]

<http://www.gatesfoundation.org/Media-Center/Press-Releases>

*No new digest content identified.*

**Bill & Melinda Gates Medical Research Institute** [to 1 Dec 2018]

<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*  
*No new digest content identified.*

**CARB-X** [to 1 Dec 2018]

<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 Dec 2018]

<http://cepi.net/>

*No new digest content identified.*

**EDCTP** [to 1 Dec 2018]

<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*

30 November 2018

**[World AIDS Day 2018: Supporting R&D partnerships to tackle HIV](#)**

World AIDS Day 2018 marks its 30th anniversary. Significant progress has been made in the fight against the disease during these three decades. However, the Global AIDS Update 2018 report shows that much needs to be done to reach the...

26 November 2018

**[National health research systems in Africa: developing a collaborative approach](#)**

EDCTP published the report on the EDCTP high-level meeting Engaging African governments to strengthen national health research systems with complementary international cooperation. The meeting took place in Dakar, Senegal, on 30 August 2018. It was organised as a side meeting...

**Emory Vaccine Center** [to 1 Dec 2018]

<http://www.vaccines.emory.edu/>

No new digest content identified.

**European Medicines Agency** [to 1 Dec 2018]

<http://www.ema.europa.eu/ema/>

*News and press releases*

No new digest content identified.

**European Vaccine Initiative** [to 1 Dec 2018]

<http://www.euvaccine.eu/news-events>

*No new digest content identified.*

**FDA** [to 1 Dec 2018]

<http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/default.htm>

*No new digest content identified.*

November 28, 2018 –

[\*\*FDA approves treatment for adult patients who have relapsed or refractory acute myeloid leukemia \(AML\) with a certain genetic mutation\*\*](#)

November 26, 2018 –

[\*\*FDA approves an oncology drug that targets a key genetic driver of cancer, rather than a specific type of tumor\*\*](#)

November 26, 2018 –

[\*\*Statement from FDA Commissioner Scott Gottlieb, M.D. and Jeff Shuren, M.D., Director of the Center for Devices and Radiological Health, on transformative new steps to modernize FDA's 510\(k\) program to advance the review of the safety and effectiveness of medical devices\*\*](#)

**Fondation Merieux** [to 1 Dec 2018]

<http://www.fondation-merieux.org/>

*Mérieux Foundation co-organized event*

[\*\*OCV working group / Global Task Force on Cholera Control \(GTFCC\)\*\*](#)

December 5 - 6, 2018 - Les Pensieres Center for Global Health, Veyrier-du-Lac (France)

*Partner event*

[\*\*ASLM 2018 – Preventing and controlling the next pandemic: the role of laboratory\*\*](#)

December 10 - 13, 2018 - Abuja (Nigeria)

*Mérieux Foundation co-organized event*

[\*\*Dengue pre-vaccination screening based on serostatus: rapid tests and implementation strategies\*\*](#)

January 14 - 16, 2019 - Les Pensières Center for Global Health, Veyrier du Lac (France)

**Gavi** [to 1 Dec 2018]

<https://www.gavi.org/>

29 November 2018

[\*\*Measles cases spike globally due to gaps in vaccination coverage: New report\*\*](#)

### **[Gavi Board starts framing Alliance's approach to 2021-2025 period](#)**

29 November 2018

*[See Milestones above for detail]*

### **[Gavi recognised as an equal salary employer](#)**

26 November 2018

### **GHIT Fund** [to 1 Dec 2018]

<https://www.ghitfund.org/newsroom/press>

*GHIT was set up in 2012 with the aim of developing new tools to tackle infectious diseases that devastate the world's poorest people. Other funders include six Japanese pharmaceutical  
No new digest content identified.*

### **Global Fund** [to 1 Dec 2018]

<https://www.theglobalfund.org/en/news/>

30 November 2018

### **[Global Fund Marks World AIDS Day](#)**

*Feature Story*

### **[Young Women at the Epicenter of HIV](#)**

29 November 2018

### **[Global Fund Applauds UNAIDS Report on HIV Testing](#)**

27 November 2018

The Global Fund to Fight AIDS, Tuberculosis and Malaria welcomed a new report by UNAIDS that shows great gains in HIV testing, and getting people to know their HIV status. Knowledge is Power, the report released just prior to World AIDS Day on 1 December, shows that 75 percent of people living with HIV aware of their status in 2017, compared with 67 percent in 2015...

### **Hilleman Laboratories** [to 1 Dec 2018]

<http://www.hillemanlabs.org/>

*No new digest content identified.*

### **Human Vaccines Project** [to 1 Dec 2018]

<http://www.humanvaccinesproject.org/media/press-releases/>

*No new digest content identified.*

### **IAVI** [to 1 Dec 2018]

<https://www.iavi.org/newsroom>

November 29, 2018

### **[IAVI Report Vol. 22, No. 3, 2018](#)**

Scientists are more optimistic than ever about developing HIV vaccines and antibody-based products.

**IFFIm**

<http://www.iffim.org/library/news/press-releases/>

*No new digest content identified.*

**IVAC** [to 1 Dec 2018]

<https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html>

*No new digest content identified.*

**IVI** [to 1 Dec 2018]

<http://www.ivi.int/>

*IVI News & Announcements*

**[BOT meets face-to-face and visits KCDC & LG Chem's vaccine plant](#)**

On Nov. 19, 2018, IVI's Board of Trustees convened at IVI headquarters in Seoul for their second face-to-face meeting of the year. This was followed by a visit to the Korea Center for Disease Control (KCDC) on Nov. 20 to exchange information on new initiatives, discuss matters of mutual interest, and to explore opportunities to further expand their partnership, as well as a site tour to LG Chem's vaccine plant in Osong, North Chungcheong Province...

**[Scientific Advisory Group \(SAG\) gathers for 17th meeting](#)**

IVI's Scientific Advisory Group (SAG) convened at IVI headquarters in Seoul on November 15 for their 17th annual two-day-long meeting. This event brings together IVI scientists and members of the SAG. The SAG consists of 16 members, including distinguished vaccinologists and public health leaders, who have been helping the Institute to chart the direction of vaccine research and development, and to explore future opportunities. During this meeting they shared an overview of the latest in IVI projects and exchanged new information and ideas...

**JEE Alliance** [to 1 Dec 2018]

<https://www.jeealliance.org/>

*No new digest content identified.*

**MSF/Médecins Sans Frontières** [to 1 Dec 2018]

<http://www.msf.org/>

*Selected News; Project Updates, Reports*

*World AIDS Day*

**[UNAIDS report overlooks significant aspects of the global HIV response](#)**

Statement 29 Nov 2018

UNAIDS' World AIDS Day 2018 report is selectively silent on persistently high AIDS mortality and looming treatment rationing in light of donor disengagement.

This year's [UNAIDS report](#) highlights the importance of viral load testing, a critical indicator of the effectiveness of HIV treatment in people living with HIV.

Yet the focus on HIV testing and regular viral load monitoring overlooks fundamental aspects of today's HIV epidemic and continued high numbers of AIDS-related deaths.

The report also fails to profile the significant shortfalls in international support to effectively fight the HIV/AIDS epidemic...

*HIV/AIDS*

### **Pharmaceutical corporations are failing children with HIV**

Press Release 29 Nov 2018

:: Kids living with HIV need to be on antiretroviral (ARV) treatment for life to stay healthy

:: One year ago, pharmaceutical corporations committed to improving access to paediatric versions of HIV drugs for children, but very little progress has been made

:: MSF urges pharmaceutical corporations including Viiv and Merck to immediately register paediatric ARVs and improve access for kids.

**NIH** [to 1 Dec 2018]

<http://www.nih.gov/news-events/news-releases>

November 30, 2018

### **NIH Statement on World AIDS Day December 1, 2018**

— We now have life-saving antiretroviral drugs to treat and greatly extend the lives of men and women living with HIV.

November 27, 2018

### **Clinical trial of investigational Ebola treatments begins in the Democratic Republic of the Congo**

— Study is enrolling patients of any age with confirmed Ebola virus disease.

*[See Milestones above for detail]*

**PATH** [to 1 Dec 2018]

<https://www.path.org/media-center/>

Nov. 30, 2018

### **Vietnam launches national program for pre-exposure prophylaxis for HIV**

PATH, USAID, and Vietnam's Ministry of Health launch PrEP program to substantially reduce new HIV infections as total PrEP service enrollment passes 2,000.

**Sabin Vaccine Institute** [to 1 Dec 2018]

<http://www.sabin.org/updates/pressreleases>

*No new digest content identified.*

**UNAIDS** [to 1 Dec 2018]

<http://www.unaids.org/en>

27 November 2018

### **Call for minimum standards of PrEP provision and monitoring in Europe**

26 November 2018

**Countries in eastern Europe and central Asia agree to expand access to a range of medicines**

**UNICEF** [to 1 Dec 2018]

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

*Selected Press Releases/Reports/Statements*

*Press release*

**Around 80 adolescents will die of AIDS every day by 2030, at current trends – UNICEF**

UNICEF calls for urgent scale-up of treatment and prevention programmes among adolescents as data shows slow reduction of HIV infections and AIDS-related deaths  
29/11/2018

*Press release*

**2018 Global Nutrition Report reveals malnutrition is unacceptably high and affects every country in the world, but there is also an unprecedented opportunity to end it.**

28/11/2018

*Press release*

**Measles cases spike globally due to gaps in vaccination coverage: New report**

29/11/2018

*[See Milestones above for detail]*

*Press release*

**UNICEF strengthens support for women and children in Venezuela**

*Supplies for 350,000 women and children flown in since August*

...Working with the Ministry of Health, UNICEF has also provided 30 tons of medicines and health supplies to help stop the spread of infectious diseases and to improve health outcomes for children and women in vulnerable communities. These supplies will be used in the treatment and care for 25,000 pregnant women, 10,000 newborns in neonatal wards and more than 2,300 children living with HIV. Through UNICEF's expanded programme, 40,000 pregnant women now have access to rapid HIV and syphilis tests, while 100,000 children and pregnant women have access to malaria treatment.

UNICEF, present in Venezuela since 1991, has over the past two years strengthened its work with partners to provide vulnerable children affected by the economic crisis with support in education, health, nutrition and protection. **So far this year, UNICEF has also supported the vaccination of children with 2.5 million doses of measles vaccines** and provided antiretrovirals for 2,334 children and antimalarial treatment for 150,000 children.

**Vaccine Confidence Project** [to 1 Dec 2018]

<http://www.vaccineconfidence.org/>

*No new digest content identified.*

**Vaccine Education Center – Children's Hospital of Philadelphia** [to 1 Dec 2018]

<http://www.chop.edu/centers-programs/vaccine-education-center>

*No new digest content identified.*

**Wellcome Trust** [to 1 Dec 2018]

<https://wellcome.ac.uk/news>

29 November 2018

**[How should Wellcome best support science to achieve our mission of improving health?](#)**

*We're launching a review of how Wellcome supports science. Jeremy Farrar explains why it's necessary and what we hope to achieve.*

Wellcome's mission is to improve health for everyone by helping great ideas to thrive. We achieve this in large part through our support for science, where we spend almost £630 million a year through many different mechanisms. But while the way we support science has varied little over several decades, science and the way it is done have changed.

With this in mind, it is timely for Wellcome to review the way we support research to ensure we get the best possible advances in scientific knowledge and health. How do we know, as technologies and ways of working change, that our current approach is the right one?

To answer these questions, we have decided to review how Wellcome supports science.

Director of Science Jim Smith will lead a small group that will explore questions such as:

- :: What disciplines and areas of science should Wellcome support?
- :: What career stages should Wellcome focus on?
- :: Where should Wellcome fund?
- :: With whom should Wellcome partner?...

**The Wistar Institute** [to 1 Dec 2018]

<https://www.wistar.org/news/press-releases>

*No new digest content identified.*

**World Organisation for Animal Health (OIE)** [to 1 Dec 2018]

<http://www.oie.int/en/for-the-media/press-releases/2018/>

*No new digest content identified.*

.....

**BIO** [to 1 Dec 2018]

<https://www.bio.org/insights/press-release>

Nov 30 2018

**[BIO Commends Signing of the United States-Mexico-Canada Agreement](#)**

Washington, D.C. (November 30, 2018) – Biotechnology Innovation Organization (BIO) President & CEO James C. Greenwood today issued the following statement on the United States-Mexico-Canada...

**[BIO Statement on Unsubstantiated Reports of Heritable Human Genome Editing Experiments in China](#)**

Nov 28 2018

The Biotechnology Innovation Organization (BIO) issued the following statement regarding unsubstantiated reports this week of experiments involving heritable human genome editing in China.

**DCVMN – Developing Country Vaccine Manufacturers Network** [to 1 Dec 2018]

<http://www.dcvmn.org/>

*No new digest content identified.*

**IFPMA** [to 1 Dec 2018]

<http://www.ifpma.org/resources/news-releases/>

*No new digest content identified.*

**PhRMA** [to 1 Dec 2018]

<http://www.phrma.org/press-room>

*Latest News*

**[PhRMA Statement on Signing the U.S.-Mexico-Canada Agreement \(USMCA\)](#)**

WASHINGTON, D.C. (November 30, 2018) – Pharmaceutical Research and Manufacturers of America (PhRMA) president and CEO Stephen J. Uhl issued the following statement:

“We congratulate the United States, Mexico and Canada on signing the U.S.-Mexico-Canada Agreement (USMCA). This is an important step in the process to modernize North American trade, including by improving critical intellectual property (IP) protections and other standards in Canada and Mexico that will help to usher in the next generation of medical treatments and cures. When countries protect and value innovation, America’s biopharmaceutical companies can continue bringing new medicines to patients around the world. The IP standards in the USMCA far exceed those in any other international trade agreement. We look forward to continuing to assist efforts by the Administration and Congress to pass the USMCA.”...

\* \* \* \*

***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](mailto:david.r.curry@centerforvaccineethicsandpolicy.org)

**American Journal of Infection Control**

December 2018 Volume 46, Issue 12, p1319-1424, e75-e90

<http://www.ajicjournal.org/current>

*Major Articles*

**[Tweeting about measles during stages of an outbreak: A semantic network approach to the framing of an emerging infectious disease](#)**

Lu Tang, Bijie Bie, Degui Zhi

p1375–1380

Published online: June 18, 2018

*Highlights*

:: Semantic networks based on word frequencies and co-occurrences can be used to induce the frames used in Twitter discussion about infectious diseases such as measles.

:: The public used four different frames in discussing the 2015 measles outbreak: news update, public health, vaccination, and political.

:: The public health frame is the most dominant frame in the initial and resolution stages. The vaccine frame is the most dominant frame in the maintenance stage.

:: The political frame is used least frequently during all stages of the outbreak.

:: Understanding how the public discuss measles on Twitter during a break allows public health professionals to create effective messages in communicating with the public.

**American Journal of Preventive Medicine**

December 2018 Volume 55, Issue 6, p759-944

<http://www.ajpmonline.org/current>

*Research Articles*

**[Impact of Electronic Point-of-Care Prompts on Human Papillomavirus Vaccine Uptake in Retail Clinics](#)**

Amanda F. Meyer, Nicole L. Borkovskiy, Jennifer L. Brickley, Rajeev Chaudhry, Andrew Franqueira, Joseph W. Furst, Donna M. Hinsch, Margaret R. McDonah, Jane F. Myers, Randi E. Petersen, Lila J. Finney Rutten, Patrick M. Wilson, Robert M. Jacobson

p822–829

Published online: October 18, 2018

**American Journal of Public Health**

December 2018 108(12)

<http://ajph.aphapublications.org/toc/ajph/current>

HEALTH EQUITY

**[On Health Priorities, BRICS Countries, and Equity](#)**

Global Health, Socioeconomic Factors

Cesar Gomes Victora

108(12), pp. 1601–1602

**American Journal of Tropical Medicine and Hygiene**

Volume 99, Issue 5, 2018

<http://www.ajtmh.org/content/journals/14761645/99/5>

[Reviewed earlier]

**Annals of Internal Medicine**

20 November 2018 Vol: 169, Issue 10  
<http://annals.org/aim/issue>  
[Reviewed earlier]

### **BMC Cost Effectiveness and Resource Allocation**

<http://resource-allocation.biomedcentral.com/>  
(Accessed 1 Dec 2018)  
[No new digest content identified]

### **BMJ Global Health**

December 2018 - Volume 3 - 6  
<https://gh.bmj.com/content/3/6>  
*Analysis*

[\*\*Reshaping public hospitals: an agenda for reform in Asia and the Pacific\*\*](#) (28 November, 2018)

Robin Gauld, Nima Asgari-Jirhandeh, Walaiporn Patcharanarumol, Viroj Tangcharoensathien

*Research*

[\*\*Health aid projects have both expanded and constrained the capacity of health facilities to deliver malaria services to under-five children in Malawi\*\*](#) (1 December, 2018)

Carrie B Dolan

### **BMC Health Services Research**

<http://www.biomedcentral.com/bmchealthservres/content>  
(Accessed 1 Dec 2018)  
[No new digest content identified]

### **BMC Infectious Diseases**

<http://www.biomedcentral.com/bmcinfectdis/content>  
(Accessed 1 Dec 2018)  
[No new digest content identified]

### **BMC Medical Ethics**

<http://www.biomedcentral.com/bmcmedethics/content>  
(Accessed 1 Dec 2018)  
*Research article*

| 26 November 2018

[\*\*Consent requirements for research with human tissue: Swiss ethics committee members disagree\*\*](#)

Authors: Flora Colledge, Sophie De Massougnes and Bernice Elger  
*Background*

In Switzerland, research with identifiable human tissue samples, and/or its accompanying data, must be approved by a research ethics committee (REC) before it can be allowed to take place. However, as the demand for such tissue has rapidly increased in recent years, and biobanks have been created to meet these needs, committees have had to deal with a growing number of such demands. Detailed instructions for evaluating every kind of tissue request are scarce. Committees charged with evaluating research protocols therefore sometimes face uncertainty in their decision-making.

### **BMC Medicine**

<http://www.biomedcentral.com/bmcmcd/content>

(Accessed 1 Dec 2018)

[No new digest content identified]

### **BMC Pregnancy and Childbirth**

<http://www.biomedcentral.com/bmcpregnancychildbirth/content>

(Accessed 1 Dec 2018)

*Research article*

#### **[Availability and affordability of priority life-saving medicines for under-five children in health facilities of Tigray region, northern Ethiopia](#)**

*In developing countries, child health outcomes are influenced by the non-availability of priority life-saving medicines at public sector health facilities and non-affordability of medicines at private medicine...*

Authors: Solomon Abrha, Ebisa Tadesse, Tesfay Mehari Atey, Fantahun Molla, Wondim Melkam, Birhanetensay Masresha, Solomon Gashaw and Abraham Wondimu

Citation: BMC Pregnancy and Childbirth 2018 18:464

Published on: 29 November 2018

### **BMC Public Health**

<http://bmcpublihealth.biomedcentral.com/articles>

(Accessed 1 Dec 2018)

*Research article*

#### **[Measles vaccination coverage, determinants of delayed vaccination and reasons for non-vaccination among children aged 24–35 months in Zhejiang province, China](#)**

*This study was aimed to assess the coverage of two doses of measles vaccine and identify the determinants of the delayed vaccination.*

Authors: Yu Hu, Ying Wang, Yaping Chen, Hui Liang and Zhiping Chen

Citation: BMC Public Health 2018 18:1298

Published on: 27 November 2018

### **BMC Research Notes**

<http://www.biomedcentral.com/bmcrenotes/content>

(Accessed 1 Dec 2018)

[No new digest content identified]

## **BMJ Open**

November 2018 - Volume 8 - 11

<http://bmjopen.bmj.com/content/current>

[Reviewed earlier]

## **Bulletin of the World Health Organization**

Volume 96, Number 12, December 2018, 797-864

<http://www.who.int/bulletin/volumes/96/12/en/>

*EDITORIALS*

### **[Shifting global health governance towards the sustainable development goals](#)**

– Robert Marten, Sowmya Kadandale, Anders Nordström & Richard D Smith

<http://dx.doi.org/10.2471/BLT.18.209668>

*RESEARCH*

### **[Oral cholera vaccination in hard-to-reach communities, Lake Chilwa, Malawi](#)**

*To evaluate vaccination coverage, identify reasons for non-vaccination and assess satisfaction with two innovative strategies for distributing second doses in an oral cholera vaccine campaign in 2016 in Lake Chilwa, Malawi, in response to a cholera outbreak.*

– Francesco Grandesso, Florentina Rafael, Sikhona Chipeta, Ian Alley, Christel Saussier, Francisco Nogareda, Monica Burns, Pauline Lechevalier, Anne-Laure Page, Leon Salumu, Lorenzo Pezzoli, Maurice Mwesawina, Philippe Cavailler, Martin Mengel, Francisco Javier Luquero & Sandra Cohuet

<http://dx.doi.org/10.2471/BLT.17.206417>

### **[Cost of a human papillomavirus vaccination project, Zimbabwe](#)**

*The government of Zimbabwe conducted the project from 2014–2015, delivering two doses of HPV vaccine to 10-year-old girls in two districts. School delivery was the primary vaccination strategy, with health facilities and outreach as secondary strategies. A retrospective cost analysis was conducted from the provider perspective. Financial costs (government expenditure) and economic costs (financial plus the value of existing or donated resources including vaccines) were calculated by activity, per dose and per fully immunized girl.*

– Anna Hidle, Gwati Gwati, Taiwo Abimbola, Sarah W Pallas, Terri Hyde, Amos Petu, Deborah McFarland & Portia Manangazira

<http://dx.doi.org/10.2471/BLT.18.211904>

## **Child Care, Health and Development**

Volume 44, Issue 6 Pages: 801-929 November 2018

<https://onlinelibrary.wiley.com/toc/13652214/current>

[Reviewed earlier]

## **Clinical Therapeutics**

November 2018 Volume 40, Issue 11, p1789-1956

<http://www.clinicaltherapeutics.com/current>

[New issue; No digest content identified]

### **Clinical Trials**

Volume 15 Issue 6, December 2018

<http://journals.sagepub.com/toc/ctja/15/6>

[Reviewed earlier]

### **Conflict and Health**

<http://www.conflictandhealth.com/>

[Accessed 1 Dec 2018]

[No new digest content identified]

### **Contemporary Clinical Trials**

Volume 75 Pages 1-86 (December 2018)

<https://www.sciencedirect.com/journal/contemporary-clinical-trials/vol/75/suppl/C>

[New issue; No digest content identified]

### **Current Opinion in Infectious Diseases**

December 2018 - Volume 31 - Issue 6

<https://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx>

[Reviewed earlier]

### **Developing World Bioethics**

Volume 18, Issue 3 Pages: 205-306 September 2018

<https://onlinelibrary.wiley.com/toc/14718847/current>

***SPECIAL ISSUE: AFRICAN PERSPECTIVES IN GLOBAL BIOETHICS***

[Reviewed earlier]

### **Development in Practice**

Volume 29, Issue 1, 2019

<http://www.tandfonline.com/toc/cdip20/current>

[Reviewed earlier]

### **Disasters**

Volume 42, Issue 4 Pages: S159-S327 October 2018

<https://onlinelibrary.wiley.com/toc/14677717/current>

***Disasters in Conflict Areas***

[Reviewed earlier]

### **EMBO Reports**

01 November 2018; volume 19, issue 11

<http://embor.embopress.org/content/19/11?current-issue=y>  
[New issue; No digest content identified]

### **Emerging Infectious Diseases**

Volume 24, Number 12—December 2018  
<http://wwwnc.cdc.gov/eid/>  
[New issue; No digest content identified]

### **Epidemics**

Volume 25 Pages 1-112 (December 2018)  
<https://www.sciencedirect.com/journal/epidemics/vol/25/suppl/C>  
[Reviewed earlier]

### **Epidemiology and Infection**

Volume 146 - Issue 16 - December 2018  
<https://www.cambridge.org/core/journals/epidemiology-and-infection/latest-issue>  
*Vaccines*  
*Original Paper*

#### **[Implementing large Foot and Mouth Disease vaccination programmes for smallholder farmers: lessons from Lao PDR](#)**

S. Nampanya, S. Khounsy, R. Abila, P. A. Windsor  
<https://doi.org/10.1017/S0950268818002443>  
Published online: 23 August 2018, pp. 2086-2095

### **The European Journal of Public Health**

Volume 28, Issue 5, 1 October 2018  
<https://academic.oup.com/eurpub/issue/28/5>  
[Reviewed earlier]

### **Genome Medicine**

<https://genomemedicine.biomedcentral.com/articles>  
[Accessed 24 Nov 2018]  
[No new digest content identified]

### **Global Health Action**

Volume 11, 2018 – Issue 1  
<https://www.tandfonline.com/toc/zgha20/11/1?nav=toCList>  
[Reviewed earlier]

### **Global Health: Science and Practice (GHSP)**

Vol. 6, No. 3 October 03, 2018

<http://www.ghspjournal.org/content/current>  
[Reviewed earlier]

### **Global Public Health**

Volume 14, 2019 Issue 1

<http://www.tandfonline.com/toc/rgph20/current>  
[Reviewed earlier]

### **Globalization and Health**

<http://www.globalizationandhealth.com/>  
[Accessed 1 Dec 2018]

*Review*

#### **[The financial sustainability of the World Health Organization and the political economy of global health governance: a review of funding proposals](#)**

*The World Health Organization (WHO) continues to experience immense financial stress. The precarious financial situation of the WHO has given rise to extensive dialogue and debate. This dialogue has generated ...*

Authors: Srikanth K. Reddy, Sumaira Mazhar and Raphael Lencucha

Citation: Globalization and Health 2018 14:119

Published on: 29 November 2018

### **Health Affairs**

Vol. 37 , No. 11 November 2018

<https://www.healthaffairs.org/toc/hlthaff/current>

#### ***Patient Safety***

[New issue; No digest content identified]

### **Health and Human Rights**

Volume 20, Issue 1, June 2018

<http://www.hhrjournal.org/>  
[Reviewed earlier]

### **Health Economics, Policy and Law**

Volume 13 - Special Issue 3-4 - July 2018

<https://www.cambridge.org/core/journals/health-economics-policy-and-law/latest-issue>

#### ***SPECIAL ISSUE: Canadian Medicare: Historical Reflections, Future Directions***

[Reviewed earlier]

### **Health Equity**

*Issue in Progress*

<https://www.liebertpub.com/toc/heq/2/1>  
[Reviewed earlier]

## Health Policy and Planning

Volume 33, Issue 9, 1 November 2018

<https://academic.oup.com/heapol/issue/33/9>

*Editor's Choice*

### [Developing more participatory and accountable institutions for health: identifying health system research priorities for the Sustainable Development Goal-era](#)

K Scott; N Jessani; M Qiu; S Bennett

Health Policy and Planning, Volume 33, Issue 9, 1 November 2018, Pages 975–987,

<https://doi.org/10.1093/heapol/czy079>

## Health Research Policy and Systems

<http://www.health-policy-systems.com/content>

[Accessed 1 Dec 2018]

*Research*

### [An analysis of research priority-setting at the World Health Organization – how mapping to a standard template allows for comparison between research priority-setting approaches](#)

*A review of research priorities completed by WHO technical units was undertaken. Results of the mapping were recorded in a database that was used to generate analysis and compare research priorities and the di...*

Authors: R. F. Terry, E. Charles, B. Purdy and A. Sanford

Citation: Health Research Policy and Systems 2018 16:116

Published on: 29 November 2018

## Humanitarian Exchange Magazine

Number 73, October 2018

<https://odihpn.org/magazine/mental-health-and-psychosocial-support-in-humanitarian-crises/>

### ***Rohingya refugees in Bangladesh: the humanitarian response***

More than 700,000 Rohingya refugees have arrived in Bangladesh since 25 August 2017 fleeing violence and persecution in Rakhine State, Myanmar. Over a million are sheltering in overcrowded camps without adequate assistance or protection. Stateless in Myanmar and denied refugee status in Bangladesh, the Rohingya have few rights or freedoms. Monsoons and cyclones are causing landslides, destroying shelters and infrastructure and disrupting services.

This edition of Humanitarian Exchange focuses on the humanitarian response to the Rohingya crisis. In the lead article, [Mark Bowden](#) outlines the historical, local and national political context in Bangladesh, and its operational implications. [Amal de Chickera](#) highlights the links between statelessness and displacement, and the international community's failure to prioritise human rights in its dealings both with Bangladesh and with Myanmar. [Puttanee Kangkun and John Quinley](#) document the persistent persecution and denial of rights the Rohingya have faced for decades. [Jeff Crisp](#) reflects on the premature, involuntary and unsafe return of Rohingya refugees to Myanmar in the 1970s and 1990s, and asks whether this could happen again.

Sally Shevach and colleagues explore how the 'localisation' agenda has influenced the operational response, and Kerrie Holloway draws on research by the Humanitarian Policy Group to test the common assumption that local actors necessarily have a better understanding of people's needs. Nasif Rashad Khan and colleagues and Ashish Banik reflect on their experiences of engaging with the international humanitarian response system. Margie Buchanan-Smith and Marian Casey-Maslen discuss evaluation findings relating to communication and community engagement, a theme taken up by Nick Van Praag and Kai Hopkins, who report on a Ground Truth survey on refugees' perceptions of assistance. Julia Brothwell discusses the British Red Cross/Bangladesh Red Crescent involvement in disaster preparedness and risk reduction during the monsoon season, and Gina Bark, Kate White and Amelie Janon outline the consequences of long-term exclusion from basic healthcare services in increasing vulnerability to preventable diseases. Matthew Wencel and colleagues round off the issue with reflections on data collection coordination and other challenges associated with monitoring large concentrations of refugees.

### **Human Vaccines & Immunotherapeutics** (formerly Human Vaccines)

Volume 14, Issue 10, 2018

<http://www.tandfonline.com/toc/khvi20/current>

#### ***Issue Special Focus: Vaccination in Africa***

[Reviewed earlier]

### **Infectious Agents and Cancer**

<http://www.infectagentscancer.com/content>

[Accessed 1 Dec 2018]

[No new digest content identified]

### **Infectious Diseases of Poverty**

<http://www.idpjournal.com/content>

[Accessed 1 Dec 2018]

*Research Article*

#### **[Improving immunization capacity in Ethiopia through continuous quality improvement interventions: a prospective quasi-experimental study](#)**

*Strong scientific evidence is needed to support low-income countries in building effective and sustainable immunization programs and proactively engaging in global vaccine development and implementation initiatives. This study aimed to implement and evaluate the effectiveness of system-wide continuous quality improvement (CQI) interventions to improve national immunization programme performance in Ethiopia.*

Authors: Tsegahun Manyazewal, Alemayehu Mekonnen, Tesfa Demelew, Semegnew Mengestu, Yusuf Abdu, Dereje Mammo, Workeabeba Abebe, Belay Haffa, Daniel Zenebe, Bogale Worku, Amir Aman and Setegn Tigabu

Citation: Infectious Diseases of Poverty 2018 7:119

Published on: 30 November 2018

### **International Health**

Volume 10, Issue 6, November 2018

<http://inthehealth.oxfordjournals.org/content/current>  
[Reviewed earlier]

**International Journal of Community Medicine and Public Health**

Vol 5, No 12 (2018) December 2018

<http://www.ijcmph.com/index.php/ijcmph/issue/view/45>

*Original Research Articles*

**[HPV vaccine knowledge and coverage among female students in a medical college, Kerala](#)**

Niveditha Das E., Paul T. Francis

DOI: [10.18203/2394-6040.ijcmph20184779](https://doi.org/10.18203/2394-6040.ijcmph20184779)

**[Evaluation of session sites of routine immunization program in Damoh district of Madhya Pradesh](#)**

Ram Kumar Panik

DOI: [10.18203/2394-6040.ijcmph20184831](https://doi.org/10.18203/2394-6040.ijcmph20184831)

**International Journal of Epidemiology**

Volume 47, Issue 5, October 2018

<https://academic.oup.com/ije/issue/47/5>

[Reviewed earlier]

**International Journal of Human Rights in Healthcare**

Volume 11 Issue 5 2018

<https://www.emeraldinsight.com/toc/ijhrh/11/5>

[Reviewed earlier]

**International Journal of Infectious Diseases**

December 2018 Volume 77, p1-118

[https://www.ijidonline.com/issue/S1201-9712\(18\)X0012-5](https://www.ijidonline.com/issue/S1201-9712(18)X0012-5)

*World AIDS Day 2018*

**[HIV pre-exposure prophylaxis in South East Asia: A focused review on present situation](#)**

Kin Wang To, Shui Shan Lee

p113–117

Published online: November 2, 2018

*Original Reports*

**[Evaluating the frequency of operational research conducted during the 2014–2016 West Africa Ebola epidemic](#)**

Christopher Hurtado, Diane Meyer, Michael Snyder, Jennifer B. Nuzzo

p29–33

Published online: October 5, 2018

**[Investigation of the risk factors associated with the failure of hepatitis B vaccination of neonates in Yunnan province, China](#)**

Feng Wang, Wenyu Kang, Wenting Zhou, Quidong Su, Shengli Bi, Feng Qiu, Qiongfen Li  
p90–95

Published online: October 5, 2018

**JAMA**

November 27, 2018, Vol 320, No. 20, Pages 2053-2160

<http://jama.jamanetwork.com/issue.aspx>

[New issue; No digest content identified]

*Viewpoint*

**[Increasing the Participation of Pregnant Women in Clinical Trials](#)**

Katrina Heyrana, MD, PhD; Heather M. Byers, MD; Pamela Stratton, MD

JAMA. 2018;320(20):2077-2078. doi:10.1001/jama.2018.17716

This Viewpoint discusses widespread perceptions of vulnerability and risk that discourage enrollment of pregnant women in clinical trials, and calls for actionable guidelines to overcome those perceptions and eliminate barriers to their participation.

**JAMA Pediatrics**

November 2018, Vol 172, No. 11, Pages 997-1108

<http://archpedi.jamanetwork.com/issue.aspx>

[Reviewed earlier]

**JBI Database of Systematic Review and Implementation Reports**

November 2018 - Volume 16 - Issue 11

<http://journals.lww.com/jbisrir/Pages/currenttoc.aspx>

[New issue; No digest content identified]

**Journal of Adolescent Health**

December 2018 Volume 63, Issue 6, p663-804

[https://www.jahonline.org/issue/S1054-139X\(17\)X0027-X](https://www.jahonline.org/issue/S1054-139X(17)X0027-X)

[New issue; No digest content identified]

**Journal of Community Health**

Volume 43, Issue 6, December 2018

<https://link.springer.com/journal/10900/43/6/page/1>

[Reviewed earlier]

**Journal of Empirical Research on Human Research Ethics**

Volume 13 Issue 5, December 2018

<http://journals.sagepub.com/toc/jre/current>

[Reviewed earlier]

**Journal of Epidemiology & Community Health**

December 2018 - Volume 72 - 12

<https://jech.bmj.com/content/72/12>

[New issue; No digest content identified]

**Journal of Evidence-Based Medicine**

Volume 11, Issue 3 Pages: 131-215 August 2018

<https://onlinelibrary.wiley.com/toc/17565391/current>

[Reviewed earlier]

**Journal of Global Ethics**

Volume 14, Issue 1, 2018

<http://www.tandfonline.com/toc/rjge20/current>

***Special Issue: Education and Migration***

[Reviewed earlier]

**Journal of Health Care for the Poor and Underserved (JHCPU)**

Volume 29, Number 4, November 2018

<https://muse.jhu.edu/issue/39355>

[Reviewed earlier]

**Journal of Immigrant and Minority Health**

Volume 20, Issue 6, December 2018

<https://link.springer.com/journal/10903/20/6/page/1>

[Reviewed earlier]

**Journal of Immigrant & Refugee Studies**

Volume 16, 2018\_ Issue 4

<http://www.tandfonline.com/toc/wimm20/current>

[Reviewed earlier]

**Journal of Infectious Diseases**

Volume 217, Issue 11, 1 Dec 2018

<https://academic.oup.com/jid/issue/217/1>

[Reviewed earlier]

**Journal of Medical Ethics**

December 2018 - Volume 44 - 12

<http://jme.bmj.com/content/current>

[New issue; No digest content identified]

**Journal of Medical Internet Research**

Vol 20, No 11 (2018): November

<https://www.jmir.org/2018/11>

[New issue; No digest content identified]

**Journal of Medical Microbiology**

Volume 67, Issue 11, November 2018

<http://jmm.microbiologyresearch.org/content/journal/jmm/67/11>

[New issue; No digest content identified]

**Journal of Patient-Centered Research and Reviews**

Volume 5, Issue 4 (2018)

<https://digitalrepository.aurorahealthcare.org/jpcrr/>

[Reviewed earlier]

**Journal of the Pediatric Infectious Diseases Society (JPIDS)**

Volume 7, Issue 3, September 2018

<https://academic.oup.com/jpids/issue>

[Reviewed earlier]

**Journal of Pediatrics**

December 2018 Volume 203, p1-470

<http://www.jpeds.com/current>

*Editorials*

**[The Long Journey to Eradication of Hepatitis C Virus Infection Should Begin with the Smallest Victims](#)**

Kathleen B. Schwarz, Wikrom Karnsakul

p7–8

Published online: August 29, 2018

*Original Articles*

**[Timing of Information-Seeking about Infant Vaccines](#)**

Sean T. O'Leary, Sarah E. Brewer, Jennifer Pyrzanowski, Juliana Barnard, Carter Sevick, Anna Furniss, Amanda F. Dempsey

p125–130.e1

Published online: September 5, 2018

**Journal of Pharmaceutical Policy and Practice**

<https://joppp.biomedcentral.com/>

[Accessed 1 Dec 2018]

[No new digest content identified]

**Journal of Public Health Management & Practice**

November/December 2018 - Volume 24 - Issue 6

<https://journals.lww.com/jphmp/pages/currenttoc.aspx>

[Reviewed earlier]

**Journal of Public Health Policy**

Volume 39, Issue 4, November 2018

<https://link.springer.com/journal/41271/39/4/page/1>

[Reviewed earlier]

**Journal of the Royal Society – Interface**

November 2018; volume 15, issue 148

<http://rsif.royalsocietypublishing.org/content/current>

[Reviewed earlier]

**Journal of Travel Medicine**

Volume 25, Issue suppl\_1, 1 May 2018

[https://academic.oup.com/jtm/issue/25/suppl\\_1](https://academic.oup.com/jtm/issue/25/suppl_1)

***Asian travel: from the rare to the difficult***

[Reviewed earlier]

**Journal of Virology**

December 2018; Volume 92, Issue 24

<http://jvi.asm.org/content/current>

[New issue; No digest content identified]

**The Lancet**

01 December 2018 Volume 392, Issue 10162

<https://www.thelancet.com/journals/lancet/issue/current>

[New issue; No digest content identified]

**Lancet Global Health**

Dec 2018 Volume 6 Number 12 e1253-e1404

<http://www.thelancet.com/journals/langlo/issue/current>

*Editorial*

**[The disgraceful neglect of childhood pneumonia](#)**

The Lancet Global Health

This week WHO held its first ever Global Conference on Air Pollution and Health and published an [associated report](#), Prescribing clean air, which summarised the “uniquely damaging” effects

of breathing polluted air on the health of children. The evidence in this age group is compelling: some of the stark headline figures include the fact that 93% of children younger than 5 years globally live in environments where levels of fine particulate matter (PM<sub>2.5</sub>) exceed the WHO guidelines and that air pollution, both ambient and household, contributed to more than half a million deaths from lower respiratory tract infections in children under 5 years in 2016.

Lower respiratory tract infections, by which we usually mean pneumonia, are the second leading cause of death in under-5s worldwide, and the leading cause in Africa. Air pollution is just one of many poverty-linked risk factors, others being undernutrition, poor hygiene, limited or no breastfeeding, and lack of access to vaccines. In turn, death rates in those who succumb to infection are much higher in impoverished regions than in higher-income ones owing to slow care seeking (stemming from poor health education or geographical or financial barriers to care), diagnostic failure, and inappropriate treatment.

The WHO report recognises that the issue of air pollution, particularly ambient air pollution, is largely a high-level issue for governments and regions, and its recommendations for health professionals centre around awareness-raising, research, advocacy, and prescribing of household-level solutions (such as switching to cleaner fuels, where possible). But what about the other, potentially more tractable, risk factors and system failures that contribute to pneumonia's standing as a barely surpassed killer of children?

A simple search of this journal's website reveals a healthy number of research and opinion pieces that combine the topic of pneumonia with those of breastfeeding (28 articles in 5 years), nutrition (11 articles), and WASH (water, sanitation, and hygiene; 5 articles). Similarly, in this journal alone, pneumonia vaccination, diagnosis, and treatment have all received recent attention. In this month's issue, for example, Eileen Dunne and colleagues report positive effects of the roll-out of 10-valent pneumococcal conjugate vaccine (PCV) on direct and indirect carriage of *Streptococcus pneumoniae* in Fiji, and Keith Klugman and colleagues highlight the potential for PCV to reduce the burden of mortality from *S pneumoniae*–influenza co-infection. January also saw the publication of Ambrose Agweyu and colleagues' important paper on the appropriateness (or not) of WHO's updated guidance on management of childhood pneumonia.

Why, then, is there so little cross-disciplinary global solidarity around childhood pneumonia? Or, as Kevin Watkins and Devi Sridhar put it in *The Lancet* recently, why is it “a global cause without champions”? They point out that pneumonia does not feature in WHO's latest Global Programme of Work and that no major donor has made the cause their own. In fact, according to the [report](#) Sizing up pneumonia research, pneumonia research received just US\$84 in funding per death in 2015, compared with \$336 for tuberculosis, \$2120 for HIV, and \$3585 for influenza. Further, pneumonia barely registers as a top child killer in the minds of the general public. A straw poll of non-medical acquaintances pointed to malaria or diarrhoea as the most likely candidates. Yes, we have the upcoming [World Pneumonia Day](#) on November 12 (the website of which remained sadly unpopulated as we went to press), and WHO released a [Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea](#) (GAPPD) in 2013. Yet there has otherwise been relative quiet on the global and national fronts.

In trying to explain the neglect, Watkins and Sridhar point to the poverty-linked nature of pneumonia, in children particularly, and the fact that—unlike cholera, measles, or HIV—it is not easily transmitted across social boundaries into the constituencies with the most political

influence. They call for all high-burden countries to adopt integrated pneumonia action plans framed around the GAPPD and for a global summit on pneumonia. We concur. A child dying of pneumonia may be more difficult to imagine than one dying from inhaling visibly polluted air, but the solutions, in large part, are much closer at hand.

#### *Articles*

### **[Effect of ten-valent pneumococcal conjugate vaccine introduction on pneumococcal carriage in Fiji: results from four annual cross-sectional carriage surveys](#)**

Eileen M Dunne, Catherine Satzke, Felisita T Ratu, Eleanor F G Neal, Laura K Boelsen, Silvia Matanitobua, Casey L Pell, Monica L Nation, Belinda D Ortika, Rita Reyburn, Kylie Jenkins, Cattram Nguyen, Katherine Gould, Jason Hinds, Lisi Tikoduadua, Joseph Kado, Eric Rafai, Mike Kama, E Kim Mulholland, Fiona M Russell

### **[Estimating the cost of vaccine development against epidemic infectious diseases: a cost minimisation study](#)**

*The Coalition for Epidemic Preparedness Innovations was established in 2016, to develop vaccines that can contribute to preparedness for outbreaks of epidemic infectious diseases. Evidence on vaccine development costs for such diseases is scarce. Our goal was to estimate the minimum cost for achieving vaccine research and development preparedness targets in a portfolio of 11 epidemic infectious diseases, accounting for vaccine pipeline constraints and uncertainty in research and development preparedness outcomes.*

Dimitrios Gouglas, Tung Thanh Le, Klara Henderson, Aristidis Kaloudis, Trygve Danielsen, Nicholas Caspersen Hammersland, James M Robinson, Penny M Heaton, John-Arne Røttingen

#### **Lancet Infectious Diseases**

Dec 2018 Volume 18 Number 12 p1289-1410 e368-e407

<http://www.thelancet.com/journals/laninf/issue/current>

#### *Editorial*

### **[The Astana Declaration: time to focus on primary health care](#)**

The Lancet Infectious Diseases

#### *Articles*

### **[Global, regional, and national burden of tuberculosis, 1990–2016: results from the Global Burden of Diseases, Injuries, and Risk Factors 2016 Study](#)**

GBD Tuberculosis Collaborators

1329

Open Access

#### **Lancet Respiratory Medicine**

Dec 2018 Volume 6 Number 12 p885-962 e56-e57

<http://www.thelancet.com/journals/lanres/issue/current>

#### *Articles*

### **[Effectiveness of influenza vaccination on influenza-associated hospitalisations over time among children in Hong Kong: a test-negative case-control study](#)**

Shuo Feng, Susan S Chiu, Eunice L Y Chan, Mike Y W Kwan, Joshua S C Wong, Chi-Wai Leung, Yiu Chung Lau, Sheena G Sullivan, J S Malik Peiris, Benjamin J Cowling

### **Maternal and Child Health Journal**

Volume 22, Issue 12, December 2018

<https://link.springer.com/journal/10995/22/12/page/1>

*From the Field*

#### **[Progress Toward Eliminating Mother to Child Transmission of HIV in Kenya: Review of Treatment Guidelines Uptake and Pediatric Transmission Between 2013 and 2016—A Follow Up](#)**

Ruby Angeline Pricilla, Melinda Brown...

### **Medical Decision Making (MDM)**

Volume 38 Issue 8, November 2018

<http://mdm.sagepub.com/content/current>

[New issue; No digest content identified]

### **The Milbank Quarterly**

*A Multidisciplinary Journal of Population Health and Health Policy*

Volume 96, Issue 3 Pages: 409-605 September 2018

<https://onlinelibrary.wiley.com/toc/14680009/current>

[Reviewed earlier]

### **Nature**

Volume 563 Issue 7733, 29 November 2018

[http://www.nature.com/nature/current\\_issue.html](http://www.nature.com/nature/current_issue.html)

*Editorial* | 26 November 2018

#### **[Beware the rise of the radical right](#)**

Academic freedom is on the hit list when radical politicians gain office — as they have done in Europe.

### **Nature Medicine**

Volume 24 Issue 11, November 2018

<https://www.nature.com/nm/volumes/24/issues/11>

[Reviewed earlier]

### **Nature Reviews Immunology**

Volume 18 Issue 12, December 2018

<https://www.nature.com/nri/volumes/18/issues/12>

[New issue; No digest content identified]

### **New England Journal of Medicine**

November 29, 2018 Vol. 379 No. 22

<http://www.nejm.org/toc/nejm/medical-journal>  
[New issue; No digest content identified]

### **Pediatrics**

November 2018, VOLUME 142 / ISSUE 5  
<http://pediatrics.aappublications.org/content/142/5?current-issue=y>  
[Reviewed earlier]

### **Pharmaceutics**

Volume 10, Issue 3 (September 2018)  
<https://www.mdpi.com/1999-4923/10/3>  
[Reviewed earlier]

### **PharmacoEconomics**

Volume 36, Issue 12, December 2018  
<https://link.springer.com/journal/40273/36/12/page/1>  
*Current Opinion*

#### **[Differential Pricing of Pharmaceuticals: Theory, Evidence and Emerging Issues](#)**

[Patricia M. Danzon](#)

*Original Research Article*

#### **[Cost Effectiveness of Quadrivalent Influenza Vaccines Compared with Trivalent Influenza Vaccines in Young Children and Older Adults in Korea](#)**

[Yun-Kyung Kim](#), [Joon Young Song](#), [Hyeongap Jang](#), [Tae Hyun Kim](#), [Heejo Koo](#)...

### **PharmacoEconomics & Outcomes News**

November 2018, Issue 1, Pages 1-37  
<https://link.springer.com/journal/40274/816/1/page/1>  
[Reviewed earlier]

### **PLOS Currents: Disasters**

<http://currents.plos.org/disasters/>  
[Accessed 1 Dec 2018]  
[No new digest content identified]

### **PLoS Currents: Outbreaks**

<http://currents.plos.org/outbreaks/>  
[Accessed 1 Dec 2018]  
[No new digest content identified]

### **PLoS Medicine**

<http://www.plosmedicine.org/>

(Accessed 1 Dec 2018)

*Perspective*

### **[Machine learning in population health: Opportunities and threats](#)**

Abraham D. Flaxman, Theo Vos

| published 27 Nov 2018 PLOS Medicine

<https://doi.org/10.1371/journal.pmed.1002702>

Machine learning (ML) has succeeded in complex tasks by trading experts and programmers for data and nonparametric statistical models. However, the applications for which ML has been successfully deployed in health and biomedicine remain limited [1]. These limits also apply in population health, in which we are concerned with the health outcomes of a group of individuals and the distribution of outcomes within the group. In our metrics, we deal with messy global health data, and a large effort goes into piecing together sparse, noisy information to understand what causes how much health loss, where it occurs, and how it is changing. In our interventions, we often face stringent constraints on resources and need to develop appropriate and acceptable solutions under these constraints. How might ML-based approaches change population health? Here, we discuss opportunities and threats from ML, with our views on further development needed within ML to create the best possible outcomes...

### **PLoS Neglected Tropical Diseases**

<http://www.plosntds.org/>

(Accessed 1 Dec 2018)

[No new digest content identified]

### **PLoS One**

<http://www.plosone.org/>

[Accessed 1 Dec 2018]

*Research Article*

### **[HIV-positive gay men's knowledge and perceptions of Human Papillomavirus \(HPV\) and HPV vaccination: A qualitative study](#)**

Daniel Grace, Mark Gaspar, Rachele Paquette, Ron Rosenes, Ann N. Burchell, Troy Grennan, Irving E. Salit

| published 29 Nov 2018 PLOS ONE

<https://doi.org/10.1371/journal.pone.0207953>

*Research Article*

### **[Religiosity predicts negative attitudes towards science and lower levels of science literacy](#)**

Jonathon McPhetres, Miron Zuckerman

| published 27 Nov 2018 PLOS ONE

<https://doi.org/10.1371/journal.pone.0207125>

### **PLoS Pathogens**

<http://journals.plos.org/plospathogens/>

[Accessed 1 Dec 2018]

[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/>

[Accessed 1 Dec 2018]

### **[Evaluating science communication](#)**

Baruch Fischhoff

PNAS published ahead of print November 26, 2018.

<https://doi.org/10.1073/pnas.1805863115>

#### *Abstract*

Effective science communication requires assembling scientists with knowledge relevant to decision makers, translating that knowledge into useful terms, establishing trusted two-way communication channels, evaluating the process, and refining it as needed. Communicating Science Effectively: A Research Agenda [National Research Council (2017)] surveys the scientific foundations for accomplishing these tasks, the research agenda for improving them, and the essential collaborative relations with decision makers and communication professionals. Recognizing the complexity of the science, the decisions, and the communication processes, the report calls for a systems approach. This perspective offers an approach to creating such systems by adapting scientific methods to the practical constraints of science communication. It considers staffing (are the right people involved?), internal collaboration (are they talking to one another?), and external collaboration (are they talking to other stakeholders?). It focuses on contexts where the goal of science communication is helping people to make autonomous choices rather than promoting specific behaviors (e.g., voter turnout, vaccination rates, energy consumption). The approach is illustrated with research in two domains: decisions about preventing sexual assault and responding to pandemic disease.

### **[Communicating uncertainty in policy analysis](#)**

Charles F. Manski

PNAS published ahead of print November 26, 2018.

<https://doi.org/10.1073/pnas.1722389115>

#### *Abstract*

The term “policy analysis” describes scientific evaluations of the impacts of past public policies and predictions of the outcomes of potential future policies. A prevalent practice has been to report policy analysis with incredible certitude. That is, exact predictions of policy outcomes are routine, while expressions of uncertainty are rare. However, predictions and estimates often are fragile, resting on unsupported assumptions and limited data. Therefore, the expressed certitude is not credible. This paper summarizes my work documenting incredible certitude and calling for transparent communication of uncertainty. I present a typology of practices that contribute to incredible certitude, give illustrative examples, and offer suggestions on how to communicate uncertainty.

### **[Scientific communication in a post-truth society](#)**

Shanto Iyengar and Douglas S. Massey

PNAS published ahead of print November 26, 2018.

<https://doi.org/10.1073/pnas.1805868115>

#### *Abstract*

Within the scientific community, much attention has focused on improving communications between scientists, policy makers, and the public. To date, efforts have centered on improving the content, accessibility, and delivery of scientific communications. Here we argue that in the current political and media environment faulty communication is no longer the core of the problem. Distrust in the scientific enterprise and misperceptions of scientific knowledge increasingly stem less from problems of communication and more from the widespread dissemination of misleading and biased information. We describe the profound structural shifts in the media environment that have occurred in recent decades and their connection to public policy decisions and technological changes. We explain how these shifts have enabled unscrupulous actors with ulterior motives increasingly to circulate fake news, misinformation, and disinformation with the help of trolls, bots, and respondent-driven algorithms. We document the high degree of partisan animosity, implicit ideological bias, political polarization, and politically motivated reasoning that now prevail in the public sphere and offer an actual example of how clearly stated scientific conclusions can be systematically perverted in the media through an internet-based campaign of disinformation and misinformation. We suggest that, in addition to attending to the clarity of their communications, scientists must also develop online strategies to counteract campaigns of misinformation and disinformation that will inevitably follow the release of findings threatening to partisans on either end of the political spectrum.

### **Prehospital & Disaster Medicine**

Volume 33 - Issue 5 - October 2018

<https://www.cambridge.org/core/journals/prehospital-and-disaster-medicine/latest-issue>

[Reviewed earlier]

### **Preventive Medicine**

Volume 117, Pages 1-114 (December 2018)

<https://www.sciencedirect.com/journal/preventive-medicine/vol/117/suppl/C>

#### ***Behavior Change, Health, and Health Disparities 2018: Tobacco Regulatory Science***

Edited by Stephen T. Higgins

This Special Issue of Preventive Medicine (PM) is the 5th in a series on behavior change, health, and health disparities. Unhealthy behavior patterns (i.e., lifestyle choices) including cigarette smoking and other substance abuse, physical inactivity, unhealthy food choices, and non-adherence with recommended medical regimens, undermine U.S. population health by increasing risk for chronic disease and premature death. This Special Issue brings together scholarly contributions from the emerging area of tobacco regulatory science to examine current topics of critical importance to reducing the burden of cigarette smoking on U.S. population health. More specifically, three related topics are examined including (a) the potential for reducing smoking by adopting a national policy that would cap the nicotine content of cigarettes at minimally-addictive levels; (b) increasing scientific understanding of cigarette smoking and other tobacco use among populations that are especially vulnerable to initiating smoking, tobacco addiction, and its adverse health consequences; and (c) the potential of a harm-reduction strategy for reducing the burden of smoking by advocating that those who are unwilling or unable to quit nicotine use substitute electronic cigarettes or other non-combusted sources of nicotine for cigarettes in order to avoid exposure to the other toxins in tobacco smoke that are most responsible for smoking morbidity and mortality. While tremendous

progress has been made in reducing overall U.S. smoking prevalence and its adverse health impacts, more needs to be done. This Special Issue offers some ideas that have the potential to make a substantive contribution towards that goal.

### **Proceedings of the Royal Society B**

29 August 2018; volume 285, issue 1885

<http://rspb.royalsocietypublishing.org/content/285/1885?current-issue=y>

[Reviewed earlier]

### **Public Health**

November 2018 Volume 164, *In Progress*

<http://www.publichealthjrnal.com/current>

[Reviewed earlier]

### **Public Health Ethics**

Volume 11, Issue 3, November 2018

<http://phe.oxfordjournals.org/content/current>

[Reviewed earlier]

### **Public Health Reports**

Volume 133 Issue 1\_suppl, November/December 2018

[https://journals.sagepub.com/toc/phrg/133/1\\_suppl](https://journals.sagepub.com/toc/phrg/133/1_suppl)

#### ***From Local Action to National Progress on 5 Major Health Challenges: The Bloomberg American Health Initiative***

Guest Editor: Joshua M. Sharfstein, Jessica Leighton, Alfred Sommer and Ellen J. MacKenzie

The articles in this supplemental issue of Public Health Reports provide insight into what it will take for the field of public health to tackle 5 of the most complex and difficult health problems of our time: (1) large numbers of adolescents disconnected from work and school; (2) violence (including gun violence), intimate partner and sexual violence, and suicide; (3) opioid addiction and overdose; (4) a dysfunctional food system associated with obesity; and (5) threats to the environment.

These 5 problems are the central focus of the new Bloomberg American Health Initiative, which MacKenzie et al<sup>1</sup> describe in their Commentary. "All 5 areas of focus are serious problems facing the nation, with deep connections to economic and social factors," they write. "None have quick fixes."<sup>1</sup> Yet there is reason to believe that public health can lead the way toward meaningful progress.

From December 2017 to April 2018, the initiative held 5 national symposia to document the state of understanding and to inform a public health perspective on each challenge. This supplement includes these perspectives, as well as commentaries in the cross-cutting areas of evidence, policy, and equity. Together, these articles provide a road map for efforts to bring public health training to frontline organizations, pursue insights through innovative research, and advance effective programs, policies, and strategies for change...

## **Qualitative Health Research**

Volume 28 Issue 14, December 2018

<http://qhr.sagepub.com/content/current>

*Research Articles*

### **[An Ounce of Prevention: Identifying Cues to \(In\)Action for Maternal Vaccine Refusal](#)**

Melissa L. Crrion

First Published August 10, 2018; pp. 2183–2194

*Preview*

Recent increases in childhood vaccine exemption rates are a source of concern within the public health community. Drawing from the health belief model and in-depth interviews with 50 mothers (n = 50) who refused one or more vaccine, the aim of this study was to identify the specific reasons and the broader decision context(s) that underscored participants' vaccine refusal. Results indicate that the vast majority of participants supported vaccination until a particular cue motivated them to consider otherwise, and qualitative analysis identified three main categories into which these cues fell: perceived adverse reactions, endorsements from health care professionals, and perceived contradiction among expert-endorsed messages. These categories point to the central role of health communication in motivating vaccine refusal. Better understanding these cues can inform vaccine communication scholarship and practice, and also lend theoretical insight into the intertextual nature of controversial health messages and decisions.

## **Research Ethics**

Volume 14 Issue 4, October 2018

<http://journals.sagepub.com/toc/reab/current>

[Reviewed earlier]

## **Reproductive Health**

<http://www.reproductive-health-journal.com/content>

[Accessed 1 Dec 2018]

[No new digest content identified]

## **Revista Panamericana de Salud Pública/Pan American Journal of Public Health (RPSP/PAJPH)**

[http://www.paho.org/journal/index.php?option=com\\_content&view=featured&Itemid=101](http://www.paho.org/journal/index.php?option=com_content&view=featured&Itemid=101)

*Recently Published Articles*

Saúde universal com equidade, sem deixar ninguém para trás [**[Universal health with equity, leaving no one behind](#)**]

Joaquín Molina

Editorial | PDF (also in English): <https://doi.org/10.26633/RPSP.2018.173> | Published 27

November 2018

O desafio da atenção primária na saúde indígena no Brasil [**[The challenge of providing primary healthcare care to indigenous peoples in Brazil](#)**]

Anapaula Martins Mendes, Maurício Soares Leite, Esther Jean Langdon and Márcia Grisotti  
Opinion and analysis | PDF: <https://doi.org/10.26633/RPSP.2018.184> | Published 27 November 2018

Análise crítica da interculturalidade na Política Nacional de Atenção às Populações Indígenas no Brasil [[Critical analysis of interculturality in the National Policy for the Care of Indigenous Peoples in Brazil](#)]

Leo Pedrana, Leny Alves Bomfim Trad, Maria Luiza Garnelo Pereira, Mônica de Oliveira Nunes de Torrenté and Sara Emanuela de Carvalho Mota  
Opinion and analysis | PDF: <https://doi.org/10.26633/RPSP.2018.178> | Published 27 November 2018

### **Risk Analysis**

Volume 38, Issue 11 Pages: 2243-2501 November 2018  
<https://onlinelibrary.wiley.com/toc/15396924/current>  
[Reviewed earlier]

### **Risk Management and Healthcare Policy**

Volume 11, 2018  
<https://www.dovepress.com/risk-management-and-healthcare-policy-archive56>  
[No new digest content identified]

### **Science**

30 November 2018 Vol 362, Issue 6418  
<http://www.sciencemag.org/current.dtl>

*Editorial*

#### [Define the human right to science](#)

By Jessica M. Wyndham, Margaret Weigers Vitullo  
Science30 Nov 2018 : 975

*Summary*

The adoption of the Universal Declaration of Human Rights (UDHR) by the United Nations (UN) General Assembly will mark its 70th anniversary on 10 December. One right enshrined in the UDHR is the right of everyone to “share in scientific advancement and its benefits.” In 1966, this right was incorporated into the International Covenant on Economic, Social and Cultural Rights, a treaty to which 169 countries have voluntarily agreed to be bound. Unlike most other human rights, however, the right to science has never been legally defined and is often ignored in practice by the governments bound to implement it. An essential first step toward giving life to the right to science is for the UN to legally define it.

*In Depth*

#### [Shock greets claim of CRISPR-edited babies](#)

By Dennis Normile

Science30 Nov 2018 : 978-979 Restricted Access

Apparent germline engineering by Chinese researcher prompts outrage and investigations.

## **Science Translational Medicine**

28 November 2018 Vol 10, Issue 469

<http://stm.sciencemag.org/>

[New issue; No digest content iden5ified]

## **Social Science & Medicine**

Volume 219 Pages 1-86 (December 2018)

<https://www.sciencedirect.com/journal/social-science-and-medicine/vol/219/suppl/C>

[New issue; No digest content iden5ified]

## **Systematic Reviews**

<https://systematicreviewsjournal.biomedcentral.com/articles>

[Accessed 1 Dec 2018]

*Protocol*

### **[A review protocol on research partnerships: a Coordinated Multicenter Team approach](#)**

*Research partnership approaches, in which researchers and stakeholders work together collaboratively on a research project, are an important component of research, knowledge translation, and implementation. De...*

Authors: Femke Hoekstra, Kelly J. Mrklas, Kathryn M. Sibley, Tram Nguyen, Mathew Vis-Dunbar, Christine J. Neilson, Leah K. Crockett, Heather L. Gainforth and Ian D. Graham

Citation: Systematic Reviews 2018 7:217

Published on: 30 November 2018

## **Travel Medicine and Infectious Diseases**

September-October, 2018 Volume 25

<http://www.travelmedicinejournal.com/>

[Reviewed earlier]

## **Tropical Medicine & International Health**

Volume 23, Issue 11 Pages: i-iv, 1157-1279 November 2018

<https://onlinelibrary.wiley.com/toc/13653156/current>

[Reviewed earlier]

## **Vaccine**

Volume 36, Issue 52 Pages 7907-8164 (18 December 2018)

<https://www.sciencedirect.com/journal/vaccine/vol/36/issue/52>

*Review article Abstract only*

### **[Post-exposure prophylaxis for measles with immunoglobulins revised recommendations of the standing committee on vaccination in Germany](#)**

Dorothea Matysiak-Klose, Sabine Santibanez, Christine Schwerdtfeger, Judith Koch, ... Ulrich Heininger

Pages 7916-7922

*Review article Open access*

**[The use of eHealth with immunizations: An overview of systematic reviews](#)**

Elsy Maria Dumit, David Novillo-Ortiz, Marcela Contreras, Martha Velandia, M. Carolina

Danovaro-Holliday

Pages 7923-7928

*Review article Abstract only*

**[A big pertussis outbreak in a primary school with high vaccination coverage in northern China: An evidence of the emerging of the disease in China](#)**

Haitao Huang, Ping Gao, Zhigang Gao, Lijuan Wang, ... Ying Zhang

Pages 7950-7955

*Review article Open access*

**[Coverage and timeliness of vaccination and the validity of routine estimates: Insights from a vaccine registry in Kenya](#)**

Ifedayo M.O. Adetifa, Boniface Karia, Alex Mutuku, Tahreni Bwanaali, ... J. Anthony G. Scott

Pages 7965-7974

*Review article Abstract only*

**[Parents' perceptions of childhood immunization in Israel: Information and concerns](#)**

Bella Elran, Sarit Yaari, Yael Glazer, Mira Honovich, ... Emilia Anis

Pages 8062-8068

*Review article Abstract only*

**[Association between patient reminders and influenza vaccination status among children](#)**

Katherine E. Kahn, Tammy A. Santibanez, Yusheng Zhai, Carolyn B. Bridges

Pages 8110-8118

*Review article Abstract only*

**[Vaccine-preventable disease control in the People's Republic of China: 1949–2016](#)**

Wenzhou Yu, Lisa A. Lee, Yanmin Liu, Robert W. Scherpbier, ... Huaqing Wang

Pages 8131-8137

*Review article Abstract only*

**[Outsmart HPV: Acceptability and short-term effects of a web-based HPV vaccination intervention for young adult gay and bisexual men](#)**

Annie-Laurie McRee, Abigail Shoben, Jose A. Bauermeister, Mira L. Katz, ... Paul L. Reiter

Pages 8158-8164

**Vaccine: Development and Therapy**

<https://www.dovepress.com/vaccine-development-and-therapy-archive111>

(Accessed 1 Dec 2018)

[No new digest content identified]

## **Vaccines — Open Access Journal**

<http://www.mdpi.com/journal/vaccines>

(Accessed 1 Dec 2018)

*Open Access Article*

### **Impact of Out-of-Pocket Cost on Herpes Zoster Vaccine Uptake: An Observational Study in a Medicare Managed Care Population**

by Zhuliang Tao, Yong Li, Stephen Stemkowski, Kelly D. Johnson, Camilo J. Acosta, Dongmu Zhang and A. Mark Fendrick

Vaccines 2018, 6(4), 78; <https://doi.org/10.3390/vaccines6040078> - 21 November 2018

*Abstract*

Herpes zoster (HZ) vaccination is approved for adults aged 50+ for the prevention of HZ, but it is underutilized. The objective of this study was to evaluate the association between out-of-pocket cost and HZ vaccine utilization. Adults aged 65 or older enrolled for at least 12 months in Medicare Advantage/Part D (MAPD) and Medicare Part D only (PDP) plans from 1 January 2007 to 30 June 2014 were selected. Abandonment was defined as a reversed claim for HZ vaccine with no other paid claim within 90 days. Out-of-pocket costs used were actual amounts recorded in the claim. Overall, the HZ vaccine abandonment rate was 7.3%. Mean out-of-pocket costs were higher for individuals who abandoned versus those who did not (\$88 ( $\pm$ \$55) versus \$80 ( $\pm$  \$49)). Logistic regression indicated individuals with out-of-pocket costs of \$80–\$90 were 21% more likely (OR = 1.21, 1.16–1.27 95% CI), and those with out-of-pocket costs >\$90 were 90% more likely (OR = 1.90, 1.85–1.96 95% CI) to abandon than those with out-of-pocket costs <\$80. The models also suggested that socioeconomic, racial, and ethnic disparities in vaccine abandonment existed. Different vaccine targeting efforts and pharmacy benefit design strategies may be needed to increase use, improve adherence, and minimize disparities

## **Value in Health**

December 2018 Volume 21, Issue 12, p1355-1444

<http://www.valueinhealthjournal.com/current>

[New issue; No digest content identified]

## **Viruses**

2018, 10(11), 648

<https://www.mdpi.com/1999-4915/10/11>

*Open Access Article*

### **Willingness to Participate and Associated Factors in a Zika Vaccine Trial in Indonesia: A Cross-Sectional Study**

by Harapan Harapan, Mudatsir Mudatsir, Amanda Yufika, Yusuf Nawawi, Nur Wahyuniati, Samsul Anwar, Fitria Yusri, Novi Haryanti, Nanda Putri Wijayanti, Rizal Rizal, Devi Fitriani, Nurul Fadhlia Maulida, Muhammad Syahriza, Ikram Ikram, Try Purwo Fandoko, Muniati Syahadah, Febrivan Wahyu Asrizal, Kurnia F. Jamil, Yogambigai Rajamoorthy, Abram Luther Wagner, David Alexander Groneberg, Ulrich Kuch, Ruth Müller, R. Tedjo Sasmono and Allison Imrie

Viruses 2018, 10(11), 648; <https://doi.org/10.3390/v10110648>

Received: 23 October 2018 / Revised: 12 November 2018 / Accepted: 13 November 2018 /  
Published: 18 November 2018

Viewed by 307 | [PDF Full-text](#) (464 KB) | [HTML Full-text](#) | [XML Full-text](#)

### *Abstract*

One of the crucial steps during trials for Zika and other vaccines is to recruit participants and to understand how participants' attitudes and sociodemographic characteristics affect willingness to participate (WTP). This study was conducted to assess WTP, its explanatory variables, and the impact of financial compensation on WTP in Indonesia. A health facility-based cross-sectional study was conducted in eleven regencies in the Aceh and West Sumatra provinces of Indonesia. Participants were recruited via a convenience sampling method and were interviewed. The associations between explanatory variables and WTP were assessed using a two-step logistic regression analysis. A total of 1,102 parents were approached, and of these 956 (86.8%) completed the interview and were included in analysis. Of those, 144 (15.1%) were willing to participate in a Zika vaccine trial without a financial compensation. In the multivariate analysis, WTP was tied to an age of more than 50 years old, compared to 20–29 years (odds ratio (OR): 5.0; 95% confidence interval (CI): 2.37–10.53), to being female (OR: 2.20; 95% CI: 1.11–4.37), and to having heard about Zika (OR: 2.41; 95% CI: 1.59–3.65). Participants' WTP increased gradually with higher financial compensation. The rate of WTP increased to 62.3% at the highest offer (US\$ 350.4), and those who were still unwilling to participate (37.7%) had a poorer attitude towards childhood vaccination. This study highlights that pre-existing knowledge about Zika and attitudes towards childhood vaccination are important in determining community members being willing to participate in a vaccine trial. Financial incentives are still an important factor to enhance participant recruitment during a vaccine trial.

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***From Google Scholar & other sources: Selected Journal Articles, Newsletters, Dissertations, Theses, Commentary***

### **Revista de Saúde Pública**

Vol 52 (2018)

#### **[What is the importance of vaccine hesitancy in the drop of vaccination coverage in Brazil?](#)**

Ana Paula Sayuri Sato

### *Abstract*

The successful Programa Nacional de Imunizações do Brasil (Brazilian National Immunization Program) has been experiencing a major challenge with regard to vaccination coverage for children, which has been dropping. Several aspects are related, but certainly vaccine hesitancy has been strengthening itself as one of the main concerns of Brazilian public administrators and researchers. Vaccine hesitancy is the delay in acceptance or refusal despite having the recommended vaccines available in health services, being a phenomenon that varies over time, over location and over types of vaccines. Hesitant individuals are between the two poles of total acceptance and refusal of vaccination. Vaccine hesitancy is nothing new in European and North-American countries, and even in Brazil, it has been studied even if under another name. The drop of vaccination coverage observed from 2016 on reiterates the relevance of the theme, which must be better understood through scientific research.

**Revista Latinoamericana de Infectología Pediátrica**

2018; 31 (3)

**Dengue surveillance in children who received CYD tetravalent dengue vaccine during their second year of life while participating in a clinical trial in a southern state of Mexico**

JL Arredondo-García, FI Rodríguez Melo, S Canche...

**ABSTRACT**

Dengue is a systemic viral infection transmitted to humans by mosquitoes and is a public health challenge due to its rapid global expansion and lack of specific therapeutic agents. To date (January 2018), the CYD-TDV vaccine has been granted licensure in 19 countries. The World Health Organization global strategy for dengue prevention and control 2012-2020 has, as a global goal, the reduction of the burden of disease. One of the technical elements of this strategy is the implementation of a dengue vaccine. This is an epidemiological descriptive study of 248 subjects with retrospective and passive surveillance for 2 years; from this cohort, 162 subjects, ages 4 years 8 months to 5 years 9 months, underwent active surveillance. Eligible participants were children who participated in the previous randomized phase III trial conducted in Merida, Yucatan, Mexico. All the subjects who completed the previous trial were included for retrospective/passive surveillance; the subjects who underwent active surveillance (n = 162 subjects) were identified during a three-month enrollment period. Blood draws and phone calls (study procedures) were performed under the applicable local and international regulations. None of the 248 participants followed for passive surveillance had a reported confirmed dengue case. Forty-one cases of suspected vector-transmitted disease without virological or serological confirmation were detected. The result of this study provides support for the safety of the vaccine in this age group. Further follow-ups in similar populations should be done in order to obtain more information.

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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**

<http://www.theatlantic.com/magazine/>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

### **BBC**

<http://www.bbc.co.uk/>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

### **The Economist**

<http://www.economist.com/>

*Accessed 1 Dec 2018*

#### **[A battle within a battle - The struggle to get Ebola vaccine to rebel-held areas of Congo](#)**

Jabs can stop the epidemic. But men with machetes can stop the vaccinators

Middle East and Africa

Nov 29th 2018

### **Financial Times**

<http://www.ft.com/home/uk>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

### **Forbes**

<http://www.forbes.com/>

*Accessed 1 Dec 2018*

#### **[2018 Surges In Measles In Europe And US Show Importance Of Herd Immunity](#)**

24 November 2018

This is what happens when you tell people to not get the measles vaccine without providing a viable alternative. In just the first 6 months of 2018, the World Health Organization (WHO) European Region had over 41,000 measles cases, which has already made 2018 the worst year for measles in the decade by far. The previous high was 23,927 for all of 2017. During the first 6 months of 2018, at least 37 people in Europe have died from the disease. Expect these number to be higher by the time we get to the end of the year. Measles is up in the U.S. this year as well.

### **Foreign Affairs**

<http://www.foreignaffairs.com/>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

### **Foreign Policy**

<http://foreignpolicy.com/>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

### **The Guardian**

<http://www.guardiannews.com/>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

**New Yorker**

<http://www.newyorker.com/>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

**New York Times**

<http://www.nytimes.com/>

*Accessed 1 Dec 2018*

*Health*

**[UN: Polio Remains Global Emergency, Eradication at Risk](#)**

The World Health Organization says the ongoing attempt to eradicate polio remains a global emergency amid an increase in cases for the first time in years and a worrying number of outbreaks sparked by the vaccine.

Nov. 30, 2018

*Africa*

**[US Urged to Send Ebola Experts In as Congo Outbreak Worsens](#)**

Global health experts are urging the Trump administration to allow U.S. government disease specialists — "some of the world's most experienced" — to return to northeastern Congo to help fight the second-largest Ebola outbreak in history.

Nov. 30, 2018

**Wall Street Journal**

<http://online.wsj.com/home-page? wsjregion=na,us& homepage=/home/us>

*Accessed 1 Dec 2018*

[No new, unique, relevant content]

**Washington Post**

<http://www.washingtonpost.com/>

*Accessed 1 Dec 2018*

**[Why small groups of vaccine refusers can make large groups of people sick](#)**

29 November 2018

Saad B. Omer

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**[Think Tanks et al](#)**

**Brookings**

<http://www.brookings.edu/>

*Accessed 1 Dec 2018*

[No new relevant content]

**Center for Global Development**

<http://www.cgdev.org/page/press-center>

Accessed 1 Dec 2018  
[No new relevant content]

**CSIS**

<https://www.csis.org/>  
Accessed 1 Dec 2018  
[No new relevant content]

**Council on Foreign Relations**

<http://www.cfr.org/>  
Accessed 1 Dec 2018  
[No new relevant content]

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

*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.*

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