



Vaccines and Global Health: The Week in Review

21 October 2017

Center for Vaccine Ethics & Policy (CVEP)

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

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

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Milestones :: Perspectives

Dr Mahmoud Fikri

WHO statement

17 October 2017

Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization announces with great sadness the death of Dr Mahmoud M Fikri, WHO Regional Director for the Eastern Mediterranean.

The Organization extends its sincere condolences to Dr Fikri's family and his colleagues and friends throughout WHO and the Eastern Mediterranean Region.

Dr Fikri assumed his duties as Regional Director on 1 February 2017. He was on his way to attend the WHO Global Conference on NCDs in Montevideo, Uruguay when he died.

Dr Fikri had previously served as Adviser to the Minister of Health of United Arab Emirates, and had been a prominent regional public health figure for many years.

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WHO supports the immunization of 874,000 people against yellow fever in Nigeria

News release

16 October 2017 | Geneva - The Government of Nigeria has launched a campaign to immunize 873 837 people against yellow fever in the states of Kwara and Kogi.

The ten-day campaign began on Friday, 13 October 2017, and mobilizes more than 200 health workers and volunteers. It targets residents aged 9 months to 45 years old.

"This campaign aims to ensure that people living in high-risk areas are protected from yellow fever, and to prevent the disease from spreading to other parts of the country," said Dr. Wondimagegnehu Alemu, WHO Nigeria Representative.

WHO has been working with health authorities on its implementation in nine local government areas in Kwara State and two in Kogi State.

Nigeria has requested support from the International Coordination Group (ICG) on vaccine provision for yellow fever. A global stockpile of 6 million doses of the yellow fever vaccine is available for countries to access, with the support of Gavi, the Vaccine Alliance.

WHO and health partners have been supporting the Government's response to the outbreak since the first case of yellow fever was confirmed in Oke Owa Community, Ifelodun Local Government Area of Kwara state on 12 September.

WHO has deployed experts to Nigeria to support surveillance and investigation, lab testing, public health measures, and engagement with at-risk communities. An Emergency Operations Centre has been activated in the area to coordinate the response.

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WHO - Subnational immunization coverage data

140 member states from all WHO regions have shared 2016 subnational data

17 October 2017

In 2017 and for the first time worldwide, WHO has collected and is publishing subnational immunization coverage data reported by its member states. Member states were asked to report their numerator (number of doses administered), denominator (number of eligible individuals) and coverage data (% of eligible individuals receiving the relevant dose of vaccine) for the first and third dose of DTP-containing vaccines (DTP1, DTP3) and measles containing vaccine (MCV1) from their second administrative level ("admin2" often called districts). The data collection is done through the WHO/UNICEF Joint Reporting Form process.

In 2017, 140 member states have shared their subnational data, either from their first subnational administrative level ("admin1") or admin2 level for DTP1, DTP3 and/or MCV1. Data has been shared for over 20,000 admin1 and/or admin2, and represents about two-third of the total number of surviving infants worldwide. Among them, 94 member states report coverage for DTP3 at admin2 level (bubble charts from 83 of these countries are accessible at the bottom of this page). Of note is that the size of the target population (in the case of DTP3, the number of infants surviving at 12 months of age) of reporting districts varies significantly from a district to another. Indeed the median number of surviving infants in all reported districts is 400, ranging from a population of surviving infants of 1 in the smallest districts to more than 485,000 in the largest (Karachi, Pakistan).

National coverage data often conceals large inequalities in coverage and access within the country, that can be discovered through subnational monitoring. Targeting specific subnational areas with focused interventions will help countries achieve high and equitable coverage and meet their GVAP targets.

WHO and UNICEF are increasing efforts to gather subnational coverage data and support countries in improving the quality and use of the subnational coverage data to take actions to achieve high and equitable immunization coverage.

Resources

Descriptive analysis of subnational data pptx, 7.66Mb

Limitations related to globally reported subnational immunization data pdf, 341kb

Access 83 country visuals for DTP3 at administrative level (data as of 15 July 2017)

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Cholera

Over 700 000 people vaccinated against cholera in Cox's Bazar

SEAR/PR/1669

Cox's Bazar, Bangladesh, 20 October 2017 – More than 700 000 people over the age of one year have been administered oral cholera vaccine in the first phase of a campaign here to protect the newly arrived Rohingya population and their host communities against the deadly diarrheal disease.

"The coverage is commendable as the oral cholera vaccination campaign was planned and rolled out against very tight timelines. It demonstrates the commitment of the Ministry of Health, Bangladesh, partners on the ground, as well as partners such as GAVI and the International Coordinating Group on vaccine provision, to help secure the health and wellbeing of these immensely vulnerable people," said Dr N Paranietharan, WHO Representative to Bangladesh.

The first phase of the oral cholera vaccination (OCV) campaign covered 700 487 people aged one year and above, 179 848 of them children aged between one and five years. The campaign was launched on 10 October to cover 650 000 people. The second phase is scheduled for early November to give an additional OCV dose to children aged between one and five years, for added protection.

"The campaign has successfully vaccinated nearly 180,000 children aged one to five years. We will organize another round for these children to provide them with a second dose that will better protect them against this dangerous disease," said Edouard Beigbeder, UNICEF Representative in Bangladesh...

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Emergencies

POLIO

Public Health Emergency of International Concern (PHEIC)

Polio this week as of 18 October 2017 [GPEI]

:: On Tuesday [above], Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization, announced with great sadness the death of Dr Mahmoud M Fikri, WHO Regional Director for the Eastern Mediterranean (EMRO) Region. His leadership and dedication to public health, and unwavering support for polio eradication in Syria, Afghanistan and Pakistan will be greatly missed. The GPEI extends its sincere condolences to Dr Fikri's family and his many colleagues and friends throughout WHO and the EMRO Region.

:: Summary of newly-reported viruses this week:

...Afghanistan: one new wild poliovirus type 1 (WPV1) case reported from Nangarhar province. Two new wild poliovirus 1 (WPV1) positive environmental samples reported, one from Hilmand and one from Kandahar provinces.

...Pakistan: three new wild poliovirus 1 (WPV1) positive environmental samples reported, two in Balochistan province and one in Sindh province. See country-specific sections for further details. Syria: four new circulating vaccine derived poliovirus 2 (cVDPV2) cases reported in Deir Ez-Zor governorate, three from Mayadeen district, and one from Boukamal district. One new cVDPV2 positive from a healthy child in Mayadeen district.

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Situation reports on the polio outbreak in Syria

Situation update 17 October 2017

:: Four (4) new cases of cVDPV2 were reported this week— three (3) from Mayadeen district and one (1) from Boukamal district, Deir Ez-Zor governorate.

:: The total number of confirmed cVDPV2 cases is 52.

:: The second immunization round for Raqqa concluded on 13 October. According to administrative data, a total of 144,414 children aged 0-59m were vaccinated with mOPV2. The numbers of children reported vaccinated represented 96% of a revised estimated target calculated according to updated micro-plans.

:: IPV is being administered to children aged between 2-23 months in 2 districts, Raqqa and Thawra. The campaign in Raqqa and Thawra is ongoing.

:: 540,000 Aqua tabs were distributed to families together with vaccination in areas of Rural Raqqa (Salhabiyah, Khilah, Al-Rasheed camp, Hesha, Karama town and camp) during the second Raqqa campaign.

:: New areas were reached this round in the Thawra desert, where 4,550 children (representing 65% of the target) under 5 were vaccinated after a gap of 18 months.

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[**WHO Grade 3 Emergencies**](#) [to 21 October 2017]

The Syrian Arab Republic

:: WHO health supplies revive weakened health facilities in besieged Deir-Ez-Zor Governorate in Syria

17 October, 2017, Damascus, Syria – A WHO shipment of health supplies delivered through the Syrian Arab Red Crescent to besieged Deir-Ez-Zor governorate in Syria has helped struggling health facilities deliver life-saving health services to thousands of people.

The 14-ton shipment includes medicines for trauma care, treatment of burns, antibiotics; anti-allergens; cardiovascular medicines; and oral rehydration salts. In total, the supplies are sufficient for almost 1800 trauma cases and 260,000 medical treatments...

:: Situation reports on the polio outbreak in Syria

Situation update 17 October 2017

[See Polio above]

Nigeria

WHO supports the immunization of 874,000 people against yellow fever in Nigeria

News release 16 October 2017

[See Milestones above for more detail]

South Sudan

Read the latest health situation report pdf, 2.07Mb 13 October 2017

Republic of South Sudan

CHOLERA SITUATION AND RESPONSE UPDATES

13 OCTOBER 2017

Epidemic trends

:: Cholera transmission has continued to decline countrywide with only three counties [Juba, Budi, and Fangak] reporting cholera cases in the last four weeks [38-41, 2017].

:: In week 41, four out of 13 samples from Juba tested positive for Vibrio cholerae.

Iraq - No new announcements identified.

Yemen - *No new announcements identified.*

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WHO Grade 2 Emergencies [to 21 October 2017]

Cameroon - *No new announcements identified*

Central African Republic - *No new announcements identified.*

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

Ethiopia - *No new announcements identified.*

Libya - *No new announcements identified.*

Myanmar - *No new announcements identified.*

Niger - *No new announcements identified.*

Ukraine - *No new announcements identified.*

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UN OCHA – L3 Emergencies

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

Iraq

:: Thousands of Families from Kirkuk Are Returning [EN/AR/KU]

(Baghdad, 17 October 2017): In the past 48 hours, an estimated 61,200 people have been displaced in areas around Kirkuk. Humanitarian partners have dispatched mobile health clinics and are providing hot meals and food parcels to families who have fled. In coming days, partners will be providing 3,000 emergency food rations and hygiene items to families sheltering in public spaces.

"Authorities have confirmed that the majority of displaced families from Kirkuk are already returning to their homes in Kirkuk city," said Ms. Lise Grande, Humanitarian Coordinator for Iraq. "Most of the families who are still displaced are staying with families and host communities."...

Syrian Arab Republic

:: 19 Oct 2017 North East Syria Dashboard - September 2017

...Up to 7,000 civilians remain trapped in Ar-Raqa city and face increasingly deteriorating humanitarian conditions and protection concerns. Despite the risks of exposure to mines, snipers and military operations, some civilians have fled.

...Displacements from and within Deir-ez-Zor Governorate continued due to heavy fighting and airstrikes. An estimated 63,902 people have been displaced from 1 September to 8 October.

...The overall protection situation for civilians remains of high concern across north-eastern Syria, with ISIL reportedly actively preventing civilians attempting to flee the area.

...Large influxes of IDPs from Deir-ez-Zor Governorate are straining existing capacities and services in IDP sites resulting in increased protection needs.

Yemen - *No new announcements identified.*

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UN OCHA – Corporate Emergencies

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

Ethiopia

:: 20 Oct 2017 [Ethiopia HRD 2017: Status Update, 19 October 2017](#)

Since the revision of the Humanitarian Requirements Document (HRD) in August 2017, the humanitarian context in Ethiopia has continued to evolve which has led the Government and humanitarian partners to further adjust the HRD requirements. In the food sector the needs have been revised slightly upwards to accommodate an increase in the number of beneficiaries through the inclusion of 4 million former Productive Safety Net Programme (PSNP) clients in the HRD. In other sectors such as health and nutrition, needs have also continued to increase mainly due to the deteriorating nutrition situation in Somali region, increase in the number of displaced people, as well as the Fall Army Worm (FAW) outbreak that continues to ravage crops throughout the country....

DRC - *No new announcements identified*

Nigeria - *No new announcements identified*

Somalia - *No new announcements identified*

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Editor's Note:

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

EBOLA/EVD [to 21 October 2017]

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

- *No new announcements identified.*

MERS-CoV [to 21 October 2017]

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

- *No new announcements identified.*

Yellow Fever [to 21 October 2017]

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

[See Milestone above]

Zika virus [to 21 October 2017]

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

- *No new announcements identified.*

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WHO & Regional Offices [to 21 October 2017]

Latest news

WHO supports containment of rare virus on Uganda-Kenya border

20 October 2017 – WHO is working to contain an outbreak of Marburg virus disease that has appeared in eastern Uganda on the border with Kenya.

Governments commit to reduce suffering and deaths from noncommunicable diseases

18 October 2017 – Heads of State and Government and ministers from around the world today committed to new and bold action to reduce suffering and death from noncommunicable diseases (NCDs), primarily heart and lung diseases, cancers and diabetes, the world's leading killers.

Highlights

Responding to children and adolescents who have been sexually abused

October 2017 – Sexual abuse of children and adolescents is a gross violation of their rights and a global public health problem. It adversely affects the health of children and adolescents. Health care providers are in a unique position to provide an empathetic response to children and adolescents who have been sexually abused.

Evaluation of the election of the Director-General of WHO

October 2017 - The Sixty-fifth World Health Assembly decided, in resolution WHA65.15 (2012), that an evaluation, open to all Member States, will be conducted by the Executive Board within one year from the appointment of the next Director-General of WHO, to assess the efficacy of the revised process and methods for the election of the Director-General, in order to discuss any need for further enhancing fairness, transparency and equity among the Member States of the six regions of WHO.

WHO delivers lifesaving trauma medicines and supplies for victims of Mogadishu blasts

October 2017 – WHO has delivered lifesaving blood supplies and trauma care medicines as part of its emergency response to the bombings in Mogadishu, Somalia on 14 October, in which more than 275 people were killed and more than 300 people severely injured.

Handwashing an affordable way to prevent diseases and save lives

October 2017 - Global Handwashing Day is an opportunity to design, test, and replicate creative ways to encourage people to wash their hands with soap at critical times.

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Weekly Epidemiological Record, 20 October 2017, vol. 92, 42 (pp. 625–648)

:: Recommended composition of influenza virus vaccines for use in the 2018 southern hemisphere influenza season

:: Zoonotic influenza viruses: antigenic and genetic characteristics and development of candidate vaccine viruses for pandemic preparedness

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WHO Regional Offices

Selected Press Releases, Announcements

WHO African Region AFRO

- :: [South Sudan conducts Joint External Evaluation of Core capacities for International Health Regulation \(2005\)](#) 20 October 2017
- :: [WHO supports containment of rare virus on Uganda-Kenya border](#) 20 October 2017
- :: [WHO supports Bayelsa state to rapidly contain outbreak of Monkeypox virus.](#) 20 October 2017
- :: [WHO facilitates training on contact tracing for health professionals and volunteers on Plague](#)
- :: [Namibia Continues to invest in Polio Eradication](#) 19 October 2017
- :: [Monkey pox virus-Sultan dispels rumours linking outbreak to vaccine safety.](#) 18 October 2017
- :: [Suspected cases from Seychelles test negative for plague](#) 18 October 2017
- :: [Supporting the mental health needs of frontline responders](#) 18 October 2017
- :: [WHO supports the immunization of 874 000 people against yellow fever in Nigeria](#) 16 October 2017

WHO Region of the Americas PAHO

- :: [Governments commit to reduce suffering and deaths from noncommunicable diseases](#)
(10/19/2017)

WHO South-East Asia Region SEARO

- :: [Over 700 000 people vaccinated against cholera in Cox's Bazar](#) 20 October 2017
[See Cholera above for more detail]

WHO European Region EURO

- :: [European Region makes huge gains in NCD response, but needs faster progress](#) 19-10-2017
- :: [Obituary: Dr Mahmoud M. Fikri, WHO Regional Director for the Eastern Mediterranean Region](#) 18-10-2017
- :: [Using taxes to beat NCDs: success story in Hungary](#) 17-10-2017
- :: [Giving influenza vaccination a boost among older people](#) 16-10-2017
- :: [Nurse Gladis leads the way on influenza vaccination in Jönköping, Sweden](#) 16-10-2017

WHO Eastern Mediterranean Region EMRO

- :: [WHO delivers additional trauma care supplies to patients injured in Mogadishu attacks, Somalia](#) 19 October 2017
- :: [Tenfold increase in childhood and adolescent obesity in four decades](#) 11 October 2017

WHO Western Pacific Region

No new digest content.

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CDC/ACIP [to 21 October 2017]

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

Press Release

Thursday, October 19, 2017

[**CDC updates guidance for infants born to mothers with possible Zika virus infection during pregnancy - Press Release**](#)

This update includes information that has become available since the August 2016 release of the previous guidance.

MMWR News Synopsis for October 19, 2017

:: Update: Interim Guidance for the Diagnosis, Evaluation and Management of Infants with Possible Congenital Zika Virus Infection — United States, October 2017

CDC's updated interim clinical guidance for infants born to mothers with possible Zika virus infection during pregnancy will provide helpful, interpretable information for families and their healthcare providers. The Centers for Disease Control and Prevention (CDC) issued updated interim clinical guidance for health care providers caring for infants born to mothers with possible Zika virus infection during pregnancy. This update includes information that has become available since the August 2016 release of the previous guidance. Zika virus continues to be a public health threat to pregnant women and their infants, although at lower levels than during the recent epidemic in the Americas. The updated guidance is intended to provide helpful, interpretable information for families and their healthcare providers.

HIV Testing, Linkage to HIV Medical Care, and Interviews for Partner Services Among Women — 61 Health Department Jurisdictions, United States, Puerto Rico, and the U.S. Virgin Islands, 2015

To reduce and eventually eliminate HIV infection among women in the United States, HIV testing programs need to improve early linkage to HIV medical care among HIV-positive women who are not in care – even if it is not the first time they are diagnosed with HIV infection. A new analysis showed that six in 10 women who tested positive for HIV infection via CDC-funded HIV tests had already been diagnosed with HIV infection through a previous test. The vast majority (87 percent) of women who were previously diagnosed were not in HIV medical care at the time of testing, suggesting they were never linked to care or had fallen out of care. Black women were significantly less likely than white women to be linked to HIV medical care within 90 days of the current test. HIV testing is essential – not only to identify new infections, but also to link people with new or previous diagnoses to medical care to achieve viral suppression. To reduce and eventually eliminate HIV infection among women in the United States, HIV testing programs need to improve early linkage to HIV medical care among HIV-positive women who are not in care – even if it is not the first time they are diagnosed with HIV infection.

Tdap Vaccination Coverage During Pregnancy — Selected Sites, United States, 2006–2015

Gina DiGravio

Boston University School of Medicine

Tdap vaccination during pregnancy has increased between 2006 and 2017, from <1% in the years before the recommendation to 53% in 2015. However, this coverage is far short of the ACIP recommendation that every woman receive Tdap vaccine during each pregnancy. Since 2012 the Advisory Committee on Immunization Practices has recommended Tdap vaccination during each pregnancy. From 2006 through 2015, Tdap vaccination coverage in pregnant women participating in the Birth Defects Study of the Slone Epidemiology Center at Boston University increased from <1% before 2010 to 28% in 2013 and reached 53% in 2015.

Although Tdap coverage has increased in recent years, Tdap vaccine coverage remains far below the recommendation that every woman be vaccinated during each pregnancy. Increasing vaccination coverage during pregnancy could help reduce the impact of pertussis on infant morbidity and mortality.

Knowledge, Attitudes, and Practices Related to Ebola Virus Disease at the End of a National Epidemic — Guinea, August 2015

Regional variations in Ebola-related KAP in Guinea, after more than one year of a massive epidemic, reinforce the need for targeted health communication strategies during epidemic response. The findings also highlight the importance of health promotion efforts to prevent sporadic transmission or future outbreaks of Ebola, including messages that aim to address misconceptions about transmission and prevention and to address stigma that survivors might face as they recover from a devastating disease, rebuild their lives, and reintegrate into communities. Efforts to improve the public's knowledge, attitudes, and practices (KAP) about Ebola Virus Disease (Ebola) were important in controlling the 2014–2016 Ebola epidemic in Guinea, Sierra Leone, and Liberia. A national survey conducted in Guinea in August 2015 found regional variations in Ebola-related KAP. Results suggest that tailoring health communication by region might be more effective than a uniform, national approach. Most participants understood key aspects of Ebola transmission and prevention and intended to use safer burial practices for relatives with suspected Ebola. However, misconceptions about Ebola transmission were widespread, and many participants expressed concern about being near Ebola survivors.

Reporting Deaths Among Children Aged <5 Years After the Ebola Virus Disease Epidemic — Bombali District, Sierra Leone, 2015–2016

Child mortality surveillance in settings with limited vital registration can be strengthened by using multiple data sources, which together capture community and facility deaths. Mortality surveillance and national death reporting are limited in Sierra Leone, a country with one of the highest mortality rates in the world among children ages <5 years. To inform efforts to strengthen surveillance of stillbirths and deaths in children ages <5 years, multiple surveillance streams in Bombali Sebora chiefdom were retrospectively reviewed. Analysis of multiple death reporting streams, including the 1-1-7 phone alert system established during the Ebola virus disease outbreak, improved collection of data about deaths among children ages <5 years and stillbirths. Community-based reporting strategies, such as phone alerts, can be implemented in countries with incomplete death registration to supplement vital events records and strengthen child mortality surveillance.

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Announcements

AERAS [to 21 October 2017]
<http://www.aeras.org/pressreleases>
No new digest content identified.

BMGF - Gates Foundation [to 21 October 2017]
<http://www.gatesfoundation.org/Media-Center/Press-Releases>
OCTOBER 16, 2017
[Bill & Melinda Gates Foundation Releases Open-Source Software to Support Efforts that Expand Access to Financial Services in Developing Countries](#)

New code reduces complexity and cost of building payment platforms that connect poor customers to merchants, banks, mobile money providers, governments

CEPI – Coalition for Epidemic Preparedness Innovations [to 21 October 2017]

<http://cepi.net/>

No new digest content identified....

EDCTP [to 21 October 2017]

<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

18 October 2017

EDCTP requests proposals for conference management services

EDCTP is soliciting proposals from conference management companies for the provision of services for the Ninth EDCTP Forum...

European Medicines Agency [to 21 October 2017]

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

20/10/2017

Unparalleled access to clinical data - one year on

Over 3,000 clinical documents published, 3,600 registered users and positive stakeholder feedback ...

20/10/2017

New action plan to foster development of advanced therapies

Actions address specific challenges identified by stakeholders

... ATMPs are medicines for human use that are based on genes or cells. These therapies offer ground-breaking new opportunities for the treatment of disease and injury. They are particularly important for severe, untreatable or chronic diseases for which conventional approaches have proven to be inadequate.

ATMPs can be classified into four main groups: gene therapy medicinal products, somatic cell therapy medicinal products, tissue engineered medicinal products and combined ATMPs. EMA has received 18 marketing authorisation applications since the ATMP regulation came into force in 2009. Nine products have been approved.

The Agency's Committee for Advanced Therapies (CAT) plays a central role in the scientific assessment of ATMPs, as it provides the expertise needed to evaluate these medicines. Other initiatives include European Commission research programmes, the innovation offices in the national competent authorities and EMA's PRIME scheme...

17/10/2017

EMA's procedural handling of safety review was complete and independent

EMA's procedural handling of safety review was complete and independent

European Ombudsman concludes her inquiry into the HPV vaccines referral

The European Medicines Agency (EMA) has welcomed the [decision from the European Ombudsman](#) which concludes that there was no maladministration by the Agency in the handling of its safety review of human papillomavirus (HPV) vaccines.

The conclusions of this review were that the available evidence does not support that two specific syndromes, complex regional pain syndrome (CRPS) and postural orthostatic tachycardia syndrome (POTS) in young women and girls are caused by HPV vaccines. These vaccines are given to prevent infections with the most common types of HPV which can cause cervical cancer, other HPV-related cancers and pre-cancerous conditions.

The procedure was conducted by EMA's Pharmacovigilance Risk Assessment Committee's (PRAC) in 2015.

The Ombudsman's review followed a complaint which expressed concerns about aspects of the PRAC's handling of the referral procedure.

Following her inquiry into the procedural aspects complained about, the Ombudsman concluded that her inquiry did not identify any procedural issues that could have negatively affected the work and conclusions of the PRAC referral procedure. The examination of scientific evidence was complete and it was independent.

The Ombudsman also considered that EMA's conflicts of interest policy was fully complied with during the referral procedure on HPV vaccines and that no conflicts of interest were detected.

The Agency welcomes two suggestions made by the Ombudsman to further improve the information on its scientific assessments that it provides to the public and will now explore ways to address these.

European Vaccine Initiative [to 21 October 2017]

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

19 October 2017

EDUFLUVAC Final Meeting

After four years of collaborative research activities towards the development of a broadly reactive influenza vaccine, the European Commission-funded project EDUFLUVAC will be concluded by the end of October 2017. The EDUFLUVAC partners met for the final project meeting on 09-10 October in Brussels, Belgium to review the results generated and plan for future activities.

Promising pre-clinical results in different animal models have been obtained, but more research is needed to optimise the strategy undertaken by the consortium, which is based on the Epitope Dilution Phenomenon and the use of baculovirus-derived virus-like particles...

16 October 2017

TRANSVAC: European Vaccine Research and Development Infrastructure

Open Call for Vaccine Development Services

FDA [to 21 October 2017]

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

October 18, 2017 –

FDA approves CAR-T cell therapy to treat adults with certain types of large B-cell lymphoma

The U.S. Food and Drug Administration today approved Yescarta (axicabtagene ciloleucel), a cell-based gene therapy, to treat adult patients with certain types of large B-cell lymphoma who have not responded to or who have relapsed after at least two other kinds of treatment. Yescarta, a chimeric antigen receptor (CAR) T cell therapy, is the second gene therapy approved by the FDA and the first for certain types of non-Hodgkin lymphoma (NHL).

"Today marks another milestone in the development of a whole new scientific paradigm for the treatment of serious diseases. In just several decades, gene therapy has gone from being a promising concept to a practical solution to deadly and largely untreatable forms of cancer," said FDA Commissioner Scott Gottlieb, M.D. "This approval demonstrates the continued momentum of this promising new area of medicine and we're committed to supporting and helping expedite the development of these products. We will soon release a comprehensive policy to address how we plan to support the development of cell-based regenerative medicine. That policy will also clarify how we will apply our expedited programs to breakthrough products that use CAR-T cells and other gene therapies. We remain committed to supporting the efficient development of safe and effective treatments that leverage these new scientific platforms..."

Fondation Merieux [to 21 October 2017]

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

No new digest content identified.

Gavi [to 21 October 2017]

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

16 October 2017

[Attack on health facilities puts all Syrian children at risk](#)

Gavi CEO urges all parties in Syria to stop attacks against health facilities following destruction of vaccine stocks and equipment.

GHIT Fund [to 21 October 2017]

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

GHIT was set up in 2012 with the aim of developing new tools to tackle infectious diseases that devastate the world's poorest people. Other funders include six Japanese pharmaceutical •

2017.10.18

[Upcoming Event: GHIT R&D Forum on December 8th](#)

... The 200-person R&D Forum on December 8th will create opportunities for GHIT's development partners to share project overviews, R&D progress to date, and lessons learned over the past five years. The event offers unique opportunities to engage with scientists and experts across a multitude of organizations, as well as develop new partnerships to further build our community and accelerate global health R&D...

Global Fund [to 21 October 2017]

<http://www.theglobalfund.org/en/news/?topic=&type=NEWS;&country=>

No new digest content identified.

Hilleman Laboratories [to 21 October 2017]

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

No new digest content identified.

Human Vaccines Project [to 21 October 2017]

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

No new digest content identified.

IAVI [to 21 October 2017]

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

No new digest content identified.

IVAC [to 21 October 2017]

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

No new digest content identified.

IVI [to 21 October 2017]

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

No new digest content identified.

MSF/Médecins Sans Frontières [to 21 October 2017]

<http://www.doctorswithoutborders.org/news-stories/press/press-releases>

Press release

[Doctors Without Borders Challenges Pfizer's Unmerited Patent for Pneumonia Vaccine in Delhi High Court](#)

NEW YORK/NEW DELHI, OCTOBER 13, 2017—The international medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières(MSF) filed a petition before the High Court of Delhi today to overturn a patent granted to Pfizer pharmaceutical corporation on the pneumococcal conjugate vaccine (PCV).

NIH [to 21 October 2017]

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

October 18, 2017

[Norman Sharpless sworn in as director of the National Cancer Institute](#)

— Succeeds Harold Varmus, M.D., who stepped down in March 2015.

[Experts Outline Pathway to a Universal Influenza Vaccine](#)

October 17, 2017 — *NIH-Led meeting identifies knowledge gaps, development goals.*
Scientists and clinicians from the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health, and the California Institute of Technology discuss key considerations for developing a universal influenza vaccine in a meeting report appearing in the October 17 issue of *Immunity*. The report summarizes discussions from a workshop NIAID held

June 28-29, 2017, in Rockville, Maryland, entitled, "Pathway to a Universal Influenza Vaccine." The workshop brought together U.S. and international experts from academia, industry and government to identify knowledge gaps in influenza research and to set goals to fill these knowledge gaps. NIAID will use the report to develop a strategic plan and research agenda aimed at the development of a universal influenza vaccine.

PATH [to 21 October 2017]

<http://www.path.org/news/index.php>

Announcement | October 18, 2017

Join PATH at the 66th American Society of Tropical Medicine and Hygiene Annual Meeting

PATH experts to share latest research and innovations to tackle malaria and other Neglected Tropical Diseases, underscore critical role of US in global health

Sabin Vaccine Institute [to 21 October 2017]

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

No new digest content identified.

UNAIDS [to 21 October 2017]

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

Update

20 October 2017

Civil society and WFP increasing food security in Ukraine

19 October 2017

UNAIDS urges United Republic of Tanzania to implement HIV Prevention 2020 Road Map

19 October 2017

Republic of Moldova to fund HIV prevention services for key populations

18 October 2017

Parliamentarians call for firm action towards ending the AIDS epidemic

17 October 2017

ILO's VCT@WORK has reached 6 million workers

UNICEF [to 21 October 2017]

<https://www.unicef.org/media/>

20 October, 2017

Violence in Myanmar driving up to 12,000 Rohingya refugee children into Bangladesh every week – UNICEF

DHAKA, BANGLADESH/GENEVA, 20 October 2017 – Desperate living conditions and waterborne diseases are threatening more than 320,000 Rohingya refugee children who have

fled to southern Bangladesh since late August, including some 10,000 who crossed from Myanmar over the past few days, UNICEF said today.

7,000 newborns die every day, despite steady decrease in under-five mortality, new report says

NEW YORK/GENEVA/WASHINGTON, 19 October 2017 – Every day in 2016, 15,000 children died before their fifth birthday, 46 per cent of them – or 7,000 babies – died in the first 28 days of life, according to a new UN report.

The Vaccine Confidence Project [to 21 October 2017]

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

No new digest content identified.

Wellcome Trust [to 21 October 2017]

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

News / Published: 19 October 2017

First international awards in new Engagement Fellowships

Wellcome's Engagement Fellowships for 2017 have been awarded to Sara Kenney, Alok Jha, Anita Shervington and our first international fellows, Elizabeth Kimani and Nabeel Peterson.

Over the next three years the fellows will explore the topics of comic creation, science journalism, child nutrition, inclusion and equity in science.

:::::

BIO [to 21 October 2017]

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

No new digest content identified.

DCVMN – Developing Country Vaccine Manufacturers Network [to 21 October 2017]

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

No new digest content identified.

IFPMA [to 21 October 2017]

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

No new digest content identified.

PhRMA [to 21 October 2017]

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

No new digest content identified.

Industry Watch [to 21 October 2017]

:: **FDA Approves GSK's Shingles Vaccine with Agenus' QS-21 Stimulon® Adjuvant**

- *SHINGRIX containing QS-21 Stimulon® demonstrates remarkable efficacy of greater than 90% in pooled studies against shingles*
- *Shingles is a major public health issue in the US, impacting as many as 1 in 3 adults over the age of 50 years*

LEXINGTON, Mass., Oct. 20, 2017 /PRNewswire/ -- Agenus Inc. (NASDAQ: AGEN), an immuno-oncology company with a pipeline of immune checkpoint antibodies and cancer vaccines, announced today that the US Food and Drug Administration (FDA) granted marketing authorization to GlaxoSmithKline's (GSK) herpes zoster vaccine, SHINGRIX, containing Agenus' proprietary immune adjuvant QS-21 Stimulon®. SHINGRIX is indicated for prevention of herpes zoster (also known as shingles) in adults aged 50 years and older. The addition of QS-21 Stimulon helps improve the vaccine's effectiveness by boosting immune response in older adults who often experience age-related decline in immunity...

[:: Lilly and CureVac Announce Global Collaboration to Develop mRNA Cancer Vaccines](#)

- *Immuno-oncology collaboration aims to develop up to five cancer vaccines that target neoantigens across multiple tumor types*
- *CureVac to receive an upfront payment of \$50 million and an equity investment of €45 million*

INDIANAPOLIS and TÜBINGEN, Germany, Oct. 18, 2017 /PRNewswire/ -- Eli Lilly and Company and CureVac AG have announced a global immuno-oncology collaboration focused on the development and commercialization of up to five potential cancer vaccine products based on CureVac's proprietary RNAActive® technology. The companies will use messenger RNA (mRNA) technology that targets tumor neoantigens for a more robust anti-cancer immune response...

Under the terms of the agreement, CureVac will receive an upfront payment of \$50 million and an equity investment of €45 million. CureVac is also eligible to receive more than \$1.7 billion in development and commercialization milestones if all five vaccines are successfully developed, plus tiered royalties on product sales. Lilly is responsible for target identification, clinical development and commercialization. CureVac will be responsible for mRNA design, formulation and manufacturing of clinical supply and retains the option to co-promote the vaccine products in Germany.

CureVac's proprietary RNAActive technology will be used to deliver mRNA that ultimately directs the human immune system to target the encoded neoantigens. These tumor-specific neoantigens instruct the patient's existing immune system to mount a selective and potent response to eradicate the cancer...

* * * *

[Reports/Research/Analysis/Commentary/Conferences/Meetings/Book Watch/Tenders](#)

Vaccines and Global Health: The Week in Review has expanded its coverage of new reports, books, research and analysis published independent of the journal channel covered in Journal Watch below. Our interests span immunization and vaccines, as well as global public health, health governance, and associated themes. If you would like to suggest content to be included in this service, please contact David Curry at: david.r.curry@centerforvaccineethicsandpolicy.org

7,000 newborns die every day, despite steady decrease in under-five mortality, new report says

At current trends, 30 million newborns will die within first 28 days of life between 2017 and 2030

News release

19 October 2017 | NEW YORK/GENEVA/WASHINGTON DC - Every day in 2016, 15,000 children died before their fifth birthday, 46% of them – or 7 000 babies – died in the first 28 days of life, according to a new UN report.

Levels and Trends in Child Mortality 2017, reveals that although the number of children dying before the age of five is at a new low – 5.6 million in 2016, compared with nearly 9.9 million in 2000 – the proportion of under-five deaths in the newborn period has increased from 41% to 46% during the same period.

"The lives of 50 million children under-five have been saved since 2000, a testament to the serious commitment by governments and development partners to tackle preventable child deaths," said UNICEF Chief of Health, Stefan Swartling Peterson. "But unless we do more to stop babies from dying the day they are born, or days after their birth, this progress will remain incomplete. We have the knowledge and technologies that are required – we just need to take them where they are most needed."

At current trends, 60 million children will die before their fifth birthday between 2017 and 2030, half of them newborns, according to the report released by UNICEF, the World Health Organization, the World Bank and the Population Division of UNDESA which make up the Inter-agency Group for Child Mortality Estimation (IGME)...

Levels & Trends in Child Mortality – Report 2017

Estimates Developed by the UN Inter-agency Group for Child Mortality Estimation

PDF:

http://www.childmortality.org/files_v21/download/IGME%20report%202017%20child%20mortality%20final.pdf

CHILD SURVIVAL: KEY FACTS AND FIGURES

:: The world has made substantial progress in reducing child mortality in the past several decades. The total number of under-five deaths dropped to 5.6 (5.4, 6.0)1 million in 2016 from 12.6 (12.4, 12.8) million in 1990 – 15,000 every day compared with 35,000 in 1990.

:: Globally, the under-five mortality rate dropped to 41 (39, 44) deaths per 1,000 live births in 2016 from 93 (92, 95) in 1990 – a 56 (53, 58) per cent decline.

:: Globally, 2.6 (2.5, 2.8) million newborns died in 2016 – or 7,000 every day. Neonatal deaths accounted for 46 per cent of all under-five deaths, increasing from 41 per cent in 2000.

:: The largest number of newborn deaths occurred in Southern Asia (39 per cent), followed by sub-Saharan Africa (38 per cent). Five countries accounted for half of all newborn deaths: India, Pakistan, Nigeria, the Democratic Republic of the Congo and Ethiopia.

:: The neonatal mortality rate fell by 49 per cent from 37 (36, 38) deaths per 1,000 live births in 1990 to 19 (18, 20) in 2016.

:: Children face the highest risk of dying in their first month of life, at a rate of 19 deaths per 1,000 live births. By comparison, the probability of dying after the first month but before reaching age 1 is 12 and after age 1 but before turning 5 is 11.

:: Progress is slower in reducing neonatal mortality rates than in reducing mortality rates in children aged 1–59 months. While neonatal mortality declined by 49 per cent, the mortality in children aged 1–59 months declined by 62 per cent from 1990 to 2016.

:: Disparities in child survival exist across regions and countries: in sub-Saharan Africa, approximately 1 child in 13 dies before his or her fifth birthday, while in the world's high-income countries the ratio is 1 in 189. Among newborns in sub-Saharan Africa, about 1 child in 36 dies in the first month, while in the world's high-income countries the ratio is 1 in 333.

:: Many lives can be saved if the gaps across countries are closed. If all countries had reached an under-five mortality rate at or below the average rate of high-income countries – 5.3 deaths per 1,000 live births – 87 per cent of under-five deaths could have been averted, and almost 5 million children's lives could have been saved in 2016.

:: If current trends continue with more than 50 countries falling short of the Sustainable Development Goal (SDG) target on child survival, some 60 million children under age 5 will die between 2017 and 2030 – and half of them will be newborns.

:: If every country achieves the SDG target on child survival by 2030, an additional 10 million lives of children under age 5 will be saved throughout the period 2017–2030 – about half of them will be newborns.

:: Most under-five deaths are caused by diseases that are readily preventable or treatable with proven, cost-effective interventions. Infectious diseases and neonatal complications are responsible for the vast majority of under-five deaths globally.

:: The probability of dying among children aged 5–14 was 7.5 (7.2, 8.3) deaths per 1,000 children aged 5 in 2016 – substantially lower than among younger children. Still 1 (0.9, 1.1) million children aged 5–14 died in 2016. This is equivalent to 3,000 children in this age group dying every day. Among children aged 5–14, communicable diseases are a less prominent cause of death than among younger children, while other causes including injuries and non-communicable diseases become important.

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Journal Watch

Vaccines and Global Health: The Week in Review continues its weekly scanning of key peer-reviewed journals to identify and cite articles, commentary and editorials, books reviews and other content supporting our focus on vaccine ethics and policy. Journal Watch is not intended to be exhaustive, but indicative of themes and issues the Center is actively tracking. We

selectively provide full text of some editorial and comment articles that are specifically relevant to our work. Successful access to some of the links provided may require subscription or other access arrangement unique to the publisher.

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

American Journal of Infection Control

October 01, 2017 Volume 45, Issue 10, p1057-1174, e103-e118

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

[Reviewed earlier]

American Journal of Preventive Medicine

October 2017 Volume 53, Issue 4, p405-566, e123-e154

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

[Reviewed earlier]

American Journal of Public Health

October 2017 107(10)

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

[Reviewed earlier]

American Journal of Tropical Medicine and Hygiene

Volume 97, Issue 3, 2017 Suppl, 2017

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

[Reviewed earlier]

Annals of Internal Medicine

17 October 2017 Vol: 167, Issue 8

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

[New issue; No digest content identified]

BMC Cost Effectiveness and Resource Allocation

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMJ Global Health

January 2017; volume 2, issue 1

<http://gh.bmjjournals.org/content/2/1?current-issue=y>

[Reviewed earlier]

BMC Health Services Research

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMC Infectious Diseases

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMC Medical Ethics

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMC Medicine

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMC Pregnancy and Childbirth

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMC Public Health

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMC Research Notes

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

(Accessed 21 October 2017)

[BMC websites under maintenance]

BMJ Open

October 2017 - Volume 7 - 10

<http://bmjopen.bmjjournals.org/content/current>

[Reviewed earlier]

Bulletin of the World Health Organization

Volume 95, Number 10, October 2017, 665-728

<http://www.who.int/bulletin/volumes/95/10/en/>

[Reviewed earlier]

Child Care, Health and Development

November 2017 Volume 43, Issue 6 Pages 783–946

<http://onlinelibrary.wiley.com/doi/10.1111/cch.v43.6/issuetoc>

[Reviewed earlier]

Clinical and Experimental Vaccine Research

Volume 6(2); July 2017

<http://ecevr.org/>

[Reviewed earlier]

Clinical Therapeutics

October 2017 Volume 39, Issue 10

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

Commentaries

Enhancing the Pediatric Drug Development Framework to Deliver Better Pediatric Therapies Tomorrow

Christina Bucci-Rechtweg

p1920–1932

Published online: August 14, 2017

International Children's Advisory Network: A Multifaceted Approach to Patient Engagement in Pediatric Clinical Research

Meghan Gwara, Sharon Smith, Christine Woods, Elizabeth Sheeren, Hampton Woods

p1933–1938

Published online: September 21, 2017

Reviews

Roles of Clinical Research Networks in Pediatric Drug Development

Mark A. Turner, Sabah Attar, Saskia N. de Wildt, Gilles Vassal, Laura Mangiarini, Carlo Giaquinto

p1939–1948

Published online: September 21, 2017

Frameworks for Evaluating Medicines in Children

Mark A. Turner, Steven Hirschfeld

p1949–1958

Published online: September 26, 2017

Complexity

November/December 2016 Volume 21, Issue S2 Pages 1–642
<http://onlinelibrary.wiley.com/doi/10.1002/cplx.v21.S2/issuetoc>
[Reviewed earlier]

Conflict and Health
<http://www.conflictandhealth.com/>
[Accessed 21 October 2017]
[Webpage unavailable at inquiry]

Contemporary Clinical Trials
Volume 60, Pages 1-126 (September 2017)
<http://www.sciencedirect.com/science/journal/15517144/60?sdc=1>
[Reviewed earlier]

Current Opinion in Infectious Diseases
October 2017 - Volume 30 - Issue 5
<http://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx>
[Reviewed earlier]

Developing World Bioethics
August 2017 Volume 17, Issue 2 Pages 61–140
<http://onlinelibrary.wiley.com/doi/10.1111/dewb.2017.17.issue-2/issuetoc>
[Reviewed earlier]

Development in Practice
Volume 27, Issue 8, 2017
<http://www.tandfonline.com/toc/cdip20/current>
[Reviewed earlier]

Disasters
October 2017 Volume 41, Issue 4 Pages 629–851
<http://onlinelibrary.wiley.com/doi/10.1111/disa.2017.41.issue-4/issuetoc>
[Reviewed earlier]

EMBO Reports
01 October 2017; volume 18, issue 10
<http://embor.embopress.org/content/18/10?current-issue=y>
[Reviewed earlier]

Emerging Infectious Diseases

Volume 23, Number 10—October 2017
<http://wwwnc.cdc.gov/eid/>
[Reviewed earlier]

Epidemics

Volume 20, Pages 1-102 (September 2017)
<http://www.sciencedirect.com/science/journal/17554365>
[Reviewed earlier]

Epidemiology and Infection

Volume 145 - Issue 13 - October 2017
<https://www.cambridge.org/core/journals/epidemiology-and-infection/latest-issue>
[Reviewed earlier]

The European Journal of Public Health

Volume 27, Issue 5, October 2017
<https://academic.oup.com/eurpub/issue/27/5>
[Reviewed earlier]

Global Health Action

Volume 10, 2017 – Issue 1 [In Progress]
<http://www.tandfonline.com/toc/zgha20/10/1?nav=tocList>
[Reviewed earlier]

Global Health: Science and Practice (GHSP)

September 2017 | Volume 5 | Number 3
<http://www.ghspjournal.org/content/current>
[Reviewed earlier]

Global Public Health

Volume 12, 2017 Issue 12
<http://www.tandfonline.com/toc/rgph20/current>
[Reviewed earlier]

Globalization and Health

<http://www.globalizationandhealth.com/>
[Accessed 21 October 2017]
[Springer websites down at inquiry]

Health Affairs

October 2017; Volume 36, Issue 10
<http://content.healthaffairs.org/content/current>

Issue Focus: Emergency Departments, Behavioral Health & More
[New issue; No digest content identified]

Health and Human Rights

Volume 19, Issue 1, June 2017
<http://www.hhrjournal.org/>
[Reviewed earlier]

Health Economics, Policy and Law

Volume 12 - Issue 4 - October 2017
<https://www.cambridge.org/core/journals/health-economics-policy-and-law/latest-issue>
SPECIAL ISSUE: Healthcare and Health Innovation in Europe: Regulating for public benefit or for commercial profit?
[Reviewed earlier]

Health Policy and Planning

Volume 32, Issue 9 November 2017
<http://heapol.oxfordjournals.org/content/current>
[Reviewed earlier]

Health Research Policy and Systems

<http://www.health-policy-systems.com/content>
[Accessed 21 October 2017]
[BMC websites under maintenance]

Humanitarian Exchange Magazine

<http://odihpn.org/magazine/the-humanitarian-consequences-of-violence-in-central-america/>
Number 69 June 2017
The humanitarian consequences of violence in Central America
[Reviewed earlier]

Human Vaccines & Immunotherapeutics (formerly Human Vaccines)

Volume 13, Issue 9 2017
<http://www.tandfonline.com/toc/khvi20/current>
[Reviewed earlier]

Infectious Agents and Cancer

<http://www.infectagentscancer.com/content>
[Accessed 21 October 2017]

[BMC websites under maintenance]

Infectious Diseases of Poverty

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

[Accessed 21 October 2017]

[BMC websites under maintenance]

International Health

Volume 9, Issue 5, 1 September 2017

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

[Reviewed earlier]

International Journal of Community Medicine and Public Health

Vol 4, No 10 (2017) October 2017

<http://www.ijcmph.com/index.php/ijcmph/issue/view/31>

[Reviewed earlier]

International Journal of Epidemiology

Volume 46, Issue 4, 1 August 2017

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

[Reviewed earlier]

International Journal of Human Rights in Healthcare

Vol. 10 Issue: 4 2017

<http://www.emeraldinsight.com/toc/ijhrh/10/4>

[Reviewed earlier]

International Journal of Infectious Diseases

October 2017 Volume 63, p1-100

[http://www.ijidonline.com/issue/S1201-9712\(17\)X0010-6](http://www.ijidonline.com/issue/S1201-9712(17)X0010-6)

[Reviewed earlier]

JAMA

October 17, 2017, Vol 318, No. 15, Pages 1409-1514

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

[New issue; No digest content identified]

JAMA Pediatrics

October 2017, Vol 171, No. 10, Pages 927-1024

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

[Reviewed earlier]

JBI Database of Systematic Review and Implementation Reports

October 2017 - Volume 15 - Issue 10

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

Systematic Review Protocols

Information overload in consumers of health-related information: a scoping review protocol

Lee, Kenneth; Roehrer, Erin; Cummings, Elizabeth

JBI Database of Systematic Reviews and Implementation Reports. 15(10):2457-2463, October 2017.

Journal of Community Health

Volume 42, Issue 5, October 2017

<https://link.springer.com/journal/10900/42/5/page/1>

[Reviewed earlier]

Journal of Epidemiology & Community Health

October 2017 - Volume 71 - 10

<http://jech.bmjjournals.org/content/current>

[Reviewed earlier]

Journal of Evidence-Based Medicine

August 2017 Volume 10, Issue 3 Pages 153–240

<http://onlinelibrary.wiley.com/doi/10.1111/jebm.2017.10.issue-3/issuetoc>

[Reviewed earlier]

Journal of Global Ethics

Volume 13, Issue 2, 2016

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

[Reviewed earlier]

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

Volume 28, Number 3, August 2017

<https://muse.jhu.edu/issue/36769>

[Reviewed earlier]

Journal of Immigrant and Minority Health

Volume 19, Issue 5, October 2017

<https://link.springer.com/journal/10903/19/5/page/1>

[Reviewed earlier]

Journal of Immigrant & Refugee Studies

Volume 15, Issue 3, 2017

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

Statelessness, Irregularity, and Protection in Southeast Asia***Introduction to the Special Issue***

[Reviewed earlier]

Journal of Infectious Diseases

Volume 216, Issue 6 15 September 2017

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

[Reviewed earlier]

Journal of Medical Ethics

October 2017 - Volume 43 - 10

<http://jme.bmjjournals.org/content/current>

[Reviewed earlier]

Journal of Medical Internet Research

Vol 19, No 10 (2017): October

<http://www.jmir.org/2017/10>

[Reviewed earlier]

Journal of Medical Microbiology

Volume 66, Issue 9, September 2017

<http://jmm.microbiologyresearch.org/content/journal/jmm/66/9>

[Reviewed earlier]

Journal of Patient-Centered Research and Reviews

Volume 4, Issue 3 (2017)

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

[Reviewed earlier]

Journal of the Pediatric Infectious Diseases Society (JPIDS)

Volume 6, Issue 3, 1 September 2017,

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

[Reviewed earlier]

Journal of Pediatrics

October 2017 Volume 189, p1-244

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

[Reviewed earlier]

Journal of Public Health Management & Practice

September/October 2017 - Volume 23 - Issue 5

<http://journals.lww.com/jphmp/pages/default.aspx>

[Reviewed earlier]

Journal of Public Health Policy

Volume 38, Issue 3, August 2017

<https://link.springer.com/journal/41271/38/3/page/1>

[Reviewed earlier]

Journal of the Royal Society – Interface

01 September 2017; volume 14, issue 134

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

[Reviewed earlier]

Journal of Travel Medicine

Volume 24, Issue 5, 1 September – October 2017

<https://academic.oup.com/jtm/issue/24/5>

[Reviewed earlier]

Journal of Virology

October 2017, volume 91, issue 20

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

[Reviewed earlier]

The Lancet

Oct 21, 2017 Volume 390 Number 10105 p1811-1926 e27-e32

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

[New issue; No digest content identified]

Lancet Global Health

Oct 2017 Volume 5 Number 10 e948-e1046

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

[Reviewed earlier]

Lancet Infectious Diseases

Oct 2017 Volume 17 Number 10 p1003-1098 e306-e333

<http://www.thelancet.com/journals/laninf/issue/current>
[Reviewed earlier]

Lancet Public Health
Oct 2017 Volume 2 Number 10 e438-e482
<http://thelancet.com/journals/lanpub/>
[New issue; No digest content identified]

Lancet Respiratory Medicine
Oct 2017 Volume 5 Number 10 p761-834 e30
<http://www.thelancet.com/journals/lanres/issue/current>
[New issue; No digest content identified]

Maternal and Child Health Journal
Volume 21, Issue 10, October 2017
<https://link.springer.com/journal/10995/21/10/page/1>
[Reviewed earlier]

Medical Decision Making (MDM)
Volume 37, Issue 7, October 2017
<http://mdm.sagepub.com/content/current>
[Reviewed earlier]

The Milbank Quarterly
A Multidisciplinary Journal of Population Health and Health Policy
June 2017 Volume 95, Issue 2 Pages 213–446
<http://onlinelibrary.wiley.com/doi/10.1111/milq.2017.95.issue-2/issuetoc>
[Reviewed earlier]

Nature
Volume 550 Number 7676 pp301-424 19 October 2017
http://www.nature.com/nature/current_issue.html
[New issue; No digest content identified]

Nature Medicine
October 2017, Volume 23 No 10 pp1113-1241
<http://www.nature.com/nm/journal/v23/n10/index.html>
[Reviewed earlier]

Nature Reviews Immunology

October 2017 Vol 17 No 10
<http://www.nature.com/nri/journal/v17/n10/index.html>
[Reviewed earlier]

New England Journal of Medicine

October 19, 2017 Vol. 377 No. 16
<http://www.nejm.org/toc/nejm/medical-journal>

Perspective

[A Devastating Delay — Zika and the Implementation Gap](#)

Stephanie R. Morain, Ph.D., M.P.H., Susan H. Wootton, M.D., and Catherine Eppes, M.D., M.P.H.

N Engl J Med 2017; 377:1505-1507 October 19, 2017 DOI: 10.1056/NEJMp1707273

[Initial text]

The epidemic of Zika in the Americas and the virus's effects on fetal development have jolted the U.S. medical community and the broader public. Zika's relatively recent emergence has necessitated rapid research on its virology and pathogenesis, transmission, clinical manifestations, and diagnosis. The medical community has risen to this challenge admirably. Though a PubMed search for articles about Zika published before the 2015 outbreak in Brazil yielded fewer than 110 results, a similar search in July 2017 yielded more than 3000. The National Institutes of Health has identified several high-priority areas of Zika research, and at least 15 related trials are actively enrolling participants, including several vaccine clinical trials.

Developing knowledge to guide prevention and clinical management of Zika virus disease is critical, and these efforts should continue. However, this focus on knowledge acquisition has overshadowed another critical need — namely, ensuring that new knowledge is disseminated to frontline providers and used to improve care...

Pediatrics

October 2017, VOLUME 140 / ISSUE 4
<http://pediatrics.aappublications.org/content/140/4?current-issue=y>
[Reviewed earlier]

Pharmaceutics

Volume 9, Issue 3 (September 2017)
<http://www.mdpi.com/1999-4923/9/3>
[Reviewed earlier]

PharmacoEconomics

Volume 35, Issue 10, October 2017
<https://link.springer.com/journal/40273/35/10/page/1>
[Reviewed earlier]

PLOS Currents: Disasters

<http://currents.plos.org/disasters/>

[Accessed 21 October 2017]
[No new digest content identified]

PLoS Currents: Outbreaks
<http://currents.plos.org/outbreaks/>
[Accessed 21 October 2017]
[No new digest content identified]

PLoS Medicine
<http://www.plosmedicine.org/>
(Accessed 21 October 2017)
[No new digest content identified]

PLoS Neglected Tropical Diseases
<http://www.plosncts.org/>
(Accessed 21 October 2017)
[No new digest content identified]

PLoS One
<http://www.plosone.org/>
Research Article
[**Economic benefits of sharing and redistributing influenza vaccines when shortages occurred**](#)
Recurrent influenza outbreak has been a concern for government health institutions in Taiwan. Over 10% of the population is infected by influenza viruses every year, and the infection has caused losses to both health and the economy. Approximately three million free vaccine doses are ordered and administered to high-risk populations at the beginning of flu season to control the disease. The government recommends sharing and redistributing vaccine inventories when shortages occur. While this policy intends to increase inventory flexibility, and has been proven as widely valuable, its impact on vaccine availability has not been previously reported.
Sheng-I Chen
Research Article | published 17 Oct 2017 PLOS ONE
<https://doi.org/10.1371/journal.pone.0186418>

PLoS Pathogens
<http://journals.plos.org/plospathogens/>
[Accessed 21 October 2017]
[No new digest content identified]

PNAS - Proceedings of the National Academy of Sciences of the United States of America
<http://www.pnas.org/content/early/>

[Accessed 21 October 2017]
[No new digest content identified]

Prehospital & Disaster Medicine

Volume 32 - Issue 5 - October 2017
<https://www.cambridge.org/core/journals/prehospital-and-disaster-medicine/latest-issue>
[Reviewed earlier]

Preventive Medicine

Volume 102, Pages 1-126 (September 2017)
<http://www.sciencedirect.com/science/journal/00917435/102?sdc=1>
[Reviewed earlier]

Proceedings of the Royal Society B

17 May 2017; volume 284, issue 1854
<http://rspb.royalsocietypublishing.org/content/284/1854?current-issue=y>
[Reviewed earlier]

Public Health Ethics

Volume 10, Issue 2 July 2017
<http://phe.oxfordjournals.org/content/current>
Symposium on Daniel Hausman's Valuing Health: Well-Being, Freedom and Suffering
[Reviewed earlier]

Public Health Reports

Volume 132, Issue 5, September/October 2017
<http://phr.sagepub.com/content/current>
[Reviewed earlier]

Qualitative Health Research

Volume 27, Issue 12, October 2017
<http://qhr.sagepub.com/content/current>
[Reviewed earlier]

Reproductive Health

<http://www.reproductive-health-journal.com/content>
[Accessed 21 October 2017]
[No new digest content identified]

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

http://www.paho.org/journal/index.php?option=com_content&view=featured&Itemid=101
[No new digest content identified]

Risk Analysis

October 2017 Volume 37, Issue 10 Pages 1799–2022

<http://onlinelibrary.wiley.com/doi/10.1111/risa.2017.37.issue-9/issuetoc>
[Reviewed earlier]

Risk Management and Healthcare Policy

Volume 10, 2017

<https://www.dovepress.com/risk-management-and-healthcare-policy-archive56>
[Reviewed earlier]

Science

20 October 2017 Vol 358, Issue 6361

<http://www.sciencemag.org/current.dtl>
[New issue; No digest content identified]

Science Translational Medicine

18 October 2017 Vol 9, Issue 412

<http://stm.sciencemag.org/>
[New issue; No digest content identified]

Social Science & Medicine

Volume 190, Pages 1-278 (October 2017)

<http://www.sciencedirect.com/science/journal/02779536/190?sdc=1>
[Reviewed earlier]

Travel Medicine and Infectious Diseases

July-August, 2017 Volume 18

<http://www.travelmedicinejournal.com/>
[Reviewed earlier]

Tropical Medicine & International Health

October 2017 Volume 22, Issue 10 Pages 1205–1360

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.2017.22.issue-10/issuetoc>
[Reviewed earlier]

Vaccine

Volume 35, Issue 45, Pages 6041-6254 (27 October 2017)

<http://www.sciencedirect.com/science/journal/0264410X/35/45?sd=1>

*Biosecurity**Reviews***A systematic review of factors affecting vaccine uptake in young children**

Review Article

Pages 6059-6069

Louise E. Smith, Richard Amlôt, John Weinman, Jenny Yiend, G. James Rubin

*Abstract**Background*

Many parents make a conscious decision not to vaccinate their child. Multiple beliefs and perceptions surround this choice. If uptake of routine child vaccination is to increase, public health communications about vaccines must be informed by evidence on the factors affecting uptake.

Method

We conducted a systematic review to investigate psychological, social and contextual factors associated with uptake of routine vaccines in young children. Studies were included if they reported analyses of the association between psychological factors and uptake or included parents' self-reported reasons for or against vaccination.

Results

Our search identified 9110 citations after deduplication. Sixty-eight citations describing sixty-four studies were included in the review. The quality of the studies was mixed. There is strong evidence for an association between vaccination uptake and: not perceiving vaccines to cause adverse effects; general positive attitudes towards vaccination; positive vaccine recommendations; and perceiving fewer practical difficulties of vaccination. While there was good evidence for an association between vaccination and perceived susceptibility to the illness, evidence for an association between perceived severity of an illness and vaccination was weak. Other factors associated with vaccination include knowledge about the vaccine, social influences and trust in the healthcare profession. Having increased information about the vaccine was associated with vaccination, but the influence of different sources of information needs more research.

Conclusion

Understanding which factors are consistently associated with the decision to vaccinate one's child is important to identify messages which should be targeted by public health communications about routine child vaccinations.

Association of both consistency and strength of self-reported clinician recommendation for HPV vaccination and HPV vaccine uptake among 11- to 12-year-old children

Original Research Article

Pages 6122-6128

Lila J. Finney Rutten, Jennifer L. St. Sauver, Timothy J. Beebe, Patrick M. Wilson, Debra J. Jacobson, Chun Fan, Carmen Radecki Breitkopf, Susan T. Vadaparampil, Kathy L. MacLaughlin, Robert M. Jacobson

*Abstract**Purpose*

We tested the hypotheses that consistency and strength of clinician recommendation of the human papillomavirus (HPV) vaccination would be associated with vaccine delivery rates.

Methods

From October 2015 through January 2016, we conducted a survey of primary care clinicians (n = 227) in Southeastern Minnesota to evaluate clinician behaviors regarding HPV vaccination. The survey response rate was 41.0% (51 clinical sites). We used the Rochester Epidemiology Project, a clinical data linkage infrastructure, to ascertain clinical site-level HPV vaccination rates. We examined associations of clinician self-reports of both the consistency and strength of their recommendations for HPV vaccination for patients aged 11–12 years (n = 14,406) with site-level vaccination rates.

Results

The majority of clinicians reported consistently (always or usually) recommending the HPV vaccine to females (79.0%) and to males (62.2%); 71.9% of clinicians reported strongly recommending the vaccine to females while 58.6% reported strongly recommending to males. Consistency and strength of recommending the HPV vaccine was significantly higher among those practicing in pediatrics and board certified in pediatrics compared to family medicine. Higher rates of initiation (1 dose) [Incidence Rate Ratio (IRR) = 1.05; 95% CI (1.01–1.09)] and completion (3 doses) [IRR = 1.08; 95% CI (1.02–1.13)] were observed among clinical sites where, on average, clinicians more frequently reported always or usually recommending the vaccine for females compared to sites where, on average, clinicians reported recommending the vaccine less frequently. Similarly, higher rates of initiation [IRR = 1.03; 95% CI (1.00–1.06)] and completion [IRR = 1.04; CI (1.00, 1.08)] were observed among sites where clinicians reported strongly recommending the vaccine to females more frequently compared to sites where, on average, clinicians reported strongly recommending the HPV vaccine less frequently; similar associations were observed for male initiation [IRR = 1.05; CI (1.02, 1.08)] and completion [IRR = 1.05; 95% CI (1.01, 1.09)].

Conclusions

Consistency and strength of HPV vaccination recommendation was associated with higher vaccination rates.

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Vaccine: Development and Therapy

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

(Accessed 21 October 2017)

[No new digest content identified]

Vaccines — Open Access Journal

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

(Accessed 21 October 2017)

[No new digest content identified]

Value in Health

October–November 2017 Volume 20, Issue 9

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

ISPOR 20th Annual European Congress Research Abstracts

[No new digest content identified]

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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 21 October 2017

Will the World's Most Worrying Flu Virus Go Pandemic?

There's good news and bad news.

Ed Yong

Oct 19, 2017

BBC

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

Accessed 21 October 2017

[No new, unique, relevant content]

The Economist

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

Accessed 21 October 2017

[No new, unique, relevant content]

Financial Times

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

Accessed 21 October 2017

Forbes

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

Accessed 21 October 2017

[No new, unique, relevant content]

Foreign Affairs

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

Accessed 21 October 2017

[No new, unique, relevant content]

Foreign Policy

<http://foreignpolicy.com/>

Accessed 21 October 2017

Essay

Yemen's Humanitarian Nightmare -- The Real Roots of the Conflict

November/December 2017

Asher Orkaby

The Guardian

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

Accessed 21 October 2017

[No new, unique, relevant content]

New Yorker

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

Accessed 21 October 2017

[No new, unique, relevant content]

New York Times

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

Accessed 21 October 2017

The Long War on Polio, as Recalled by Its Generals

"Coffee With Polio Experts" videos may be amateurish, but they are full of insights explaining why polio eradication has been such a struggle.

October 20, 2017 - By DONALD G. McNEIL Jr - Health - Print Headline: ""

Marburg Hemorrhagic Fever Kills 1 Person in Uganda

One Ugandan has died of Marburg, a highly infectious disease that, like Ebola, manifests as a viral hemorrhagic fever, Uganda's health minister said Thursday.

October 19, 2017 - By THE ASSOCIATED PRESS - World - Print Headline: "Marburg Hemorrhagic Fever Kills 1 Person in Uganda"

Wall Street Journal

http://online.wsj.com/home-page?_wsjregion=na,us&_homepage=/home/us

Accessed 21 October 2017

[No new, unique, relevant content]

Washington Post

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

Accessed 21 October 2017

[No new, unique, relevant content]

Think Tanks et al

Brookings

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

Accessed 21 October 2017

[No new relevant content]

Center for Global Development

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

Accessed 21 October 2017

[No new relevant content]

Council on Foreign Relations

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

Accessed 21 October 2017

[No new relevant content]

CSIS

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

Accessed 21 October 2017

[No new relevant content]

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

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