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.

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

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**WHO – 146th session of the Executive Board**

**Main Documents** [selected documents/Editor's text bolding]]

**EB146/1 Rev.1**
Provisional agenda

**EB146/1(annotated)**
Provisional agenda (annotated)

**EB146/6**
Follow-up to the high-level meetings of the United Nations General Assembly on health-related issues
Universal health coverage: moving together to build a healthier world

**EB146/7**
Follow-up to the high-level meetings of the United Nations General Assembly on health-related issues
Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases

**EB146/8**
Global vaccine action plan

**EB146/9**
Accelerating the elimination of cervical cancer as a global public health problem

**EB146/10**
Ending tuberculosis
Progress in implementing the global strategy and targets for tuberculosis prevention, care and control after 2015 (the End TB Strategy)

**EB146/11**
Ending tuberculosis
Draft global strategy for tuberculosis research and innovation

**EB146/14 –**
Neglected tropical diseases

**EB146/15**
Global strategy and plan of action on public health, innovation and intellectual property
EB146/16
Public health emergencies: preparedness and response
Independent Oversight and Advisory Committee for the WHO Health Emergencies Programme

EB146/17
Public health preparedness and response
WHO’s work in health emergencies

EB146/18
Influenza preparedness

EB146/19
The public health implications of implementation of the Nagoya Protocol

EB146/20
Public health emergencies: preparedness and response
Cholera prevention and control

EB146/21
Poliomyelitis
Polio eradication

EB146/22
Poliomyelitis
Polio transition planning and polio post-certification

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Featured Journal Content

Bulletin of the World Health Organization
Volume 98, Number 2, February 2020, 77-148
https://www.who.int/bulletin/volumes/98/2/en/
PERSPECTIVES

Addressing the persistent inequities in immunization coverage
http://dx.doi.org/10.2471/BLT.19.241620

A key focus of the health-related sustainable development goal (SDG) 3 is universal health coverage (UHC), including access to safe, effective, quality, and affordable essential medicines and vaccines. However, the challenges to achieving UHC are substantial, especially with increased demands on the health sector and with most budgets being static or shrinking.1

Immunization programmes have been successful in reaching children worldwide. For example, 86% of the world’s infants had received three doses of diphtheria-tetanus-pertussis (DTP3)
vaccine in 2018.2 The experiences from such programmes can contribute to UHC, and as these programmes strive to adapt to new global strategic frameworks, such as Gavi, the Vaccine Alliance’s strategy Gavi 5.0 and the World Health Organization’s (WHO) Immunization Agenda 2030, these efforts can inform the progressive realization of UHC. Immunization programmes that can sustain regular levels of contact between health providers and beneficiaries at the community level have enabled new vaccines to be added to routine immunization schedules and other interventions to be delivered to children and their families. In addition, experiences from both polio campaigns and the child health days strategy show that incorporating additional interventions into campaigns can increase coverage of these interventions as well as of vaccinations.3,4

Improving immunization coverage
Considering how to expand integration efforts and to better focus immunization on the most disadvantaged, including attention to addressing social determinants of health, will be critical for further progress. The Equity Reference Group for Immunization has conducted analyses based on published and unpublished literature, as well as a series of interviews with experts working at global, national and community levels to highlight several related challenges and opportunities. Here we discuss challenges and opportunities related to data quality, vertical immunization programmes, underserved children and gender.

In 2018, 19.4 million children younger than one year of age did not receive DTP3, and approximately 41% of these children live in countries that are polio-endemic, fragile or affected by conflict.2 In addition, a growing share of children live in middle-income countries where vulnerability and social exclusion, particularly among the urban poor, prevents many from receiving vaccination. Children living in remote rural areas, although long identified as a target population for immunization programmes, continue to be underserved. Furthermore, immunization programmes often ignore inequities caused by bias and discrimination in response to the social constructs of ethnicity and gender.

Data quality
There is growing evidence on the reasons these inequities in immunization exist and how to address them. Acting on this evidence is the challenge to increasing coverage, particularly as it will require redistributing resources, prioritizing those who are often subject to discrimination and operating in challenging contexts. Currently, opportunities that are important considerations for immunization decision-makers and implementers exist.

The first opportunity is the improvement of data quality and use of both traditional surveys and new technologies. Approaches such as linking data sets and use of electronic health information systems can facilitate recording and reporting of real-time data. Simple analyses using existing data can also help us better understand key equity issues within countries. For example, in 2018, WHO released an equity analysis of ten countries that Gavi has identified as the highest priority for childhood immunization.5 Using Demographic and Health Surveys (DHS), the report presents disaggregated data on, and associations with, DTP3 coverage by key characteristics of children, mothers and households. This type of information can serve as a basis for more detailed explorations at both national and subnational levels, and as a baseline for future efforts to redress equity gaps. New technologies can provide a better user interface and geospatial information gathering, particularly to improve traditional survey methods and tools. Such
advances would facilitate new opportunities that big data and artificial intelligence approaches are bringing to public health.

The second opportunity is innovations such as machine learning and use of satellite imagery, which are already improving estimates of how many children live in different geographic areas, and supporting better visualization of data, which health workers can act upon. Polio eradication programming, for example, has shown how the use of granular data through geographic information systems mapping, coupled with surveillance data, can identify children who are hard to reach by the health-care system. Predictive models informed by data across sectors, such as health, protection, transport and telecommunications, could identify pockets of low coverage even where surveys have not been conducted. However, as quality data are only relevant if used at local levels for planning and budgeting, capacity must be built at national and sub-national levels to better use these data to adapt and expand service delivery strategies. These transformative investments will be critical for both immunization programming and UHC, even as discussions of how best to measure UHC continue.

**Vertical programmes**

The vertical nature of immunization programmes is a challenge. This organizational structure has enabled robust vaccination gains, but has been implemented without enough attention to how immunization assets can be used more broadly. Identifying the right mix of interventions to integrate with immunization services, informed by cost–benefit and cost–effectiveness analyses, is critical to ensure that integration does not overburden health workers or negatively impact coverage and quality. At the global level, additional research is needed to further develop an evidence base around new service delivery models and innovations to simplify vaccine delivery for all children, particularly those living in difficult-to-reach areas. Experts point to the success of strategies that use meticulous microplanning to identify the unreached, engage communities and improve reach through public-private partnerships. Indeed, one of the core axes of UHC is that communities own and drive the design and implementation of services.

Immunization programmes are well placed to support this, building on the strengths of the WHO’s Reaching Every District approach, which includes community engagement as a cornerstone. In addition, needle-free vaccine administration and thermo-stable vaccines are promising innovations to enable the health system to simplify and expand delivery to marginalized children. Adoption of novel strategies, such as optimizing delivery strategies and doses per container, reduced dosages and adapted target age ranges within campaigns may reduce disease burden in displaced and intermittently accessible populations. Furthermore, the rollout of human papillomavirus (HPV) vaccination in many countries presents new opportunities for reaching adolescents with other services, such as screening programmes and treatment or other vaccines, and provision of information and life skills. This increased reach can facilitate access for adolescents and can reduce costs and burdens related to delivering interventions separately.

**Underserved children**

Developing better approaches for children who may be accessible geographically, but who remain underserved is also a challenge. In some cases, children are underserved by commission, that is, their families deliberately avoid vaccination, while others by omission due to a variety of service delivery and social factors leading to intentional or unintentional exclusion. Incorporating the latest thinking around effective behaviour change approaches into programme and communication strategies may provide new opportunities to reach these
children. Reaching these children will also require health systems strengthening, improved quality of care, intersectoral and intragovernmental collaboration, and new emphasis on social justice, non-discrimination, civil society engagement and accountability, among other efforts.6

**Gender**
A final challenge is to ensure that gender is recognized as a critical, cross-cutting, and influencing factor, and ensuring that gender analyses of immunization are not restricted to comparing coverage outcomes between boys and girls. Studies show that maternal education and maternal age are key determinants of whether a child is immunized. As well, the agency and empowerment of women, and women’s access to quality services can affect the likelihood of childhood immunization.7 We must identify and test ways in which immunization programmes can mitigate gender-related barriers without undermining, but rather ideally contributing to, women’s empowerment in different settings. HPV vaccination raises additional gender and equity considerations, particularly as services for adolescents can be quite limited in both availability and quality in many settings.8

**Addressing inequities**
The strategic importance, effectiveness and cost–effectiveness of focusing on the poorest and hardest-to-reach children has been emphasized before.9,10 Equity in immunization may also contribute to building solidarity within countries for UHC, as everyone, across all socioeconomic levels and from a variety of backgrounds, will benefit from increased herd immunity. However, building solidarity for social and health programmes can be a key challenge in settings where the more advantaged people question why they should pay taxes to ensure services for the less advantaged.11 Fortunately, immunization programmes are an example of a public good which, when strengthened and expanded, will benefit those same tax-payers, while also benefitting those who have been previously denied this essential intervention. The financial return on investment in vaccines has been found to be up to 44 times their cost.12

We must address inequities in immunization not just for the obvious health, financial and political benefits that come from herd immunity and absence of disease, but because without greater achievement in immunization among children living in urban poor, remote rural or conflict settings, it will be impossible to collectively reach our shared goals for primary health care and UHC.

We have highlighted some of the innovations in the field, as well as the existing assets that immunization programmes can bring. However, using the full potential of immunization programmes to advance UHC will require strategic changes, such as increased efforts to integrate with other services and reaching children never reached by the health system.

[References at title link above]

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**G-FINDER 2019 – NEGLLECTED DISEASE RESEARCH AND DEVELOPMENT: UNEVEN PROGRESS**
POLICY CURES RESEARCH
January 2020 :: 143 pages
The survey
Each year since 2007, the G-FINDER project has provided policy-makers, donors, researchers and industry with a comprehensive analysis of global investment into research and development (R&D) of new products to prevent, diagnose, control or cure neglected diseases in developing countries. It provides an up-to-date analysis of how R&D investments are being allocated across diseases and product types, funding trends over time, and where the potential gaps lie.

This is the twelfth annual -FINDER report, providing new data on investments made in financial year 2018. In all, 262 organisations completed the survey for FY2018, which covered 36 neglected diseases and all relevant product types – drugs, vaccines, biologics, diagnostics, microbicides and vector control products (chemical and biological control agents, and reservoir targeted vaccines) – as well as basic research.

The 2018 survey added three new neglected diseases: hepatitis B, mycetoma and snakebite envenoming. It also removed the genotype restriction for hepatitis C, although restrictions to ensure that R&D is targeted at LMICs remain, and added vaccine R&D for leprosy. The therapeutic vaccine product category was expanded and relabelled as ‘biologics’, this category captures funding that was previously variously included under therapeutic vaccines, drugs and preventive vaccines.

Findings
Global funding for basic research and product development for neglected diseases reached a new record high of $4,055m in 2018, easily surpassing the previous year’s record. The headline increase of $374m (up 10%) was partly due to improved reporting. After adjusting for changes in survey scope, participation and reporting, global funding for neglected disease R&D increased by $290m in 2018 (up 7.9%); this was both the largest real annual funding increase on record, and the first time ever that funding has grown for three consecutive years....

Discussion [p. 120, section titles]
:: Global funding for neglected disease R&D reached a new record high in 2018, on the back of three consecutive years of growth
:: Investment by multinational pharmaceutical companies reached its highest ever level
:: The growth in industry investment contributed to a dramatic increase in funding for clinical development & post-registration studies
:: Progress remained encouraging outside of the traditional top funders of neglected disease R&D
:: Not everything is trending upwards: funding for NTDs has barely shifted over the last decade

The impact of sustained investment in neglected disease R&D is clear in the growing number of newly-approved products (the last couple of years alone have seen critically important new drugs for sleeping sickness, onchocerciasis, malaria and TB, and LMIC-targeted vaccines for typhoid, rotavirus, and pneumococcal pneumonia) and in a healthy and growing R&D pipeline.

This impact has been made possible by – and indeed has required – the many positive trends highlighted in this year’s G-FINDER report, including the record-high level of overall funding for
neglected disease R&D, increased funding for clinical development & post-registration studies, and increased investment by industry. But the corollary of this success is that more investment will be needed: the R&D pipeline is larger than ever before, with more candidates in late-stage development, and there is still a significant gap between current levels of investment and the level that will be required to translate these candidates into new tools.

We also note that progress is not occurring across the board: not all areas are benefitting from increased funding and record highs, with a decade of stagnant funding for NTDs being one key example. And while funding from some countries is laudable, in others it has been going backwards. Addressing this uneven progress is the challenge ahead.

[See also IFPMA statement below in Announcements]

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EMERGENCIES

Coronavirus [2019-nCoV]

National Health Commission of the People's Republic of China

**Novel coronavirus cases rise to 11,791**

Updated: 2020-02-01  chinadaily.com.cn

The total number of confirmed cases of the novel coronavirus climbed to 11,791 as of midnight of Jan 31, including 259 deaths and 243 who had recovered and been discharged from the hospital, according to the National Health Commission.

A total of 17,988 suspected cases were reported as of Friday. At present, 136,987 close contacts of confirmed cases had been tracked, and among them, 118,478 are under medical observation while 6,509 such people were freed from observation on Friday.

Hubei province, the center of the outbreak, reported 1,347 new confirmed cases and 45 new deaths on Jan 31, bringing the two numbers up to 7,153 and 249 respectively, according to the province's health commission.

A total of 6,738 confirmed cases, including 956 with severe symptoms and 338 in critical condition in the province, are receiving treatment in isolation at designated medical institutions.

The provincial commission said that 41,075 close contacts of the infected are being tracked and 36,838 of them are under medical observation.

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**Situation report - 11 Novel Coronavirus (2019-nCoV)**

WHO  31 January 2020

[Excerpt]

**SITUATION IN NUMBERS**

Globally :: 9826 confirmed

China :: **9720 confirmed**

:: 15238 suspected
:: 1527 severe
:: 213 deaths
Outside of China
:: 106 confirmed
:: 19 countries

**WHO RISK ASSESSMENT**
China - Very High
Regional Level - High
Global Level - High

**HIGHLIGHTS**
:: The Emergency Committee on the novel coronavirus (2019-nCoV) under the International Health Regulations (IHR 2005) was reconvened on 30 January. WHO declared the outbreak to be a public health emergency of international concern [see Statement below]...

:: Today, the first two confirmed cases of 2019-nCoV acute respiratory disease were reported in Italy; both had travel history to Wuhan City.

:: WHO’s Risk Communication Team has launched a new information platform called WHO Information Network for Epidemics (EPI-WIN). EPI-WIN will use a series of amplifiers to share tailored information for specific target groups. EPI-WIN began this week to establish connections to health care and travel and tourism sectors and will work with food and agriculture and business/employer sectors next week.

**TECHNICAL FOCUS:**
Research and innovation
As part of WHO’s response to the outbreak, the R&D Blueprint has been activated to accelerate evaluation of the diagnostics, vaccines and therapeutics for this novel coronavirus
The global imperative for research is to maintain a high-level discussion platform which enables consensus on strategic directions, nurtures scientific collaborations and, supports optimal and rapid research to address crucial gaps, without duplication of efforts.

Understanding the disease, its reservoirs, its transmission, its clinical severity and developing effective counter measures including therapeutics and vaccines is critical for the control of the outbreak, the reduction of related mortality and minimization of economic impact.

Recent reports regarding expert research consultations can be found here

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**Statement on the second meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV)**
30 January 2020  Statement
[Excerpts]

**Proceedings of the meeting**
...The Chair then reviewed the agenda for the meeting and introduced the presenters.
Representatives of the Ministry of Health of the People’s Republic of China reported on the current situation and the public health measures being taken. There are now 7711 confirmed and 12167 suspected cases throughout the country. Of the confirmed cases, 1370 are severe and 170 people have died. 124 people have recovered and been discharged from hospital.

The WHO Secretariat provided an overview of the situation in other countries. **There are now 83 cases in 18 countries. Of these, only 7 had no history of travel in China. There has been human-to-human transmission in 3 countries outside China. One of these cases is severe and there have been no deaths...**

**Conclusions and advice**

...The Committee also acknowledged that there are still many unknowns, cases have now been reported in five WHO regions in one month, and human-to-human transmission has occurred outside Wuhan and outside China.

The Committee believes that it is still possible to interrupt virus spread, provided that countries put in place strong measures to detect disease early, isolate and treat cases, trace contacts, and promote social distancing measures commensurate with the risk. It is important to note that as the situation continues to evolve, so will the strategic goals and measures to prevent and reduce spread of the infection. **The Committee agreed that the outbreak now meets the criteria for a Public Health Emergency of International Concern and proposed the following advice to be issued as Temporary Recommendations.**

The Committee emphasized that the declaration of a PHEIC should be seen in the spirit of support and appreciation for China, its people, and the actions China has taken on the frontlines of this outbreak, with transparency, and, it is to be hoped, with success. In line with the need for global solidarity, the Committee felt that a global coordinated effort is needed to enhance preparedness in other regions of the world that may need additional support for that.

**Advice to WHO**

The Committee welcomed a forthcoming WHO multidisciplinary technical mission to China, including national and local experts. The mission should review and support efforts to investigate the animal source of the outbreak, the clinical spectrum of the disease and its severity, the extent of human-to-human transmission in the community and in healthcare facilities, and efforts to control the outbreak. This mission will provide information to the international community to aid in understanding the situation and its impact and enable sharing of experience and successful measures...

Measures to ensure rapid development and access to potential vaccines, diagnostics, antiviral medicines and other therapeutics for low- and middle-income countries should be developed...

WHO should continue to explore the advisability of creating an intermediate level of alert between the binary possibilities of PHEIC or no PHEIC, in a way that does not require reopening negotiations on the text of the IHR (2005).

WHO should timely review the situation with transparency and update its evidence-based recommendations.
The Committee does not recommend any travel or trade restriction based on the current information available.

The Director-General declared that the outbreak of 2019-nCoV constitutes a PHEIC and accepted the Committee’s advice and issued this advice as Temporary Recommendations under the IHR.

[See additional announcement text here for]:
...To the People’s Republic of China
...To all countries

...To the global community
As this is a new coronavirus, and it has been previously shown that similar coronaviruses required substantial efforts to enable regular information sharing and research, the global community should continue to demonstrate solidarity and cooperation, in compliance with Article 44 of the IHR (2005), in supporting each other on the identification of the source of this new virus, its full potential for human-to-human transmission, preparedness for potential importation of cases, and research for developing necessary treatment.

Provide support to low- and middle-income countries to enable their response to this event, as well as to facilitate access to diagnostics, potential vaccines and therapeutics.

Under Article 43 of the IHR, States Parties implementing additional health measures that significantly interfere with international traffic (refusal of entry or departure of international travellers, baggage, cargo, containers, conveyances, goods, and the like, or their delay, for more than 24 hours) are obliged to send to WHO the public health rationale and justification within 48 hours of their implementation. WHO will review the justification and may request countries to reconsider their measures. WHO is required to share with other States Parties the information about measures and the justification received.

The Emergency Committee will be reconvened within three months or earlier, at the discretion of the Director-General.

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CDC [U.S.]

CDC Confirms Seventh Case of 2019 Novel Coronavirus
Friday, January 31, 2020

Transcript for CDC Media Telebriefing: Update on 2019 Novel Coronavirus (2019-nCoV)
Friday, January 31, 2020

CDC Issues Federal Quarantine Order to Repatriated U.S. Citizens at March Air Reserve Base
Friday, January 31, 2020
The Centers for Disease Control and Prevention (CDC), under statutory authority of the Health and Human Services (HHS) Secretary, has issued federal quarantine orders to all 195 United States citizens who repatriated to the U.S. on January 29, 2020. The quarantine will last 14 days from when the plane left Wuhan, China. This action is a precautionary and preventive step to maximize the containment of the virus in the interest of the health of the American public.

This legal order will protect the health of the repatriated citizens, their families, and their communities. These individuals will continue to be housed at the March Air Reserve Base in Riverside, California. Medical staff will continue to monitor the health of each traveler, including temperature checks and observation for respiratory symptoms. If an individual presents symptoms, medical care will be readily available. Even if a screening test comes back negative from CDC’s laboratory results, it does not conclusively mean an individual is at no risk of developing the disease over the likely 14-day incubation period...

[See also Africa CDC announcements below]

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**WHO - R&D Blueprint**

**Novel Coronavirus R&D**

*Latest reports*

**Vaccines**

- WHO R & D Blueprint - Novel Coronavirus  _pdf, 375kb_
- Outline of designs for experimental vaccines and therapeutics - draft 17 January 2020
- WHO R & D Blueprint - Novel Coronavirus
- WHO Consultation on Cross-Reactivity with other coronaviruses - 24 January 2020
- WHO R & D Blueprint - Novel Coronavirus  _pdf, 526kb_
- WHO Consultation on Cross-Reactivity with other coronaviruses - 27 January 2020

**Prospects for evaluating cross-reactivity of nCoV with SARS-CoV**

**Therapeutics**

Informal consultation on prioritization of candidate therapeutic agents for use in novel coronavirus 2019 infection

- Overview of the types/classes of candidate therapeutics  _pdf, 223kb_
- Informal consultation on trial design for treatment evaluation  _pdf, 506kb_

**Outline of designs for experimental vaccines and therapeutics - 21 January 2020**

**Outline of designs for experimental vaccines and therapeutics - 27 January 2020**

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**FDA Announces Key Actions to Advance Development of Novel Coronavirus Medical Countermeasures**

January 27, 2020

(Silver Spring, MD) – Today, the U.S. Food and Drug Administration (FDA) announced critical actions to advance development of novel coronavirus medical countermeasures. As with any emerging public health threat, the FDA will collaborate with interagency partners, product developers, international partners and global regulators to expedite the development
and availability of medical products needed to diagnose, treat, mitigate and prevent such outbreaks.

“We have a vital mission to protect and promote public health and the FDA is closely collaborating with our domestic and international public health partners to mitigate the impact of the novel coronavirus that emerged in Wuhan, China,” said FDA Commissioner Stephen M. Hahn, M.D. “We are actively leveraging the vast breadth of the FDA’s expertise and have begun employing the full range of our public health authorities to facilitate the development and availability of investigational medical products to help address this urgent public health situation.”

As part of FDA’s ongoing commitment to prepare and respond to infectious disease outbreaks, the agency is sharing updates on processes in place to help developers understand the pathways, including Emergency Use Authorization (EUA), that may be available to more rapidly advance and make medical countermeasures available for this virus, including diagnostic tests. The FDA is also issuing key information for the public to help support the timely development of medical products to respond to the current outbreak. In order to support efficient medical product development for novel coronavirus medical countermeasures, today the FDA is launching a landing page that provides key information for the public, including product developers, on the FDA’s efforts in response to this outbreak.

“We are committed to keeping the American people informed as we prepare and respond to emerging public health threats, including the novel coronavirus,” said FDA Deputy Commissioner of Policy, Legislation and International Affairs Anna Abram. “The agency is committed to ensuring safe and effective medical countermeasures are available as quickly as possible to protect public health.”

Being able to quickly and accurately diagnose patients infected with the novel coronavirus is an essential step in helping patients identify the need for care and mitigate the spread of the virus to additional individuals. Currently, there are no commercially available products that are authorized to detect novel coronavirus; however, the FDA is actively working to facilitate the development and availability of diagnostics that can detect this virus. The agency is working with public health partners to advance and share the reference materials necessary to facilitate diagnostic development.

The FDA is also requesting that diagnostic test sponsors interested in potential EUA for tests to detect 2019-nCoV contact CDRH-EUA-Templates@fda.hhs.gov for further information and templates.

Sponsors wishing to develop therapeutics for 2019-nCoV are encouraged to submit information and questions via the FDA’s Pre-IND Consultation program...

CureVac and CEPI extend their Cooperation to Develop a Vaccine against Coronavirus nCoV-2019
31 Jan 2020
CEPI funds CureVac’s development of a vaccine against coronavirus nCoV-2019. The aim of the partnering agreement is to rapidly advance a vaccine candidate into clinical testing.

Wellcome pledges £10 million to tackle novel coronavirus epidemic

Wellcome is making a pledge of up to £10 million to accelerate research and support global efforts to tackle the ongoing novel coronavirus epidemic.

UNICEF ships 6 metric tons of supplies to support China’s response to Novel Coronavirus outbreak

UNICEF is in close contact with the Chinese authorities, including the Ministry of Commerce and the National Health Commission, the World Health Organization (WHO), and other UN agencies to monitor developments and needs as the situation further unfolds. UNICEF is also working with WHO and partners for a coordinated multi-sectoral response in China and other affected countries...

Johnson & Johnson Launches Multi-Pronged Response to Coronavirus Global Public Health Threat

NEW BRUNSWICK, N.J., Jan. 29, 2020 /PRNewswire/ -- Johnson & Johnson (NYSE: JNJ) today announced that it is mobilizing resources at its Janssen Pharmaceutical Companies to launch a multi-pronged response to the novel coronavirus (also known as 2019-nCoV or Wuhan coronavirus) outbreak. As part of this work, the Company has initiated efforts to develop a vaccine candidate against 2019-nCoV and broadly collaborate with others to screen a library of antiviral therapies. Identifying compounds with antiviral activity against 2019-nCoV may contribute to providing immediate relief to the current outbreak.
"J&J has a long-standing commitment to fight established and emerging epidemics and is supporting global efforts where we can make the greatest impact. We are collaborating with regulators, healthcare organizations, institutions and communities worldwide to help ensure our research platforms, existing science and outbreak expertise can be maximized to stem this public health threat," said Paul Stoffels, M.D., Vice Chairman of the Executive Committee and Chief Scientific Officer, Johnson & Johnson. "This latest outbreak of a novel pathogen once again reinforces the importance of investing in preparedness, surveillance and response to ensure the world remains ahead of potential pandemic threats."

The vaccine program will leverage Janssen's AdVac® and PER.C6® technologies that provide the ability to rapidly upscale production of the optimal vaccine candidate. These are the same technologies that were used in the development and manufacturing of Janssen's investigational Ebola vaccine, which is currently deployed in the Democratic Republic of the Congo and Rwanda. They were also used to construct the Company's Zika, RSV and HIV vaccine candidates.

Johnson & Johnson's multi-pronged approach also includes a review of known pathways in coronavirus pathophysiology to determine whether previously tested medicines can be used to help patients survive a 2019-nCoV infection and reduce the severity of disease in non-lethal cases. In addition, Janssen has donated 300 boxes of its HIV medication PREZCOBIX® (darunavir/cobicistat) to the Shanghai Public Health Clinical Center and Zhongnan Hospital of Wuhan University for use in research to support efforts in finding a solution against the 2019-nCoV. Furthermore, another 50 boxes have been provided to the Chinese Center for Disease Control and Prevention for laboratory-based investigations (drug-screening for antiviral properties against 2019-nCoV). All shipments have been delivered and, if further donations are required, the Company is open to cooperating with all healthcare institutions and agencies to support efforts in finding a solution against 2019-nCoV.

The requests from the Shanghai Public Health Clinical Center and Zhongnan Hospital of Wuhan University follow a recommendation from the Shanghai Institute of Materia Medica, Chinese Academy of Sciences for investigation of 30 potentially effective compounds, including darunavir – the protease inhibitor component of PREZCOBIX – against 2019-nCoV. Based on anecdotal findings, a protease inhibitor has previously shown a potential favorable clinical response against severe acute respiratory syndrome (SARS) associated coronavirus.1 ...

The Lancet
Feb 01, 2020 Volume 395Number 10221p311-388, e16-e18
https://www.thelancet.com/journals/lancet/issue/current

Editorial
Emerging understandings of 2019-nCoV
The Lancet
[See Journal Watch before for full text]
**Emergencies**

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

No new Situation Update identified

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**POLIO**
*Public Health Emergency of International Concern (PHEIC)*
http://polioeradication.org/polio-today/polio-now/this-week/

**Polio this week as of 29 January 2020**
:: Want to know more about the new cVDPV2 strategy and nOPV2? have a look at the newly released fact-sheet which provides a summary of the current situation and the new tool under development.
:: With the evolving public health emergency associated with the increase in new emergencies of circulating vaccine-derived poliovirus type 2, a draft decision has been made available for consideration by the Executive board. Read more

**Summary of new viruses this week (AFP cases and ES positives):**
:: Afghanistan: three WPV1 positive environmental samples
:: Pakistan: six WPV1 cases, ten WPV1 positive environmental samples, four cVDPV2 cases and one cVDPV2 positive environmental sample
:: Nigeria: two cVDPV2 positive environmental samples
:: Democratic Republic of the Congo (DR Congo): two cVDPV2 cases
:: Somalia: three cVDPV2 positive environmental samples
:: Angola: 15 cVDPV2 cases
:: Ethiopia: one cVDPV2 positive environmental sample
:: Philippines: one cVDPV1 case

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**Editor’s Note:**
WHO has posted a refreshed emergencies page which presents an updated listing of Grade 3,2,1 emergencies as below.

**WHO Grade 3 Emergencies**  [to 1 Feb 2020]

**Democratic Republic of the Congo**
:: Winning community trust in Ebola control 22 January 2020

Mozambique floods  - No new digest announcements identified
Nigeria  - No new digest announcements identified
Somalia  - No new digest announcements identified
South Sudan - No new digest announcements identified
Syrian Arab Republic - No new digest announcements identified
Yemen - No new digest announcements identified

WHO Grade 2 Emergencies [to 1 Feb 2020]
Afghanistan - No new digest announcements identified
Angola - No new digest announcements identified
Burkina Faso [in French] - No new digest announcements identified
Burundi - No new digest announcements identified
Cameroon - No new digest announcements identified
Central African Republic - No new digest announcements identified
Ethiopia - No new digest announcements identified
HIV in Pakistan - No new digest announcements identified
Iran floods 2019 - No new digest announcements identified
Iraq - No new digest announcements identified
Libya - No new digest announcements identified
Malawi floods - No new digest announcements identified
Measles in Europe - No new digest announcements identified
MERS-CoV - No new digest announcements identified
Myanmar - No new digest announcements identified
Niger - No new digest announcements identified
occupied Palestinian territory - No new digest announcements identified
Sudan - No new digest announcements identified
Ukraine - No new digest announcements identified
Zimbabwe - No new digest announcements identified

WHO Grade 1 Emergencies [to 1 Feb 2020]
Chad - No new digest announcements identified
Djibouti - No new digest announcements identified
Kenya - No new digest announcements identified
Mali - No new digest announcements identified
Namibia - viral hepatitis - No new digest announcements identified
Tanzania - No new digest announcements identified

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

Syrian Arab Republic
:: Syrian Arab Republic: Recent Developments in Northwestern Syria Situation Report No. 7 - As of 29 January 2020
Yemen - No new digest announcements identified

::::

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

CYCLONE IDAIE and Kenneth
:: 27 Jan 2020  East Africa's locust crisis in numbers
:: 28 January 2020  Southern Africa Humanitarian Snapshot (January 2020)

EBOLA OUTBREAK IN THE DRC - No new digest announcements identified

::::

WHO & Regional Offices [to 1 Feb 2020]

Statement on the second meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV)
30 January 2020  Statement
[See 2019-n-CoV above for detail]

:::

Weekly Epidemiological Record, 31 January 2020, vol. 95, 05 (pp. 37–48)
:: WHO Strategic and Technical Advisory Group for Infectious Hazards (STAG-IH) report of the 4th face-to-face meeting, 3–4 December 2019, Geneva, Switzerland
:: WHO African Region Immunization Technical Advisory Group: Call for nominations
:: Monthly report on dracunculiasis cases, January-November 2019

:::

WHO Regional Offices
Selected Press Releases, Announcements

WHO African Region AFRO
:: WHO ramps up preparedness for novel coronavirus in the African region
31 January 2020
   The World Health Organization (WHO) is scaling up novel coronavirus preparedness efforts in the African region and supporting countries to implement recommendations outlined by the International Health Regulations Emergency Committee, which met in Geneva, Switzerland on 30 January. On the advice of the Emergency Committee, the WHO Director-General, declared the novel coronavirus outbreak a public health emergency of international concern (PHEIC).

WHO Region of the Americas PAHO
:: WHO declares Public Health Emergency on novel coronavirus (01/30/2020)
:: Measles outbreak in Venezuela is under control (01/30/2020)
WHO South-East Asia Region SEARO
:: 27 January 2020 News release
Readiness is the key to detect, combat spread of the new coronavirus
The World Health Organization South-East Asia has urged countries in the Region to remain vigilant and strengthen readiness to rapidly detect any case of importation of the new cor ...
step to maximize the containment of the virus in the interest of the health of the American public.

This legal order will protect the health of the repatriated citizens, their families, and their communities. These individuals will continue to be housed at the March Air Reserve Base in Riverside, California. Medical staff will continue to monitor the health of each traveler, including temperature checks and observation for respiratory symptoms. If an individual presents symptoms, medical care will be readily available. Even if a screening test comes back negative from CDC's laboratory results, it does not conclusively mean an individual is at no risk of developing the disease over the likely 14-day incubation period...

**MMWR News Synopsis  Friday, January 31, 2020**

**HIV Testing Outcomes Among Blacks or African Americans — 50 Local U.S. Jurisdictions Accounting for the Majority of New HIV Diagnoses and Seven States with Disproportionate Occurrences of HIV in Rural Areas, 2017**

Locally-tailored, evidence-based HIV prevention programs, especially those for African Americans in Ending the HIV Epidemic (EHE) jurisdictions, are critical for reducing HIV-related disparities and achieving the goals of EHE. HIV prevention programs focused on implementing locally-tailored, evidence-based testing, linkage, and treatment strategies for African Americans would help to achieve the goal to end the HIV epidemic in the United States. African Americans represent 13% of the U.S. population, yet in 2017, accounted for 43% of new HIV diagnoses. Identifying people who are unaware of their HIV status and linking them to care are important steps for achieving viral suppression and reducing the risk of transmitting HIV. CDC analyzed 2017 HIV testing, partner services and linkage to care data from Ending the HIV Epidemic (EHE) jurisdictions and found that these jurisdictions accounted for more than 6 in 10 of all CDC-funded tests conducted and new HIV diagnoses identified. Of these, African Americans accounted for nearly half of those tested and newly diagnosed. Additionally, African Americans also accounted for more than half of previously diagnosed persons not known to be in care. Though 79% of African Americans newly diagnosed with HIV in these areas were linked to HIV medical care within 90 days, it is below the goal of 85% linked within 90 days of diagnosis. This analysis shows that prevention programs in EHE jurisdictions are critical to eliminating HIV-related disparities and achieving the goals of EHE.

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**Africa CDC**  [to 1 Feb 2020]

http://www.africacdc.org/

News

**Outbreak: Press Briefing on the Novel Coronavirus (2019-nCoV) Outbreak**

“This thing is big. I’ve not seen a rapidly evolving outbreak like the one we are dealing with,” said Dr. John Nkengasong, Director of Africa CDC...

Africa CDC Response:
[2] Africa CDC is obtaining test kits for and working with laboratories in Member States to identify facilities that are able to receive and test specimens for novel coronavirus infection.
[3] Africa CDC is holding weekly updates with national public health institutes in Member States.
Africa CDC will be working with Member States to support infection prevention and control in healthcare facilities and with the airline sector to support screening of travelers.

Africa CDC will continue to provide updated and relevant information to Member States as the outbreak evolves.

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**China CDC**
http://www.chinacdc.cn/en/
*No new digest content identified.*

**National Health Commission of the People's Republic of China**
http://en.nhc.gov.cn/
*News*
**Novel coronavirus cases rise to 11,791**
Updated: 2020-02-01 chinadaily.com.cn
*[See Milestones above for coronavirus updates]*

**WHO working closely with China, countries to curb virus**
Updated: 2020-01-27 chinadaily.com.cn
The World Health Organization is working closely with China and various countries to contain the spread of the novel coronavirus that caused an outbreak in central Chinese city Wuhan.

**Minister: China 'confident' in ability to end outbreak**
Updated: 2020-01-26 chinadaily.com.cn
China is confident in its ability to end the novel coronavirus outbreak at a lower cost and a faster speed, health minister Ma Xiaowei said on Jan 26, after being asked whether it would be more serious than the outbreak of SARS (severe acute respiratory syndrome) in 2003.

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**Announcements**

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

**BMGF - Gates Foundation** [to 1 Feb 2020]
http://www.gatesfoundation.org/Media-Center/Press-Releases
JANUARY 27, 2020
**The Bill & Melinda Gates Medical Research Institute obtains license for continued development of M72/AS01E tuberculosis vaccine candidate from GSK**
SEATTLE, January, 27, 2020 – Today, the Bill & Melinda Gates Medical Research Institute (Gates MRI) and the Bill & Melinda Gates Foundation (Gates Foundation) announced that GSK has licensed its M72/AS01E(3) tuberculosis disease (TB) vaccine candidate to the Gates MRI,
paving the way for continued development and potential use of the vaccine candidate in countries with high TB burdens.

**Bill & Melinda Gates Medical Research Institute**  [to 1 Feb 2020]
https://www.gatesmri.org/

*The Bill & Melinda Gates Medical Research Institute is a non-profit biotech organization. Our mission is to develop products to fight malaria, tuberculosis, and diarrheal diseases—three major causes of mortality, poverty, and inequality in developing countries. The world has unprecedented scientific tools at its disposal; now is the time to use them to save the lives of the world’s poorest people*

*News Release*

**Gates Medical Research Institute obtains license for continued development of M72/AS01E tuberculosis vaccine candidate from GSK**

*The Bill & Melinda Gates Medical Research Institute obtains license for continued development of M72/AS01E tuberculosis vaccine candidate from GSK*

:: The M72/AS01E tuberculosis vaccine candidate demonstrated in a phase IIb trial the potential to reduce active pulmonary TB by half in adults with latent TB infection
:: Developing a new vaccine against TB is a global health priority to accelerate progress toward ending the TB epidemic and one of the United Nations Sustainable Development Goals.
:: The licensing agreement is a significant step forward to continue the development of the vaccine candidate for countries with high TB burdens.

27 January 2020 – Today, the Bill & Melinda Gates Medical Research Institute (Gates MRI) and the Bill & Melinda Gates Foundation (Gates Foundation) announced that GSK has licensed its M72/AS01E tuberculosis disease (TB) vaccine candidate to the Gates MRI, paving the way for continued development and potential use of the vaccine candidate in countries with high TB burdens. “Clinical trial results to date suggest that the M72/AS01E vaccine candidate could play a significant role in protecting vulnerable populations around the world from developing active TB. If that proves true, it could transform the fight against humanity’s deadliest infectious disease,” said Penny M. Heaton, M.D., CEO of Gates MRI. TB is the world’s deadliest infectious disease, with 10 million new cases and 1.5 million deaths in 2018 alone. The burden of disease is concentrated with over 97% of reported TB cases occurring in low- and middle-income countries...

**CARB-X**  [to 1 Feb 2020]
https://carb-x.org/

*CARB-X is a non-profit public-private partnership dedicated to accelerating antibacterial research to tackle the global rising threat of drug-resistant bacteria.*

*No new digest content identified.*

**CEPI – Coalition for Epidemic Preparedness Innovations**  [to 1 Feb 2020]
http://cepi.net/

*Latest news*

**CureVac and CEPI extend their Cooperation to Develop a Vaccine against Coronavirus nCoV-2019**
CEPI funds CureVac’s development of a vaccine against coronavirus nCoV-2019. The aim of the partnering agreement is to rapidly advance a vaccine candidate into clinical testing.
31 Jan 2020

**Clinton Health Access Initiative, Inc. (CHAI)** [to 1 Feb 2020]
https://clintonhealthaccess.org/
*News & Press Releases*
No new digest content identified.

**EDCTP** [to 1 Feb 2020]
http://www.edctp.org/
The European & Developing Countries Clinical Trials Partnership (EDCTP) aims to accelerate the development of new or improved drugs, vaccines, microbicides and diagnostics against HIV/AIDS, tuberculosis and malaria as well as other poverty-related and neglected infectious diseases in sub-Saharan Africa, with a focus on phase II and III clinical trials
*Latest news*
30 January 2020
**World NTD Day: the fight to end Neglected Tropical Diseases**
EDCTP is a proud partner and supporter of this first World NTD Day, a call to action to end the burden of the neglected tropical diseases (NTDs). Pivotal in the renewed global focus on NTDs was the London Declaration of...

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

**European Medicines Agency** [to 1 Feb 2020]
*News & Press Releases*
**News: Meeting highlights from the Committee for Medicinal Products for Human Use (CHMP) 27-30 January 2020**
CHMP, Last updated: 31/01/2020
...The Committee recommended granting a marketing authorisation for Vaxchora (Cholera vaccine (recombinant, live, oral)) for prophylaxis against cholera, a very serious disease caused by Vibrio cholerae, in adults and children....

**European Vaccine Initiative** [to 1 Feb 2020]
http://www.euvaccine.eu/news-events
No new digest content identified.

**FDA** [to 1 Feb 2020]
https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/default.htm
Press Announcements

January 29, 2020 - FDA launches mobile-friendly database with information on life-saving HIV drugs as part of ongoing mission to empower the public through increased access to information and data

January 28, 2020 - FDA Continues Strong Support of Innovation in Development of Gene Therapy Products

January 27, 2020 - FDA Announces Key Actions to Advance Development of Novel Coronavirus Medical Countermeasures

Fondation Mérieux [to 1 Feb 2020]
http://www.fondation-merieux.org/
News, Events
Announcement
The Mérieux Foundation’s Emerging Pathogens Laboratory obtains accreditation according to European standard NF EN ISO/IEC 17025
January 23, 2020, Lyon (France)
This accreditation standard lays down the general requirements for competence, impartiality and consistency of laboratory activities. It promotes efficient and ...

Project
The Haiti Ministry of Public Health and Population of Haiti launches its first National Health Research Policy
January 22, 2020, Port-au-Prince (Haiti)
Aware of the importance of research as an essential tool for improving people’s health, the Ministry of Public Health and ...

Gavi [to 1 Feb 2020]
https://www.gavi.org/
News
Indonesia to protect four million children a year against pneumonia
Indonesia set to introduce pneumococcal conjugate vaccines (PCV) into routine immunisation programme
Barcelona, 29 January 2020

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

Global Fund [to 1 Feb 2020]
News & Stories
Updates

31 January 2020

Funding Model

Funding Request Tracker for the 2020-2022 Funding Cycle
28 January 2020

Hilleman Laboratories  [to 1 Feb 2020]
http://www.hillemanlabs.org/

PRESS RELEASE
Hilleman Board announces leadership changes
27th January 2020

The Board of Directors of Hilleman Laboratories today announced that Dr Davinder Gill will leave his current role as CEO of Hilleman Laboratories on 31 January 2020, after more than eight years at the company. Dr Gill is relocating to the United States where his family is based.

He will be replaced by Dr Raman Rao, who will assume the role as CEO on 1 February. Dr Rao has more than 22 years’ experience in research and development, manufacturing and commercialisation of vaccines for infectious diseases, and is joining from Takeda Vaccines where he was Vice President of Global Product Operations.

Dr Gill joined Hilleman in 2012 after two decades in the global pharmaceutical and biotechnology sector....

Human Vaccines Project  [to 1 Feb 2020]
http://www.humanvaccinesproject.org/media/press-releases/

Press Releases
No new digest content identified.

IAVI  [to 1 Feb 2020]
https://www.iavi.org/newsroom
January 29, 2020
IAVI Mourns the Passing of Maharaj Kishan Bhan, Respected Scientist, Leader, and Humanitarian

NEW YORK – January 29, 2020 – IAVI was deeply saddened to learn of the death of eminent scientist Maharaj Kishan Bhan, M.D., a longtime friend of IAVI. Dr. Bhan died on January 26, 2020, in New Delhi, India, at age 72...

... IAVI president and CEO Mark Feinberg, M.D., Ph.D., said, “Dr. Bhan was a friend, mentor, and trusted advisor who had an indelible effect on many lives. His contributions to public health reach far beyond the beneficial effects of his rotavirus vaccine. He was uniquely effective at getting things done, navigating complicated circumstances, and inspiring people to work together. Everyone who knew Dr. Bhan never doubted that he was focused solely on doing the right thing for people. The quality of his thinking and his quiet, humble demeanor made him a force for good in the world.”...
International Coalition of Medicines Regulatory Authorities [ICMRA]
Selected Statements, Press Releases, Research
No new digest content identified.

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

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

IFRC  [to 1 Feb 2020]
Selected Press Releases, Announcements
Asia Pacific, Global
Red Cross scales up preparedness for global response as novel coronavirus declared an international health emergency
Geneva/Kuala Lumpur, 31 January 2020 – As the novel coronavirus (2019-nCoV) continues spreading beyond China, the International Federation of Red Cross and Red Crescent Societies (IFRC) is scaling up preparedness efforts to support people who are most vulnerable to the outbreak in Asia Pacific and beyond.
1 February 2020

IVAC  [to 1 Feb 2020]
https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html
Updates
No new digest content identified.

IVI  [to 1 Feb 2020]
http://www.ivi.int/
Selected IVI News & Announcements
How IVI is confronting schistosomiasis in Madagascar
[Undated]
...IVI is approaching schistosomiasis control in Madagascar through treatment, education, and prevention, including mass PZQ administration and “water, sanitation & hygiene” (WASH) activities, as well as accelerating a promising vaccine candidate, SchistoShield®, soon in a Phase 1 clinical study...
**JEE Alliance** [to 1 Feb 2020]
https://www.jeealliance.org/
Selected News and Events
No new digest content identified.

**MSF/Médecins Sans Frontières** [to 1 Feb 2020]
http://www.msf.org/
*Latest [Selected Announcements]*
*Syria*
*Advancing frontlines, mass exodus and reduced access to hospitals in Idlib*
Project Update 31 Jan 2020

*Measles*
*Tackling a massive measles outbreak in DRC's Kongo Central province*
Project Update 31 Jan 2020

*DRC Ebola outbreaks*
*Crisis update - January 2020*
Crisis Update 31 Jan 2020

*Central American Migration*
*Despite kidnapping and continued risks, migrants continue journey north through Mexico*
Project Update 30 Jan 2020

*Epidemics and pandemics*
*MSF update on 2019-nCoV coronavirus outbreak*
Project Update 30 Jan 2020

*Central American Migration*
*The devastating toll of 'Remain in Mexico' asylum policy one year later*
Press Release 29 Jan 2020

**National Vaccine Program Office** - U.S. HHS [to 1 Feb 2020]
https://www.hhs.gov/vaccines/about/index.html
*NVAC 2020 Meetings*
**February 13-14, 2020 NVAC Meeting**
**June 9-10, 2020 NVAC Meeting**
**September 23-24, 2020 Meeting (Virtual)**

**NIH** [to 1 Feb 2020]
*Selected News Releases*
*First human trial of monoclonal antibody to prevent malaria opens*
January 27, 2020 — NIH trial will test NIAID-developed antibody
Selected Announcements
No new digest content identified.

Sabin Vaccine Institute [to 1 Feb 2020]
http://www.sabin.org/updates/pressreleases
Statements and Press Releases
No new digest content identified.

UNAIDS [to 1 Feb 2020]
http://www.unaids.org/en
Selected Press Releases/Reports/Statements
29 January 2020
#InSpiteOf campaign reached more than a million people [Eastern Europe/Central Asia]

27 January 2020
Key population-led organizations delivering health services in Bangkok

27 January 2020
Violence faced by key populations
Gains have been made against HIV-related stigma and discrimination, but discriminatory attitudes remain extremely high in far too many countries. Discrimination can manifest in criminal laws that give license to discrimination, aggressive law enforcement, harassment and violence, pushing key populations to the margins of society and denying them access to basic health and social services, including HIV services.

Surveys and studies across regions show that large percentages of key populations are victims of physical and sexual violence: among 36 countries with recently available data, more than half of sex workers in eight countries reported experiencing physical violence...

UNICEF [to 1 Feb 2020]
https://www.unicef.org/media/press-releases
Selected Statements, Press Releases, Reports
Statement
UNICEF Executive Director Henrietta Fore’s remarks at Fighting for Breath: The Global Forum on Childhood Pneumonia
As Delivered
29/01/2020

Press release
UNICEF ships 6 metric tons of supplies to support China’s response to Novel Coronavirus outbreak
Shipment includes masks and protective suits to help contain virus
Press release
9 million children could die in a decade unless world acts on pneumonia, leading agencies warn
Malnutrition, air pollution and lack of access to vaccines and antibiotics among the drivers of preventable deaths from pneumonia—which last year killed a child every 39 seconds
28/01/2020

Press release
Nearly 5 million children will need humanitarian assistance in central Sahel this year as violence surges
Number is projected to rise as attacks against children increase in Burkina Faso, Mali and Niger
27/01/2020

Press release
European Investment Bank and UNICEF partner to help improve access to quality education and protect children from climate change
27/01/2020

Vaccination Acceptance Research Network (VARN) [to 1 Feb 2020]
https://vaccineacceptance.org/news.html#header1-2r
No new digest content identified.

Vaccine Confidence Project [to 1 Feb 2020]
http://www.vaccineconfidence.org/
No new digest content identified.

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

Wellcome Trust [to 1 Feb 2020]
https://wellcome.ac.uk/news
News | 31 January 2020
Wellcome pledges £10 million to tackle novel coronavirus epidemic
Wellcome is making a pledge of up to £10 million to accelerate research and support global efforts to tackle the ongoing novel coronavirus epidemic.

Opinion | 29 January 2020
What can funders do to encourage inclusive research leadership?
by Jack Harrington

Opinion | 28 January 2020
Race for new antibiotics: future success is hanging by a thread
by Tim Jinks

The Wistar Institute [to 1 Feb 2020]
Press Releases
No new digest content identified.

World Organisation for Animal Health (OIE) [to 1 Feb 2020]
No new digest content identified.

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ARM [Alliance for Regenerative Medicine] [to 1 Feb 2020]
https://alliancercrm.org/press-releases/
Press Releases
The Alliance for Regenerative Medicine Outlines Recommendations on Enabling Cross-border and Regional Access to Advanced Therapy Medicinal Products (ATMPs) in Europe
BRUSSELS, BELGIUM – January 27, 2020

BIO [to 1 Feb 2020]
Press Releases
Survey shows only 15% of executives and 14% of biotech board members are people of color.
WASHINGTON DC., January 30, 2020 – The Biotechnology Innovation Organization (BIO) today released “Measuring Diversity in the Biotech Industry: Building an Inclusive Workforce,” the most comprehensive report on diversity and inclusion in the...

DCVMN – Developing Country Vaccine Manufacturers Network [to 1 Feb 2020]
http://www.dcvmn.org/
News
Advanced Pharmacovigilance workshop and WG meeting
16 March 2020 to 19 March 2020, Shanghai / China

IFPMA [to 1 Feb 2020]
http://www.ifpma.org/resources/news-releases/
Selected Press Releases, Statements, Publications
IFPMA Statement on the G-FINDER report 2019
Published on: 30 January 2020
**G-FINDER report: Investment in neglected disease R&D by multinational pharmaceutical companies grew by more than a quarter in 2018, reaching its highest-ever level**

Geneva, 30 January 2020: IFPMA, the global R&D biopharmaceutical industry association, welcomes the 2019 G-FINDER report, which tracks public, private and philanthropic investment into product R&D for neglected diseases. The report shows the biopharmaceutical industry is now the second largest funder, after the USA’s National Institutes of Health (NIH) and before the Bill and Melinda Gates Foundation.

Private sector funding for neglected diseases, which predominantly affect the developing countries, rose sharply in 2018. The multinational pharmaceutical companies invested a total of $598m in neglected disease R&D in 2018 (up $132m, or a 28% increase). As products progressed through the pipeline, companies invested heavily in clinical development and post registration studies ($422m, 71%), with 20% ($118) of the funding dedicated to early-stage research.

It is also encouraging that the 2018 increase was distributed more evenly that in the past. Nearly half (43%) of the growth in multinational pharmaceutical companies investment went to diseases outside the “big three” (HIV/AIDS, malaria and TB).

While overall funding for the WHO neglected tropical diseases (NTDs)[1] has remained fairly flat over the last decade, industry investment has actually been one of the few positive stories in this area, with a steady growth over the course of the last twelve years, increasing five-fold since 2007...

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

* * * * *

**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**
February 2020 Volume 48, Issue 2, p123-238
Articles  

**Technical efficiency of provincial public healthcare in South Africa**  
Authors: Victor Ngobeni, Marthinus C. Breitenbach and Goodness C. Aye  
Content type: Research  
28 January 2020

Forty-nine million people or 83 per cent of the entire population of 59 million rely on the public healthcare system in South Africa. Coupled with a shortage of medical professionals, high migration, inequality and unemployment; healthcare provision is under extreme pressure. Due to negligence by the health professionals, provincial health departments had medical-legal claims estimated at R80 billion in 2017/18. In the same period, provincial health spending accounted for 33 per cent of total provincial expenditure of R570.3 billion or 6 per cent of South Africa’s Gross Domestic Product. Despite this, healthcare outcomes are poor and provinces are inefficient in the use of the allocated funds. This warrants a scientific investigation into the technical efficiency of the public health system.
Genomic research can reveal ‘unsolicited’ or ‘incidental’ findings that are of potential health or reproductive significance to participants. It is widely thought that researchers have a moral obligation, grou...
Authors: Julian J. Koplin, Julian Savulescu and Danya F. Vears
Citation: BMC Medical Ethics 2020 21:11
Content type: Debate
Published on: 31 January 2020

Ethical values supporting the disclosure of incidental and secondary findings in clinical genomic testing: a qualitative study
Incidental findings (IFs) and secondary findings (SFs), being results that are unrelated to the diagnostic question, are the subject of an important debate in the practice of clinical genomic medicine. Argumen...
Authors: Marlies Saelaert, Heidi Mertes, Tania Moerenhout, Elfride De Baere and Ignaas Devisch
Citation: BMC Medical Ethics 2020 21:9
Content type: Research article
Published on: 30 January 2020
**BMC Public Health**

http://bmcpublichealth.biomedcentral.com/articles  
(Accessed 1 Feb 2020)

**The role of place of residency in childhood immunisation coverage in Nigeria: analysis of data from three DHS rounds 2003–2013**

*In 2017, about 20% of the world’s children under 1 year of age with incomplete DPT vaccination lived in Nigeria. Fully-immunised child coverage (FIC), which is the percentage of children aged 12–23 months who ...*

Authors: Olayinka Aderopo Obanewa and Marie Louise Newell  
Citation: BMC Public Health 2020 20:123  
Content type: Research article  
Published on: 29 January 2020

**Bulletin of the World Health Organization**

Volume 98, Number 2, February 2020, 77-148  
https://www.who.int/bulletin/volumes/98/2/en/  
**Special theme: accelerating universal health coverage**

**EDITORIALS**

**Universal health coverage: time to deliver on political promises**

— Viroj Tangcharoensathien, Anne Mills, Walaiporn Patcharanarumol & Woranan Witthayapipopsakul  
http://dx.doi.org/10.2471/BLT.20.250597

**Universal health coverage provisions for women, children and adolescents**

— Elizabeth Mason, Gita Sen, Alicia Ely Yamin & on behalf of the United Nations Secretary-General’s Independent Accountability Panel for Every Woman, Every Child, Every Adolescent  
http://dx.doi.org/10.2471/BLT.19.249474
HIV prevention and care as part of universal health coverage
— Susan P Sparkes & Joseph Kutzin
http://dx.doi.org/10.2471/BLT.19.249854

POLICY & PRACTICE
[UHC themed articles addressing Senegal, Thailand, Kenya+]

PERSPECTIVES
Addressing the persistent inequities in immunization coverage
http://dx.doi.org/10.2471/BLT.19.241620
[See Milestones above for full text]

Child Care, Health and Development
Volume 46, Issue 1  Pages: 1-153  January 2020
https://onlinelibrary.wiley.com/toc/13652214/current
[Reviewed earlier]

Clinical Therapeutics
December 2019 Volume 41, Issue 12, p2461-2680
http://www.clinicaltherapeutics.com/current
[Reviewed earlier]

Clinical Trials
Volume 17 Issue 1, February 2020
https://journals.sagepub.com/toc/ctja/17/1
Data Management and Trial Conduct
A randomized evaluation of on-site monitoring nested in a multinational randomized trial
Nicole Wyman Engen, Kathy Huppler Hullsiek, Waldo H Beloso, Elizabeth Finley, Fleur Hudson, Eileen Denning, Catherine Carey, Mary Pearson, Jonathan Kagan for the INSIGHT START Study Group
First Published October 24, 2019; pp. 3–14

Short Communications
A third trial oversight committee: Functions, benefits and issues
J Athene Lane, Carrol Gamble, William J Cragg, Doreen Tembo, Matthew R Sydes
First Published October 30, 2019; pp. 106–112

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

**Contemporary Clinical Trials**  
Volume 89  February 2020  
[Reviewed earlier]

**The CRISPR Journal**  
Volume 2, Issue 6 / December 2019  
[https://www.liebertpub.com/toc/crispr/2/6](https://www.liebertpub.com/toc/crispr/2/6)  
[Reviewed earlier]

**Current Genetic Medicine Reports**  
Volume 7, Issue 4, December 2019  
[https://link.springer.com/journal/40142/7/4](https://link.springer.com/journal/40142/7/4)  
[Reviewed earlier]

**Current Opinion in Infectious Diseases**  
February 2020 - Volume 33 - Issue 1  
[https://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx](https://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx)  
[Reviewed earlier]

**Developing World Bioethics**  
Volume 19, Issue 4  Pages: 187-247  December 2019  
[Reviewed earlier]

**Development in Practice**  
Volume 30, Issue 1, 2020  
[http://www.tandfonline.com/toc/cdip20/current](http://www.tandfonline.com/toc/cdip20/current)  
[New issue; No digest content identified]

**Disaster Medicine and Public Health Preparedness**  
Volume 13 - Issue 5-6 - December 2019  
[https://www.cambridge.org/core/journals/disaster-medicine-and-public-health-preparedness/](https://www.cambridge.org/core/journals/disaster-medicine-and-public-health-preparedness/)  
[Reviewed earlier]

**Disasters**  
Volume 44, Issue 1  Pages: 1-232  January 2020  
Global Health Action  
Volume 12, 2019 Issue 1  
https://www.tandfonline.com/toc/zgha20/12/sup1?nav=tocList  
[No new digest content identified]

Global Health: Science and Practice (GHSP)  
Vol. 7, No. 4 December 23, 2019  
http://www.ghspjournal.org/content/current  
[Reviewed earlier]

Global Public Health  
Volume 15, 2020 Issue 1  
http://www.tandfonline.com/toc/rgph20/current  
[Reviewed earlier]

Globalization and Health  
http://www.globalizationandhealth.com/  
[Accessed 1 Feb 2020]  
[No new digest content identified]

Health Affairs  
Vol. 39, No. 1 January 2020  
https://www.healthaffairs.org/toc/hlthaff/current  
*Patient Costs, Bundled Payment & More*  
[New issue; No digest content identified]

Health and Human Rights  
Volume 21, Issue 2, December 2019  
*Special Section: Abortion in the Middle East and North Africa*  
*Special Section: Abortion Law Reform*  
*Special Section: Human Rights for Health across the United Nations*  
[Reviewed earlier]

Health Economics, Policy and Law  
Volume 15 - Issue 1 - January 2020  
https://www.cambridge.org/core/journals/health-economics-policy-and-law/latest-issue  
[Reviewed earlier]
Health Policy and Planning
Volume 34, Issue Supplement_3, December 2019
https://academic.oup.com/heapol/issue/34/Supplement_3
Access to Medicines through Health Systems in Low- and Middle-Income Countries
[Reviewed earlier]

Health Research Policy and Systems
http://www.health-policy-systems.com/content
[Accessed 1 Feb 2020]
Exempting low-risk health and medical research from ethics reviews: comparing Australia, the United Kingdom, the United States and the Netherlands
Disproportionate regulation of health and medical research contributes to research waste. Better understanding of exemptions of research from ethics review in different jurisdictions may help to guide modification of review processes and reduce research waste. Our aim was to identify examples of low-risk human health and medical research exempt from ethics reviews in Australia, the United Kingdom, the United States and the Netherlands.
Authors: Anna Mae Scott, Simon Kolstoe, M. C. (Corrette) Ploem, Zoë Hammatt and Paul Glasziou
Citation: Health Research Policy and Systems 2020 18:11
Content type: Research
Published on: 28 January 2020

Human Gene Therapy
Volume 31, Issue 1-2 / January 2020
https://www.liebertpub.com/toc/hum/31/1-2
[Reviewed earlier]

Humanitarian Exchange Magazine
Number 76, January 2020
https://odihpn.org/magazine/the-crisis-in-yemen/
The Crisis in Yemen
by HPN
This edition of Humanitarian Exchange focuses on the crisis in Yemen. Since the war there began in 2014, thousands of civilians have been killed or injured and air strikes and ground operations have destroyed hospitals, schools and critical infrastructure. An estimated 80% of Yemenis need humanitarian assistance.

In the lead article, Laurie Lee highlights the critical role Yemenis and Yemeni organisations are playing in addressing the humanitarian challenges in the country, and how NGOs can better support them. Genevieve Gauthier and Marcus Skinner reinforce this point with reference to two local organisations, the Yemen Women’s Union and Al Hikma. Warda Saleh, the founder of another Yemeni grassroots organisation, discusses the increased risk of gender-based violence facing women and girls, while Ibrahim Jalal and Sherine El Taraboulsi-McCarthy focus on
internal displacement and the opportunities for a more effective humanitarian response. Reflecting on child protection programming in Yemen, Mohammed Alshamaa and Amanda Brydon conclude that multisectoral approaches with local authorities result in better and more sustainable outcomes. Padraic McCluskey and Jana Brandt consider the ethical dilemmas Médecins Sans Frontières (MSF) faced in trying to balance quality and coverage in a mother and child hospital in Taiz. Lindsay Spainhour Baker and colleagues reflect on the challenges involved in gathering and analysing information on the humanitarian situation while Lamis Al-Iryani, Sikandra Kurdi and Sarah Palmer-Felgate discuss the findings from an evaluation of the Yemen Social Fund for Development (SFD) Cash for Nutrition programme. An article by Kristine Beckerle and Osamah Al-Fakih details Yemeni and international organisations’ efforts to document and mitigate harm to civilians caught up in the conflict. The edition ends with a piece by Fanny Pettibon, Anica Heinlein and Dhabie Brown outlining CARE’s advocacy on the arms trade.

Finally, readers will note that this edition is shorter than usual, largely because it was very difficult to persuade potential authors to write on the Yemen crisis. Many of the individuals and organisations we contacted were either too busy responding or were concerned that writing frankly about their work could negatively affect their operations. HPN has covered many similarly sensitive contexts in Humanitarian Exchange over the last 26 years, but this is the first time we have experienced such reluctance to engage. A worrying sign.

**Human Vaccines & Immunotherapeutics** (formerly Human Vaccines)
Volume 15, Issue 12, 2019
http://www.tandfonline.com/toc/khvi20/current
[Reviewed earlier]

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

**Infectious Diseases of Poverty**
http://www.idpjournal.com/content
[Accessed 1 Feb 2020]
**Neglected tropical diseases: an effective global response to local poverty-related disease priorities**
Marking the end of the five-year programme initiated by the Chinese Government to lift more than 70 million people out of poverty, the year 2020 is a milestone. Poverty alleviation has moved strongly forward i...
Authors: Dirk Engels and Xiao-Nong Zhou
Content type: Scoping Review
28 January 2020

**International Health**
DNA-Based Population Screening: Potential Suitability and Important Knowledge Gaps
Michael F. Murray, MD; James P. Evans, MD, PhD; Muin J. Khoury, MD, PhD
This Viewpoint describes principles of DNA-based population screening and knowledge gaps that must be addressed before increased use of DNA screening to identify persons with monogenic risk can be implemented in population screening programs.

Strategic Need for Large Prospective Studies in Different Populations
Zhengming Chen, DPhil; Jonathan Emberson, MD; Rory Collins, MBBS
This Viewpoint emphasizes the ability of prospective vs retrospective cohort and case-control studies to reliably identify disease risk factors in populations and discusses the need to collect detailed information about lifestyle and other exposures from large numbers of individuals in various settings with different risk factor levels and disease incidence rates to provide more
widely generalizable evidence about the relevance of human exposures to different health conditions.

**JAMA Pediatrics**
January 2020, Vol 174, No. 1, Pages 1-108
http://archpedi.jamanetwork.com/issue.aspx
[Reviewed earlier]

**JBI Database of Systematic Review and Implementation Reports**
January 2020 - Volume 18 - Issue 1
https://journals.lww.com/jbisrir/Pages/currenttoc.aspx
[Reviewed earlier]

**Journal of Adolescent Health**
January 2020 Volume 66, Issue 1, p1-
https://www.jahonline.org/issue/S1054-139X(18)X0003-2
[Reviewed earlier]

**Journal of Community Health**
Volume 45, Issue 1, February 2020
https://link.springer.com/journal/10900/45/1
[Reviewed earlier]

**Journal of Development Economics**
Volume 142, January 2020
*Special Issue on papers from "10th AFD-World Bank Development Conference held at CERDI, Clermont-Ferrand, on June 30 - July 1, 2017”*
Edited by Caglar Ozden, David McKenzie, Hillel Rapoport
[Reviewed earlier]

**Journal of Empirical Research on Human Research Ethics**
Volume 14 Issue 5, December 2019
http://journals.sagepub.com/toc/jre/current
*Special Issue: Empirical Studies in Empirical Ethics*
[Reviewed earlier]

**Journal of Epidemiology & Community Health**
January 2020 - Volume 74 - 1
https://jech.bmj.com/content/74/1
[Reviewed earlier]
Journal of Evidence-Based Medicine
Volume 12, Issue 4  Pages: 233-336 November 2019
https://onlinelibrary.wiley.com/toc/17565391/current
[Reviewed earlier]

Journal of Global Ethics
Volume 15, Issue 3, 2019
http://www.tandfonline.com/toc/rjge20/current
Special Issue: Global Justice and Childhood
[Reviewed earlier]

Journal of Health Care for the Poor and Underserved (JHCPU)
Volume 30, Number 4, November 2019, Supplement
https://muse.jhu.edu/issue/41320
[Reviewed earlier]

Journal of Immigrant and Minority Health
Volume 22, Issue 1, February 2020
https://link.springer.com/journal/10903/22/1
[Reviewed earlier]

Journal of Immigrant & Refugee Studies
Volume 18, 2020, Issue 1
https://www.tandfonline.com/toc/wimm20/current
[Reviewed earlier]

Journal of Infectious Diseases
Volume 221, Issue 1, 1 January 2020
https://academic.oup.com/jid/issue/221/1
Editor's Choice
Searching for Improved Flu Vaccines—The Time Is Now
Robert L Atmar, Wendy A Keitel
J Infect Dis, Volume 221, Issue 1, 1 January 2020, Pages 1–4,
https://doi.org/10.1093/infdis/jiz545

Editor's Choice
Vaccinating Mothers to Protect Their Babies Against Influenza
Cheryl Cohen, Marta C Nunes
J Infect Dis, Volume 221, Issue 1, 1 January 2020, Pages 5–7,
https://doi.org/10.1093/infdis/jiz387
Editor's Choice

Jemma L Walker, Hongxin Zhao, Gavin Dabrera, Nick Andrews, Sarah L Thomas ...
J Infect Dis, Volume 221, Issue 1, 1 January 2020, Pages 16–20,
https://doi.org/10.1093/infdis/jiz310
We show that maternal influenza vaccination provides significant protection for infants in the first 6 months of life against influenza-related hospitalization in both the A(H1N1)pdm09– and A(H3N2)–dominated seasons.

Journal of Medical Ethics
January 2020 - Volume 46 - 1
http://jme.bmj.com/content/current
[Reviewed earlier]

Journal of Patient-Centered Research and Reviews
Volume 7, Issue 1 (2020)
https://digitalrepository.aurorahealthcare.org/jpcrr/
Quality Improvement
Enhancing Immunization Rates in Two Urban Academic Primary Care Clinics: A Before and After Assessment
Zeeshan Yacoob, Christopher Cook, Fabiana Kotovicz, Jessica J.F. Kram, Marianne Klumph, Marisa Stanley, Paul Hunter, and Dennis J. Baumgardner

Journal of Pediatrics
January 2020 Volume 216, p1-258
http://www.jpeds.com/current
[Reviewed earlier]

Journal of Pharmaceutical Policy and Practice
https://joppp.biomedcentral.com/
[Accessed 1 Feb 2020]
Abstracts from the 1st JoPPP Conference on Pharmaceutical Policy and Practice
Authors: Salman Mehmood, Syed Muhammad Farid Hasan, Chinara Maratovna Razzakova, Liliya Eugenevn Zigianshina, Azjargal Ganbat, Tsetsegmaa Sanjjav, Bruce Sunderland, Gantuya Dorj, Gereltuya Dorj, Satibi Satibi, M. Rifqi Rokhman, Hardika Aditama, Ika Kartini, Rini Ambarsari, Fajar Pramesti, Peng Yeow Loh...
Content type: Meeting abstracts
29 January 2020

Journal of Public Health Management & Practice
January/February 2020 - Volume 26 - Issue 1
https://journals.lww.com/jphmp/pages/currenttoc.aspx
Emerging understandings of 2019-nCoV

The Lancet

“There is an emergency in China, but it has not yet become a global health emergency...WHO is following this outbreak every minute of every day”, said Dr Tedros Ghebreyesus, Director-General of WHO, on Jan 23. A novel coronavirus (2019-nCoV) outbreak is emerging, but it is not yet a Public Health Emergency of International Concern (PHEIC). As we went to press, more than 500 cases have been confirmed in China, as well as in Japan, South Korea, Thailand, and the US. The virus can cause a severe respiratory illness, like SARS and MERS, and human-to-human transmission has been confirmed. These characteristics are driving China's urgent public health actions, as well as international concern. But much remains unknown. The pieces of the puzzle that is 2019-nCoV are only now beginning to come together.
Today, we publish the first clinical data from individuals confirmed to be infected with 2019-nCoV from Wuhan, China. Chaolin Huang and colleagues provide comprehensive findings for the first 41 laboratory-confirmed cases. 27 of these 41 cases had direct exposure to the Wuhan seafood market that is thought to be the initial site of infection from an animal source. All had viral pneumonia. The severity of illness is concerning: almost a third of patients developed acute respiratory distress syndrome requiring intensive care; six patients died; five had acute cardiac injury; and four required ventilation.

Separately, Jasper Fuk-Woo Chan and colleagues report clinical and microbiological data from a family of six people who had travelled to Wuhan and later presented with pneumonia to Shenzhen Hospital in Guangdong province. Five were identified as infected with 2019-nCoV. Notably, none had been to the Wuhan market, but two had visited a Wuhan hospital. The authors suggest these findings confirm human-to-human transmission. Together, these Articles provide an important initial picture of the clinical spectrum and transmission of this new disease.

In an accompanying Comment, Chen Wang, George Gao, and colleagues describe the early sharing of clinical data from the outbreak and emphasise the urgent need for more information about pathogenesis and viral transmission, as well as the pressing need to develop best supportive care and a vaccine. They also caution against overstating the mortality risk, as early reported case-fatality rates may be high due to bias towards detecting severe cases. As David Heymann reflects in another accompanying Comment, publication of these Articles provides peer-reviewed information urgently needed to refine the risk assessment and response, which are happening in real time.

China has quickly isolated and sequenced the virus and shared these data internationally. The lessons from the SARS epidemic—where China was insufficiently prepared to implement infection control practices—have been successfully learned. By most accounts, Chinese authorities are meeting international standards and isolating suspected cases and contacts, developing diagnostic and treatment procedures, and implementing public education campaigns. Dr Tedros has praised China for its transparency, data sharing, and quick response. Likewise, WHO has reacted fast and diligently. Despite massive attention and conjecture about the level of threat posed by 2019-nCoV, and whether WHO should declare a PHEIC, the agency’s emergency committee has not bowed to pressure to take such a decision until necessary. We commend WHO for its resilience.

There are still many gaps in our understanding. The early experiences of these patients and the response to their symptoms before cases were reported remain undocumented. The exposure and possible infection of health workers remain extremely worrying. We will not know for some time the consequences of the quarantine imposed in Wuhan on Jan 23, 2020. Chinese public health authorities are under enormous pressure to make difficult decisions with an incomplete, and rapidly changing, understanding of the epidemic. The shutdowns may seem a drastic step—whether they represent an effective control measure deserves careful investigation and much will likely depend on maintaining trust between authorities and the local population. News media that worsen fears by reporting a "killer virus" only harm efforts to implement a successful and safe infection control strategy.
Openness and sharing of data are paramount. There are enormous demands for rapid access to information about this new virus, the patients and communities affected, and the response. But equally crucial is the need to ensure that those data are reliable, accurate, and independently scrutinised. As for all public health emergencies, we will be making all related Lancet content fully and freely available.

Comment

**Trial results reporting: FDA Amendments Act Final Rule needs enforcement**

Erik von Elm, Joerg J Meerpohl

**Lancet Migration: global collaboration to advance migration health**

Miriam Orcutt, Paul Spiegel, Bernadette Kumar, Ibrahim Abubakar, Jocalyn Clark, Richard Horton on behalf of Lancet Migration

Articles

**Compliance with legal requirement to report clinical trial results on ClinicalTrials.gov: a cohort study**

Nicholas J DeVito, Seb Bacon, Ben Goldacre

Viewpoint

**The complex challenges of HIV vaccine development require renewed and expanded global commitment**

Linda-Gail Bekker, et al

Despite substantial progress in understanding and treating HIV/AIDS, existing tools have not effectively controlled the epidemic, and the potential threat of resurgence looms as the largest cohort of young people in history enters early adulthood. \( ^1 \) Treatment alone will not end the epidemic. \( ^2 \), \( ^3 \), \( ^4 \) The International AIDS Society – Lancet Commission \( ^1 \) recommends that global treatment efforts should be complemented with stronger investments in primary prevention, including research to accelerate the development of a preventive vaccine. Indeed, even a partially effective vaccine could help to change the course of the HIV epidemic and have a substantial public health impact. \( ^5 \), \( ^6 \), \( ^7 \), \( ^8 \)

**The Lancet Child & Adolescent Health**

Volume 4, ISSUE 1, P1, January 01, 2020

https://www.thelancet.com/journals/lanchi/issue/current

[Reviewed earlier]

**Lancet Digital Health**

Volume 2, ISSUE 1, Pe1, January 01, 2020

https://www.thelancet.com/journals/landig/issue/current

[Reviewed earlier]

**Lancet Global Health**

Volume 8, ISSUE 1, Pe1, January 01, 2020

http://www.thelancet.com/journals/langlo/issue/current
Lancet Infectious Diseases
Volume 20, ISSUE 1, P1, January 01, 2020
http://www.thelancet.com/journals/laninf/issue/current
[Reviewed earlier]

Lancet Respiratory Medicine
Volume 8, ISSUE 1, P1, January 01, 2020
http://www.thelancet.com/journals/lanres/issue/current
[Reviewed earlier]

Maternal and Child Health Journal
Volume 24, Issue 1, January 2020
https://link.springer.com/journal/10995/24/1
[Reviewed earlier]

Medical Decision Making (MDM)
Volume 40 Issue 1, January 2020
http://mdm.sagepub.com/content/current
[Reviewed earlier]

The Milbank Quarterly
A Multidisciplinary Journal of Population Health and Health Policy
Volume 97, Issue 4 Pages: 881-1242 December 2019
https://onlinelibrary.wiley.com/toc/14680009/current
[Reviewed earlier]

Nature
Volume 577 Issue 7792, 30 January 2020
http://www.nature.com/nature/current_issue.html
[New issue; No digest content identified]

Nature Biotechnology
Volume 38 Issue 1, January 2020
https://www.nature.com/nbt/volumes/38/issues/1
[Reviewed earlier]

Nature Genetics
Volume 52 Issue 1, January 2020
PLoS Medicine
http://www.plosmedicine.org/
(Accessed 1 Feb 2020)
[No new digest content identified]

PLoS Neglected Tropical Diseases
http://www.plosntds.org/
(Accessed 1 Feb 2020)

High cholera vaccination coverage following emergency campaign in Haiti: Results from a cluster survey in three rural Communes in the South Department, 2017
Ashley Sharp, Alexandre Blake, Jérôme Backx, Isabella Panunzi, Robert Barrais, Fabienne Nackers, Francisco Luquero, Yves Gaston Deslouches, Sandra Cohuet
Research Article | published 31 Jan 2020 PLOS Neglected Tropical Diseases
https://doi.org/10.1371/journal.pntd.0007967

Author summary
After Hurricane Matthew hit Southern Haiti on October 4, 2016, there was an outbreak of Cholera. The Government launched a campaign to vaccinate residents using an oral vaccine, which has been proven to protect people against the disease. MSF supported the campaign in three rural areas, offering the vaccine in local clinics and going from door to door. We didn't know how many people were living there at the time so we couldn't say for sure if we had vaccinated enough people. To find out how many people were vaccinated we did a survey, choosing households at random and asking them if and where they received the vaccine. This showed that on average around 90% of people were vaccinated, which is a very high proportion. We can take encouragement from this that mass vaccination campaigns like this can work well, even in rural settings. Our survey showed that about half of people got their vaccine from a clinic and the other half from door-to-door vaccinators, so it's probably important to use both approaches. Most people heard about the campaign through members of the local community called 'criers'. This shows how important it is to engage with the local community during a vaccination campaign.

What constitutes a neglected tropical disease?
Peter J. Hotez, Serap Aksoy, Paul J. Brindley, Shaden Kamhawi
Editorial | published 30 Jan 2020 PLOS Neglected Tropical Diseases
https://doi.org/10.1371/journal.pntd.0008001

Abstract
The World Health Organization (WHO) currently classifies 20 diseases and conditions as neglected tropical diseases (NTDs). However, since its inception in 2007, PLOS Neglected Tropical Diseases has considered an expanded list that includes additional diseases with the chronic and/or debilitating, and poverty-promoting features of NTDs. Described here is an update of our current scope, which attempts to embrace all of the NTDs, and a discussion of the status of some of the more debated medical conditions in terms of whether or not they constitute an NTD.
World neglected tropical diseases day
Peter J. Hotez, Serap Aksoy, Paul J. Brindley, Shaden Kamhawi
Editorial | published 29 Jan 2020 PLOS Neglected Tropical Diseases
https://doi.org/10.1371/journal.pntd.0007999

When money talks: Judging risk and coercion in high-paying clinical trials
Christina Leuker, Lasare Samartzidis, Ralph Hertwig, Timothy J. Pleskac
Research Article | published 31 Jan 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0227898

Abstract
Millions of volunteers take part in clinical trials every year. This is unsurprising, given that clinical trials are often much more lucrative than other types of unskilled work. When clinical trials offer very high pay, however, some people consider them repugnant. To understand why, we asked 1,428 respondents to evaluate a hypothetical medical trial for a new Ebola vaccine offering three different payment amounts. Some respondents (27%) used very high pay (£10,000) as a cue to infer the potential risks the clinical trial posed. These respondents were also concerned that offering £10,000 was coercive—simply too profitable to pass up. Both perceived risk and coercion in high-paying clinical trials shape how people evaluate these trials. This result was robust within and between respondents. The link between risk and repugnance may generalize to other markets in which parties are partially remunerated for the risk they take and contributes to a more complete understanding of why some market transactions appear repugnant.

The cost-effectiveness of using pneumococcal conjugate vaccine (PCV13) versus pneumococcal polysaccharide vaccine (PPSV23), in South African adults
Charles Feldman, Sipho K. Dlamini, Shabir A. Madhi, Susan Meiring, Anne von Gottberg, Janetta C. de Beer, Margreet de Necker, Marthinus P. Stander
Research Article | published 29 Jan 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0227945

Impact of maternal dTpa vaccination on the incidence of pertussis in young infants
Frederico Friedrich, Maria Clara Valadão, Marcos Brum, Talitha Comaru, Paulo Márcio Pitrez, Marcus Herbert Jones, Leonardo A. Pinto, Marcelo C. Scotta
Research Article | published 28 Jan 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0228022

PLoS Pathogens
http://journals.plos.org/plospathogens/
[Accessed 1 Feb 2020]
[No new digest content identified]
The unreasonable effectiveness of deep learning in artificial intelligence

Terrence J. Sejnowski


Abstract
Deep learning networks have been trained to recognize speech, caption photographs, and translate text between languages at high levels of performance. Although applications of deep learning networks to real-world problems have become ubiquitous, our understanding of why they are so effective is lacking. These empirical results should not be possible according to sample complexity in statistics and nonconvex optimization theory. However, paradoxes in the training and effectiveness of deep learning networks are being investigated and insights are being found in the geometry of high-dimensional spaces. A mathematical theory of deep learning would illuminate how they function, allow us to assess the strengths and weaknesses of different network architectures, and lead to major improvements. Deep learning has provided natural ways for humans to communicate with digital devices and is foundational for building artificial general intelligence. Deep learning was inspired by the architecture of the cerebral cortex and insights into autonomy and general intelligence may be found in other brain regions that are essential for planning and survival, but major breakthroughs will be needed to achieve these goals.
A comparison of national essential medicines lists in the Americas

Objectives.
To compare national essential medicines lists (NEMLs) from countries in the Region of the Americas and to identify potential opportunities for improving those lists.

Methods.
In June of 2017, NEMLs from 31 countries in the Americas were abstracted from documents included in a World Health Organization (WHO) repository. The lists from the Americas were compared to each other and to NEMLs from outside of the Americas, as well as with the WHO Model List of Essential Medicines, 20th edition (“WHO Model List”) and the list of the Pan American Health Organization (PAHO) Regional Revolving Fund for Strategic Public Health Supplies (“Strategic Fund”).
Results.
The number of differences between the NEMLs from the Americas and the WHO Model List were similar within those countries (median: 295; interquartile range (IQR): 265 to 347). The NEMLs from the Americas were generally similar to each other. While the NEMLs from the Americas coincided well with the Strategic Fund list, some medicines were not included on any of those NEMLs. All the NEMLs in the Americas included some medicines that were withdrawn due to adverse effects by a national regulatory body (median: 8 withdrawn medicines per NEML; IQR: 4 to 12).

Conclusions.
The NEMLs in the Americas were fairly similar to each other and to the WHO Model List and the Strategic Fund list. However, some areas of treatment and some specific medicines were identified that the countries should reassess when revising their NEMLs.
Research article  Open access
Using models to shape measles control and elimination strategies in low- and middle-income countries: A review of recent applications
F.T. Cutts, E. Dansereau, M.J. Ferrari, M. Hanson, ... A.K. Winter

Review article  Abstract only
Barriers to healthcare workers reporting adverse events following immunization in four regions of Ghana
Jane F. Gidudu, Anna Shaum, Alex Dodoo, Samuel Bosomprah, ... Hilda H. Ampadu

Review article  Abstract only
Sexual behaviors and intention for cervical screening among HPV-vaccinated young Chinese females
Gilbert T. Chua, Frederick K. Ho, Keith T. Tung, Rosa S. Wong, ... Patrick Ip

Review article  Abstract only
Using classification and regression tree analysis to explore parental influenza vaccine decisions
Yuki Lama, Gregory R. Hancock, Vicki S. Freimuth, Amelia M. Jamison, Sandra Crouse Quinn

Research article  Open access
Decision-making about HPV vaccination in parents of boys and girls: A population-based survey in England and Wales
Jo Waller, Alice Forster, Mairead Ryan, Rebecca Richards, ... Laura Marlow

Review article  Abstract only
Karina A. Top, Abdoulreza Esteghamati, Melissa Kervin, Louise Henaff, ... Noni E. MacDonald

Review article  Abstract only
Financial cost analysis of a strategy to improve the quality of administrative vaccination data in Uganda
Kirsten Ward, Kevin Mugenyi, Adam MacNeil, Henry Luzze, ... Sarah W. Pallas

Review article  Abstract only
Strengthening national teams of experts to support HPV vaccine introduction in Eastern Mediterranean countries: Lessons learnt and recommendations from an international workshop
Carine Dochez, Salah Al Awaidy, Ezzeddine Mohsni, Kamal Fahmy, Mohammed Bouskraoui

Review article  Abstract only
Vaccine hesitancy and self-vaccination behaviors among nurses in southeastern France
Rose Wilson, Anna Zaytseva, Aurélie Bocquier, Amale Nokri, ... Pierre Verger
Religious affiliation and immunization coverage in 15 countries in Sub-Saharan Africa

Children vaccination coverage surveys: Impact of multiple sources of information and multiple contact attempts
Marilou Kiely, Nicole Boulianne, Denis Talbot, Manale Ouakki, ... Gaston De Serres

Pertussis vaccines: The first hundred years
Nicole Guiso, Bruce D. Meade, Carl Heinz Wirsing von König

Assessment of the Clinical and Economic Impact of Different Immunization Protocols of Measles, Mumps, Rubella and Varicella in Internationally Adopted Children
by Sara Boccalini, Angela Bechini, Cecilia Maria Alimenti, Paolo Bonanni, Luisa Galli and Elena Chiappini
Vaccines 2020, 8(1), 60; https://doi.org/10.3390/vaccines8010060 (registering DOI) - 01 Feb 2020

Abstract
The appropriate immunization of internationally adopted children (IAC) is currently under debate and different approaches have been suggested. The aim of this study is to evaluate the clinical and economic impact of different strategies of measles, mumps, rubella, and varicella (MMRV) immunization in IAC in Italy. A decision analysis model was developed to compare three strategies: presumptive immunization, pre-vaccination serotesting and vaccination based on documentation of previous immunization. Main outcomes were the cost of strategy, number of protected IAC, and cost per child protected against MMRV. Moreover, the incremental cost-effectiveness ratio (ICER) was calculated. The strategy currently recommended in Italy (immunize based on documentation) is less expensive. On the other hand, the pre-vaccination serotesting strategy against MMRV together, improves outcomes with a minimum cost increase, compared with the presumptive immunization strategy and compared with the comparator strategy. From a cost-effectiveness point of view, vaccination based on serotesting results in being the most advantageous strategy compared to presumptive vaccination. By applying a chemiluminescent immunoassay test, the serology strategy resulted to be clinically and economically advantageous. Similar results were obtained excluding children aged <1 year for both serology methods. In conclusion, based on our analyses, considering MMRV vaccine, serotesting strategy appears to be the preferred option in IAC.
The Impact of School and After-School Friendship Networks on Adolescent Vaccination Behavior
by Daniele Mascia, Valentina Iacopino, Emanuela Maria Frisicale, Antonia Iacovelli, Stefania Boccia and Andrea Poscia
Vaccines 2020, 8(1), 55; https://doi.org/10.3390/vaccines8010055 - 29 Jan 2020
Abstract
Psychological and social characteristics of individuals are important determinants of their health choices and behaviors. Social networks represent “pipes” through which information and opinions circulate and spread out in the social circle surrounding individuals, influencing their propensity toward important health care interventions. This paper aims to explore the relationship between students’ vaccination health choices and their social networks. We administered a questionnaire to students to collect data on individual students’ demographics, knowledge, and attitudes about vaccinations, as well as their social networks. Forty-nine pupils belonging to 4 classrooms in an Italian secondary school were enrolled in the study. We applied a logistic regression quadratic assignment procedure (LR-QAP) by regressing students’ positive responsive behavior similarity as a dependent variable. LRQAP findings indicate that students’ vaccination behavior similarity is significantly associated with after-school social ties and related social mechanisms, suggesting that pupils are more likely to share information and knowledge about health behaviors through social relationships maintained after school hours rather than through those established during the school day. Moreover, we found that vaccination behaviors are more similar for those students having the same ethnicity as well as for those belonging to the same class. Our findings may help policymakers in implementing effective vaccination strategies.

Open Access Article
Determining Factors for Pertussis Vaccination Policy: A Study in Five EU Countries
by Anabelle Wong, Annick Opinel, Simon Jean-Baptiste Combes, Julie Toubiana and Sylvain Brisse
Vaccines 2020, 8(1), 46; https://doi.org/10.3390/vaccines8010046 - 26 Jan 2020
Abstract
Pertussis vaccination policy varies across Europe, not only in the type of vaccine—whole cell (wP) vs. acellular (aP1/2/3/5)—but also in the schedule and recommendation for parents. This study aims to investigate the determining factors for the type of vaccine, immunization schedule and maternal immunization recommendation. From March to May 2019, experts in national health agencies and major academic or research institutions from Denmark, France, Poland, Sweden and the UK were invited to a semi-structured interview. Thematic analysis was performed on the transcripts using a codebook formulated by three coders. Inter-coder agreement was assessed. Fifteen expert interviews were conducted. The identified driving factors for pertussis vaccine policy were classified into three domains: scientific factors, sociological factors, and pragmatic factors. The determining factors for the type of vaccine were prescriber’s preference, concern of adverse events following immunization (AEFI), effectiveness, and consideration of other vaccine components in combined vaccines. The determining factors for infant schedule were immunity response and the potential to improve coverage and timeliness. The determining factors for maternal immunization were infant mortality and public acceptability. To conclude, socio-political and pragmatic factors were, besides scientific factors, important in determining the pertussis vaccine type, schedule of childhood immunization and recommendations for parents.
**Value in Health**  
January 2020 Volume 23, Issue 1, p1-138  
https://www.valueinhealthjournal.com/issue/S1098-3015(20)X0002-7  
[Reviewed earlier]

**Viruses**  
Volume 12, Issue 1 (January 2020)  
https://www.mdpi.com/1999-4915/12/1  
[No new digest content identified]

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

**American Journal of Law & Medicine**  
First Published January 23, 2020  
*Research Article*  
**Informed Consent to Vaccination: Theoretical, Legal, and Empirical Insights**  
Dorit Rubinstein Reiss, Nili Karako-Eyal  
https://doi.org/10.1177/0098858819892745  
**Abstract**  
Informed consent matters — so does protecting people from infectious diseases. This paper examines what the appropriate informed consent process for vaccines should look like and how the process is conceptualized by law and health authorities. Drawing on the extensive theoretical and empirical literature on informed consent and vaccination, this article sets out what an ideal informed consent process for vaccination would consist of, highlighting the need for autonomous decisions. To be autonomous, decisions need to be based on full, accessible information and reached without coercion. We suggest that the information provided must address the nature of the procedure — including benefits to the child, benefits to society, and risks. Parents should have their concerns and misconceptions addressed. The information needs to be accessible and include an opportunity to ask questions. Based on this ideal model we examined in detail the legal framework surrounding informed consent to vaccination and the process as conceptualized by health authorities in two countries, Israel and the United States, to assess whether they meet the requirements. These two countries are similar in some of their values, for example, the importance of individual autonomy, and face similar problems related to vaccine hesitancy. At the same time, there are meaningful differences in their vaccine policies and the current structures of their informed consent processes, allowing for a meaningful comparison. We found neither country met our ideal informed consent process, and suggested improvements both to the materials and to the processes used to obtain informed consent.
Is adolescent immunisation for pertussis cost effective in Canada?

K Anyiwe et al

Background
Adolescent tetanus, diphtheria and pertussis (Tdap) immunization helps prevent pertussis infection. Timing of Tdap receipt represents an important facet of successful adolescent pertussis immunization. Potential strategies for timing of vaccine administration are each associated with different benefits – including disease prevention – and costs. The objective of this study was to assess the cost-utility of adolescent pertussis immunization strategies in Canada.

Conclusion
Analysis assumes a policy context where immunization of pregnant women is recommended. Findings suggest that alternate adolescent Tdap vaccine strategies – either immunization of 10 year olds, or removal of the adolescent vaccine – are more cost-effective than the current practice of immunizing 14 year olds.

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

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

The Atlantic
http://www.theatlantic.com/magazine/
Accessed 1 Feb 2020

Ideas
Coronavirus Is Coming—And Trump Isn’t Ready
In order to combat the disease, the president will have to trust the kind of government experts he has disdained and dismissed.

January 30, 2020

BBC
http://www.bbc.co.uk/
Accessed 1 Feb 2020
**Coronavirus: The US laboratory developing a vaccine**

The Economist
http://www.economist.com/
Accessed 1 Feb 2020
[No new, unique, relevant content]

**Financial Times**
http://www.ft.com/home/uk
Coronavirus
*The scientist leading the coronavirus vaccine race* [CEPI]
Pharmaceutical companies work to repurpose existing genetic technology
January 30, 2020

**Forbes**
http://www.forbes.com/
[No new, unique, relevant content]

**Foreign Affairs**
http://www.foreignaffairs.com/
Accessed 1 Feb 2020
China
Jan 31, 2020 Snapshot
*How to Prepare for a Coronavirus Pandemic*
A roadmap for the worst-case scenario.
Tom Inglesby

**Foreign Policy**
http://foreignpolicy.com/
Accessed 1 Feb 2020
**What Can Be Done to Stop the Wuhan Virus**
In a special conference call with subscribers, science columnist Laurie Garrett and senior editor James Palmer discuss the potential global effects of the new coronavirus.
Transcript | FP Editors

**The Guardian**
http://www.guardiannews.com/
Accessed 1 Feb 2020
Coronavirus outbreak
*Paranoia and frustration as China places itself under house arrest*
Cities are becoming ghost towns, while at the heart of the outbreak people are being disinfected after taking the bins out
Lily Kuo, Sat 1 Feb 2020
Researchers Are Racing to Make a Coronavirus Vaccine. Will It Help?

New technology and better coordination have sped up development. But a coronavirus vaccine is still months — and most likely years — away.

By Knvul Sheikh and Katie Thomas

Jan. 28

Governor opposes vote to overturn vaccine exemption law

AUGUSTA, Maine — Governor Janet Mills said Friday she opposes a referendum that would overturn Maine’s law eliminating religious and philosophical exemptions for vaccinations. In a radio address, Mills, a Democrat, said she signed the law last year to better protect the health and welfare of residents across Maine.

Jan 31, 2020

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Coronavirus and Low-Income Countries: Ready to Respond?

As the first suspected cases of the novel coronavirus 2019-nCoV are investigated in Ivory Coast and Angola, none of the 45 low-income countries that have undertaken a national preparedness assessment have been qualified as ready to respond.

Amanda Glassman
Critical Questions
The Novel Coronavirus Outbreak
January 28, 2020 |
By J. Stephen Morrison, Jude Blanchette, Scott Kennedy, Stephanie Segal

Council on Foreign Relations
http://www.cfr.org/
Accessed 1 Feb 2020
January 30, 2020
Health
Refuge From Disease
Mitigating potential communicable disease in refugee populations is a subset of efforts for human rights, equality, and dignity. A basic multilateral framework could improve health care in these situ...
Report by Swee Kheng Khor and David L. Heymann
January 30, 2020

Public Health Threats and Pandemics
The World Health Organization
Since its postwar founding, the UN agency has garnered both praise and criticism for its response to international public health crises.
Backgrounder by CFR.org Editors

Kaiser Family Foundation
https://www.kff.org/search/?post_type=press-release
Accessed 1 Feb 2020
[No new relevant content]

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

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

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