Vaccines and Global Health: The Week in Review
7 March 2020 :: Number 543
Center for Vaccine Ethics & Policy (CVEP)

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

Vaccines and Global Health: The Week in Review is also posted in pdf form and as a set of blog posts at https://centerforvaccineethicsandpolicy.net. This blog allows full-text searching of over 8,000 entries. 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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E. Journal Watch
F. Media Watch
EMERGENCIES

Coronavirus [COVID-19]
Public Health Emergency of International Concern (PHEIC)

Editor’s Note:
While we have concentrated the most current key reports just below, COVID-19 announcements, analysis and commentary will be found throughout this issue, in all sections.

Beyond the considerable continuing coverage in the global general media:
:: Daily WHO situation reports here: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports

Situation report - 47 [WHO]
Novel Coronavirus (COVID-19)
07 March 2020
[Excerpts]

SITUATION IN NUMBERS
Globally :: 101.927 confirmed [3735 new]
China :: 80,813 confirmed [102 new]
:: 3,073 deaths [28 new]
Outside of China
:: 21,110 confirmed [3633 new]
:: 93 countries/territories/areas [5 new]
:: 413 deaths [78 new]

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

HIGHLIGHTS
:: 5 new countries/territories/areas (Colombia, Holy See, Peru, Serbia, and Togo) have reported cases of COVID-19 in the past 24 hours.
:: The global number of reported cases of COVID-19 has surpassed 100,000.
:: OpenWHO has reached 161,000 learners in COVID-19 courses. The introductory course on COVID-19 has been partially or fully translated into 17 national languages. For more information, and to enroll in these free courses, please visit OpenWHO’s COVID-19 channel.
WHO statement on cases of COVID-19 surpassing 100,000
7 March 2020  Statement
As of today’s reports, the global number of confirmed cases of COVID-19 has surpassed 100,000. As we mark this sombre moment, the World Health Organization (WHO) reminds all countries and communities that the spread of this virus can be significantly slowed or even reversed through the implementation of robust containment and control activities.

China and other countries are demonstrating that spread of the virus can be slowed and impact reduced through the use of universally applicable actions, such as working across society to identify people who are sick, bringing them to care, following up on contacts, preparing hospitals and clinics to manage a surge in patients, and training health workers.

WHO calls on all countries to continue efforts that have been effective in limiting the number of cases and slowing the spread of the virus.

Every effort to contain the virus and slow the spread saves lives. These efforts give health systems and all of society much needed time to prepare, and researchers more time to identify effective treatments and develop vaccines.

Allowing uncontrolled spread should not be a choice of any government, as it will harm not only the citizens of that country but affect other countries as well.

We must stop, contain, control, delay and reduce the impact of this virus at every opportunity. Every person has the capacity to contribute, to protect themselves, to protect others, whether in the home, the community, the health care system, the workplace or the transport system.

Leaders at all levels and in all walks of life must step forward to bring about this commitment across society.

WHO will continue to work with all countries, our partners and expert networks to coordinate the international response, develop guidance, distribute supplies, share knowledge and provide people with the information they need to protect themselves and others.

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World Bank Group Announces Up to $12 Billion Immediate Support for COVID-19
Country Response

Fast Track Financing for Developing Countries

WASHINGTON, March 3, 2020 — As COVID-19 reaches more than 60 countries, the World Bank Group is making available an initial package of up to $12 billion in immediate support to assist countries coping with the health and economic impacts of the global outbreak. This financing is designed to help member countries take effective action to respond to and, where possible, lessen the tragic impacts posed by the COVID-19 (coronavirus).
Through this new fast track package, the World Bank Group will help developing countries strengthen health systems, including better access to health services to safeguard people from the epidemic, strengthen disease surveillance, bolster public health interventions, and work with the private sector to reduce the impact on economies. The financial package, with financing drawn from across IDA, IBRD and IFC, will be globally coordinated to support country-based responses.

The COVID-19 support package will make available initial crisis resources of up to $12 billion in financing — $8 billion of which is new — on a fast track basis. This comprises up to $2.7 billion new financing from IBRD; $1.3 billion from IDA, complemented by reprioritization of $2 billion of the Bank’s existing portfolio; and $6 billion from IFC, including $2 billion from existing trade facilities. It will also include policy advice and technical assistance drawing on global expertise and country-level knowledge.

“We are working to provide a fast, flexible response based on developing country needs in dealing with the spread of COVID-19,” said World Bank Group President David Malpass. "This includes emergency financing, policy advice, and technical assistance, building on the World Bank Group’s existing instruments and expertise to help countries respond to the crisis.”...

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CEPI welcomes UK Government’s funding and highlights need for $2 billion to develop a vaccine against COVID-19
06 Mar 2020

“It is increasingly clear that containment measures for COVID-19 can only slow down its spread and the virus is now entering a stage of unprecedented threat in terms of its global impact. While we heartily support the range of public health measures that governments are putting in place to protect their populations, it is critical that we also invest in the development of a vaccine that will prevent people from getting sick in the first place. Working as part of the global response, CEPI has committed $100 million of its own funds and moved with unprecedented speed to initiate a programme of vaccine development with the goal of having vaccine candidates in early stage clinical trials in as little as 16 weeks. However, these funds will be fully allocated by the end of March and without immediate additional financial contributions the vaccine programmes we have begun will not be able to progress and ultimately will not deliver the vaccines that the world needs.

Dr. Richard Hatchett
Chief Executive Officer, CEPI

In response to this call, the UK government today announced £20m of additional funding and urged other donors to join the efforts to find a vaccine. This builds on £30 million of funding the UK Government has previously given to CEPI to support its vaccine development work against COVID-19 and other emerging infectious diseases.

Funding call
CEPI was founded as a global partnership between public, private, philanthropic, and civil society organisations to accelerate the development of vaccines against emerging infectious diseases and enable equitable access to these vaccines for people during outbreaks. CEPI has become the lead actor on COVID-19 vaccine development and has the institutional expertise,
networks, and agility to move rapidly. However, while CEPI has begun the process by supporting 4 vaccine candidates with more programmes due to be announced, without additional funding no programme will be able to progress through the earliest phase of clinical testing.

Today’s call for $2 billion of new funding will enable CEPI to expand the number of vaccine candidates at the outset to increase our chances of success, and to fund the clinical trials for these candidate vaccines. Our ambition is to have at least 3 vaccine candidates, which could be submitted to regulatory authorities for licensure for general use/use in outbreaks.

**CEPI has identified five funding phases:**

**$100m immediately, to support**
- Vaccine development for 8 candidates through phase 1 clinical trials

**$375m by END OF MARCH, to support**
- Manufacturing of clinical trial material for phase 2/3 trials for 4-6 vaccine candidates
- Preparation of phase 2/3 trials for 4-6 vaccine candidates (potential initiation of phase 2 trial for 1 candidate)
- Initial investments to expand global manufacturing capacity. These investments are needed to ensure the vaccine is ultimately available at scale and globally

**$400m by END OF JUNE, to support**
- Execution of phase 2/3 trials for at least 2 candidates
- Preparation of phase 2/3 clinical trials in a number of locations globally
- Production of additional phase 2/3 clinical trial material
- Further investment in scaling up / technology transfer of manufacturing process for up to 6 candidates

**$400m by END OF SEPTEMBER, to support**
- Conduct of phase 2/3 clinical trials for additional 4 candidates in a number of locations globally
- Investment in large-scale manufacturing capacity for at least 3 vaccine candidates

**$500-750m in 2021, to support**
- Enhancing global manufacturing capacity with tech transfer to geographically distributed locations of up to 3 candidates
- Completion of clinical trial testing
- Completion of regulatory and quality requirements for at least 3 vaccines
- Preparation of regulatory dossiers for emergency authorization/licensure submission

To ensure availability of funds and reflecting the many uncertainties that still surround COVID-19, the World Bank has created a financial vehicle whereby funds can be returned to donors if not used for the response or if the epidemiological picture changes and vaccine development is deemed unwarranted.

Alternatively, at the donor’s discretion, funds may be retained at the World Bank for use in a future Disease X scenario...
UN releases $15 million to help vulnerable countries battle the spread of the coronavirus

NEW YORK / GENEVA, 1 March 2020 – UN Humanitarian Chief Mark Lowcock today released US$15 million from the Central Emergency Response Fund (CERF) to help fund global efforts to contain the COVID-19 virus.

The announcement came as the World Health Organization (WHO) upgraded the global risk of the coronavirus outbreak to "very high" – its top level of risk assessment. The WHO has said there is still a chance of containing the virus if its chain of transmission is broken.

The sudden increases of cases in Italy, the Islamic Republic of Iran and the Republic of Korea are deeply concerning. There are now cases linked to Iran in Bahrain, Iraq, Kuwait and Oman, along with cases linked to Italy in Algeria, Austria, Croatia, Germany, Spain and Switzerland.

The UN funding has been released to the WHO and the United Nations Children’s Fund (UNICEF). It will fund essential activities including monitoring the spread of the virus, investigating cases, and the operation of national laboratories.

The WHO has called for US$675 million to fund the fight against coronavirus. There is a window of opportunity to contain the spread of the virus if countries take robust measures to detect cases early, isolate and care for patients, and trace contacts.

Emergency Relief Coordinator and Under-Secretary-General for Humanitarian Affairs, Mark Lowcock said: “We do not yet see evidence that the virus is spreading freely. As long as that’s the case, we still have a chance of containing it.

“But swift and robust action must be taken to detect cases early, isolate and care for patients, and trace contacts. We must act now to stop this virus from putting more lives at risk...

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

News
March 7: Daily briefing on novel coronavirus cases in China
On March 6, 31 provincial-level regions on the Chinese mainland as well as the Xinjiang Production and Construction Corps reported 99 new cases of confirmed infections, 99 new cases of suspected infections, and 28 deaths.

Xi calls for accelerated vaccine push
Updated: 2020-03-03  China Daily
President inspects research facilities, listens to scientists
President Xi Jinping stressed the importance of medical research on the diagnosis and treatment of novel coronavirus pneumonia on March 2.
Xi, who is also general secretary of the Communist Party of China Central Committee and chairman of the Central Military Commission, inspected the Academy of Military Medical Sciences and Tsinghua University School of Medicine, learning about progress on the vaccine, antibodies, medicine and fast testing kit research and applications.

Xi then chaired a symposium to listen to views and advice from officials and researchers. The most powerful weapon to fight diseases is science and technology, Xi said, adding that mankind's victory over disasters and epidemics relies on scientific development technological innovation.

He said scientific research on COVID-19 is a major and urgent task, and he required coordinated efforts to speed up such measures.

At the Academy of Military Medical Sciences, Xi said science and technology are the key to increase the recovery rate, decrease the fatality rate and finally defeat the disease.

... Xi said that trying to save more patients remains the top priority, and medical research should be integrated with clinical treatment. He urged more coordinated efforts to apply research to clinical treatment, speed up research on medicines and promote the integration of traditional Chinese and Western medicines.

The safety of a vaccine should be a top priority, Xi said. He instructed researchers to speed the development of a vaccine and closely follow vaccine research in other countries to promote clinical trials and application of a vaccine as early as possible.

He required establishment of a national vaccine reserve system and preparations for the possibility of regular prevention and control work.

Xi said new technologies like artificial intelligence and big data should be used to clarify where the virus came from and where it may go. He stressed the importance of psychological health for patients, family members and people in quarantine for a long time...

[==]*[U.S.] White House

Remarks by President Trump After Tour of the Centers for Disease Control and Prevention | Atlanta, GA
Mar 7, 2020

Press Briefing by Vice President Pence and Members of the White House Coronavirus Task Force
Mar 6, 2020

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

Ebola Outbreak in DRC 82: 01 March 2020
[Excerpts]

Situation Update
From 24 February to 1 March 2020, no new confirmed cases of Ebola virus disease (EVD) were reported in the Democratic Republic of the Congo (Figure 1). In the past 21 days (10 February to 1 March), the outbreak has been confined to a relatively small geographic area. During this period, two new confirmed cases were reported from one health area in Beni Health Zone, North Kivu Province (Figure 2, Table 1). It has been more than 42 days since new cases were detected in all health zones except Beni and Mabalako, though surveillance activities are ongoing in all health zones to avoid resurgence of the outbreak...

Conclusion
While there is room for cautious optimism around the absence of new confirmed cases this week, the outbreak remains active and risks of additional cases emerging remain high. Response activities must be maintained in all health zones.

::: WHO: End in sight, but flare-ups likely in the Ebola outbreak in the Democratic Republic of the Congo
6 March 2020  Statement
Remarks by Dr Ibrahima Socé Fall, World Health Organization Assistant Director-General, Emergency Response
[Excerpt]

...This work is continuing. The outbreak isn’t over. WHO recommends waiting two full incubation periods - that’s 42 days - after the last person tests negative a second time before declaring the end of the outbreak.

We must stay in active response mode to get us over that finish line. We have to be prepared for other cases emerging. It’s is a very real risk.

Remember that during the Ebola outbreak in West Africa flare-ups of new cases occurred after the end of the outbreak.

There are four reasons why new cases may emerge during this 42-day period, or even after the end of the outbreak:
First, because of the complex security environment, Ebola transmission outside of groups under monitoring is possible.

Second, Ebola virus can persist in used needles, syringes or vials for several weeks.

Third, Ebola virus can persist in the body fluids of survivors for many months, and can be transmitted well after recovery, or in rare cases can result in relapse - as we’ve already seen during this outbreak.
Finally, Ebola virus is present in an animal reservoir in the region, and there is always a risk of a new spillover to humans.

This is why it’s critical to maintain surveillance and rapid response capacities...

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Emergencies

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

Polio this week as of 04 March 2020
:: In May 2019, Iran reported an isolation of a wild poliovirus type1 in a sewage sample from Sistan & Balochistan province. The virus was confirmed to be genetically linked to the wild poliovirus from Karachi, Pakistan. This development, per existing global polio programme guidelines, triggered opening of an ‘Event’. After months of consultations and a high level of poliovirus surveillance sensitivity, the event has now been declared closed therefore eliminating Iran from the list of outbreak countries.

Summary of new viruses this week (AFP cases and ES positives):
:: Afghanistan: two WPV1 cases
:: Pakistan: four WPV1 cases, 16 WPV1 positive environmental samples and six cVDPV2 cases
:: Somalia: one cVDPV2 positive environmental sample
:: Angola: one cVDPV2 case and two cVDPV2 positive environmental samples
:: Chad: four cVDPV2 cases
:: Côte d'Ivoire: one cVDPV2 positive environmental sample
:: Democratic Republic of the Congo: two cVDPV2 cases
:: Ethiopia: one cVDPV2 case
:: Malaysia: three cVDPV1 positive environmental samples

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WHO Grade 3 Emergencies [to 7 Mar 2020]
Democratic Republic of the Congo
:: Ebola Outbreak in DRC 82: 01 March 2020
[See Ebola above for detail]

Nigeria - No new digest announcements identified
Mozambique floods - 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 7 Mar 2020]

**Iran**
:: WHO team arrives in Tehran to support the COVID-19 response 2 March 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
Iraq     - No new digest announcements identified
Libya    - No new digest announcements identified
Malawi   - No new digest announcements identified
Measles in Europe - No new digest announcements identified
MERS-CoV  - No new digest announcements identified
Myanmar  - No new digest announcements identified
Niger    - No new digest announcements identified
occupied Palestinian territory - No new digest announcements identified
Sudan    - No new digest announcements identified
Ukraine  - No new digest announcements identified
Zimbabwe - No new digest announcements identified


**WHO Grade 1 Emergencies** [to 7 Mar 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: COVID-19 Update No. 01 - 2 March 2020
:: Recent Developments in Northwest Syria Flash Update - As of 5 March 2020

**Yemen**
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 IDAI and Kenneth - No new digest announcements identified
EBOLA OUTBREAK IN THE DRC - No new digest announcements identified

WHO & Regional Offices [to 7 Mar 2020]
3 March 2020  News release
Shortage of personal protective equipment endangering health workers worldwide
Geneva
WHO calls on industry and governments to increase manufacturing by 40 per cent to meet rising global demand

The World Health Organization has warned that severe and mounting disruption to the global supply of personal protective equipment (PPE) – caused by rising demand, panic buying, hoarding and misuse – is putting lives at risk from the new coronavirus and other infectious diseases.

Healthcare workers rely on personal protective equipment to protect themselves and their patients from being infected and infecting others.

But shortages are leaving doctors, nurses and other frontline workers dangerously ill-equipped to care for COVID-19 patients, due to limited access to supplies such as gloves, medical masks, respirators, goggles, face shields, gowns, and aprons.

“Without secure supply chains, the risk to healthcare workers around the world is real. Industry and governments must act quickly to boost supply, ease export restrictions and put measures in place to stop speculation and hoarding. We can’t stop COVID-19 without protecting health workers first,” said WHO Director-General Dr Tedros Adhanom Ghebreyesus...

1 March 2020  News release
UN releases US$15 million to help vulnerable countries battle the spread of the coronavirus
[See COVID-19 above for detail]

Weekly Epidemiological Record, 6 March 2020, vol. 95, 10 (pp. 89–96)
89 Measuring capacity to implement the International Health Regulations (2005): a comparison of data from annual reporting and joint external evaluation
94 COVID-19 update
94 Monthly report on dracunculiasis cases, January 2020
WHO Regional Offices
Selected Press Releases, Announcements

WHO African Region AFRO
:: WHO and key health partners join forces to fight COVID-19 in Africa  06 March 2020
:: Inoculating against the 'infodemic' in Africa  05 March 2020
:: The Democratic Republic of the Congo’s last Ebola patient discharged  03 March 2020
:: Senegal reports first COVID-19 case  02 March 2020

WHO Region of the Americas PAHO
:: PAHO Director: The Americas must prepare to respond to imported cases, outbreaks and community transmission of COVID-19 (03/07/2020)
:: Communicating the risks to health posed by COVID-19 is key to protecting populations and mitigating spread (03/06/2020)
:: A tool to investigate outbreaks, Go.Data, is rolled out for COVID-19 in Latin America :: PAHO/WHO and Mexico strengthen laboratory capacity to detect yellow fever in the Americas (03/02/2020)

WHO South-East Asia Region SEARO
:: WHO emphasizes on agile response capacities, as South-East Asia Region confirms more COVID-19 cases  4 March 2020  News release
   New Delhi - With India, Indonesia and Thailand confirming new cases of COVID-19, World Health Organization today asked countries in its South-East Asia Region to strengthen preparedness for all possible scenarios and ensure early containment measures.

WHO European Region EURO
:: WHO rapid response team concludes mission to Italy for COVID-19 response  06-03-2020
:: Where do we stand on women’s health in 2020?  06-03-2020
:: Statement at ministerial briefings on COVID-19  06-03-2020
:: WHO/Europe hosts coronavirus briefing for ambassadors  05-03-2020

WHO Eastern Mediterranean Region EMRO
:: Joint agreement bolsters malaria prevention and control efforts in Yemen  5 March 2020
:: WHO supports patients in Yemen with lifesaving dialysis treatment  3 March 2020
:: WHO team arrives in Tehran to support the COVID-19 response  3 March 2020
:: Pakistan confirms first two cases of COVID-19  1 March 2020

WHO Western Pacific Region
No new digest content identified.

CDC/ACIP [to 7 Mar 2020]
http://www.cdc.gov/media/index.html
https://www.cdc.gov/vaccines/acip/index.html
Latest News Releases
CDC Announces Additional COVID-19 Infections
Tuesday, March 3, 2020
Transcript for the CDC Telebriefing Update on COVID-19
Tuesday, March 3, 2020

MMWR News Synopsis  Friday, March 6, 2020
:: Intervention To Stop Transmission of Imported Pneumonic Plague — Uganda, 2019
:: Active Monitoring of Persons Exposed to Patients with Confirmed COVID-19 — United States, January–February 2020

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Africa CDC  [to 7 Mar 2020]
http://www.africacdc.org/
News
Outbreak: Update on the ongoing Novel Coronavirus Global Epidemic (Issue 7, 3 March 2020)
03-03-2020
...To date, 30 countries in Africa have reported persons under investigation (PUI) for COVID-19: Algeria, Angola, Botswana, Burkina Faso, Cameroon, Côte d’Ivoire, DRC, Egypt, Equatorial Guinea, Eswatini, Ethiopia, Gabon, Ghana, Guinea, Kenya, Lesotho, Madagascar, Mali, Mauritius, Morocco, Mozambique, Namibia, Nigeria, South Africa, Senegal, Seychelles, South Sudan, Sudan, Tunisia, Uganda, Zimbabwe.

The only countries reporting PUIs with a positive test for SARS-CoV-2 over the last week were: Algeria (3), Egypt (1), Morocco (1), Nigeria (1), Senegal (1), and Tunisia (1)...

Africa CDC has been in contact with all affected countries and is mobilizing laboratory, surveillance, and other response support where requested...

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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
March 7: Daily briefing on novel coronavirus cases in China
On March 6, 31 provincial-level regions on the Chinese mainland as well as the Xinjiang Production and Construction Corps reported 99 new cases of confirmed infections, 99 new cases of suspected infections, and 28 deaths.

Xi calls for accelerated vaccine push
Updated: 2020-03-03  China Daily
President inspects research facilities, listens to scientists
[See COVID-19 above for detail]
Announcements

Paul G. Allen Frontiers Group  [to 7 Mar 2020]
Press Release
Competition yields new approaches to trace development, cell by cell
March 4, 2020
The Allen Institute and Sage Bionetworks announced winners of the Allen Institute Cell Lineage Reconstruction DREAM Challenge

BMGF - Gates Foundation  [to 7 Mar 2020]
http://www.gatesfoundation.org/Media-Center/Press-Releases
MARCH 04, 2020
Bill & Melinda Gates Foundation Commits $5 Million to Help Public Health Agencies in Greater Seattle Area Respond to COVID-19
SEATTLE March 4, 2020 – The Bill & Melinda Gates Foundation announced today that it will commit an additional $5 million to help public health agencies in the greater Seattle region enhance their capacity to detect novel coronavirus (COVID-19) in King County, Snohomish County and other surrounding communities.

Bill & Melinda Gates Medical Research Institute  [to 7 Mar 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
No new digest content identified.

CARB-X  [to 7 Mar 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 7 Mar 2020]
http://cepi.net/
News
CEPI welcomes UK Government’s funding and highlights need for $2 billion to develop a vaccine against COVID-19
06 Mar 2020
[See COVID-19 above for detail]

**Clinton Health Access Initiative, Inc. (CHAI)** [to 7 Mar 2020]
https://clintonhealthaccess.org/
News & Press Releases
No new digest content identified.

**EDCTP** [to 7 Mar 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*
3 March 2020
**International research partnership and EDCTP to invest €44 million in next-generation antimalarials to combat drug-resistant malaria in Africa**
:: EDCTP grants the PAMAfrica research consortium €21.9 million over a five year period; MMV, Novartis and other partners will provide an additional €22 million.
:: The PAMAfrica consortium brings together a global medicines company, a not-for-profit product development partnership and leading academic institutions in Africa and Europe. PAMAfrica aims to develop new medicines for both severe and uncomplicated malaria, designed to combat emerging artemisinin resistance.
:: The projects will include the development of the first new malaria treatment for babies under 5kg, a new fast-acting medicine for the treatment of severe malaria, and new combinations to treat drug-resistant uncomplicated malaria

[PDF version]

**Emory Vaccine Center** [to 7 Mar 2020]
http://www.vaccines.emory.edu/
No new digest content identified.

**European Medicines Agency** [to 7 Mar 2020]
News & Press Releases
No new digest content identified.

**European Vaccine Initiative** [to 7 Mar 2020]
http://www.euvaccine.eu/news-events
No new digest content identified.

**FDA** [to 7 Mar 2020]
Today, in a joint effort, the U.S. Food and Drug Administration and the Centers for Disease Control and Prevention took action to make more respirators, including certain N95s, available to health care personnel. Currently, the majority of respirators on the market are indicated for use in industrial settings. Today’s action allows certain National Institute for Occupational Safety and Health (NIOSH) approved respirators not currently regulated by the FDA to be used in a health care setting by health care personnel during the coronavirus (COVID-19) outbreak, thereby maximizing the number of respirators available to meet the needs of the U.S. health care system...

**Fondation Merieux** [to 7 Mar 2020]
http://www.fondation-merieux.org/
*News, Events*
No new digest content identified.

**Gavi** [to 7 Mar 2020]
https://www.gavi.org/
No new digest content identified.

**GHIT Fund** [to 7 Mar 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 7 Mar 2020]
*News & Stories*
**Feature Story**
**COVID-19 Threatens the Poor and Marginalized More than Anyone**
06 March 2020

**Feature Story**
**Women Leading the Fight for Better Health**
06 March 2020

*Sourcing & Management of Health Products*
**COVID-19 Impact on Supply Chain Logistics**
06 March 2020
The global response to control the outbreak of the new coronavirus, COVID-19, may influence health product supply chains including logistics and shipping, as almost all finished health products or ingredients used in health products originate from China.
As a precautionary measure, we recommend that all Global Fund implementing partners place orders 30 days earlier than normal to better manage any disturbances that may emerge in being able to deliver products on-time...

**News**

**Global Fund Issues New Guidance in Response to COVID-19**

04 March 2020

GENEVA – The Global Fund announced today new guidance to enable countries to strengthen their response to the new coronavirus, COVID-19, by using existing grants in a swift, nimble and pragmatic way.

Working within its mandate to fight HIV, TB and malaria and to strengthen systems for health, the Global Fund is encouraging countries to reprogram savings from existing grants and to redeploy underutilized resources to mitigate the potential negative consequences of COVID-19 on health and health systems. In exceptional cases, countries may be able to reprogram funding from existing grants to COVID-19 response...

**Hilleman Laboratories** [to 7 Mar 2020]

http://www.hillemanlabs.org/

*No new digest content identified.*

**Human Vaccines Project** [to 7 Mar 2020]

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

*Press Releases*

*No new digest content identified.*

**IAVI** [to 7 Mar 2020]

https://www.iavi.org/newsroom

March 5, 2020

**IAVI and Batavia Biosciences Announce Collaboration on VSV-vector Based Epidemic Preparedness Vaccines**

*Mutual expertise drives innovations to address supply issues for vaccines for outbreak pathogens*

NEW YORK — MARCH 5, 2020 — IAVI, a nonprofit scientific research organization dedicated to addressing urgent, unmet global health challenges, and Batavia Biosciences, a contract development and manufacturing organization focused on delivering sustainable manufacturing solutions in the field of infectious disease and cancer, today announced their partnership to accelerate the development of vaccines for emerging infectious diseases (EIDs).

By working with Batavia Biosciences to leverage their state-of-the-art manufacturing approach for highly intensified, modular vaccine production, IAVI intends to develop an end-to-end platform for flexible, low-cost production of epidemic preparedness vaccines, including vaccines against a group of viruses that cause hemorrhagic fevers and other emerging viral disease threats. Importantly, collaborating on these vaccines and developing the platform will also enable these two institutions to accelerate the development of a vaccine candidate to address the rapidly growing coronavirus disease (COVID-19) outbreak...
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 7 Mar 2020]
Selected Press Releases, Announcements
Europe, Greece, Turkey
Greece-Turkey Border: Migrants must not be used as a political tool. The EU and Member States must act in solidarity now.
   Geneva/Budapest, 3 March 2020 – Women, children and men caught up in the ongoing humanitarian crisis at the land border between Greece and Turkey, in the Greek islands and in the Aegean Sea must not be “used as a political tool”, the International Fede ... 3 March 2020

IVAC  [to 7 Mar 2020]
https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html
Updates
No new digest content identified.

IVI  [to 7 Mar 2020]
http://www.ivi.int/
Selected IVI News & Announcements
International Vaccine Institute and Technical University of Denmark to strengthen external quality assurance in the face of rising antimicrobial resistance in Asia
:: The Asia Pacific region is vulnerable to the emergence and spread of AMR but there is little high-quality data available on the extent of its impact
:: Quality-assured data is essential for building tailored strategies for preventing the spread of drug-resistant infections
:: IVI is part of three active Fleming Fund Regional Grants to enhance surveillance and close gaps in confronting the growing challenges of AMR in low- and middle-income countries
March 5, 2020, SEOUL, Korea – The International Vaccine Institute (IVI) and the Technical University of Denmark’s (DTU) National Food Institute announced today a joint effort to strengthen external quality assurance programs for diagnostic laboratories in Asia to confront the challenges of rising antimicrobial resistance (AMR) in the region. The partnership was established following the award of a Fleming Fund Regional Grant with DTU as the lead grantee and will carry out the project under the name EQASIA (Strengthening External Quality Assurance for AMR in Asia)...

**JEE Alliance**  [to 7 Mar 2020]
https://www.jeealliance.org/
Selected News and Events
No new digest content identified.

**MSF/Médecins Sans Frontières**  [to 7 Mar 2020]
http://www.msf.org/
Latest [Selected Announcements]
**Haiti**
**Port-au-Prince: Over 360 people admitted for lifesaving care in three months ...**
Project Update 6 Mar 2020

Non-communicable diseases
**Why are so many women dying of cervical cancer?**
Project Update 5 Mar 2020

**Afghanistan**
**Afghans face impossible choices in their struggle for medical care**
Press Release 5 Mar 2020

**Afghanistan**
**Reality check: Afghanistan's neglected healthcare crisis**
Report 5 Mar 2020

**Greece**
**EU must address migration emergency as Greek islands reach bre...**
Statement 4 Mar 2020

**Social violence and exclusion**
**Violence in southwestern Colombia leaves people struggling to access ass...**
Statement 3 Mar 2020

**South Sudan**
**Thousands flee into the bush as conflict intensifies in east South...**
Statement 2 Mar 2020

**Syria**
**People in northwestern Syria forced to move as frontlines move**
Voices from the Field 2 Mar 2020

Libya

*Arbitrary detention in Libya must end as asylum seeker dies in d...*

Press Release 2 Mar 2020

**National Vaccine Program Office** - U.S. HHS  [to 7 Mar 2020]
https://www.hhs.gov/vaccines/about/index.html

**NVAC 2020 Meetings**

**June 9-10, 2020 NVAC Meeting**
**September 23-24, 2020 Meeting (Virtual)**

**NIH**  [to 7 Mar 2020]

*Selected News Releases*

*Selected Announcements*

No new digest content identified.

**PATH**  [to 7 Mar 2020]
https://www.path.org/media-center/

*Selected Announcements*

No new digest content identified.

**Sabin Vaccine Institute**  [to 7 Mar 2020]
http://www.sabin.org/updates/pressreleases

*Statements and Press Releases*

**Sabin Vaccine Institute Strengthens Ebola Sudan and Marburg Vaccines Program with Additional NIAID Partnership**

Thursday, March 5, 2020

WASHINGTON, D.C. – The Sabin Vaccine Institute (Sabin) today announced that it has partnered with the Vaccine Research Center (VRC), National Institute of Allergy and Infectious Diseases (NIAID), to manufacture prototype ChAd3 vectored Ebola Sudan and Marburg vaccines to be used for further clinical evaluation and outbreak preparedness and to potentially protect military, first responders, health care and laboratory workers, and other at-risk populations. Sabin will receive $5.3 million to manufacture Ebola Sudan and Marburg vaccines for the VRC...

**UNAIDS**  [to 7 Mar 2020]
http://www.unaids.org/en

*Selected Press Releases/Reports/Statements*

6 March 2020

**HIV data check in Papua New Guinea’s National Capital District**

5 March 2020
Community project helps families respond to stigma and discrimination

Raising the voices of women at the forefront of climate change

3 March 2020

Breaking the vicious cycle of HIV-related stigma in Tajikistan

Hollaback! Jakarta working to end harassment against women

Decriminalization works, but too few countries are taking the bold step

2 March 2020

Services tailored for women who inject drugs in India

UNICEF [to 7 Mar 2020]
https://www.unicef.org/media/press-releases

Statement

Statement by Charlotte Petri Gornitzka, UNICEF Deputy Executive Director for Partnerships, on coronavirus misinformation

NEW YORK, 6 March 2020 – “All around the world, people are taking necessary precautions to protect themselves and their families from coronavirus. Sound preparation, based on scientific evidence, is what is needed at this time.

“However, while many people are sharing information about the virus and how to protect against it, only some of that information is useful or reliable. Misinformation during times of a health crisis can spread paranoia, fear, and stigmatization. It can also result in people being left unprotected or more vulnerable to the virus.

“For example, a recent erroneous online message circulating in several languages around the world and purporting to be a UNICEF communication appears to indicate, among other things, that avoiding ice cream and other cold foods can help prevent the onset of the disease. This is, of course, wholly untrue.

“To the creators of such falsehoods, we offer a simple message: STOP. Sharing inaccurate information and attempting to imbue it with authority by misappropriating the names of those in a position of trust is dangerous and wrong.

“To members of the public, we ask that you seek accurate information about how to keep yourself and your family safe from verified sources, such as UNICEF or WHO, government health officials and trusted healthcare professionals; and that you refrain from sharing information from untrustworthy or unverified sources...

Press release

Panama sees more than seven-fold increase in number of migrant children crossing through Darien Gap

Nearly 24,000 people from more than 50 nationalities, 16 per cent of whom are children, crossed the dangerous jungle in 2019

05/03/2020
UNICEF, WFP chiefs wrap up two-day visit to Syria, see impact of conflict on children and families
UN officials call for cessation of hostilities and protection of children as conflict is about to enter its 10th year
05/03/2020

Press release
25 years of uneven progress: Despite gains in education, world still a violent, highly discriminatory place for girls
Two and a half decades after the historic Beijing women’s conference, violence against women and girls still not only common, but accepted
03/03/2020

Statement
Protecting children must be top priority, in latest refugee surge response
Statement by Ms. Afshan Khan, UNICEF Regional Director for Europe and Central Asia and Special Coordinator for the Refugee and Migrant Response in Europe
03/03/2020

Press release
Lack of quality data compounds risks facing millions of refugee and migrant children
UNICEF, IOM, UNHCR, OECD, countries and other partners join forces to protect children through the International Data Alliance on Children on the Move
02/03/2020

Press release
UN releases $15 million to help vulnerable countries battle the spread of the coronavirus
01/03/2020
[See COVID-19 above for detail]

Vaccination Acceptance Research Network (VARN)  [to 7 Mar 2020]
https://vaccineacceptance.org/news.html#header1-2r
Announcements
No new digest content identified.

Vaccine Confidence Project  [to 7 Mar 2020]
http://www.vaccineconfidence.org/
Latest News & Archive
No new digest content identified.

Vaccine Education Center – Children’s Hospital of Philadelphia  [to 7 Mar 2020]
http://www.chop.edu/centers-programs/vaccine-education-center
No new digest content identified.
Lab leaders must create open and safe spaces to improve research culture
by Ricardo Henriques

The Wistar Institute
Press Releases
No new digest content identified.

World Organisation for Animal Health (OIE)
Press Releases
No new digest content identified.

ARM [Alliance for Regenerative Medicine]
The Alliance for Regenerative Medicine Releases 2019 Annual Report and Sector Year in Review
March 5, 2020

BIO
BIO Asia Conference in Tokyo Cancelled Amid COVID-19 Outbreak
Washington, DC – February 21, 2020 - The Biotechnology Innovation Organization (BIO) announced today, it is canceling the annual BIO Asia conference in Tokyo scheduled for March 10-11. The decision was based on the global impact of COVID-19 and Japanese government recommendations.

“Our attendees’ health and safety are our utmost priority,” said Jim Greenwood, BIO President & CEO. “We offer our support and sympathy to all of those who’ve been impacted by the virus around the world.”

DCVMN – Developing Country Vaccine Manufacturers Network
No new digest content identified.
PhRMA  [to 7 Mar 2020]
http://www.phrma.org/
Selected Press Releases, Statements
ICYMI: Continued biopharmaceutical action on COVID-19
Andrew Powaleny  |  March 6, 2020

This week, PhRMA and senior executives and researchers from four member companies met with key policy makers on Capitol Hill to discuss the industry’s response to COVID-19, caused by a novel strain of coronavirus. Daniel O’Day of Gilead Sciences, Julie Louise Gerberding, M.D., M.P.H. of Merck & Co., Inc, Paul Stoffels, M.D. of Johnson & Johnson, John Shiver, Ph.D. of Sanofi Pasteur and Steve Ubl of PhRMA were crucial contributors to the dialogue and offered updates and insights on their companies’ and the industry’s progress in the fight against the coronavirus...

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

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

American Journal of Infection Control
http://www.ajicjournal.org/current
[Reviewed earlier]

American Journal of Preventive Medicine
March 2020 Volume 58, Issue 3, p313-472
http://www.ajpmonline.org/current
[Reviewed earlier]

American Journal of Public Health
March 2020  110(33)
BMJ Global Health
March 2020 - Volume 5 - 3
https://gh.bmj.com/content/5/2

Editorial
Making sense of emerging evidence on the non-specific effects of the BCG vaccine on malaria risk and neonatal mortality (5 March, 2020)
Quique Bassat, Gemma Moncunill, Carlota Dobaño

Analysis
Ending TB in Southeast Asia: current resources are not enough (5 March, 2020)
Vineet Bhatia, Rahul Srivastava, K Srikanth Reddy, Mukta Sharma, Partha Pratim Mandal, Natasha Chhabra, Shubhi Jhalani, Sandip Mandal, Nimalan Arinaminpathy, Tjandra Yoga Aditama, Swarup Sarkar

Original research
Seasonal variation in the non-specific effects of BCG vaccination on neonatal mortality: three randomised controlled trials in Guinea-Bissau (5 March, 2020)
Kristoffer Jarlov Jensen, Sofie Biering-Sørensen, Johan Ursing, Poul-Erik Lund Kofoed, Peter Aaby, Christine Stabell Benn

BMC Health Services Research
http://www.biomedcentral.com/bmchealthservres/content
(Accessed 7 Mar 2020)
Knowledge implementation in health care management: a qualitative study
The gap between knowledge and practice is a global issue, which increases wasteful spending in healthcare. There are several models and frameworks to address this gap and try to solve the challenge. Promoting ...
Authors: G. Roohi, G. Mahmoodi and H. Khoddam
Citation: BMC Health Services Research 2020 20:188
Content type: Research article
Published on: 6 March 2020

BMC Infectious Diseases
http://www.biomedcentral.com/bmcinfectdis/content
(Accessed 7 Mar 2020)
[No new digest content identified]

BMC Medical Ethics
http://www.biomedcentral.com/bmcmedethics/content
(Accessed 7 Mar 2020)
A systematic review of patient access to medical records in the acute setting: practicalities, perspectives and ethical consequences
Internationally, patient access to notes is increasing. This has been driven by respect for patient autonomy, often recognised as a primary tenet of medical ethics: patients should be able to access their records to be fully engaged with their care. While research has been conducted on
the impact of patient access to outpatient and primary care records and to patient portals, there is no such review looking at access to hospital medical records in real time, nor an ethical analysis of the issues involved in such a change in process.

Authors: Stephanie N. D’Costa, Isla L. Kuhn and Zoë Fritz

Content type: Research article

2 March 2020

**BMC Medicine**

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

(Accessed 7 Mar 2020)

**Quantifying the economic cost of antibiotic resistance and the impact of related interventions: rapid methodological review, conceptual framework and recommendations for future studies**

Antibiotic resistance (ABR) poses a major threat to health and economic wellbeing worldwide. Reducing ABR will require government interventions to incentivise antibiotic development, prudent antibiotic use, in...

Authors: Mark Jit, Dorothy Hui Lin Ng, Nantasit Luangasanatip, Frank Sandmann, Katherine E. Atkins, Julie V. Robotham and Koen B. Pouwels

Citation: BMC Medicine 2020 18:38

Content type: Correspondence

Published on: 6 March 2020

**BMC Pregnancy and Childbirth**

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

(Accessed 7 Mar 2020)

[No new digest content identified]

**BMC Public Health**

http://bmcpublichealth.biomedcentral.com/articles

(Accessed 7 Mar 2020)

**Knowledge about cervical cancer and HPV immunization dropout rate among Brazilian adolescent girls and their guardians**

Infections with Human Papillomavirus (HPV) are the main cause of cervical cancer. Since 2014, the HPV vaccine was introduced in the Brazilian National Vaccination Calendar. The purpose of this study was to ass...

Authors: Ana Carolina da Silva Santos, Nayara Nascimento Toledo Silva, Cláudia Martins Carneiro, Wendel Coura-Vital and Angélica Alves Lima

Citation: BMC Public Health 2020 20:301

Content type: Research article

Published on: 6 March 2020

**Are countries’ self-reported assessments of their capacity for infectious disease control reliable? Associations among countries’ self-reported international health regulation 2005 capacity assessments and infectious disease control outcomes**
This study aimed to evaluate associations among countries’ self-reported International Health Regulation 2005 (IHR 2005) capacity assessments and infectious disease control outcomes.

Authors: Feng-Jen Tsai and Mathuros Tipayamongkholgul
Citation: BMC Public Health 2020 20:282
Content type: Research article
Published on: 4 March 2020

BMC Research Notes
http://www.biomedcentral.com/bmcresnotes/content
(Accessed 7 Mar 2020)
[No new digest content identified]

BMJ Open
March 2020 - Volume 10 - 3
http://bmjopen.bmj.com/content/current
[New issue; No digest content identified]

Bulletin of the World Health Organization
Volume 98, Number 3, March 2020, 149-228
https://www.who.int/bulletin/volumes/98/3/en/
EDITORIALS
Data sharing for novel coronavirus (COVID-19)
— Vasee Moorthy, Ana Maria Henao Restrepo, Marie-Pierre Preziosi & Soumya Swaminathan
http://dx.doi.org/10.2471/BLT.20.251561

A disclosure form for work submitted to medical journals – a proposal from the International Committee of Medical Journal Editors
http://dx.doi.org/10.2471/BLT.20.252353

RESEARCH
Measuring antibiotic availability and use in 20 low- and middle-income countries
— Rebecca Knowles, Mike Sharland, Yingfen Hsia, Nicola Magrini, Lorenzo Moja, Amani Siyam & Elizabeth Tayler
http://dx.doi.org/10.2471/BLT.19.241349

Child Care, Health and Development
Volume 46, Issue 2 Pages: 155-248 March 2020
https://onlinelibrary.wiley.com/toc/13652214/current
[Reviewed earlier]
Clinical Therapeutics
January 2020 Volume 42, Issue 1, p1-236
http://www.clinicaltherapeutics.com/current
[Reviewed earlier]

Clinical Trials
Volume 17 Issue 1, February 2020
https://journals.sagepub.com/toc/ctja/17/1
[Reviewed earlier]

Conflict and Health
http://www.conflictandhealth.com/
[Accessed 7 Mar 2020]
[No new digest content identified]

Contemporary Clinical Trials
Volume 89   February 2020
[Reviewed earlier]

The CRISPR Journal
Volume 3, Issue 1 / February 2020
https://www.liebertpub.com/toc/crispr/3/1
[Reviewed earlier]

Current Genetic Medicine Reports
Volume 8, Issue 1, March 2020
https://link.springer.com/journal/40142/8/1
[Reviewed earlier]

Current Opinion in Infectious Diseases
April 2020 - Volume 33 - Issue 2
https://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx
[New issue; No digest content identified]

Developing World Bioethics
Volume 19, Issue 4  Pages: 187-247  December 2019
https://onlinelibrary.wiley.com/toc/14718847/current
[Reviewed earlier]
Development in Practice
Volume 30, Issue 1, 2020
http://www.tandfonline.com/toc/cdip20/current
[Reviewed earlier]

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/
[Reviewed earlier]

Disasters
Volume 44, Issue 1  Pages: 1-232  January 2020
https://onlinelibrary.wiley.com/toc/14677717/current
[Reviewed earlier]

EMBO Reports
Volume 21  Issue 2  5 February 2020
https://www.embopress.org/toc/14693178/current
[Reviewed earlier]

Emerging Infectious Diseases
Volume 26, Number 3—March 2020
http://wwwnc.cdc.gov/eid/

Expedited Articles
Potential Presymptomatic Transmission of SARS-CoV-2, Zhejiang Province, China, 2020
Z. Tong et al.
May 2020

COVID-19 in 2 Persons with Mild Upper Respiratory Tract Symptoms on a Cruise Ship, Japan
T. Arashiro et al.
June 2020

Lack of Vertical Transmission of Severe Acute Respiratory Syndrome Coronavirus 2, China
Y. Li et al.
June 2020

Community Transmission of Severe Acute Respiratory Syndrome Coronavirus 2, Shenzhen, China, 2020
J. Liu et al.
June 2020
Epidemics
Volume 29  December 2019
[Reviewed earlier]

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

Ethics & Human Research
Volume 42, Issue 1  Pages: 1-40  January–February 2020
https://onlinelibrary.wiley.com/toc/25782363/current
Off-Trial Access :: Deception :: Crowdsourced Research :: Single IRBs
[Reviewed earlier]

The European Journal of Public Health
Volume 30, Issue 1, February 2020
https://academic.oup.com/eurpub/issue/30/1
[Reviewed earlier]

Gates Open Research
https://gatesopenresearch.org/browse/articles
[Accessed 7 Mar 2020]
[No new digest content identified]

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

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

Global Health: Science and Practice (GHSP)
Vol. 7, No. 4  December 23, 2019
http://www.ghspjournal.org/content/current
[Reviewed earlier]
Global Public Health
Volume 15, 2020  Issue 3
http://www.tandfonline.com/toc/rgph20/current
[Reviewed earlier]

Globalization and Health
http://www.globalizationandhealth.com/
[Accessed 7 Mar 2020]
Public-private knowledge transfer and access to medicines: a systematic review and qualitative study of perceptions and roles of scientists involved in HPV vaccine research
Public research organizations and their interactions with industry partners play a crucial role for public health and access to medicines. The development and commercialization of the Human Papillomavirus (HPV) vaccines illustrate how licensing practices of public research organizations can contribute to high prices of the resulting product and affect accessibility to vulnerable populations. Efforts by the international community to improve access to medicines have recognised this issue and promote the public health-sensitive management of research conducted by public research organizations. This paper explores: how medical knowledge is exchanged between public and private actors; what role inventor scientists play in this process; and how they view the implementation of public health-sensitive knowledge exchange strategies.
Authors: Rosa Jahn, Olaf Müller, Stefan Nöst and Kayvan Bozorgmehr
Content type: Research
5 March 2020

Health Affairs
Vol. 39, No. 3  March 2020
https://www.healthaffairs.org/toc/hlthaff/current
The Affordable Care Act Turns 10
[New issue; No digest content identified]

Health and Human Rights
Volume 21, Issue 2, December 2019
Viewpoints
Human Rights and Coronavirus: What’s at Stake for Truth, Trust, and Democracy?
Alicia Ely Yamin and Roojin Habibi
2 March 2020
Although World Health Organization (WHO) Director General Dr. Tedros Ghebreyesus has called for solidarity, not stigma, it is notable that to date WHO has not issued any substantive guidance on how countries can take public health measures that achieve health protection while respecting human rights.[2] Amid growing public fears, confusion, and misinformation, as well as government reactions that may fuel rather than mitigate intolerance, discrimination and
exclusion, it is critical to set out some key human rights principles and the guidance they provide.[3]

**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 7 Mar 2020]
[No new digest content identified]

**Human Gene Therapy**
Volume 31, Issue 3-4 / February 2020
https://www.liebertpub.com/toc/hum/31/3-4
[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 16, Issue 1, 2020
http://www.tandfonline.com/toc/khvi20/current
[Reviewed earlier]

Infectious Agents and Cancer
http://www.infectagentscancer.com/content
[Accessed 7 Mar 2020]
[No new digest content identified]

Infectious Diseases of Poverty
http://www.idpjournal.com/content
[Accessed 7 Mar 2020]
[No new digest content identified]

International Health
Volume 12, Issue 2, February 2020
https://academic.oup.com/inthealth/issue/12/2
[Reviewed earlier]

International Journal of Community Medicine and Public Health
Vol 7, No 3 (2020) March 2020
https://www.ijcmph.com/index.php/ijcmph/issue/view/60
[Reviewed earlier]
International Journal of Epidemiology
Volume 48, Issue 6, December 2019
https://academic.oup.com/ije/issue/48/6
[Reviewed earlier]

International Journal of Human Rights in Healthcare
Volume 12 Issue 5
https://www.emerald.com/insight/publication/issn/2056-4902/vol/12/iss/5
[Reviewed earlier]

International Journal of Infectious Diseases
March 2020 Volume 92, p1-272
https://www.ijidonline.com/issue/S1201-9712(20)X0002-6
Review
Vaccinating pregnant women against influenza needs to be a priority for all countries: An expert commentary
Philippe Buchy, Selim Badur, George Kassianos, Scott Preiss, John S. Tam
p1–12
Published online: December 18, 2019

Original Reports
Associations between geographic region and immune response variations to pneumococcal conjugate vaccines in clinical trials: A systematic review and meta-analysis
Young June Choe, Daniel B. Blatt, Hoan Jong Lee, Eun Hwa Choi
p261–268
Published in issue: March 2020

JAMA
March 3, 2020, Vol 323, No. 9, Pages 809-902
http://jama.jamanetwork.com/issue.aspx
Drug Pricing
Original Investigation
Profitability of Large Pharmaceutical Companies Compared With Other Large Public Companies
Fred D. Ledley, MD; Sarah Shonka McCoy, PhD; Gregory Vaughan, PhD; et al.
has active quiz
Key Points
Question
How do the profits of large pharmaceutical companies compare with those of other companies from the S&P 500 Index?
Findings
In this cross-sectional study that compared the profits of 35 large pharmaceutical companies with those of 357 large, nonpharmaceutical companies from 2000 to 2018, the median net income (earnings) expressed as a fraction of revenue was significantly greater for pharmaceutical companies compared with nonpharmaceutical companies (13.8% vs 7.7%).

Meaning
Large pharmaceutical companies were more profitable than other large companies, although the difference was smaller when controlling for differences in company size, research and development expense, and time trends.

Abstract
Importance
Understanding the profitability of pharmaceutical companies is essential to formulating evidence-based policies to reduce drug costs while maintaining the industry's ability to innovate and provide essential medicines.

Objective
To compare the profitability of large pharmaceutical companies with other large companies.

Design, Setting, and Participants
This cross-sectional study compared the annual profits of 35 large pharmaceutical companies with 357 companies in the S&P 500 Index from 2000 to 2018 using information from annual financial reports. A statistically significant differential profit margin favoring pharmaceutical companies was evidence of greater profitability.

Exposures
Large pharmaceutical vs nonpharmaceutical companies.

Main Outcomes and Measures
The main outcomes were revenue and 3 measures of annual profit: gross profit (revenue minus the cost of goods sold); earnings before interest, taxes, depreciation, and amortization (EBITDA; pretax profit from core business activities); and net income, also referred to as earnings (difference between all revenues and expenses). Profit measures are described as cumulative for all companies from 2000 to 2018 or annual profit as a fraction of revenue (margin).

Results
From 2000 to 2018, 35 large pharmaceutical companies reported cumulative revenue of $11.5 trillion, gross profit of $8.6 trillion, EBITDA of $3.7 trillion, and net income of $1.9 trillion, while 357 S&P 500 companies reported cumulative revenue of $130.5 trillion, gross profit of $42.1 trillion, EBITDA of $22.8 trillion, and net income of $9.4 trillion. In bivariable regression models, the median annual profit margins of pharmaceutical companies were significantly greater than those of S&P 500 companies (gross profit margin: 76.5% vs 37.4%; difference, 39.1% [95% CI, 32.5%-45.7%]; P < .001; EBITDA margin: 29.4% vs 19%; difference, 10.4% [95% CI, 7.1%-13.7%]; P < .001; net income margin: 13.8% vs 7.7%; difference, 6.1% [95% CI, 2.5%-9.7%]; P < .001). The differences were smaller in regression models controlling for company size and year and when considering only companies reporting research and development expense (gross profit margin: difference, 30.5% [95% CI, 20.9%-40.1%]; P < .001; EBITDA margin: difference, 9.2% [95% CI, 5.2%-13.2%]; P < .001; net income margin: difference, 3.6% [95% CI, 0.011%-7.2%]; P = .05).

Conclusions and Relevance
From 2000 to 2018, the profitability of large pharmaceutical companies was significantly greater than other large, public companies, but the difference was less pronounced when considering company size, year, or research and development expense. Data on the profitability of large
pharmaceutical companies may be relevant to formulating evidence-based policies to make medicines more affordable.

Editorial
Affording Medicines for Today’s Patients and Sustaining Innovation for Tomorrow
Kenneth C. Frazier, JD
Are Pharmaceutical Companies Earning Too Much?
David M. Cutler, PhD

Relentless Prescription Drug Price Increases
Chaarushena Deb; Gregory Curfman, MD

Estimated Research and Development Investment Needed to Bring a New Medicine to Market, 2009-2018
Olivier J. Wouters, PhD; Martin McKee, MD, DSc; Jeroen Luyten, PhD
This study uses publicly available data to analyze research and development spending to win FDA approval and bring new drugs to market between 2009 and 2018.

Research Letter
Sponsorship and Funding for Gene Therapy Trials in the United States
Zachary Kassir, BA; Ameet Sarpatwari, PhD, JD; Brian Kocak, BS; et al.
March 3, 2020
Since 2017, the US Food and Drug Administration (FDA) has approved 4 gene therapies: tisagenlecleucel (Kymriah) and axicabtagene ciloleucel (Yescarta) for cancer, voretigene neparvovec-ryzl (Luxturna) for a genetic form of blindness, and onasemnogene abeparvovec-xioi (Zolgensma) for spinal muscular atrophy. Although clinically transformative, they carry list prices of $475,000, $373,000, $425,000, and $2.1 million, respectively, for 1-time infusions. High development costs and the need to incentivize innovation are common justifications for such prices. However, public funding played an important role in each product’s invention and clinical testing.1-5

JAMA Pediatrics
March 2020, Vol 174, No. 3, Pages 226-308
http://archpedi.jamanetwork.com/issue.aspx
[New issue; No digest content identified]

JBI Database of Systematic Review and Implementation Reports
February 2020 - Volume 18 - Issue 2
https://journals.lww.com/jbisrir/Pages/currenttoc.aspx
[Reviewed earlier]

Journal of Adolescent Health
February 2020 Volume 66, Issue 2, Supplement, S1-S146
Adolescent Health: Transforming Risk to Wellness
11 March 2020 - 14 March 2020
[New issue; No digest content identified]

Journal of Artificial Intelligence Research
Vol. 67 (2020)
https://www.jair.org/index.php/jair
[Reviewed earlier]

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

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Volume 143  March 2020
[New issue; No digest content identified]

Journal of Empirical Research on Human Research Ethics
Volume 15 Issue 1-2, February-April 2020
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Special Issue: Ethical Issues in Social Media Research
[Reviewed earlier]

Journal of Epidemiology & Community Health
March 2020 - Volume 74 - 3
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[New issue; No digest content identified]

Journal of Evidence-Based Medicine
Volume 13, Issue 1  Pages: 1-88  February 2020
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[Reviewed earlier]

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Volume 15, Issue 3, 2019
http://www.tandfonline.com/toc/rige20/current
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[Reviewed earlier]
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Volume 31, Number 1, February 2020
https://muse.jhu.edu/journal/278
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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]

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Volume 221, Issue 3, 1 February 2020
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[New issue; No digest content identified]

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March 2020 - Volume 46 - 3
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[Reviewed earlier]

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Volume 7, Issue 1 (2020)
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[Reviewed earlier]

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March 2020 Volume 218, p1-268, e1-e5
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[New issue; No digest content identified]

Journal of Pharmaceutical Policy and Practice
https://joppp.biomedcentral.com/
[Accessed 7 Mar 2020]
Health Departments’ Experience With Mumps Outbreak Response and Use of a Third Dose of Measles, Mumps, and Rubella Vaccine
Marlow, Mariel A.; Moore, Kelly; DeBolt, Chas; More

CDC Guidance for Use of a Third Dose of MMR Vaccine During Mumps Outbreaks
Marlow, Mariel A.; Marin, Mona; Moore, Kelly; More

Beyond Research Ethics: Novel Approaches of 3 Major Public Health Institutions to Provide Ethics Input on Public Health Practice Activities
Klingler, Corinna; Barrett, Drue H.; Ondrusek, Nancy; More

Vaccination Capability Inventory of Community, Migrant, and Homeless Health Centers: A Survey Report
Federaally funded Community, Migrant, and Homeless Health Centers provide health services to the most vulnerable communities in the United States. However, little is known about their capabilities and processes for providing vaccinations to adults...Health centers provide most adult vaccines to their patients despite financial and technological barriers to optimal provisioning. Further studies at point of care could help identify mechanisms for system improvements.
Lewis, Joy H.; Whelihan, Kate; Roy, Debosree; More

Toward Optimal Communication About HPV Vaccination for Preteens and Their Parents: Evaluation of an Online Training for Pediatric and Family Medicine Health Care Providers
Cates, Joan R.; Diehl, Sandra J.; Fuemmeler, Bernard F.; More

Local Health Department Interest in Implementation of a Jail-Based Human Papillomavirus Vaccination Program in Kansas, Iowa, Missouri, and Nebraska
Local health departments (LHDs) play a vital role in community vaccination programs for human papillomavirus (HPV) infection, but little research has been done to assess LHD interest in cross-sectoral partnerships to vaccinate high-risk groups, specifically incarcerated persons...Nearly half of LHDs in the region expressed interest in partnering with local entities to meet HPV vaccination needs of high-risk groups. Research on cross-sectoral partnerships and what these collaborations look like in practice is needed for public health impact.
Ramaswamy, Megha; Allison, Molly; Musser, Brynne; More
There is increasing interest in the development of new, ‘universal’ influenza vaccines (UIVs) that—unlike current vaccines—are effective against a broad range of seasonal influenza strains, as well as against novel pandemic viruses.
terminology, this latest coronavirus epidemic is now seeing larger increases in cases outside China. As of March 3, more than 90,000 confirmed cases of COVID-19 have been reported in 73 countries. The outbreak in northern Italy, which has seen 11 towns officially locked down and residents threatened with imprisonment if they try to leave, shocked European political leaders. Their shock turned to horror as they saw Italy become the epicentre for further spread across the continent. As the window for global containment closes, health ministers are scrambling to implement appropriate measures to delay spread of the virus. But their actions have been slow and insufficient. There is now a real danger that countries have done too little, too late to contain the epidemic.

By striking contrast, the WHO-China joint mission report calls China's vigorous public health measures toward this new coronavirus probably the most “ambitious, agile and aggressive disease containment effort in history”. China seems to have avoided a substantial number of cases and fatalities, although there have been severe effects on the nation's economy. In its report on the joint mission, WHO recommends that countries activate the highest level of national response management protocols to ensure the all-of-government and all-of-society approaches needed to contain viral spread. China's success rests largely with a strong administrative system that it can mobilise in times of threat, combined with the ready agreement of the Chinese people to obey stringent public health procedures. Although other nations lack China's command-and-control political economy, there are important lessons that presidents and prime ministers can learn from China's experience. The signs are that those lessons have not been learned.

SARS-CoV-2 presents different challenges to high-income and low-income or middle-income countries (LMICs). A major fear over global spread is how weak health systems will cope. Some countries, such as Nigeria, have so far successfully dealt with individual cases. But large outbreaks could easily overwhelm LMIC health services. The difficult truth is that countries in most of sub-Saharan Africa, for example, are not prepared for an epidemic of coronavirus. And nor are many nations across Latin America and the Middle East. Public health measures, such as surveillance, exhaustive contact tracing, social distancing, travel restrictions, educating the public on hand hygiene, ensuring flu vaccinations for the frail and immunocompromised, and postponing non-essential operations and services will all play their part in delaying the spread of infection and dispersing pressure on hospitals. Individual governments will need to decide where they draw the line on implementing these measures. They will have to weigh the ethical, social, and economic risks versus proven health benefits.

The evidence surely indicates that political leaders should be moving faster and more aggressively. As Xiaobo Yang and colleagues have shown, the mortality of critically ill patients with SARS-CoV-2 pneumonia is substantial. As they wrote recently in The Lancet Respiratory Medicine, “The severity of SARS-CoV-2 pneumonia poses great strain on critical care resources in hospitals, especially if they are not adequately staffed or resourced.” This coronavirus is not benign. It kills. The political response to the epidemic should therefore reflect the national security threat that SARS-CoV-2 represents.

National governments have all released guidance for health-care professionals, but published advice alone is insufficient. Guidance on how to manage patients with COVID-19 must be delivered urgently to health-care workers in the form of workshops, online teaching, smart phone engagement, and peer-to-peer education. Equipment such as personal protective
equipment, ventilators, oxygen, and testing kits must be made available and supply chains strengthened. The European Centre for Disease Prevention and Control recommends that hospitals set up a core team including hospital management, an infection control team member, an infectious disease expert, and specialists representing the intensive care unit and accident and emergency departments.

So far, evidence suggests that the colossal public health efforts of the Chinese Government have saved thousands of lives. High-income countries, now facing their own outbreaks, must take reasoned risks and act more decisively. They must abandon their fears of the negative short-term public and economic consequences that may follow from restricting public freedoms as part of more assertive infection control measures.

The Lancet Child & Adolescent Health
Feb 2020  Volume 4 Number 2  p91-166, e5
https://www.thelancet.com/journals/lanchi/issue/current

Comment
Children on the move—a call for active screening in migrants
Ulrich von Both

Paediatricians, general practitioners, and family doctors are increasingly confronted with medical symptoms previously not on their radar, because of a rise in migration. In the past 5 years, an estimated 1 million displaced children and adolescents have entered the EU and European Economic Area (EEA), many of them unaccompanied. This vulnerable group faces great challenges and health risks. Societies should welcome migrant families, and medical professionals should help integrate migrant children into health-care systems to ensure high quality care is delivered sustainably. Besides obvious benefits for the individual, it is in the interest of societies to prevent increased incidence of infectious diseases that are currently well controlled, such as tuberculosis. Three infectious diseases—tuberculosis, schistosomiasis, and strongyloidiasis—are particularly relevant and should be seen as priorities for screening and treatment in migrant children.

Lancet Digital Health
Feb 2020  Volume 2 Number 2  e49-e101
https://www.thelancet.com/journals/landig/issue/current

Editorial
Child and adolescent health in the digital age
The Lancet Digital Health
On 18 February, 2020, The Lancet published the report of the WHO-UNICEF-Lancet Commission, calling for a refocus of the Sustainable Development Goals (SDGs) around child and adolescent health. All sectors are responsible for children’s wellbeing, with digital platforms and artificial intelligence (AI) playing an increasing role in child and adolescent health.

The Commission argues that open dialogue across generations is essential to understand the needs of children and adolescents, especially in low- and middle-income countries (LMICs) where 90% of the global youth population currently live. Digital technologies, such as social media and AI-based chatbots, have much to offer in this regard. The Commission highlights that adolescents are enthusiastic users of technology, with those aged 11–16 years posting on
social media on average 26 times a day. With a predicted 40 times increase of their global volume of data, adolescents who might seldom access traditional health services, could more easily be reached through digital health platforms. For example, the Commission describes U-Report, a mobile-based online poll for real-time data collection, which collates opinions from approximately 1 million youths from over 50 LMICs to better communicate with government officials to strengthen public health campaigns, such as immunisation awareness.

Despite the development of promising digital interventions, the Commission calls for further research to understand ways to positively engage with adolescents about health issues using digital technology. A paper in The Lancet Digital Health, by Maree Teesson and colleagues, reported a cluster-randomised controlled trial in 71 schools in Australia, which showed efficacy of an online digital intervention for prevention of substance use, depression, and anxiety in adolescents. This digital intervention allows scaling up of prevention programmes, which could reduce costs and increase accessibility to lower resource settings. However, further trials are necessary to determine whether this intervention is cost effective and if the benefits are sustained beyond the trial phase.

The Commission cites several digital interventions that have shown potential in engaging adolescents about health issues; however, the report does not mention augmented reality, a burgeoning area of research in child and adolescent health. In The Lancet Digital Health, Kollins and colleagues describe a randomised controlled trial to test the efficacy of a video game-like interface designed to support children with attention deficit hyperactivity disorder. The results of the trial show that this digital intervention can increase attentional functioning of children with the disorder, but future trials are necessary to examine the durability and time course of the intervention.

The prevalent use of digital platforms, such as social media, has encouraged speculation that their regular use might negatively effect child and adolescent health, a concern echoed within the Commission. However, current evidence supporting this idea is controversial due to the nature of the large-scale social datasets used in many studies which could be prone to potential false positives and conflicting results. A study attempted to address these challenges using three large-scale social datasets and found no significant correlational evidence for detrimental effects of digital technology on adolescent health.

The Commission ends with the quote “what gets measured, gets done”, which highlights a well known barrier to achieving the SDGs: inability to collect the necessary quality and volume of data to monitor progress. Open data is needed to overcome the barriers to collect and share data for SDG progress, and the Commission authors rightly demand better use of data from publicly available sources. However, there are concerns regarding the few safeguards to protect children's data, especially against data manipulation through black box and biased algorithms. The Commission also highlights the shortcomings of current data privacy regulations, emphasising that public sector bodies and commercial organisations have failed to ensure privacy, transparency, security, and redress when handling children's data. The assurance of privacy and security of data is key to the success of digital innovation and transformation of health care.
Digital platforms and AI are necessary tools to enable children and adolescents to be agents of change, encouraging open dialogue between children, international agencies, and governments to achieve the SDGs for a better future.

Lancet Global Health
Mar 2020 Volume 8 Number 3 e305-e450
http://www.thelancet.com/journals/langlo/issue/current
[New issue; No digest content identified]

Lancet Infectious Diseases
Mar 2020 Volume 20 Number 3 p261-382, e27-e49
http://www.thelancet.com/journals/laninf/issue/current

Editorial
Challenges of coronavirus disease 2019
The Lancet Infectious Diseases
Yet again, the world is experiencing a global viral epidemic of zoonotic origin. As of Feb 12, 45 204 confirmed cases of coronavirus disease 2019 (COVID-19) and 1116 deaths had been reported in 25 countries. The majority of cases and, at the time of writing, all but one death have been in China, despite efforts in the country to halt transmission through shutting down transport, quarantining entire cities, and enforcing the use of face masks. International flights have been cancelled and affected cruise ships quarantined. At this stage, it is unclear whether the severe acute respiratory syndrome coronavirus (SARS-CoV-2) outbreak will run its course, as SARS-CoV did in 2003, or will become an endemic cause of viral pneumonia.

In our January issue we announced the formation of The Lancet Infectious Diseases Commission on Preparedness for Emerging Epidemic Threats. The Commission will revisit global preparedness planning and assumptions underlying agreements such as the International Health Regulations. It aims to account for new challenges in preparing for and responding to infectious disease outbreaks. These challenges, which are political and institutional, social, environmental, technological, and pathogen-related, are being brought to the foreground by the SARS-CoV-2 outbreak.

View related content for this article
One issue is how prepared the world’s health systems are to respond to an outbreak of this scale. It’s clear the large number of cases of COVID-19 is testing the health system in China. Yet, China was able to build a hospital for affected patients in a matter of days. No other country could mobilise resources and manpower at such speed. While health systems in high-income countries would be stretched by the outbreak, the most devastating effects would be in countries with weak health systems, ongoing conflicts, or existing infectious disease epidemics. In these countries, it is imperative to rapidly detect and contain the virus at points of entry to prevent community transmission and health systems from being overwhelmed. Health authorities in Africa are on high alert for the virus, given the continent’s extensive trade and transport links with Asia. The capacity in Africa to screen, isolate, and treat patients and perform contact tracing is being built under the leadership of the Africa Centres for Disease Control and Prevention and WHO.
As in all outbreaks, there is an urgent need to develop effective diagnostics, therapeutics, and vaccines. Several experimental diagnostic platforms are already in use in China and elsewhere. The whole-genome sequence of SARS-CoV-2 had been obtained and shared widely by mid-January, a feat not possible at such speed in previous infectious disease outbreaks. This sequence will allow fine-tuning of existing technologies and development of better diagnostics and targeted therapeutics. Several potential treatments have been proposed, including a Janus kinase inhibitor known as baricitinib. However, no antiviral treatment has been approved for coronaviruses, and despite two outbreaks of novel coronaviruses in the past two decades, vaccine development is still in its infancy. WHO has announced that a vaccine for SARS-CoV-2 should be available in 18 months, but achieving this will require funding and public interest to be maintained even if the threat level falls.

Social media and sensationalist reporting are challenging outbreak response efforts. Misinformation and conspiracy theories spread on social media have generated panic and mistrust among the general public, diverted attention away from the outbreak response, and impeded the activities of health-care workers. WHO Director-General Tedros Adhanom Ghebreyesus said WHO is tackling the spread of false information with a “four-pronged approach”, including using its WHO Information Network for Epidemics platform to track misinformation in multiple languages and collaborating with social and digital companies such as Facebook, Weibo, and Twitter to filter out false information.

How prepared the world was for the SARS-CoV-2 outbreak will surely be discussed in its aftermath. The initial response in China to contain the virus was applauded by WHO and considered much improved compared with its response to the 2003 SARS-CoV epidemic. Internationally, we have seen rapid generation and sharing of knowledge to the benefit of the outbreak response, but also counterproductive actions by some countries, including limiting trade and shutting of borders, to its detriment. With the increasing frequency of zoonotic spillovers leading to human infections and transmission, it's apparent that pandemic preparedness has become a priority for the global health agenda.

Review
The status of tuberculosis vaccine development
Lewis K Schrager, Johan Vekemens, Nick Drager, David M Lewinsohn, Ole F Olesen
Summary
Tuberculosis represents the leading global cause of death from an infectious agent. Controlling the tuberculosis epidemic thus represents an urgent global public health priority. Epidemiological modelling suggests that, although drug treatments for tuberculosis continue to improve, WHO timelines to control the spread of the disease require a new vaccine capable of preventing tuberculosis, particularly in adolescents and adults. The spread of strains resistant to multiple drugs adds additional urgency to the vaccine development effort yet attempts to develop new vaccines with wider applicability and better, longer-lasting efficacy than BCG—the only tuberculosis vaccine licensed for use globally—have proven challenging. Results from clinical efficacy trials, particularly a completed, phase 2b trial for preventing tuberculosis disease in people infected with Mycobacterium tuberculosis using the adjuvanted protein subunit vaccine M72/AS01E give hope. We review the current status of tuberculosis vaccine candidates and outline the diversified vaccine development that are underway.
Coronavirus response: a focus on containment is still apt
Despite COVID-19’s spread to new countries, the evidence suggests it is yet possible to curb the virus.
Editorial | 05 March 2020

Whole tumor genomes across cancers
The Pan-Cancer Analysis of Whole Genomes (PCAWG) Consortium project, led by the International Cancer Genome Consortium (ICGC) and The Cancer Genome Atlas (TCGA), coordinated the sequencing and analysis of 2,583 tumor whole genomes across 38 cancer types. This impressively large project, comprising many working groups focusing on various molecular or genetic features of cancer, has generated valuable data for the cancer research community that will continue to be mined for many years to come.

Article | 05 February 2020 | Open Access

The landscape of viral associations in human cancers
Viral pathogen load in cancer genomes is estimated through analysis of sequencing data from 2,656 tumors across 35 cancer types using multiple pathogen-detection pipelines, identifying viruses in 382 genomic and 68 transcriptome datasets.
Marc Zapatka, Ivan Borozan[... ] & Marc Zapatka

Analysis | 05 February 2020 | Open Access

Comprehensive analysis of chromothripsis in 2,658 human cancers using whole-genome sequencing
Analysis of whole-genome sequencing data across 2,658 tumors spanning 38 cancer types shows that chromothripsis is pervasive, with a frequency of more than 50% in several cancer types, contributing to oncogene amplification, gene inactivation and cancer genome evolution.
Isidro Cortés-Ciriano, Jake June-Koo Lee[... ] & Peter J. Park
Special: Pan-Cancer Analysis of Whole Genomes

Nature Medicine
Volume 26 Issue 2, February 2020
https://www.nature.com/nm/volumes/26/issues/2

Editorial | 03 February 2020

Communication, collaboration and cooperation can stop the 2019 coronavirus
As the outbreak of a deadly new coronavirus in China and its rapid spread is rattling countries, only the collective international experience and advances derived from past outbreaks can accelerate its control.

Perspective | 03 February 2020

Single-cell genomic approaches for developing the next generation of immunotherapies
Amit and colleagues discuss where single-cell genomic technologies can be applied both in trial design and in the clinical trial stage to improve the development of immunotherapies.
Ido Yofe, Rony Dahan & Ido Amit

Nature Reviews Genetics
Volume 21 Issue 3, March 2020
https://www.nature.com/nrg/volumes/21/issues/3
[New issue; No digest content identified]
Nature Reviews Immunology
Volume 20 Issue 3, March 2020
https://www.nature.com/nri/volumes/20/issues/3
[New issue; No digest content identified]

New England Journal of Medicine
March 5, 2020 Vol. 382 No. 10
http://www.nejm.org/toc/nejm/medical-journal
Perspective
Social Spending to Improve Population Health — Does the United States Spend as Wisely as Other Countries?
Roosa S. Tikkanen, M.P.H., M.Res., and Eric C. Schneider, M.D.

Pediatrics
February 01, 2020; Volume 145, Issue 2
https://pediatrics.aappublications.org/content/145/2
[Reviewed earlier]

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Volume 12, Issue 1 (January 2020)
https://www.mdpi.com/1999-4923/12/1
[Reviewed earlier]

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Volume 38, Issue 3, March 2020
https://link.springer.com/journal/40273/38/3
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PLoS Genetics
https://journals.plos.org/plosgenetics/
(Accessed 7 Mar 2020)
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PLoS Neglected Tropical Diseases
Chromosome-free bacterial cells are safe and programmable platforms for synthetic biology
Catherine Fan, Paul A. Davison, Robert Habgood, Hong Zeng, Christoph M. Decker, Manuela Gesell Salazar, Khemmathin Lueangwattanapong, Helen E. Townley, Aidong Yang, Ian P. Thompson, Hua Ye, Zhanfeng Cui, Frank Schmidt, C. Neil Hunter, and Wei E. Huang
PNAS first published March 6, 2020. https://doi.org/10.1073/pnas.1918859117
Public Health Ethics
Volume 12, Issue 3, November 2019
http://phe.oxfordjournals.org/content/current
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Volume 135 Issue 2, March/April 2020
https://journals.sagepub.com/toc/phrg/135/2
[Reviewed earlier]

Qualitative Health Research
Volume 30 Issue 4, March 2020
http://qhr.sagepub.com/content/current
[Reviewed earlier]

Research Ethics
Volume 15 Issue 3-4, July-October 2019
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[Reviewed earlier]

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[Accessed 7 Mar 2020]
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https://www.paho.org/journal/en
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Risk Analysis
Volume 40, Issue 3 Pages: 439-656 March 2020
https://onlinelibrary.wiley.com/toc/15396924/current
[New issue; No digest content identified]

Risk Management and Healthcare Policy
Science
06 March 2020  Vol 367, Issue 6482
http://www.sciencemag.org/current.dtl
In Depth
**Can China's COVID-19 strategy work elsewhere?**
By Kai Kupferschmidt, Jon Cohen
Science06 Mar 2020 : 1061-1062 Full Access
  Rapid decline in cases is real, expert mission concludes—but it came at a high cost.

Science Translational Medicine
04 March 2020  Vol 12, Issue 533
https://stm.sciencemag.org/
[New issue; No digest content identified]

Social Science & Medicine
Volume 248  March 2020
[New issue; No digest content identified]

Systematic Reviews
https://systematicreviewsjournal.biomedcentral.com/articles
[Accessed 7 Mar 2020]
**Benefits and harms of the human papillomavirus (HPV) vaccines: systematic review with meta-analyses of trial data from clinical study reports**
To assess the benefits and harms of the human papillomavirus (HPV) vaccines.
Authors: Lars Jørgensen, Peter C. Gøtzsche and Tom Jefferson
Citation: Systematic Reviews 2020 9:43
Content type: Research
Published on: 28 February 2020

**Benefits and harms of the human papillomavirus (HPV) vaccines: systematic review with meta-analyses of trial data from clinical study reports**
To assess the benefits and harms of the human papillomavirus (HPV) vaccines.
Authors: Lars Jørgensen, Peter C. Gøtzsche and Tom Jefferson
Citation: Systematic Reviews 2020 9:43
Content type: Research
Published on: 28 February 2020

**What the systematic review of HPV vaccine clinical study reports does, and does not, reveal: commentary on Jørgensen et al.**
Another coronavirus, another epidemic, another warning
Gregory A. Poland

[Excerpt]
Many questions must yet be answered as coronavirus vaccines are developed. Research questions whose answers have immediate and practical application include these issues:
:: Further resolution of case-fatality rates, viral reproductive number, and serosurveys that allow us to better appreciate the epidemiology of this infection
:: The identification and role of possible super-spreaders
:: Propensities for differential infection and transmission rates, as well as disease severity and fatality by age and ethnicity
:: Development of suitable animal models that closely mimic human pathophysiology and immunology must be identified and better optimized
:: Regulatory pathways for vaccine clinical trials and licensure in the absence of continuing outbreaks must be determined, as history demonstrates the intermittent and sudden appearance of outbreaks with these novel viruses—how might such regulatory pathways be altered in the event of a pandemic or more lethal mutations?
:: How shall issues of immunosensescence in the elderly and immunoimmaturity in infants and children be accounted for?
:: Why have we not seen widespread or lethal infections in children compared to adults?
:: What about special populations such as health care providers, pregnant women, immunocompromised individuals, and those with and without prior experience with various types of coronavirus infection?
How will such vaccines be equitably distributed—particularly in low income countries?
Better data on viral pathogenesis and human immune responses

As the world waits and watches, it is apparent that Chinese authorities in particular, and all countries, must take more seriously the threat of these emerging coronavirus human pathogens. Specific steps should include the following:

Regulate so-called wet markets with bans on the unregulated sale and trade in exotic animals.

Improve sanitation in such markets with food protection and hygienic standards appropriate to 21st century practices.

Significantly expand public health infrastructure. Among such tasks must be the regular surveillance of these markets for emerging viruses of concern.

Transparency, quickly, and in accordance with international health regulations, share information with global health authorities. The current outbreak is highly likely to have started in November or earlier, but it was not until late December that Chinese authorities reported to the WHO what was happening.

Allow, from the very beginning, health authorities from across the globe to assist in outbreak investigation and scientific investigation. It is surprising that CDC has not yet been invited to China to assist in this global issue. It is surprising to see papers from Chinese scientists that place barriers on sharing information—such as requiring “detailed study protocols and statistical and reporting plans” submitted for approval before data is shared. This is counter to the essence of professionalism and moral imperatives to openly share science for the protection of the health of the global public.

Discussion  No access

**Improving vaccine policy making: A dose of reality**
Dorit R. Reiss, Paul A. Offit

**Research article  Open access**

**An assessment of parents’ childhood immunization beliefs, intentions, and behaviors using a smartphone panel**
John Boyle, Lew Berman, Glen J. Nowak, Ronaldo Iachan, ... Yangyang Deng
Pages 2416-2423

**Research article  Open access**

**Understanding the role of peace of mind in childhood vaccination: A qualitative study with members of the general public**
G. Lasseter, H. Al-Janabi, C.L. Trotter, F.E. Carroll, H. Christensen
Pages 2424-2432

**Vaccines — Open Access Journal**
http://www.mdpi.com/journal/vaccines
(Accessed 7 Mar 2020)

**Open Access  Article**

**Influenza Vaccination in Italian Healthcare Workers (2018–2019 Season): Strengths and Weaknesses. Results of a Cohort Study in Two Large Italian Hospitals**
Background: Annual vaccination is the most effective way to combat influenza. As influenza viruses evolve, seasonal vaccines are updated annually. Within the European project Development of Robust and Innovative Vaccine Effectiveness (DRIVE), a cohort study involving Italian healthcare workers (HCWs) was carried out during the 2018-2019 season. Two aims were defined: to measure influenza vaccine effectiveness (IVE) against laboratory-confirmed influenza cases and to conduct an awareness-raising campaign to increase vaccination coverage. Methods: Each subject enrolled was followed up from enrollment to the end of the study. Each HCW who developed ILI was swabbed for laboratory confirmation of influenza. Influenza viruses were identified by molecular assays. A Cox regression analysis, crude and adjusted for confounding variables, was performed to estimate the IVE. Results: Among the 4483 HCWs enrolled, vaccination coverage was 32.5%, and 308 ILI cases were collected: 23.4% were positive for influenza (54.2% A(H1N1) pdm09; 45.8% A(H3N2)). No influenza B viruses were detected. No overall IVE was observed. Analyzing the subtypes of influenza A viruses, the IVE was estimated as 45% (95% CI: 59 to 81) for A(H1N1) pdm09. Conclusions: Vaccination coverage among HCWs increased. Study difficulties and the circulation of drifted variants of A(H3N2) could partly explain the observed IVE.

**Open Access Article**

**Effect of Influenza Vaccination on Mortality and Risk of Hospitalization in Elderly Individuals with and without Disabilities: A Nationwide, Population-Based Cohort Study**

by Yu-Chia Chang, Ho-Jui Tung, Yu-Tung Huang, Chin-Te Lu, Ernawaty Ernawaty and Szu-Yuan Wu

Vaccines 2020, 8(1), 112; https://doi.org/10.3390/vaccines8010112 - 02 Mar 2020

Viewed by 158

Abstract

Purpose: The effects of influenza vaccines are unclear for elderly individuals with disabilities. We use a population-based cohort study to estimate the effects of influenza vaccines in elderly individuals with and without disabilities.

Methods: Data were taken from the National Health Insurance Research Database and Disabled Population Profile of Taiwan. A total of 2,741,403 adults aged 65 or older were identified and 394,490 were people with a disability. These two groups were further divided into those who had or had not received an influenza vaccine. Generalized estimating equations (GEE) were used to compare the relative risks (RRs) of death and hospitalization across the four groups.

Results: 30.78% elderly individuals without a disability and 34.59% elderly individuals with a disability had vaccinated for influenza. Compared to the unvaccinated elderly without a disability, the vaccinated elderly without a disability had significantly lower risks in all-cause mortality (RR = 0.64) and hospitalization for any of the influenza-related diseases (RR = 0.91). Both the unvaccinated and vaccinated elderly with a disability had significantly higher risks in all-cause mortality (RR = 1.81 and 1.18, respectively) and hospitalization for any of the influenza-related diseases (RR = 1.73 and 1.59, respectively).
Conclusions: The elderly with a disability had higher risks in mortality and hospitalization than those without a disability; however, receiving influenza vaccinations could still generate more protection to the disabled elderly.

Value in Health
February 2020 Volume 23, Issue 2, p139-276
https://www.valueinhealthjournal.com/issue/S1098-3015(20)X0003-9
[Reviewed earlier]

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

No new digest content identified.

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

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

The Atlantic
http://www.theatlantic.com/magazine/
Accessed 7 Mar 2020
Ideas
The Geopolitics of the Coronavirus
Expertise matters. Institutions matter. There is such a thing as the global community. The system must be made to work again.
March 4, 2020
Thomas Wright, Senior fellow at the Brookings Institution
Kurt M. Campbell, Former Assistant Secretary of State for Asia and the Pacific

BBC
The Economist
http://www.economist.com/
Accessed 7 Mar 2020
[No new, unique, relevant content]

Financial Times
http://www.ft.com/home/uk
Accessed 7 Mar 2020
[No new, unique, relevant content]

Forbes
http://www.forbes.com/
Mar 5, 2020
How AI May Prevent The Next Coronavirus Outbreak
Various startups producing AI-powered diagnostic and detection systems aim to combat the spread of contagious viruses.
By Simon Chandler Contributor

Foreign Affairs
http://www.foreignaffairs.com/
Accessed 7 Mar 2020
Security Mar 3, 2020
Pandemic Disease Is a Threat to National Security
As the United States now grapples with the 2019 novel coronavirus (COVID-19) epidemic, the time is long past to make pandemic disease a national security priority...
Lisa Monaco

Foreign Policy
http://foreignpolicy.com/
Accessed 7 Mar 2020
China Goes on Diplomatic Offensive Over Coronavirus Response
Beijing seeks to deflect criticism that its carelessness caused a global crisis.
Document | March 6, 2020, 12:39 PM
Colum Lynch

The Guardian
http://www.guardiannews.com/
Accessed 7 Mar 2020
[No new, unique, relevant content]

New Yorker
http://www.newyorker.com/
Accessed 7 Mar 2020
Annals of a Warming Planet
**What Can the Coronavirus Teach Us?**
A certain kind of environmentalist has long hoped that we'll learn to substitute human contact for endless consumption; maybe this is the kind of shock that might open a few eyes.
By Bill McKibben
March 5, 2020

**New York Times**
Accessed 7 Mar 2020

**Sunday Review**
**Beware the Deadly Contagion Spread by Blowhards**
Ideology is getting in the way of science.
By Nicholas Kristof
March 8

**Politics**
**Inside Trump Administration, Debate Raged Over What to Tell Public**
The administration's response to the coronavirus has repeatedly matched public health experts against a hesitant White House, where worry of panic dominates.
By Michael D. Shear, Sheri Fink and Noah Weiland
March 8

**Politics**
**Trump Signs $8.3 Billion Spending Bill to Boost Coronavirus Response**
U.S. President Donald Trump on Friday signed an emergency spending bill for $8.3 billion to ramp up the nation’s response to the coronavirus, providing funds for state and local officials to combat the spread of infections as the number of cases grows in the United States.
By Reuters
March 6

**Washington Post**
[https://www.washingtonpost.com/](https://www.washingtonpost.com/)
Accessed 7 Mar 2020
[No new, unique, relevant content]

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**Think Tanks et al**

**Brookings**
[http://www.brookings.edu/](http://www.brookings.edu/)
Accessed 7 Mar 2020

**Order from Chaos**
**The coronavirus is exposing the limits of populism**
Thomas Wright and Kurt Campbell
Thursday, March 5, 2020
What COVID-19 Should Teach Us About Smart Health Spending in Developing Countries

With a number of African countries confirming their first cases of COVID-19 and the continent bracing for major outbreaks, health system resilience and basic functionality emerge once again as the determining factor for a successful response.

Kalipso Chalkidou and Carleigh Krubiner

March 4, 2020

World Bank and COVID-19: Five Unanswered Questions on Funding Sources and Uses

Yesterday the World Bank announced $12 billion in financing available to member countries to respond to the health and economic impacts of the COVID-19 outbreak. There is not much information yet in the public domain on the sources and planned uses for this money, but five questions – each with additional corresponding questions – come to mind when reading the press release:

Amanda Glassman and Scott Morris

CSIS

The Global Impacts of the Coronavirus Outbreak

March 5, 2020

Council on Foreign Relations

[No new relevant content]

Kaiser Family Foundation

[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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