



Vaccines and Global Health: The Week in Review
15 December 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.*

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

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Milestones :: Perspectives

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[Announcing the Allen Institute for Immunology, a new research endeavor focused on human immune health and disease](#)

Press Release

December 12, 2018

Seeded by \$125 million donation by the late Paul G. Allen, the Allen Institute for Immunology will study human immune health, cancer, and autoimmune diseases

The Allen Institute today announced the launch of the Allen Institute for Immunology, a new division of the Institute that is dedicated to studying the human immune system. Seeded by a generous commitment of \$125 million by Allen Institute founder, the late Paul G. Allen, the new Institute will work to understand the dynamic balancing act of the human immune system, how it senses friend from foe and what goes wrong when we're ill.

"Paul Allen always challenged us to go after the really hard problems, to do work that would have a significant impact in our scientific fields," said Allan Jones, Ph.D., President and Chief Executive Officer of the Allen Institute. "Understanding the human immune system in detail and figuring out what goes wrong in disease is an incredibly complex but solvable problem. I'm thrilled to see us launch into this new area of complexity in biology with a real opportunity to directly impact human health."

The Allen Institute for Immunology's goal is to improve human immune health and lay the groundwork for better ways to diagnose, treat and prevent immune-related diseases. In its initial phase, the Institute will focus on studies of two cancers, multiple myeloma and melanoma, and three autoimmune disorders, rheumatoid arthritis and inflammatory bowel disease, specifically, ulcerative colitis and Crohn's disease. The researchers will also take a deep dive into the immune systems of healthy volunteers with the goal of understanding what makes a "normal" immune baseline and how to help patients return to that healthy state.

Thomas F. Bumol, Ph.D., is the Executive Director for the Allen Institute for Immunology. Bumol joins the Institute from Lilly Research Laboratories where he worked for more than 35 years, most recently as Senior Vice-President of the Biotechnology and Immunology Research component and the Site Head of Lilly's Biotechnology Center of San Diego. His work at Lilly focused on drug discovery and early clinical development of treatments for many disease areas including diabetes, pain and immune-related diseases such as psoriasis, lupus, rheumatoid arthritis and inflammatory bowel disease.

"By unraveling the mysteries of the dynamic immune system in healthy individuals and focusing the same cutting-edge tools on patients in various disease states, we believe we will find new ways to diagnose and ultimately treat disease," Bumol said. "We are looking at problems that have large unmet needs. Patients are not only suffering from these immune-based illnesses, patients are dying from some of these disorders, and we would like to change that."

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Gavi Mid-Term

Global health leaders hail immunisation as shortest path to healthy lives

Gavi Mid-Term Review closes with commitments to accelerate immunisation programmes in the poorest countries to reach more children with lifesaving vaccines.

Abu Dhabi, 12 December 2018 – More than 300 leaders of the global health community, including representatives from governments, civil society and the private sector, came together for the Gavi [Mid-Term Review](#) this week in Abu Dhabi, UAE. The high-level conference celebrated the 700 million children immunised and 10 million lives saved in the world's poorest countries thanks to Gavi support since 2000...

...While Gavi is on track to meet its commitments, it still faces a number of challenges including the difficulty of reaching underimmunised children in isolated rural communities, urban slums and conflict settings. It will also need to help countries deal with a growing number of disease outbreaks coupled with the looming challenges of climate change, population growth and urbanization, as well as the fact that more and more of the world's poorest people will be living in middle-income countries not supported by Gavi.

"We still have a long way to go," said Dr Ngozi Okonjo-Iweala, Gavi Board Chair. "Despite improvements in vaccine coverage, it is not accelerating as fast as we would like and this is particularly the case in fragile countries. In order to further its mission and to reach the children who are still missing out on basic vaccines, this week we heard from participants that the Alliance needs to keep on learning from its experiences and continue to adapt. Success will require exploring more innovative and tailored approaches with countries while selectively forging new partnerships with the private sector."

"By reaching more than 65 million children annually in Gavi-supported countries, vaccination is the shortest path to healthy lives," said Dr Seth Berkley, CEO of Gavi, the Vaccine Alliance. "Vaccines don't deliver themselves. Expanding health systems to deliver immunisation in low coverage areas builds the base of the primary health system. This is a key contributor to the third Sustainable Development Goal." Immunisation connects the vast majority of families with the primary health system up to five times in the first year of a child's life – more than any other health intervention. It ranks among the most equitable interventions, disproportionately benefiting the most marginalised populations and is equally distributed to boys and girls.

New and expanded partnerships

During the mid-term review, Gavi announced a series of new innovative partnerships with the private sector and governments to further strengthen immunisation in developing countries.

:: The **German Federal Ministry of Development and Cooperation through the German development bank KfW** will explore the application of blockchain technology to Gavi's cash support and supply chain management systems.

:: **Mastercard** will leverage its expertise and technology, enabling ministries of health and authorised health workers to provide a card with a digital immunisation record to each participating child's caregiver. The program aims to strengthen the efficiency and reach of

health services in developing countries where children are most at risk of missing out on immunisation.

:: **Parsyl Inc** will help to boost vaccine supply chains in Uganda and Senegal. The partnership will use Parsyl's advanced supply chain data platform to support Senegal and Uganda to track and monitor cold chain conditions while vaccines are being distributed within countries.

:: The **Uganda Ministry of Health, UPS and Freight in Time Ltd (FIT)** will implement an 18 month pilot project using a customised mobile app and a wireless temperature monitoring system to help address supply chain challenges in three Ugandan districts which have the highest number of unimmunised children in the country.

:: **Unilever** through Lifebuoy, its leading health soap brand, will expand its support to further scale up its 'Safal Shuruaat' programme. This India-based initiative, launched in 2018, promotes handwashing with soap and immunisation – two of the most cost-effective child survival interventions – and aims to improve the health of young children by helping to prevent illnesses which are often associated with premature death. The partnership with Gavi contributes to two major public health priorities of the Government of India: Mission Indradhanush and Swachh Bharat. Unilever's increased financial contribution will be matched by the Government of the Netherlands as part of the Gavi Matching Fund mechanism.

:: **Zenysis Technologies** - This new strategic partnership agreement will jointly invest to provide countries with access to the company's software platform, analytical training and support IT skills development. Countries will use the platform's interoperability capabilities to integrate data from their fragmented information systems and help decision makers see where their country's immunisation programmes are leaving children behind. The project also has the backing of one of Zenysis' investors, internet services giant Tencent Holdings, Asia's largest company.

The International Finance Facility for Immunisation (IFFIm) and the **Islamic Development Bank Group (IsDB)**, a development partner of Gavi, the Vaccine Alliance, announced plans to issue an Islamic-compliant financial instrument, or Sukuk, aimed at accelerating funding for immunisation efforts to save children's lives in the world's poorest countries.

New funding commitments

The **Republic of Korea** announced US\$ 15 million in new funding that will be delivered from 2019-2021 and will be funded through Korea's Global Disease Eradication Fund.

The **Kuwait** Fund for Arab Economic Development (Kuwait Fund) formally approved a grant of US\$ 1 million to accelerate the availability of funding for immunisation programmes supported by Gavi, the Vaccine Alliance.

Lastly, Mohamed Al Ansari, Chairman and Managing Director of **Al Ansari Exchange**, a leading exchange company in the UAE announced a US\$ 1 million pledge to support life-saving vaccines and immunisation in the poorest countries of the world.

The Gavi Mid-Term review was also an opportunity to celebrate global figures whose dedication to the Vaccine Alliance's mission has played a key role in helping Gavi and its partners to

protect hundreds of millions of children across the world. Dr Cyrus Poonawalla, Founder of Serum Institute of India (SII) and Chairman of Poonawalla Group, was given the first ever Vaccine Hero award by Gavi, the Vaccine Alliance.

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Gavi and Mastercard join forces to reach more children with lifesaving vaccines

Strengthening efficiency and reach of health services in developing countries with digital immunisation records.

Abu Dhabi, 11 December 2018 – Mastercard and Gavi, the Vaccine Alliance announced today at a high-level conference for Gavi's 2018 mid-term review, a new transformative partnership to ensure more children from the poorest countries are able to benefit from life-saving immunisation programs.

Although major progress has been made to increase immunisation rates, one in five children in Gavi-supported countries are still not reached with basic lifesaving vaccines. In many developing countries, common barriers may include a lack of information about a child's immunisation record and limited means by which to remind care givers about follow up appointments.

This partnership will leverage Mastercard expertise and technology, enabling ministries of health and authorised health workers to provide a card with a digital immunisation record, to each participating child's caregiver. By empowering caregivers to stay on track to receive critical vaccinations, the program aims to strengthen the efficiency and reach of health services in developing countries where children are most at risk of missing out on immunisation. Governments will benefit from having a better understanding of the immunisation needs of their communities.

"Access to services like healthcare and education are vital to helping families build a promising future. By applying our technology to humanitarian and development challenges, we can help optimise and scale life-saving programs in underserved communities around the world," said Michael Froman, vice chairman and president of strategic growth at Mastercard.

"Children, especially those living in the most remote, impoverished communities, lack immunisation records," said Dr. Seth Berkley, CEO of Gavi, the Vaccine Alliance. "That represents an enormous impediment to Gavi's mission of ensuring that every child worldwide receives the essential vaccines they need to survive and thrive. This partnership with Mastercard has the potential to overcome that challenge."

The partnership aims to be implemented across five countries over the next two years with the goal of expanding the solution to all other interested Gavi-supported countries, based on mutually agreed targets...

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Gavi and Germany partner to harness blockchain technology

German government and the Vaccine Alliance to explore the application of blockchain technology to increase efficiency of immunisation programmes.

Abu Dhabi, 11 December 2018 – Gavi, the Vaccine Alliance and the German Federal Ministry for Economic Cooperation and Development (BMZ), through the KfW Development Bank, announced at Gavi's high-level 2018 [mid-term review](#) conference in Abu Dhabi, UAE, that they will partner to explore the application of blockchain technology to Gavi's cash support and supply chain management systems.

Before a vaccine can protect a child, immunisation programmes involve complex planning and procedures. Outdated vaccine supply and distribution systems can delay and limit the impact that vaccines have on people's health. BMZ, KfW and Gavi recognise that blockchain technology could radically transform health systems by reducing wastage and creating trust amongst development partners, funders and countries.

"Blockchain technology could help us understand in real-time all the steps taken while a vaccine is being delivered," said Dr Seth Berkley, CEO of Gavi, the Vaccine Alliance. "This technology has the potential to increase efficiency and reduce costs for developing countries but, most importantly, it could save lives."

Starting in 2019, the joint project will focus on exploring practical areas of application for this technology in the immunisation space to, for example, effectively track funds and vaccines...

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Global Consortium Supporting Low- and Middle-Income Countries to Make Evidence-Based Healthcare Investment Decisions Receives \$14.5 Million Boost

December 12, 2018 *[Editor's text bolding]*

"Policymakers' decisions about what healthcare to make available and at what cost can be a life or death decision for people across the developing world."

London – A global consortium working with low- and middle-income countries as they aim to make healthcare investment decisions that reflect the best value for money has received a \$14.5 million grant from the Bill & Melinda Gates Foundation, announced the Center for Global Development today. The grant covers the next five years and specifically supports the International Decision Support Initiative (iDSI), made up of health policymakers, researchers, and development experts.

The most cost-effective health interventions produce as much as 15,000 times the benefit as the least cost-effective, and up to \$2.8 trillion USD is reported to be wasted each year and could be redirected to save more lives. This means that allocating healthcare according to maximum health gain could save countless lives.

iDSI will harness the funding to extend its engagement with policymakers and healthcare payers in low- and middle-income countries, primarily in sub-Saharan Africa, working with them to understand and respond to the challenges they face when deciding on benefits—whether ensuring the financial sustainability of a health insurance fund or fair access to good quality care across public health facilities.

The network endeavors to generate long-term, locally owned solutions to healthcare challenges through building capacities for using evidence in policy and

clinical decisions. Its impact to date includes influencing policy in eight countries—China, India, Indonesia, Philippines, Vietnam, South Africa, Tanzania, and Ghana—where there has been tangible progress toward national institutions being established to embed value-for-money into decision-making about what medicines, vaccines, or other health services should be offered to the population, and how these could be procured in the most cost-effective way. Already the coalition has supported Tanzania to prioritise its Essential Medicines List from 500 to 400 drugs, reducing spending on poor-value items and freeing up resources to improve access to the most cost-effective medicines; trained Kenya's Health Benefits Package Committee on measuring the added value of a new health intervention compared to existing ones; piloted a local quality improvement initiative with hospital staff in Vietnam to reduce inappropriate antibiotic prescribing for pneumonia; and brought together more than 100 policymakers working across sub-Saharan Africa to share knowledge and best practices.

"With government and aid budgets under pressure, many developing countries have to make difficult choices," said iDSI Director Kalipso Chalkidou, who also directs the Global Health Policy program at the Center for Global Development and is a professor of global health practice at Imperial College London. "Policymakers' decisions about what healthcare to make available and at what cost can be a life or death decision for people across the developing world. We will inform these critical decisions with data and evidence that map out how best to spend limited funds to improve outcomes and save lives."

The Chinese, Thai, and Norwegian governments have backed iDSI, which also receives funding from the Department for International Development, a United Kingdom government department responsible for administering overseas aid; and this renewed phase will see a stronger emphasis on sub-Saharan Africa. **iDSI's flagship countries include Kenya and Ghana,** where global health funders will be departing and domestic health care spending is on the rise. Additionally, many sub-Saharan African countries are currently introducing national health insurance or coverage plans and making important decisions about what health services and technologies should be included in universal health coverage offerings, where value-for-money considerations could make a huge difference in health outcomes.

The Center for Global Development...will lead iDSI. The six other core partners in this global effort include the Global Health and Development Group at Imperial College London; the Asia HTA consortium, which includes the National Health Foundation of Thailand, the Saw Swee Hock School of Public Health at the National University of Singapore, and Health Intervention and Technology Assessment Program (HITAP); the China National Health Development Research Center; the Health Economics Research Unit (HERU) of the KEMRI Wellcome Trust Programme; the Norwegian Institute of Public Health; and the Clinton Health Access Initiative, Inc. (CHAI).

iDSI was born out of the recommendations of the Center for Global Development's [Priority-Setting Institutions for Global Health Working Group](#) in 2012.

"Previous healthcare decision-making in developing countries has too often been driven by inertia and lobbying rather than science, economics, ethics, and the public interest," said Amanda Glassman, Chief Operating Officer at the Center for Global Development. "We want to change that."

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Ebola - Democratic Republic of the Congo

Children account for more than one third of Ebola cases in eastern Democratic Republic of the Congo – UNICEF

Press release

KINSHASA, DAKAR, NEW YORK, GENEVA, 11 December 2018 – Children now account for more than one third of the Ebola cases in affected regions of the eastern Democratic Republic of the Congo (DRC), UNICEF said today. The UN children's agency also reported that one in ten Ebola cases is under five-years-old, while children who contract the Ebola virus are at higher risk of dying from the disease than adults.

"We are deeply concerned by the growing number of children confirmed to have contracted Ebola," said UNICEF's Regional Director for West and Central Africa, Marie-Pierre Poirier, returning this week from Beni, one of the current epicentres of the Ebola outbreak. "The earlier children infected with Ebola receive treatment in a specialized health facility, the greater their chances of survival. Community mobilization and public awareness activities are also crucial to ensuring early detection and quick referral of suspected cases to Ebola treatment centres." Continued efforts are needed to raise awareness of prevention methods and promote early access to treatment which dramatically improves survival rates.

The impact of the disease on children goes beyond those who have been infected. When parents or caregivers with the disease are taken to treatment centres or pass away, some children are left on their own. UNICEF and its partners have so far identified more than 400 children who have been orphaned or left unaccompanied because of the virus. The growing number of separated children is linked to the high caseload of patients in the Ebola treatment centres of Beni and Butembo, the current epicentres of the disease.

UNICEF provides Ebola-infected children, orphans and unaccompanied children with appropriate assistance, including nutritional care and psychosocial and educational support. Together with its partners, UNICEF has opened a kindergarten next to the Ebola treatment centre of Beni to assist the youngest children whose parents are isolated in the centre. The creche has taken care of more than 20 separated infants and young children, aged up to eight years, since its opening early November.

Marie-Pierre Poirier met in Beni with national authorities, who are leading the Ebola-response, along with UN agencies and NGO partners. "Children are suffering a lot because of this epidemic – both those who have lost parents or caregivers as well as those who have been infected themselves," said Poirier. "That's why it's imperative that children are put at the heart of the Ebola response."

Since the start of the response to the latest Ebola outbreak in the DRC, UNICEF and its partners have:

- Provided psycho-social and material assistance to 520 affected families with children;
- Provided psychosocial support to 421 children in the Ebola Treatment Centers;

- Sensitized more than 91,000 children with Ebola prevention messages in schools;
- Briefed 4,310 teachers in schools on Ebola;
- Equipped 444 schools in high risk areas with hand-washing facilities;
- Reached more than 6,753,000 people with Ebola-prevention messages;
- Provided access to water to 889,440 people in the affected areas.

With more than 50 specialists in the impacted regions, UNICEF is operating out of Beni, Butembo, Mangina and Komanda.

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19: Situation report on the Ebola outbreak in North Kivu

12 December 2018

[Excerpts]

...Case Management

:: On 24 November 2018, MoH announced the launch of a randomized control trial for Ebola therapeutics. This first ever multi-drug randomized control trial within an outbreak setting is an important step towards finding an effective treatment for Ebola. The trial is coordinated by WHO and led and sponsored by the DRC's National Institute for Biomedical Research (INRB) which is the principal investigator. The trial has begun in the ALIMA facility in Beni, where patients are briefed on the trial and given the choice to participate.

:: Other ETCs continue to provide therapeutics under the MEURI (compassionate use) protocol, in collaboration with the MoH and the INRB, together with supportive care measures. WHO is providing technical clinical expertise on-site and is assisting with the creation of a data safety management board. UNICEF is providing nutritional treatment and psychological support for all hospitalized patients.

:: New patients continue to be treated in transit centres and ETCs. Over the reporting period, bed occupancy varied from 0% in Goma and Tchomia to 90% in Beni ETC.

: On 9 December 2018, a total of 131 patients were hospitalised in transit centres and ETCs, of whom 39 were laboratory confirmed.

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DONs Ebola virus disease – Democratic Republic of the Congo

13 December 2018

[Excerpt]

...WHO risk assessment

This outbreak of EVD is affecting north-eastern provinces of the country bordering Uganda, Rwanda and South Sudan. Potential risk factors for transmission of EVD at the national and regional levels include: travel between the affected areas, the rest of the country, and neighbouring countries; the internal displacement of populations. **The country is concurrently experiencing other epidemics (e.g. cholera, vaccine-derived poliomyelitis, malaria), and a long-term humanitarian crisis.** Additionally, the security situation in North Kivu and Ituri at times limits the implementation of response activities. WHO's risk assessment for the outbreak is currently very high at the national and regional levels; the

global risk level remains low. WHO continues to advise against any restriction of travel to, and trade with, the Democratic Republic of the Congo based on currently available information.

As the risk of national and regional spread is very high, it is important for neighbouring provinces and countries to enhance surveillance and preparedness activities. The International Health Regulations (IHR 2005) Emergency Committee has advised that failing to intensify these preparedness and surveillance activities would lead to worsening conditions and further spread. WHO will continue to work with neighbouring countries and partners to ensure that health authorities are alerted and are operationally prepared to respond...

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South Sudan set to vaccinate targeted healthcare and frontline workers operating in high risk states against Ebola

Juba 8 December, 2018 – The Ministry of Health of the Republic of South Sudan with support from the World Health Organization (WHO), DFID, GAVI vaccine alliance and other partners, is set to vaccinate targeted healthcare and frontline workers operating in high risk states bordering the Democratic Republic of Congo (DRC) against Ebola virus disease (EVD) as part of national preparedness efforts.

To facilitate the process, a training for the Vaccination team was incorporated into the micro plan developed by the vaccine technical working group (TWG). The members of the TWG among others include MoH, UNICEF, CDC, WHO, MSF, Health Cluster and others. Accordingly, a four days training for 60 participants drawn from the states of Juba, Yei, Yambio and Nimule on Good Clinical Practice (GCP) course (4-7 December, 2018) in Juba.

The vaccination team members selected by their respective State Ministry of Health included representatives from health facilities, private sector and Civil Society Organizations. Each state vaccination team comprised of 15 members including vaccinators, clinicians, social mobilizers, and logisticians.

The GCP training is mandatory prior to the administration of the vaccine. Participants were equipped with knowledge and skills on Ebola vaccine (rVSV-ZEBOV) administration including vaccination techniques, and exposed through a simulation exercise.

Through this training, the vaccination team members were GCP certified and are now ready to conduct the Ebola vaccination scheduled to start with Juba on 19 December, 2018, and follow up the vaccinated individuals for a period of 21 days as the minimum standard of care.

The Ministry of Health, with technical support from the Vaccine Technical Working Group of the National EVD Task Force, the states, and NGOs operating in health care facilities in the respective States will coordinate the administration of the Ebola vaccine.

With support from GAVI vaccine alliance, 2,160 doses of the Ebola vaccine (rVSV-ZEBOV) have been allocated to South Sudan and will be administered to protect against Ebola virus-Zaire, the strain that is confirmed in the current outbreak in DRC. Although this vaccine is not yet licensed, it is being used under the compassionate-use guidelines in response to the ongoing

Ebola outbreak in DRC as recommended by the WHO's Strategic Advisory Group of Experts on Immunization (SAGE)...

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Emergencies

POLIO

Public Health Emergency of International Concern (PHEIC)

Polio this week as of 11 December 2018 [GPEI]

:: Featured on www.polioeradication.org: Mohamed Shire, polio expert from Somalia: from smallpox to polio, a life spent pursuing eradication of diseases; Going the distance to end polio in Papua New Guinea: a video diary of vaccination teams travelling for days by road and helicopter to reach even the most remote areas.

Summary of new viruses this week:

Afghanistan – one new case of wild poliovirus (WPV1).

Papua New Guinea – one circulating vaccine-derived poliovirus type 1 (cVDPV1) and two cVDPV1-positive environmental samples

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Editor's Note:

WHO has posted a [refreshed emergencies page](#) which presents an updated listing of Grade 3,2,1 emergencies as below.

WHO Grade 3 Emergencies [to 15 Dec 2018]

Democratic Republic of the Congo

:: 19: Situation report on the Ebola outbreak in North Kivu 12 December 2018

:: DONs Ebola virus disease – Democratic Republic of the Congo 13 December 2018

[See Milestones above for more detail]

Bangladesh - Rohingya crisis

:: Weekly Situation Report 54 - 9 December 2018

[Excerpt]

Highlights

:: The 9th round of water quality surveillance in refugee settlements started from 26 November 2018 and planned to be completed by 12 December 2018.

:: Four days training on Gender-Based Violence in Emergencies (GBViE) was conducted from 26-29 November 2018. The training targeted health partners providing health services to GBV survivors in the Rohingya refugee camps.

:: Health sector completed the review of JRP projects in the online project system.

:: Third week of the OCV campaign covered 257 682 doses (78.4%) of the targeted beneficiaries.

South Sudan

:: South Sudan set to vaccinate targeted healthcare and frontline workers operating in high risk states against Ebola

Juba 8 December, 2018

[See Milestones above for more detail]

Myanmar - *No new announcements identified*

Nigeria - *No new announcements identified*

Somalia - *No new announcements identified*

Syrian Arab Republic - *No new announcements identified*

Yemen - *No new announcements identified*

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WHO Grade 2 Emergencies [to 15 Dec 2018]

Sudan

:: WHO Member States sign Khartoum Declaration on Sudan and Bordering Countries: Cross-Border Health Security

4 December 2018 – Six countries in WHO’s Eastern Mediterranean and African Regions have signed a declaration committing themselves to strengthening preparedness and response to public health threats and events across borders in an effort to further the implementation of the International Health Regulations (IHR 2005) and enhance global health security. The Khartoum Declaration on Sudan and Bordering Countries: Cross-Border Health Security was signed by Chad, Egypt, Ethiopia, Libya, South Sudan and Sudan on 22 November 2018 in Khartoum, Sudan...

Niger

:: Le Niger vaccine 152 000 personnes contre le choléra dans les zones à haut risque
06 décembre 2018

Brazil (in Portuguese) - *No new announcements identified*

Cameroon - *No new announcements identified*

Central African Republic - *No new announcements identified*

Ethiopia - *No new announcements identified*

Hurricane Irma and Maria in the Caribbean - *No new announcements identified*

Iraq - *No new announcements identified*

occupied Palestinian territory - *No new announcements identified*

Libya - *No new announcements identified*

MERS-CoV - *No new announcements identified*

Sao Tome and Principe Necrotizing Cellulitis (2017) - *No new announcements identified*

Ukraine - *No new announcements identified*

Zimbabwe - *No new announcements identified*

WHO-AFRO: Outbreaks and Emergencies Bulletin, Week 49: 01-07 December 2018

The WHO Health Emergencies Programme is currently monitoring 57 events in the region. This week’s edition covers key ongoing events, including:

:: Ebola virus disease in the Democratic Republic of the Congo

:: Lassa fever in Nigeria
:: Measles in Mauritius
:: Humanitarian crisis in South Sudan.

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WHO Grade 1 Emergencies [to 15 Dec 2018]

Afghanistan

Chad

Indonesia - Sulawesi earthquake 2018

Kenya

Lao People's Democratic Republic

Mali

Namibia - viral hepatitis

Peru

Philippines - Typhoon Mangkhut

Tanzania

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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.

Yemen - *No new announcements identified.*

Syrian Arab Republic - *No new announcements identified.*

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UN OCHA – Corporate Emergencies

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

Ethiopia

:: Ethiopia Humanitarian Bulletin Issue 69 | 25 November - 9 December 2018

Some 8 million people are projected to continue to receive humanitarian assistance in 2019, requiring US\$1.2 billion.

Somalia - *No new announcements identified.*

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"Other Emergencies"

Indonesia: Central Sulawesi Earthquake – *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 15 Dec 2018]

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

:: 19: Situation report on the Ebola outbreak in North Kivu 12 December 2018

:: DONs [Ebola virus disease – Democratic Republic of the Congo](#) 13 December 2018

[See Milestones above for more detail]

MERS-CoV [to 15 Dec 2018]

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

- *No new announcements identified.*

Yellow Fever [to 15 Dec 2018]

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

- *No new announcements identified.*

Zika virus [to 15 Dec 2018]

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

- *No new announcements identified.*

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WHO & Regional Offices [to 15 Dec 2018]

News Release

Nearly 30 million sick and premature newborns in dire need of treatment every year

Global coalition calls for better care and stronger legislation to save babies on the brink of death
13 December 2018 NEW DELHI/ GENEVA /NEW YORK

Tanzania is first African country to reach an important milestone in the regulation of medicines

News Release

Brazzaville / 10 December 2018: Tanzania is the first confirmed country in Africa to achieve a well-functioning, regulatory system for medical products according to the World Health Organization (WHO). This means that the Tanzania Food and Drug authority (TFDA) has made considerable improvements in recent years in ensuring medicines in the healthcare system are of good quality, safe and produce the intended health benefit.

"This is a major African milestone and we are very proud of Tanzania's achievement, which we hope will inspire other countries in the region," says Dr Matshidiso Moeti, WHO Regional Director for Africa. "Access to medicines alone, without quality assurance, is not enough. With this milestone Tanzania makes a big step towards improving the quality of its health care services."

Medicines are used to prevent illnesses and treat diseases, helping many people to lead full and productive lives. However, if produced, stored or transported improperly, if falsified, or used incorrectly or abused, medicines can be hazardous and can lead to hospitalization and even

death. For these reasons, it is important to have effective regulatory systems that also serve to promote timely access to quality medicines.

Fewer than 30% of the world's medicines regulatory authorities are considered to have the capacity to perform the functions required to ensure medicines, vaccines and other health products actually work and do not harm patients. For that reason, WHO and African governments have intensified efforts to bolster the capacity of regulating medicines in the region.

Over the past years WHO has been supporting African countries, including Tanzania to strengthen their regulatory entities.

"The core of WHO's work is to empower countries through support and knowledge transfer so that they can expand access to health services for their populations," says Mariangela Simao, WHO Assistant Director General for Access to Medicines, Vaccines and Pharmaceuticals. "If countries want to improve health outcomes, they first need to ensure access to safe and quality medical products that actually work and benefit patients."...

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[Weekly Epidemiological Record, 14 December 2018, vol. 93, 50 \(pp. 681–692\)](#)

:: Schistosomiasis and soiltransmitted helminthiasis: numbers of people treated in 2017

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WHO Regional Offices

Selected Press Releases, Announcements

WHO African Region AFRO

Selected Featured News

:: WHO reviews the Expanded Programme on Immunization/ Polio Eradication Initiative to improve immunization and surveillance strategies [South Sudan] 15 December 2018

:: Members of Parliament commit to advocating for the attainment of Universal Health Coverage in Uganda 13 December 2018

:: Liberia Commemorates World Infection Prevention and Control (IPC) Week 12 December 2018

WHO Region of the Americas PAHO

:: PAHO urges collective action to ensure that everyone, everywhere can access health care (12/13/2018)

:: As talks get underway at COP24, MERCOSUR Ministers of Health commit to prioritize health in climate change adaptation plans (12/10/2018)

WHO South-East Asia Region SEARO

- *No new announcement identified*

WHO European Region EURO

:: Milestones on the road to universal health coverage 11-12-2018

WHO Eastern Mediterranean Region EMRO

:: WHO delivers surgical supplies to meet the needs in the occupied Palestinian territory

14 December 2018

:: Moroccan House of Representatives votes for a 50% increase in the tax on sugar-sweetened beverages 13 December 2018

:: A life pursuing eradication 11 December 2018

Mohamed Shire, a polio eradication expert from Somalia, speaks about lessons from a life tirelessly working to eradicate first smallpox, then polio

WHO Western Pacific Region

:: Exercise Crystal: Ten years of strengthening communication between countries and WHO during emergencies 14 December 2018

A highly infectious strain of deadly bacteria has been released at a music festival and other public events in multiple countries—this is the fictional scenario that confronted participants in Exercise Crystal from 4 to 5 December.

Representatives from 29 countries and areas across the Western Pacific Region took part in the annual simulation exercise, testing their communication and coordination with the World Health Organization (WHO) during outbreaks or public health emergencies...

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CDC/ACIP [to 15 Dec 2018]

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

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

No new digest content identified.

.....

Africa CDC [to 15 Dec 2018]

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

No new digest content identified.

.....

China CDC

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

New website launched...no "news" or "announcements" page identified.

National Health Commission of the People's Republic of China

<http://en.nhfpc.gov.cn/>

Selected Updates/ Press Releases/ Notices

Online drug tracing system in the pipeline

China will build an online drug tracing system for vaccine, anesthetic drugs and psychoactive drugs.

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Announcements

BMGF - Gates Foundation [to 15 Dec 2018]

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

No new digest content identified.

Bill & Melinda Gates Medical Research Institute [to 15 Dec 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 15 Dec 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 15 Dec 2018]

<http://cepi.net/>

Press releases

CEPI partners with Imperial College to develop transformative rapid-response technology to create vaccines against emerging infectious diseases

Oslo, Norway, Dec 10, 2018 — The Coalition for Epidemic Preparedness Innovations (CEPI) and Imperial College London have announced a partnering agreement, worth up to USD8.4 million, to develop a self-amplifying RNA (saRNA) vaccine platform that enables tailored—just-in-time—vaccine production against multiple viral pathogens.

The idea behind this saRNA approach is to harness the body's own cell machinery to make an antigen (ie, a foreign substance that induces an immune response) rather than injecting the antigen directly...

EDCTP [to 15 Dec 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

Latest news

No new digest content identified.

Emory Vaccine Center [to 15 Dec 2018]

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

Woodruff Health Sciences Center | Dec. 11, 2018

National Academy of Inventors names Rafi Ahmed as Fellow

The National Academy of Inventors (NAI) has named Rafi Ahmed, PhD, as an NAI 2018 Fellow. Ahmed is director of the Emory Vaccine Center, a Georgia Research Alliance Eminent Scholar, Charles Howard Candler Professor of Microbiology and Immunology in Emory University School of Medicine, investigator in the Emory Center for AIDS Research (CFAR) and a member of the Winship Cancer Institute...

European Medicines Agency [to 15 Dec 2018]

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

News and press releases

News: Meeting highlights from the Committee for Medicinal Products for Human Use (CHMP) 10-13 December 2018

14/12/2018

Press release: EMA Management Board: highlights of December 2018 meeting

14/12/2018

Committee for Medicinal Products for Veterinary Use (CVMP) meeting of 4-6 December 2018

Press release 07/12/2018

[Excerpt]

...The Committee adopted by consensus a positive opinion for an initial marketing authorisation application for Evant, from LABORATORIOS HIPRA S.A, a new vaccine for the active immunisation of chicks from 1 day of age against coccidiosis....

European Vaccine Initiative [to 15 Dec 2018]

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

No new digest content identified.

FDA [to 15 Dec 2018]

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

No new digest content identified.

December 12, 2018 –

Statement from FDA Commissioner Scott Gottlieb, M.D., on the agency's efforts to improve drug quality through vigilant oversight of data integrity and good manufacturing practice

December 11, 2018 –

Statement from FDA Commissioner Scott Gottlieb, M.D., on new actions advancing the agency's biosimilars policy framework

Fondation Merieux [to 15 Dec 2018]

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

Merieux Foundation co-organized event

Dengue pre-vaccination screening based on serostatus: rapid tests and implementation strategies

January 14 - 16, 2019 - Les Pensières Center for Global Health, Veyrier du Lac (France)

Gavi [to 15 Dec 2018]

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

14 December 2018

Japan to send Junior Professional Officers to work at Gavi

Japanese government will fund placements for talented young professionals at the Vaccine Alliance.

12 December 2018

Coalition for Epidemic Preparedness Innovation turns to IFFIm to accelerate funding for new vaccine development

IFFIm's frontloading capacity will boost CEPI's efforts to fight the deadliest diseases.

Global health leaders hail immunisation as shortest path to healthy lives

Gavi Mid-Term Review closes with commitments to accelerate immunisation programmes in the poorest countries to reach more children with lifesaving vaccines.

11 December 2018

Gavi and Mastercard join forces to reach more children with lifesaving vaccines

Strengthening efficiency and reach of health services in developing countries with digital immunisation records.

11 December 2018

Serum Founder wins inaugural 'Vaccine Hero' award

Dr Cyrus Poonawalla congratulated for life-long commitment to boosting vaccine coverage in the world's poorest countries.

11 December 2018

Gavi and Germany partner to harness blockchain technology

German government and the Vaccine Alliance to explore the application of blockchain technology to increase efficiency of immunisation programmes.

10 December 2018

Parsyl and Gavi announce supply chain strengthening partnership

Gavi to make Parsyl's quality assurance platform available in Uganda and Senegal to address last mile distribution challenge.

10 December 2018

South Korea pledges US\$15 million to immunise children in world's poorest countries

New funding will help Gavi, the Vaccine Alliance, vaccinate millions of children against deadly diseases.

10 December 2018

[UAE and Gavi convene leaders to focus on health for next generation](#)

High-level meeting to review access to vaccines in low-income countries and how to accelerate impact.

GHIT Fund [to 15 Dec 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

December 13, 2018

[GHIT Fund Announces New Investments in Vaccines for Dengue and Leishmaniasis, and Drug Screening for Malaria and Tuberculosis](#)

TOKYO, JAPAN (December 13, 2018)—The Global Health Innovative Technology (GHIT) Fund announced today a total of 520 million yen (US\$4.6 million*) to support four partnerships to develop new lifesaving drugs and vaccines for malaria, tuberculosis, dengue and leishmaniasis. This includes three new projects and one that will receive continued funding. (Appendix 1)

"At the GHIT Fund, we are delighted to accelerate open innovation between Japanese and non-Japanese R&D entities across the globe," BT Slingsby, the CEO of GHIT said. "With the new partnerships developed through this investment, we are further strengthening our work through global collaboration to meet the needs of neglected populations worldwide."

Including the investment projects announced today, GHIT has invested approximately 14.1 billion yen (US\$124 million*) in 77 global product development partnerships that leverage Japanese science and capabilities in pharmaceutical research and development. Currently, 23 discovery projects, 13 preclinical projects, and eight clinical trials are under way in low- and middle-income countries.

Global Fund [to 15 Dec 2018]

<https://www.theglobalfund.org/en/news/>

News

[Making Uzbekistan Malaria Free is Major Achievement](#)

11 December 2018

Hilleman Laboratories [to 15 Dec 2018]

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

No new digest content identified.

Human Vaccines Project [to 15 Dec 2018]

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

No new digest content identified.

IAVI [to 15 Dec 2018]

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

December 10, 2018

Six Distinguished Leaders in Global Health Join IAVI Board of Directors

NEW YORK – December 10, 2018 – The International AIDS Vaccine Initiative (IAVI) today announced that David L. Blumberg, Jim Connolly, John Nkengasong, Ph.D., John Shiver, Ph.D., Anne Simonds, and Rajeev Venkayya, M.D., have been appointed to IAVI's board of directors.

"IAVI is pleased that these accomplished leaders have joined our board. We look forward to their partnership as we work to translate scientific discoveries into affordable, accessible public health solutions," said [Mark Feinberg](#), M.D., Ph.D., president and CEO of IAVI. "Their deep expertise across the global health spectrum in the public, private, and nonprofit sectors will strengthen our organization as we explore new and better ways to address public health threats that disproportionately affect people living in poverty."...

:: DAVID L. BLUMBERG, Vice President, Teva Global Operations and Portfolio Compliance, Teva Pharmaceuticals

:: JIM CONNOLLY, Former President and CEO of Aeras

:: JOHN NKENGASONG, Director, Africa Centres for Disease Control and Prevention

:: JOHN SHIVER, Senior Vice President, Global Vaccine Research and Development, Sanofi Pasteur

:: ANNE SIMONDS, Global Leader, Health, Development and Social Enterprise, Spencer Stuart

:: RAJEEV VENKAYYA, President, Global Vaccine Business Unit, Takeda Pharmaceuticals

IFFIm

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

11 December 2018

Islamic Development Bank and IFFIm announce plans to collaborate on private placement

Sukuk aims to build on Gulf Cooperation Council countries' support for Gavi programmes.

IVAC [to 15 Dec 2018]

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

No new digest content identified.

IVI [to 15 Dec 2018]

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

IVI News & Announcements

[Undated]

Nature Communications study addresses MDR typhoid

New study in Nature Communications reveals high burden of multi-drug resistant (MDR) typhoid fever in sub-Saharan Africa associated with two predominant genotypes

IVI epidemiologist Se Eun Park and collaborating scientists report data from Typhoid Fever Surveillance in Africa (TSAP) program and other sources

JEE Alliance [to 15 Dec 2018]

<https://www.jeealliance.org/>
No new digest content identified.

MSF/Médecins Sans Frontières [to 15 Dec 2018]

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

*Selected News; Project Updates, Reports
Central American Migration*

US asylum restrictions are deepening Mexican...

Press Release 13 Dec 2018

:: Migrants from Central America are exposed to extreme levels of violence transiting through Mexico, no longer considered a safe country

:: US migration policies are stranding migrants and asylum seekers in Mexico, leaving them vulnerable to further violence

:: MSF urges the US and Mexico to address the issues at the cause of the crisis along the border

Iraq

Iraq's displaced see no hope on the horizon

Voices from the Field 12 Dec 2018

Refugees, IDPs and people on the move

"Migration is not a crime. Saving lives is not a crime"

Speech 11 Dec 2018

NIH [to 15 Dec 2018]

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

December 11, 2018

NIH to fund HIV care and prevention research in vulnerable southern U.S. communities

— New program leverages partnerships to discover sustainable, scalable interventions.

PATH [to 15 Dec 2018]

<https://www.path.org/media-center/>

No new digest content identified.

Sabin Vaccine Institute [to 15 Dec 2018]

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

No new digest content identified.

UNAIDS [to 15 Dec 2018]

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

Selected Press Releases/Reports/Statements

14 December 2018

[Ireland to support HIV services for the most vulnerable in the United Republic of Tanzania](#)

13 December 2018

[UNAIDS Board calls for immediate implementation of UNAIDS agenda for change](#)

12 December 2018

[The need to scale up HIV programmes for key populations in western and central Africa](#)

10 December 2018

[Launch of a global partnership to eliminate HIV-related stigma and discrimination](#)

Despite the existence of human rights obligations and policy commitments, HIV-related stigma and discrimination continues to be widespread around the world and in all sectors of society.

Following a call from civil society in 2017 to accelerate and scale up action to address stigma and discrimination, UNAIDS, UN Women, the United Nations Development Programme and the Global Network of People Living with HIV (GNP+) agreed to co-convene the **Global Partnership to Eliminate All Forms of HIV-Related Stigma and Discrimination**.

The global partnership was launched on 10 December on the 70th anniversary of the adoption of the Universal Declaration of Human Rights, during an event in Geneva, Switzerland...

...People living with HIV, adolescents, young people and key populations experience discrimination, including discrimination based on their gender and gender identity, race, ethnicity, age, drug use, sexual orientation and migration status. These added layers of stigma and discrimination increase their vulnerability to HIV and undermine their rights, including the right to health, work and education.

10 December 2018

[Rwanda's leadership provides model for advancing global agenda towards ending AIDS](#)

UNICEF [to 15 Dec 2018]

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

*Selected Press Releases/Reports/Statements
Statement*

[Yemen peace talks and Hudaydah ceasefire signal hope for country's children](#)

Statement by UNICEF Executive Director Henrietta Fore
13/12/2018

Press release

[Nearly 30 million sick and premature newborns in dire need of treatment every year](#)

Global coalition calls for better care and stronger legislation to save babies on the brink of death

13/12/2018

Press release

Children account for more than one third of Ebola cases in eastern Democratic Republic of the Congo – UNICEF

11/12/2018

[See Milestones above for detail]

Statement

UNICEF statement on the adoption of the Global Compact for Safe, Orderly and Regular Migration

Statement from UNICEF Director of Data, Research and Policy Laurence Chandy

10/12/2018

Vaccine Confidence Project [to 15 Dec 2018]

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

No new digest content identified.

Vaccine Education Center – Children’s Hospital of Philadelphia [to 15 Dec 2018]

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

No new digest content identified.

Wellcome Trust [to 15 Dec 2018]

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

News

We’re changing the way we fund early career researchers

14 December 2018

We are extending our partnership with the Academy of Medical Sciences to £8.3 million to support early career researchers moving into an independent role. Alongside this, we’re going to close our Seed Awards in Science in March 2019.

Opinion

Why we’re supporting public engagement beyond the UK

12 December 2018

The case for good public engagement in low- and middle-income countries is strong. But why, and what is Wellcome doing to ensure that our public engagement work makes a difference outside the UK?

News

Sir David Weatherall, 1933-2018

11 December 2018

A doctor and scientist of great compassion and intellect, Sir David Weatherall died on 8 December 2018. He was a member of Wellcome’s Board throughout the 1990s, helping to shape our support for science, particularly research in tropical medicine and genetics.

Explainer

With a mandate to develop new vaccines, CEPI needs global funding

10 December 2018

Vaccines are a vital part of fighting epidemics, but developing new ones is challenging, costly and complex. The Coalition for Epidemic Preparedness Innovation (CEPI) is a new model for funding vaccine development which could drastically change the way we tackle epidemics. Global partnerships between government, industry and philanthropy are at the heart of it.

The Wistar Institute [to 15 Dec 2018]

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

Press Release Dec. 13, 2018

[Nikon Small World: An Up-close Look at the Unseen World](#)

Wistar hosts top winners of the 2018 Nikon Small World Photomicrography Competition.

World Organisation for Animal Health (OIE) [to 15 Dec 2018]

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

No new digest content identified.

.....

BIO [to 15 Dec 2018]

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

Dec 14 2018

[BIO Statement on Hatch-Waxman Integrity Act of 2018](#) *[Introduction]*

"For almost 40 years, the groundbreaking law known as the Hatch-Waxman Act (HWA) has been highly successful in spurring the development of life-saving new treatments while at the same time vastly broadening the availability of low-cost generic pharmaceuticals."

DCVMN – Developing Country Vaccine Manufacturers Network [to 15 Dec 2018]

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

No new digest content identified.

IFPMA [to 15 Dec 2018]

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

10 December 2018

[Unjela Kaleem joins global pharma association as Director of Communications](#)

PhRMA [to 15 Dec 2018]

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

No new digest content identified.

Industry Watch [to 15 Dec 2018]

[Pfizer Initiates Phase 3 Program for 20-Valent Pneumococcal Conjugate Vaccine for the Prevention of Invasive Disease and Pneumonia in Adults Aged 18 Years and Older](#)

December 14, 2018 08:00 AM Eastern Standard Time

NEW YORK--(BUSINESS WIRE)--Pfizer Inc. (NYSE:PFE) announced today the initiation of a Phase 3 program for its 20-Valent pneumococcal conjugate vaccine (20vPnC) candidate, PF-06482077, for the prevention of invasive disease and pneumonia caused by *Streptococcus pneumoniae* serotypes in the vaccine in adults aged 18 years and older.

"While the full extent of Prevenar 13 protection of adults is still being realized, we anticipate our 20vPnC vaccine candidate will be the next important step to help protect adults from a substantial invasive pneumococcal disease and pneumonia burden, including disease caused by serotypes not yet covered by any available conjugate vaccine," said Kathrin U. Jansen, Ph.D., Senior Vice President and Head of Vaccine Research & Development, Pfizer. "As the industry leader in pneumococcal conjugate vaccination, we are proud to start the Phase 3 trials of our third generation pneumococcal vaccine, which received Breakthrough Therapy Designation by the FDA in September 2018."...

:: Merck and Instituto Butantan Announce Collaboration Agreement to Develop Vaccines to Protect Against Dengue Infections

December 12, 2018 10:30 AM Eastern Standard Time

KENILWORTH, N.J.--(BUSINESS WIRE)--Merck (NYSE:MRK), known as MSD outside the United States and Canada, and Instituto Butantan, Sao Paulo, Brazil, a non-profit producer of immunobiologic products for Brazil today announced a collaboration agreement to develop vaccines to protect against dengue virus disease, the mosquito-borne infection. Instituto Butantan and Merck have licensed certain rights from National Institute of Allergy and Infectious Diseases (NIAID), part of the United States National Institutes of Health (NIH), for the development of live attenuated tetravalent vaccines (LATV). Instituto Butantan's dengue vaccine candidate, TV003, is currently being evaluated in a large Phase 3 study in Brazil.

"By sharing data from our ongoing vaccine development programs, Instituto Butantan and Merck are better positioned to achieve our goal of reducing the significant human and economic toll of dengue virus in Brazil and around the world," said Dr. Dimas Covas, director, Instituto Butantan. "We look forward to collaborating with Merck, an established global leader in vaccine development."

Under the agreement, Merck and Instituto Butantan have agreed to collaborate to share clinical data and other learnings from their respective dengue vaccine development programs, both derived from licensed materials from the NIAID. Instituto Butantan will receive a \$26 million upfront payment from Merck and is eligible to receive up to \$75 million for the achievement of certain milestones related to the development and commercialization of Merck's investigational vaccine as well as potential royalties on sales. Instituto Butantan will retain responsibility for the manufacturing and commercialization of their investigational vaccine, TV003, in Brazil...

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Journal Watch

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

to our work. Successful access to some of the links provided may require subscription or other access arrangement unique to the publisher.

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

American Journal of Infection Control

December 2018 Volume 46, Issue 12, p1319-1424, e75-e90

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

[Reviewed earlier]

American Journal of Preventive Medicine

December 2018 Volume 55, Issue 6, p759-944

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

[Reviewed earlier]

American Journal of Public Health

December 2018 108(12)

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

[Reviewed earlier]

American Journal of Tropical Medicine and Hygiene

Volume 99, Issue 6, 2018

<http://www.ajtmh.org/content/journals/14761645/99/6>

[Reviewed earlier]

Annals of Internal Medicine

4 December 2018 Vol: 169, Issue 11

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

[Reviewed earlier]

BMC Cost Effectiveness and Resource Allocation

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

(Accessed 15 Dec 2018)

[No new digest content identified]

BMJ Global Health

December 2018 - Volume 3 - 6

<https://gh.bmj.com/content/3/6>

[Reviewed earlier]

BMC Health Services Research

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

(Accessed 15 Dec 2018)

[No new digest content identified]

BMC Infectious Diseases

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

(Accessed 15 Dec 2018)

Research article

[Bibliometric analysis of global Lassa fever research \(1970–2017\): a 47 – year study](#)

Lassa fever has been a public health concern in the West African sub-region where it is endemic and a latent threat to the world at large. We investigated the trend in Lassa fever research using bibliometric a...

Authors: Henshaw Uchechi Okoroiwu, Francisco López-Muñoz and F. Javier Povedano-Montero

Citation: BMC Infectious Diseases 2018 18:639

Published on: 10 December 2018

BMC Medical Ethics

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

(Accessed 15 Dec 2018)

[No new digest content identified]

BMC Medicine

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

(Accessed 15 Dec 2018)

[No new digest content identified]

BMC Pregnancy and Childbirth

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

(Accessed 15 Dec 2018)

[No new digest content identified]

BMC Public Health

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

(Accessed 15 Dec 2018)

Research article

[AVADAR \(Auto-Visual AFP Detection and Reporting\): demonstration of a novel SMS-based smartphone application to improve acute flaccid paralysis \(AFP\) surveillance in Nigeria](#)

Eradication of polio requires that the acute flaccid paralysis (AFP) surveillance system is sensitive enough to detect all cases of AFP, and that such cases are promptly reported and investigated by disease su...

Authors: Faisal M. B. Shuaib, Philip F. Musa, Sisay Tegegne Gashu, Chima Onoka, Salihu Abdullahi Ahmed, Murtala Bagana, Michael Galway, Fiona Braka, Ticha Johnson Muluh, Richard Banda, Godwin Akpan, Ajiboye Tunji, Umar Kabo Idris, Adedolapo Olusoga, Patrick Briand, Nwanyibuife Obiako...

Citation: BMC Public Health 2018 18(Suppl 4):1305

Published on: 13 December 2018

Research

Transboundary nomadic population movement: a potential for import-export of poliovirus

Nomadic populations have a considerably higher risk of contracting a number of diseases but, despite the magnitude of the public health risks involved, they are mostly underserved with few health policies or p...

Authors: Samuel Bawa, Mojisola Afolabi, Khalid Abdelrahim, Goni Abba, Adamu Ningi, Salome Yakubu Tafida, Sisay G. Tegegne, Charity Warigon, Terna Nomhwange, Sadiq Abubakar Umar, Aron Aregay, Ahmed Fanti, Bakoji Ahmed, Peter Nsubuga, Usman Adamu, Fiona Braka...

Citation: BMC Public Health 2018 18(Suppl 4):1316

Published on: 13 December 2018

Research

Distribution pattern of poliovirus potentially infectious materials in the phase 1b medical laboratories containment in conformity with the global action plan III

The containment of poliovirus infectious/potentially infectious materials in all biomedical facilities in Nigeria remain crucial to maintaining gains recorded towards polio eradication. Activities involved in ...

Authors: Bassey Enya Bassey, Fiona Braka, Faisal Shuaib, Richard Banda, Sisay Gashu Tegegne, Johnson Muluh Ticha, Walla Hamisu Abdullalhi, Olatunji Mathew Kolawole and Yusuf Kabir

Citation: BMC Public Health 2018 18(Suppl 4):1319

Published on: 13 December 2018

Research

Polio eradication in Nigeria: evaluation of the quality of acute flaccid paralysis surveillance documentation in Bauchi state, 2016

Nigeria is the only country in Africa that is yet to be certified as polio free. Surveillance for acute flaccid paralysis (AFP) is the foundation of the polio eradication initiative since it provides informati...

Authors: Adamu Ibrahim Ningi, Faisal Shuaib, Luka Mangveep Ibrahim, Jalal-Eddeen Abubakar Saleh, Khalid Abdelrahim, Isah Mohammed Bello, Bashir Abba, Ticha Jonhson Muluh, Fiona Braka, Sisay G. Tegegne, Abdullahi Wallah, Charles Korir, Samuel Bawa, Mahmood Saidu and Peter Nsubuga

Citation: BMC Public Health 2018 18(Suppl 4):1307

Published on: 13 December 2018

Research

Stopping circulatory vaccine-derived poliovirus in Kaduna state by scaling up special interventions in local government areas along rivers of interest- kamacha basin experience, 2013–2015

The Kamacha river is one of the five polio environmental surveillance sites in Kaduna State where 13 circulating vaccine-derived polioviruses (cVDPDs) were isolated between 2014 and 2015. Kamacha river account...

Authors: Audu I. Musa, Faisal Shuaib, Fiona Braka, Pascal Mkanda, Richard Banda, Charles Korir, Sisay G. Tegegne, Suleiman Abdullahi, Gregory C. Umeh, Terna I. Nomhwange, Hadiza Aliyu Iyal, Sambo Ishaku, Usman Adamu, Eunice Damisa, Murtala Bagana, Victor Gugong...

Citation: BMC Public Health 2018 18(Suppl 4):1303

Published on: 13 December 2018

Research

Assessment of unmet needs to address noncompliant households during polio supplemental immunization activities in Kaduna state, 2014–2016

Despite concerted global efforts being made to eradicate poliomyelitis, the wild poliovirus still circulates in three countries, including Nigeria. In addition, Nigeria experiences occasional outbreaks of the ...

Authors: Hadiza Aliyu Iyal, Faisal Shuaib, Madubu Dauda, Abdullahi Suleiman, Fiona Braka, Sisay G. Tegegne, Peter Nsubuga, Terna Nomhwange, Yared G. Yehualashet, Sambo Ishaku, Charity Warigon, Furera Zakari, Gregory Umeh, Lami Samaila, Basirat Abdullahi, Kulchumi Hammanyero...

Citation: BMC Public Health 2018 18(Suppl 4):1309

Published on: 13 December 2018

Research

Conduct of vaccination in hard-to-reach areas to address potential polio reservoir areas, 2014–2015

The Global Vaccine Action Plan (GVAP) seeks to achieve the total realization of its vision through equitable access to immunization as well as utilizing the immunization systems for delivery of other primary h...

Authors: Samuel Bawa, Faisal Shuaib, Mahmoud Saidu, Adamu Ningi, Suleiman Abdullahi, Bashir Abba, Audu Idowu, Jibrin Alkasim, Kulchumi Hammanyero, Charity Warigon, Sisay G. Tegegne, Richard Banda, Charles Korir, Yared G. Yehualashet, Tesfaye Bedada, Chukwuji Martin...

Citation: BMC Public Health 2018 18(Suppl 4):1312

Published on: 13 December 2018

Research

Impact of engaging security personnel on access and polio immunization outcomes in security-inaccessible areas in Borno state, Nigeria

Nigeria was polio free for almost 2 years but, with the recent liberation of areas under the captivity of insurgents, there has been a resurgence of polio cases. For several years, these inaccessible areas did...

Authors: Loveday Nkwogu, Faisal Shuaib, Fiona Braka, Pascal Mkanda, Richard Banda, Charles Korir, Samuel Bawa, Sule Mele, Mahmud Saidu, Hyelni Mshelia, Aliyu Shettima, Sisay G. Tegegne, Yared G. Yehualashet, Usman Adamu, Peter Nsubuga, Rui G. Vaz...

Citation: BMC Public Health 2018 18(Suppl 4):1311

Published on: 13 December 2018

Research

Targeting the last polio sanctuaries with Directly Observed Oral Polio Vaccination (DOPV) in northern Nigeria, (2014–2016)

The declaration of poliomyelitis eradication as a programmatic emergency for global public health by the 65th World Health Assembly in 2012 necessitated innovations and strategies to achieve results. Review of...

Authors: Charles Korir, Faisal Shuaib, Usman Adamu, Samuel Bawa, Audu Musa, Abba Bashir, Ayodeji Isiaka, Adamu Ningi, Charity Warigon, Banda Richard, Braka Fiona, Mkanda Pascal, Nkwogu Loveday, Sisay G. Tegegne, Mohammed Abdul-Aziz, Abdullahi Suleiman...

Citation: BMC Public Health 2018 18(Suppl 4):1314

Published on: 13 December 2018

Research

Lessons learnt from implementing community engagement interventions in mobile hard-to-reach (HTR) projects in Nigeria, 2014–2015

The year 2014 was a turning point for polio eradication in Nigeria. Confronted with the challenges of increased numbers of polio cases detected in rural, hard-to-reach (HTR), and security-compromised areas of ...

Authors: Kulchumi Isa Hammanyero, Samuel Bawa, Fiona Braka, Bassey Enya Bassey, Akinola Fatiregun, Charity Warigon, Yared G. Yehualashet, Sisay Gashu Tegene, Richard Banda, Charles Korir, Tesfaye Bedada Erbetto, Martin Chukwuji, Pascal Mkanda, Usman Saidu Adamu and Peter Nsubuga

Citation: BMC Public Health 2018 18(Suppl 4):1306

Published on: 13 December 2018

Research

Acute flaccid paralysis (AFP) surveillance intensification for polio certification in Kaduna state, Nigeria: lessons learnt, 2015–2016

Nigeria has made remarkable progress in its current efforts to interrupt wild poliovirus transmission despite the re-emergence of wild poliovirus in 2016. The gains made in Nigeria have been achieved through c...

Authors: Gregory C. Umeh, Faisal Shuaib, Audu Musa, Sisay G. Tegegne, Fiona Braka, Pascal Mkanda, Richard Banda, Usman Adamu, Terna I. Nomhwange, Eyiotoyo Arenyeka, Semeeh A. Omoleke, Ticha M. Johnson, Kehinde Craig, Ibrahim Idris, Hadiza Iyal, Ishaku G. Sambo...

Citation: BMC Public Health 2018 18(Suppl 4):1310

Published on: 13 December 2018

Research

Towards an effective poliovirus laboratory containment strategy in Nigeria

The Global Commission for the Certification of the Eradication of Poliomyelitis will declare the world free of wild poliovirus transmission when no wild virus has been found in at least 3 consecutive years, an...

Authors: Johnson Muluh Ticha, Kolawole Olatunji Matthew, Abdullahi Walla Hamisu, Braka Fiona, Pascal Mkanda, Peter Nsubuga, Eberto Tesfaye, Kehinde Craig, Etsano Andrew, Obi Emelife, Faisal Shuaib, Akinkugbe Folasade, Johnson Adeniji, Usman Adamu, Mohammed Dallatu, Geoffrey Oyeyinka...

Citation: BMC Public Health 2018 18(Suppl 4):1304

Published on: 13 December 2018

Research

Mobilizing political support proved critical to a successful switch from tOPV to bOPV in Kano, Nigeria 2016

Kano is one of the high-risk states for polio transmission in Northern Nigeria. The state reported more cases of wild polioviruses (WPVs) than any other state in the country. The Nigeria Demographic and Health...

Authors: Bashir Abba, Sule Abdullahi, Samuel Bawa, Kabir Ibrahim Getso, Imam Wada Bello, Charles Korir, Audu Musa, Fiona Braka, Adamu Ningi, Peter Nsubuga, Richard Banda, Sisay G. Tegegne, Faisal Shuaib, Usman Said Adamu and Sulaiman Haladu

Citation: BMC Public Health 2018 18(Suppl 4):1302

Published on: 13 December 2018

Research article

Impact of vaccine delays at the 2, 4, 6 and 12 month visits on incomplete vaccination status by 24 months of age in Quebec, Canada

Timeliness in the administration of recommended vaccines is often evaluated using vaccine delays and provides more information regarding the susceptibility of children to vaccine-preventable diseases compared ...

Authors: Marilou Kiely, Nicole Boulianne, Denis Talbot, Manale Ouakki, Maryse Guay, Monique Landry, Chantal Sauvageau and Gaston De Serres

Citation: BMC Public Health 2018 18:1364

Published on: 11 December 2018

BMC Research Notes

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

Research note

Hepatitis B vaccination coverage among healthcare workers at a tertiary hospital in Rwanda

We evaluated post-vaccination immunity status and describe potential risk factors associated with the lack of response among healthcare workers (HCWs) at a tertiary care hospital in Kigali, Rwanda.

Authors: Claude Mambo Muvunyi, Jean De Dieu Harelimana, Osee Rurambya Sebatunzi, Aschariya Chinma Atmaprakash, Eric Seruyange, Florence Masaisa, Olivier Manzi, Martin Nyundo and Théobald Hategekimana

Citation: BMC Research Notes 2018 11:886

Published on: 13 December 2018

BMJ Open

December 2018 - Volume 8 - 12

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

[New issue; No digest content identified]

Bulletin of the World Health Organization

Volume 96, Number 12, December 2018, 797-864

<http://www.who.int/bulletin/volumes/96/12/en/>

[Reviewed earlier]

Child Care, Health and Development

Volume 45, Issue 1 Pages: 1-145 January 2019

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

[New issue; No digest content identified]

Clinical Therapeutics

December 2018 Volume 40, Issue 12, p1957-2196

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

Review

Pharmacovigilance: An Overview

Paul Beninger

p1991–2004

Published online: August 17, 2018

Abstract

Purpose

Pharmacovigilance (PV) is a relatively new discipline in the pharmaceutical industry. Having undergone rapid growth over the past 2 decades, PV now touches many other disciplines in the research and development enterprise. With its growth has come a heightened awareness and interest in the medical community about the roles that PV plays. This article provides insights into the background and inner workings of PV.

Methods

This narrative review covers the core PV activities and other major areas of the pharmaceutical enterprise in which PV makes significant contributions.

Findings

Drug safety monitoring activities were organized by the US Food and Drug Administration and academic medical centers in the early 1950s in response to growing concern over the occurrence of aplastic anemia and other blood dyscrasias associated with the use of chloramphenicol. This experience was codified in the 1962 Kefauver-Harris Amendments to the Federal Food, Drug and Cosmetic Act as adverse event evaluation and reporting requirements. The ensuing decades have seen the development of core PV functions for pharmaceutical companies: case management, signal management, and benefit-risk management. A broader scope of PV has developed to include the following major activities: support of patient safety during the conduct of clinical trials through assuring proper use of informed consent and institutional review boards (ethics committees); selection of the first safe dose for use in humans, based on pharmacologic data obtained in animal studies; development of the safety profile for proper use of a new molecular entity and appropriate communication of that information to the range of relevant stakeholders; attendance to surveillance activities through a set of signal management processes; monitoring the manufactured product itself through collaborative activities with manufacturing professionals; management of benefit–risk to assure appropriate use in medical care after marketing; and maintenance of inspection readiness as a corporate cultural process.

Implications

The extent and pace of change promise to accelerate with the integration of biomedical informatics, analytics, artificial intelligence, and machine learning. This progress has

implications for the development of the next generation of PV professionals who will need to be trained in entirely new skill sets to lead continued improvements in the safe use of pharmaceuticals.

Clinical Trials

Volume 15 Issue 6, December 2018

<http://journals.sagepub.com/toc/ctja/15/6>

[Reviewed earlier]

Conflict and Health

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

[Accessed 15 Dec 2018]

[No new digest content identified]

Contemporary Clinical Trials

Volume 75 Pages 1-86 (December 2018)

<https://www.sciencedirect.com/journal/contemporary-clinical-trials/vol/75/suppl/C>

[New issue; No digest content identified]

Current Opinion in Infectious Diseases

December 2018 - Volume 31 - Issue 6

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

[Reviewed earlier]

Developing World Bioethics

Volume 18, Issue 4 Pages: 307-432 December 2018

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

Articles

[**The views of ethics committee members and medical researchers on the return of individual research results and incidental findings, ownership issues and benefit sharing in biobanking research in a South Indian city**](#)

[Manjulika Vaz, Mario Vaz, Srinivasan K](#)

Pages: 321-330

First Published: 17 May 2017

[**Mapping research ethics committees in Africa: Evidence of the growth of ethics review of health research in Africa**](#)

[Boitumelo Mokgatla, Carel IJsselmuiden, Doug Wassenaar, Mary Kasule](#)

Pages: 341-348

First Published: 03 May 2017

[**Informed consent, community engagement, and study participation at a research site in Kigali, Rwanda**](#)

Jennifer Ilo van Nuil, Evelyne Kestelyn, Grace Umutoni, Lambert Mwambarangwe, Marie M. Umulisa, Janneke van de Wijgert, Raffaella Ravinetto

Pages: 349-356

First Published: 11 May 2017

Haitian people's expectations regarding post-disaster humanitarian aid teams' actions

Lonozou Kpanake, Ronald Jean-Jacques, Paul Clay Sorum, Etienne Mullet

Pages: 385-393

First Published: 28 July 2017

Open Access

Community sensitization and decision-making for trial participation: A mixed-methods study from The Gambia

Susan Dierickx, Sarah O'Neill, Charlotte Gryseels, Edna Immaculate Anyango, Melanie, annister-Tyrrell, Joseph Okebe, Julia Mwesiwa, Fatou Jaiteh, René Gerrets, Raffaella Ravinetto, Umberto D'Alessandro, Koen Peeters Grietens

Pages: 406-419

First Published: 16 August 2017

Development in Practice

Volume 29, Issue 1, 2019

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

[Reviewed earlier]

Disasters

Volume 43, Issue 1 Pages: 1-217 January 2019

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

[New issue; No digest content identified]

EMBO Reports

01 November 2018; volume 19, issue 11

<http://embor.embopress.org/content/19/11?current-issue=y>

[New issue; No digest content identified]

Emerging Infectious Diseases

Volume 24, Number 12—December 2018

[Reviewed earlier]

Epidemics

Volume 25 Pages 1-112 (December 2018)

<https://www.sciencedirect.com/journal/epidemics/vol/25/suppl/C>

[Reviewed earlier]

Epidemiology and Infection

Volume 146 - Issue 16 - December 2018

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

[Reviewed earlier]

The European Journal of Public Health

Volume 28, Issue 6, December 2018

<https://academic.oup.com/eurpub/issue/28/6>

Editorials

[Primary health care 40 years after Alma Ata 1978: addressing new challenges in a changing society](#)

Jan De Maeseneer; Sally Kendall

Extract

In the 40 years since the Alma Ata Declaration the world has changed enormously. On the one hand, the world is much richer and healthier. On the other hand, those advances are unevenly spread, with growing numbers of people living precarious existences, many displaced from their homes. Health care has also changed. Advances in technology, including the advent of Big Data, coupled with adoption of evidence-based models of care have been transformational, especially for primary health care...

Genome Medicine

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

[Accessed 24 Nov 2018]

[No new digest content identified]

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)

Vol. 6, No. 3 October 03, 2018

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

[Reviewed earlier]

Global Public Health

Volume 14, 2019 Issue 2

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

Article

[Rituals of global health: Negotiating the World Health Assembly](#)

Rachel Irwin & Richard Smith

Pages: 161-174

Published online: 13 Aug 2018

Article

Global governance and the broader determinants of health: A comparative case study of UNDP's and WTO's engagement with global health

Unni Gopinathan, Nick Watts, Alexandre Lefebvre, Arthur Cheung, Steven J. Hoffman & John-Arne Røttingen

Pages: 175-189

Published online: 31 May 2018

Globalization and Health

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

[Accessed 15 Dec 2018]

[No new digest content identified]

Health Affairs

Vol. 37 , No. 11 November 2018

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

Patient Safety

[Reviewed earlier]

Health and Human Rights

Volume 20, Issue 2, December 2018

<https://www.hhrjournal.org/volume-20-issue-2-december-2018/>

Issue 20.2 features a special section: Special Section on Human Rights and the Social Determinants of Health and a General Papers section

[Reviewed earlier]

Health Economics, Policy and Law

Volume 14 - Issue 1 - January 2019

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

[New issue; No digest content identified]

Health Equity

Issue in Progress

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

[Reviewed earlier]

Health Policy and Planning

Volume 33, Issue 9, 1 November 2018

<https://academic.oup.com/heapol/issue/33/9>

[Reviewed earlier]

Health Research Policy and Systems

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

[Accessed 15 Dec 2018]

[No new digest content identified]

Humanitarian Exchange Magazine

Number 73, October 2018

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

Rohingya refugees in Bangladesh: the humanitarian response

More than 700,000 Rohingya refugees have arrived in Bangladesh since 25 August 2017 fleeing violence and persecution in Rakhine State, Myanmar. Over a million are sheltering in overcrowded camps without adequate assistance or protection. Stateless in Myanmar and denied refugee status in Bangladesh, the Rohingya have few rights or freedoms. Monsoons and cyclones are causing landslides, destroying shelters and infrastructure and disrupting services.

This edition of Humanitarian Exchange focuses on the humanitarian response to the Rohingya crisis. In the lead article, [Mark Bowden](#) outlines the historical, local and national political context in Bangladesh, and its operational implications. [Amal de Chickera](#) highlights the links between statelessness and displacement, and the international community's failure to prioritise human rights in its dealings both with Bangladesh and with Myanmar. [Puttanee Kangkun and John Quinley](#) document the persistent persecution and denial of rights the Rohingya have faced for decades. [Jeff Crisp](#) reflects on the premature, involuntary and unsafe return of Rohingya refugees to Myanmar in the 1970s and 1990s, and asks whether this could happen again.

[Sally Shevach](#) and colleagues explore how the 'localisation' agenda has influenced the operational response, and [Kerrie Holloway](#) draws on research by the Humanitarian Policy Group to test the common assumption that local actors necessarily have a better understanding of people's needs. [Nasif Rashad Khan](#) and colleagues and [Ashish Banik](#) reflect on their experiences of engaging with the international humanitarian response system. [Margie Buchanan-Smith and Marian Casey-Maslen](#) discuss evaluation findings relating to communication and community engagement, a theme taken up by [Nick Van Praag and Kai Hopkins](#), who report on a Ground Truth survey on refugees' perceptions of assistance. [Julia Brothwell](#) discusses the British Red Cross/Bangladesh Red Crescent involvement in disaster preparedness and risk reduction during the monsoon season, and [Gina Bark, Kate White and Amelie Janon](#) outline the consequences of long-term exclusion from basic healthcare services in increasing vulnerability to preventable diseases. [Matthew Wencel and colleagues](#) round off the issue with reflections on data collection coordination and other challenges associated with monitoring large concentrations of refugees.

Human Vaccines & Immunotherapeutics (formerly Human Vaccines)

Volume 14, Issue 10, 2018

<http://www.tandfonline.com/toc/khvi20/current>

Issue Special Focus: Vaccination in Africa

[Reviewed earlier]

Infectious Agents and Cancer

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

[Accessed 15 Dec 2018]

[No new digest content identified]

Infectious Diseases of Poverty

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

[Accessed 15 Dec 2018]

[No new digest content identified]

International Health

Volume 10, Issue 6, November 2018

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

[Reviewed earlier]

International Journal of Community Medicine and Public Health

Vol 5, No 12 (2018) December 2018

<http://www.ijcmph.com/index.php/ijcmph/issue/view/45>

[Reviewed earlier]

International Journal of Epidemiology

Volume 47, Issue 6, 1 December 2018

<https://academic.oup.com/ije/issue/47/5>

[Reviewed earlier]

International Journal of Human Rights in Healthcare

Volume 11 Issue 5 2018

<https://www.emeraldinsight.com/toc/ijhrh/11/5>

[Reviewed earlier]

International Journal of Infectious Diseases

December 2018 Volume 77, p1-118

[https://www.ijidonline.com/issue/S1201-9712\(18\)X0012-5](https://www.ijidonline.com/issue/S1201-9712(18)X0012-5)

[Reviewed earlier]

IRB: Ethics & Human Research

November-December 2018 Volume: 40 Issue: 6

<https://www.thehastingscenter.org/publications-resources/irb-ethics-human-research/>

[Reviewed earlier]

JAMA

December 11, 2018, Vol 320, No. 22, Pages 2283-2387

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

[New issue; No digest content identified]

Viewpoint

Institutional Conflicts of Interest and Public Trust

Francisco G. Cigarroa, MD; Bettie Sue Masters, PhD; Dan Sharphorn, JD

JAMA. 2018;320(22):2305-2306. doi:10.1001/jama.2018.18482

This Viewpoint discusses recent problems with undisclosed conflicts of interest and proposes broadening disclosure requirements beyond individuals to include the institutions funding the research.

Should Failure to Disclose Significant Financial Conflicts of Interest Be Considered Research Misconduct?

Jeffrey R. Botkin, MD, MPH

JAMA. 2018;320(22):2307-2308. doi:10.1001/jama.2018.17525

This Viewpoint proposes that failure of authors to completely disclose conflicts of interest (COIs) should be considered a form of research misconduct subject to institutional review and sanctions if appropriate to establish a basic standard of consistent COI reporting.

Editorial

Conflicts of Interests, Authors, and Journals - New Challenges for a Persistent Problem

Howard Bauchner, MD; Phil B. Fontanarosa, MD, MBA; Annette Flanagan, RN, MA

JAMA Pediatrics

December 2018, Vol 172, No. 12, Pages 1111-1208

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

[Reviewed earlier]

JBIR Database of Systematic Review and Implementation Reports

November 2018 - Volume 16 - Issue 11

[Reviewed earlier]

Journal of Adolescent Health

December 2018 Volume 63, Issue 6, p663-804

[https://www.jahonline.org/issue/S1054-139X\(17\)X0027-X](https://www.jahonline.org/issue/S1054-139X(17)X0027-X)

[Reviewed earlier]

Journal of Community Health

Volume 43, Issue 6, December 2018

<https://link.springer.com/journal/10900/43/6/page/1>

[Reviewed earlier]

Journal of Empirical Research on Human Research Ethics

Volume 13 Issue 5, December 2018

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

[Reviewed earlier]

Journal of Epidemiology & Community Health

December 2018 - Volume 72 - 12

<https://jech.bmj.com/content/72/12>

[New issue; No digest content identified]

Journal of Evidence-Based Medicine

Volume 11, Issue 4 Pages: 217-291 November 2018

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

[Reviewed earlier]

Journal of Global Ethics

Volume 14, Issue 2, 2018

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

Special Issue: Reconciliation, Transitional and Indigenous Justice

[New issue; No digest content identified]

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

Volume 29, Number 4, November 2018

<https://muse.jhu.edu/issue/39355>

[Reviewed earlier]

Journal of Immigrant and Minority Health

Volume 20, Issue 6, December 2018

<https://link.springer.com/journal/10903/20/6/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, 15 Dec 2018

<https://academic.oup.com/jid/issue/217/1>
[Reviewed earlier]

Journal of Medical Ethics

December 2018 - Volume 44 - 12
<http://jme.bmj.com/content/current>
[Reviewed earlier]

Journal of Medical Internet Research

Vol 20, No 11 (2018): November
<https://www.jmir.org/2018/11>
[Reviewed earlier]

Journal of Medical Microbiology

Volume 67, Issue 11, November 2018
<http://jmm.microbiologyresearch.org/content/journal/jmm/67/11>
[Reviewed earlier]

Journal of Patient-Centered Research and Reviews

Volume 5, Issue 4 (2018)
<https://digitalrepository.aurorahealthcare.org/jpcrr/>
[Reviewed earlier]

Journal of the Pediatric Infectious Diseases Society (JPIDS)

Volume 7, Issue 4, December 2018
<https://academic.oup.com/jpids/issue>
On Vaccination

[Lemons and Lyme](#)

Stanley A Plotkin

Extract

The world is a curious place, as you may have noticed, or, more accurately, people have curious opinions. One might think that a disease that is estimated to occur in more than 300000 people each year would be one that everybody would like to prevent [1], but that is not the case for Lyme disease, which, in this country, is caused by *Borrelia burgdorferi sensu stricto*. Figure 1 shows the geographical distribution of cases [1]. It is odd that there is a lobby against the development and deployment of a vaccine against the disease by people who...

Journal of Pediatrics

December 2018 Volume 203, p1-470
<http://www.jpeds.com/current>
[Reviewed earlier]

Journal of Pharmaceutical Policy and Practice

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

[Accessed 15 Dec 2018]

[Reviewed earlier]

Journal of Public Health Management & Practice

November/December 2018 - Volume 24 - Issue 6

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

[Reviewed earlier]

Journal of Public Health Policy

Volume 39, Issue 4, November 2018

<https://link.springer.com/journal/41271/39/4/page/1>

[Reviewed earlier]

Journal of the Royal Society – Interface

November 2018; volume 15, issue 148

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

[Reviewed earlier]

Journal of Travel Medicine

Volume 25, Issue suppl_1, 1 May 2018

https://academic.oup.com/jtm/issue/25/suppl_1

Asian travel: from the rare to the difficult

[Reviewed earlier]

Journal of Virology

December 2018; Volume 92, Issue 24

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

[New issue; No digest content identified]

The Lancet

Dec 15, 2018 Volume 392 Number 10164 p2515-2654, e16

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

Editorial

[The right to health](#)

The Lancet

Human Rights Day is recognised annually on Dec 10, and this year is especially important since it is the 70th anniversary of the day that the UN General Assembly adopted the Universal Declaration of Human Rights. The Declaration, through its 30 Articles, proclaims the rights that everyone is entitled to as a human being, regardless of race, colour, religion, sex, language,

political or other opinion, national or social origin, property, birth, or other status. Today, Lawrence Gostin and colleagues, including the director-general of WHO, look back at the evolution of human rights in global health over the past 70 years and outline key messages for the future of health as a human right.

Gostin and colleagues describe how human rights became embedded in global health governance, beginning with WHO's Constitution in 1946, which enshrined "the highest attainable standard of health" as one of the fundamental rights of every human being. But the Cold War superpowers took divergent positions on human rights and although the Declaration of Alma-Ata reaffirmed health as a right in 1978, many governments proved unable to implement appropriate policies. Gostin and colleagues describe how it was not until the AIDS pandemic in the 1980s that momentum grew behind universal access to treatment. Global health law, such as the WHO Framework Convention on Tobacco Control, and security, through the International Health Regulations, helped to embed health-related rights. Now, WHO considers universal health coverage through strengthened primary health care as core to the right to health and to achieving the sustainable development goals.

Recognition of the importance of human rights in protecting health is fundamental and is as crucial today as it was in 1948. As a common standard of achievement for all nations, promoting respect for these rights and freedoms is critical. But with constant rights violations taking place worldwide, and global threats such as climate change, armed conflict, and mass migration, the future of rights-based global health efforts is in the balance.

Articles

[Global patterns of mortality in international migrants: a systematic review and meta-analysis](#)

Robert W Aldridge, Laura B Nellums, Sean Bartlett, Anna Louise Barr, Parth Patel, Rachel Burns, Sally Hargreaves, J Jaime Miranda, Stephen Tollman, Jon S Friedland, Ibrahim Abubakar

Open Access

258 million people reside outside their country of birth; however, to date no global systematic reviews or meta-analyses of mortality data for these international migrants have been done. We aimed to review and synthesise available mortality data on international migrants.

[Health impacts of parental migration on left-behind children and adolescents: a systematic review and meta-analysis](#)

Gracia Fellmeth, Kelly Rose-Clarke, Chenyue Zhao, Laura K Buser, Yunting Zheng, Alessandro Massazza, Hacer Sonmez, Ben Eder, Alice Blewitt, Wachiraya Lertgrai, Miriam Orcutt, Katharina Ricci, Olaa Mohamed-Ahmed, Rachel Burns, Duleeka Knipe, Sally Hargreaves, Therese Hesketh, Charles Opondo, Delan Devakumar

Open Access

Globally, a growing number of children and adolescents are left behind when parents migrate. We investigated the effect of parental migration on the health of left behind-children and adolescents in low-income and middle-income countries (LMICs).

The Lancet Commissions

[The UCL–Lancet Commission on Migration and Health: the health of a world on the move](#)

Ibrahim Abubakar, Robert W Aldridge, Delan Devakumar, Miriam Orcutt, Rachel Burns, Mauricio L Barreto, Poonam Dhavan, Fouad M Fouad, Nora Groce, Yan Guo, Sally Hargreaves, Michael Knipper, J Jaime Miranda, Nyovani Madise, Bernadette Kumar, Davide Mosca, Terry McGovern, Leonard Rubenstein, Peter Sammonds, Susan M Sawyer, Kabir Sheikh, Stephen Tollman, Paul Spiegel, Cathy Zimmerman on behalf of the UCL–Lancet Commission on Migration and Health
Executive summary [excerpt]

With one billion people on the move or having moved in 2018, migration is a global reality, which has also become a political lightning rod. Although estimates indicate that the majority of global migration occurs within low-income and middle-income countries (LMICs), the most prominent dialogue focuses almost exclusively on migration from LMICs to high-income countries (HICs). Nowadays, populist discourse demonises the very same individuals who uphold economies, bolster social services, and contribute to health services in both origin and destination locations. Those in positions of political and economic power continue to restrict or publicly condemn migration to promote their own interests. Meanwhile nationalist movements assert so-called cultural sovereignty by delineating an us versus them rhetoric, creating a moral emergency.

In response to these issues, the UCL-Lancet Commission on Migration and Health was convened to articulate evidence-based approaches to inform public discourse and policy. The Commission undertook analyses and consulted widely, with diverse international evidence and expertise spanning sociology, politics, public health science, law, humanitarianism, and anthropology. The result of this work is a report that aims to be a call to action for civil society, health leaders, academics, and policy makers to maximise the benefits and reduce the costs of migration on health locally and globally. The outputs of our work relate to five overarching goals that we thread throughout the report...

Lancet Global Health

Dec 2018 Volume 6 Number 12 e1253-e1404

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

[Reviewed earlier]

Lancet Infectious Diseases

Dec 2018 Volume 18 Number 12 p1289-1410 e368-e407

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

[Reviewed earlier]

Lancet Respiratory Medicine

Dec 2018 Volume 6 Number 12 p885-962 e56-e57

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

[Reviewed earlier]

Maternal and Child Health Journal

Volume 22, Issue 12, December 2018

<https://link.springer.com/journal/10995/22/12/page/1>

[Reviewed earlier]

Medical Decision Making (MDM)

Volume 38 Issue 8, November 2018

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

[Reviewed earlier]

The Milbank Quarterly

A Multidisciplinary Journal of Population Health and Health Policy

Volume 96, Issue 3 Pages: 409-605 September 2018

<https://onlinelibrary.wiley.com/toc/14680009/current>

[Reviewed earlier]

Nature

Volume 564 Issue 7735, 13 December 2018

http://www.nature.com/nature/current_issue.html

Comment | 12 December 2018

[Debate ethics of embryo models from stem cells](#)

International discussion must guide research...

Nicolas Rivron, Martin Pera, [\[...\]](#) & Rosario Isasi

Nature Medicine

Volume 24 Issue 12, December 2018

<https://www.nature.com/nm/volumes/24/issues/12>

[Reviewed earlier]

Nature Reviews Immunology

Volume 18 Issue 12, December 2018

<https://www.nature.com/nri/volumes/18/issues/12>

[Reviewed earlier]

New England Journal of Medicine

December 13, 2018 Vol. 379 No. 24

<http://www.nejm.org/toc/nejm/medical-journal>

Perspective

[History of Medicine: Influenza Cataclysm, 1918](#)

David M. Morens, M.D., and Jeffery K. Taubenberger, M.D., Ph.D.

This year marks the centennial of an influenza pandemic that killed 50 million to 100 million people globally — arguably the single deadliest event in recorded human history. Evidence suggests that another pandemic at least as severe may occur one day.

Pediatrics

December 2018, VOLUME 142 / ISSUE 6
<http://pediatrics.aappublications.org/content/142/6?current-issue=y>
[Reviewed earlier]

Pharmaceutics

Volume 10, Issue 3 (September 2018)
<https://www.mdpi.com/1999-4923/10/3>
[Reviewed earlier]

PharmacoEconomics

Volume 36, Issue 12, December 2018
<https://link.springer.com/journal/40273/36/12/page/1>
[Reviewed earlier]

PharmacoEconomics & Outcomes News

Volume 817, Issue 1, December 2018
<https://link.springer.com/journal/40274/817/1/page/1>
[Reviewed earlier]

PLOS Currents: Disasters

<http://currents.plos.org/disasters/>
[Accessed 15 Dec 2018]
[No new digest content identified]

PLoS Currents: Outbreaks

<http://currents.plos.org/outbreaks/>
[Accessed 15 Dec 2018]
[No new digest content identified]

PLoS Medicine

<http://www.plosmedicine.org/>
(Accessed 15 Dec 2018)
[No new digest content identified]

PLoS Neglected Tropical Diseases

<http://www.plosntds.org/>
(Accessed 15 Dec 2018)
Research Article

[Economic impact of dengue in Mexico considering reported cases for 2012 to 2016](#)

Adriana Zubieta-Zavala, Malaquias López-Cervantes, Guillermo Salinas-Escudero, Adrian Ramírez-Chávez, José Ramos Castañeda, Sendy Isarel Hernández-Gaytán, Juan Guillermo López Yescas, Luis Durán-Arenas

| published 14 Dec 2018 PLOS Neglected Tropical Diseases

<https://doi.org/10.1371/journal.pntd.0006938>

Abstract

Background

Given that dengue disease is growing and may progress to dengue hemorrhagic fever (DHF), data on economic cost and disease burden are important. However, data for Mexico are limited.

Methodology/Principal findings

Burden of dengue fever (DF) and DHF in Mexico was assessed using official databases for epidemiological information, disabilities weights from Shepard et al, the reported number of cases and deaths, and costs. Overall costs of dengue were summed from direct medical costs to the health system, cost of dengue to the patient (out-of-pocket expenses [medical and non-medical], indirect costs [loss of earnings, patient and/or caregiver]), and other government expenditures on prevention/surveillance. The first three components, calculated as costs per case by a micro-costing approach (PAATI; program, actions, activities, tasks, inputs), were scaled up to overall cost using epidemiology data from official databases. PAATI was used to calculate cost of vector control and prevention, education, and epidemiological surveillance, based on an expert consensus and normative construction of an ideal scenario.

Disability-adjusted life years (DALYs) for Mexico in 2016 were calculated to be 2283.46 (1.87 per 100,000 inhabitants). Overall economic impact of dengue in Mexico for 2012 was US\$144 million, of which US\$44 million corresponded to direct medical costs and US\$5 million to the costs from the patient's perspective. The estimated cost of prevention/surveillance was calculated with information provided by federal government to be US\$95 million. The overall economic impact of DF and DHF showed an increase in 2013 to US\$161 million and a decrease to US\$133, US\$131 and US\$130 million in 2014, 2015 and 2016, respectively.

Conclusions/Significance

The medical and economic impact of dengue were in agreement with other international studies, and highlight the need to include governmental expenditure for prevention/surveillance in overall cost analyses given the high economic impact of these, increasing the necessity to evaluate its effectiveness.

Author summary

Dengue fever is caused by a flavivirus transmitted predominantly by the mosquito *Aedes aegypti*. Infection causes a broad spectrum of clinical signs and symptoms, from mild disease, such as dengue fever to a life threatening form known as dengue hemorrhagic fever. The disease is widespread in tropical regions. Measures such as vector control can slow the spread of infection, and most countries where the disease is endemic, Mexico included, have programs in place to this end. However, faced with other health issues that also require attention, it is important to quantify the suffering caused by dengue and also its economic costs. In this study, we aimed to produce detailed figures for Mexico to complement and refine those available from international studies. Such information will help guide how the money budgeted for health in dengue is spent.

PLoS One

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

[Accessed 15 Dec 2018]

Research Article

The demographics of vaccine hesitancy in Shanghai, China

Vaccine hesitancy has been little studied in low- and middle-income countries but is a potential concern because vaccine refusal may increase the burden of infectious diseases and impede control efforts. The aim of this study was to compare vaccine hesitancy between locals, long-time city residents, and non-locals, who have more recently moved to the city from either other urban or rural areas, in Shanghai, China

Jia Ren, Abram L. Wagner, Anna Zheng, Xiaodong Sun, Matthew L. Boulton, Zhuoying Huang, Brian J. Zikmund-Fisher

Research Article | published 13 Dec 2018 PLOS ONE

<https://doi.org/10.1371/journal.pone.0209117>

PLoS Pathogens

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

[Accessed 15 Dec 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 15 Dec 2018]

Insights from direct studies on human dengue infections

Scott B. Halstead

PNAS published ahead of print December 13, 2018.

<https://doi.org/10.1073/pnas.1819607116>

Prehospital & Disaster Medicine

Volume 33 - Issue 5 - October 2018

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

[Reviewed earlier]

Preventive Medicine

Volume 117, Pages 1-114 (December 2018)

<https://www.sciencedirect.com/journal/preventive-medicine/vol/117/suppl/C>

Behavior Change, Health, and Health Disparities 2018: Tobacco Regulatory Science

Edited by Stephen T. Higgins

[Reviewed earlier]

Proceedings of the Royal Society B

29 August 2018; volume 285, issue 1885

<http://rspb.royalsocietypublishing.org/content/285/1885?current-issue=y>

[Reviewed earlier]

Public Health

December 2018 Volume 165, p1-156

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

[Reviewed earlier]

Public Health Ethics

Volume 11, Issue 3, November 2018

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

[Reviewed earlier]

Public Health Reports

Volume 133 Issue 1_suppl, November/December 2018

https://journals.sagepub.com/toc/phrg/133/1_suppl

From Local Action to National Progress on 5 Major Health Challenges: The Bloomberg American Health Initiative

Guest Editor: Joshua M. Sharfstein, Jessica Leighton, Alfred Sommer and Ellen J. MacKenzie

[Reviewed earlier]

Qualitative Health Research

Volume 28 Issue 14, December 2018

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

[Reviewed earlier]

Research Ethics

Volume 14 Issue 4, October 2018

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

[Reviewed earlier]

Reproductive Health

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

[Accessed 15 Dec 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

Recently Published Articles

[No new digest content identified]

Risk Analysis

Volume 38, Issue 12 Pages: 2503-2739 December 2018

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

Communicating About Zika

[Reviewed earlier]

Risk Management and Healthcare Policy

Volume 11, 2018

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

[No new digest content identified]

Science

14 December 2018 Vol 362, Issue 6420

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

Introduction to special issue:

[Revealing the brain's molecular architecture](#)

[New issue; No digest content identified]

Science Translational Medicine

12 December 2018 Vol 10, Issue 471

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

Focus

[Big data and black-box medical algorithms](#)

By W. Nicholson Price

Science Translational Medicine 12 Dec 2018 Restricted Access

New machine-learning techniques entering medicine present challenges in validation, regulation, and integration into practice.

Research Article Diagnostics

[A point-of-care diagnostic for differentiating Ebola from endemic febrile diseases](#)

By David Sebba, Alexander G. Lastovich, Melody Kuroda, Eric Fallows, Joshua Johnson, Ambroise Ahouidi, Anna N. Honko, Henry Fu, Rex Nielson, Erin Carruthers, Cyrille Diédhiou, Doré Ahmadou, Barré Soropogui, John Ruedas, Kristen Peters, Mirosław Bartkowiak, N'Faly Magassouba, Souleymane Mboup, Yanis Ben Amor, John H. Connor, Kristin Weidemaier

Science Translational Medicine 12 Dec 2018 Restricted Access

A multiplexed point-of-care diagnostic using surface-enhanced Raman scattering detects Ebola, Lassa, and malaria in blood and serum samples.

Discerning febrile diseases

Many infectious diseases present with common clinical symptoms, such as fever, which complicates diagnosis at the point of need. Sebba and colleagues developed an assay using surface-enhanced Raman scattering (SERS) nanotags to distinguish Ebola virus infections from Lassa and malaria. The no-wash triplex assay workflow adds a small volume of blood and buffer to dried SERS reagents and delivers a readout within 30 min. The assay detected parasite- and virus-specific antigens spiked into the blood, Ebola infections in nonhuman primates, and Ebola and malaria infections in human blood samples collected from endemic regions during field

testing. Although further testing is required, this assay could be useful during febrile disease outbreaks.

Abstract

Hemorrhagic fever outbreaks such as Ebola are difficult to detect and control because of the lack of low-cost, easily deployable diagnostics and because initial clinical symptoms mimic other endemic diseases such as malaria. Current molecular diagnostic methods such as polymerase chain reaction require trained personnel and laboratory infrastructure, hindering diagnostics at the point of need. Although rapid tests such as lateral flow can be broadly deployed, they are typically not well-suited for differentiating among multiple diseases presenting with similar symptoms. Early detection and control of Ebola outbreaks require simple, easy-to-use assays that can detect and differentiate infection with Ebola virus from other more common febrile diseases. Here, we developed and tested an immunoassay technology that uses surface-enhanced Raman scattering (SERS) tags to simultaneously detect antigens from Ebola, Lassa, and malaria within a single blood sample. Results are provided in <30 min for individual or batched samples. Using 190 clinical samples collected from the 2014 West African Ebola outbreak, along with 163 malaria positives and 233 negative controls, we demonstrated Ebola detection with 90.0% sensitivity and 97.9% specificity and malaria detection with 100.0% sensitivity and 99.6% specificity. These results, along with corresponding live virus and nonhuman primate testing of an Ebola, Lassa, and malaria 3-plex assay, indicate the potential of the SERS technology as an important tool for outbreak detection and clinical triage in low-resource settings.

Social Science & Medicine

Volume 219 Pages 1-86 (December 2018)

<https://www.sciencedirect.com/journal/social-science-and-medicine/vol/219/suppl/C>

[Reviewed earlier]

Systematic Reviews

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

[Accessed 15 Dec 2018]

[No new digest content identified]

Travel Medicine and Infectious Diseases

Volume 26 Pages 1-78 (November–December 2018)

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

[Reviewed earlier]

Tropical Medicine & International Health

Volume 23, Issue 12 Pages: i-iv, 1281-1407 December 2018

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

[Reviewed earlier]

Vaccine

Volume 37, Issue 1 Pages 1-210 (3 January 2019)
<https://www.sciencedirect.com/journal/vaccine/vol/37/issue/1>
[Reviewed earlier]

Vaccine: Development and Therapy

<https://www.dovepress.com/vaccine-development-and-therapy-archive111>
(Accessed 15 Dec 2018)
[No new digest content identified]

Vaccines — Open Access Journal

<http://www.mdpi.com/journal/vaccines>
(Accessed 15 Dec 2018)
Open Access Editorial

T Cell Memory to Vaccination

by Stephen M Todryk

Vaccines 2018, 6(4), 84; <https://doi.org/10.3390/vaccines6040084> (registering DOI) - 14
December 2018

Abstract

Most immune responses associated with vaccination are controlled by specific T cells of a CD4+ helper phenotype which mediate the generation of effector antibodies, cytotoxic T lymphocytes (CTLs), or the activation of innate immune effector cells. A rapidly growing understanding of the generation, maintenance, activity, and measurement of such T cells is leading to vaccination strategies with greater efficacy and potentially greater microbial coverage

Value in Health

December 2018 Volume 21, Issue 12, p1355-1444
<http://www.valueinhealthjournal.com/current>
[Reviewed earlier]

Viruses

2018, 10(11), 648
<https://www.mdpi.com/1999-4915/10/11>
[Reviewed earlier]

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

No new digest content identified.

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Media/Policy Watch

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

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

The Atlantic

<http://www.theatlantic.com/magazine/>

Accessed 15 Dec 2018

[No new, unique, relevant content]

BBC

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

Accessed 15 Dec 2018

[No new, unique, relevant content]

The Economist

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

Accessed 15 Dec 2018

[No new, unique, relevant content]

Financial Times

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

Accessed 15 Dec 2018

[No new, unique, relevant content]

Forbes

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

Accessed 15 Dec 2018

[No new, unique, relevant content]

Foreign Affairs

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

Accessed 15 Dec 2018

[No new, unique, relevant content]

Foreign Policy

<http://foreignpolicy.com/>

Accessed 15 Dec 2018
[No new, unique, relevant content]

The Guardian

<http://www.guardiannews.com/>
Accessed 15 Dec 2018
[No new, unique, relevant content]

New Yorker

<http://www.newyorker.com/>
Accessed 15 Dec 2018
[No new, unique, relevant content]

New York Times

<http://www.nytimes.com/>
Accessed 15 Dec 2018
Dec. 13, 2018
Politics

Renewed Battle Over Using Fetal Tissue in Medical Research

Lawmakers clashed over science, ethics and politics at a House hearing Thursday on using fetal tissue in critically important medical research, as the Trump administration reviews the government's ongoing support for such studies.

Wall Street Journal

<http://online.wsj.com/home-page?wsjregion=na,us&homepage=/home/us>
Accessed 15 Dec 2018
[No new, unique, relevant content]

Washington Post

<http://www.washingtonpost.com/>
Accessed 15 Dec 2018
[No new, unique, relevant content]

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Think Tanks et al

Brookings

<http://www.brookings.edu/>
Accessed 15 Dec 2018
[No new relevant content]

Center for Global Development

<http://www.cgdev.org/page/press-center>
Accessed 15 Dec 2018
December 12, 2018

Global Consortium Supporting Low- and Middle-Income Countries to Make Evidence-Based Healthcare Investment Decisions Receives \$14.5 Million Boost

A global consortium working with low- and middle-income countries as they aim to make healthcare investment decisions that reflect the best value for money has received a \$14.5 million grant from the Bill & Melinda Gates Foundation, announced the Center for Global Development today.

[See Milestones above for detail]

CSIS

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

Accessed 15 Dec 2018

[No new relevant content]

Council on Foreign Relations

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

Accessed 15 Dec 2018

[No new relevant content]

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

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

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

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