Vaccines and Global Health: The Week in Review
23 May 2020 :: Number 553
Center for Vaccine Ethics & Policy (CVEP)

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

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

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Historic health assembly ends with global commitment to COVID-19 response
19 May 2020  News release
At today’s meeting of the 73rd World Health Assembly — its first-ever to be held virtually — delegates adopted a landmark resolution to bring the world together to fight the COVID-19 pandemic.

The resolution, co-sponsored by more than 130 countries, was adopted by consensus.

It calls for the intensification of efforts to control the pandemic, and for equitable access to and fair distribution of all essential health technologies and products to combat the virus. It also calls for an independent and comprehensive evaluation of the global response, including, but not limited to, WHO’s performance.

As WHO convened ministers of health from almost every country in the world, the consistent message throughout the two-day meeting — including from the 14 heads of state participating in the opening and closing sessions — was that global unity is the most powerful tool to combat the outbreak. The resolution is a concrete manifestation of this call, and a roadmap for controlling the outbreak.

In his closing remarks, WHO Director-General Dr Tedros Adhanom Ghebreyesus said “COVID-19 has robbed us of people we love. It’s robbed us of lives and livelihoods; it’s shaken the foundations of our world; it threatens to tear at the fabric of international cooperation. But it’s also reminded us that for all our differences, we are one human race, and we are stronger together.”

The World Health Assembly will reconvene later in the year.

Editor’s Note:
We present below key text from the COVID-19 Response resolution adopted at WHA73 with Editor’s text bolding. The full text of the resolution as adopted [final version to be released] is presented at the end of this week’s edition.
COVID-19 response
A73/CONF./1 Rev.1 18 May 2020

... OP1 Calls for, in the spirit of unity and solidarity, intensification of cooperation and collaboration at all levels to contain, control and mitigate the COVID-19 pandemic;

OP2 Acknowledges the key leadership role of WHO and the fundamental role of the United Nations system in catalysing and coordinating the comprehensive global response to the COVID-19 pandemic and the central efforts of Member States therein;

OP3 Expresses its highest appreciation of and support to the dedication, efforts and sacrifices, above and beyond the call of duty of health professionals, health workers and other relevant frontline workers, as well as the WHO Secretariat, in responding to the COVID-19 pandemic;

OP4 Calls for the universal, timely and equitable access to and fair distribution of all quality, safe, efficacious and affordable essential health technologies and products including their components and precursors required in the response to the COVID-19 pandemic as a global priority, and the urgent removal of unjustified obstacles thereto; consistent with the provisions of relevant international treaties including the provisions of the TRIPS agreement and the flexibilities as confirmed by the Doha Declaration on the TRIPS Agreement and Public Health;

OP5 Reiterates the importance of urgently meeting the needs of low- and middle-income countries in order to fill the gaps to overcome the pandemic through timely and adequate development and humanitarian assistance;

OP6 Recognizes the role of extensive immunization against COVID-19 as a global public good for health in preventing, containing and stopping transmission in order to bring the pandemic to an end, once safe, quality, efficacious, effective, accessible and affordable vaccines are available;...

OP8 CALLS on international organizations and other relevant stakeholders to:
...OP8.2 Work collaboratively at all levels to develop, test, and scale-up production of safe, effective, quality, affordable diagnostics, therapeutics, medicines and vaccines for the COVID-19 response, including, existing mechanisms for voluntary pooling and licensing of patents to facilitate timely, equitable and affordable access to them, consistent with the provisions of relevant international treaties including the provisions of the TRIPS agreement and the flexibilities as confirmed by the Doha Declaration on the TRIPS Agreement and Public Health;

OP9 REQUESTS the Director-General to:
OP9.1 Continue to work with the United Nations Secretary-General and relevant multilateral organizations, including the signatory agencies of the Global Action Plan for Healthy Lives and Well-Being, on a comprehensive and coordinated response across the United Nations system to support Member States in their responses to the COVID-19 pandemic in full cooperation with governments, as appropriate, demonstrating leadership on health in the United Nations system, and continue to act as the health cluster lead in the United Nations humanitarian response;
OP9.2 Continue to build and strengthen the capacities of WHO at all levels to fully and effectively perform the functions entrusted to it under the IHR;

OP9.3 Assist and continue to call upon all States’ Parties to take the actions according to the provisions of the IHR, including by providing all necessary support to countries for building, strengthening and maintaining their capacities to fully comply with the IHR;

OP9.5 Assist countries upon request in developing, implementing and adapting relevant national response plans to COVID-19, by developing, disseminating and updating normative products and technical guidance, learning tools, data and scientific evidence for COVID-19 responses, including to counter misinformation and disinformation, as well as malicious cyber activities, and continue to work against substandard and falsified medicines and medical products;

OP9.6 Continue to work closely with the World Organisation for Animal Health (OIE), the Food and Agriculture Organization of the United Nations (FAO) and countries, as part of the One-Health Approach to identify the zoonotic source of the virus and the route of introduction to the human population, including the possible role of intermediate hosts, including through efforts such as scientific and collaborative field missions, which will enable targeted interventions and a research agenda to reduce the risk of similar events as well as to provide guidance on how to prevent SARS-COV2 infection in animals and humans and prevent the establishment of new zoonotic reservoirs, as well as to reduce further risks of emergence and transmission of zoonotic diseases;...

OP9.8 Rapidly, and noting OP2 of RES/74/274 and in consultation with Member States,1 and with inputs from relevant international organizations civil society, and the private sector, as appropriate, identify and provide options that respect the provisions of relevant international treaties, including the provisions of the TRIPS agreement and the flexibilities as confirmed by the Doha Declaration on the TRIPS Agreement and Public Health to be used in scaling up development, manufacturing and distribution capacities needed for transparent equitable and timely access to quality, safe, affordable and efficacious diagnostics, therapeutics, medicines, and vaccines for the COVID-19 response taking into account existing mechanisms, tools, and initiatives, such as the Access to COVID-19 Tools (ACT) accelerator, and relevant pledging appeals, such as “The Coronavirus Global Response” pledging campaign, for the consideration of the Governing Bodies;...

OP9.10 Initiate, at the earliest appropriate moment, and in consultation with Member States,1 a stepwise process of impartial, independent and comprehensive evaluation, including using existing mechanisms,2 as appropriate, to review experience gained and lessons learned from the WHO-coordinated international health response to COVID-19, including (i) the effectiveness of the mechanisms at WHO’s disposal; (ii) the functioning of the IHR and the status of implementation of the relevant recommendations of the previous IHR Review Committees; (iii) WHO’s contribution to United Nations-wide efforts; and (iv) the actions of WHO and their timelines pertaining to the COVID-19 pandemic, and make recommendations to improve global pandemic prevention, preparedness, and response capacity,
including through strengthening, as appropriate, WHO’s Health Emergencies Programme...

COVID-19: Impacts

At least 80 million children under one at risk of diseases such as diphtheria, measles and polio as COVID-19 disrupts routine vaccination efforts, warn Gavi, WHO and UNICEF

Agencies call for joint effort to safely deliver routine immunization and proceed with vaccination campaigns against deadly vaccine-preventable diseases.

GENEVA/NEW YORK, 22 May 2020 – COVID-19 is disrupting life-saving immunization services around the world, putting millions of children – in rich and poor countries alike – at risk of diseases like diphtheria, measles and polio. This stark warning comes from the World Health Organization, UNICEF and Gavi, the Vaccine Alliance ahead of the Global Vaccine Summit on 4 June, at which world leaders will come together to help maintain immunization programmes and mitigate the impact of the pandemic in lower-income countries.

According to data collected by the World Health Organization, UNICEF, Gavi and the Sabin Vaccine Institute, provision of routine immunization services is substantially hindered in at least 68 countries and is likely to affect approximately 80 million children under the age of 1 living in these countries.

ROUTINE IMMUNIZATION OF CHILDREN DISRUPTED

Since March 2020, routine childhood immunization services have been disrupted on a global scale that may be unprecedented since the inception of expanded programs on immunization (EPI) in the 1970s. More than half (53%) of the 129 countries where data were available reported moderate-to-severe disruptions, or a total suspension of vaccination services during March-April 2020.

“Immunization is one of the most powerful and fundamental disease prevention tools in the history of public health,” said Dr Tedros Adhanom Ghebreyesus, WHO Director-General. “Disruption to immunization programmes from the COVID-19 pandemic threatens to unwind decades of progress against vaccine-preventable diseases like measles.”

“At the 4 June Global Vaccine Summit in London, donors will pledge their support to Gavi, the Vaccine Alliance, to sustain and accelerate this lifesaving work in some of the most vulnerable countries. From the bottom of my heart, I urge donors to fully fund the Alliance. These countries, these children especially, need vaccines, and they need Gavi.”

The reasons for disrupted services vary. Some parents are reluctant to leave home because of restrictions on movement, lack of information or because they fear infection with the COVID-19 virus. And many health workers are unavailable because of restrictions on travel, or redeployment to COVID response duties, as well as a lack of protective equipment.
“More children in more countries are now protected against more vaccine-preventable diseases than at any point in history,” said Dr. Seth Berkley, Gavi CEO. “Due to COVID-19 this immense progress is now under threat, risking the resurgence of diseases like measles and polio. Not only will maintaining immunization programmes prevent more outbreaks, it will also ensure we have the infrastructure we need to roll out an eventual COVID-19 vaccine on a global scale.”

Transport delays of vaccines are exacerbating the situation. UNICEF has reported a substantial delay in planned vaccine deliveries due to the lockdown measures and the ensuing decline in commercial flights and limited availability of charters. To help mitigate this, UNICEF is appealing to governments, the private sector, the airline industry, and others, to free up freight space at an affordable cost for these life-saving vaccines. Gavi recently signed an agreement with UNICEF to provide advance funding to cover increased freight costs for delivery of vaccines, in light of the reduced number of commercial flights available for transport.

“We cannot let our fight against one disease come at the expense of long-term progress in our fight against other diseases,” said Henrietta Fore, UNICEF Executive Director. “We have effective vaccines against measles, polio and cholera. While circumstances may require us to temporarily pause some immunization efforts, these immunizations must restart as soon as possible, or we risk exchanging one deadly outbreak for another.”

Next week, WHO will issue new advice to countries on maintaining essential services during the pandemic, including recommendations on how to provide immunizations safely.

**MASS IMMUNIZATION CAMPAIGNS TEMPORARILY DISRUPTED**

Many countries have temporarily and justifiably suspended preventive mass vaccination campaigns against diseases like cholera, measles, meningitis, polio, tetanus, typhoid and yellow fever, due to risk of transmission and the need to maintain physical distancing during the early stages of the COVID-19 pandemic.

**Measles and polio vaccination campaigns, in particular, have been badly hit, with measles campaigns suspended in 27 countries and polio campaigns put on hold in 38 countries. At least 24 million people in 21 Gavi-supported lower-income countries are at risk of missing out on vaccines against polio, measles, typhoid, yellow fever, cholera, rotavirus, HPV, meningitis A and rubella due to postponed campaigns and introductions of new vaccines.**

In late March, concerned that mass gatherings for vaccination campaigns would enflame transmission of COVID-19 WHO recommended countries to temporarily suspend preventive campaigns while assessments of risk, and effective measures for reducing COVID virus transmission were established.

WHO has since monitored the situation and has now issued advice to help countries determine how and when to resume mass vaccination campaigns. The guidance notes that countries will need to make specific risk assessments based on the local dynamics of COVID-19 transmission, the health system capacities, and the public health benefit of conducting preventive and outbreak response vaccination campaigns.
Based on this guidance, and following growing concerns about increasing transmission of polio, the Global Polio Eradication Initiative (GPEI), is advising countries to start planning for the safe resumption of polio vaccination campaigns, especially in polio high-risk countries.

Despite the challenges, several countries are making special efforts to continue immunization. Uganda is ensuring that immunization services continue along with other essential health services, even funding transportation to ensure outreach activities. And in Lao PDR, despite a national lockdown imposed in March, routine immunization in fixed sites continued with physical distancing measures in place.

### Vaccination campaigns

<table>
<thead>
<tr>
<th>Vaccination campaigns</th>
<th>Total # of countries with postponed campaigns as of 15 May*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measles/ Measles Rubella/ Measles Mumps Rubella (M/MR/MMR)</td>
<td>27</td>
</tr>
<tr>
<td>Polio (IPV)</td>
<td>7</td>
</tr>
<tr>
<td>Bivalent oral poliovirus vaccine (bOPV)</td>
<td>26</td>
</tr>
<tr>
<td>Monovalent Oral Poliovirus Type 2 (mOPV2)</td>
<td>13</td>
</tr>
<tr>
<td>Meningitis A (MenA)</td>
<td>2</td>
</tr>
<tr>
<td>Yellow Fever (YF)</td>
<td>4</td>
</tr>
<tr>
<td>Typhoid (TCV)</td>
<td>2</td>
</tr>
<tr>
<td>Cholera (OCV)</td>
<td>5</td>
</tr>
<tr>
<td>Tetanus (Td)</td>
<td>7</td>
</tr>
</tbody>
</table>

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*Statement*

**Remarks by Henrietta Fore UNICEF Executive Director at joint press briefing on immunization with WHO and Gavi, 22 May**

22/05/2020

...And there have been serious disruptions in supply chains and transport services. UNICEF has reported a substantial delay in planned vaccine deliveries due to the lockdown measures and the resulting decline in commercial flights and limited availability of charters.

However, we cannot let our fight against one disease come at the expense of long-term progress in our fight against other diseases.

We cannot exchange one deadly outbreak for another. We cannot afford to lose the decades of health gains that everyone has worked so hard to achieve.

We need joint, concerted efforts to put vaccinations back on track. And there are many ways we can do this:

**First, countries need to intensify their efforts to track unvaccinated children**, so that the most vulnerable populations are vaccinated as soon as it becomes possible to do so.
Second, we need to address gaps in vaccine delivery. UNICEF is working with our offices around the world, freight forwarders and partner organisations to prioritise shipments and arrange charter operations as required for delivery of emergency and critical supplies. We have also appealed to governments, the private sector, the airline industry, and others, to free up freight space at an affordable cost for humanitarian supplies including life-saving vaccines. A special thanks to Gavi who made at least US$ 40 million available to UNICEF to secure vital supplies, including vaccines and personal protective equipment on behalf of 58 low and lower-middle-income countries as they respond to the COVID-19 pandemic.

Third, we need to look for innovative solutions to keep vaccinations going. And some countries are already leading the way. Uganda, for example, is ensuring that immunization services continue along with other essential health services, even funding transportation to ensure outreach activities...

Fourth, vaccines need to be affordable and accessible to those who need them the most.

And last, we need to make sure we have the resources to do all of this. This is a significant undertaking that requires generosity and commitment. We know only too well that when it comes to some of these diseases, no child is safe until every child is safe. Ahead of the Gavi replenishment conference in June, the call for additional funding cannot be timelier.

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Framework for decision-making: implementation of mass vaccination campaigns in the context of COVID-19
WHO Interim guidance
22 May 2020

Background
Mass vaccination campaigns to prevent or respond to outbreaks of vaccine-preventable diseases and high impact diseases (VPD/HID) are effective strategies to reduce deaths and disease. Yet many countries have had to postpone such vaccination campaigns due to the physical distancing measures implemented to reduce COVID-19 transmission.

For countries affected by both VPD/HID and COVID-19 outbreaks, determining the best course of action may be challenging. Weighing the benefits of a safe and effective intervention that reduces mortality and morbidity against the risks of increasing transmission of a new disease that may burden essential health services can be complex. The starting point for such considerations is a risk-benefit analysis that reviews in detail the epidemiological evidence and weighs the short- and medium-term public health consequences of implementing or postponing mass vaccination campaigns, weighed against a potential increase in COVID-19 transmission.

In the context of the COVID-19 pandemic, this document:
1. outlines a common framework for decision-making for the conduct of preventive and outbreak response campaigns;
II. offers principles to consider when deliberating the implementation of mass vaccination campaigns for prevention of increased risk of VPD/HID among susceptible populations; and

III. details the risks and benefits of conducting vaccination campaigns to respond to VPD/HID outbreaks.

This document is complemented by an annex (Annex 1) that provides guidance on how to safely organize a mass vaccination campaign, and is supplemented by a range of technical materials on prevention, response and control measures for COVID-19, including the 
:: Guiding principles for immunization activities during the COVID-19 pandemic: Interim guidance,2
:: the Frequently Asked Questions: Immunization in the context of COVID-19 pandemic,3 and
:: the Polio eradication programme continuity: implementation in the context of the COVID-19 pandemic.4 This interim guidance should also be used in conjunction with existing disease-specific WHO prevention and control guidelines.

Audience
This interim guidance is to be used by national health authorities (and subnational where appropriate), together with immunization programme partners...

EMERGENCIES

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

Editor’s Note:
We certainly recognize the velocity of global developments in the COVID-19 pandemic. While we have selected some key announcements and reports here and above, 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, the WHO’s authoritative guidance is available here:
:: Daily WHO situation reports here: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports

Situation report - 124  [WHO]
Novel Coronavirus (COVID-19)
23 May 2020
[Excerpts]
Situation in numbers (by WHO Region)
Total (new cases in last 24 hours)
Globally 5 103 006 cases (109 536) 333 401 deaths (5 663)
Africa 74 256 cases (2 504) 2 040 deaths (59)
Americas 2 282 488 cases (62 221) 135 184 deaths (3 579)
Eastern Mediterranean 402 919 cases (13 331) 10 806 deaths (158)
Europe 1 987 657 cases (21 413) 172 958 deaths (1 631)
South-East Asia 182 278 cases (9 119) 5 556 deaths (209)
Western Pacific 172 696 cases (948) 6 844 deaths (27)

**HIGHLIGHTS**
:: WHO has published a [COVID-19 Monitoring and Evaluation Framework](https://www.who.int/publications/i/item/2020.129) listing the key public health and essential health services and systems indicators to monitor preparedness, response, and situations during the COVID-19 pandemic.
:: WHO has updated a document on [Operational Planning Guidelines to Support Country Preparedness and Response](https://www.who.int/publications/i/item/2020.126). The document provides a practical guide that can be used by national authorities to develop and update their COVID-19 national plans across the major pillars of COVID-19 preparedness and response.
:: WHO published an interim guidance on [Framework for decision-making: implementation of mass vaccination campaigns in the context of COVID-19](https://www.who.int/publications/i/item/2020.153). The document describes the principles to consider when deliberating the implementation of mass vaccination campaigns for prevention of vaccine-preventable diseases and high impact diseases (VPD/HID), and when assessing risks and benefits of conducting outbreak-response vaccination campaigns to respond to VPD/HID outbreaks.
:: WHO has published an interim guidance on [Controlling the spread of COVID-19 at ground crossings](https://www.who.int/publications/i/item/2020.169) advising countries to reduce the spread of COVID-19 resulting from travel, transportation, and trade on and around ground crossings.

**Emergencies**

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

**Ebola Outbreak in DRC 93: 19 May 2020**  
*[Excerpts]*  
**Situation Update**
From 11 to 17 May 2020, there have been no new confirmed cases of Ebola virus disease (EVD) reported in Democratic Republic of the Congo. Since the resurgence of the outbreak on 10 April 2020, seven confirmed cases have been reported from Kasanga, Malepe a and Kanzulinzuli Health Areas in Beni Health Zone. So far, no definitive source of infection has been identified...

**Conclusion**
Despite the launch of the 42-day countdown, efforts to retrieve the missing confirmed case and investigations into the origin of the latest cluster are still ongoing. Given the long duration and large magnitude of the Ebola outbreak in North Kivu, South Kivu and Ituri Provinces in the Democratic Republic of the Congo, there is a risk of re-emergence of the virus during the lead up to the declaration of the end of the outbreak, and for several months following that declaration. In the coming weeks and months, it is crucial to maintain a strong and robust
surveillance system in order to detect, isolate, test and treat new suspected cases as early as possible, to improve outcome of potential cases, and to break new chains of transmission. Maintaining strong communication and coordination among partners, authorities and affected communities, as well as continuing support for and engagement with EVD survivors are essential in this outbreak response.

Emergencies

POLIO
Public Health Emergency of International Concern (PHEIC)

Polio this week as of 19 May 2020
:: The Independent Monitoring Board (IMB) of the GPEI has announced the appointment of new members of a reconstituted polio Transition Independent Monitoring Board (TIMB). Read more [see below]...
:: This month, world leaders have joined together to make several important commitments to strengthening public health infrastructure during the COVID-19 response – investments that will go a long way in protecting the most vulnerable communities, including those affected by polio. Read more...

Summary of new viruses this week (AFP cases and ES positives):
:: Afghanistan: one WPV1 positive environmental sample and five cVDPV2 cases
:: Pakistan: nine WPV1 positive environmental samples and one cVDPV2 case

TIMB Members [Transition Independent Monitoring Board]
The previous TIMB monitored the situation over a period of three years (November 2016 – December 2019), in the light of progress towards polio eradication. Its role was to independently assess the GPEI’s policy and plans to transition and sustain those polio assets and resources that have played a major dual role in underpinning wider immunisation and other essential health programmes. The TIMB members played an invaluable part in meetings and in the production of three major reports that helped to shape the polio transition process.

TIMB Reports – GPEI
With the adoption by the 71st World Health Assembly of a 5-year strategic plan for polio transition, responsibility for leading planning and implementation passed to the World Health Organization. Necessary organisational changes followed and included a new TIMB to be smaller and more closely aligned with the IMB.

Strategic Action Plan on Polio Transition – WHA 71
On the basis of the new arrangements three TIMB members have been appointed to serve under the chairmanship of Sir Liam Donaldson who will also continue to chair the IMB.

THE MEMBERS
Sheila Leatherman, CBE, Hon RCP is a Professor of Global Health Policy at the Gillings School of Public Health of the University of North Carolina. Her professional experience stretches across the breadth of health care management, public health and health policy with expertise in quality of care, performance improvement in the health sector, and health systems reforms. She has worked with over 50 countries globally across North America, Europe, Africa, Asia and Latin America. Most of her research and policy analysis has been on developing methods to assess health system performance and advising on how to improve quality of care in countries throughout the world.

She was elected to the U.S. National Academy of Sciences in 2002 as a member of the Institute of Medicine. In 2007 she was awarded the honour of Commander of the British Empire (CBE) by Queen Elizabeth for her work in the National Health Service for over a decade and was appointed an Honorary fellow of the Royal College of Physicians in The UK in 2008. In 2019, she received the Presidential Distinction Award of the International Society for Quality in recognition of her work in low- and medium-income countries.

Currently, as a Lead advisor to the World Health Organization she develops the academic and technical foundations for WHO support of Member States in the development of national health care quality agendas to improve health care services and outcomes globally. Her current research focuses on improving care in fragile states, humanitarian crises and conflict zones.

She serves on the Board of Advisors for Doctors Without Borders (MSF- USA) and is a Board member and health advisor to Questscope NGO working in Jordan and Syria with refugees and displaced persons.

Lola Dare is a community physician, epidemiologist, global health practitioner, development consultant, social entrepreneur and health advocate of over 30 years. She has championed the application of evidence and data for policy, evaluation and accountability by a broad range of non-state actors including civil society and community-based organisations, private sector and the media. Lola Dare has been in the forefront of advocacy for resilient, accountable rights-based health care services and systems strengthening, and has engaged with high level policy makers, parliamentarians, large donor funded programmes, national governments, intergovernmental organisations and agencies. She is the President of CHESTRAD Global, an African-led social enterprise with offices in Africa, Europe and North America. CHESTRAD Global hosts its programme headquarters in Nigeria. She has served in many roles in governance mechanisms of international agencies including the Institute of Medicine (IOM) of the US National Academies for Sciences, Global Fund for Malaria, Tuberculosis and HIV/AIDS, GAVI, Partnership for Maternal and Child Health (PMNCH), WHO technical teams and agencies of the United Nations, African Union and other African continental organisations.

Senjuti Saha is a Bangladeshi-Canadian microbiologist working at the intersection of Clinical Microbiology and Global Health as a Scientist at the Child Health Research Foundation in Bangladesh. Her work is grounded in advancing the cause of health and research equity, based on her vision that everyone across the world should have equal access to the practice and benefits of science. The focus of her work is on paediatric preventable infectious diseases, with the goals of: (1) using state-of-the-art technology like on-site metagenomics to identify aetiologies that elude standard laboratory testing in low- and middle-income countries and (2) understanding the indirect impacts of interventions like vaccines on the overall health system. She advocates for equal access to scholarly literature and science education. The team’s mission at the Child Health Research Foundation in Bangladesh is to break free of the vicious cycle of limited resources that lead to lack of data required for evidence-based policy decisions.
This in turn leads back to limited resources; instead, the commitment is to build virtuous cycles of data-generation, that are sustainable and cost-effective.

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**WHO Grade 3 Emergencies** [to 23 May 2020]

**Democratic Republic of the Congo**
:: Ebola Outbreak in DRC 93: 19 May 2020
[See Ebola above for detail]

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

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**WHO Grade 2 Emergencies** [to 23 May 2020]

**Burkina Faso** [in French]
:: Riposte contre le COVID-19 au Burkina Faso : L’OMS offre au ministère de la santé un...
22 mai 2020

**Myanmar**
:: Weekly Situation Report 6 - 19 May 2020 pdf, 335kb
  
  **HIGHLIGHTS**

  :: A total of 191 COVID-19 positive cases have been reported in Cox’s Bazar district (including Rohingya camps) as of 17 May 2020 as per Civil Surgeon Office, Cox’s Bazar. From the laboratory confirmed cases, the average age is 33.9 years (median 31, range 2-90) and around 75% of them are male

  :: Five confirmed cases have been reported in Rohingya camps as of 17 May 2020. A total of 80 individuals are in institutional quarantine in the camps

  :: Partners who are managing health facilities were briefed on “Home-based care for mild and moderate COVID-19 symptoms and isolation support” initiative on 11 May 2020. Partners expressed their willingness to support the activity in the event of widespread community transmission in the camps

  Angola - No new digest announcements identified
Afghanistan - 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
Iran - 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
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 23 May 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 Response Update No. 04 - 18 May 2020
:: Syrian Arab Republic: COVID-19 Update No. 10 - 16 May 2020

Yemen - No new digest announcements identified

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

CYCLONE IDAI and Kenneth
:: 20 May 2019 Mozambique: Cyclone Idai & Floods Situation Report No. 22 (As of 20 May 2019)
:: 21 May 2020 Zimbabwe Situation Report, 21 May 2020

:: EBOLA OUTBREAK IN THE DRC - No new digest announcements identified

WHO & Regional Offices [to 23 May 2020]
News release
22 May 2020 News release
At least 80 million children under one at risk of diseases such as diphtheria, measles and polio as COVID-19 disrupts routine vaccination efforts, warn Gavi, WHO and UNICEF
[See Milestones above for detail]

21 May 2020  News release
WHO and UNHCR join forces to improve health services for refugees, displaced and stateless people

19 May 2020  News release
Historic health assembly ends with global commitment to COVID-19 response
[See Milestones above for detail]

Weekly Epidemiological Record, 22 May 2020, vol. 95, 21 (pp. 229–240)
Surveillance to track progress towards polio eradication worldwide, 2018–2019

WHO Regional Offices
Selected Press Releases, Announcements

WHO African Region AFRO
:: Africa COVID-19 cases top 100,000  22 May 2020
   The COVID-19 pandemic today reached a milestone in Africa, with more than 100,000 confirmed cases. The virus has now spread to every country in the continent since the first case was confirmed in the region 14 weeks ago.
:: WHO showcases leading African innovations in COVID-19 response  21 May 2020
   A community of African innovators is stepping up support to the continent’s fight against COVID-19 pandemic, collaborating with the World Health Organization (WHO) to develop solutions to help contain the spread of the virus.

WHO Region of the Americas PAHO
No new digest content identified.

WHO South-East Asia Region SEARO
:: India elected chair of WHO’s Executive Board  22 May 2020

WHO European Region EURO
:: Embracing cultural diversity unlocks key resources for more inclusive health systems  20-05-2020
:: WHO report on health behaviours of 11–15-year-olds in Europe reveals more adolescents are reporting mental health concerns  19-05-2020
:: HealthBuddy: a new chatbot to engage with communities in Europe and central Asia on COVID-19  18-05-2020

WHO Eastern Mediterranean Region EMRO
Statement by WHO's Regional Director for the Eastern Mediterranean Dr Ahmed Al-Mandhari on regional solidarity during the COVID-19 pandemic

20 May 2020 – The current COVID-19 pandemic has shown us all the severe and unimaginable impact that a public health threat can have on individuals, communities and nations. We have often said that infectious diseases respect no borders, and that an outbreak in one country can threaten the health security of the Region and beyond. Today, we are witnessing...

WHO Western Pacific Region
No new digest content identified.

CDC/ACIP [to 23 May 2020]
http://www.cdc.gov/media/index.html
http://www.cdc.gov/vaccines/acip/index.html
Latest News Releases
CDC updates COVID-19 transmission webpage to clarify information about types of spread Friday, May 22, 2020

CDC Releases Recommendations for Communities of Faith Friday, May 22, 2020

CDC Health Scientist wins 2019 Arthur S. Flemming Award Friday, May 22, 2020

CDC releases resources to assist states to open Wednesday, May 20, 2020

HHS Delivers Funding to Expand Testing Capacity for States, Territories, Tribes Monday, May 18, 2020

MMWR News Synopsis Friday, May 22, 2020
Outbreak of Norovirus Illness Among Wildfire Evacuation Shelter Populations — Butte and Glenn Counties, California, November 2018

Surveillance to Track Progress Toward Polio Eradication — Worldwide, 2018–2019

Decline in Child Vaccination Coverage During the COVID-19 Pandemic — Michigan Care Improvement Registry, May 2016–May 2020 (Early release May 18, 2020)

High COVID-19 Attack Rate Among Attendees at Events at a Church — Arkansas, March 2020 (Early release May 19, 2020)

Africa CDC [to 23 May 2020]
http://www.africacdc.org/
News
No new digest content identified.
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
May 23: Daily briefing on novel coronavirus cases in China
On May 22, 31 provincial-level regions on the Chinese mainland as well as the Xinjiang Production and Construction Corps reported no new cases of confirmed infections, 2 new cases of suspected infections, and no deaths.

China to strengthen international anti-epidemic cooperation
2020-05-22

Beijing issues guidance for the public on the proper use of face masks under regular containment measures
2020-05-23

China to issue 1-trillion-yuan government bonds for COVID-19 control
2020-05-22

President affirms support for WHO
2020-05-21

China brings COVID-19 epidemic under control in short time: spokesperson
2020-05-21

Dr. Tedros: WHO will continue providing strategic leadership to coordinate the global response to COVID-19
2020-05-21

Xi's WHA speech wins acclaim across world
2020-05-20

Unity, leadership, equity highlighted at COVID-19-dominated WHO meeting
2020-05-20

Announcements

Paul G. Allen Frontiers Group  [to 23 May 2020]
News

News from The Paul G. Allen Frontiers Group: May 2020
May 20, 2020
Highlights include an important message for our research community, a face mask that detects coronavirus, our new video series #ScienceMatters, and more.

BARDA  [to 23 May 2020]
https://www.phe.gov/about/barda/Pages/default.aspx
BARDA News
May 21, 2020: Trump Administration’s Operation Warp Speed Accelerates AstraZeneca COVID-19 Vaccine to be Available Beginning in October


BMGF - Gates Foundation  [to 23 May 2020]
http://www.gatesfoundation.org/Media-Center/Press-Releases
MAY 21, 2020
Bill & Melinda Gates Foundation Appoints Three New Members to Executive Leadership Team
SEATTLE, May 21, 2020 – Today the Bill & Melinda Gates Foundation named three new members to its Executive Leadership Team (ELT). Ankur Vora will become Chief Strategy Officer, Gargee Ghosh will become President, Global Policy & Advocacy, and Susan Byrnes will become Chief Communications Officer. Each will assume their new roles effective June 1, 2020.

Bill & Melinda Gates Medical Research Institute  [to 23 May 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 23 May 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.
05.18.2020
CARB-X funds Facile Therapeutics to develop a new treatment to prevent recurring C. difficile bacterial infections
CARB-X is awarding Facile Therapeutics, based in Belmont, California, USA, up to $1.26 million to develop a new orally bioavailable drug to treat recurring infections caused by Clostridium difficile. Facile could receive up to $17 million more in additional funding from
CARB-X if the project achieves certain development milestones, for a potential total of $18.26 million.

**CEPI – Coalition for Epidemic Preparedness Innovations** [to 23 May 2020]
http://cepi.net/
Latest News
No new digest content identified.

**Clinton Health Access Initiative, Inc. (CHAI)** [to 23 May 2020]
https://clintonhealthaccess.org/
News & Press Releases
No new digest content identified.

**EDCTP** [to 23 May 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
18 May 2020
World HIV Vaccine Day 2020

**Emory Vaccine Center** [to 23 May 2020]
http://www.vaccines.emory.edu/
[Undated]
No new digest content identified.

**European Medicines Agency** [to 23 May 2020]
News & Press Releases
Press release: Global regulators commit to cooperate on observational research in the context of COVID-19
Last updated: 20/05/2020

News: Global regulators work towards alignment on policy approaches and regulatory flexibility during COVID-19 – update #2
Last updated: 18/05/2020

**European Vaccine Initiative** [to 23 May 2020]
http://www.euvaccine.eu/news-events
Latest News
Today, we are announcing another step in our effort to harness diverse streams of data to understand and respond to COVID-19. The U.S. Food and Drug Administration has entered into an agreement with Aetion to collaborate on advanced analytical techniques to answer urgent coronavirus disease (COVID-19) research questions. The FDA and Aetion aim to answer questions about the use of diagnostics and medications in the pandemic, and risk factors for COVID-19-related complications in different patient populations. We believe that this work has the potential to contribute to the scientific evaluation of potential diagnostics and interventions for COVID-19...

The UK government will host Gavi’s third donor pledging conference to mobilise at least US$ 7.4 billion in additional resources to protect the next generation with vaccines, reduce disease inequality and create a healthier, safer and more prosperous world.
22 May 2020

At least 80 million children at risk of disease as COVID-19 disrupts vaccination efforts, warn Gavi, WHO and UNICEF
[See Milestones above]

GHIT Fund  [to 23 May 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 23 May 2020]
Sourcing & Management of Health Products
Voices
During COVID-19, HIV Medication in Ukraine Arrives by Post
19 May 2020

Video
Building Resilient and Sustainable Systems for Health
19 May 2020

Updates
Resources for Community-Based Monitoring
18 May 2020

Hilleman Laboratories  [to 23 May 2020]
http://www.hillemanlabs.org/
No new digest content identified.

Human Vaccines Project  [to 23 May 2020]
http://www.humanvaccinesproject.org/media/press-releases/
No new digest content identified.

IAVI  [to 23 May 2020]
https://www.iavi.org/newsroom
Press Releases
No new digest content identified.

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/
*Press Releases*
No new digest content identified.

**IFRC**  [to 23 May 2020]
*Selected Press Releases, Announcements*
Africa, Burundi, Ethiopia, Kenya, Rwanda, South Sudan, Tanzania, Uganda

**East Africa: Red Cross raises the alarm over a “triple menace” of floods, COVID-19 and locusts**
Nairobi/Geneva, 20 May 2020—A series of mutually exacerbating disasters is unfolding in East Africa, on a scale rarely seen in decades, warned the International Federation of Red Cross and Red Crescent Societies (IFRC). Ongoing heavy rain—which has kil ...
20 May 2020

**IVAC**  [to 23 May 2020]
https://www.jhsph.edu/research/centers-and-institutes/ivac/index.html
*Updates*
No new digest content identified.

**IVI**  [to 23 May 2020]
http://www.ivi.int/
*Selected IVI News & Announcements*

**IVI to strengthen COVID-19 surveillance in sub-Saharan Africa with support from Sweden**
IVI will leverage its network of infectious disease surveillance sites to conduct epidemiological studies of COVID-19 in Madagascar and Burkina Faso

Sida’s contribution will significantly build in-country capacity to proactively respond to the pandemic

May 21, 2020 – SEOUL, South Korea – The International Vaccine Institute (IVI) announced today that the Swedish International Development Cooperation Agency (Sida) has contributed an additional 6,200,000 SEK (approx. 630,000 USD) to IVI to support national responses to COVID-19 in Madagascar and Burkina Faso...

**JEE Alliance**  [to 23 May 2020]
MSF/Médecins Sans Frontières [to 23 May 2020]
http://www.msf.org/
Latest [Selected Announcements]
Nigeria
MSF statement on inquiry in Borno, Nigeria
Statement 22 May 2020
Médecins Sans Frontières (MSF) has taken note of the first public communication from the Committee set up by the Governor of Borno state, Nigeria, regarding the inquiry into the COVID-19 index case...

Yemen
Catastrophe unfolding in Aden’s only COVID-19 treatment centre
Press Release 21 May 2020

South Sudan
Renewed violence in Pieri kills and wounds dozens, including MSF staff
Press Release 19 May 2020

Coronavirus COVID-19 pandemic
MSF opens a COVID-19 treatment centre in Haiti
Project Update 18 May 2020

Coronavirus COVID-19 pandemic
Five things we can do to protect people on the move during COVID-19
Project Update 18 May 2020

National Vaccine Program Office - U.S. HHS [to 23 May 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 23 May 2020]
Selected News Releases
Peer-reviewed data shows remdesivir for COVID-19 improves time to recovery
May 22, 2020 — Preliminary results from NIH clinical trial published.

NIH-funded study to investigate pregnancy outcomes resulting from COVID-19 pandemic
May 19, 2020 — Researchers to evaluate medical records of 21,000 pregnant women
NIH Director: Defeating COVID-19 requires unprecedented action and collaboration

May 18, 2020 — ever has a public-private biomedical research effort of this scope and scale come together with such speed and determination. Viewpoint published today in JAMA

[See Milestones above for detail]

PATH [to 23 May 2020]
https://www.path.org/media-center/

Selected Announcements

PATH and partners coordinate COVID-19 global respiratory care response

Seattle, WA, May 20, 2020 – PATH and a coalition of partners will support low- and middle-income countries (LMICs) in the development and execution of a comprehensive respiratory care plan to respond to COVID-19. The initiative will also pursue strategies to help prioritize and improve access to oxygen therapy and other essential equipment involved in respiratory care as an integral part of health systems strengthening, beyond the pandemic response.

Studies have shown that approximately 41 percent of confirmed COVID-19 patients—and in severe cases, more than 60 percent—received oxygen therapy to support breathing. In many health facilities across LMICs, oxygen therapy—including diagnosis, generation, and delivery equipment—is not reliably available, and, without careful planning and coordination, the rapid deployment of COVID-19 resources can quickly overwhelm existing health care systems.

A primary goal of the initiative is to coordinate tools, resources, and capabilities to ensure that those who need respiratory care due to COVID-19, or beyond, receive it. Immediate steps in that strategy will include supporting rapid respiratory care capacity assessments, supplier landscaping and outreach, global respiratory care response coordination, and informed decision-making on procurement and use of respiratory care products...

Sabin Vaccine Institute [to 23 May 2020]
http://www.sabin.org/updates/pressreleases

Statements and Press Releases

No new digest content identified.

UNAIDS [to 23 May 2020]
http://www.unaids.org/en

Selected Press Releases/Reports/Statements

22 May 2020

UNAIDS and civil society helping stranded people living with HIV

21 May 2020

Mapping community responses to COVID-19 and HIV in eastern Europe and central Asia

21 May 2020

Communities strengthening the AIDS response in Nepal
20 May 2020
**Kenyan sex workers abandoned and vulnerable during COVID-19**

19 May 2020
**The high possible cost of COVID-19 on new HIV infections among children**

19 May 2020
**Gender-based violence and COVID-19—“When we are silent, we allow these crimes to multiply”**

**UNICEF** [to 23 May 2020]
https://www.unicef.org/media/press-releases
Selected Press releases/Announcements
Statement
Remarks by Henrietta Fore UNICEF Executive Director at joint press briefing on immunization with WHO and Gavi, 22 May
22/05/2020

**Press release**
At least 80 million children under one at risk of diseases such as diphtheria, measles and polio as COVID-19 disrupts routine vaccination efforts, warn Gavi, WHO and UNICEF
Agencies call for joint effort to safely deliver routine immunization and proceed with vaccination campaigns against deadly vaccine-preventable diseases.
22/05/2020

**Press release**
Surge in violent attacks during COVID-19 lockdown puts children’s lives at risk in eastern Ukraine
UN Children’s Agency calls for all parties to the conflict to join global ceasefire and end more than six years of fighting
22/05/2020

**Press release**
COVID-19: Dangers mount for migrant children forcibly returned to northern Central America and Mexico during pandemic
Virus fears compound existing discrimination and violence for returned migrant children, leaving them doubly at risk, UNICEF warns
21/05/2020

**Press release**
At least 19 million children at imminent risk as Cyclone Amphan makes landfall in Bangladesh and India
Cyclone and COVID-19 present dual threats to children and families in the region, warns UNICEF
20/05/2020
UNICEF and Airtel Africa announce partnership to support children and families affected by COVID-19

As millions of children are affected by school closures due to COVID-19, Airtel Africa will help provide access to online learning and better enable cash transfers for children and their families in sub-Saharan Africa
20/05/2020

Escalating violence in eastern DRC is straining humanitarian assistance to women and children
20/05/2020

Over quarter of a million children in Libya are at risk from vaccine-preventable diseases
Joint UNICEF & WHO Press Release
19/05/2020

Unitaid [to 23 May 2020]
https://unitaid.org/

World Health Assembly puts multilateral cooperation and equity at heart of COVID-19 response

Unitaid welcomes the adoption of a key Resolution by the World Health Assembly that sets out its response to the COVID-19 pandemic, that places multilateral cooperation and equity at its heart.

The Resolution calls for universal, timely and equitable access to and fair distribution of all quality, safe, efficacious and affordable essential health technologies and products as a global priority.

In particular Unitaid notes the call for collaboration to develop, test, and scale-up production of safe, effective, quality, affordable diagnostics, therapeutics, medicines and vaccines for the COVID-19 response, including, existing mechanisms for voluntary pooling and licensing of patents to facilitate timely, equitable and affordable access.

Speaking after the adoption of the Resolution, Dr Philippe Duneton, Unitaid Executive Director a.i. said, “Unitaid is committed to working with its partners in the Access to COVID-19 Tools Accelerator initiative to ensure that innovations to detect, treat and prevent COVID-19 are adapted and available to the most vulnerable populations.”

He continues, “As highlighted in the Resolution, Unitaid encourages all partners to take advantage of existing mechanisms for voluntary pooling and licensing of intellectual property rights for these global public goods, in particular the Medicines Patent Pool. We also recognise the importance of involving civil society and communities in shaping and delivering the response.”

For the text of Resolution A73/CONF./1 Rev.1, adopted on 19 May 2020, please see here.
**Vaccination Acceptance Research Network (VARN)**  [to 23 May 2020]
https://vaccineacceptance.org/news.html#header1-2r

*Announcements*

*No new digest content identified.*

**Vaccine Confidence Project**  [to 23 May 2020]
http://www.vaccineconfidence.org/

*Latest News & Archive*

**Child Vaccinations Plummet 63 Percent, a New Hurdle for New York City Schools**  23 May 2020

**Vaccine Education Center – Children’s Hospital of Philadelphia**  [to 23 May 2020]
http://www.chop.edu/centers-programs/vaccine-education-center

*No new digest content identified.*

**Wellcome Trust**  [to 23 May 2020]
https://wellcome.ac.uk/news

*Opinion | 21 May 2020*

**Open access: how COVID-19 will change the way research findings are shared**
Robert Kiley, Head of Open Research Wellcome

During the COVID-19 pandemic, researchers and publishers have pulled together to publish their outputs at an unprecedented rate. So, how have they responded? And how will this change research culture and the way findings are disseminated in future?

**The Wistar Institute**  [to 23 May 2020]

*Press Releases*

*May. 20, 2020*

**Positive Results from Preclinical Testing Support Clinical Development of COVID-19 DNA Vaccine**

PHILADELPHIA — (May 20, 2020) — The Wistar Institute, an international biomedical research leader in cancer, immunology and infectious disease, announces a study reporting initial immunogenicity of a synthetic DNA vaccine for SARS-CoV-2 developed in collaboration with Inovio Pharmaceutical, Inc., and other scientists. Published in *Nature Communications*, the report focuses on immune studies in animals, which show induction of functional antibody responses and T-cell responses following immunization. The vaccine, INO-4800, was advanced to phase 1 clinical testing in 10 weeks (clinicaltrials.gov NCT04336410).

**WFPHA: World Federation of Public Health Associations**  [to 23 May 2020]
https://www.wfpha.org/

*Latest News*

*No new digest content identified.*
**World Organisation for Animal Health (OIE)** [to 23 May 2020]  
Press Releases  
No new digest content identified.

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**ARM [Alliance for Regenerative Medicine]** [to 23 May 2020]  
Press Releases  
No new digest content identified.

BIO [to 23 May 2020]  
Press Releases  
No new digest content identified.

**DCVMN – Developing Country Vaccine Manufacturers Network** [to 23 May 2020]  
http://www.dcvmn.org/  
Events  
Webinar: A breakthrough high-performance viral vaccines bio-manufacturing platform to countermeasure epidemic threats
26 May 2020

**IFPMA** [to 23 May 2020]  
http://www.ifpma.org/resources/news-releases/  
Selected Press Releases, Statements, Publications  
Pharma and other innovative health groups tell World Health Assembly it stands united with governments

Geneva, May 19, 2020: At the Seventy-Third World Health Assembly, IFPMA, the industry body representing the innovative biopharmaceutical industry delivered a joint statement on behalf of the global interests of broad innovative health industries, reasserting that they stand united with governments and global health stakeholders worldwide to combat COVID-19. The biopharmaceutical industry is joined by biotech, self-medication, diagnostic, and medical technology industries committed to the goal of accelerating development, production and equitable global access to safe, quality, effective, and affordable COVID-19 medical products and to ensure that in the fight against COVID-19, no one is left behind.  

According to BioCentury, there are nearly 400 potential treatments and vaccines for COVID-19 in development. Much of the current COVID-19 R&D that has been deployed at an unprecedented speed is built upon products, expertise and research capacity that has been refined and developed by the private sector over many years and thanks to an ecosystem that supports innovation, which is underpinned by solid intellectual property rights.
Thomas Cueni, Director General of the IFPMA said: “We understand accelerated development and production of new COVID-19 tools is not enough: we must also ensure equitable global access to safe, quality, effective, and affordable COVID-19 diagnostics, therapeutics and vaccines – making sure no-one is left behind.

Biopharmaceutical companies have publicly committed to, and are actively working with, governments, insurers, foundations and international organizations to make future COVID-19 products available and affordable to those that need them”...

**Joint Statement – Innovative Health Industries @ WHA73**

Published on: 18 May 2020

This Statement is made by the International Federation of Pharmaceutical Manufacturers and Associations, the Global Diagnostic Imaging, Healthcare IT & Radiation Therapy Trade Association, the Global Self-Care Federation, the Global Medical Technology Alliance, and the International Council of Biotechnology Associations.

Our organizations believe that coordinated, inclusive, and multi-stakeholder action is the only possible solution to mitigate the impact of this unprecedented global health emergency, and believe the private sector must be an equal partner in coordination efforts. As WHO’s Director General has recently stated, “the private sector has an essential role to play in combating this public health crisis through their expertise, innovation, and resources.”...

**ICBA – International Council of Biotechnology Associations** [to 23 May 2020]
https://internationalbiotech.org/

*News*

**ICBA Joins Innovative Health Industries Network Statement on COVID-19 Ahead of World Health Assembly**

May. 18 2020

**PhRMA** [to 23 May 2020]
http://www.phrma.org/

*Selected Press Releases, Statements*

**Clinical Trials Awareness Week: Recognizing unsung heroes in medical research**

Richard Moscicki, M.D.  |  May 18, 2020

This week is *Clinical Trials Awareness* Week — an event to recognize the importance of clinical trials, raise public awareness of clinical research and honor clinical research professionals and importantly, volunteer participants for their roles in helping to develop safe and effective medicines.

The biopharmaceutical industry sponsors thousands of clinical trials each year to assess the safety and efficacy of medicines, vaccines and other therapies. Instrumental to these carefully designed studies is patient participation. According to most recent data, industry-sponsored clinical trials engage over 920,000 volunteers yearly to assess effectiveness for devastating conditions, like Alzheimer’s disease, rare diseases and cancers...

**Industry Watch** [to 23 May 2020]
:: **Sinovac Secures $15 Million in Funding to Accelerate COVID-19 Vaccine Development**

May 22, 2020

Sinovac Biotech Ltd. ("Sinovac" or the "Company") (NASDAQ: SVA), a leading provider of biopharmaceutical products in China, today announced a transaction in which Advantech Capital and Vivo Capital ha...

:: **Moderna Announces Positive Interim Phase 1 Data for its mRNA Vaccine (mRNA-1273) Against Novel Coronavirus**

May 18, 2020

Moderna, Inc., (Nasdaq: MRNA) a clinical stage biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines to create a new generation of transformative medicines for patients, toda...

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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 focu-s 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 selectvely 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**

May 2020 Volume 48, Issue 5, p471-590

http://www.ajicjournal.org/current

*The Importance of Hand Hygiene in the Current Healthcare Environment*

[Reviewed earlier]

**American Journal of Preventive Medicine**

May 2020 Volume 58, Issue 5, p613-756

http://www.ajpmonline.org/current

[Reviewed earlier]

**American Journal of Public Health**

May 2020  110(5)

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

[Reviewed earlier]
American Journal of Tropical Medicine and Hygiene
Volume 102, Issue 4, April 2020
http://www.ajtmh.org/content/journals/14761645/102/4
[Reviewed earlier]

Annals of Internal Medicine
5 May 2020 Volume 172, Issue 9
http://annals.org/aim/issue
[Reviewed earlier]

Artificial Intelligence – An International Journal
Volume 282 May 2020
[Reviewed earlier]

BMC Cost Effectiveness and Resource Allocation
http://resource-allocation.biomedcentral.com/
(Accessed 23 May 2020)
[No new digest content identified]

BMJ Global Health
May 2020 - Volume 5 - 5
https://gh.bmj.com/content/5/5
Editorial
Reforming the World Health Assembly (17 May, 2020)
Rachel Irwin

Making sense of dictatorships and health outcomes (13 May, 2020)
Vincent Geloso, Gilbert Berdine, Benjamin Powell

Modelling the cost-effectiveness of introducing subsidised malaria rapid diagnostic tests in the private retail sector in sub-Saharan Africa (20 May, 2020)
David Bath, Catherine Goodman, Shunmay Yeung

Safe management of bodies of deceased persons with suspected or confirmed COVID-19: a rapid systematic review (14 May, 2020)
Sally Yaacoub, Holger J Schünemann, Joanne Khabsa, Amena El-Harakeh, Assem M Khamis, Fatimah Chamseddine, Rayane El Khoury, Zahra Saad, Layal Hneiny, Carlos Cuello Garcia, Giovanna Elsa Ute Muti-Schünemann, Antonio Bognanni, Chen Chen, Guang Chen, Yuan Zhang, Hong Zhao, Pierre Abi Hanna, Mark Loeb, Thomas Piggott, Marge Reinap, Nesrine Rizk, Rosa Stalteri, Stephanie Duda, Karla Solo, Derek K Chu, Elie A Akl
**Community health workers and early detection of breast cancer in low-income and middle-income countries: a systematic scoping review of the literature** (13 May, 2020)
James O'Donovan, Ashley Newcomb, MacKenzie Clark MacRae, Dorice Vieira, Chinelo Onyilofor, Ophira Ginsburg

**Facial protection for healthcare workers during pandemics: a scoping review** (5 May, 2020)

**Practice**

**How to prevent and address safeguarding concerns in global health research programmes: practice, process and positionality in marginalised spaces** (13 May, 2020)

**Summary box**

:: Safeguarding challenges in global health research are shaped by power relations (eg, gender, age) and context (eg, informal urban spaces) and include sexual abuse and exploitation, physical and psychological abuse, exploitation and neglect.
:: The literature on safeguarding in global health research is very limited; documented participatory processes that capture the situated knowledge, experience, difficulties and practice of different actors is required across varied contexts and health issues.
:: Safeguarding processes need to be committed to changing power relations through the use of approaches that build trust and are centred around the needs of survivors.

**BMC Health Services Research**
http://www.biomedcentral.com/bmchealthservres/content
(Accessed 23 May 2020)
[No new digest content identified]

**BMC Infectious Diseases**
http://www.biomedcentral.com/bmcinfectdis/content
(Accessed 23 May 2020)
[No new digest content identified]

**BMC Medical Ethics**
BMC Medicine
http://www.biomedcentral.com/bcmmed/content
(Accessed 23 May 2020)
Africa’s response to COVID-19
Authors: Chikwe Ihekweazu and Emmanuel Agogo
Citation: BMC Medicine 2020 18:151
Content type: Commentary
Published on: 22 May 2020

...Conclusions
Despite the resilience of the people and some progress in public health systems, African countries will still be stretched as the pandemic spreads across the continent and as the containment measures succumb to the pressures of time, limited resources, and increased rate of infections. In the meantime, African countries are leveraging investments in syndromic surveillance and case-finding through IDSR; scaling molecular testing capacity developed for other diseases; deploying trainees in field epidemiology training programs to lead the field response; and using her most precious resource—her young people—to undertake contact tracing, staff isolation centers and provide the supportive care that is available. The management of these resources has shown to be the best fit in national public health institutes, which have been rapidly established and strengthened in the last decade in Africa. So far, the response in Africa has been marked by innovation and resilience in the face of almost insurmountable odds and in the resounding collapse of multilateralism. However, as always, Africa will survive.

BMC Pregnancy and Childbirth
http://www.biomedcentral.com/bmcpregnancychildbirth/content
(Accessed 23 May 2020)
[No new digest content identified]

BMC Public Health
http://bmcpublichealth.biomedcentral.com/articles
(Accessed 23 May 2020)
A cross-sectional analysis of falsified, counterfeit and substandard medicines in a low-middle income country
High prevalence of falsified, counterfeit and substandard medicines pose a threat to public health and treatment failure. This study aimed to investigate the quality of selected essential medicines available i...
Authors: Daariimaa Khurelbat, Gereltuya Dorj, Bruce Sunderland, Tsetsegmaa Sanjjav, Enkhtuul Bayarsaikhan, Davaadagva Damdinjav, Gantuya Dorj, Altantuya Jigjidsuren, Oyun Lkhagvasuren and Baasandorj Erdenetsetseg
Citation: BMC Public Health 2020 20:743
Content type: Research article
Compliance with the guidelines on recommended immunization schedule in patients with inflammatory bowel disease: implications on public health policies

Patients with inflammatory bowel disease (IBD) have a higher risk of developing opportunistic infections due to either the disease itself or to treatment with immunosuppressants. This risk can be reduced throu...

Authors: Cristina García-Serrano, Glòria Mirada, Josep R Marsal, Marta Ortega, Joaquim Sol, Rubén Solano, Eva M Artigues and Pepi Estany

Citation: BMC Public Health 2020 20:713

Content type: Research article
Published on: 19 May 2020

BMC Research Notes
http://www.biomedcentral.com/bmcresearchnotes/content
(Accessed 23 May 2020)
[No new digest content identified]

BMJ Open
May 2020 - Volume 10 - 5
https://bmjopen.bmj.com/content/10/5
[Reviewed earlier]

Bulletin of the World Health Organization
Volume 98, Number 5, May 2020
https://www.who.int/bulletin/volumes/98/5/en/
[Reviewed earlier]

Child Care, Health and Development
Volume 46, Issue 3 Pages: 249-396 May 2020
https://onlinelibrary.wiley.com/toc/13652214/current
[Reviewed earlier]

Clinical Pharmacology & Therapeutics
Volume 107, Issue 6 Pages: 1263-1457 June 2020
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Clinical Therapeutics
April 2020 Volume 42, Issue 4, p551-728, e65-e86
http://www.clinicaltherapeutics.com/current
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Volume 17 Issue 2, April 2020
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[Reviewed earlier]

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http://www.conflictandhealth.com/
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[No new digest content identified]

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Volume 90   March 2020
https://www.sciencedirect.com/journal/contemporary-clinical-trials/vol/90/suppl/C
[Reviewed earlier]

The CRISPR Journal
Volume 3, Issue 2 / April 2020
https://www.liebertpub.com/toc/crispr/3/2
[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
June 2020 - Volume 33 - Issue 3
https://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx
[Reviewed earlier]

Developing World Bioethics
Volume 20, Issue 1   Pages: 1-60   March 2020
https://onlinelibrary.wiley.com/toc/14718847/current
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Development in Practice
Volume 30, Issue 2, 2020
http://www.tandfonline.com/toc/cdip20/current
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**Disaster Medicine and Public Health Preparedness**  
Volume 14 - Issue 1 - February 2020  
https://www.cambridge.org/core/journals/disaster-medicine-and-public-health-preparedness/latest-issue  
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**Disasters**  
Volume 44, Issue 2  Pages: 233-432  April 2020  
https://onlinelibrary.wiley.com/toc/14677717/current  
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**EMBO Reports**  
Volume 21  Issue 5  6 May 2020  
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[Reviewed earlier]

**Emerging Infectious Diseases**  
Volume 26, Number 5—May 2020  
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**Epidemics**  
Volume 30  March 2020  
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**Epidemiology and Infection**  
Volume 148 - 2020  
https://www.cambridge.org/core/journals/epidemiology-and-infection/latest-issue  
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Volume 42, Issue 3  Pages: 1-44  May–June 2020  
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*Perspectives of minors and parents ● Non-English speakers ● Covid-19 and other infectious diseases*  
*Articles*  
The Importance of Engaging Children in Research Decision-Making: A Preliminary Mixed-Methods Study  
Erin Talati Paquette, Hannah Palac, Elizabeth Bair, Blake Schultz, Nicole Stenquist, Steven Joffe
Globalization and Health
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Health Affairs
Vol. 39, No. 4  April 2020
https://www.healthaffairs.org/toc/hlthaff/current
Integrating Social Services & Health
[Reviewed earlier]

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Health Economics, Policy and Law
Volume 15 - Issue 2 - April 2020
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Health Policy and Planning
Volume 35, Issue 4, May 2020,
https://academic.oup.com/heapol/issue/35/4
[Reviewed earlier]

Health Research Policy and Systems
http://www.health-policy-systems.com/content
[Accessed 23 May 2020]
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Human Gene Therapy
Volume 31, Issue 9-10 / May 2020
https://www.liebertpub.com/toc/hum/31/9-10
[Reviewed earlier]

Humanitarian Exchange Magazine
Number 77,  March 2020
Responding to Ebola in the Democratic Republic of Congo
by Humanitarian Practice Network

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

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

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

Human Vaccines & Immunotherapeutics (formerly Human Vaccines)
Volume 16, Issue 4, 2020
http://www.tandfonline.com/toc/khvi20/current
[Reviewed earlier]

Infectious Agents and Cancer
http://www.infectagentscancer.com/content
[Accessed 23 May 2020]
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Infectious Diseases of Poverty
http://www.idpjournal.com/content
[Accessed 23 May 2020]
JAMA
May 19, 2020, Vol 323, No. 19, Pages 1873-1982
https://jamanetwork.com/journals/jama/currentissue

Original Investigation
Association of Public Health Interventions With the Epidemiology of the COVID-19 Outbreak in Wuhan, China
An Pan, PhD; Li Liu, MD, PhD; Chaolong Wang, PhD; et al.

free access has active quiz

This population epidemiology study examines associations between phases of nonpharmaceutical public health interventions (social distancing, centralized quarantine, home confinement, and others) and rates of laboratory-confirmed COVID-19 infection in Wuhan, China, between December 2019 and early March 2020.
Editorial

**Public Health Interventions for COVID-19: Emerging Evidence and Implications for an Evolving Public Health Crisis**
David M. Hartley, PhD, MPH; Eli N. Perencevich, MD, MS

**Viewpoint**
COVID-19: Beyond Tomorrow

**From Mitigation to Containment of the COVID-19 Pandemic: Putting the SARS-CoV-2 Genie Back in the Bottle**
Rochelle P. Walensky, MD, MPH; Carlos del Rio, MD
free access has active quiz has multimedia has audio

This Viewpoint discusses public health strategies necessary for the US to relax its mitigation strategies—most notably expanded testing, isolation, and contact-tracing in ways that avoid stigmatization of vulnerable populations—and proposes investing returns from a reopened economy to finance testing and public health infrastructure.

Audio Interview: COVID-19: From Mitigation to Containment

Editorial

**COVID-19—Looking Beyond Tomorrow for Health Care and Society**
Phil B. Fontanarosa, MD, MBA; Howard Bauchner, MD

**Treating COVID-19—Off-Label Drug Use, Compassionate Use, and Randomized Clinical Trials During Pandemics**
Andre C. Kalil, MD, MPH
free access has active quiz has audio

This Viewpoint uses the absence of known effective treatment for Ebola virus disease to emphasize the costs of off-label and compassionate drug use during an infectious disease outbreak and the importance of establishing the efficacy and safety of promising drug leads in randomized trials to inform their clinical use.

Clinical Review Audio: Coronavirus (COVID-19) Update: Chloroquine/Hydroxychloroquine and Azithromycin
Audio Interview: Coronavirus in New York - Report From the Front Lines

Editorial

**Randomized Clinical Trials and COVID-19—Managing Expectations**
Howard Bauchner, MD; Phil B. Fontanarosa, MD, MBA

**Finding Effective Treatments for COVID-19: Scientific Integrity and Public Confidence in a Time of Crisis**
Jesse L. Goodman, MD, MPH; Luciana Borio, MD
free access has active quiz

This Viewpoint discusses the risks to patients and public health posed by the FDA’s politically pressured Emergency Use Authorization (EUA) of chloroquine and hydroxychloroquine for COVID-19 treatment, and proposes principles to follow to ensure new therapies are studied properly and quickly to maximize benefits and minimize risks to patients.
Increasing Access to FDA Inspection Reports on Irregularities and Misconduct in Clinical Trials

Rafael Dal-Ré, MD, PhD, MPH; Aaron S. Kesselheim, MD, JD, MPH; Florence T. Bourgeois, MD, MPH


This Viewpoint reviews notable examples of clinical trial misconduct identified by routine US Food and Drug Administration (FDA) clinical trial site inspections and argues that making inspection reports publicly available on the agency’s and trial registry websites is important to maintaining the integrity of clinical research.

JAMA Pediatrics
May 2020, Vol 174, No. 5, Pages 401-512
http://archpedi.jamanetwork.com/issue.aspx
[Reviewed earlier]

JBI Database of Systematic Review and Implementation Reports
May 2020 - Volume 18 - Issue 5
https://journals.lww.com/jbisrir/Pages/currenttoc.aspx
[New issue; No digest content identified]

Journal of Adolescent Health
May 2020 Volume 66, Issue 5, p515-634
https://www.jahonline.org/issue/S1054-139X(20)X0005-X
[Reviewed earlier]

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

Journal of Community Health
Volume 45, Issue 3, June 2020
https://link.springer.com/journal/10900/45/3
[Reviewed earlier]

Journal of Development Economics
Volume 144 May 2020
[Reviewed earlier]
Journal of Empirical Research on Human Research Ethics
Volume 15 Issue 1-2, February-April 2020
http://journals.sagepub.com/toc/jre/current
Special Issue: Ethical Issues in Social Media Research
[Reviewed earlier]

Journal of Epidemiology & Community Health
May 2020 - Volume 74 - 5
https://jech.bmj.com/content/74/5
[New issue; No digest content identified]

Journal of Evidence-Based Medicine
Volume 13, Issue 1 Pages: 1-88 February 2020
https://onlinelibrary.wiley.com/toc/17565391/current
[Reviewed earlier]

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

Journal of Health Care for the Poor and Underserved (JHCPU)
Volume 31, Number 1, February 2020
https://muse.jhu.edu/journal/278
[Reviewed earlier]

Journal of Immigrant and Minority Health
Volume 22, Issue 3, June 2020
https://link.springer.com/journal/10903/22/3
[Reviewed earlier]

Journal of Immigrant & Refugee Studies
Volume 18, 2020, Issue 2
https://www.tandfonline.com/toc/wimm20/current
[Reviewed earlier]

Journal of Infectious Diseases
Volume 221, Issue 8, 15 April 2020,
https://academic.oup.com/jid/issue/221/8
Editor's Choice
Effects of Pneumococcal Conjugate Vaccine in the United Kingdom: Success of Vaccine Policy and Remaining Opportunities for Prevention
Tamara Pilishvili
The Journal of Infectious Diseases, Volume 221, Issue 8, 15 April 2020, Pages 1235–1237, https://doi.org/10.1093/infdis/jiz182

Editor's Choice
Bivalent Vaccine Effectiveness Against Anal Human Papillomavirus Positivity Among Female Sexually Transmitted Infection Clinic Visitors in the Netherlands
Petra J Woestenberg, Audrey J King, Birgit H B Van Benthem, Suzan Leussink, Marianne A B Van der Sande ...

Journal of Medical Ethics
May 2020 - Volume 46 - 5
http://jme.bmj.com/content/current
[Reviewed earlier]

Journal of Patient-Centered Research and Reviews
Volume 7, Issue 2 (2020)
https://digitalrepository.aurorahealthcare.org/jpcrr/
[Reviewed earlier]

Journal of Pediatrics
May 2020 Volume 220, p1-274
[Reviewed earlier]

Journal of Pharmaceutical Policy and Practice
https://joppp.biomedcentral.com/
[Accessed 23 May 2020]
[Reviewed earlier]

Journal of Public Health Management & Practice
May/June 2020 - Volume 26 - Issue 3
https://journals.lww.com/jphmp/pages/currenttoc.aspx
[Reviewed earlier]

Journal of Public Health Policy
Volume 41, Issue 2, June 2020
https://link.springer.com/journal/41271/41/2
[Reviewed earlier]
Perspectives

Interrupting transmission of COVID-19: lessons from containment efforts in Singapore
Vernon J Lee, PhD, Calvin J Chiew, MPH, Wei Xin Khong, PhD
Journal of Travel Medicine, Volume 27, Issue 3, April 2020, taaa039,
https://doi.org/10.1093/jtm/taaa039

Despite multiple importations resulting in local chains of transmission, Singapore has been able to control the COVID-19 outbreak without major disruption to daily living. In this article, we describe the combination of measures taken by Singapore to contain COVID-19 and share some early lessons learnt from the experience.

Original Article

Travel restrictions and infectious disease outbreaks
Ria Vaidya, MSc, Asha Herten-Crabb, MSc, Julia Spencer, MSc, Suerie Moon, PhD, Louis Lillywhite, MSc
Journal of Travel Medicine, Volume 27, Issue 3, April 2020, taaa050,
https://doi.org/10.1093/jtm/taaa050

Rapid Communications

Saudi Arabia’s drastic measures to curb the COVID-19 outbreak: temporary suspension of the Umrah pilgrimage
Shahul H Ebrahim, MD, PhD, Ziad A Memish, MD, FRCPC
Journal of Travel Medicine, Volume 27, Issue 3, April 2020, taaa029,
https://doi.org/10.1093/jtm/taaa029

With the global spread of COVID-19, concerns arise about mass gathering events which will further facilitate disease spread. This report welcomes KSA decision to suspend umah

Spread of Novel coronavirus by returning pilgrims from Iran to Pakistan
Syed Lal Badshah, PhD, Asad Ullah, PhD, Syed Hilal Badshah, MBBS, Irshad Ahmad, PhD
Journal of Travel Medicine, Volume 27, Issue 3, April 2020, taaa044,
https://doi.org/10.1093/jtm/taaa044
A single mass gathering resulted in massive transmission of COVID-19 infections in Malaysia with further international spread
Nor Fazila Che Mat, PhD, Hisham Atan Edinur, PhD, Mohammad Khairul Azhar Abdul Razab, PhD, Sabreena Safuan, PhD
Malaysia has recorded the highest number of COVID-19 cases in Southeast Asia with more than 35% of new COVID-19 cases linked to the Sri Petaling gathering, a Moslem missionary movement attended by more than 19,000 people of different nationalities, in March 2020 in Kuala Lumpur. From this cluster, 1,701 samples have been tested positive out of 21,920 tests carried out. Thus, mass gathering during COVID-19 pandemic period should be banned to curb disease transmission.

Journal of Virology
April 2020; Volume 94, Issue 8
http://jvi.asm.org/content/current [Reviewed earlier]

The Lancet
May 23, 2020 Volume 395 Number 10237 p1587-1668, e90-e97
https://www.thelancet.com/journals/lancet/issue/current
Editorial
The plight of essential workers during the COVID-19 pandemic
The Lancet

Comment
COVID-19 immunity passports and vaccination certificates: scientific, equitable, and legal challenges
Alexandra L Phelan
... When large scale international travel recommences, countries might require travellers to provide evidence of immunity as a condition of entry. Under the International Health Regulations (2005) (IHR), states can implement health measures that “achieve the same or greater level of health protection than WHO recommendations”; however, such measures must have a health rationale, be non-discriminatory, consider the human rights of travellers, and not be more restrictive of international traffic than reasonably available alternatives. Given current uncertainties about the accuracy and interpretation of individual serology testing, immunity passports are unlikely to satisfy this health rationale evidentiary burden and are inconsistent with the WHO recommendations against interference with international travel that were issued when the WHO Director-General declared COVID-19 a Public Health Emergency of International Concern (PHEIC). Given the discriminatory impact of immunity passports, any changes to WHO's recommendations should be considered in the context of the IHR's human rights protections.

Immunity passports have been compared to international certificates of vaccination, such as the “Carte Jaune” for yellow fever. However, there are significant differences between the two types of documents, occasioning fundamentally different burdens on individuals' health risk and bodily integrity, the public health risk, and an individual's capacity to consent and control.
The main distinction between the two is the nature of the incentive. Vaccination certificates incentivize individuals to obtain vaccination against the virus, which is a social good. By contrast, immunity passports incentivize infection. Under the IHR, states can require travellers to provide vaccination certificates, but this is limited to specific diseases expressly listed in Annex 7, which currently only includes yellow fever, and if included in WHO recommendations, such as those issued following the declaration of a PHEIC as is the case for polio.11 Once, and if, a vaccine is developed, COVID-19 vaccination certificates could be included in revised WHO recommendations for the COVID-19 PHEIC, while member states could consider requesting standing recommendations or revising the IHR’s Annex 7 for the longer term...

The Lancet Child & Adolescent Health
May 2020 Volume 4 Number 5 p341-406, e10-e11
https://www.thelancet.com/journals/lanchi/issue/current
[Reviewed earlier]

Lancet Digital Health
May 2020 Volume 2 Number 5 e209-e267
https://www.thelancet.com/journals/landig/issue/current
[Reviewed earlier]

Lancet Global Health
May 2020 Volume 8 Number 5 e612-e736
http://www.thelancet.com/journals/langlo/issue/current
[Reviewed earlier]

Lancet Infectious Diseases
May 2020 Volume 20 Number 5 p511-628, e79-e115
http://www.thelancet.com/journals/laninf/issue/current
[Reviewed earlier]

Lancet Public Health
May 2020 Volume 5 Number 5 e235-e296
https://www.thelancet.com/journals/lanpub/issue/current
[Reviewed earlier]

Lancet Respiratory Medicine
May 2020 Volume 8 Number 5 p423-526, e27-e42
http://www.thelancet.com/journals/lanres/issue/current
[Reviewed earlier]

Maternal and Child Health Journal
Medical Decision Making (MDM)
Volume 40 Issue 3, April 2020
http://mdm.sagepub.com/content/current
Original Articles
What Helps People Make Values-Congruent Medical Decisions? Eleven Strategies Tested across 6 Studies
Holly O. Witteman, Anne-Sophie Julien, Ruth Ndjaboue, Nicole L. Exe, Valerie C. Kahn, Angela (Angie) Fagerlin, Brian J. Zikmund-Fisher
First Published May 19, 2020; pp. 266–278

The Milbank Quarterly
A Multidisciplinary Journal of Population Health and Health Policy
Volume 98, Issue 1 Pages: 1-222  March 2020
https://onlinelibrary.wiley.com/toc/14680009/current
[Reviewed earlier]

Nature
Volume 581 Issue 7808, 21 May 2020
http://www.nature.com/nature/current_issue.html
Editorial | 19 May 2020
Tackle coronavirus in vulnerable communities
The pandemic has hit care homes, prisons and low-income communities hardest. Researchers are ready to help, but need data to be collected and shared.

Nature Biotechnology
Volume 38 Issue 5, May 2020
https://www.nature.com/nbt/volumes/38/issues/5
[Reviewed earlier]

Nature Communications
https://www.nature.com/subjects/health-sciences/ncomms
(Accessed 23 May 2020)
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Nature Genetics
Volume 52 Issue 5, May 2020
https://www.nature.com/ng/volumes/52/issues/5
[Reviewed earlier]
Nature Medicine
Volume 26 Issue 5, May 2020
https://www.nature.com/nm/volumes/26/issues/5
[Reviewed earlier]

Nature Reviews Genetics
Volume 21 Issue 5, May 2020
https://www.nature.com/nrg/volumes/21/issues/5
[Reviewed earlier]

Nature Reviews Immunology
Volume 20 Issue 5, May 2020
https://www.nature.com/nri/volumes/20/issues/5
[Reviewed earlier]

Nature Reviews Drug Discovery
Volume 19 Issue 5, May 2020
https://www.nature.com/nrd/volumes/19/issues/5
[Reviewed earlier]

New England Journal of Medicine
May 21, 2020 Vol. 382 No. 21
http://www.nejm.org/toc/nejm/medical-journal

Perspective
Developing Covid-19 Vaccines at Pandemic Speed N. Lurie, M. Saville, R. Hatchett, and J. Halton

The Toughest Triage — Allocating Ventilators in a Pandemic R.D. Truog, C. Mitchell, and G.Q. Daley


Original Article

Conclusions
Remdesivir was superior to placebo in shortening the time to recovery in adults hospitalized with Covid-19 and evidence of lower respiratory tract infection. (Funded by the National Institute of Allergy and Infectious Diseases and others; ACCT-1 ClinicalTrials.gov number, NCT04280705. opens in new tab.)
Public knowledge, attitudes and practices towards COVID-19: A cross-sectional study in Malaysia
Arina Anis Azlan, Mohammad Rezal Hamzah, Tham Jen Sern, Suffian Hadi Ayub, Emma Mohamad
Research Article | published 21 May 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0233668
From trivalent to quadrivalent influenza vaccines: Public health and economic burden for different immunization strategies in Spain
Pascal Crépey, Esther Redondo, Javier Díez-Domingo, Raúl Ortiz de Lejarazu, Federico Martinón-Torres, Ángel Gil de Miguel, Juan Luis López-Belmonte, Fabián P. Alvarez, Hélène Bricout, Míriam Solozabal
Research Article | published 21 May 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0233526

Global landscape analysis of no-fault compensation programmes for vaccine injuries: A review and survey of implementing countries
Randy G. Mungwira, Christine Guillard, Adiela Saldaña, Nobuhiko Okabe, Helen Petousis-Harris, Edinam Agbenu, Lance Rodewald, Patrick L. F. Zuber
Research Article | published 21 May 2020 PLOS ONE
https://doi.org/10.1371/journal.pone.0233334

Abstract
To update the landscape analysis of vaccine injuries no-fault compensation programmes, we conducted a scoping review and a survey of World Health Organization Member States. We describe the characteristics of existing no-fault compensation systems during 2018 based on six common programme elements. No-fault compensation systems for vaccine injuries have been developed in a few high-income countries for more than 50 years. Twenty-five jurisdictions were identified with no-fault compensation programmes, of which two were recently implemented in a low- and a lower-middle-income country. The no-fault compensation programmes in most jurisdictions are implemented at the central or federal government level and are government funded. Eligibility criteria for vaccine injury compensation vary considerably across the evaluated programmes. Notably, most programmes cover injuries arising from vaccines that are registered in the country and are recommended by authorities for routine use in children, pregnant women, adults (e.g. influenza vaccines) and for special indications. A claim process is initiated once the injured party or their legal representative files for compensation with a special administrative body in most programmes. All no-fault compensation programmes reviewed require standard of proof showing a causal association between vaccination and injury. Once a final decision has been reached, claimants are compensated with either: lump-sums; amounts calculated based on medical care costs and expenses, loss of earnings or earning capacity; or monetary compensation calculated based on pain and suffering, emotional distress, permanent impairment or loss of function; or combination of those. In most jurisdictions, vaccine injury claimants have the right to seek damages either through civil litigation or from a compensation scheme but not both simultaneously. Data from this report provide an empirical basis on which global guidance for implementing such schemes could be developed.

PLoS Pathogens
http://journals.plos.org/plospathogens/
[Accessed 23 May 2020]

The hallmarks of COVID-19 disease
Daolin Tang, Paul Comish, Rui Kang
Review | published 22 May 2020 PLOS Pathogens
https://doi.org/10.1371/journal.ppat.1008536
**NIH funding and the pursuit of edge science**

Mikko Packalen and Jay Bhattacharya

PNAS first published May 19, 2020. [https://doi.org/10.1073/pnas.1910160117](https://doi.org/10.1073/pnas.1910160117)

**Significance**

Innovative research is critical to the advancement of biomedicine. The NIH plays a crucial role in fostering innovation. An empirical assessment of the success of the NIH in this role is an essential step in identifying ways to encourage novel research. This research introduces a measure of the age of the ideas used in published biomedical research papers and comprehensively evaluates the performance of NIH-supported research relative to non-NIH-supported research, using this measure.

**Abstract**

The National Institutes of Health (NIH) plays a critical role in funding scientific endeavors in biomedicine. Funding innovative science is an essential element of the NIH’s mission, but many have questioned the NIH’s ability to fulfill this aim. Based on an analysis of a comprehensive corpus of published biomedical research articles, we measure whether the NIH succeeds in funding work with novel ideas, which we term edge science. We find that edge science is more often NIH funded than less novel science, but with a delay. Papers that build on very recent ideas are NIH funded less often than are papers that build on ideas that have had a chance to mature for at least 7 y. We have three further findings. First, the tendency to fund edge science is mostly limited to basic science. Papers that build on novel clinical ideas are not more often NIH funded than are papers that build on well-established clinical knowledge. Second, novel papers tend to be NIH funded more often because there are more NIH-funded papers in innovative areas of investigation, rather than because the NIH funds innovative papers within research areas. Third, the NIH’s tendency to have funded papers that build on the most recent advances has declined over time. In this regard, NIH funding has become more conservative despite initiatives to increase funding for innovative projects. Given our focus on published papers, the results reflect both the funding preferences of the NIH and the composition of the applications it receives.

**Lessons from Hurricane Katrina for predicting the indirect health consequences of the COVID-19 pandemic**

Ethan J. Raker, Meghan Zacher, and Sarah R. Lowe

PNAS first published May 18, 2020. [https://doi.org/10.1073/pnas.2006706117](https://doi.org/10.1073/pnas.2006706117)

**Prehospital & Disaster Medicine**

Volume 35 - Issue 3 - June 2020


[Reviewed earlier]

**Preventive Medicine**

Volume 134  May 2020
Evaluation of Human Papillomavirus Vaccination After Pharmacist-Led Intervention: A Pilot Project in an Ambulatory Clinic at a Large Academic Urban Medical Center
Julianna Cebollero, PharmD, Suzanne M. Walton, PharmD, Laurie Cavendish, PharmD, Kristi Quairol, PharmD, Carrie Cwiak, MD, MPH, Melissa J. Kottke, MD, MPH, MBA
First Published March 30, 2020; pp. 313–321
High social value is fundamental to justifying these studies

Summary

Development of an effective vaccine is the clearest path to controlling the coronavirus disease 2019 (COVID-19) pandemic. To accelerate vaccine development, some researchers are pursuing, and thousands of people have expressed interest in participating in, controlled human infection studies (CHIs) with severe acute respiratory syndrome–coronavirus 2 (SARS-CoV-2) (1, 2). In CHIs, a small number of participants are deliberately exposed to a pathogen to study infection and gather preliminary efficacy data on experimental vaccines or treatments. We have been developing a comprehensive, state-of-the-art ethical framework for CHIs that emphasizes their social value as fundamental to justifying these studies. The ethics of CHIs in general are underexplored (3, 4), and ethical examinations of SARS-CoV-2 CHIs have largely focused on whether the risks are acceptable and participants could give valid informed consent (1). The
high social value of such CHIs has generally been assumed. Based on our framework, we agree on the ethical conditions for conducting SARS-CoV-2 CHIs (see the table). We differ on whether the social value of such CHIs is sufficient to justify the risks at present, given uncertainty about both in a rapidly evolving situation; yet we see none of our disagreements as insurmountable. We provide ethical guidance for research sponsors, communities, participants, and the essential independent reviewers considering SARS-CoV-2 CHIs.

Review
Social determinants of health and survival in humans and other animals
By Noah Snyder-Mackler, Joseph Robert Burger, Lauren Gaydosh, Daniel W. Belsky, Grace A. Noppert, Fernando A. Campos, Alessandro Bartolomucci, Yang Claire Yang, Allison E. Aiello, Angela O’Rand, Kathleen Mullan Harris, Carol A. Shively, Susan C. Alberts, Jenny Tung
Science22 May 2020
Social animals need connection
Much research over the past decade or so has revealed that health and lifespan in humans, highly social animals, are reduced with social adversity. We humans are not the only animals that are social, however, and similar research has shown that other social mammals are similarly influenced by isolation and adversity. Snyder-Mackler et al. reviewed the relationships between social environment and many aspects of health and well-being across nonhuman mammals and investigated the similarities between these and patterns in humans. They found many of the same threats and responses across social mammals.

Abstract
The social environment, both in early life and adulthood, is one of the strongest predictors of morbidity and mortality risk in humans. Evidence from long-term studies of other social mammals indicates that this relationship is similar across many species. In addition, experimental studies show that social interactions can causally alter animal physiology, disease risk, and life span itself. These findings highlight the importance of the social environment to health and mortality as well as Darwinian fitness—outcomes of interest to social scientists and biologists alike. They thus emphasize the utility of cross-species analysis for understanding the predictors of, and mechanisms underlying, social gradients in health.

Science Translational Medicine
20 May 2020 Vol 12, Issue 544
https://stm.sciencemag.org/
Research Articles
An open-label phase 1/2a trial of a genetically modified rodent malaria parasite for immunization against Plasmodium falciparum malaria
Science Translational Medicine20 May 2020 Full Access
Clinical evaluation of genetically modified rodent malaria parasites for whole-sporozoite immunization against P. falciparum in healthy volunteers.
A double-blind, placebo-controlled phase 1/2a trial of the genetically attenuated malaria vaccine PfSPZ-GA1
Science Translational Medicine 20 May 2020 Full Access
The genetically attenuated malaria vaccine PfSPZ-GA1 is safe, immunogenic, and has suboptimal protective efficacy in people.

Social Science & Medicine
Volume 250  April 2020
[Reviewed earlier]

Systematic Reviews
https://systematicreviewsjournal.biomedcentral.com/articles
[Accessed 23 May 2020]
[No new digest content identified]

Travel Medicine and Infectious Diseases
Volume 34  March–April 2020
[Reviewed earlier]

Tropical Medicine & International Health
Volume 25, Issue 5  Pages: i-iv, 507-643  May 2020
https://onlinelibrary.wiley.com/toc/13653156/current
Reviews
Commercially approved vaccines for canine leishmaniosis: a review of available data on their safety and efficacy
Rita Velez, Montserrat Gállego
Pages: 540-557
First Published: 08 February 2020

Vaccine
Volume 38, Issue 23  Pages 3919-3986 (13 May 2020)
https://www.sciencedirect.com/journal/vaccine/vol/38/issue/23
Discussion  No access
**Recommendation of HPV vaccination to boys in France – An unhappy coincidence with the WHO call to pause the implementation of this vaccination in boys**
Fadia Dib, François Vie le Sage, Robert Cohen, Odile Launay
Pages 39
19-3921

*Research article  Abstract only*

**Characterization of pneumococcal meningitis before and after introduction of 13-valent pneumococcal conjugate vaccine in Niger, 2010–2018**
Sani Ousmane, Miwako Kobayashi, Issaka Seidou, Bassira Issaka, ... Mahamoudou Ouattara
Pages 3922-3929

**Vaccines — Open Access Journal**
http://www.mdpi.com/journal/vaccines
(Accessed 23 May 2020)

*Open Access  Letter*

**Measures to Improve Influenza Vaccination Coverage in Spanish Medical Students**
by Ignacio Hernández-García and Carlos Aibar-Remón
Vaccines 2020, 8(2), 238; https://doi.org/10.3390/vaccines8020238 - 20 May 2020
Viewed by 158

*Abstract*

Objective: To find out what measures medical students believe could help improve their influenza vaccination coverage. Method: On 5 November, 2019, the Dean of the Zaragoza Medical School sent an e-mail to the students asking them to fill out a questionnaire...

*Open Access  Review*

**Dynamics of Population Immunity Due to the Herd Effect in the COVID-19 Pandemic**
by Vicente Javier Clemente-Suárez, Alberto Hormeño-Holgado, Manuel Jiménez, Juan Camilo Benítez-Agudelo, Eduardo Navarro-Jiménez, Natalia Perez-Palencia, Ronald Maestre-Serrano, Carmen Cecilia Laborde-Cárdenas and Jose Francisco Tomero-Aguilera
Vaccines 2020, 8(2), 236; https://doi.org/10.3390/vaccines8020236 - 19 May 2020
Viewed by 682

*Abstract*

The novel Coronavirus 2 Severe Acute Respiratory Syndrome (SARS-Cov-2) has led to the Coronavirus Disease 2019 (COVID-19) pandemic, which has surprised health authorities around the world, quickly producing a global health crisis. Different actions to cope with this situation are being developed, including confinement, different treatments to improve symptoms, and the creation of the first vaccines. In epidemiology, herd immunity is presented as an area that could solve this new global threat. In this review, we present the basis of herd immunology, the dynamics of infection transmission that induces specific immunity, and how the application of immunoepidemiology and herd immunology could be used to control the actual COVID-19 pandemic, along with a discussion of its effectiveness, limitations, and applications.

**Value in Health**
May 2020 Volume 23, Issue 5, p527-676
THEMED SECTION: PRECISION MEDICINE
[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 23 May 2020
[No new, unique, relevant content]

BBC
http://www.bbc.co.uk/
Accessed 23 May 2020
[No new, unique, relevant content]

The Economist
http://www.economist.com/
Accessed 23 May 2020
Big pharma is having a good crisis
Drug innovation is back in fashion
Big pharma is no longer the villain
Leaders May 23rd 2020 edition
Financial Times
http://www.ft.com/home/uk
Accessed 23 May 2020
Analysis The Big Read
Scientists vs politicians: the reality check for ‘warp speed’ vaccine research
...When Donald Trump launched Operation Warp Speed last week, he borrowed language from Star Trek to describe the drive for a Covid-19 vaccine. “That means big and it means fast,” the US president said...
May 22, 2020

Special Report FT Wealth: May 2020
Why vaccine development relies on philanthropy
...With long time horizons, complex science and high failure rates, vaccine development is not for the faint-hearted philanthropist. But in a world gripped by coronavirus, many donors have put aside such...
May 22, 2020

Forbes
http://www.forbes.com/
Accessed 23 May 2020
May 20, 2020
More Than Stimulus Checks: How Covid-19 Relief Might Include Mandated Vaccines
Should a coronavirus vaccine be developed, students may hesitate to return to campus if their peers refuse to get vaccinated. But refusing a coronavirus vaccine may be illegal.
By Christopher Rim Senior Contributor

Foreign Affairs
http://www.foreignaffairs.com/
Accessed 23 May 2020
Snapshot May 19, 2020
Drugs and Vaccines Are Coming—but to Whom?
Successfully confronting a global pandemic demands more, not less, investment in multilateralism. During the COVID-19 crisis, the world must count on the WTO to keep...
Jennifer Hillman

Foreign Policy
http://foreignpolicy.com/
Accessed 23 May 2020
Why the WHO Investigation Won’t Work
Beijing’s influence within the organization means the results of a review into the origins of the coronavirus are likely to be delayed—and compromised.
China Brief | May 20, 2020, 5:16 PM
James Palmer

The Guardian
http://www.theguardian.com/
Member states back WHO after renewed Donald Trump attack

US president claimed WHO too willing to accept Chinese explanations over coronavirus outbreak

Patrick Wintour and Julian Borger

Member states have backed a resolution strongly supportive of the World Health Organization, after Donald Trump issued a fresh broadside against the UN body, giving it 30 days to make unspecified reforms or lose out on US funding.

A resolution that backed the WHO’s leadership and said there needed to be an investigation into the global response to the coronavirus pandemic won endorsement at the WHO’s annual ministerial meeting on Tuesday.

The US president launched his attack late on Monday, sending a lengthy letter outlining America’s belief that the WHO had not been sufficiently independent of China, and had been too willing to accept its explanations for the origins of the coronavirus outbreak...

New Yorker

http://www.newyorker.com/

Annals of Technology

Immunity Passports and the Perils of Conferring Coronavirus Status

Smartphone apps that promise to verify whether a user has been infected with COVID-19 might be creating more problems than they solve.

By Sue Halpern

May 22, 2020

The New Yorker Radio Hour

To Test a Vaccine for COVID-19, Should Volunteers Risk their Lives?

Larissa MacFarquhar on a potentially lethal form of medical research. Plus, Jelani Cobb on the killing of Ahmaud Arbery; and a short story about a very boring Memorial Day.

By David Remnick

May 22, 2020

Daily Comment

Camus and the Political Tests of a Pandemic

In this political season of our own, it can be uncanny to encounter Camus’s seven-decade-old account of a dissembling leader, whose advisers cannot bear even to speak aloud the name of the disease that is rampaging through their city.

By Steve Coll

May 19, 2020

American Chronicles

May 25, 2020 Issue

Will the Coronavirus Make Us Rethink Mass Incarceration?

Community groups have pointed out the social costs of the prison system for decades. Now the pandemic has exposed its public-health risks.

By Sarah Stillman

May 18, 2020
Europe

**Project Leader: Oxford’s COVID-19 Vaccine Trial Has 50% Chance of Success**

*Telegraph*

The University of Oxford’s COVID-19 vaccine trial has only a 50% chance of success as the coronavirus seems to be fading rapidly in Britain, the professor co-leading the development of the vaccine told the Telegraph newspaper https://bit.ly/2LQTNos.

By Reuters   May 23, 2020

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**Asia Pacific**

**Thailand Begins Coronavirus Vaccine Trials on Monkeys**

*Thailand on Saturday began testing a vaccine against the coronavirus on monkeys after positive trials in mice, an official said.*

By Reuters   May 23, 2020

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**Business**

**How One Indian Company Could Be World’s Door to a COVID-19 Vaccine**

*If the world is to gain access to a vaccine for COVID-19, there's a good chance it will pass through the doors of Serum Institute of India.*

By Reuters   May 22

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**U.S.**

**Disruption to Global Immunization System Could Delay COVID-19 Vaccinations**

*Massive disruptions to global immunisation programmes from the COVID-19 pandemic have health experts fearful that much of the developing world will not be able to get a vaccine for the new coronavirus, even once one is ready.*

By Reuters   May 22

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**Washington Post**

**Retropolis**

**This Montana farm boy became a scientific legend, developing vaccines to protect kids worldwide**

*Maurice Hilleman isn’t a household name, but he has saved untold millions of lives*

Kathleen McLaughlin   May 23, 2020

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**Think Tanks et al**

**Brookings**

http://www.brookings.edu/
The Race for a COVID-19 Vaccine: An Overview of Current Proposals and Our Contribution in Bringing in the Missing Middle

Much rests with the successful development and introduction of an effective COVID-19 vaccine. It may be our only path towards fully reopening our economies without fear of future outbreaks and associated health and economic impacts. See here for an overview of recent vaccine initiatives.

Rachel Silverman et al.

Coronavirus Vaccine: Available For All, or When it’s Your Turn?

Despite high-level commitments and pledges to cooperate to ensure equitable global access to a coronavirus vaccine, prospects for fair distribution are uncertain.

Professor David Salisbury CB, Associate Fellow, Global Health Programme

The Trump Administration’s Ignominious Exit at the 2020 World Health Assembly

... China benefited to some degree at the WHA, as it sought to recover from widespread anger across the world at its mishandling of the virus. In his statement, President Xi glided past China’s actions in early 2020, responded in kind to Trump and Azar’s charges, and looked forward with a $2 billion pledge to the global Covid-19 response and a commitment to pursue a “common public good approach to the delivery of an eventual vaccine.”

Dr. Tedros kept cool throughout this dark and disturbing moment. On May 18, he made an appeal for pragmatism, solidarity, and commitment: “the world doesn’t need another plan, another system, another mechanism, another committee or another organization. It needs to strengthen, implement and finance the systems and organizations it has – including WHO.”

German chancellor Angela Merkel and French president Emmanuel Macron each voiced strong support for WHO in their remarks.

By the conclusion of the WHA, the Trump administration had wantonly withdrawn the United States from any meaningful leadership role in the international response to the coronavirus pandemic. It was a form of self-immolation, a willful regression that now confines the United States to an isolated corner, the object of pity, sadness, scorn, anger, and contempt.
Commentary

**Forecasting Covid-19’s Course**
May 20, 2020 | By Sarah Ladislaw, Samuel Brannen

**Transcript**

**Online Event: Humanitarian Operations During COVID-19: A Conversation with Peter Maurer of the ICRC**
May 19, 2020

**Council on Foreign Relations**
http://www.cfr.org/

Accessed 23 May 2020

May 22, 2020

**Coronavirus**

**Scaling Up African Pharmaceutical Manufacturing in a Time of COVID-19**
Africa is vulnerable to disruptions in global supply chains caused by the COVID-19 pandemic, particularly with respect to pharmaceuticals, because between 70 and 90 percent are imported. But it has underutilized capacity to make up the difference.

Blog Post by Guest Blogger for John Campbell Africa in Transition

May 20, 2020

**Pharmaceuticals and Vaccines**

**What Is the World Doing to Create a COVID-19 Vaccine?**
The race to find a vaccine for the new coronavirus is well underway. Governments and researchers are aiming to provide billions of people with immunity in eighteen months or less, which would be unpr...

Backgrounder by Claire Felter

Kaiser Family Foundation
https://www.kff.org/search/?post_type=press-release
Accessed 23 May 2020

[No new relevant content]

# # # #

**COVID-19 response**

**SEVENTY-THIRD WORLD HEALTH ASSEMBLY**
A73/CONF./1 Rev.1 18 May 2020

Draft resolution proposed by Albania, Australia, Azerbaijan, Bahrain, Bangladesh, Belarus, Bhutan, Bolivia (Plurinational State of), Brazil, Canada, Chile, China, Colombia, Cook Islands, Costa Rica, Djibouti, Dominican Republic, Ecuador, El Salvador, Fiji, Georgia, Guatemala, Guyana, Honduras, Iceland, India, Indonesia, Iraq, Jamaica, Japan, Jordan, Kiribati, Maldives, Marshall Islands, Mexico, Micronesia (Federated States of), Monaco, Montenegro, Morocco,
Nauru, Nepal, New Zealand, North Macedonia, Norway, Panama, Papua New Guinea, Paraguay, Peru, Philippines, Qatar, Republic of Korea, Republic of Moldova, Russian Federation, San Marino, Saudi Arabia, Serbia, Singapore, Sri Lanka, Thailand, the African Group and its Member States, the European Union and its Member States, Tonga, Tunisia, Turkey, Ukraine, United Kingdom of Great Britain and Northern Ireland and Uruguay

The Seventy-third World Health Assembly,
Having considered the address of the Director-General on the ongoing COVID-19 pandemic,1

PP1 Deeply concerned by the morbidity and mortality caused by COVID-19 pandemic, the negative impacts on physical and mental health and social well-being, the negative impacts on economy and society and the consequent exacerbation of inequalities within and between countries;

PP2 Expressing solidarity to all countries affected by the pandemic, as well as condolences and sympathy to all the families of the victims of COVID-19;

PP3 Underlining the primary responsibility of governments to adopt and implement responses to the COVID-19 pandemic that are specific to their national context as well as for mobilizing the necessary resources to do so;

PP4 Recalling the constitutional mandate of WHO to act, inter alia, as the directing and broader United Nations response and the importance of strengthened multilateral cooperation in addressing the COVID-19 pandemic and its extensive negative impacts;

PP5 Recalling the Constitution of WHO, which defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, and declares that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being, without distinction of race, religion, political belief, economic or social condition;

PP6 Recalling the declaration of a Public Health Emergency of International Concern on novel Coronavirus (2019-nCoV) on 30 January 2020 by the Director-General; and the temporary recommendations issued by the Director-General under the International Health Regulations (2005, IHR) upon the advice of the Emergency Committee for COVID-19;

PP7 Recalling the United Nations General Assembly resolutions A/RES/74/270 on “Global solidarity to fight the coronavirus disease 2019 (COVID-19)” and A/RES/74/274 on “International cooperation to ensure global access to medicines, vaccines and medical equipment to face COVID-19”;

PP8 Noting resolution EB146.R10 entitled “Strengthening Preparedness for Health Emergencies: implementation of the International Health Regulations (2005)” and reiterating the obligation for all Parties to fully implement and comply with the IHR;

PP9 Noting WHO’s Strategic Preparedness and Response Plan (SPRP) and the Global Humanitarian Response Plan for COVID-19;
PP10 Recognizing that the COVID-19 pandemic disproportionately affects the poor and the most vulnerable people, with repercussions on health and development gains, in particular in low- and middle-income and developing countries, thus hampering the achievement of the Sustainable Development Goals (SDGs) and Universal Health Coverage (UHC) including through the strengthening of Primary Health Care, and reiterating the importance of continued and concerted efforts, and the provision of development assistance, and further recognizing with deep concern the impact of high debt levels on countries’ ability to withstand the impact of the COVID-19 shock;

PP11 Recognizing further the negative impacts of the COVID-19 pandemic on health, including hunger and malnutrition, increased violence against women, children, and frontline health workers, as well as disruptions in care of older persons and persons with disabilities;

PP12 Emphasizing the need to protect populations, in particular people with pre-existing health conditions, older persons, and other people at risk of COVID-19 including health professionals, health workers and other relevant frontline workers, especially women who represent the majority of the health workforce as well as persons with disabilities, children and adolescents and people in vulnerable situations, and stressing the importance of age-, gender-responsive and disability-sensitive measures in this regard;

PP13 Recognizing the need for all countries to have unhindered timely access to quality, safe, efficacious and affordable diagnostics, therapeutics, medicines and vaccines, and essential health technologies, and their components as well as equipment for the COVID-19 response;

PP14 Noting the need to ensure the safe and unhindered access of humanitarian personnel, in particular medical personnel responding to the COVID-19 pandemic, their means of transport and equipment, and to protect hospitals and other medical facilities as well as the delivery of supplies and equipment, in order to allow such personnel to efficiently and safely perform their task of assisting affected civilian populations;

PP15 Recalling resolution 46/182 of 19 December 1991 on the strengthening of the coordination of emergency humanitarian assistance of the United Nations and all subsequent General Assembly resolutions on the subject, including resolution 74/118 of 16 December 2019;

PP16 Underscoring that respect for international law, including international humanitarian law, is essential to contain and mitigate outbreaks of COVID-19 in armed conflicts;

PP17 Recognizing further the many unforeseen public health impacts, challenges and resource needs generated by the ongoing COVID-19 pandemic and the potential re-emergences, as well as the multitude and complexity of necessary immediate and long-term actions, coordination and collaboration required at all levels of governance across organizations and sectors, including civil society and the private sector, required to have an efficient and coordinated public health response to the pandemic, leaving no-one behind;

PP18 Recognizing the importance of planning and preparing for the recovery phase, including to mitigate the impact of the pandemic and of the unintended consequences of public health measures on society, public health, human rights and the economy;
PP19 Expressing optimism that the COVID-19 pandemic can be successfully mitigated, controlled and overcome through leadership and sustained global cooperation, unity, and solidarity;

OP1 Calls for, in the spirit of unity and solidarity, intensification of cooperation and collaboration at all levels to contain, control and mitigate the COVID-19 pandemic;

OP2 Acknowledges the key leadership role of WHO and the fundamental role of the United Nations system in catalysing and coordinating the comprehensive global response to the COVID-19 pandemic and the central efforts of Member States therein;

OP3 Expresses its highest appreciation of and support to the dedication, efforts and sacrifices, above and beyond the call of duty of health professionals, health workers and other relevant frontline workers, as well as the WHO Secretariat, in responding to the COVID-19 pandemic;

OP4 Calls for the universal, timely and equitable access to and fair distribution of all quality, safe, efficacious and affordable essential health technologies and products including their components and precursors required in the response to the COVID-19 pandemic as a global priority, and the urgent removal of unjustified obstacles thereto; consistent with the provisions of relevant international treaties including the provisions of the TRIPS agreement and the flexibilities as confirmed by the Doha Declaration on the TRIPS Agreement and Public Health;

OP5 Reiterates the importance of urgently meeting the needs of low- and middle-income countries in order to fill the gaps to overcome the pandemic through timely and adequate development and humanitarian assistance;

OP6 Recognizes the role of extensive immunization against COVID-19 as a global public good for health in preventing, containing and stopping transmission in order to bring the pandemic to an end, once safe, quality, efficacious, effective, accessible and affordable vaccines are available;

OP7 Calls on Member States, in the context of the COVID-19 pandemic, to:
OP7.1 Put in place a whole of government and whole of society response including through implementing a national, cross-sectoral COVID-19 action plan that outlines both immediate and long term actions with a view to sustainably strengthening their health system and social care and support systems, preparedness, surveillance and response capacities as well as taking into account, according to national context, WHO guidance, engaging with communities and collaborating with relevant stakeholders;

OP7.2 Implement national action plans by putting in place, according to their specific contexts, comprehensive, proportionate, time-bound, age- and disability-sensitive and gender-responsive measures across government sectors against COVID-19, ensuring respect for human rights and fundamental freedoms and paying particular attention to the needs of people in vulnerable situations, promoting social cohesion, taking necessary measures to ensure social protection, protection from financial hardship and preventing insecurity, violence, discrimination, stigmatization and marginalization;
OP7.3 Ensure that restrictions on the movement of persons and of medical equipment and medicines in the context of COVID-19 are temporary and specific and include exceptions for the movement of humanitarian and health workers, including community health workers to fulfil their duties and for the transfer of equipment and medicines required by humanitarian organizations for their operations;

OP7.4 Take measures to support access to safe water, sanitation and hygiene, and infection prevention and control, ensuring that adequate attention is placed on the promotion of personal hygienic measures in all settings, including humanitarian settings and particularly in health facilities;

OP7.5 Maintain the continued functioning of the health system in all relevant aspects, in accordance with national context and priorities, necessary for an effective public health response to the COVID-19 pandemic and other ongoing epidemics, and the uninterrupted and safe provision of population and individual level services, for, among others, communicable diseases, including by undisrupted vaccination programmes, neglected tropical diseases, noncommunicable diseases, mental health, mother and child health and sexual and reproductive health and promote improved nutrition for women and children, recognizing in this regard the importance of increased domestic financing and development assistance where needed in the context of achieving UHC;

OP7.6 Provide the population with reliable and comprehensive information on COVID-19 and the measures taken by authorities in response to the pandemic, and take measures to counter misinformation and disinformation and as well as malicious cyber activities;

OP7.7 Provide access to safe testing, treatment, and palliative care for COVID-19, paying particular attention to the protection of those with pre-existing health conditions, older persons, and other people at risk, in particular health professionals, health workers and other relevant frontline workers;

OP7.8 Provide health professionals, health workers and other relevant frontline workers exposed to COVID-19, access to personal protective equipment and other necessary commodities and training, including in the provision of psychosocial support, taking measures for their protection at work, facilitating their access to work, and the provision of their adequate remuneration, consider also the introduction of task-sharing and task-shifting to optimize the use of resources;

OP7.9 Leverage digital technologies for the response to COVID-19, including for addressing its socioeconomic impact, paying particular attention to digital inclusion, patient empowerment, data privacy, and security, legal and ethical issues, and the protection of personal data;

OP7.10 Provide WHO timely, accurate and sufficiently detailed public health information related to the COVID-19 pandemic as required by the IHR;

OP7.11 Share, COVID-19 related knowledge, lessons learned, experiences, best practices, data, materials and commodities needed in the response with WHO and other countries, as appropriate;
OP7.12 Collaborate to promote both private sector and government-funded research and development, including open innovation, across all relevant domains on measures necessary to contain and end the COVID-19 pandemic, in particular on vaccines, diagnostics, and therapeutics and share relevant information with WHO;

OP7.13 Optimize prudent use of antimicrobials in the treatment of COVID-19 and secondary infections in order to prevent the development of antimicrobial resistance;

OP7.14 Strengthen actions to involve women’s participation in all stages of decision-making processes, and mainstream a gender perspective in the COVID-19 response and recovery;

OP7.15 Provide sustainable funding to WHO to ensure that it can fully respond to public health needs in the global response to COVID-19, leaving no one behind;

OP8 CALLS on international organizations and other relevant stakeholders to:
OP8.1 Support all countries, upon their request, in the implementation of their multisectoral national action plans and in strengthening their health systems to respond to the COVID-19 pandemic, and in maintaining the safe provision of all other essential public health functions and services;

OP8.2 Work collaboratively at all levels to develop, test, and scale-up production of safe, effective, quality, affordable diagnostics, therapeutics, medicines and vaccines for the COVID-19 response, including, existing mechanisms for voluntary pooling and licensing of patents to facilitate timely, equitable and affordable access to them, consistent with the provisions of relevant international treaties including the provisions of the TRIPS agreement and the flexibilities as confirmed by the Doha Declaration on the TRIPS Agreement and Public Health;

OP8.3 Address, and where relevant in coordination with Member States, the proliferation of disinformation and misinformation particularly in the digital sphere, as well as the proliferation of malicious cyber-activities that undermine the public health response, and support the timely provision of clear, objective and science-based data and information to the public;

OP9 REQUESTS the Director-General to:
OP9.1 Continue to work with the United Nations Secretary-General and relevant multilateral organizations, including the signatory agencies of the Global Action Plan for Healthy Lives and Well-Being, on a comprehensive and coordinated response across the United Nations system to support Member States in their responses to the COVID-19 pandemic in full cooperation with governments, as appropriate, demonstrating leadership on health in the United Nations system, and continue to act as the health cluster lead in the United Nations humanitarian response;

OP9.2 Continue to build and strengthen the capacities of WHO at all levels to fully and effectively perform the functions entrusted to it under the IHR;

OP9.3 Assist and continue to call upon all States’ Parties to take the actions according to the provisions of the IHR, including by providing all necessary support to countries for building, strengthening and maintaining their capacities to fully comply with the IHR;
**OP9.4** Provide assistance to countries upon their request, in accordance with their national context, to support the continued safe functioning of the health system in all relevant aspects necessary for an effective public health response to the COVID-19 pandemic and other ongoing epidemics, and the uninterrupted and safe provision of population and individual level services, for, among others, communicable diseases, including by undisrupted vaccination programmes, neglected tropical diseases, noncommunicable diseases, mental health, mother and child health and sexual and reproductive health and promote improved nutrition for women and children;

**OP9.5** Assist countries upon request in developing, implementing and adapting relevant national response plans to COVID-19, by developing, disseminating and updating normative products and technical guidance, learning tools, data and scientific evidence for COVID-19 responses, including to counter misinformation and disinformation, as well as malicious cyber activities, and continue to work against substandard and falsified medicines and medical products;

**OP9.6** Continue to work closely with the World Organisation for Animal Health (OIE), the Food and Agriculture Organization of the United Nations (FAO) and countries, as part of the One-Health Approach to identify the zoonotic source of the virus and the route of introduction to the human population, including the possible role of intermediate hosts, including through efforts such as scientific and collaborative field missions, which will enable targeted interventions and a research agenda to reduce the risk of similar events as well as to provide guidance on how to prevent SARS-COV2 infection in animals and humans and prevent the establishment of new zoonotic reservoirs, as well as to reduce further risks of emergence and transmission of zoonotic diseases;

**OP9.7** Regularly inform Member States, including through Governing Bodies, on the results of fundraising efforts, the global implementation of and allocation of financial resources through the WHO Strategic Preparedness and Response Plan (SPRP), including funding gaps and results achieved, in a transparent, accountable and swift manner, in particular on the support given to countries;

**OP9.8** Rapidly, and noting OP2 of RES/74/274 and in consultation with Member States, and with inputs from relevant international organizations civil society, and the private sector, as appropriate, identify and provide options that respect the provisions of relevant international treaties, including the provisions of the TRIPS agreement and the flexibilities as confirmed by the Doha Declaration on the TRIPS Agreement and Public Health to be used in scaling up development, manufacturing and distribution capacities needed for transparent equitable and timely access to quality, safe, affordable and efficacious diagnostics, therapeutics, medicines, and vaccines for the COVID-19 response taking into account existing mechanisms, tools, and initiatives, such as the Access to COVID-19 Tools (ACT) accelerator, and relevant pledging appeals, such as “The Coronavirus Global Response” pledging campaign, for the consideration of the Governing Bodies;

**OP9.9** Ensure that the Secretariat is adequately resourced to support the Member States granting of regulatory approvals needed to enable timely and adequate COVID-19 countermeasures;
OP9.10 Initiate, at the earliest appropriate moment, and in consultation with Member States, a stepwise process of impartial, independent and comprehensive evaluation, including using existing mechanisms, as appropriate, to review experience gained and lessons learned from the WHO-coordinated international health response to COVID-19, including (i) the effectiveness of the mechanisms at WHO’s disposal; (ii) the functioning of the IHR and the status of implementation of the relevant recommendations of the previous IHR Review Committees; (iii) WHO’s contribution to United Nations-wide efforts; and (iv) the actions of WHO and their timelines pertaining to the COVID-19 pandemic, and make recommendations to improve global pandemic prevention, preparedness, and response capacity, including through strengthening, as appropriate, WHO’s Health Emergencies Programme;

OP9.11 Report to the Seventy-fourth World Health Assembly, through the 148th session of the Executive Board, on the implementation of this resolution.

Vaccines and Global Health: The Week in Review is a service of the Center for Vaccine Ethics and Policy (CVEP)/GE2P2 Global, which is solely responsible for its content, and is an open access publication, subject to the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by-nc/3.0/). Copyright is retained by CVEP.

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

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

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