



**Vaccines and Global Health: The Week in Review**  
**21 July 2018**  
**Center for Vaccine Ethics & Policy (CVEP)**

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

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

*Comments and suggestions should be directed to*

*David R. Curry, MS  
Editor and  
Executive Director  
Center for Vaccine Ethics & Policy  
[david.r.curry@centerforvaccineethicsandpolicy.org](mailto:david.r.curry@centerforvaccineethicsandpolicy.org)*

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

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## Milestones :: Perspectives

### **Record number of infants vaccinated in 2017**

*As over 19 million children miss out on vaccinations, UNICEF and WHO call for concerted efforts to reach all children*

New York, 16 July 2018: A record 123 million infants were immunized globally in 2017 with at least one dose of the diphtheria-tetanus-pertussis vaccine , according to data released today by the World Health Organization and UNICEF.

The data shows that:

:: 9 out of every 10 infants received at least one dose of diphtheria-tetanus-pertussis (DTP) vaccine in 2017, gaining protection against these deadly diseases.

:: An additional 4.6 million infants were vaccinated globally in 2017 with three doses of the diphtheria-tetanus-pertussis vaccine compared to 2010.

:: 167 countries included a second dose of measles vaccine as part of their routine vaccination schedule.

:: 162 countries now use rubella vaccines and global coverage against rubella has increased from 35 per cent in 2010 to 52 per cent.

:: The human papillomavirus (HPV) vaccine was introduced in 80 countries to help protect women against cervical cancer.

:: Additional vaccines are being included into the immunization schedule, such as new formulations of meningitis and polio vaccines.

**Despite these successes, almost 20 million infants did not receive the benefits of full immunization in 2017, as they were not vaccinated with three doses of the diphtheria-tetanus-pertussis vaccine. Of these, almost 8 million (40 per cent) live in fragile or humanitarian settings, including countries affected by conflict. In addition, a growing share are from middle-income countries, where inequity and marginalization, particularly among the urban poor, prevent many from getting immunized.**

As populations grow, more countries need to increase their investments in immunization programmes. To reach all children with much-needed vaccines, the world will need to vaccinate an estimated 20 million additional children every year with three doses of the diphtheria-tetanus-pertussis vaccine (DTP3); 45 million with a second dose of measles vaccine; and 76 million children with 3 doses of pneumococcal conjugate vaccine.

In support of these efforts, WHO and UNICEF are working to expand access to immunization by:

:: Strengthening the quality, availability and use of vaccine coverage data.

:: Better targeting resources.

:: Planning actions at sub-national levels and

:: Ensuring that vulnerable people can access vaccination services.

[WHO/UNICEF 2017 country and regional immunization coverage data](#)



## Featured Journal Content – Dengue Vaccine

### Vaccination in a “me first” era

*The Lancet Global Health – Editorial*

Volume 6, No. 8, e811, August 2018

DOI: [https://doi.org/10.1016/S2214-109X\(18\)30331-0](https://doi.org/10.1016/S2214-109X(18)30331-0)

In this month's issue, Kevin Ariën and Annelies Wilder-Smith outline the ideal attributes of a diagnostic test to identify previous exposure to dengue virus. The need for such an assay stems from the worrying revelation by Sanofi Pasteur last November that its licensed tetravalent vaccine, Dengvaxia, was associated with an increased risk of severe dengue in individuals who were seronegative for dengue virus at the time of vaccination. It was assumed that the vaccine, the efficacy of which is higher for serotypes 3 and 4 than for 1 and 2, was mimicking a primary infection, which is known to be a risk factor for future severe disease if the individual becomes infected with a different serotype at a later date. Sanofi Pasteur thus proposed a [label change](#) to the effect that vaccination should not be recommended in those who have not been previously infected. Further, in April, 2018, WHO's Strategic Advisory Group of Experts on Immunization (SAGE) released [revised recommendations](#) that also indicated a preferred strategy of prevaccination screening for previous exposure and vaccination only of seropositive individuals. SAGE additionally called for research into “development of a highly sensitive and specific rapid diagnostic test to determine serostatus”.

In the Philippines—where the disease is highly prevalent and whose Government boldly announced a programme to vaccinate 830,000 schoolchildren in 2016—this transparent, cautious, and responsible approach to a safety concern was unfortunately lost amid an avalanche of alarmist governmental statements, screaming headlines, and law suits. The Government withdrew approval of the vaccine in December 2017.

What can cause a public health programme to go so disastrously wrong and what can academics, health professionals, and communicators do to assuage concerns about vaccine safety? These were some of the questions put to a panel of experts at the International Society for Neglected Tropical Diseases [3](#) in London last month. Tikki Pangestu, professor at the Lee Kuan Yew School of Public Policy in Singapore and previously of WHO, highlighted what he saw as the “enabling environment” that led to the dengue vaccine saga. First, the immunisation programme was launched in the Philippines to much fanfare very swiftly after the vaccine's approval and during an election year. The Government's eagerness to introduce the programme could thus have been seen as politically motivated. Second, a failure of leadership saw public health officials join with anti-vaccine groups and a media focused on getting a juicy story to seed mass fear among parents. Finally, and common to all immunisation programmes, is the very concept of intervening medically in healthy children—an understandably combustible notion, the benefits, risks, and uncertainties of which are difficult to convey to a lay audience. Add to these general elements of distrust the tensions between individual rights and wider societal benefits, and religious and philosophical beliefs, and you have quite an explosive mix, added Pauline Paterson from the London School of Hygiene and Tropical Medicine's Vaccine Confidence Project.

The answer? “Very difficult”, said Paterson. Psychological research shows that changing misconceptions is not easy, and that the mere process of debunking a myth can make the myth

more prominent in the mind of the receiver. However, identifying susceptible populations, exploring the underlying reasons for non-vaccination, and designing evidence-informed responses are important features of success, she advised. Additionally, people are more likely to vaccinate or be vaccinated if a health-care provider recommends it, and vaccinated health-care providers are more likely to recommend vaccination to others. Some clear messages to health-care providers, then: acknowledge your patients' concerns, engage with them, recommend vaccination, and get yourself or your children vaccinated.

And what about communicators? We are all communicators, insisted Sanofi Pasteur's Angus Thomson. Researchers, practitioners, editors, and policy makers can and should be part of the discussion, he said, offering evidence to counter misinformation where we encounter it on social media, helping journalists to understand complex risk-benefit scenarios, and assisting governments with risk management planning. "Don't wait for the crisis before you lean into the problem", agreed Rachel Grant from the Coalition for Epidemic Preparedness Innovations (CEPI).

Finally, we need to be prepared to meet individuals wherever their own personal beliefs lie and not simply try to convert them to our own mindset. Because one thing we cannot assume in this "me first" era is that every citizen will see the wider societal benefits as a good reason to take a personal risk, however small that may be in reality.

*Comment*

**Dengue vaccine: reliably determining previous exposure**

Kevin K Ariën, Annelies Wilder-Smith

Dengue fever is the most prevalent and widespread mosquito-borne viral disease, and can only be countered by integrated prevention and control strategies, including sustained vector control programmes, the best evidence-based clinical care, and vaccination.

The first dengue vaccine, CYD-tetravalent dengue vaccine (CYD-TDV) or Dengvaxia (Sanofi Pasteur, Lyon, France), is licensed in 20 countries. Initial findings from two large phase 3 clinical trials have shown good but incomplete protection, in particular against severe dengue and dengue disease that requires hospital admission.<sup>1, 2</sup> In November, 2017, Sanofi Pasteur announced the results from additional studies showing that the vaccine has a differential performance in individuals who have previously been infected by dengue virus (seropositive) versus those without previous dengue virus infection (seronegative).<sup>3</sup> Vaccine efficacy against laboratory-confirmed symptomatic dengue virus infection was high among individuals who were seropositive at baseline and aged at least 9 years (76%, 95% CI 63·9–84·0), but much lower among participants who were seronegative at baseline (38%, –0·9 to 62·9). Furthermore, vaccination of individuals who are seronegative increases their risk of severe dengue or dengue that requires hospital admission.<sup>4</sup> Subsequently, in April, 2018, WHO's Strategic Advisory Group of Experts recommended that in countries considering the introduction of vaccination with CYD-TDV, pre-vaccination screening should be preferred to assess dengue virus serostatus, and only people who are dengue seropositive should be vaccinated. To this end, WHO also encouraged the urgent development of rapid diagnostic tests (RDTs) to establish serostatus.

Because dengue viruses are of the genus Flavivirus, composed of genetically, structurally, and antigenically related viruses, such as Zika virus, yellow fever virus, and tick-borne encephalitis

virus, antibody detection tests have high cross-reactivity and consequently poor reliability for the diagnosis of past dengue virus infection.<sup>5</sup> With large flavivirus-exposed populations in Latin America, Asia, and Africa, a rapidly growing population of travellers from and to endemic areas,<sup>6</sup> and increased vaccination coverage against yellow fever virus, tick-borne encephalitis virus, and Japanese encephalitis virus in travellers and in certain endemic regions, it is evident that establishing serostatus is extremely challenging.

Many commercial immunoglobulin (Ig)G-containing point-of-care tests (POCTs) and dengue IgG ELISA assays are available. For the purpose of pre-vaccination screening, the assay with the highest sensitivity and specificity would be the desirable option. Low sensitivity would result in under-vaccinating individuals who are truly seropositive and who would benefit from the vaccine, whereas low specificity would lead to falsely vaccinating people who are truly seronegative, putting them at risk of severe dengue during the next natural infection with dengue virus.

The plaque reduction neutralisation test (PRNT) is still considered the gold standard for establishing serostatus, but requires specific laboratory and technical capacity, and is labour intensive, costly, and time consuming. Although dengue IgG ELISA correlates reasonably well with the results of a PRNT, the test has a lower sensitivity and specificity than PRNT, although the studies<sup>7, 8</sup> that showed this lower sensitivity and specificity were done before Zika virus became a widespread problem in the Americas. Dengue IgG ELISA requires about 2·5 h of laboratory time, excluding the time needed for sample transportation to the laboratory, batch analysis, and reporting to the clinician, which requires two visits for the vaccinees. Point-of-care testing that uses RDTs provides the vaccine recipient with a result within 15–30 min, and can be done in an outpatient or outreach setting, such as schools and care facilities, using a finger prick sample. Thus, a decision on vaccination eligibility can be made during the same visit, thereby ensuring a reasonable vaccine uptake. POCTs generally have lower sensitivity and specificity than dengue IgG ELISAs. However, this low sensitivity and specificity needs to be weighed up against the faster speed of testing, lower cost, and improved accessibility outside specialised laboratories compared with IgG ELISAs.

As available RDTs were mainly developed for the purpose of diagnosing acute dengue virus infection, further efforts would be justified to fine-tune such RDTs to increase sensitivity and specificity for diagnosing serostatus. To increase the sensitivity of dengue RDTs to detect previous dengue virus infection, several modifications could be contemplated, one of which would be recalibration by changing the concentration of the IgG capture antigen or detection reagent to lower the limit of anti-dengue IgG detection. To address cross-reactivity with other flaviviruses, particularly Zika, other modifications should be considered to improve specificity.

Diagnostic methods for flavivirus antibody detection use the entire virus particle, recombinant surface E-protein, or NS1 protein as antibody-capturing antigens. Epitopes with high aminoacid sequence homology among serotypes or flaviviruses can trigger cross-reactive responses, but type-specific antibodies directed towards unique E and NS1 epitopes are also raised.<sup>9, 11</sup> The art of making specific serological tests lies in the identification, selection, and presentation of those epitopes, either as recombinant protein fragments or peptides that only bind type-specific IgG, instead of using the entire virion or recombinant protein that contains both type-specific and cross-reactive antibody epitopes. Dengue virus antibody tests that use recombinant E-protein to absorb IgG will not be useful anymore for pre-testing purposes or for seroprevalence

studies once the dengue vaccine (that uses dengue virus E-protein as an immunogen) is widely spread. Capturing type-specific non-E-protein-directed antibodies could be an alternative approach, as applied in the recently developed Zika virus-specific NS1 blockade-of-binding ELISA.<sup>10</sup> Comparative epitope modelling and genome-wide peptide microarray analysis can help to identify virus-specific epitopes targeted by antibodies in individuals who are flavivirus seropositive. Whereas obtaining type-specific epitopes is challenging but technically feasible, the difficulty might be in retaining sufficiently high sensitivity when aiming to detect specific subsets of antibodies in people who have been exposed to flavivirus. The epitope specificity and the abundance of such subsets of antibodies might also differ between populations and individuals as a result of differences in genetic background, co-circulating pathogens, vaccination, history of natural infection, and timing of sampling. Combining multiple type-specific epitopes and antigen–antibody crosslinking could potentially help address this issue. Evaluation platforms and access to well characterised samples to accelerate test development and access to market are urgently needed.

*We declare no competing interests. KKA serves as a consultant on diagnostics to WHO and AWS as a consultant on arboviral diseases to WHO. KKA also serves as an expert for the Belgian Federal Agency for Medicines and Health Products. The views expressed in this manuscript do not necessarily represent the views of WHO or the Belgian Federal Agency for Medicines and Health Products. KKA is a member of ZikaPLAN and AWS is the coordinator of the ZikaPLAN consortium that received funding from the European Union's Horizon 2020 research and innovation programme, under the ZikaPLAN grant agreement 734584.4.*

References at title link above

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### **Countries step up to tackle antimicrobial resistance**

Joint News Release – FAO-OIE-WHO

18 July 2018

Countries are making significant steps in tackling antimicrobial resistance (AMR), but serious gaps remain and require urgent action, according to a report released today by the Food and Agriculture Organization of the United Nations (FAO), World Organisation for Animal Health (OIE) and the World Health Organization (WHO).

The report charts progress in 154 countries and reveals wide discrepancies. Some, including many European countries, have been working on AMR policies in human and animal sectors for more than 4 decades. Others have only recently started to take action to contain this growing threat. Progress in developing and implementing plans is greater in high-income than low-income countries but all countries have scope for improvement. No country reports sustained capacity at scale in all areas.

The report looks at surveillance, education, monitoring and regulating consumption and use of antimicrobials in human health, animal health and production, as well as plants and the environment – as recommended in the Global Action Plan published in 2015.

Promising findings include 105 countries with a surveillance system in place for reporting drug-resistant infections in human health and 68 countries with a system for tracking consumption of

antimicrobials. In addition, 123 countries reported that they have policies to regulate the sale of antimicrobials, including the requirement of a prescription for human use – a key measure to tackle overuse and misuse of antimicrobials.

But implementation of these policies varies and unregulated medicines are still available in places such as street markets, with no limits on how they are used. Medicines are very often sold over the counter and no prescription is requested. This puts human and animal health at risk, potentially contributing to the development of antimicrobial resistance...

Link to database and report: <http://www.who.int/antimicrobial-resistance/global-action-plan/database/en/>

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## **Emergencies**

### **POLIO**

*Public Health Emergency of International Concern (PHEIC)*

**Polio this week as of 17 July 2018** [GPEI]

:: The Minister of Health of Papua New Guinea officially launched the outbreak response campaign on 16 July in Morobe, Madang and Eastern Highlands provinces.

*Summary of new cases this week:*

#### **Afghanistan:**

:: There is advance notification of one wild poliovirus type 1 (WPV1) case in Chawkay district, Kunar province. The case has onset of paralysis on 22 June. Once confirmed (officially to be reflected in next week's data), this will bring the total number of WPV1 cases in 2018 (in Afghanistan) to ten.

#### **Nigeria:**

:: One new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) from Geidam LGA in Yobe State has been confirmed. The case has onset of paralysis on 16 June 2018. This is the second cVDPV2 case in Nigeria this year after the one reported from Jigawa state, Kaugama LGA on 15 April 2018. As part of the outbreak response, two campaigns using monovalent vaccine type 2 are planned, subject to review from the Advisory group. Additionally, three confirmed [Sokoto (2) and Yobe 1] and two advanced notice (Sokoto) cVDPV2 positive environmental samples are being reported from May.

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**WHO Grade 3 Emergencies** [to 21 Jul 2018]

#### **The Syrian Arab Republic**

:: Southern Syrian Arab Republic Health Cluster report pdf, 82kb 13 - 16 July 2018

#### **Nigeria**

:: Borno targets more than 1 million children with anti-malaria therapy Maiduguri, 13 July 2018

Iraq - No new announcements identified  
South Sudan - No new announcements identified  
Yemen - No new announcements identified

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**WHO Grade 2 Emergencies** [to 21 Jul 2018]  
[Several emergency pages were not available at inquiry]  
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.*

#### **Syrian Arab Republic**

:: Syrian Arab Republic: Dar'a, Quneitra, As-Sweida Situation Report No. 3 as of 19 July 2018

#### **Yemen**

:: Yemen: Al Hudaydah Update Situation Report No. 8 - Reporting Period: 4 - 13 July 2018

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### **UN OCHA – Corporate Emergencies**

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

#### **Ethiopia**

:: Ethiopia Humanitarian Bulletin Issue 57 | 2-15 July 2018

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 Jul 2018]

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

- No new announcements identified.

**MERS-CoV** [to 21 Jul 2018]

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

- No new announcements identified.

**Yellow Fever** [to 21 Jul 2018]

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

- No new announcements identified.

**Zika virus** [to 21 Jul 2018]

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

- No new announcements identified.

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**WHO & Regional Offices** [to 21 Jul 2018]

**The 22nd International AIDS Conference (AIDS 2018)**

23 – 27 July 2018 Amsterdam, the Netherlands

**WHO at AIDS 2018**

The 22nd International AIDS Conference (AIDS 2018) to be held in Amsterdam, the Netherlands, 22-27 July will be a milestone event for WHO for a range of reasons: WHO Director-General Dr Tedros will participate in opening ceremony. He will be joined by other senior WHO leaders in attending several key events and engage with HIV community and partners. WHO will host over 20 satellites, workshops or other events and will release several new publications, including on the use of dolutegravir in HIV treatment, HIV testing, pre-exposure prophylaxis, HIV drug resistance, toxicity monitoring, key populations and HIV strategic information. WHO sessions will highlight integrating HIV into universal health coverage, the importance of reaching key populations and addressing the rising HIV epidemics in Eastern Europe and Central Asia

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**Weekly Epidemiological Record, 20 July 2018, vol. 93, 29/30 (pp. 388–396)**

:: Global Advisory Committee on Vaccine Safety, 6–7 June 2018

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**WHO Regional Offices**

*Selected Press Releases, Announcements*

**WHO African Region AFRO**

*Selected Featured News*

- :: [WHO secured over 562 000 doses of oral cholera vaccine for pre-emptive campaigns in South Sudan in 2018](#) 21 July 2018
- :: [Baseline assessment of the national Viral Hepatitis response in Namibia](#) 20 July 2018
- :: [South Sudan held a high level Polio Transition Advocacy and Resource Mobilization meeting to prevent the collapse of key immunization health system functions](#) 20 July 2018
- :: [WHO strengthened the National Public Health Laboratory to safely manage infectious specimens in South Sudan](#) 19 July 2018
- :: [WHO strengthens sentinel surveillance for vaccine preventable diseases](#) 17 July 2018

### **WHO Region of the Americas PAHO**

- *No new announcements identified.*

### **WHO South-East Asia Region SEARO**

- :: [Strengthen efforts to immunize five million unvaccinated children: WHO SEAR/PR/1691](#)

New Delhi, 17 July 2018: Lauding efforts being made by countries to save more and more lives through immunization, including during public health emergencies, World Health Organization today called for further accelerating efforts to reach the nearly five million unvaccinated children in WHO South-East Asia Region.

"It is critical to identify who are missing vaccination and reach them with lifesaving vaccines. Equity and improving vaccination coverage is the key to preventing resurgence of diseases, especially the ones eradicated with painstaking efforts, and for further reducing diseases and deaths among children," said Dr Poonam Khetrapal Singh, Regional Director WHO South-East Asia, inaugurating a three-day meeting of Immunization Technical Advisory Group, here.

The WHO South-East Asia Region records about 37 million births every year, of them over 88% children are now getting three doses of diphtheria, pertussis and tetanus (DPT) vaccines annually, an indicator of basic vaccination coverage.

"Mapping hard-to-reach areas and population, addressing social and cultural and other barriers for them to access immunization services, and closely monitoring these activities for progress, should be among our immediate priorities," the Regional Director said...

### **WHO European Region EURO**

- :: [European Commission and WHO strengthen collaboration on public health](#) 19-07-2018
- :: [How to ensure access to essential medicines for all? New WHO report reviews medicines reimbursement policies in Europe](#) 18-07-2018

### **WHO Eastern Mediterranean Region EMRO**

- :: [WHO responds to growing health needs in Gaza](#)

Gaza, 18 July 2018 – In response to increasing violence in Gaza, WHO is scaling up its response by providing life-saving medicines and medical supplies to hospitals and frontline trauma stabilization points. Since the start of demonstrations on 30 March, 148 Palestinians have died and 16 496 have been injured. To date, 500 000 emergency and trauma patients have been treated with supplies from WHO's recent delivery of medicines, assistive devices and medical equipment.

### **WHO Western Pacific Region**

- :: [WHO calls on businesses to create smoke-free workplaces](#)

MANILA, 16 July 2018 – The World Health Organization is inviting businesses across the Western Pacific Region to join a new campaign, “Revolution Smoke-Free”, and establish smoke-free workplaces in which everyone is free from tobacco smoke in their workplaces and beyond.

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**CDC/ACIP** [to 21 Jul 2018]

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

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

*No new digest content identified.*

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**Africa CDC** [to 21 Jul 2018]

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

*No new digest content identified.*

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**China CDC**

<http://www.chinacdc.cn/en/ne/>

*Website not responding at inquiry...no connection since early June*

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**Announcements**

**AERAS** [to 21 Jul 2018]

<http://www.aeras.org/pressreleases>

*No new digest content identified.*

**BMGF - Gates Foundation** [to 21 Jul 2018]

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

*No new digest content identified.*

**Bill & Melinda Gates Medical Research Institute** [to 21 Jul 2018]

<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 21 Jul 2018]

<https://carb-x.org/>

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

*No new digest content identified.*

**CEPI – Coalition for Epidemic Preparedness Innovations** [to 21 Jul 2018]

<http://cepi.net/>

*No new digest content identified.*

**EDCTP** [to 21 Jul 2018]

<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*

*No new digest content identified.*

**Emory Vaccine Center** [to 21 Jul 2018]

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

*No new digest content identified.*

**European Medicines Agency** [to 21 Jul 2018]

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

16/07/2018

**[EMA's proactive publication of clinical data a success](#)**

*First report on unprecedented transparency policy shows high user satisfaction*

The European Medicines Agency (EMA) has published the first report on the implementation of its flagship [policy on the publication of clinical data](#) (Policy 0070). Under this policy citizens, including researchers and academics, can directly access thousands of pages from clinical reports submitted by pharmaceutical companies to EMA in the context of marketing authorisation applications for new medicines as of 1 January 2015. Clinical reports give information on the methods used and results of clinical trials conducted to demonstrate the safety and efficacy of medicines.

The [report](#) covers one year from the launch of EMA's [clinical data website](#) on 20 October 2016 and lists the 50 medicines for which clinical data were published, including orphan, paediatric, biosimilar and generic medicines, as well as the corresponding 54 regulatory dossiers. These data have attracted a total of 3,641 users, resulting in 22,164 document 'views' and 80,537 'downloads' for non-commercial research purposes...

**European Vaccine Initiative** [to 21 Jul 2018]

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

19 July 2018

**First pre-clinical results of the PRIMALVAC project published in npj Vaccines**

New article published on 17 July 2018 in npj Vaccines: "Down-selection of the VAR2CSA DBL1-2 expressed in E. coli as a lead..."

**FDA** [to 21 Jul 2018]

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

July 19, 2018 –

**Statement by FDA Commissioner Scott Gottlieb, M.D., on the formation of a new work group to develop focused drug importation policy options to address access challenges related to certain sole-source medicines with limited patient availability, but no blocking patents or exclusivities**

July 18, 2018 –

**Remarks from FDA Commissioner Scott Gottlieb, M.D., as prepared for delivery at the Brookings Institution on the release of the FDA's Biosimilars Action Plan**

July 18, 2018 –

**FDA approves first cancer drug through new oncology review pilot that enables greater development efficiency**

July 17, 2018 –

**Statement from FDA Commissioner Scott Gottlieb, M.D. on new efforts to empower consumers by advancing access to nonprescription drugs**

**Fondation Merieux** [to 21 Jul 2018]

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

*No new digest content identified.*

**Gavi** [to 21 Jul 2018]

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

*No new digest content identified.*

**GHIT Fund** [to 21 Jul 2018]

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

*GHIT was set up in 2012 with the aim of developing new tools to tackle infectious diseases that devastate the world's poorest people. Other funders include six Japanese pharmaceutical*  
*No new digest content identified.*

**Global Fund** [to 21 Jul 2018]

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

*News*

**Breaking Barriers. Building Bridges.**

20 July 2018

Peter Sands, Executive Director of the Global Fund, speaks in our video series from the 22nd International AIDS Conference.

*News*

### **New Agreements with HIV Drug Suppliers to Save \$324 Million**

16 July 2018

GENEVA – The Global Fund to Fight AIDS, Tuberculosis and Malaria has signed multi-year framework agreements with suppliers of HIV medication that will save US\$324 million by the end of 2021 and secure the supply of lifesaving drugs for over 4 million people.

The framework agreements, engaging 14 pharmaceutical companies, build an enlarged base of suppliers and deliver cost competitiveness and supply security, essential elements in expanding HIV treatment in the most reliable and cost-effective way. Projected contracts for antiretroviral drugs total US\$1.2 billion over the coming four years.

“These agreements are a strategically smart and highly effective way to secure greater volumes of medication that save lives,” said Peter Sands, Executive Director of the Global Fund. “In a complex, high-volume business, it’s a performance-based approach that reduces risk and gets essential HIV drugs at the most competitive prices, with consistency and reliability.”...

**Hilleman Laboratories** [to 21 Jul 2018]

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

*No new digest content identified.*

**Human Vaccines Project** [to 21 Jul 2018]

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

*No new digest content identified.*

**IAVI** [to 21 Jul 2018]

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

*No new digest content identified.*

**IFFIm**

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

*No new digest content identified.*

**IVAC** [to 21 Jul 2018]

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

*No new digest content identified.*

**IVI** [to 21 Jul 2018]

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

*No new digest content identified.*

**JEE Alliance** [to 21 Jul 2018]  
<https://www.jeealliance.org/>  
*No new digest content identified.*

**MSF/Médecins Sans Frontières** [to 21 Jul 2018]  
<http://www.msf.org/>  
*Selected Press Releases/Statements*  
*Tuberculosis*  
**[Last-minute pressure to drop language on protecting access to affordable medicines from TB Summit declaration negotiations](#)**  
20 Jul 2018

*Central African Republic*  
**[Protecting as many children as possible in an emergency context](#)**  
20 Jul 2018

*HIV/AIDS*  
**[MSF at AIDS 2018](#)**  
16 Jul 2018

**NIH** [to 21 Jul 2018]  
<http://www.nih.gov/news-events/news-releases>  
July 17, 2018  
**[Broadly acting antibodies found in plasma of Ebola survivors](#)**  
— NIAID-supported discovery could lead to therapy for deadly illness.

**PATH** [to 21 Jul 2018]  
<https://www.path.org/media-center/>  
July 17, 2018 by PATH  
**[PATH, reimagined](#)**  
Leading global public health organization celebrates 40th anniversary with dynamic new brand experience

**Sabin Vaccine Institute** [to 21 Jul 2018]  
<http://www.sabin.org/updates/pressreleases>  
*No new digest content identified.*

**UNAIDS** [to 21 Jul 2018]  
<http://www.unaids.org/en>  
*No new digest content identified.*

**UNICEF** [to 21 Jul 2018]

<https://www.unicef.org/media/press-releases>

*Selected Press Releases/Reports/Statements*

Statement

**Access to children in need in Syria continues to be severely restricted**

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

*Press release*

16/07/2018

**Statement by UNICEF Executive Director Henrietta Fore at High Level Political Forum side event on ending newborn deaths**

*News note*

16/07/2018

**Record number of infants vaccinated in 2017**

As over 19 million children miss out on vaccinations, UNICEF and WHO call for concerted efforts to reach all children

*[See Milestones/Perspectives above for more detail]*

**Vaccine Confidence Project** [to 21 Jul 2018]

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

*No new digest content identified.*

**Vaccine Education Center – Children’s Hospital of Philadelphia** [to 21 Jul 2018]

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

Published on Jul 16, 2018

**Dr. Offit Addresses Reintroduction of Intranasal Flu Vaccine and Recommendations for Use**

After a three-year hiatus, the intranasal flu vaccine is once again recommended for use during the 2018-2019 influenza season. In these videos, Dr. Offit explains the changes to the intranasal flu vaccine and the recommendations regarding its use by the CDC and AAP.

**Wellcome Trust** [to 21 Jul 2018]

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

Published: 18 July 2018

**How lived experiences of dementias have informed science and the arts**

*Since October 2016, a team of scientists and artists and people experiencing dementias have been exploring, challenging and shaping perceptions of dementias. As their two-year residency in The Hub at Wellcome Collection draws to a close, here are some highlights*

**The Wistar Institute** [to 21 Jul 2018]

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

*No new digest content identified.*

**World Organisation for Animal Health (OIE)** [to 21 Jul 2018]

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

18/07/18

**Countries step up to tackle antimicrobial resistance**

Paris/Geneva/Rome, 18 July 2018 - Countries are making significant steps in tackling antimicrobial resistance (AMR), but serious gaps remain and require urgent action, according to a report released today by the Food and Agriculture Organization of the United Nations (FAO), World Organisation for Animal Health (OIE) and the World Health Organization (WHO).

The report charts progress in 154 countries and reveals wide discrepancies. Some, including many European countries, have been working on AMR policies in human and animal sectors for more than 4 decades. Others have only recently started to take action to contain this growing threat. Progress in developing and implementing plans is greater in high-income than low-income countries but all countries have scope for improvement. No country reports sustained capacity at scale in all areas.

The report looks at surveillance, education, monitoring and regulating consumption and use of antimicrobials in human health, animal health and production, as well as plants and the environment – as recommended in the Global Action Plan published in 2016...

:::::

**BIO** [to 21 Jul 2018]

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

*No new digest content identified.*

**DCVMN – Developing Country Vaccine Manufacturers Network** [to 21 Jul 2018]

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

*No new digest content identified.*

**IFPMA** [to 21 Jul 2018]

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

*No new digest content identified.*

**PhRMA** [to 21 Jul 2018]

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

*No new digest content identified.*

**Industry Watch** [to 21 Jul 2018]

**Moderna Opens New Manufacturing Site in Norwood, MA**

*200,000 Square Foot State-of-the-Art Plant Built to Support Development of mRNA Medicines*

July 17, 2018

NORWOOD, Mass.--(BUSINESS WIRE)--Moderna Therapeutics, a clinical-stage biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines to create a new generation of transformative medicines for patients, today announced the opening of its state-of-the-art manufacturing facility in Norwood, Massachusetts.

"Thanks to companies like Moderna, Massachusetts continues to be a global leader in the industry and we welcome their growth and investment in Norwood to support the manufacturing market here in the Commonwealth."

The digitally-enabled and environmentally sustainable 200,000 square foot clinical development manufacturing plant was built to advance Moderna's pipeline of mRNA-based medicines. Designed to Current Good Manufacturing Practices (cGMP) specifications, the site gives the company the capacity to develop materials for preclinical toxicology studies as well as Phase 1 and 2 clinical development programs, and to manufacture, test and run fill/finish operations for its portfolio of mRNA development candidates.

Today, Moderna has 21 programs in its mRNA pipeline, including potential treatments for different forms of cancer, rare diseases, infectious diseases and heart failure...

\* \* \* \*

### **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](mailto:david.r.curry@centerforvaccineethicsandpolicy.org)

*No new digest content identified.*

\* \* \* \*

### **Journal Watch**

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

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

### **American Journal of Infection Control**

July 2018 Volume 46, Issue 7, p733-850, e43-e64

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

[Reviewed earlier]

### **American Journal of Preventive Medicine**

July 2018 Volume 55, Issue 1, p1-132, e1-e18

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

[Reviewed earlier]

**American Journal of Public Health**

July 2018 108(7)

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

[Reviewed earlier]

**American Journal of Tropical Medicine and Hygiene**

Volume 98, Issue 6, 2018

<http://www.ajtmh.org/content/journals/14761645/98/6>

[Reviewed earlier]

**Annals of Internal Medicine**

17 July 2018 Vol: 169, Issue 2

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

[New issue; No digest content identified]

**BMC Cost Effectiveness and Resource Allocation**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

**BMJ Global Health**

July 2018 - Volume 3 - 4

<https://gh.bmj.com/content/3/4>

[Reviewed earlier]

**BMC Health Services Research**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

**BMC Infectious Diseases**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

**BMC Medical Ethics**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

## **BMC Medicine**

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

(Accessed 21 Jul 2018)

*Research article*

### **[Efficacy, effectiveness and safety of vaccination against human papillomavirus in males: a systematic review](#)**

*Human papillomavirus (HPV) vaccination is safe and effective in preventing cervical cancer in females. As HPV infections can also induce cancers of the anus, penis and oral cavity, male vaccination is also adv...*

Authors: Thomas Harder, Ole Wichmann, Stefanie J. Klug, Marianne A. B. van der Sande and Miriam Wiese-Posselt

Citation: BMC Medicine 2018 16:110

Published on: 18 July 2018

*Research article*

### **[The impact of demographic changes, exogenous boosting and new vaccination policies on varicella and herpes zoster in Italy: a modelling and cost-effectiveness study](#)**

*The present study aims to evaluate the cost-effectiveness of the newly introduced varicella and herpes zoster (HZ) vaccination programmes in Italy. The appropriateness of the introduction of the varicella vacc...*

Authors: Alessia Melegaro, Valentina Marziano, Emanuele Del Fava, Piero Poletti, Marcello Tirani, Caterina Rizzo and Stefano Merler

Citation: BMC Medicine 2018 16:117

Published on: 17 July 2018

*Research article*

### **[Modelling population-level impact to inform target product profiles for childhood malaria vaccines](#)**

*The RTS,S/AS01 vaccine for Plasmodium falciparum malaria demonstrated moderate efficacy in 5–17-month-old children in phase 3 trials, and from 2018, the vaccine will be evaluated through a large-scale pilot imple...*

Authors: Alexandra B. Hogan, Peter Winskill, Robert Verity, Jamie T. Griffin and Azra C. Ghani

Citation: BMC Medicine 2018 16:109

Published on: 13 July 2018

## **BMC Pregnancy and Childbirth**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

## **BMC Public Health**

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

(Accessed 21 Jul 2018)

*Research article*

**Gender aspects on HIV prevention efforts and participation in HIV vaccine trials among Police officers in Dar es Salaam, Tanzania**

*For more than three decades, Human Immunodeficiency Virus (HIV) infection and Acquired Immune Deficiency Syndrome (AIDS) continue to dominate the health agenda. In sub-Saharan African countries, women are at m...*

Authors: Edith A. M. Tarimo, Deodatus C. V. Kakoko, Thecla W. Kohi, Muhammad Bakari, Eric Sandstrom, David Siyame, Fred Mhalu and Asli Kulane

Citation: BMC Public Health 2018 18:905

Published on: 21 July 2018

*Study protocol*

**Safety monitoring of ROTAVAC vaccine and etiological investigation of intussusception in India: study protocol**

*ROTAVAC, an indigenous rotavirus vaccine, was introduced in the universal immunization program of India in four states in 2016 and expanded to five more states in 2017. The clinical trial on efficacy of ROTAVA...*

Authors: Samarasimha Reddy, Nayana P. Nair, Sidhartha Giri, Venkata Raghava Mohan, Jacqueline E. Tate, Umesh D. Parashar, Mohan D. Gupte, Rashmi Arora and Gagandeep Kang

Citation: BMC Public Health 2018 18:898

Published on: 20 July 2018

*Research article*

**The influence of education on the access to childhood immunization: the case of Spain**

*In order to enhance childhood vaccination uptake and the health consequences for the whole society, there is a need to study predictors that might help in understanding parents' behaviour in relation to childh...*

Authors: T. Mora and M. Trapero-Bertran

Citation: BMC Public Health 2018 18:893

Published on: 18 July 2018

*Research article*

**Increasing influenza and pneumococcal vaccine uptake in the elderly: study protocol for the multi-methods prospective intervention study Vaccination60+**

*Influenza and pneumococcal vaccination can prevent disease and potentially life-threatening complications like sepsis. Elderly people have an increased risk of severe disease and therefore constitute a major t...*

Authors: Cornelia Betsch, Constanze Rossmann, Mathias W. Pletz, Horst C. Vollmar, Antje Freytag, Ole Wichmann, Regina Hanke, Wolfgang Hanke, Dorothee Heinemeier, Philipp Schmid, Sarah Eitze, Winja Weber, Anne Reinhardt, Nora K. Küpke, Christina Forstner, Carolin Fleischmann-Struzek...

Citation: BMC Public Health 2018 18:885

Published on: 16 July 2018

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

(Accessed 21 Jul 2018)

[No new digest content identified]

## **BMJ Open**

July 2018 - Volume 8 - 7

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

[Reviewed earlier]

## **Bulletin of the World Health Organization**

Volume 96, Number 7, July 2018, 441-512

<http://www.who.int/bulletin/volumes/96/7/en/>

[Reviewed earlier]

## **Child Care, Health and Development**

Volume 44, Issue 4 Pages: 507-658 July 2018

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

[Reviewed earlier]

## **Clinical and Experimental Vaccine Research**

Volume 7(1); January 2018

<http://ecevr.org/>

[Reviewed earlier]

## **Clinical Therapeutics**

June 2018 Volume 40, Issue 6, p813-1048

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

[Reviewed earlier]

## **Clinical Trials**

Volume 15 Issue 4, August 2018

<http://journals.sagepub.com/toc/ctja/15/3>

*Conference Proceedings*

[\*\*Proceedings of the University of Pennsylvania 10th annual conference on statistical issues in clinical trials: Current issues regarding Data and Safety Monitoring Committees in clinical trials\*\*](#)

[\*\*Committees in clinical trials\*\*](#)

[\*\*Susan S Ellenberg, Jonas H Ellenberg\*\*](#)

First Published June 22, 2018; pp. 319–320

## [\*\*Data Monitoring Committees: Current issues\*\*](#)

[\*\*Thomas R Fleming, Susan S Ellenberg, David L DeMets\*\*](#)

First Published April 9, 2018; pp. 321–328

**Conflict and Health**

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

[Accessed 21 Jul 2018]

[No new digest content identified]

**Contemporary Clinical Trials**

Volume 70 Pages 1-138 (July 2018)

<https://www.sciencedirect.com/journal/contemporary-clinical-trials/vol/70/suppl/C>

[Reviewed earlier]

**Current Opinion in Infectious Diseases**

August 2018 - Volume 31 - Issue 4

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

[Reviewed earlier]

**Developing World Bioethics**

Volume 18, Issue 2 Pages: 65-203 June 2018

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

[Reviewed earlier]

**Development in Practice**

Volume 28, Issue 5, 2018

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

[Reviewed earlier]

**Disaster Medicine and Public Health Preparedness**

Volume 12 - Issue 2 - April 2018

<https://www.cambridge.org/core/journals/disaster-medicine-and-public-health-preparedness/latest-issue>

[Reviewed earlier]

**Disasters**

Volume 42, Issue 3 Pages: 405-612 July 2018

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

[Reviewed earlier]

**EMBO Reports**

01 June 2018; volume 19, issue 6

<http://emboj.embopress.org/content/19/6?current-issue=y>

[Reviewed earlier]

**Emerging Infectious Diseases**

Volume 24, Number 7—July 2018

<http://wwwnc.cdc.gov/eid/>

[Reviewed earlier]

**Epidemics**

Volume 23 Pages 1-120 (June 2018)

<https://www.sciencedirect.com/journal/epidemics/vol/23/suppl/C>

[Reviewed earlier]

**Epidemiology and Infection**

Volume 146 - Issue 8 - June 2018

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

[Reviewed earlier]

**The European Journal of Public Health**

Volume 28, Issue 3, 1 June 2018

<https://academic.oup.com/eurpub/issue/28/3>

[Reviewed earlier]

**Global Health Action**

Volume 11, 2018 – Issue 1

<https://www.tandfonline.com/toc/zgha20/11/1?nav=tocList>

[Reviewed earlier]

**Global Health: Science and Practice (GHSP)**

June 2018 | Volume 6 | Number 2

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

[Reviewed earlier]

**Global Public Health**

Volume 13, 2017 Issue 9

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

[No new digest content identified]

**Globalization and Health**

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

[Accessed 21 Jul 2018]

[No new digest content identified]

**Health Affairs**

Vol. 37 , No. 7 July 2018

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

***Chronic Care, Prescription Drugs & More***

[New issue; No digest content identified]

**Health and Human Rights**

Volume 20, Issue 1, June 2018

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

[Reviewed earlier]

**Health Economics, Policy and Law**

Volume 13 - Special Issue 3-4 - July 2018

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

***SPECIAL ISSUE: Canadian Medicare: Historical Reflections, Future Directions***

[Reviewed earlier]

**Health Equity**

Volume 2 Issue 1 Jun 2018

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

[Reviewed earlier]

**Health Policy and Planning**

Volume 33, Issue 6, 1 July 2018

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

[Reviewed earlier]

**Health Research Policy and Systems**

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

[Accessed 21 Jul 2018]

[No new digest content identified]

**Humanitarian Exchange Magazine**

Number 72 July 2018

<https://odihpn.org/magazine/mental-health-and-psychosocial-support-in-humanitarian-crisis/>

**Mental health and psychosocial support in humanitarian crises**

by Humanitarian Practice Network July 2018

**Human Vaccines & Immunotherapeutics** (formerly Human Vaccines)  
Volume 14, Issue 6 2018  
<http://www.tandfonline.com/toc/khvi20/current>  
[Reviewed earlier]

**Infectious Agents and Cancer**  
<http://www.infectagentscancer.com/content>  
[Accessed 21 Jul 2018]  
[No new digest content identified]

**Infectious Diseases of Poverty**  
<http://www.idpjurnal.com/content>  
[Accessed 21 Jul 2018]  
[No new digest content identified]

**International Health**  
Volume 10, Issue 4, 1 July 2018  
<http://inthealth.oxfordjournals.org/content/current>  
[Reviewed earlier]

**International Journal of Community Medicine and Public Health**  
Vol 5, No 7 (2018) July 2018  
<http://www.ijcmph.com/index.php/ijcmph/issue/view/40>  
[Reviewed earlier]

**International Journal of Epidemiology**  
Volume 47, Issue 3, 1 June 2018  
<https://academic.oup.com/ije/issue/47/2>  
[Reviewed earlier]

**International Journal of Human Rights in Healthcare**  
Volume 11 Issue 3 2018  
<https://www.emeraldinsight.com/toc/ijhrh/11/3>  
[Reviewed earlier]

**International Journal of Infectious Diseases**  
July 2018 Volume 72, p1-72  
[https://www.ijidonline.com/issue/S1201-9712\(18\)X0006-X](https://www.ijidonline.com/issue/S1201-9712(18)X0006-X)  
[Reviewed earlier]

**JAMA**

July 17, 2018, Vol 320, No. 3, Pages 215-316

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

*Viewpoint*

**How HIPAA Harms Care, and How to Stop It**

Donald M. Berwick, MD, MPP; Martha E. Gaines, JD, LLM

JAMA. 2018;320(3):229-230. doi:10.1001/jama.2018.8829

In this Viewpoint, Berwick and Gaines review common misconceptions about Health Insurance Portability and Accountability Act (HIPAA) requirements regarding personal health information and propose steps the Department of Health and Human Services (DHHS) can take to better balance privacy protections with the need to ensure health information is available for clinical care in reasonable time at reasonable expense.

**HIPAA and Protecting Health Information in the 21st Century**

I. Glenn Cohen, JD; Michelle M. Mello, JD, PhD

JAMA. 2018;320(3):231-232. doi:10.1001/jama.2018.5630

This Viewpoint posits that HIPAA no longer fully protects health information in today's big data era in which health data are collected and exchanged in nonclinical settings, such as social media, apps, and search engines, and proposes principles around which reform of health information privacy protections should be organized.

**Health Data and Privacy in the Digital Era**

Lawrence O. Gostin, JD; Sam F. Halabi, JD, MPhil; Kumanan Wilson, MD, MSc

JAMA. 2018;320(3):233-234. doi:10.1001/jama.2018.8374

This Viewpoint discusses personal health information on social media and other sites and ways in which this information can and should be protected.

*Research Letter*

**Clinical Trial Evidence Supporting FDA Approval of Drugs Granted Breakthrough Therapy Designation**

Jeremy Puthumana, MS; Joshua D. Wallach, PhD, MS; Joseph S. Ross, MD, MHS

JAMA. 2018;320(3):301-303. doi:10.1001/jama.2018.7619

This study used the Drugs@FDA database to review FDA-approved "breakthrough" therapies from 2012 to 2017 (characterizing the pivotal clinical trials that serve as the basis of FDA approval), and premarket development and review times to assess the strength of evidence supporting breakthrough approvals.

**JAMA Pediatrics**

July 2018, Vol 172, No. 7, Pages 605-708

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

[Reviewed earlier]

**JBI Database of Systematic Review and Implementation Reports**

July 2018 - Volume 16 - Issue 7

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

[New issue; No digest content identified]

**Journal of Adolescent Health**

June 2018 Volume 62, Issue 6, p633-754

[https://www.jahonline.org/issue/S1054-139X\(17\)X0021-9](https://www.jahonline.org/issue/S1054-139X(17)X0021-9)

[Reviewed earlier]

**Journal of Community Health**

Volume 43, Issue 4, August 2018

<https://link.springer.com/journal/10900/43/4/page/1>

[Reviewed earlier]

**Journal of Empirical Research on Human Research Ethics**

Volume 13, Issue 3, July 2018

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

[Reviewed earlier]

**Journal of Epidemiology & Community Health**

July 2018 - Volume 72 - 7

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

[New issue; No digest content identified]

**Journal of Evidence-Based Medicine**

Volume 11, Issue 2 Pages: 69-129 May 2018

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

[Reviewed earlier]

**Journal of Global Ethics**

Volume 13, Issue 3, 2017

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

[Reviewed earlier]

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

Volume 29, Number 2, May 2018

<https://muse.jhu.edu/issue/38537>

[Reviewed earlier]

**Journal of Humanitarian Logistics and Supply Chain Management**

Volume 8 Issue 1 2018

<https://www.emeraldinsight.com/toc/jhlscm/8/1>

[Reviewed earlier]

**Journal of Immigrant and Minority Health**

Volume 20, Issue 4, August 2018

<https://link.springer.com/journal/10903/20/4/page/1>

[Reviewed earlier]

**Journal of Immigrant & Refugee Studies**

Volume 16, 2018\_ Issue 4

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

[Reviewed earlier]

**Journal of Infectious Diseases**

Volume 217, Issue 11, 21 Jul 2018

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

[Reviewed earlier]

**Journal of Medical Ethics**

July 2018 - Volume 44 - 7

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

[Reviewed earlier]

**Journal of Medical Internet Research**

Vol 20, No 6 (2018): June

<http://www.jmir.org/2018/6>

[Reviewed earlier]

**Journal of Medical Microbiology**

Volume 67, Issue 6, June 2018

<http://jmm.microbiologyresearch.org/content/journal/jmm/67/6>

[Reviewed earlier]

**Journal of Patient-Centered Research and Reviews**

Volume 5, Issue 2 (2018)

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

[Reviewed earlier]

**Journal of the Pediatric Infectious Diseases Society (JPIDS)**

Volume 7, Issue 2 June 2018

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

[Reviewed earlier]

**Journal of Pediatrics**

July 2018 Volume 198, p1-330

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

[New issue; No digest content identified]

**Journal of Pharmaceutical Policy and Practice**

<https://joppp.biomedcentral.com/>

[Accessed 21 Jul 2018]

[No new digest content identified]

**Journal of Public Health Management & Practice**

July/August 2018 - Volume 24 - Issue 4

<https://journals.lww.com/jphmp/pages/currenttoc.aspx>

[Reviewed earlier]

**Journal of Public Health Policy**

Volume 39, Issue 2, May 2018

<https://link.springer.com/journal/41271/39/2/page/1>

[Reviewed earlier]

**Journal of the Royal Society – Interface**

July 2018; volume 15, issue 144

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

[New issue; No digest content identified]

**Journal of Travel Medicine**

Volume 25, Issue suppl\_1, 1 May 2018

[https://academic.oup.com/jtm/issue/25/suppl\\_1](https://academic.oup.com/jtm/issue/25/suppl_1)

***Asian travel: from the rare to the difficult***

[Reviewed earlier]

**Journal of Virology**

July 2018, volume 92, issue 14

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

[Reviewed earlier]

**The Lancet**

Jul 21, 2018 Volume 392 Number 10143 p187-252 e4-e5

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

*Comment*

**Ebola virus disease: 11,323 deaths later, how far have we come?**

Joseph A Lewnard

...The data presented by the Ebola Outbreak Epidemiology Team indicate key areas of progress since the 2014 outbreak in west Africa. By contrast with a 5·0 day average time from illness onset to hospitalisation in that outbreak, and 4·7 days in an outbreak in the Democratic Republic of the Congo in the same year, the median time from illness onset to first hospitalisation was 1 day (range 0–10).<sup>2, 3, 4</sup> Rapid case ascertainment and isolation narrows a crucial period of transmission risk within households and communities, and was facilitated by installation of Ebola virus disease treatment centres in Bikoro, Iboko, and Mbandaka by Médecins Sans Frontières mere days after the outbreak declaration.<sup>1</sup> Modelling studies indicate that such timely mobilisation could have averted thousands of deaths from Ebola virus disease in west Africa,<sup>5, 6</sup> many outside the doors of treatment centres that were already operating at capacity.

An efficacious, field-tested vaccine (rVSV-ZEBOV) is among the most important developments since 2014.<sup>7</sup> Within 2 weeks of the outbreak declaration, more than 7500 doses were delivered to the Democratic Republic of the Congo for administration to primary and secondary contacts of cases. The authors report coverage among 496 of 504 vaccine-eligible contacts as of May 30, 2018;<sup>2</sup> by June 16, 2920 contacts had been reached.<sup>1</sup> On-the-ground vaccination teams—some operating in communities without electricity or telecommunications, and maintaining –70°C cold chains on the backs of motorcycles<sup>2, 8</sup>—have performed a heroic feat in this first use of the vaccine outside Guinea. Ongoing studies of clinical outcomes, immunological parameters, and adverse events among recipients will provide important data about vaccine safety and effectiveness...

*Comment*

**A new step towards an HIV/AIDS vaccine**

George N Pavlakis, Barbara K Felber

A preventive vaccine is an essential part of the strategy to eradicate the HIV pandemic.<sup>1</sup> Although the search for an AIDS vaccine has led to many scientific advances, a vaccine remains out of reach. Major impediments include the protean ability of HIV to mutate rapidly and the lack of definitive correlates of vaccine protection. Over the years, a multitude of vaccine methodologies have been tested, but few have progressed to efficacy trials<sup>2–7</sup> and only one provided evidence for protection.<sup>7</sup> Current HIV vaccine efficacy trials aim to improve on the success of the RV144 trial<sup>7</sup> in Thailand, which showed a modest 31·2% protection.

*Articles*

**Outbreak of Ebola virus disease in the Democratic Republic of the Congo, April–May, 2018: an epidemiological study**

The Ebola Outbreak Epidemiology Team

*Summary*

*Background*

On May 8, 2018, the Government of the Democratic Republic of the Congo reported an outbreak of Ebola virus disease in Équateur Province in the northwest of the country. The remoteness of most affected communities and the involvement of an urban centre connected to the capital city and neighbouring countries makes this outbreak the most complex and high risk ever experienced by the Democratic Republic of the Congo. We provide early epidemiological information arising from the ongoing investigation of this outbreak.

## Methods

We classified cases as suspected, probable, or confirmed using national case definitions of the Democratic Republic of the Congo Ministère de la Santé Publique. We investigated all cases to obtain demographic characteristics, determine possible exposures, describe signs and symptoms, and identify contacts to be followed up for 21 days. We also estimated the reproduction number and projected number of cases for the 4-week period from May 25, to June 21, 2018.

## Findings

As of May 30, 2018, 50 cases (37 confirmed, 13 probable) of Zaire ebolavirus were reported in the Democratic Republic of the Congo. 21 (42%) were reported in Bikoro, 25 (50%) in Iboko, and four (8%) in Wangata health zones. Wangata is part of Mbandaka, the urban capital of Équateur Province, which is connected to major national and international transport routes. By May 30, 2018, 25 deaths from Ebola virus disease had been reported, with a case fatality ratio of 56% (95% CI 39–72) after adjustment for censoring. This case fatality ratio is consistent with estimates for the 2014–16 west African Ebola virus disease epidemic ( $p=0.427$ ). The median age of people with confirmed or probable infection was 40 years (range 8–80) and 30 (60%) were male. The most commonly reported signs and symptoms in people with confirmed or probable Ebola virus disease were fever (40 [95%] of 42 cases), intense general fatigue (37 [90%] of 41 cases), and loss of appetite (37 [90%] of 41 cases). Gastrointestinal symptoms were frequently reported, and 14 (33%) of 43 people reported haemorrhagic signs. Time from illness onset and hospitalisation to sample testing decreased over time. By May 30, 2018, 1458 contacts had been identified, of which 746 (51%) remained under active follow-up. The estimated reproduction number was 1.03 (95% credible interval 0.83–1.37) and the cumulative case incidence for the outbreak by June 21, 2018, is projected to be 78 confirmed cases (37–281), assuming heterogeneous transmissibility.

## Interpretation

The ongoing Ebola virus outbreak in the Democratic Republic of the Congo has similar epidemiological features to previous Ebola virus disease outbreaks. Early detection, rapid patient isolation, contact tracing, and the ongoing vaccination programme should sufficiently control the outbreak. The forecast of the number of cases does not exceed the current capacity to respond if the epidemiological situation does not change. The information presented, although preliminary, has been essential in guiding the ongoing investigation and response to this outbreak.

## Funding

None.

## [Evaluation of a mosaic HIV-1 vaccine in a multicentre, randomised, double-blind, placebo-controlled, phase 1/2a clinical trial \(APPROACH\) and in rhesus monkeys \(NHP 13-19\)](#)

Dan H Barouch, Frank L Tomaka, Frank Wegmann, Daniel J Stieh, Galit Alter, Merlin L Robb, Nelson L Michael, Lauren Peter, Joseph P Nkolola, Erica N Borducchi, Abishek Chandrashekhar, David Jetton, Kathryn E Stephenson, Wenjun Li, Bette Korber, Georgia D Tomaras, David C Montefiori, Glenda Gray, Nicole Frahm, M Juliana McElrath, Lindsey Baden, Jennifer Johnson, Julia Hutter, Edith Swann, Etienne Karita, Hannah Kibuuka, Juliet Mpendo, Nigel Garrett, Kathy Mngadi, Kundai Chinyenze, Frances Priddy, Erica Lazarus, Fatima Laher, Sorachai Nitayapan, Punnee Pitisuttithum, Stephan Bart, Thomas Campbell, Robert Feldman, Gregg Lucksinger, Caroline Borremans, Katleen Callewaert, Raphaele Roten, Jerald Sadoff, Lorenz Scheppeler, Mo Weijtens, Karin Feddes-de Boer, Daniëlle van Manen, Jessica Vreugdenhil, Roland Zahn, Ludo

Lavreys, Steven Nijs, Jeroen Tolboom, Jenny Hendriks, Zelda Euler, Maria G Pau, Hanneke Schuitemaker

### *Summary*

#### *Background*

More than 1·8 million new cases of HIV-1 infection were diagnosed worldwide in 2016. No licensed prophylactic HIV-1 vaccine exists. A major limitation to date has been the lack of direct comparability between clinical trials and preclinical studies. We aimed to evaluate mosaic adenovirus serotype 26 (Ad26)-based HIV-1 vaccine candidates in parallel studies in humans and rhesus monkeys to define the optimal vaccine regimen to advance into clinical efficacy trials.

#### *Methods*

We conducted a multicentre, randomised, double-blind, placebo-controlled phase 1/2a trial (APPROACH). Participants were recruited from 12 clinics in east Africa, South Africa, Thailand, and the USA. We included healthy, HIV-1-uninfected participants (aged 18–50 years) who were considered at low risk for HIV-1 infection. We randomly assigned participants to one of eight study groups, stratified by region. Participants and investigators were blinded to the treatment allocation throughout the study. We primed participants at weeks 0 and 12 with Ad26.Mos.HIV ( $5 \times 10^{10}$  viral particles per 0·5 mL) expressing mosaic HIV-1 envelope (Env)/Gag/Pol antigens and gave boosters at weeks 24 and 48 with Ad26.Mos.HIV or modified vaccinia Ankara (MVA; 108 plaque-forming units per 0·5 mL) vectors with or without high-dose (250 µg) or low-dose (50 µg) aluminium adjuvanted clade C Env gp140 protein. Those in the control group received 0·9% saline. All study interventions were administered intramuscularly. Primary endpoints were safety and tolerability of the vaccine regimens and Env-specific binding antibody responses at week 28. Safety and immunogenicity were also assessed at week 52. All participants who received at least one vaccine dose or placebo were included in the safety analysis; immunogenicity was analysed using the per-protocol population. We also did a parallel study in rhesus monkeys (NHP 13-19) to assess the immunogenicity and protective efficacy of these vaccine regimens against a series of six repetitive, heterologous, intrarectal challenges with a rhesus peripheral blood mononuclear cell-derived challenge stock of simian-human immunodeficiency virus (SHIV-SF162P3). The APPROACH trial is registered with [ClinicalTrials.gov](https://clinicaltrials.gov), number [NCT02315703](https://clinicaltrials.gov/ct2/show/NCT02315703).

#### *Findings*

Between Feb 24, 2015, and Oct 16, 2015, we randomly assigned 393 participants to receive at least one dose of study vaccine or placebo in the APPROACH trial. All vaccine regimens demonstrated favourable safety and tolerability. The most commonly reported solicited local adverse event was mild-to-moderate pain at the injection site (varying from 69% to 88% between the different active groups vs 49% in the placebo group). Five (1%) of 393 participants reported at least one grade 3 adverse event considered related to the vaccines: abdominal pain and diarrhoea (in the same participant), increased aspartate aminotransferase, postural dizziness, back pain, and malaise. The mosaic Ad26/Ad26 plus high-dose gp140 boost vaccine was the most immunogenic in humans; it elicited Env-specific binding antibody responses (100%) and antibody-dependent cellular phagocytosis responses (80%) at week 52, and T-cell responses at week 50 (83%). We also randomly assigned 72 rhesus monkeys to receive one of five different vaccine regimens or placebo in the NHP 13-19 study. Ad26/Ad26 plus gp140 boost induced similar magnitude, durability, and phenotype of immune responses in rhesus monkeys as compared with humans and afforded 67% protection against acquisition of SHIV-SF162P3 infection (two-sided Fisher's exact test  $p=0\cdot007$ ). Env-specific ELISA and

enzyme-linked immunospot assay responses were the principal immune correlates of protection against SHIV challenge in monkeys.

#### Interpretation

The mosaic Ad26/Ad26 plus gp140 HIV-1 vaccine induced comparable and robust immune responses in humans and rhesus monkeys, and it provided significant protection against repetitive heterologous SHIV challenges in rhesus monkeys. This vaccine concept is currently being evaluated in a phase 2b clinical efficacy study in sub-Saharan Africa ([NCT03060629](#)).

#### Funding

Janssen Vaccines & Prevention BV, National Institutes of Health, Ragon Institute of MGH, MIT and Harvard, Henry M Jackson Foundation for the Advancement of Military Medicine, US Department of Defense, and International AIDS Vaccine Initiative.

#### *Commission*

#### **Time to deliver: report of the WHO Independent High-Level Commission on NCDs**

Sania Nishtar, Sauli Niinistö, Maithripala Sirisena, Tabaré Vázquez, Veronika Skvortsova, Adolfo Rubinstein, Festus Gontebanye Mogae, Pirkko Mattila, Seyyed Hassan Ghazizadeh Hashemi, Sicily Kariuki, José Narro Robles, Isaac F Adewole, Adboulaye Diouf Sarr, Kim Yong Gan, Saia Ma'u Piukala, Abdul Rahman Bin Mohammed Al Owais, Eric Hargan, George Alleyne, Ala Alwan, Arnaud Bernaert, Michael Bloomberg, Katie Dain, Tom Frieden, Vikram Harshad Patel, Annette Kennedy, Ilona Kickbusch, Commissioners of the WHO Independent High-Level Commission on NCDs

#### **Lancet Global Health**

Jul 2018 Volume 6 Number 7 e703-e810

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

[Reviewed earlier]

#### **Lancet Infectious Diseases**

Jul 2018 Volume 18 Number 7 p697-812 e183-e227

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

[Reviewed earlier]

#### **Lancet Respiratory Medicine**

Jul 2018 Volume 6 Number 7 p479-566 e28-e35

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

[Reviewed earlier]

#### **Maternal and Child Health Journal**

Volume 22, Issue 7, July 2018

<https://link.springer.com/journal/10995/22/6/page/1>

[Reviewed earlier]

#### **Medical Decision Making (MDM)**

Volume 38, Issue 5, July 2018  
<http://mdm.sagepub.com/content/current>  
[Reviewed earlier]

**The Milbank Quarterly**  
*A Multidisciplinary Journal of Population Health and Health Policy*  
Volume 96, Issue 2 Pages: 215-408 June 2018  
<https://onlinelibrary.wiley.com/toc/14680009/current>  
[Reviewed earlier]

**Nature**  
Volume 559 Issue 7714, 19 July 2018  
[http://www.nature.com/nature/current\\_issue.html](http://www.nature.com/nature/current_issue.html)  
[New issue; No digest content identified]

**Nature Medicine**  
Volume 24 Issue 7, July 2018  
<https://www.nature.com/nm/volumes/24/issues/7>  
[Reviewed earlier]

**Nature Reviews Immunology**  
Volume 18 Issue 7, July 2018  
<https://www.nature.com/nri/volumes/18/issues/7>  
[Reviewed earlier]

**New England Journal of Medicine**  
July 19, 2018 Vol. 379 No. 3  
<http://www.nejm.org/toc/nejm/medical-journal>  
[New issue; No digest content identified]

**Pediatrics**  
July 2018, VOLUME 142 / ISSUE 1  
<http://pediatrics.aappublications.org/content/142/1?current-issue=y>  
[Reviewed earlier]

**Pharmaceutics**  
Volume 36, Issue 7, July 2018  
<https://link.springer.com/journal/40273/36/7/page/1>  
[Reviewed earlier]

**PharmacoEconomics**

Volume 36, Issue 6, June 2018

<https://link.springer.com/journal/40273/36/6/page/1>

[Reviewed earlier]

**PLOS Currents: Disasters**

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

[Accessed 21 Jul 2018]

[No new digest content identified]

**PLoS Currents: Outbreaks**

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

[Accessed 21 Jul 2018]

[No new digest content identified]

**PLoS Medicine**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

**PLoS Neglected Tropical Diseases**

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

(Accessed 21 Jul 2018)

*Research Article*

**[Towards a science of global health delivery: A socio-anthropological framework to improve the effectiveness of neglected tropical disease interventions](#)**

Kevin Louis Bardosh

I published 19 Jul 2018 PLOS Neglected Tropical Diseases

<https://doi.org/10.1371/journal.pntd.0006537>

*Author summary*

Many efficacious tools exist to control NTDs, but effectively moving these tools and approaches from the boardroom to the village is a complicated socio-political process. In the era of Sustainable Development Goals, global health has become more focused on improving the delivery of existing interventions. Greater attention to implementation research, including the value of social science perspectives, has followed in an effort to build a science of global health delivery. This paper presents an accessible and actionable socio-anthropological framework for understanding the effectiveness factors of NTD interventions. The framework was developed by comparatively analyzing three large-scale NTD interventions in Eastern Africa: rabies elimination in Tanzania, sleeping sickness control in Uganda and the prevention of parasitic worms in Zambia. The framework includes five “intervention domains” where the effectiveness of these interventions was determined: 1) the terrain of intervention; 2) community agency; 3) the strategies and incentives of field staff; 4) the socio-materiality of technology; and 5) the governance of interventions. The paper illustrates the importance of each of these domains, presenting lessons learnt and practical recommendations. As a flexible analytical tool, the

framework could be integrated into the planning and implementation process itself, bringing the insights of socio-anthropological approaches into an emerging science of NTD delivery.

### **PLoS One**

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

[Accessed 21 Jul 2018]

*Research Article*

#### **[PCV13 vaccination impact: A multicenter study of pneumonia in 10 pediatric hospitals in Argentina](#)**

Angela Gentile, Julia Bakir, Verónica Firpo, Enrique V. Casanueva, Gabriela Ensinck, Santiago Lopez Papucci, María F. Lución, Hector Abate, Aldo Cancellara, Fabiana Molina, Andrea Gajo Gane, Alfredo M. Caruso, Alejandro Santillán Iturres, Sofía Fossati, Working Group

*Research Article* | published 18 Jul 2018 PLOS ONE

<https://doi.org/10.1371/journal.pone.0199989>

#### **[Vaccine uptake and immune responses to HBV infection amongst vaccinated and non-vaccinated healthcare workers, household and sexual contacts to chronically infected HBV individuals in the South West Region of Cameroon](#)**

Henry Dilonga Meriki, Kukwah Anthony Tufon, Damian Nota Anong, Nyeke James Tony, Tebit Emmanuel Kwenti, Ayah Flora Bolimo, Youmbi Sylvain Kouanou, Theresa Nkuo-Akenji

*Research Article* | published 16 Jul 2018 PLOS ONE

<https://doi.org/10.1371/journal.pone.0200157>

### **PLoS Pathogens**

<http://journals.plos.org/plospathogens/>

[Accessed 21 Jul 2018]

[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 Jul 2018]

[No new digest content identified]

### **Prehospital & Disaster Medicine**

Volume 33 - Issue 3 - June 2018

<https://www.cambridge.org/core/journalsprehospital-and-disaster-medicine/latest-issue>

[Reviewed earlier]

### **Preventive Medicine**

Volume 112 Pages 1-222 (July 2018)

<https://www.sciencedirect.com/journal/preventive-medicine/vol/112/suppl/C>

[Reviewed earlier]

**Proceedings of the Royal Society B**

16 May 2018; volume 285, issue 1878

<http://rsbp.royalsocietypublishing.org/content/285/1878?current-issue=y>

[Reviewed earlier]

**Public Health**

July 2018 Volume 160, p1-166

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

[Reviewed earlier]

**Public Health Ethics**

Volume 11, Issue 2, 1 July 2018

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

***Special Symposium on Public Mental Health Ethics***

[Reviewed earlier]

**Public Health Reports**

Volume 133 Issue 4, July/August 2018

<http://phr.sagepub.com/content/current>

[Reviewed earlier]

**Qualitative Health Research**

Volume 28 Issue 9, July 2018

<http://qhr.sagepub.com/content/current>

[Reviewed earlier]

**Research Ethics**

Volume 14, Issue 1, Jan - Mar 2018

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

[Reviewed earlier]

**Reproductive Health**

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

[Accessed 21 Jul 2018]

[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](http://www.paho.org/journal/index.php?option=com_content&view=featured&Itemid=101)

### ***Thematic issue: Economics of NCDs***

The global health burden of noncommunicable diseases (NCDs) is large and growing, as this group of diseases already accounts for 70% of total deaths. Global evidence indicates that the high health burden of NCDs translates into significant economic and social costs that threaten to diminish the quality of life of millions of individuals, impoverish families, jeopardize universal health coverage, and increase health disparities within and between countries. Evidence consistently shows that the NCD epidemic cannot be tackled through interventions and policies in the health sector alone. In particular, prevention measures that address NCD risk factors involve a range of sectors including finance, trade, education, agriculture, and transportation. As economics has become the common language among decision makers across sectors, it is imperative that health authorities leverage economic information to more effectively communicate the urgency of tackling NCDs and related risk factors.

This thematic issue of the Pan American Journal of Public Health is part of a continued collaboration between the Public Health Agency of Canada (PHAC) and PAHO/WHO to facilitate intragovernmental dialogue for a better understanding of NCD issues by making economic evidence available in the Americas, and to assist countries in integrating economic approaches into their NCD prevention and control policies.

[Reviewed earlier]

### **Risk Analysis**

Volume 38, Issue 7 Pages: 1319-1518 July 2018

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

[New issue; No digest content identified]

### **Risk Management and Healthcare Policy**

Volume 10, 2017

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

[Reviewed earlier]

### **Science**

20 July 2018 Vol 361, Issue 6399

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

[New issue; No digest content identified]

### **Science Translational Medicine**

18 July 2018 Vol 10, Issue 450

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

[New issue; No digest content identified]

### **Social Science & Medicine**

Volume 208 Pages 1-208 (July 2018)

<https://www.sciencedirect.com/journal/social-science-and-medicine/vol/208/suppl/C>

[Reviewed earlier]

## **Systematic Reviews**

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

[Accessed 21 Jul 2018]

*Protocol*

### **Evidence of factors influencing self-medication with antibiotics in LMICs: a systematic scoping review protocol**

*The Sustainable Development Goals (SDGs) emphasize the need for strengthening the capacity of all developing countries in the early warning, risk reduction and management of national as well as global health r...*

Authors: Neusa Fernanda Torres, Buyisile Chibi, Lyn E. Middleton, Vernon P. Solomon and Tivani Mashamba-Thompson

Citation: Systematic Reviews 2018 7:102

Published on: 21 July 2018

## **Travel Medicine and Infectious Diseases**

July-August, 2018 Volume 24

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

[Reviewed earlier]

## **Tropical Medicine & International Health**

Volume 23, Issue 7 Pages: i-iv, 691-813 July 2018

<https://onlinelibrary.wiley.com/toc/13653156/current>

[Reviewed earlier]

## **Vaccine**

Volume 36, Issue 32, Part A, Pages 4759-4836 (6 August 2018)

<https://www.sciencedirect.com/journal/vaccine/vol/36/issue/32/part/PA>

### **Preventing Cervical Cancer: How much HPV Vaccine do we need?**

Edited by Margaret Stanley, Peter Dull

### **HPV single-dose vaccination: Impact potential, evidence base and further evaluation**

Open access

Pages 4759-4760

Margaret Stanley, Peter Dull

### **Status of HPV vaccine introduction and barriers to country uptake**

Open access - Original research article

Pages 4761-4767

K.E. Gallagher, D.S. LaMontagne, D. Watson-Jones

### **Health and economic benefits of single-dose HPV vaccination in a Gavi-eligible country**

Open access - Original research article

Pages 4823-4829

Emily A. Burger, Nicole G. Campos, Stephen Sy, Catherine Regan, Jane J. Kim

**Early use of the HPV 2-dose vaccination schedule: Leveraging evidence to support policy for accelerated impact**

Open access - Original research article

Pages 4800-4805

Vladimir Gilca, Jorge Salmerón-Castro, Chantal Sauvageau, Gina Ogilvie, ... Eduardo Lazcano-Ponce

**Vaccine**

Volume 36, Issue 32, Part B Pages 4837-4962 (6 August 2018)

<https://www.sciencedirect.com/journal/vaccine/vol/36/issue/32/part/PB>

***Preventing Cervical Cancer: How much HPV Vaccine do we need?***

Edited by Margaret Stanley, Peter Dull

*Review*

**Hepatitis B vaccination coverage among health-care workers in Africa: A systematic review and meta-analysis**

Review article

Pages 4851-4860

Asa Auta, Emmanuel O. Adewuyi, Gbednet T. Kureh, Nguavese Onoviran, Davies Adeloye

**Three-dose HPV vaccine completion among sexual and gender minority young adults at a Boston community health center**

Original research article

Pages 4897-4903

Kaan Z. Apaydin, Holly B. Fontenot, Christina P.C. Borba, Derri L. Shtasel, ... Alex S. Keuroghlian

**A population-based reminder intervention to improve human papillomavirus vaccination rates among adolescents at routine vaccination age**

Original research article

Pages 4904-4909

Scott Coley, Dina Hoefer, Elizabeth Rausch-Phung

**Feasibility of jet injector use during inactivated poliovirus vaccine house-to-house vaccination campaigns**

Original research article

Pages 4935-4938

Noha H. Farag, Ziad Mansour, Lina Torossian, Racha Said, ... Derek Ehrhardt

**Using pneumococcal and rotavirus surveillance in vaccine decision-making: A series of case studies in Bangladesh, Armenia and the Gambia**

Original research article

Pages 4939-4943

Alvira Z. Hasan, Senjuti Saha, Samir K. Saha, Gayane Sahakyan, ... Sébastien Antoni

**Engagement of private providers in immunization in the Western Pacific region**

Original research article

Pages 4958-4962  
Ananda Amarasinghe, Laura Davison, Sergey Diorditsa

**Vaccine: Development and Therapy**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

**Vaccines — Open Access Journal**

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

(Accessed 21 Jul 2018)

[No new digest content identified]

**Value in Health**

July 2018 Volume 21, Issue 7, p759-896

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

[Reviewed earlier]

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

**Annual Review of Virology**

12 Jul 2018

**Breaking the Last Chains of Poliovirus Transmission: Progress and Challenges in Global Polio Eradication.**

O Kew, M Pallansch

DOI: [10.1146/annurev-virology-101416-041749](https://doi.org/10.1146/annurev-virology-101416-041749)

***Abstract***

Since the launch of the Global Polio Eradication Initiative (GPEI), paralytic cases associated with wild poliovirus (WPV) have fallen from ~350,000 in 1988 to 22 in 2017. WPV type 2 (WPV2) was last detected in 1999, WPV3 in 2012, and WPV1 appeared to be localized to Pakistan and Afghanistan in 2017. Through continuous refinement, the GPEI has overcome operational and biological challenges far more complex and daunting than originally envisioned. Operational challenges had led to sustained WPV endemicity in core reservoirs and widespread dissemination to polio-free countries. The biological challenges derive from intrinsic limitations to the oral poliovirus vaccine: (a) reduced immunogenicity in high-risk settings and (b) genetic instability, leading to repeated outbreaks of circulating vaccine-derived polioviruses and prolonged infections in individuals with primary immunodeficiencies. As polio eradication enters its multifaceted endgame, the GPEI, with its technical, operational, and social innovations, stands as the preeminent model for control of vaccine-preventable diseases worldwide.

Expected final online publication date for the Annual Review of Virology Volume 5 is September

29, 2018. Please see <http://www.annualreviews.org/page/journal/pubdates> for revised estimates.

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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 Jul 2018

[No new, unique, relevant content]

#### **BBC**

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

Accessed 21 Jul 2018

[No new, unique, relevant content]

#### **The Economist**

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

Accessed 21 Jul 2018

[No new, unique, relevant content]

#### **Financial Times**

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

Accessed 21 Jul 2018

[No new, unique, relevant content]

#### **Forbes**

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

Accessed 21 Jul 2018

[No new, unique, relevant content]

#### **Foreign Affairs**

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

*Accessed 21 Jul 2018*

[No new, unique, relevant content]

**Foreign Policy**

<http://foreignpolicy.com/>

*Accessed 21 Jul 2018*

**Trump's Battle Against Breastfeeding Is a Small Part of a Bigger War**

With escalating drug prices and growing vaccine paranoia, American populism is taking down the edifice of global public health.

Laurie Garrett

**The Guardian**

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

*Accessed 21 Jul 2018*

*Vaccines and immunisation*

**How disgraced anti-vaxxer Andrew Wakefield was embraced by Trump's America**

Twenty years after his discredited paper linked autism to the MMR jab, the doctor – who was struck off the medical register in the UK – has become a leading light in the US and frighteningly influential worldwide

Sarah Boseley

Wed 18 Jul 2018

**New Yorker**

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

*Accessed 21 Jul 2018*

[No new, unique, relevant content]

**New York Times**

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

*Accessed 21 Jul 2018*

[No new, unique, relevant content]

**Wall Street Journal**

[http://online.wsj.com/home-page?\\_wsjregion=na,us&\\_homepage=/home/us](http://online.wsj.com/home-page?_wsjregion=na,us&_homepage=/home/us)

*Accessed 21 Jul 2018*

[No new, unique, relevant content]

**Washington Post**

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

*Accessed 21 Jul 2018*

[No new, unique, relevant content]

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**Think Tanks et al**

**Brookings**

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

Accessed 21 Jul 2018

[No new relevant content]

### **Center for Global Development**

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

Accessed 21 Jul 2018

[No new relevant content]

### **CSIS**

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

Accessed 21 Jul 2018

[No new relevant content]

### **Council on Foreign Relations**

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

Accessed 21 Jul 2018

[No new relevant content]

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