

Center for Vaccine
Ethics and Policy



Vaccines and Global Health: The Week in Review
26 January 2019
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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Request an email version: *Vaccines and Global Health: The Week in Review is published as a single email summary, scheduled for release each Saturday evening at midnight (EST/U.S.). If you would like to receive the email version, please send your request to david.r.curry@centerforvaccineethicsandpolicy.org.*

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Milestones :: Perspectives

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Joint statement by of the main, independent, advisory and oversight committees of the GPEI [Global Polio Eradication Initiative]

January 2019

Dear Polio Eradicator,

The global polio eradication effort is 31 years old.

The world is tantalizingly close to being free of polio. From 350,000 wild poliovirus cases every year in 1988, in 2018 the world reported just 29 cases of this devastating disabling disease because of extraordinary global efforts. Wild poliovirus transmission is endemic in only a handful of districts worldwide. The aim of the 2013-2018 Endgame Plan had been to be finished with this job by end 2018. This is not the case, and the Plan has to now be revised and extended through 2023.

This is an effort that cannot be sustained indefinitely: 31 years is long enough. It is resource intensive. It is intensive on the countries affected. It is intensive on donors. It is intensive on health services. It is intensive on communities. Most of all, it is intensive on those children and their families who bear the burden of this terrible disease, needlessly.

There is no reason why polio should persist anywhere in the world.

To succeed by 2023, all involved in this effort must find ways to excel in their roles. If this happens, success will follow.

This means stepping up the level of performance even further. It means using the proven tools of eradication and building blocks that have been established in parts of the world that have been free of polio for years. The vaccines, the cold chains, the networks of vaccinators, the surveillance capacity, the governance, policy, financing and oversight structures must be at peak levels of performance. There must be an unrelenting focus to tighten the management of the effort at all levels.

It also means looking for opportunities to innovate, using local knowledge and insights to overcome obstacles that in the past have seemed insurmountable. It means looking at new and different ways to reach children. It means really understanding the views of parents, and communities, who are unwilling to accept the vaccine and finding ways to address their concerns and come together with them. It means more effectively engaging with communities and better serving their needs than we have been doing thus far. Each person must dedicate themselves to one clear objective - to reach that very last child with polio vaccine.

Please commit to finding that very last child first, before the poliovirus does. Give the poliovirus nowhere to hide.

Whatever barrier to reaching that very last child, the programme has the expertise and experience to overcome it. Let everyone perfect what we know works. Let everyone free their

mind to come up with new ideas and transformative solutions. We must all treat this as the public health emergency that it is.

As a global community, we have stood before where we stand today, with smallpox. The scourge of smallpox is gone, for which the world is a much better place. Let us make history again. It is time to finish the job of polio eradication now. The philosopher, poet and essayist Ralph Waldo Emerson said: *"To leave the world a bit better, whether by a healthy child, a garden patch or a redeemed social condition, to know even one life has breathed easier because you have lived – this is to have succeeded."*

Eradicate polio, and make the world a better place for future generations.
Thank you.

Professor Alejandro Cravioto
Chair of the Strategic Advisory Group of Experts on immunization (SAGE)

Sir Liam Donaldson
Chair of the Independent Monitoring Board (IMB) of the Global Polio Eradication Initiative

Professor Helen Rees
Chair of the Emergency Committee of the International Health Regulations (IHR) Regarding the International Spread of Poliovirus

Professor David Salisbury
Chair of the Global Commission for the Certification of the Eradication of Poliomyelitis (GCC)



[Experts caution against stagnation of immunization coverage in Africa](#)

23 January 2019, Brazzaville, Congo – Global immunization experts attending the biannual Regional Immunization Technical Advisory Group (RITAG) meeting urged African countries to strengthen their routine immunization. Over the past five years, immunization coverage in sub-Saharan Africa has stagnated at 72%, exposing populations to vaccine-preventable diseases and outbreaks.

The immunization experts also emphasized the importance of increased domestic investment in disease surveillance and the need for community engagement to drive vaccine deployment during outbreaks.

“The regional experts’ meeting presented a unique opportunity to assess current and future immunization needs in Africa,” said RITAG Chair, Professor Helen Rees. “We have mapped out what can and must be done to secure the future of millions of children on this continent.” In sub-Saharan Africa, nearly 31 million children younger than 5 years suffer from vaccine-preventable diseases every year. More than a half million of them die due to lack of access to the vaccines they needed.

In 2017, Heads of State from across Africa endorsed the Addis Declaration on Immunization, a historic pledge that envisions an Africa in which every child, no matter their economic circumstances, has access to vaccines.

This year, the World Health Organization's (WHO) Regional Office for Africa, in partnership with the African Union Commission, will launch a progress report on the implementation status of the 10 commitments outlined in the Addis Declaration. The report will take stock of progress made over the past two years, highlight gaps and issue recommendations to guide progress towards stronger immunization systems.

"By vaccinating children, we are doing more than preventing diseases and saving lives. We are also ensuring that children get the education they deserve and returning valuable time to their families because they no longer need to make long hospital visits. Vaccinations also release scarce government funds," said Dr Matshidiso Moeti, WHO Regional Director for Africa.

According to WHO data, illness and deaths due to vaccine-preventable diseases cost sub-Saharan Africa US\$13 billion each year – funding that could be channelled towards strengthening health systems and building economies.

The immunization experts gathered in Brazzaville also discussed a range of pressing issues, including the ongoing Ebola outbreak, polio eradication and progress against the Regional Strategic Plan for Immunization.

The Democratic Republic of the Congo is grappling with the second-largest Ebola outbreak in history, with more than 650 confirmed cases so far. Despite challenges in reaching areas marred by long-term conflict, nearly 60,000 people have been vaccinated, including approximately 20 000 health workers and front-line workers. The country's Ministry of Health has launched its first randomized control trial for experimental Ebola treatments. However, continued efforts are necessary to ensure the outbreak is contained.

In contrast, other diseases, such as polio, are on the brink of eradication. The last case of wild poliovirus in Africa was reported in August 2016 in the north-eastern state of Borno, Nigeria. If no new cases of wild poliovirus are detected in Nigeria by August 2019, Africa will attain the wild poliovirus eradication goal.

As the world nears polio eradication, funds for fighting the disease are declining. Between 2016 and 2019, the Global Polio Eradication Initiative budget more than halved, from US\$ 322 million to US\$ 153 million. That initiative provides more than 90% of all funding for disease surveillance in sub-Saharan Africa, including 16 polio-funded laboratories that process clinical and environmental samples for acute flaccid paralysis surveillance (used for detecting poliomyelitis) and other vaccine-preventable diseases, such as yellow fever and measles.

The Regional Immunization Technical Advisory Group emphasized the need for greater government ownership of disease surveillance programmes to ensure that the progress made in curbing vaccine-preventable diseases is not reversed.

"The fact that most sub-Saharan African countries continue to rely on external funding for immunization financing is a strong indicator of the work that remains to be done," said Dr

Richard Mihigo, Programme Manager for Immunization and Vaccine Development at the WHO Regional Office for Africa. "Governments have a central role to play to fill upcoming funding gaps and ensure immunization programmes remain strong and vigilant."



How to Inoculate Against Anti-Vaxxers – Opinion

The no-vaccine crowd has persuaded a lot of people. But public health can prevail.

By The Editorial Board of The New York Times

The editorial board represents the opinions of the board, its editor and the publisher. It is separate from the newsroom and the Op-Ed section.

Jan. 19, 2019

The World Health Organization has ranked vaccine hesitancy — the growing resistance to widely available lifesaving vaccines — as one of the top 10 health threats in the world for 2019. That news will not come as a surprise in New York City, where the worst measles outbreak in decades is now underway. Nor in California or Minnesota, where similar outbreaks unfolded in 2014 and 2017, respectively. Nor in Texas, where some 60,000 children remain wholly unvaccinated thanks in part to an aggressive anti-vaccine lobby.

Leading global health threats typically are caused by the plagues and perils of low-income countries — but vaccine hesitancy is as American as can be. According to the Centers for Disease Control and Prevention, the percentage of children who are unvaccinated has quadrupled since 2001, even though the overall utilization of most vaccines remains high. More than 100,000 American infants and toddlers have received no vaccines whatsoever, and millions more have received only some crucial shots.

It's no mystery how we got here. On the internet, anti-vaccine propaganda has outpaced pro-vaccine public health information. The anti-vaxxers, as they are colloquially known, have hundreds of websites promoting their message, a roster of tech- and media-savvy influencers and an aggressive political arm that includes at least a dozen political action committees. Defense against this onslaught has been meager. The C.D.C., the nation's leading public health agency, has a website with accurate information, but no loud public voice. The United States Surgeon General's office has been mum. So has the White House — and not just under the current administration. That leaves just a handful of academics who get bombarded with vitriol, including outright threats, every time they try to counter pseudoscience with fact.

The consequences of this disparity are substantial: a surge in outbreaks of measles, mumps, pertussis and other diseases; an increase in influenza deaths; and dismal rates of HPV vaccination, which doctors say could effectively wipe out cervical cancer if it were better utilized. But infectious disease experts warn that things could get much worse. Trust in vaccines is being so thoroughly eroded, they say, that these prevention tools are in danger of becoming useless. The next major disease outbreak "will not be due to a lack of preventive technologies," Heidi Larson, a professor at the London School of Hygiene and Tropical Medicine, writes in the journal Nature, but to an "emotional contagion, digitally enabled."

Thwarting this danger will require a campaign as bold and aggressive as the one being waged by the anti-vaccination contingent. And to launch such a campaign would require overcoming

strong inertia: a waning public health apparatus, countervailing politics and a collective amnesia over the havoc the diseases in question once wrought. But to succeed would be to rescue from oblivion one of the greatest triumphs of human ingenuity over disease — and to save countless lives.

Here's how to get started.

Get tough. After the 2014 California measles outbreak, the state eliminated nonmedical exemptions for mandatory vaccinations. After a similar outbreak in Michigan, health officials there began requiring individuals to formally consult with their local health departments before opting out of otherwise-mandatory shots. In both cases, these tougher policies drove up vaccination rates. Other states ought to follow this lead, and the federal government should consider tightening restrictions around how much leeway states can grant families that want to skip essential vaccines.

Be savvy. The Vaccine Confidence Project is a London-based academic endeavor that monitors anti-vaccine websites for rumors and conspiracies and addresses them before the messages go viral. It also conducts regular surveys of attitudes and puts out a vaccine confidence index. Federal health officials would do well to implement a similar program, make it as public as possible and pair it with an aggressive and targeted social media campaign that makes as much use of celebrities as the anti-vaccine movement has.

Be clear. Vaccines, to some extent, are victims of their own success. In the United States especially, they've beaten so many infectious foes into oblivion that hardly any practicing doctors, let alone new parents, remember how terrible those diseases once were. An effective pro-vaccine campaign needs to remind us: Vaccines prevent two million to three million deaths globally each year. In developing countries, people line up for hours to get these shots. It's also O.K. to get out of the gray zone. Scientists, especially, are uncomfortable with black-and-white statements, because science is all about nuance. But, in the case of vaccines, there are some hard truths that deserve to be trumpeted. Vaccines are not toxic, and they do not cause autism. Full stop.

Know the enemy. The arguments used by people driving the anti-vaccination movement have not changed in about a century. These arguments are effective because they are intuitively appealing — but they are also easily refutable. Instead of ignoring these arguments, an effective pro-vaccine campaign would confront them directly, over and over, for as long as it takes. Yes, there are chemicals in vaccines, but they are not toxic. No, vaccines can't overwhelm your immune system, which already confronts countless pathogens every day.

Know the audience. Not every parent with concerns about vaccination is a rabid conspiracy theorist bent on resisting inoculation forever. In fact, studies suggest that less than 2 percent of all parents fall into this category. The rest of vaccine-hesitant families sit along a spectrum. Some reject all vaccines but are still open to receiving information. Others are only worried about one specific vaccine. And others still are merely anxious and looking for reliable information. Any successful campaign will need to mind this diversity and prioritize listening to concerns as much as dispelling myths.

Enlist the right support. Some doctors and scientists have referred to “uneventful vaccination” as “The Greatest Story Never Told.” Though they may not spread on the internet like the stories of terrible mishaps that anti-vaxxers traffic in, these far more common tales of inoculation without incident can be a powerful elixir for a nervous new parent. The best ambassadors of these stories are likely to be parents themselves. Surveys suggest that pro-vaccine families are often eager to help counter misinformation, but they don’t know where to start. If health officials corralled these families and trained them in the basics of vaccine science, they might succeed where official voices sometimes fail.



NIH [to 26 Jan 2019]

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

Friday, January 25, 2019

[Investigational monoclonal antibody to treat Ebola is safe in adults](#)

Early-stage trial results show promise.

After multiplying inside a host cell, the string-like Ebola virus is emerging to infect more cells. Ebola is a rare, often fatal disease that occurs primarily in tropical regions of sub-Saharan Africa. Heinz Feldmann, Peter Jahrling, Elizabeth Fischer and Anita Mora, National Institute of Allergy and Infectious Diseases, National Institutes of Health

WHAT:

The investigational Ebola treatment mAb114 is safe, well-tolerated, and easy to administer, according to findings from an early-stage clinical trial published in *The Lancet*. Eighteen healthy adults received the monoclonal antibody as part of a Phase 1 clinical trial that began in May 2018 at the National Institutes of Health (NIH) Clinical Center in Bethesda, Maryland. The National Institute of Allergy and Infectious Diseases (NIAID) Vaccine Research Center (VRC), part of NIH, developed the investigational treatment and conducted and sponsored the clinical trial.

The investigational treatment is currently being offered to Ebola patients in the Democratic Republic of the Congo (DRC) under compassionate use and as part of a Phase 2/3 [clinical trial of multiple investigational treatments](#). mAb114, a single monoclonal antibody, binds to the core receptor binding domain of the Zaire ebolavirus surface protein, preventing the virus from infecting human cells. Scientists isolated the antibody from a human survivor of the 1995 Ebola outbreak in Kikwit, DRC. [Prior studies](#) showed that mAb114 can protect monkeys from lethal Ebola virus disease when given as late as five days after infection.

Participants in the Phase 1 clinical trial received a single intravenous infusion of mAb114, administered over approximately 30 minutes. Three participants received a 5 milligram(mg)/kilogram (kg) dose; five participants received a 25 mg/kg dose; and 10 participants received a 50 mg/kg dose. All infusions were well-tolerated. Four participants reported mild side effects, such as discomfort, muscle or joint pain, headache, nausea, and chills in the three days following the infusion.

As expected, levels of mAb114 in the blood increased as the dosage was increased. Investigators also observed relatively uniform levels of absorption, distribution, and elimination of mAb114 among participants.

The authors note several advantages for deploying mAb114 in an outbreak setting, including the ease and speed of its administration, and its formulation as a freeze-dried powder that does not require freezer storage. The powder is reconstituted with sterile water and added to saline for administration.

In addition to the ongoing Phase 2/3 clinical trial of mAb114 in the DRC, the VRC is planning to initiate another Phase 1 trial of the investigational treatment in Africa.

VRC scientists developed mAb114 in collaboration with scientists at the National Institute of Biomedical Research (INRB) in the DRC; the Institute for Research in Biomedicine and Vir Biotechnology, Inc.'s subsidiary Humabs BioMed, both based in Bellinzona, Switzerland; and the U.S. Army Medical Research Institute of Infectious Diseases at Fort Detrick, Maryland. The Defense Advanced Research Projects Agency funded the production of mAb114 for clinical testing. The investigational treatment is licensed to Ridgeback Biotherapeutics LP based in Coconut Grove, Florida. For more information about clinical trials of mAb114, visit ClinicalTrials.gov and search identifiers [NCT03478891](https://clinicaltrials.gov/ct2/show/study/NCT03478891) and [NCT03719586](https://clinicaltrials.gov/ct2/show/study/NCT03719586).

ARTICLE:

[Safety, tolerability, pharmacokinetics, and immunogenicity of the therapeutic monoclonal antibody mAb114 targeting Ebola virus glycoprotein \(VRC 608\): an open-label phase 1 study](#)

Martin R Gaudinski, Emily E Coates, Laura Novik, Alicia Widge, Katherine V Houser, Eugenia Burch, LaSonji A Holman, Ingelise J Gordon, Grace L Chen, Cristina Carter, Martha Nason, Sandra Sitar, Galina Yamshchikov, Nina Berkowitz, Charla Andrews, Sandra Vazquez, Carolyn Laurencot, John Misasi, Frank Arnold, Kevin Carlton, Heather Lawlor, Jason Gall, Robert T Bailer, Adrian McDermott, Edmund Capparelli, Richard A Koup, John R Mascola, Barney S Graham, Nancy J Sullivan, Julie E Ledgerwood on behalf of the VRC 608 Study team
The Lancet DOI: 10.1016/S0140-6736(19)30036-4 (2019)

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The Lancet

Online First

Comment

[Ebola therapies: an unconventionally calculated risk](#)

Mosoka P Fallah, Laura A Skrip

Published: January 24, 2019 DOI: [https://doi.org/10.1016/S0140-6736\(19\)30160-6](https://doi.org/10.1016/S0140-6736(19)30160-6)

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[144th Session of the WHO Executive Board](#)

24 January – 1 February 2019 Coordinated Universal Time
Geneva, Switzerland

Selected Agenda Content

[EB144/1](#) - Provisional agenda

[EB144/1 \(annotated\)](#) - Provisional agenda (annotated)

[EB144/8](#) - Public health preparedness and response

Report of the Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme

[EB144/9](#) – Polio Eradication

[EB144/10](#) – Polio Transition

[EB144/11 Rev.1](#) - Implementation of the 2030 Agenda for Sustainable Development

[EB144/12](#) - Universal health coverage

Primary health care towards universal health coverage

[EB144/13](#) - Universal health coverage

Community health workers delivering primary health care: opportunities and challenges

[EB144/14](#) - Universal health coverage

Preparation for the high-level meeting of the United Nations General Assembly on universal health coverage

[EB144/17](#) - Medicines, vaccines and health products

Access to medicines and vaccines

[EB144/18](#) - Medicines, vaccines and health products

Cancer medicines

[EB144/19](#) - Follow-up to the high-level meetings of the United Nations General Assembly on health-related issues

Antimicrobial resistance

[EB144/21](#) - Follow-up to the high-level meetings of the United Nations General Assembly on health-related issues

Ending tuberculosis

[EB144/23](#) - Pandemic Influenza Preparedness Framework for the sharing of influenza viruses and access to vaccines and other benefits

Implementation of decision WHA71(11) (2018)

[EB144/24](#) - Member State mechanism on substandard and falsified medical products

[EB144/27](#) - Promoting the health of refugees and migrants

Draft global action plan, 2019–2023

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Emergencies

POLIO

Public Health Emergency of International Concern (PHEIC)

Polio this week as of 22 January 2019

:: In an extraordinary joint statement by the Chairs of the main independent, advisory and oversight committees of the GPEI, the Chairs urge everyone involved in polio eradication to ensure polio will finally be assigned to the history books by 2023.

The authors are the chairs of the Strategic Advisory Group of Experts on immunization (SAGE), the Independent Monitoring Board, the Emergency Committee of the International Health Regulations (IHR) Regarding International Spread of Poliovirus and the Global Commission for the Certification of the Eradication of Poliomyelitis (GCC).

The Endgame Plan through 2018 has brought the world to the brink of being polio-free. A new Strategic Plan 2019-2023 aims to build on the lessons learned since 2013. The joint statement urges everyone involved in the effort to find ways to excel in their roles. If this happens, the statement continues, success will follow. But otherwise, come 2023, the world will find itself exactly where it is today: tantalizingly close. But in an eradication effort, tantalizingly close is not good enough. The statement therefore issues an impassioned plea to everyone to dedicate themselves to one clear objective: to reach that very last child with polio vaccine. The full statement is attached herewith and also available [here](#).

[See Milestones above for full text]

Summary of new viruses this week:

:: **Pakistan** – two cases of wild poliovirus type 1 (WPV1) and five WPV1 positive environmental samples;

:: **Afghanistan** - seven WPV1 positive environmental samples;

:: **Nigeria** – one case of circulating vaccine derived poliovirus type 2 (cVDPV2) and eight VDPV2 positive environmental samples.

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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 26 Jan 2019]

- No new digest announcements identified

Bangladesh - Rohingya crisis

:: Bi-weekly Situation Report 1 - 17 January 2019

KEY HIGHLIGHTS

:: The number of varicella cases reported this week in 1 358. WHO and the health sector are working in collaboration with Education sector and Risk communication to contain the disease.

:: A total of 2.2 million doses were administered in 2018 through two Penta/Td, bOPV campaigns and two OCV campaigns

Varicella UPDATE

:: The number of varicella cases reported this week in 1 358. The number of varicella cases is higher than previous week but this might be due to improvement of varicella reporting in the camps.

:: Varicella has been added to Indicator-Based Surveillance (IBS) and Event-Based surveillance (EBS) in EWARS.

:: Ministry of Health (MoH) & IEDCR has requested to health partners to report all varicella cases on a daily basis.

DIPHTHERIA UPDATE

:: Ten new diphtheria case-patients (one probable and nine suspected) were reported this week. Total case patients reported in EWARS is now 8 372.

:: Of these, 293 case patients have tested positive on PCR, with the last confirmed case reported on 31 December 2018. Of the remaining cases 2 710 were classified as probable and 5 369 as suspected. The total number of deaths remains 44. Last death was reported on 28 June 2018.

:: No death has been reported from the host community.

HEALTH OPERATIONS

Routine Immunization

:: From the beginning of February 2018 to date, the following antigen doses were delivered to children: 40,965 BCG doses; 56,512 pentavalent doses; 58,234 Oral Polio Vaccine (OPV) doses; 55,086 PCV doses; 29,039 Measles/Rubella (MR) doses and 19,906 Td doses to pregnant women.

:: Before February, several campaigns were held in Rohingya camps among specific age groups, which covered the target cohort of routine immunization to an extent.

Campaigns in Rohingya Camps

:: A total of 2.2 million doses were administered in 2018 through two Penta/Td, bOPV campaigns and two OCV campaigns...

Somalia

:: Somalia developing comprehensive plan to improve health of mothers, children and adolescents

Mogadishu, 24 January 2019 - With support from the World Health Organization (WHO) and other United Nations partners, Somalia is currently developing a strategy that will change the rhetoric in the country and ensure Somali mothers and children can access quality health services equitably all across urban, rural areas in the country...

Yemen

:: Providing urgent health care to millions: WHO and the Italian Agency for Development Cooperation work together to reach the most vulnerable

24 January 2019, Sana'a, Yemen — With a generous donation of 2 million euros from the Italian Agency for Development Cooperation, the World Health Organization (WHO) is scaling up efforts to meet health needs in Yemen through the health service delivery mechanism known as the Minimum Service Package. This is the first time since the start of the crisis in Yemen that WHO has partnered with the Agency...

Democratic Republic of the Congo - *No new digest announcements identified*

Myanmar - *No new digest announcements identified_ [see above]*

Nigeria - *No new digest announcements identified*

South Sudan - *No new digest announcements identified*

Syrian Arab Republic - *No new digest announcements identified*

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WHO Grade 2 Emergencies [to 26 Jan 2019]

occupied Palestinian territory

:: WHO concerned over health impact of evolving fuel crisis in Gaza

21 January 2019, Gaza - The World Health Organization is concerned over the potential impact the evolving fuel crisis in Gaza might have on the lives and health of patients whose treatment requires uninterrupted power supply if no immediate solution to address the aggravating shortages is found.

The functionality of Gaza's 14 public hospitals is increasingly jeopardized by electricity shortages and the rapidly declining UN coordinated fuel reserves required to run emergency generators during prolonged electricity cuts from the main grid...

Brazil (in Portuguese) - *No new digest announcements identified*

Cameroon - *No new digest announcements identified*

Central African Republic - *No new digest announcements identified*

Ethiopia - *No new digest announcements identified*

Hurricane Irma and Maria in the Caribbean - *No new digest announcements identified*

Iraq - *No new digest announcements identified*

Libya - *No new digest announcements identified*

MERS-CoV - *No new digest announcements identified*

Niger - *No new digest announcements identified*

Sao Tome and Principe Necrotizing Cellulitis (2017) - *No new digest announcements identified*

Sudan - *No new digest announcements identified*

Ukraine - *No new digest announcements identified*

Zimbabwe - *No new digest announcements identified*

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WHO Grade 1 Emergencies [to 26 Jan 2019]

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 digest announcements identified*

Syrian Arab Republic - *No new digest 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 Bulletin Issue 72 | 7 - 20 January 2019

HIGHLIGHTS

:: Scaled-up response urgently required to more than 250,000 IDPs in Western Ethiopia

:: Durable Solutions as nexus opportunity in Somali region: Lessons from SDC

:: New law grants nearly a million refugees to exercise more rights in Ethiopia

:: Nearly 36 million children in Ethiopia are poor and lack access to basic social services: report

Somalia - *No new digest announcements identified*

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“Other Emergencies”

Indonesia: Central Sulawesi Earthquake - *No new digest 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 26 Jan 2019]

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

- *No new digest announcements identified.*

MERS-CoV [to 26 Jan 2019]

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

- *No new digest announcements identified.*

Yellow Fever [to 26 Jan 2019]

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

- *No new digest announcements identified.*

Zika virus [to 26 Jan 2019]

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

- *No new digest announcements identified.*

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WHO & Regional Offices [to 26 Jan 2019]

26 January 2019 *News Release*

[WHO appoints directors for Western Pacific and Southeast Asia regions](#)

The WHO Executive Board, currently holding its 144th session in Geneva, has appointed Dr Takeshi Kasai as Regional Director for WHO's Western Pacific Region, and re-appointed Dr Poonam Khetrapal Singh for a second term as Regional Director for WHO's Southeast Asia Region...

23 January 2019 | *News release*

[WHO airlifts medical supplies to meet increasing health needs in north-east Syria](#)

22 January 2019 | *News release*

[Working together for safer and healthier workplaces](#)

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[144th Session of the WHO Executive Board](#)

24 January – 1 February 2019 Coordinated Universal Time

Geneva, Switzerland

[See selected agenda content in Milestones above]

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[Weekly Epidemiological Record, 25 January 2019, vol. 94, 04 \(pp. 45–52\)](#)

Global Advisory Committee on Vaccine Safety, 5–6 December 2018

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Calls for consultants / proposals

24 January 2019

[Modelling Approaches to Produce Estimates of National Immunization Coverage pdf, 313kb](#)

Deadline for applications: 24 February 2019

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WHO Regional Offices

Selected Press Releases, Announcements

WHO African Region AFRO

:: [Uganda Launches Health Sector Integrated Refugee Response Plan 2019-2024](#) 26 January 2019

:: [Ebola - Following a Full Simulation Exercise, a Joint Monitoring Mission is deployed in Rwanda](#) 24 January 2019

:: [Experts caution against stagnation of immunization coverage in Africa](#) 23 January 2019

[See Milestones above for detail]

:: [Borno, Adamawa and Yobe States Declare End of Cholera Outbreaks](#) 22 January 2019

WHO Region of the Americas PAHO

:: [Stigma and discrimination prevent early diagnosis and treatment of Leprosy in the Americas](#) (01/25/2019)

:: More than half of people with epilepsy in Latin America and the Caribbean do not receive treatment (01/24/2019)

WHO South-East Asia Region SEARO

:: Dr Poonam Khetrapal Singh appointed Regional Director WHO South-East Asia for second term 26 January 2019

WHO European Region EURO

:: The year ahead: key events for the WHO European Region in 2019 23-01-2019

:: Migrants and refugees at higher risk of developing ill health than host populations, reveals first-ever WHO report on the health of displaced people in Europe 21-01-2019

WHO Eastern Mediterranean Region EMRO

:: Providing urgent health care to millions in Yemen 24 January 2019

:: Somalia's comprehensive plan to improve maternal, child and adolescent health 24 January 2019

:: Drivers play significant role in polio eradication efforts 24 January 2019

:: Medical supplies delivered to Al-Hasakeh in Syria 23 January 2019

WHO Western Pacific Region ::

:: Dr Takeshi Kasai appointed WHO Regional Director for the Western Pacific 26 January 2019

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CDC/ACIP [to 26 Jan 2019]

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

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

- *No new digest announcements identified*

.....

Africa CDC [to 26 Jan 2019]

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

No new digest content identified.

.....

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

Website not responding at inquiry.

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Announcements

BMGF - Gates Foundation [to 26 Jan 2019]

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

No new digest content identified.

Bill & Melinda Gates Medical Research Institute [to 26 Jan 2019]

<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 26 Jan 2019]

<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 26 Jan 2019]

<http://cepi.net/>

22 Jan 2019

World Economic Forum press conference: CEPI - Building a Global Coalition to End Epidemics

This press conference visited the progress made and previewed the years ahead for CEPI to finance and coordinate the development of new vaccines to prevent and contain infectious disease epidemics.

The press conference was hosted by Richard Hatchett (CEO, CEPI), and he was joined by Paul Stoffels (Vice Chair of the Executive Committee and Chief Scientific Officer), Jeremy Farrar (Director, Wellcome Trust), Ryan Morhard (Project Lead, Global Health and Healthcare Industries, World Economic Forum), and Lydia Ogden (Associate Vice-President, Global Enterprise Policy, MSD).

The conference streamed live at 1130 (GMT) on Jan 22, 2019.

22 Jan 2019

UK pledges £10 million to support CEPI

UK has committed funds to support CEPI's mission to develop new life-saving vaccines to combat emerging infectious diseases and prevent future epidemics

EDCTP [to 26 Jan 2019]

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

The European & Developing Countries Clinical Trials Partnership (EDCTP) aims to accelerate the development of new or improved drugs, vaccines, microbicides and diagnostics against HIV/AIDS, tuberculosis and malaria as well as other poverty-related and neglected infectious diseases in sub-Saharan Africa, with a focus on phase II and III clinical trials

Latest news

No new digest content identified.

Emory Vaccine Center [to 26 Jan 2019]

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

No new digest content identified.

European Medicines Agency [to 26 Jan 2019]

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

News and press releases

No new digest content identified.

European Vaccine Initiative [to 26 Jan 2019]

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

24 January 2019

[Training in vaccine research and development](#)

3rd Call for TRANSVAC Training Modules now advertised

[Three PhD fellowships within MMVC programme](#)

22 January 2019

The Multi-Stage Malaria Vaccine Consortium (MMVC) offers 3 PhD Fellowships in Malaria Research

FDA [to 26 Jan 2019]

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

No new digest content identified.

Fondation Merieux [to 26 Jan 2019]

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

29 - 30 Jan 2019

Partner event

[Global Vaccine Data Network meeting](#)

Les Pensières Center for Global Health, Veyrier du Lac

Gavi [to 26 Jan 2019]

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

No new digest content identified.

GHIT Fund [to 26 Jan 2019]

<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 26 Jan 2019]

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

25 January 2019

[Measuring and Reporting Results](#)

Smart, effective health investments through the Global Fund partnership have saved more than 27 million lives, and that remarkable success against the world's deadliest infectious diseases could only be achieved by the collaborative efforts of many partners. We welcome all discussion and ideas on how best to measure and report the results of interventions in global health. Given the imperative to optimize impact from constrained resources – whether domestic or external – it is vital that we measure and communicate what's working and what isn't. Donors and domestic taxpayers want to know their money is being used to maximum effect. Implementers and technical partners need to know what to expand and what to modify.

Hilleman Laboratories [to 26 Jan 2019]

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

No new digest content identified.

Human Vaccines Project [to 26 Jan 2019]

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

January 24, 2019

[Welcoming Adaptive Biotechnologies' Harlan Robins to Scientific Steering Committee](#)

The Human Vaccines Project welcomes Harlan Robins, Ph.D., head of innovation and co-founder at Adaptive Biotechnologies, to the Project's Scientific Steering Committee...

IAVI [to 26 Jan 2019]

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

No new digest content identified.

IFFIm

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

No new digest content identified.

IVAC [to 26 Jan 2019]

<https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html>
No new digest content identified.

IVI [to 26 Jan 2019]
<http://www.ivi.int/>
IVI News & Announcements
No new digest content identified.

JEE Alliance [to 26 Jan 2019]
<https://www.jeealliance.org/>
No new digest content identified.

MSF/Médecins Sans Frontières [to 26 Jan 2019]
<http://www.msf.org/>
Selected News; Project Updates, Reports
Palestine
[The challenge of filling gaps in the legs of Gaza's wounded](#)
Project Update 24 Jan 2019

Libya
[Refugees returned to overcrowded Libyan detention centres](#)
Project Update 23 Jan 2019

Mental health
[Displaced and distressed: people's mental health in East Africa](#)
Project Update 22 Jan 2019

NIH [to 26 Jan 2019]
<http://www.nih.gov/news-events/news-releases>
January 25, 2019
[Investigational monoclonal antibody to treat Ebola is safe in adults](#)
— Early-stage trial results show promise.
[See Milestones above for detail]

Wednesday, January 23, 2019
[New fellowship program will support the next generation of African scientific leaders](#)

NIH collaborates with African Academy of Sciences and Bill & Melinda Gates Foundation. Dr. Michael Otto of NIH's National Institute of Allergy and Infectious Diseases is hosting APTI fellow Dr. Nana Amisah of Ghana, who is studying *Staphylococcus aureus*. FIC/NIH

Ten African scientists have been selected for training at the National Institutes of Health as part of a new fellowship program to build research capacity in African countries and develop ongoing scientific partnerships. NIH, the African Academy of Sciences, and the Bill & Melinda Gates Foundation are collaborating to establish the African Postdoctoral Training Initiative.

The inaugural cohort will assume their positions in NIH host labs in early 2019. NIH will provide two years of training under principal investigators who share the fellows' research interests. The African scientists will then return to their home institutions and receive two years of support to continue the research and establish themselves as independent investigators. NIH and the Gates Foundation are together providing about \$4 million for the program...

Temperature-stable experimental tuberculosis vaccine enters clinical testing

January 23, 2019 — Tuberculosis remains the leading infectious cause of death worldwide. Vaccinations have begun in a Phase 1 human clinical trial testing a freeze-dried, temperature-stable formulation of an experimental tuberculosis (TB) vaccine candidate. The trial is being conducted at the Saint Louis University School of Medicine Center for Vaccine Development and will enroll as many as 48 healthy adult volunteers aged 18 to 55 years. The experimental vaccine, called ID93, was developed by scientists at the Infectious Disease Research Institute (IDRI) in Seattle. The National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health, is supporting the trial through a contract to IDRI.

ID93 is a recombinant vaccine candidate made from four proteins of *Mycobacterium tuberculosis* (the bacterium that causes TB). Many vaccines require a temperature-controlled system during transport, which can be costly and logistically challenging. Freeze-dried powder vaccines can be distributed at a cheaper cost to remote, low-resource settings. The powder formulations are mixed with sterile water for administering with a needle and syringe...

Dengue immunity may be protective against symptomatic Zika, study finds

January 22, 2019 — Zika virus and dengue virus are both transmitted by *Aedes aegypti* mosquitoes and cause similar symptoms.

PATH [to 26 Jan 2019]

<https://www.path.org/media-center/>
No new digest content identified.

Sabin Vaccine Institute [to 26 Jan 2019]

<http://www.sabin.org/updates/pressreleases>
No new digest content identified.

UNAIDS [to 26 Jan 2019]

<http://www.unaids.org/en>
Selected Press Releases/Reports/Statements
No new digest content identified.

UNICEF [to 26 Jan 2019]

<https://www.unicef.org/media/press-releases>
Selected Press Releases/Reports/Statements
Statement

UNICEF Statement on the situation in Venezuela

25/01/2019

Press release

[More than 145,000 Rohingya refugee children return to school in Bangladesh refugee camps as new school year starts](#)

24/01/2019

Statement

[UNICEF statement on the impact of the ongoing turmoil and economic crisis on children in Sudan](#)

Statement attributable to Geert Cappelaere, UNICEF Regional Director for the Middle East and North Africa

23/01/2019

Press release

[Vital protection for refugee and migrant children making perilous sea journeys to Europe urgently needed – UNICEF](#)

In first two weeks of 2019, more than 400 uprooted children reached European shores amid freezing temperatures and rough waters

Vaccine Confidence Project [to 26 Jan 2019]

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

No new digest content identified.

Vaccine Education Center – Children’s Hospital of Philadelphia [to 26 Jan 2019]

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

No new digest content identified.

Wellcome Trust [to 26 Jan 2019]

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

Explainer | 22 January 2019

[CEPI can develop new vaccines to fight epidemics – but it needs global funding](#)

Developing new vaccines is challenging, costly and complex. The Coalition for Epidemic Preparedness Innovation (CEPI) is a new model for funding vaccine development which aims to change this.

News | 22 January 2019

[Acting Director of Science announced](#)

Mike Turner has been appointed Acting Director of Wellcome’s Science Division.

The Wistar Institute [to 26 Jan 2019]

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

Press Release Jan. 24, 2019

[Induction of Potent Anticancer Immunity Through Rapid Tumor Antigen Identification and Conversion to Personalized Synthetic DNA Vaccines](#)

Custom synthetic DNA vaccines elicit efficacious killer T-cell responses that significantly delay tumor progression in lung and ovarian cancer preclinical models.

World Organisation for Animal Health (OIE) [to 26 Jan 2019]

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

No new digest content identified.

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BIO [to 26 Jan 2019]

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

No new digest content identified.

DCVMN – Developing Country Vaccine Manufacturers Network [to 26 Jan 2019]

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

No new digest content identified.

IFPMA [to 26 Jan 2019]

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

No new digest content identified.

PhRMA [to 26 Jan 2019]

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

No new digest content identified.

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Journal Watch

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

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

American Journal of Infection Control

January 2019 Volume 47, Issue 1, p1-116

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

[Reviewed earlier]

American Journal of Preventive Medicine

January 2019 Volume 56, Issue 1, p1-178

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

[Reviewed earlier]

American Journal of Public Health

January 2019 109(1)

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

[Reviewed earlier]

American Journal of Tropical Medicine and Hygiene

Volume 100, Issue 1, 2019

<http://www.ajtmh.org/content/journals/14761645/100/1>

[Reviewed earlier]

Annals of Internal Medicine

15 January 2019 Vol: 170, Issue 2

<http://annals.org/aim/issue>

[Reviewed earlier]

BMC Cost Effectiveness and Resource Allocation

<http://resource-allocation.biomedcentral.com/>

(Accessed 26 Jan 2019)

[No new digest content identified]

BMJ Global Health

January 2019 - Volume 4 - 1

<https://gh.bmj.com/content/4/1>

[Reviewed earlier]

BMC Health Services Research

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

(Accessed 26 Jan 2019)

[No new digest content identified]

BMC Infectious Diseases

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

(Accessed 26 Jan 2019)

Research article

[**Epidemiological characteristics, clinical manifestations, and treatment outcome of 139 paediatric Ebola patients treated at a Sierra Leone Ebola treatment center**](#)

The West Africa Ebola Virus Disease (EVD) outbreak in 2014–2016 was declared by the World Health Organization (WHO) a public health emergency of international concern. Most of the previous studies done in Sier...

Authors: Jia Bainga Kangbai, Christian Heumann, Michael Hoelscher, Foday Sahr and Guenter Froeschl

Citation: BMC Infectious Diseases 2019 19:81

Published on: 24 January 2019

BMC Medical Ethics

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

(Accessed 26 Jan 2019)

No new digest content identified]

BMC Medicine

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

(Accessed 26 Jan 2019)

No new digest content identified]

BMC Pregnancy and Childbirth

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

(Accessed 26 Jan 2019)

[No new digest content identified]

BMC Public Health

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

(Accessed 26 Jan 2019)

[No new digest content identified]

BMC Research Notes

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

(Accessed 26 Jan 2019)

Research note

[Health professionals' willingness to pay and associated factors for human papilloma virus vaccination to prevent cervical cancer at College of Medicine and Health Sciences University of Gondar, Northwest Ethiopia](#)

Preferences of health professionals' for human papilloma virus vaccines was measured by monetary value through willingness to pay (WTP) approach that could help policy makers set priorities among alternative c...

Authors: Abebe Ayinalem Tarekegn and Ayenew Engida Yismaw

Citation: BMC Research Notes 2019 12:58

Published on: 24 January 2019

BMJ Open

January 2019 - Volume 9 - 1

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

[Reviewed earlier]

Bulletin of the World Health Organization

Volume 97, Number 1, January 2019, 1-72

<https://www.who.int/bulletin/volumes/97/1/en/>

[Reviewed earlier]

Child Care, Health and Development

Volume 45, Issue 1 Pages: 1-145 January 2019

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

[Reviewed earlier]

Clinical Therapeutics

January 2019 Volume 41, Issue 1, p1-190

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

[New issue; No digest content identified]

Clinical Trials

Volume 16 Issue 1, February 2019

<https://journals.sagepub.com/toc/ctja/16/1>

International Issues

[Strategic inclusion of regions in multiregional clinical trials](#)

Seung Yeon Song, Deborah Chee, EunYoung Kim

First Published November 16, 2018; pp. 98–105

Abstract

Background

With the recent publication of the International Conference on Harmonisation E17 guideline and major reforms in China underway, the platform for clinical trial conduct is expected to change.

This study aims to assess the strategic inclusion of regions in clinical trials and its change in trends over the past decade.

Methods

The ClinicalTrials.gov registry was searched for clinical trials registered by the top 10 pharmaceutical companies between 1 January 2008 and 31 December 2017. Extracted data included phase, disease type, intervention, study start year, and region. Trial type was classified as either a local study or a multiregional clinical trial as per the International Conference on Harmonisation E17 guideline.

Results

Of 2488 phase I, 1855 phase II, and 1999 phase III trials included, the majority of phase I trials were local studies (76.8%), while the majority of phase II (66.0%) and phase III (72.2%) trials were multiregional clinical trials. The proportion of multiregional clinical trials showed an

increasing trend for all phases ($p < 0.01$). Although North America and Europe remained the main locations, increasing trends of inclusion of other regions, such as East Asia, were noted.
Conclusion

Globalization of drug development is evident with the increasing trend of multiregional clinical trial. Regulatory authorities as well as the pharmaceutical industry should prepare for the evolving setting of clinical research and problems that can arise from these changes.

Conflict and Health

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

[Accessed 26 Jan 2019]

[No new digest content identified]

Contemporary Clinical Trials

Volume 76 Pages 1-132 (January 2019)

<https://www.sciencedirect.com/journal/contemporary-clinical-trials/vol/76/suppl/C>

[Reviewed earlier]

Current Opinion in Infectious Diseases

February 2019 - Volume 32 - Issue 1

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

[Reviewed earlier]

Developing World Bioethics

Volume 18, Issue 4 Pages: 307-432 December 2018

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

[Reviewed earlier]

Development in Practice

Volume 29, Issue 2, 2019

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

[New issue; No digest content identified]

Disasters

Volume 43, Issue 1 Pages: 1-217 January 2019

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

[Reviewed earlier]

EMBO Reports

Volume 19, Number 12 01 December 2018

<http://embor.embopress.org/content/19/12?current-issue=y>

[Reviewed earlier]

Emerging Infectious Diseases

Volume 25, Number 1—January 2019

<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 147 - 2019

<https://www.cambridge.org/core/journals/epidemiology-and-infection/latest-issue>

[Reviewed earlier]

Ethics & Human Research

Volume 41, Issue 1 January-February 2019

<https://onlinelibrary.wiley.com/journal/25782363>

New Challenges and Unresolved Issues

The inaugural issue of Ethics & Human Research (E&HR) marks an exciting milestone in The Hastings Centers' 40-year history of publishing a journal that focuses on the ethical, regulatory, and policy issues related to research with humans. Like its predecessor, IRB: Ethics & Human Research, E&HR will publish conceptual and empirical analyses on a wide range of topics related to the human research enterprise.

The journal's name change conveys to the global community of authors and readers that E&HR is not solely about issues related to institutional review boards (IRBs) in the United States. The title shift provides an opportunity to identify new ethical, policy, and regulatory challenges that rapid developments in science, medicine, and regulatory frameworks bring to the conduct and oversight of human subjects research in the United States and elsewhere. Along with publishing work that investigates new challenges, E&HR aims not only to draw attention to unresolved issues but also to broaden the scope of issues for investigation and analysis in the field of human research ethics. The pieces in this inaugural issue identify several new challenges and hint at some of the unresolved issues and broader topics that merit further attention.

The European Journal of Public Health

Volume 28, Issue 6, December 2018

<https://academic.oup.com/eurpub/issue/28/6>

[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. 4 December 27, 2018

<http://www.ghspjournal.org/content/current>

[Reviewed earlier]

Global Public Health

Volume 14, 2019 Issue 2

<http://www.tandfonline.com/toc/rgph20/current>

[Reviewed earlier]

Globalization and Health

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

[Accessed 26 Jan 2019]

[No new digest content identified]

Health Affairs

Vol. 37 , No. 12 December 2018

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

Telehealth

[Reviewed earlier]

Health and Human Rights

Volume 20, Issue 2, December 2018

<https://www.hhrjournal.org/volume-20-issue-2-december-2018/>

Issue 20.2 features a special section: Special Section on Human Rights and the Social Determinants of Health and a General Papers section

[Reviewed earlier]

Health Economics, Policy and Law

Volume 14 - Issue 1 - January 2019

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

[Reviewed earlier]

Health Equity

Volume 2, Issue 1 / December 2018

<https://www.liebertpub.com/toc/heg/2/1>

[Reviewed earlier]

Health Policy and Planning

Volume 33, Issue 9, 1 November 2018

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

[Reviewed earlier]

Health Research Policy and Systems

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

[Accessed 26 Jan 2019]

Research

What, why and how do health systems learn from one another? Insights from eight low- and middle-income country case studies

All health systems struggle to meet health needs within constrained resources. This is especially true for low-income countries. It is critical that they can learn from wider contexts in order to improve their...

Authors: Sophie Witter, Ian Anderson, Peter Annear, Abiodun Awosusi, Nitin N. Bhandari, Nouria Brikci, Blandine Binachon, Tata Chanturidze, Katherine Gilbert, Charity Jensen, Tomas Lievens, Barbara McPake, Snehashish Raichowdhury and Alex Jones

Citation: Health Research Policy and Systems 2019 17:9

Published on: 21 January 2019

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 12, 2018

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

[Reviewed earlier]

Infectious Agents and Cancer

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

[Accessed 26 Jan 2019]

[No new digest content identified]

Infectious Diseases of Poverty

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

[Accessed 26 Jan 2019]

[No new digest content identified]

International Health

Volume 11, Issue 1, January 2019

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

[Reviewed earlier]

International Journal of Community Medicine and Public Health

Vol 6, No 2 (2019) February 2019

<https://www.ijcmph.com/index.php/ijcmph/issue/view/47>

Original Research Articles

[Assessment of immunization coverage in district Srinagar of Kashmir](#)

Ambrine Ashraf, Sheema Samreen, S. M. Salim Khan, Inaamul Haq, Mariya Amin

DOI: [10.18203/2394-6040.ijcmph20190181](https://doi.org/10.18203/2394-6040.ijcmph20190181)

Process evaluation of mission Indradhanush immunization program in urban and rural communities of Ahmedabad district of Gujarat

Priyank D. Algotar, N. Lakshmi, Hardik B. Yagnik, Rinita Jain

DOI: [10.18203/2394-6040.ijcmph20190206](https://doi.org/10.18203/2394-6040.ijcmph20190206)

Evaluation of vaccine storage and cold chain management practices during intensified mission Indradhanush in community health centers of Tikamgarh district of Madhya Pradesh

Ram K. Panika, Pankaj Prasad, Sunil Nandeshwar

DOI: [10.18203/2394-6040.ijcmph20190215](https://doi.org/10.18203/2394-6040.ijcmph20190215)

International Journal of Epidemiology

Volume 47, Issue 6, 1 December 2018

<https://academic.oup.com/ije/issue/47/6>

[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

January 2019 Volume 78, p1-154 *Open Access*

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

[Reviewed earlier]

JAMA

January 22, 2019, Vol 321, No. 3, Pages 217-316

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

Viewpoint

Ebola and War in the Democratic Republic of Congo - Avoiding Failure and Thinking Ahead

Lawrence O. Gostin, JD; Matthew M. Kavanagh, PhD; Elizabeth Cameron, PhD

JAMA. 2019;321(3):243-244. doi:10.1001/jama.2018.19743

In this Viewpoint, Gostin and colleagues review recommendations developed by experts convened by Georgetown University on how the international community can respond to the 2018 Ebola outbreak in the Democratic Republic of Congo (DRC) in the midst of active conflict and insecurity from armed rebels.

JAMA Pediatrics

January 2019, Vol 173, No. 1, Pages 3-112

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

[Reviewed earlier]

JBI Database of Systematic Review and Implementation Reports

January 2019 - Volume 17 - Issue 1

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

[Reviewed earlier]

Journal of Adolescent Health

January 2019 Volume 64, Issue 1, p1-140

[https://www.jahonline.org/issue/S1054-139X\(17\)X0016-5](https://www.jahonline.org/issue/S1054-139X(17)X0016-5)

[Reviewed earlier]

Journal of Community Health

Volume 44, Issue 1, February 2019

<https://link.springer.com/journal/10900/44/1>

[Reviewed earlier]

Journal of Empirical Research on Human Research Ethics

Volume 14 Issue 1, February 2019

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

[Reviewed earlier]

Journal of Epidemiology & Community Health

January 2019 - Volume 73 - 1

<https://jech.bmj.com/content/73/1>

[Reviewed earlier]

Journal of Evidence-Based Medicine

Volume 12, Issue S1 Pages: 1-34 January 2019

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

7th Meeting of the COMET Initiative (VII), Thursday 15th and Friday 16th November 2018, De Rode Hoed, Amsterdam

On the 15th and 16th November 2018, the Core Outcome Measures in Effectiveness Trials (COMET) Initiative held its seventh international meeting. After success at COMET VI, the COMET meeting returned to De Rode Hoed (The Red Hat) in Amsterdam for their second consecutive meeting. One-hundred and fifteen participants gathered from around the world, coming from five continents and 18 countries.

Journal of Global Ethics

Volume 14, Issue 2, 2018

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

Special Issue: Reconciliation, Transitional and Indigenous Justice

[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

February 2019, Issue 1, Pages 1-209

<https://link.springer.com/journal/10903/21/1>

[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, 26 Jan 2019

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

[Reviewed earlier]

Journal of Medical Ethics

February 2019 - Volume 45 - 2

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

[New issue; No digest content identified]

Journal of Medical Internet Research

Vol 20, No 12 (2018): December

<https://www.jmir.org/2018/12>

[Reviewed earlier]

Journal of Medical Microbiology

Volume 68, Issue 1, January 2019

<https://jmm.microbiologyresearch.org/content/journal/jmm/68/1>

[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 4, December 2018
<https://academic.oup.com/jpids/issue>

[Reviewed earlier]

Journal of Pediatrics

January 2019 Volume 204, p1-330
<http://www.jpeds.com/current>

[Reviewed earlier]

Journal of Pharmaceutical Policy and Practice

<https://joppp.biomedcentral.com/>
[Accessed 26 Jan 2019]

No new digest content identified]

Journal of Public Health Management & Practice

January/February 2019 - Volume 25 - Issue 1
<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

2 January 2019 Volume 16 Issue 150
<https://royalsocietypublishing.org/journal/rsif>

[New issue; No digest content identified]

Journal of Travel Medicine

Volume 25, Issue suppl_1, 1 May 2018
https://academic.oup.com/jtm/issue/25/suppl_1

Asian travel: from the rare to the difficult

[Reviewed earlier]

Journal of Virology

February 2019; Volume 93, Issue 3

<http://jvi.asm.org/content/current>
[New issue; No digest content identified]

The Lancet

Jan 26, 2019 Volume 393 Number 10169 p295-376, e3-e4
<https://www.thelancet.com/journals/lancet/issue/current>

Editorial

[At the turn of the tide: human rights and health in 2019](#)

The Lancet

A pattern of political turmoil, violence, and intolerance in all corners of the world, from Europe to Asia and the USA, is following a rise of populist leaders and authoritarian governments. Human rights are under autocratic threat. Once-influential rights defenders, such as the USA, have faded away, risking a void in the global defence of human rights. This gloomy reality is underscored in Human Rights Watch's [World Report 2019](#), released Jan 17, which summarises key human rights issues in nearly 100 countries and territories worldwide. This year's annual report sends a clear message: that human rights violations propagated by autocratic leaders throughout 2018 continue to imperil the health of the world's most vulnerable populations.

Inequality and discrimination fuelled much of the harm in 2018. Immigration became one of the most divisive issues among autocratic leaders in Europe. The failure to establish protective measures for people with migrant and refugee status restricted their access to health care. Some European governments, such as the Italian and Hungarian regimes, prevented migrants from entering their countries and fuelled rising anti-immigrant sentiment. In the USA, President Trump separated immigrant children from their parents. In southeast Asia, more than 1 million Rohingya Muslims remain locked in a cycle of poor child health, malnutrition, waterborne illness, and poor obstetric care after decades of discrimination—a situation that has worsened drastically because of a brutal crackdown by the Myanmar army.

Attacks in armed conflict zones against hospitals and threats to health-care staff continued to be problematic. In Yemen, in what UN officials describe as the world's largest humanitarian crisis, bombings and blockade by Saudi-led coalitions hampered the movement and safety of health-care staff, patients, and ambulances. Similar examples of attacks on health-care facilities were reported in the Gaza Strip and in areas of war-ravaged Syria.

Restricted supply of food and basic medical supplies in countries experiencing financial turmoil have threatened the health and safety of their populations. Under President Nicolás Maduro's leadership, Venezuela's infrastructure has crumbled and an economic collapse has triggered a historic exodus of civilians. The country's health-care system is decaying, triggering a rise in the rates of maternal and infant mortality and a spike in cases of malaria and diphtheria.

But there are reasons for hope. Unlike previous annual reports, World Report 2019 paints a brighter picture of the future. In his introductory essay, Executive Director Kenneth Roth explains that, amid political chaos and despite mounting pessimism around rights abuses and attacks on democracy by populists on both the far left and far right, 2018 was a remarkable year for human rights. This is not because of growing authoritarian tendencies, but because of resistance to them. "Important battles are being won, re-energising the global defence of human rights", states Roth. The pushback to autocracy was striking because it took unexpected

forms—from elections, street demonstrations by civilians, both regionally and nationally, to non-traditional coalitions between smaller countries and organisations, the UN, and the European Parliament. 2018 saw unprecedented international efforts to resist attacks on democracy in Europe and Africa, to halt the Saudi-led bombing and blockading of Yemeni civilians, to prevent further bloodshed in Syria, and to take measures that will one day bring to justice the perpetrators of attacks against Rohingya Muslims in Myanmar. Latin American governments united with Canada to urge the International Criminal Court to open an investigation of crimes in Venezuela. Democrat gains in the House of Representatives in the autumn midterm elections reflect, at least in part, a national dismay of Trump's anti-immigrant rhetoric.

This rise of resistance against the autocracy must not lose momentum in 2019. Every day, in so many parts of the world, the health of women and children is attacked and reproductive rights are violated. In countries facing the consequences of pollution and climate change, or fighting outbreaks of infectious disease, vulnerable, marginalised, and minority populations are being overlooked. An access abyss in palliative care persists, and mental health is still neglected. Much of the pushback in the past year played out at the UN and the European Parliament, underlining the importance of solidarity and the collective voice. This global unity is a force that needs to be harnessed to truly shift the power dynamics in 2019 and to make it a year of triumph for both human rights and health. It will be a tough journey.

Editorial

[Standing up for migration](#)

The Lancet

WHO issued [a report](#) on the health of refugees and migrants in the WHO European Region on Jan 21, 2019. The report aims to provide an overview of the current health situation for refugees and migrants across the 53 countries of the region, by providing an evidence base for the approximately 258 million migrants in the area.

The report notes that “there are no global or region-wide indicators or standards for refugee and migrant health”. Although the global volume of refugees and migrants has remained relatively stable since 1990 (from 2·8% of global population then to 3·3% now), there has been a sharp rise in the proportion of displaced people over the same period, from five in 1000 in 1997 to nine in 1000 in 2017. This sizable population demands separate consideration, in part because their health concerns need promoting and defending in the face of increasing xenophobia across Europe.

Persistent myths about migrants and refugees have been allowed to propagate unchallenged in political discourse. Our recent Commission on Migration and Health highlighted some of these. Migrants contribute more to the wealth of host societies than they cost, and migrants have lower mortality than their host populations.

This new WHO Report and the recent Compact on Global Migration represent positive moves in an area of global health featuring some of the world's most maligned and at-risk populations. Too often, however, the voices of the migrants and refugees themselves are silenced in the conversation. Migrants and refugees clearly have vital contributions to make in the debate over their treatment and health, but, frustratingly, the dialogue surrounding them seems limited to those in positions of institutional power. We urge political leaders to privilege migrants as

essential participants in the public conversation about their important contributions to the health of our societies.

Seminar

Dengue

Annelies Wilder-Smith, Eng-Eong Ooi, Olaf Horstick, Bridget Wills

Summary

Mortality from severe dengue is low, but the economic and resource burden on health services remains substantial in endemic settings. Unfortunately, progress towards development of effective therapeutics has been slow, despite notable advances in the understanding of disease pathogenesis and considerable investment in antiviral drug discovery. For decades antibody-dependent enhancement has been the prevalent model to explain dengue pathogenesis, but it was only recently demonstrated in vivo and in clinical studies. At present, the current mainstay of management for most symptomatic dengue patients remains careful observation and prompt but judicious use of intravenous hydration therapy for those with substantial vascular leakage. Various new promising technologies for diagnosis of dengue are currently in the pipeline. New sample-in, answer-out nucleic acid amplification technologies for point-of-care use are being developed to improve performance over current technologies, with the potential to test for multiple pathogens using a single specimen. The search for biomarkers that reliably predict development of severe dengue among symptomatic individuals is also a major focus of current research efforts. The first dengue vaccine was licensed in 2015 but its performance depends on serostatus. There is an urgent need to identify correlates of both vaccine protection and disease enhancement. A crucial assessment of vector control tools should guide a research agenda for determining the most effective interventions, and how to best combine state-of-the-art vector control with vaccination.

Lancet Global Health

Feb 2019 Volume 7 Number 2 e160-e280

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

Comment

[Importance of tuberculosis vaccination targeting older people in China](#)

Yue Wang, Weibing Wang

Comment

[The role of pneumococcal conjugate vaccination in reducing pneumonia mortality](#)

Mark Jit, Stefan Flasche

Articles

[Age-targeted tuberculosis vaccination in China and implications for vaccine development: a modelling study](#)

Rebecca C Harris, Tom Sumner, Gwenan M Knight, Tom Evans, Vicky Cardenas, Chen Chen, Richard G White

Articles

[Effect of pneumococcal conjugate vaccine introduction on childhood pneumonia mortality in Brazil: a retrospective observational study](#)

Cynthia Schuck-Paim, Robert J Taylor, Wladimir J Alonso, Daniel M Weinberger, Lone Simonsen

Lancet Infectious Diseases

Jan 2019 Volume 19 Number 1p1-112, e1-e38
<http://www.thelancet.com/journals/laninf/issue/current>
[Reviewed earlier]

Lancet Respiratory Medicine

Jan 2019 Volume 7 Number 1p1-98, e1
<http://www.thelancet.com/journals/lanres/issue/current>
[Reviewed earlier]

Maternal and Child Health Journal

Volume 23, Issue 1, January 2019
<https://link.springer.com/journal/10995/23/1>
[Reviewed earlier]

Medical Decision Making (MDM)

Volume 39 Issue 1, January 2019
<http://mdm.sagepub.com/content/current>
[Reviewed earlier]

The Milbank Quarterly

A Multidisciplinary Journal of Population Health and Health Policy
Volume 96, Issue 4 Pages: 607-882 December 2018
<https://onlinelibrary.wiley.com/toc/14680009/current>
[Reviewed earlier]

Nature

Volume 565 Issue 7740, 24 January 2019
http://www.nature.com/nature/current_issue.html
Editorial | 21 January 2019

[Genomics can help to monitor cholera](#)

Sequence data from whole genomes let researchers track the spread of strains worldwide.

Comment | 22 January 2019

[Where are the Ebola diagnostics from last time?](#)

Analysis reveals commercial tests for Ebola are too hard to come by in the current outbreak — sustain investment, urge Lieselotte Cnops, Kevin K. Ariën and colleagues.
Lieselotte Cnops, Birgit De Smet[...] & Kevin K. Ariën

Nature Medicine

Volume 25 Issue 1, January 2019

<https://www.nature.com/nm/volumes/25/issues/1>

Medicine in the digital age

As *Nature Medicine* celebrates its 25th anniversary, we bring our readers a special Focus on Digital Medicine that highlights the new technologies transforming medicine and healthcare, as well as the related regulatory challenges ahead.

[Reviewed earlier]

Nature Reviews Immunology

Volume 19 Issue 1, January 2019

<https://www.nature.com/nri/volumes/19/issues/1>

[Reviewed earlier]

New England Journal of Medicine

January 24, 2019 Vol. 380 No. 4

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

[New issue; No digest content identified]

Pediatrics

January 2019, VOLUME 143 / ISSUE 1

<http://pediatrics.aappublications.org/content/143/1?current-issue=y>

[Reviewed earlier]

Pharmaceutics

Volume 10, Issue 4 (December 2018)

<https://www.mdpi.com/1999-4923/10/4>

[Reviewed earlier]

PharmacoEconomics

Volume 37, Issue 1, January 2019

<https://link.springer.com/journal/40273/37/1>

[New issue; No digest content identified]

PharmacoEconomics & Outcomes News

Volume 820, Issue 1, January 2019

<https://link.springer.com/journal/40274/820/1>

Clinical study

[Childhood pneumococcal vaccination cost effective in India](#)

Krishnamoorthy Y, et al.

PLOS Currents: Disasters

<http://currents.plos.org/disasters/>
[Accessed 26 Jan 2019]
[No new digest content identified]

PLoS Currents: Outbreaks

<http://currents.plos.org/outbreaks/>
[Accessed 26 Jan 2019]
[No new digest content identified]

PLoS Medicine

<http://www.plosmedicine.org/>
(Accessed 26 Jan 2019)

[Evaluating strategies for control of tuberculosis in prisons and prevention of spillover into communities: An observational and modeling study from Brazil](#)

Tarub S. Mabud, Maria de Lourdes Delgado Alves, Albert I. Ko, Sanjay Basu, Katharine S. Walter, Ted Cohen, Barun Mathema, Caroline Colijn, Everton Lemos, Julio Croda, Jason R. Andrews

Research Article | published 24 Jan 2019 PLOS Medicine
<https://doi.org/10.1371/journal.pmed.1002737>

[Prior dengue virus infection and risk of Zika: A pediatric cohort in Nicaragua](#)

Aubree Gordon, Lionel Gresh, Sergio Ojeda, Leah C. Katzelnick, Nery Sanchez, Juan Carlos Mercado, Gerardo Chowell, Brenda Lopez, Douglas Elizondo, Josefina Coloma, Raquel Burger-Calderon, Guillermina Kuan, Angel Balmaseda, Eva Harris

Research Article | published 22 Jan 2019 PLOS Medicine
<https://doi.org/10.1371/journal.pmed.1002726>

PLoS Neglected Tropical Diseases

<http://www.plosntds.org/>
(Accessed 26 Jan 2019)

Research Article

[Does prior dengue virus exposure worsen clinical outcomes of Zika virus infection? A systematic review, pooled analysis and lessons learned](#)

Jennifer Masel, Michael K. McCracken, Todd Gleeson, Brian Morrison, George Rutherford, Allison Imrie, Richard G. Jarman, Michael Koren, Simon Pollett

| published 25 Jan 2019 PLOS Neglected Tropical Diseases
<https://doi.org/10.1371/journal.pntd.0007060>

PLoS One

<http://www.plosone.org/>
[Accessed 26 Jan 2019]

Research Article

[Cost-effectiveness of influenza vaccine strategies for the elderly in South Korea](#)

Jae-Won Yun, Min Joo Choi, Gyeong-Seon Shin, Jae-Ok Lim, Ji Yun Noh, Yun-Kyung Kim, Joon Young Song, Woo Joo Kim, Sang-Eun Choi, Hee Jin Cheong
Research Article | published 25 Jan 2019 PLOS ONE
<https://doi.org/10.1371/journal.pone.0209643>

[Can vaccination coverage be improved by reducing missed opportunities for vaccination? Findings from assessments in Chad and Malawi using the new WHO methodology](#)

Ikechukwu Udo Ogbuanu, Anyie J. Li, Blanche-philomene Melanga Anya, Mbaihol Tamadji, Geoffrey Chirwa, Kwame W. Chiwaya, Mohamed El-Hafiz Djalal, Dah Cheikh, Zorodzai Machekanyanga, Joseph Okeibunor, Colin Sanderson, Richard Mihigo
Research Article | published 24 Jan 2019 PLOS ONE
<https://doi.org/10.1371/journal.pone.0210648>

[Completion of multiple-dose travel vaccine series and the availability of pharmacist immunizers: A retrospective analysis of administrative data in Alberta, Canada](#)

Sherilyn K. D. Houle, Dean T. Eurich
Research Article | published 23 Jan 2019 PLOS ONE
<https://doi.org/10.1371/journal.pone.0211006>

PLoS Pathogens

<http://journals.plos.org/plospathogens/>
[Accessed 26 Jan 2019]
[No new digest content identified]

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<http://www.pnas.org/content/early/>
[Accessed 26 Jan 2019]
[No new digest content identified]

Prehospital & Disaster Medicine

Volume 33 - Issue 6 - December 2018
<https://www.cambridge.org/core/journals/prehospital-and-disaster-medicine/latest-issue>
[Reviewed earlier]

Preventive Medicine

Volume 118 Pages 1-354 (January 2019)
<https://www.sciencedirect.com/journal/preventive-medicine/vol/117/suppl/C>
[Reviewed earlier]

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

Volume 166 Pages 1-154, A1-A4 (January 2019)
<http://www.publichealthjrnl.com/current>
[New issue; No digest content identified]

Public Health Ethics

Volume 11, Issue 3, November 2018
<http://phe.oxfordjournals.org/content/current>
[Reviewed earlier]

Public Health Reports

Volume 134 Issue 1, January/February 2019
<https://journals.sagepub.com/toc/phrg/134/1>
Executive Perspective

[Global Health Security: Protecting the United States in an Interconnected World](#)

Rebecca E. Bunnell, PhD, MEd, [Zara Ahmed](#), DrPH, MPP, [Megan Ramsden](#), MPH, [Karina Rapposelli](#), MPH, [Madison Walter-Garcia](#), MPH, [Eshita Sharmin](#), MPH, [Nancy Knight](#), MD
First Published November 14, 2018; pp. 3–10

Qualitative Health Research

Volume 29 Issue 3, February 2019
<http://qhr.sagepub.com/content/current>
[New issue; No digest content identified]

Research Ethics

Volume 15 Issue 1, January 2019
<http://journals.sagepub.com/toc/reab/current>
Original Article: Non-Empirical

[Exploring the socioethical dilemmas in the use of a global health archive](#)

[Matthew James Vaughton Holmes](#), [Isla-Kate Morris](#), [Anthony Williams](#), [Jennifer Le Blond](#),
[Victoria Cranna](#), [Gail Davey](#)
First Published November 1, 2018; pp. 1–9

Original Articles: Empirical

[Ethical complexities in child co-research](#)

[Merle Spriggs](#), [Lynn Gillam](#)
First Published December 20, 2017; pp. 1–16
Abstract

Child co-research has become popular in social research involving children. This is attributed to the emphasis on children's rights and is seen as a way to promote children's agency and voice.

It is a way of putting into practice the philosophy, common amongst childhood researchers, that children are experts on childhood. In this article, we discuss ethical complexities of involving children as co-researchers, beginning with an analysis of the literature, then drawing on data from interviews with researchers who conduct child co-research. We identify six ethical complexities, some of which are new findings which have not been mentioned before in this context. In light of these possible ethical complexities, a key finding is for researchers to be reflexive – to reflect on how the research may affect child co-researchers and participants before the research starts. A separate overriding message that came out in responses from the researchers we interviewed was the need for support and training for child co-researchers. We conclude by providing a list of questions for reflexive researchers to ask of themselves when they use child co-research methodology. We also provide important questions for human research ethics committees to ask when they review projects using child co-research.

[Navigating research ethics in the absence of an ethics review board: The importance of space for sharing](#)

Cécile Giraud, Giuseppe Davide Cioffo, Maité Kervyn de Lettenhove, Carlos Ramirez Chaves
First Published January 1, 2018; pp. 1–17

Reproductive Health

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

[Accessed 26 Jan 2019]

[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

Recently Published Articles

[No new digest content identified]

Risk Analysis

Volume 39, Issue 1 Pages: 1-290 January 2019

<https://onlinelibrary.wiley.com/toc/15396924/current>

Advances in Spatial Risk Analysis

[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

25 January 2019 Vol 363, Issue 6425

<http://www.sciencemag.org/current.dtl>

Policy Forum

Toward unrestricted use of public genomic data

By Rudolf I. Amann, Shakuntala Baichoo, Benjamin J. Blencowe, Peer Bork, Mark Borodovsky, Cath Brooksbank, Patrick S. G. Chain, Rita R. Colwell, Daniele G. Daffonchio, Antoine Danchin, Victor de Lorenzo, Pieter C. Dorrestein, Robert D. Finn, Claire M. Fraser, Jack A. Gilbert, Steven J. Hallam, Philip Hugenholtz, John P. A. Ioannidis, Janet K. Jansson, Jihyun F. Kim, Hans-Peter Klenk, Martin G. Klotz, Rob Knight, Konstantinos T. Konstantinidis, Nikos C. Kyrpides, Christopher E. Mason, Alice C. McHardy, Folker Meyer, Christos A. Ouzounis, Aristides A. N. Patrinos, Mircea Podar, Katherine S. Pollard, Jacques Ravel, Alejandro Reyes Muñoz, Richard J. Roberts, Ramon Rosselló-Móra, Susanna-Assunta Sansone, Patrick D. Schloss, Lynn M. Schriml, João C. Setubal, Rotem Sorek, Rick L. Stevens, James M. Tiedje, Adrian Turjanski, Gene W. Tyson, David W. Ussery, George M. Weinstock, Owen White, William B. Whitman, Ioannis Xenarios

Science 25 Jan 2019 : 350-352 Full Access

Publication interests should not limit access to public data

Summary

Despite some notable progress in data sharing policies and practices, restrictions are still often placed on the open and unconditional use of various genomic data after they have received official approval for release to the public domain or to public databases. These restrictions, which often conflict with the terms and conditions of the funding bodies who supported the release of those data for the benefit of the scientific community and society, are perpetuated by the lack of clear guiding rules for data usage. Existing guidelines for data released to the public domain recognize but fail to resolve tensions between the importance of free and unconditional use of these data and the “right” of the data producers to the first publication. This self-contradiction has resulted in a loophole that allows different interpretations and a continuous debate between data producers and data users on the use of public data. We argue that the publicly available data should be treated as open data, a shared resource with unrestricted use for analysis, interpretation, and publication.

Science Translational Medicine

23 January 2019 Vol 11, Issue 476

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

[New issue; No digest content identified]

Social Science & Medicine

Volume 221 Pages 1-132 (January 2019)

<https://www.sciencedirect.com/journal/social-science-and-medicine/vol/221/suppl/C>

Research article Abstract only

“You don't trust a government vaccine”: Narratives of institutional trust and influenza vaccination among African American and white adults

Amelia M. Jamison, Sandra Crouse Quinn, Vicki S. Freimuth

Pages 87-94

Systematic Reviews

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

[Accessed 26 Jan 2019]
[No new digest content identified]

Travel Medicine and Infectious Diseases

Volume 26 Pages 1-78 (November–December 2018)
<http://www.travelmedicinejournal.com/>
[Reviewed earlier]

Tropical Medicine & International Health

Volume 24, Issue 1 Pages: i-iv, 1-129 January 2019
<https://onlinelibrary.wiley.com/toc/13653156/current>
[New issue; No digest content identified]

Vaccine

Volume 37, Issue 6 Pages 763-898 (4 February 2019)
<https://www.sciencedirect.com/journal/vaccine/vol/37/issue/6>
Conference report

Conference info Abstract only

[Malaria vaccine trials in pregnant women: An imperative without precedent](#)

Sara A. Healy, Michal Fried, Thomas Richie, Karin Bok, ... Patrick E. Duffy
Pages 763-770

Abstract

Pregnant women are highly susceptible to *Plasmodium falciparum* malaria, leading to substantial maternal, perinatal, and infant mortality. While malaria vaccine development has made significant progress in recent years, no trials of malaria vaccines have ever been conducted in pregnant women. In December 2016, an expert meeting was convened at NIAID, NIH, in Rockville, Maryland to deliberate on the rationale and design of malaria vaccine trials in pregnant women. The discussions highlighted the progress made over recent years in the field of maternal immunization for other infectious diseases, and the evolving regulatory and ethical environment, all of which support a new emphasis on testing malaria vaccines that offer direct benefits to pregnant women. Initial safety and immunogenicity studies of malaria vaccines will be conducted in non-pregnant adult volunteers. Subsequently, efficacy trials involving pregnant women will likely be conducted in malaria-endemic and often resource-poor environments where sufficiently high malaria incidence will allow vaccine activity to be measured. Such trials will need to meet all international standards to ensure the safety of mother and offspring, under oversight of appropriate ethical and regulatory bodies. The convened experts drafted a clinical development plan to test a malaria vaccine product during pregnancy, using as a case study PfSPZ Vaccine being developed by Sanaria Inc. that is currently in phase 2 testing. Following the expert recommendations, a pregnancy registry has been initiated in Ouelessebouyou, Mali, to provide baseline information on maternal and fetal outcomes as a context for evaluating PfSPZ Vaccine safety in the future, and new regimens are being assessed that will be suitable for evaluation in pregnant women.

Research article Abstract only

[Rapid behavioral assessment of barriers and opportunities to improve vaccination coverage among displaced Rohingyas in Bangladesh, January 2018](#)

Mohamed F. Jalloh, Sarah D. Bennett, Didarul Alam, Paryss Kouta, ... Brent Wolff
Pages 833-838

Research article Abstract only

[Provider time and costs to vaccinate adult patients: Impact of time counseling without vaccination](#)

Angela Shen, Olga Khavjou, Grant King, Laurel Bates, ... Benjamin Yarnoff
Pages 792-797

Research article Open access

[Projected impact, cost-effectiveness, and budget implications of rotavirus vaccination in Mongolia](#)

Munkh-Erdene Lusvan, Frédéric Debellut, Andrew Clark, Sodbayar Demberelsuren, ... Clint Pecenka
Pages 798-807

Research article Open access

[Oral cholera vaccination strategy: Self-administration of the second dose in urban Dhaka, Bangladesh](#)

Ashraful Islam Khan, Muhammad Shariful Islam, Md. Taufiqul Islam, Azimuddin Ahmed, ... Firdausi Qadri
Pages 827-832

Research article Abstract only

[Development of a valid and reliable scale to assess parents' beliefs and attitudes about childhood vaccines and their association with vaccination uptake and delay in Ghana](#)

Aaron S. Wallace, Kathleen Wannemuehler, George Bonsu, Melissa Wardle, ... Saad B. Omer
Pages 848-856

Research article Abstract only

[Vaccine health beliefs and educational influences among pediatric residents](#)

Gitanjali Arora, Deborah Lehman, Sandhya Charlu, Nicole Ross, ... Pia S. Pannaraj
Pages 857-862

Research article Abstract only

[A multilevel analysis of factors influencing the inaccuracy of parental reports of adolescent HPV vaccination status](#)

Milkie Vu, Minh Luu, Regine Haardörfer, Carla J. Berg, ... Robert A. Bednarczyk
Pages 869-876

Vaccine: Development and Therapy

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

(Accessed 26 Jan 2019)

[No new digest content identified]

Vaccines — Open Access Journal

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

(Accessed 26 Jan 2019)

[No new digest content identified]

Value in Health

January 2019 Volume 22, Issue 1, p1-138

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

[Reviewed earlier]

Viruses

2018, 10 (12) (December 2018)

<https://www.mdpi.com/1999-4915/10/12>

[Reviewed earlier]

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

Asian Pacific Journal of Allergy and Immunology

2019 Jan 13. doi: 10.12932/AP-100518-0309. [Epub ahead of print]

[Asian Pacific Journal of Allergy and Immunology](#)

E Prompetchara, C Ketloy, SJ Thomas, K Ruxrungtham

Abstract

The first licensed dengue vaccine, CYD-TDV (Dengvaxia®), has received regulatory approval in a number of countries. However, this vaccine has some limitations. Its efficacy against DENV2 was consistently lower than other serotypes. Protective efficacy also depended on prior dengue sero-status of the vaccinees. Lower efficacy was observed in children with < 9 years old and dengue-naïve individuals. More importantly, risk of hospitalization and severe dengue was increased in the youngest vaccine recipients (2-5 years) compared to controls. Thus, the quest of a better vaccine candidate continues. There are two live-attenuated vaccine candidates currently testing in phase III trial including DENVax, developed by US CDC and Inviragen (now licensed to Takeda) and TV003/TV005, constructed by US NIAID. In addition, there are several phase I-II as well as preclinical phase studies evaluating vaccines for safety and immunogenicity, this include other live-attenuated platform/strategy, purified-inactivated viruses formulated with adjuvants, DNA vaccine, subunit vaccine, viral vector and also heterologous prime/boost strategies. The major difficulties of dengue vaccine development are included the lack of the best animal model, various immune status of individual especially in endemic areas and clear cut off of protective immunity. Several research and development efforts are ongoing to find a better effective and accessible dengue vaccine for people needed.

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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 26 Jan 2019

[No new, unique, relevant content]

BBC

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

Accessed 26 Jan 2019

[No new, unique, relevant content]

The Economist

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

Accessed 26 Jan 2019

Charlemagne –

[The campaign against vaccination](#)

Disease will be a major political battleground in the coming decades

Jan 19th 2019

Financial Times

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

Accessed 26 Jan 2019

[Delivery innovation spreads vaccines' benefits](#)

22 January 2019

While some scientists seek vaccine breakthroughs for [cancer](#), [HIV](#) and [malaria](#), others are focusing on a more basic problem: ensuring that the vaccines we have reach those in need.

Forbes

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

Accessed 26 Jan 2019

[No new, unique, relevant content]

Foreign Affairs

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

Accessed 26 Jan 2019

[No new, unique, relevant content]

Foreign Policy

<http://foreignpolicy.com/>

Accessed 26 Jan 2019

[No new, unique, relevant content]

The Guardian

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

Accessed 26 Jan 2019

[No new, unique, relevant content]

New Yorker

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

Accessed 26 Jan 2019

As Told To

[Amid a Measles Outbreak, an Ultra-Orthodox Nurse Fights Vaccination Fears in Her Community](#)

"We live in close quarters with extended family. So we should consider ourselves especially obligated to prevent harm to our fellow community members," Blima Marcus said.

By Amanda Schaffer

January 25, 2019

New York Times

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

Accessed 26 Jan 2019

[How to Inoculate Against Anti-Vaxxers](#)

19 January 2019

...Thwarting this danger will require a campaign as bold and aggressive as the one being waged by the anti-vaccination contingent. And to launch such a campaign would require overcoming strong inertia: a waning public health apparatus, countervailing politics and a collective amnesia over the havoc the diseases in question once wrought. But to succeed would be to rescue from oblivion one of the greatest triumphs of human ingenuity over disease — and to save countless lives.

Wall Street Journal

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

Accessed 26 Jan 2019

Health

[Washington State Becomes Latest Hot Spot in Measles Outbreak](#)

By Brianna Abbott

Jan. 23, 2019 5:06 pm ET

The U.S. is experiencing outbreaks of measles, largely due to a drop in vaccination rates in some areas. An outbreak in Washington state has sickened 23 people this month.

Appeared in the January 23, 2019, print edition as 'Measles Breaks Out in the Northwest.'

Washington Post

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

Accessed 26 Jan 2019

Officials in anti-vaccination 'hotspot' near Portland declare an emergency over measles outbreak

Isaac Stanley-Becker Jan 23, 2019

The Latest: Merck to ship 120,000 more Ebola vaccine doses

Associated Press Jan 22, 2019

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Think Tanks et al

Brookings

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

Accessed 26 Jan 2019

[No new relevant content]

Center for Global Development

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

[No new relevant content]

CSIS

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

Accessed 26 Jan 2019

[No new relevant content]

Council on Foreign Relations

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

Accessed 26 Jan 2019

[No new relevant content]

Kaiser Family Foundation

https://www.kff.org/search/?post_type=press-release

Accessed 26 Jan 2019

[No new relevant content]

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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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