



EN ESTE NÚMERO

VacCiencia es una publicación dirigida a investigadores y especialistas dedicados a la vacunología y temas afines, con el objetivo de serle útil. Usted puede realizar sugerencias sobre los contenidos y de esta forma crear una retroalimentación que nos permita acercarnos más a sus necesidades de información.

- Resumen de la información publicada por la OMS sobre candidatos vacunales en desarrollo contra la COVID-19 a nivel mundial.
- Noticias más recientes en la Web sobre vacunas.
- Artículos científicos más recientes de Medline sobre vacunas.
- Patentes más recientes en Patentscope sobre vacunas.

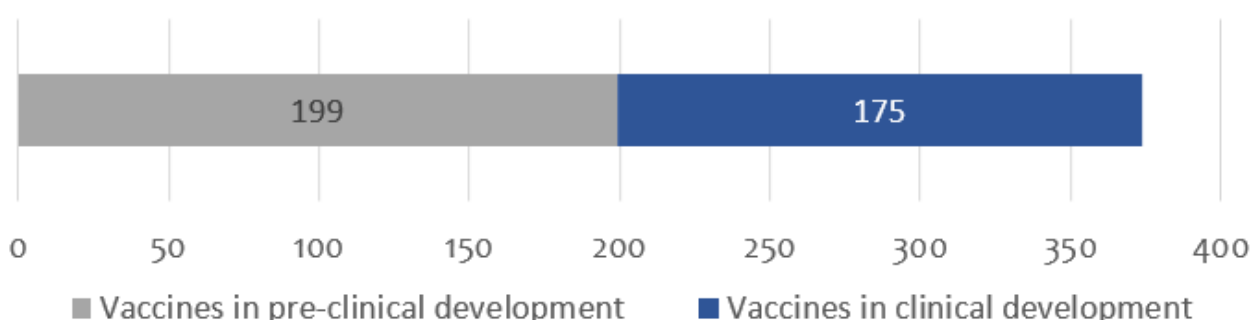
Resumen de la información publicada por la OMS sobre los candidatos vacunales contra la COVID-19 en desarrollo a nivel mundial

Última actualización por la OMS: 23 de noviembre de 2022.

Fuente de información utilizada:



175 Vacunas en evaluación clínica y 199 en evaluación preclínica



Candidatos vacunales en evaluación clínica por plataforma

Platform	Candidate vaccines (no. and %)	
PS	Protein subunit	56 32%
VVnr	Viral Vector (non-replicating)	23 13%
DNA	DNA	16 9%
IV	Inactivated Virus	22 13%
RNA	RNA	41 24%
VVr	Viral Vector (replicating)	4 2%
VLP	Virus Like Particle	7 4%
VVr + APC	VVr + Antigen Presenting Cell	2 1%
LAV	Live Attenuated Virus	2 1%
VVnr + APC	VVnr + Antigen Presenting Cell	1 1%
BacAg-SpV	Bacterial antigen-spore expression vector	1 1%

175

Candidatos vacunales por vía de administración

Route of administration			
Oral		5	3%
Injectable		158	90%
SC	Sub cutaneous	5	3%
ID	Intra dermal	9	5%
IM	Intra muscular	144	82%
IN	Intra nasal	14	8%
AE	Aerosol	1	1%
IH	Inhaled	2	1%
TBD / No Data (ND)		12	7%

Número de dosis de los candidatos vacunales en evaluación clínica

Number of doses & schedule	Candidate vaccines (no. and %)	
1 dose	42	24%
Day 0	42	
2 doses	98	56%
Day 0 + 14	8	
Day 0 + 21	35	
Day 0 + 28	55	
3 doses	2	1%
Day 0 + 28 + 56	2	
TBD / No Data (ND)	33	19%

Candidatos vacunales mucosales en evaluación clínica

Desarrollador de la vacuna/fabricante/país	Plataforma de la vacuna	Vía de administración	Fase
University of Oxford/Reino Unido	Vector viral no replicativo	Intranasal	1
CanSino Biological Inc./Beijing Institute of Biotechnology/China	Vector viral no replicativo	Inhalación	4
CanSino Biological Inc./China	Vector viral no replicativo	Intranasal	3
Vaxart/Estados Unidos	Vector viral no replicativo	Oral	2
Univ. Hong Kong, Xiamen Univ./Beiging Wantai Biol. Pharm./China	Vector viral replicativo	Intranasal	3
Symvivo/Canadá	ADN	Oral	1
ImmunityBio, Inc./Estados Unidos	Vector viral no replicativo	Oral y SL	1/2
Codagenix/Serum Institute of India	Virus vivo atenuado	Intranasal	3
Center for Genetic Engineering and Biotechnology (CIGB)/Cuba	Subunidad proteica	Intranasal	1/2
Razi Vaccine and Serum Research Institute/India	Subunidad proteica	Intranasal	3
Bharat Biotech International Limited/India	Vector viral no replicativo	Intranasal	3
Meissa Vaccines, Inc./Estados Unidos	Virus vivo atenuado	Intranasal	1
Laboratorio Avi-Mex/México	Virus inactivado	Intranasal	2/3
USSF + VaxForm/Estados Unidos	Subunidad proteica	Oral	1
CyanVac LLC/Estados Unidos	Vector viral no replicativo	Intranasal	1
DreamTec Research Limited/Hong Kong	BacAg-SpV	Oral	NA
Sean Liu, Icahn School of Medicine at Mount Sinai	Vector viral replicativo	Intranasal	2/3
Hannover Medical School/Alemania	Vector viral no replicativo	Inhalación	1
ACM Biolabs/Singapur	Subunidad proteica	Intranasal	1
Intravacc B.V./Holanda	Vector viral no replicativo	Subunidad proteica	1

Candidatos vacunales en fase 4 de evaluación clínica

Candidatos vacunales más avanzados/fabricante/país	Plataforma de la vacuna
Sinovac/China	Virus Inactivado
Sinopharm/Beijing Institute of Biological Products/China	Virus Inactivado
University of Oxford/AstraZeneca/Reino Unido	Vector viral no replicativo
CanSino Biological Inc./Beijing Institute Biotechnology/China (IM e IH)	Vector viral no replicativo
Janssen Pharmaceutical Companies/Estados Unidos	Vector viral no replicativo
Moderna/NIAID/Estados Unidos	ARN
Pfizer/BioNTech Fosun Pharma/Estados Unidos	ARN
Medigen Vaccine Biol./Dynavax/NIAID/Taiwán/EE.UU	Subunidad proteica

Candidatos vacunales mucosales en evaluación clínica

Candidatos vacunales más avanzados/fabricante/país	Plataforma de la vacuna
Gamaleya Research Institute/Rusia	Vector viral no replicativo
Novavax/Estados Unidos	Subunidad proteica
Anhui Zhifei Longcom Biopharmac./Inst. Microbiol, Chin Acad Sci/China	Subunidad proteica
CureVac AG/Alemania	ARN
Institute of Medical Biology/Chinese Academy of Medical Sciences	Virus inactivado
Research Institute for Biological Safety Problems, Kazakhstan	Virus inactivado
Inovio Pharmac. + Intern. Vacc Inst. + Advaccine Biopharm Co., Ltd	ADN
Zydus Cadila Healthcare Ltd./India	ADN
Bharat Biotech International Limited/India	Virus Inactivado
Sanofi Pasteur + GSK/Francia/Gran Bretaña	Subunidad proteica
Shenzhen Kangtai Biological Products Co., Ltd./China	Virus Inactivado
Clover Biopharmaceuticals Inc./GSK/Dynavax/China/Reino Unido/EE.UU	Subunidad proteica
Vaxine Pty Ltd. + CinnaGen Co./Australia, Irán	Subunidad proteica
Instituto Finlay de Vacunas/Cuba	Subunidad proteica
Federal Budget Res Inst State Res Cent Virol Biotechnol "Vector"/Rusia	Subunidad proteica
West China Hospital + Sichuan University/China	Subunidad proteica
Vaxxinity/EE.UU	Subunidad proteica
Univ. Hong Kong, Xiamen Univ. & Beijing Wantai Biological Pharm./China	Vector viral replicativo
Acad Milit Sci (AMS) Walvax Biotechnol, Suzhou Abogen Biosci/China	ARN
Medicago Inc./Canadá	Partícula similar a virus
Codagenix/Serum Institute of India	Virus vivo atenuado
Center for Genetic Engineering and Biotechnology (CIGB)/Cuba	Subunidad proteica
Valneva, National Institute for Health Research, Reino Unido	Virus inactivado
Biological E. Limited/India	Subunidad proteica
Nanogen Pharmaceutical Biotechnology/Vietnam	Subunidad proteica
Shionogi/Japón	Subunidad proteica
Erciyes University/Turquía	Virus inactivado
SK Bioscience Co., Ltd./CEPI/Corea del Sur/Noruega	Subunidad proteica
Razi Vaccine and Serum Research Institute/Irán, India	Subunidad proteica
Bharat Biotech International Limited/India	Vector viral no replicativo (IN)
Providence Therapeutics/Canadá	ARN
POP Biotechnologies and EuBiologics Co.,Ltd/EEUU, Corea del Sur	Subunidad proteica
Jiangsu Rec-Biotechnology/China	Subunidad proteica
Radboud University/Holanda	Partícula similar a virus
Arcturus Therapeutics, Inc./Estados Unidos	ARN
Livzon Pharmaceutical/China	Subunidad proteica
National Vaccine and Serum Institute, China; Beijing Zhong Sheng Heng Yi	Subunidad proteica
KM Biologics Co., Ltd./Japón	Virus inactivado
Shanghai East Hospital and Stemirna Therapeutics/China	ARN
Bagheiat-allah University of Medical Sciences/AmitisGen/Irán	Subunidad proteica
Laboratorios Hipra, S.A./España	Subunidad proteica
Sinocelltech Ltd./China	Subunidad proteica
Chumakov Federal Scientific Center for Research/Rusia	Virus Inactivado
Airlangga University/Indonesia	Virus Inactivado
PT Bio Farma/Indonesia	Subunidad proteica
AIM Vaccine and Liverna Therapeutics/China	ARN
China National Biotec Group Company Limited	Virus inactivado

Noticias en la Web

Measles is an 'imminent threat' worldwide, CDC and WHO report finds

Nov 23. Measles is an "imminent threat" around the world, according to a new joint report released Wednesday by the Centers for Disease Control and Prevention and the World Health Organization.

Despite a two-dose vaccine that is more than 97% effective at preventing infection being available for decades, gains made at beating back the potentially dangerous childhood disease have been lost during the COVID-19 pandemic.

The report found that in 2021, nearly 40 million children -- a record-high -- missed a dose of the measles vaccine. Specifically, 25 million missed their first dose and 14.7 million missed their second dose.



Sick child with red rash spots from measles. Bilanol/Getty Images/iStockphoto

"The paradox of the pandemic is that while vaccines against COVID-19 were developed in record time and deployed in the largest vaccination campaign in history, routine immunization programs were badly disrupted, and millions of kids missed out on life-saving vaccinations against deadly diseases like measles," said Dr. Tedros Adhanom Ghebreyesus, WHO Director-General, in a statement.

"Getting immunization programs back on track is absolutely critical. Behind every statistic in this report is a child at risk of a preventable disease," the statement continued.

To prevent the disease from spreading and to achieve herd immunity, the CDC and WHO say at least 95% of children need to receive the vaccine.

However, just 81% of children globally have received the first dose and 71% have received the second dose, the lowest coverage worldwide seen since 2008.

Consequently, there were 9 million cases of measles and 128,000 deaths around the world with at least 22 countries experiencing "large and disruptive outbreaks."

"The record number of children under-immunized and susceptible to measles shows the profound damage immunization systems have sustained during the COVID-19 pandemic," CDC Director Dr. Rochelle Walensky said in a statement.

"Measles outbreaks illustrate weaknesses in immunization programs, but public health officials can use outbreak response to identify communities at risk, understand causes of under-vaccination, and help deliver locally tailored solutions to ensure vaccinations are available to all."

No region of the world has achieved and sustained measles elimination, the report found. Since 2016, at least 10 countries that had previously eliminated measles reported outbreaks – including the U.S.

Measles is an incredibly contagious disease. According to the CDC, one infected patient can infect at least 10 close contacts who are not protected either through masking or vaccination.

Measles complications can range from non-threatening, including rashes, to severe, such as viral sepsis, pneumonia or brain swelling.

Prior to the measles vaccine, an estimated 3 to 4 million Americans were infected annually with measles, 48,000 were hospitalized and 400 to 500 died, the CDC says.

"Plummeting measles vaccination rates should set off every alarm," Elizabeth Cousens, president and CEO of the United Nations Foundation, said in a statement. "Tens of millions of children are at risk of this deadly, yet entirely preventable disease until we get global vaccination efforts back on track. There is no time to waste. We must work urgently to ensure life-saving vaccines reach every last child."

Fuente: abc News. Disponible en <https://abcn.ws/3OP5jjX>

La verdad sobre el sangrado menstrual abundante tras ponerse las vacunas COVID

23 nov. Un informe concluye el impacto de las vacunas ARNm (Pfizer y Moderna) frente a la COVID-19 en los ciclos menstruales tras la inoculación.

La Agencia Española de Medicamentos y Productos Sanitarios (AEMPS) ha estimado oportuna la publicación de un informe que analiza el impacto de las vacunas ARNm (Pfizer y Moderna) frente a la covid en la abundancia del sangrado menstrual, un fenómeno aparatoso de por sí, que cuando sobreviene de manera imprevista y cercana a un episodio inusual como una vacunación puede crear la lógica preocupación entre las mujeres que se hayan sometido a ese proceso de inmunización.



Tras los datos ofrecidos por los correspondientes ensayos clínicos, además de los extraídos de los programas de notificación espontánea de acontecimientos adversos tras la vacunación y los procedentes de la literatura médica. El Comité para la Evaluación de Riesgos en Farmacovigilancia Europeo (PRAC) de la Agencia Europea de Medicamentos (EMA) ha concluido que existe una posibilidad razonable de que la aparición de sangrado menstrual abundante esté relacionada con la administración de estas vacunas de ARNm.

El impacto en la fertilidad y la reproducción

La alarma relacionada con este suceso no se centra exactamente en el mayor sangrado, ya que se ha comprobado que son episodios transitorios y sin una frecuencia de aparición concreta. La mayor preocupación, relacionada con el impacto en la fertilidad y la reproducción, no ha registrado ninguna evidencia. Además, el PRAC sigue considerando positivo el balance entre beneficio y riesgos de ambas vacunas.

Ausencia menstrual o duración del ciclo menstrual tras la vacuna COVID

Hasta el pasado 9 de octubre se registraron en España 921 notificaciones de este trastorno tras la administración de Pfizer y 299 notificaciones con Moderna en mujeres de entre 12 y 49 años, con 15,6

millones de dosis de la primera y 6,2 millones de la segunda en ese mismo segmento de población. También se estudió la posible relación entre estas vacunas y la ausencia de menstruación (amenorrea), sin hallar evidencias de relación entre ambos hechos. La revista 'Science' se hizo eco de otros estudios, realizados tanto en Estados Unidos como en Noruega, que hablaban de casos de leve aumento en la duración del ciclo menstrual tras la vacunación anticovid; no obstante, se trata de episodios puntuales que desaparecen al cabo de dos ciclos.

Fuente: Heraldo Saludable. Disponible en <https://bit.ly/3P00mVt>

Panama to donate 30,000 COVID-19 vaccines to Bahamas

Nov 24. Panamanian government has recently authorized to donate about 30,000 Pfizer vaccines to the Bahamas in order to fight off the Covid-19 pandemic, Panama's Health Minister Luis Francisco Sucre said on Thursday.

In response to questions from Prensa Latina News Agency, after attending an event to commemorate the International Children's Day, Francisco Sucre enlightened this new donation to The Bahamas will be possible following Panama had reached high immunization levels.

To date, Sucre stated, 85% of population has received at least one Covid-19 shot, 80% has received two doses, nearly 70% has received three doses and at least 45% has been fully vaccinated. These indicators will continue to rise.

For 1Q 2023, Sucre added, Panamanian President Laurentino Cortizo authorized to purchase mixed vaccines from the Pfizer pharmaceutical company, which would reinforce the country's present immunization program.

It would be mean and selfish if we have the possibility of aiding brotherly peoples to provide them with these doses, especially if they request collaboration with certain haste, he said.

Our collaboration is not only about vaccines, it is also important to share knowledge and strategies to reach current outcomes, Cortizo stressed.

At the same time, he reaffirmed Panama will receive 72,000 other Pfizer doses before the end of the year.

Sucre highlighted that both the World Health Organization (WHO) and the Pan American Health Organization (PAHO) have praised the vaccination levels achieved by Panama.



Fuente: Prensa Latina. Disponible en <https://bit.ly/3FfaiHn>

Omicron boosters probably aren't very effective against mild Covid illness, but will likely prevent hospitalizations, experts say

Nov 25. The new omicron Covid boosters probably aren't very effective at preventing Covid infections and mild illness, but they will likely help keep the elderly and other vulnerable groups out of the hospital this winter, experts say.

The Centers for Disease Control and Prevention, in a real-world study published this week, found the boosters are less than 50% effective against mild illness across almost all adult age groups when compared to people who are unvaccinated.



For seniors, the booster was 19% effective at preventing mild illness when administered as their fourth dose, compared to the unvaccinated. It was 23% effective against mild illness when given as their fifth dose.

Though the vaccine's effectiveness against mild illness was low, people who received the boosters were better off than those who did not. The booster increased people's protection against mild illness by 28% to 56% compared to those who only received the old shots, depending on age and when they received their last dose.

The Food and Drug Administration authorized the boosters in late August with the goal of restoring the high levels of protection the vaccines demonstrated in late 2020 and early 2021. At that time, the shots were more than 90% effective against infection. But the first real-world data from the CDC indicates that the boosters aren't meeting those high expectations.

"The boosters give you some additional protection but it's not that strong, and you shouldn't rely on it as your sole protective device against infection," said John Moore, a professor of microbiology and immunology at Weill Cornell Medical College.

Moore said people at higher risk from Covid have every reason to get a booster since it modestly increases protection. But he said common sense measures such as masking and avoiding large crowds remain important tools for vulnerable groups since the boosters aren't highly effective against infection.

The CDC study looked at more than 360,000 adults with healthy immune systems who tested for Covid at retail pharmacies from September to November when omicron BA.5 was dominant. The participants received either the booster, got two or more doses of the old shots or they were unvaccinated. It then compared those who tested positive for Covid with those who did not.

The study did not evaluate how well the boosters performed against severe disease, so it's still unclear whether they will provide better protection against hospitalization than the old shots. The CDC in a statement said it will provide data on more severe outcomes when it becomes available.

Andrew Pekosz, a virologist at Johns Hopkins University, said the fact that the shots are providing some protection against infection in an era of highly immune evasive omicron subvariants is a good sign that they will provide strong protection against hospitalization. The vaccines have always performed better against severe disease than mild illness, he said.

"It's better than nothing. Certainly, it doesn't sort of show that the protection is incredibly high against infection," Pekosz said. "I would expect that you would then see even greater protection from hospitalization or death."

Dr. Paul Offit, a member of the FDA's vaccine advisory committee, said trying to prevent mild illness is not a viable public health strategy because the antibodies that block infection simply wane over time.

"Protection against mild disease just isn't that good in the omicron subvariant era. The goal is protecting against severe disease," said Offit, an infectious disease expert at Children's Hospital of Philadelphia who helped develop the rotavirus vaccine.

Dr. Celine Gounder, a senior public health fellow at the Kaiser Family Foundation, said she's not alarmed by the data. Reducing risk by even a modest amount at the individual level can have a significant positive effect on public health at the population level.

"If you can reduce risk among the elderly by even 30%, even 20%, that is significant when 90% of the COVID deaths are occurring in that group," Gounder said. "For me, what's really gonna matter is are you keeping that 65 year old out of the hospital."

The boosters, called bivalent vaccines, target both omicron BA.5 and the original Covid strain that first emerged in Wuhan, China in 2019. The original shots, called monovalent vaccines, only include the first Covid strain.

It's still unclear how the boosters will perform against more immune evasive omicron subvariants, such as BQ.1 and BQ.1.1, which are now dominant in the U.S. Pfizer and Moderna last week said early clinical trial data shows the boosters induce an immune response against these subvariants.

About 11% of those eligible for the new booster, or 35 million people, have received it so far, according to CDC data. About 30% of seniors have received the shot.

Fuente: CNBC. Disponible en <https://cnb.cx/3OUhfRB>

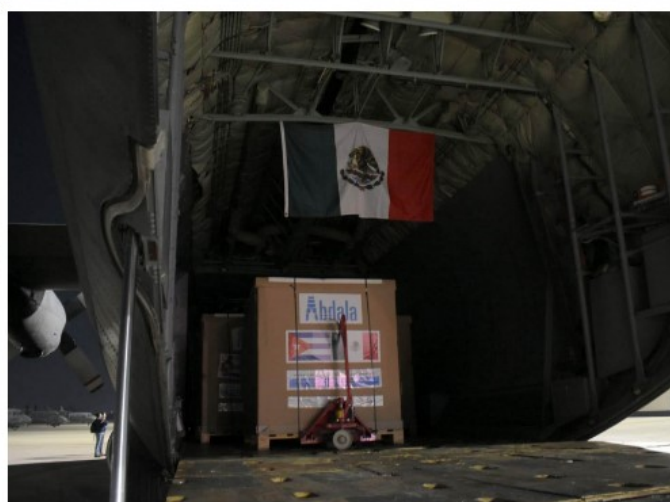
México recibió primer embarque de vacuna cubana Abdala antiCovid-19

26 nov. El primer embarque de la vacuna cubana antiCovid-19 consistente en cuatro millones 92 mil 500 dosis envasadas que se aplicarán a personas adultas ya está en México, anunció Salud Pública.

El medicamento llegó después que fuera aprobado su uso emergente por la Comisión Federal para la Protección contra Riesgos Sanitarios (Cofepris), que hace casi un año, el 29 de diciembre de 2021, dictaminó procedente la autorización para uso de emergencia de Abdala, con la denominación distintiva: proteína recombinante del dominio de la unión al receptor del virus del SARS-CoV-2.

El fármaco fue trasladado desde La Habana, Cuba, al Aeropuerto Internacional «Felipe Ángeles» (AIFA), en Zumpango, Estado de México, en un avión Hércules de la Fuerza Área Mexicana, informó una nota de Salud Pública.

Agrega que en el arribo, traslado y seguridad de las dosis participó personal de Laboratorios de Biológicos y Reactivos de México (Birmex), del Centro Nacional para la Salud de la Infancia y la Adolescencia (Censia) y de la Comisión Federal para la Protección contra Riesgos Sanitarios (Cofepris), así como elementos del Ejército Mexicano y de la Guardia Nacional.



Con las dosis de Abdala que llegaron, y desde el primer embarque de otros laboratorios que arribó al país el 23 de diciembre del 2020 para su intenso programa de vacunación, México ha recibido un total de 193 millones 231 mil 845 envasadas de Pfizer-BioNTech, AstraZeneca, Sinovac, Centro Nacional de Investigación de Epidemiología y Microbiología Gamaleya, CanSino Biologics, Johnson & Johnson, Moderna y ahora la cubana.

Asimismo, en territorio mexicano, el laboratorio Drugmex ha envasado 14 millones 24 mil 840 dosis de CanSino Biologics, y el laboratorio Liomont 42 millones 991 mil 100 biológicos de AstraZeneca, lo que hace un total de 57 millones 15 mil 940 vacunas envasadas en el país, detalla la nota.

En suma, desde el 23 de diciembre de 2020 México ha tenido disponibles 250 millones 247 mil 785 biológicos. Hasta hoy se han recibido 217 embarques en 231 vuelos.

Fuente: Prensa Latina. Disponible en <https://bit.ly/3ORoVns>

EEUU investiga XBB, nueva variante de COVID-19

27 nov. Los Centros para el Control y la Prevención de Enfermedades (CDC) investigan hoy una nueva variante de COVID-19 conocida como XBB, que representa el tres por ciento de todas las nuevas infecciones en Estados Unidos.

La prevalencia de la cepa crece más hasta ahora en el noreste, según las estimaciones de la agencia, pues genera más del cinco por ciento de los contagios en las regiones que van desde Nueva Jersey hasta Maine.

XBB está detrás de una gran cantidad de infecciones en algunos países del sur de Asia, y forma una parte

cada vez mayor de las secuencias de virus informadas de todo el mundo y de los viajeros internacionales que llegan.

Los CDC divulgaron estimaciones preliminares que sugerían cómo XBB podría duplicarse en proporción cada 12 días, un ritmo más rápido si se le compara con las variantes BQ.1 y BQ.1.1, ahora dominantes en el país.

Sin embargo, los principales funcionarios y expertos de la administración del presidente Joe Biden, dicen que no ven en XBB una amenaza similar a la variante Omicron surgida hace un año.



Acorde con la fuente, la variante BA.5 se redujo a menos de una de cada cinco nuevas infecciones en todo el país y BA.4 está prácticamente desaparecida.

Nombrada por primera vez por científicos en septiembre pasado, se cree que XBB es una combinación de dos subvariantes diferentes de Omicron, BA.2.10.1 y BA.2.75, que surgieron a principios de este año.

Es la última de una multitud de cepas ahora dominantes que portan mutaciones con la posibilidad de evadir los medicamentos clave de anticuerpos de COVID-19.

Sin embargo, a juicio de Derek Smith, director del Centro para la Evolución de Patógenos de la Universidad de Cambridge, no parece que sea particularmente más grave en comparación con otras variantes.

Fuente: Cubadebate. Disponible en <https://bit.ly/3iu7jC5>

A new generation of COVID-19 vaccine, or running out of steam? Here's how experts see the pandemic ending

Nov 27. Will it end with a new generation, a future-proof vaccine or will the virus keep mutating until it eventually runs out of steam?

Two-and-a-half-years in and Australia is in the grip of a fourth COVID-19 wave. It's predicted to be shorter and sharper than before, but it will not be the last.

So what will the end look like? Experts differ on what will finally bring this pandemic to a close.

Future-proofing vaccines

Deborah Burnett is on a team at Garvan Institute of Medical Research working on a transmission-blocking or "universal" vaccine.

Since the first variants were identified in late 2020, COVID-19 has mutated to produce multiple variants and subvariants, putting us in what some call a "COVID soup".

New subvariants appear more likely to evade current vaccines (although the vaccines we have now are still extremely effective at preventing serious illness and death).

A "variant-proof" vaccine would target a part of the virus which cannot easily mutate, making it effective against not just the variants we have had so far, but future ones, too, Dr Burnett says.

"There was this idea of herd immunity and, at first, people thought that, maybe, you could get that from natural infection, and then people thought you could get that from vaccines," she says.

"But, unfortunately, the virus has found a way around that by mutating."

In an article in the Lancet medical journal earlier this year, Annelies Wilder-Smith from the London school of hygiene and tropical medicine wrote that, until we have new vaccines that protect against transmission, "public health and social measures will still need to be tailored towards mitigating community and household transmission in order to keep the pandemic at bay".



Dr Deborah Burnett says a universal vaccine could end the pandemic. (Supplied: Garvan Institute)

The team at the Garvan Institute have developed a tool to test and triage multiple vaccines from labs around Australia, to

select the most-effective ones, and have seen "promising results" from pre-clinical trials, Dr Burnett said.

"We're really hoping that, in the next year or two, there is a vaccine available that effectively ends transmission so it will finally be over."

'Running out of ways to mutate'

Professor Robert Booy thinks we are nearing the end of the pandemic — but says it won't come about because of a transmission-blocking vaccine.

"This new wave is a conglomeration of a whole bunch of subvariants but they're still Omicron — in 12 months we haven't had a new variant, we've just had mutations," Professor Booy, an infectious disease and vaccine expert, says.

The Omicron variant of the SARS-CoV-2 virus has been the only "variant of concern" since Delta was downgraded in June this year.

And, in the year or so since Omicron was first detected, it's spun off into more than 300 subvariants (which we know of).

"My most likely conclusion is to go 12 months without changing variants suggests that the virus is running out of ways to mutate," Professor Booy says.

"And it's quite clear also that the new infections and the new waves are resulting in less severe diseases and I think that's because we've got hybrid immunity — a combination of vaccine-induced and wild virus-induced immunity."

Vaccinations — and boosters for people who are eligible — still matter, and will "make a real difference" in riding out the latest wave, Professor Booy says.

The current vaccines have dramatically reduced serious illness, and adults with severely compromised immune systems can now get a fifth dose (and there is a push to widen eligibility as cases rise).

And new vaccines are still coming out, including shot-free vaccines and variant-specific boosters.

There are also currently 175 vaccines in clinical development.

'Time for community mandates has past'

COVID-19 will "fizzle out" and, like the common cold, become a virus we get at a young age, says James Trauer, an associate professor at Monash University's school of public health and preventative medicine.

"Children born today, who start getting their first exposure before they hit school, it's not going to be an issue for them."

Because of this, he says, community-wide mandates are no longer needed.

"I don't see any role to reducing community-wise transmission. I think we still need to look at reducing transmission in high-risk settings, [such as] hospital and aged care [but] the sort of controls we would need to put in place to reduce community-wide transmission are just not acceptable to people now and not really necessary either.

"The exception to that could be if we're suddenly hit by a bad variant — but, with each month that doesn't happen, we can be a little more comfortable that it's not just around the corner."

He says the focus should shift ahead to the next pandemic.

"We do need to look at sustainable interventions that can protect us from future pandemics and just improve respiratory health generally and strengthen our public health system, and work on social determinants of health, [such as] air quality and building ventilation."

Fuente: abc News. Disponible en <https://ab.co/3gNleCV>

OMS sustituye término de viruela del mono por "mpox" para evitar opiniones racistas

28 nov. La Organización Mundial de la Salud (OMS) afirmó este lunes que comenzará a utilizar el término "mpox" para referirse a la viruela del mono en aras de evitar opiniones racistas y estigmatizantes.

El ente sanitario internacional de Naciones Unidas señaló que "ambas denominaciones se utilizarán simultáneamente durante un año mientras se elimina progresivamente viruela del mono".

En este sentido, la OMS apuntó que cuando se extendió el brote de viruela del mono a inicios del

presente año "se observó y se informó a la OMS de un lenguaje racista y estigmatizante 'on line', en otros entornos y en algunas comunidades".

A partir de ello, varias delegaciones manifestaron en varios encuentros, tanto públicos como privados, su preocupación al respecto y solicitaron a la OMS una vía para cambiar la denominación.



En consonancia, la OMS incluirá el término “mpox” en la lista actualizada de enfermedades para el próximo año al referirse a la enfermedad inicialmente llamada “viruela del mono” en 1970 cuando fue descubierta en primates.

En lo referente a las traducciones, la organización sanitaria aseguró que “mpox” puede ser utilizados en otros idiomas, entretanto, precisó que “si surgen otros problemas de denominación, se abordarán mediante el mismo mecanismo”.

De acuerdo con los datos oficiales de la OMS, en el presente año se han confirmado más de 81 000 casos en el orbe mientras que los más afectados son Estados Unidos con 29 000 positivos, Brasil con 9 900 y España con 7 400.

Fuente: Cubadebate. Disponible en <https://bit.ly/3iyvIWX>

COVID en la Argentina: regreso del barbijo obligatorio, las vacunas que necesitan refuerzo y fecha estimada del pico, ¿qué anticipan los especialistas?

29 nov. El escenario epidemiológico ingresó en su cuarta semana de incremento sostenido. La Ciudad de Buenos Aires vuelve a ser el epicentro a nivel nacional y desde el cuerpo médico ya instan a monitorear la situación de Brasil y Chile además de no descartar el posible regreso de los tapabocas.

El Ministerio de Salud informó en la última semana 3323 nuevos casos activos de coronavirus (COVID -19) en la Argentina, un 51% más respecto al período anterior, escenario que para los especialistas configura el inicio de una ola de contagios que podría, incluso, reflotar el regreso del barbijo en las zonas rojas.

El cuadro epidemiólogo suma un total de 28 jornadas consecutivas de alzas, con la Ciudad de Buenos Aires como epicentro, tendencia impulsada por las subvariantes de Ómicron, según detalló a Télam el virólogo molecular e integrante del Proyecto Argentino Interinstitucional de Genómica de SARS-CoV-2 (PAIS), Humberto Debat.

En vísperas del inicio oficial de la temporada de verano 2023 y con los antecedentes recientes de China (con tasas récord de infección), en la región sudamericana Chile ya siente los estragos del "perro del infierno" y "pesadilla", mientras que Brasil volvió a imponer el uso obligatorio de los protectores en aeropuertos y Perú emitió una alerta sanitaria.

"Venimos diciendo que el barbijo habría que seguir usándolo en determinada situación, como en el transporte público, en los lugares donde hay una gran cantidad de gente con poca aireación y en reuniones donde los ambientes están más cerrados", señaló a El Cronista el infectólogo y asesor del Gobierno en la pandemia, Eduardo López.

Para el sanitarista, la curva creciente actual de contagios de COVID 19 en la Argentina responde también a la "baja cantidad de vacunas de refuerzo" administrada. Según datos que se desprenden del Monitor Público de Vacunación, de los 41.049.293 esquemas iniciados hace dos años atrás, sólo 6.261.537 complementaron con un segundo refuerzo.

"Casi el 50% de la gente tiene sólo dos dosis y no va del 25% con una cuarta. Es decir, tanto del primero como el segundo refuerzo, que son fundamentales para los sublinajes que están circulando hoy en la Argentina, no están completos", insistió López.



Ministerio de Salud
Argentina

Dosis aplicadas

110.374.682 Aplicaciones

Vacunados con esquema iniciado

41.049.293 Personas

Vacunados con esquema completo

37.900.908 Personas

Vacunados con dosis adicional

3.158.110 Personas

Vacunados con primer refuerzo

21.811.044 Personas

Vacunados con segundo refuerzo

6.261.537 Personas

Al ahondar en los números difundidos por la cartera nacional, 475 fueron los positivos diarios promedio de la última semana. Sin embargo, y a diferencia de los que ocurrió meses atrás, los fallecidos y pacientes en terapia aún permanecen estables, con un "muy leve crecimiento", de acuerdo al análisis de evolución que realiza el senador por Corrientes Martín Barrionuevo.

"Tal como está sucediendo en otros lugares del mundo, hay un rebrote de casos de COVID en la Argentina y la gente que se está vacunando con las dosis de refuerzo es muy baja", repasó el legislador provincial.

COVID-19 en la Argentina: cuándo se dará el Nuevo pico de contagios y cuántas vacunas se necesitan para evitar una ola mayor

El médico clínico Luis Cámara proyectó en diálogo con El Cronista que para enero o febrero de 2023 "va a ser necesario" afianzar los esquemas de protección anti-COVID 19 en la Argentina con una quinta dosis, ritmo que luego se continuará con una sola aplicación anual.

"Van a haber estos brotes de idas y venidas a lo largo del tiempo. Sí también creo que será superable pero lo que no podemos dejar de ver, como una especie de talón de Aquiles, es la baja vacunación de refuerzo en la población joven. Es desde aquí donde vendrán los contagios", consideró.

Cámara se sumó también al pronóstico de regreso del barbijo como medida preventiva en algunos distritos, aunque enfatizó que al tratarse de subvariantes "extremadamente contagiosas", es "muy difícil" avanzar con otro tipo de restricciones.

"Lo único que es realmente útil es tener, por lo menos, tres dosis de vacunas para los jóvenes, cuatro para los mayores y eventualmente, una quinta", sentenció.

Alerta COVID: cuáles son los síntomas de las subvariantes de Ómicron que circulan en la Argentina

El infectólogo Hugo Pizzi consideró en diálogo con El Cronista que el cuadro sintomatológico actual de COVID 19 con las subvariantes que se acrecienta en el país, es "distinto" a los registrados en 2020 y 2021, ya que "ahora con las vacunas, la resistencia del virus cambia".

Por su parte, Eduardo López indicó que la modificación sólo se presenta en el punto de vista de incubación respecto a la cepa Ómicron clásica. "Los sublinajes tienen un menor período de incubación. Ahora es de sólo 2 a 4 días, lo cual facilita mucho más la transmisibilidad", apuntó.

De acuerdo al apartado "Recomendaciones para equipos de salud" de la cartera conducida por la ministra Carla Vizzotti, la clasificación de casos confirmados de coronavirus por criterio clínico-epidemiológico en un paciente debe cumplir con al menos dos de los siguientes parámetros presentes a la vez:

- ⇒ fiebre
- ⇒ tos
- ⇒ odinofagia
- ⇒ dificultad para respirar
- ⇒ vómitos/diarrea
- ⇒ cefalea/mialgias
- ⇒ Rinitis/Congestión nasal
- ⇒ Presente Anosmia/disgeusia

En tanto, aquellos que cumpla al menos uno de los siguientes criterios epidemiológicos, serán diagnosticado por SARS-COV2:

Haber tenido contacto estrecho con un caso confirmado en los últimos 10 días;

Haber participado de un evento o espacio social/laboral u otro en el cual se hayan producido al menos 3 casos confirmados (brote),

Resida en una zona con incidencia superior a 500 casos c/100.000 habitantes en los últimos 14 días y la jurisdicción haya definido activar la confirmación por este criterio para la provincia, departamento o localidad de residencia.

Fuente: Cronista. Disponible en <https://bit.ly/3EUin32>

Syria receives two million cholera vaccines

Nov 30. The Syrian Ministry of Health received two million doses of cholera vaccine from the World Health Organization (WHO), the United Nations Children's Fund (Unicef) and the Global Vaccine Initiative (GAVI).

The vaccines will be applied during the next vaccination campaign, slated to begin on December 4th and set to last for two weeks.

"Despite worldwide vaccine shortages, caused by growing cholera outbreaks, we have managed to secure current aid to improve the health response," said Health Minister Hassan Muhammad Al-Ghobash.

He noted that the vaccine is safe and was approved by the WHO, and has been used successfully around the world.

According to Al-Ghobash, the vaccination campaign will begin in the provinces of Aleppo, Deir Ezzor, Hasakeh and Raqa, as they are currently the most affected by the disease and considered that the epidemiological situation there is under control and in a declining phase.

According to the latest report published by the health authorities, the cumulative total of confirmed cases rose to 1,556, while the number of deaths reached 49.

They explained that the main cause of death continues to be the delay in requesting medical attention at health centers.

Fuente: Prensa Latina. Disponible en <https://bit.ly/3XPFXqd>



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Patentes registradas en Patentscope

Estrategia de búsqueda: *Vaccine in the title or abstract AND 20221122:20221130 as the publication date 50 records*

1. [20220370595](#) Buffer Free, Acid Stable Low Dose Volume Rotavirus Vaccine

US - 24.11.2022

Clasificación Internacional [A61K 39/15](#) N° de solicitud 17877986 Solicitante Bharat Biotech International Limited Inventor/a Krishna Mohan Vadrevu

A buffer free, acid stable, low dose volume rotavirus vaccine is disclosed. The vaccine is available in dose volume of less than 1 ml per dose for oral administration and it is without any buffer. The vaccine also does not require pre or post administration of any antacid at the time of oral administration of the vaccine to the subject to neutralize the stomach acid. The vaccine exemplifies nominal drop in vaccine titer at pH 2-4 for a time span of 30 minutes. The vaccine is stable at -20° C. for at least 60 months.

2. [WO/2022/246144](#) MICRONEEDLE VACCINE AGAINST SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2)

WO - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud PCT/US2022/030177 Solicitante MEDIGEN VACCINE BIOLOGICS CORPORATION Inventor/a CHEN, Charles

The present invention relates to a microneedle vaccine against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), especially to a microneedle vaccine having a recombinant SARS-CoV-2 S protein and providing a sustained release of the recombinant SARS-CoV-2 S protein in a subject.

3. [WO/2022/242649](#) NOVEL CORONAVIRUS SARS-COV-2 MUTANT VACCINE AND APPLICATION

WO - 24.11.2022

Clasificación Internacional [C07K 19/00](#) N° de solicitud PCT/CN2022/093354 Solicitante LIVZON MABPHARM INC. Inventor/a LIN, Jingjing

The present invention relates to a novel coronavirus SARS-CoV-2 mutant vaccine and an application. The vaccine comprises a fusion protein, and the fusion protein comprises: (1) an interferon or a functional fragment thereof; (2) a novel coronavirus SARS-CoV-2 or a functional fragment thereof; and (3) an immunoglobulin Fc region. The mutant vaccine of the present invention has a long-acting effect, is beneficial to industrial production, is equivalent to normal IFN in activity, is higher in immunogenicity and neutralizing antibody titer, can increase the defense capability against a mutant strain, and can be used as a new generation of mutant vaccine drugs for resisting epidemic spreading of novel coronavirus.

4. [20220370579](#) THERAPEUTIC ANTICANCER NEOEPITOPE VACCINE

US - 24.11.2022

Clasificación Internacional [A61K 39/00](#) N° de solicitud 17557988 Solicitante NYKODE THERAPEUTICS ASA Inventor/a Stine Granum

The present invention relates to an anticancer vaccine which includes polynucleotides or polypeptides, methods of treatment of cancer wherein such an anticancer vaccine is used as well as methods for producing the vaccine. The vaccine includes a polynucleotide with a nucleotide sequence encoding a targeting unit, a dimerization unit, a first linker and an antigenic unit. The antigenic unit includes from 3 to 50 antigenic subunits separated by a second linker with each antigenic subunit having at least a part of a cancer neoepitope sequence. The vaccine can include a polypeptide encoded by the polynucleotide or a dimeric protein with two polypeptides encoded by the polynucleotide.

5. [20220373547](#) Compositions for Determining Vaccine Potency

US - 24.11.2022

Clasificación Internacional [G01N 33/569](#) N° de solicitud 17879265 Solicitante BioMadison, Inc. Inventor/a Ward C. Tucker

Compositions for determining the efficacy and/or potency of a vaccine preparation are described herein. Splenocytes from immunized animals are isolated and can be frozen. Upon thawing such cells are activated by exposure to a series of dilutions of a vaccine preparation being tested and a series of dilutions of a reference vaccine with known characteristics. Cells secreting immunogen-specific antibody and cells secreting nonspecific antibody are enumerated, as is the amount of immunogen-specific and nonspecific antibody produced. Comparison between the results from the vaccine preparations provides a measure of relative vaccine efficacy and/or potency.

6. [WO/2022/241560](#) COMBINATION THERAPY TUMOUR CELL VACCINE

WO - 24.11.2022

Clasificación Internacional [A61K 39/39](#) N° de solicitud PCT/CA2022/050792 Solicitante QUEEN'S UNIVERSITY AT KINGSTON Inventor/a SEAVER, Kyle

A cancer vaccine includes at least one tumour associated antigen (TAA), at least one Toll-like receptor (TLR) agonist, at least one cytokine, and a pharmaceutically acceptable vehicle. The at least one TAA may be provided by dead tumour cells, such as γ -irradiated tumour cells or lysis and UV treated tumour cells, the at least one TLR agonist may comprise 5 CpG-1826 and the at least one cytokine may comprise IL-27. When administered to a mammalian subject the cancer vaccine prevents, inhibits, or slows tumour development in the subject, and the vaccine may provide a long-term T cell activation and memory against tumour development in the subject. 0

7. [WO/2022/242162](#) PREPARATION METHOD FOR COMPOSITE VACCINE ADJUVANT BASED ON ALUMINUM OXYHYDROXIDE NANO CARBOXYL MODIFICATION

WO - 24.11.2022

Clasificación Internacional [A61K 39/39](#) N° de solicitud PCT/CN2021/139666 Solicitante DALIAN UNIVERSITY OF TECHNOLOGY Inventor/a XUE, Changying

A preparation method for a composite vaccine adjuvant based on aluminum oxyhydroxide nano carboxyl modification. In the preparation method, a carboxylated hydroxyl oxidized nano-particles function as a carrier, but are not limited to functioning as a carrier; a carboxylation method is simple and convenient to operate; the carboxylated hydroxyl oxidized nano-particles are compounded with a novel CpG-ODN adjuvant, such that the half-life period of a CpG adjuvant is prolonged; the compounding of the adjuvant shows a synergistic effect, such that the Th2 type immunostimulation ability of the adjuvant is enhanced, and the possibility of Th1 type immunity is also given to the adjuvant; in addition, the verification process for the effect of the adjuvant is simple, easy to control, and short in consumed time, such that a good concept is provided for engineering development and utilization of a vaccine adjuvant.

8.[4090380](#)VERFAHREN ZUR BEHANDLUNG VON KREBS MIT GM-CSF CODIEREND FÜR POLYNUKLEOTID UND ZUSÄTZLICHEN MITTELN
EP - 23.11.2022

Clasificación Internacional [A61K 48/00](#) N° de solicitud 21704094 Solicitante GRADALIS INC Inventor/a NEMUNAITIS JOHN

Compositions and methods for prevention of ovarian cancer recurrence and for the treatment of BRCA1/2-wild type ovarian cancer are disclosed herein. In some embodiments, the composition comprises an autologous tumor cell vaccine comprising cells genetically modified for furin knockdown and GM-CSF expression. In some embodiments, the method comprises administration of an autologous tumor cell vaccine prior to administration of a combination of the autologous tumor cell vaccine and atezolizumab. Also disclosed herein are methods for treating a cancer in an individual comprising a wild-type BRCA1 gene, a wild-type BRCA2 gene, or a combination thereof, and is identified as homologous recombination deficiency (HRD)-negative.

9.[20220370588](#)APPLICATION OF PSEUDOMONAS AERUGINOSA VACCINE IN TREATING INFECTION ASSOCIATED WITH BURN OR SCALD INJURY
US - 24.11.2022

Clasificación Internacional [A61K 39/104](#) N° de solicitud 17637057 Solicitante Sichuan University Inventor/a Zhenling WANG

The present invention belongs to the field of microbiology, and particularly relates to an application of a *Pseudomonas aeruginosa* vaccine in prevention and treatment of burn and scald complicated with bacterial infection. The burn and scald of the present invention include burns and scalds, and degree of the scalds includes I degree, superficial II degree, deep II degree, or III degree scalds. Site of the scalds includes skin, mucosa or other tissues. The *Pseudomonas aeruginosa* vaccine of the present invention can effectively prevent and treat burn and scald complicated with *Pseudomonas aeruginosa* infection caused by multidrug-resistant *Pseudomonas aeruginosa* by activating the specific immune response of the body. The *Pseudomonas aeruginosa* vaccine of the present invention can reduce the bacterial load in the immunized subject through the established immunization procedures, thereby providing a technical solution that can effectively prevent burn and scald complicated with *Pseudomonas aeruginosa* infection, which avoids the technical problems caused by the use of antibiotics such as poor effectiveness, difficulty in curing and proneness to drug resistance in the prior art to a certain degree.

10.[20220370589](#)METHODS FOR TREATING, AMELIORATING OR PREVENTING INFECTIONS USING DRUG AND VACCINATION COMBINATION TREATMENT
US - 24.11.2022

Clasificación Internacional [A61K 39/12](#) N° de solicitud 17525775 Solicitante TOPELIA AUSTRALIA PTY LTD (ACN 652 771 670) Inventor/a Thomas Julius BORODY

In alternative embodiments, provided are methods for treating, ameliorating, decreasing the chances of having any adverse effects from, decreasing the severity of adverse effects from, or preventing an infection by administration of an antibiotic and/or an anti-viral drugs and a vaccine directed to a causative agent of the infection and/or an attenuated and/or a live, viable or infectious causative agent of the infection. In alternative embodiments, the infection is bacterial or viral. In alternative embodiments, the viral infection is a coronavirus infection such a Covid-19 infection. In alternative embodiments, methods as provide herein prevent or decrease the prevalence or severity of “vaccine breakthrough infections” after vaccination, where external mutants of COVID-19 infect patients in spite of the fact that they have undergone immunization, for example, to prevent a mutant or variant COVID-19 infection. In alternative embodiments, an antiviral combination administered in coordination with a vaccine comprises PF-07321332 or PAXLOVID™ and/or ritonavir, or ivermectin, doxycycline and a zinc or a zinc salt. In alternative embodiments, methods as provided herein are used to prevent in vivo mutations of such mutant infectious agent to enhance the efficacy of an administered vaccination; in other words, methods as provided herein are used to prevent in vivo replication of an acquired viral mutant or variant infectious agent, and thus also prevents ongoing mutations of the viral infectious agent because using the combination antiviral co-therapy where there is no replication of infectious agent and so there is no possible further mutation of the infectious agent.

11. [20220370594](#) WHOLE AVIAN-ORIGIN REVERSE GENETIC SYSTEM AND ITS USE IN PRODUCING H7N9 SUBTYPE AVIAN INFLUENZA VACCINE

US - 24.11.2022

Clasificación Internacional [A61K 39/145](#) N° de solicitud 17726577 Solicitante SOUTH CHINA AGRICULTURAL UNIVERSITY Inventor/a Wenbao QI

The present disclosure discloses a whole avian-origin reverse genetic manipulation system and its use in producing a recombinant H7N9 avian influenza vaccine. The whole avian-origin reverse genetic manipulation system is an eight-plasmid reverse genetic manipulation system based on H5N2 subtype avian influenza D7 virus strain, which is comprised of 8 recombinant plasmids respectively containing PB2, PB1, PA, HA, NP, NA, M and NS gene fragments derived from H5N2 subtype avian influenza D7 virus strain. The genome of the recombinant H7N9 subtype avian influenza vaccine of the present disclosure is comprised of an NA gene and a modified HA gene derived from a highly pathogenic H7N9 subtype avian influenza virus strain, as well as PB2, PB1, PA, NP, M and NS genes derived from H5N2 subtype avian influenza D7 virus strain.

12. [WO/2022/242652](#) VACCINE, USE THEREOF AND CANCER VACCINE COCKTAIL

WO - 24.11.2022

Clasificación Internacional [A61K 39/00](#) N° de solicitud PCT/CN2022/093380 Solicitante HUNG, Mien-Chie Inventor/a CHAO, Kun-San

A vaccine including a vector and a transgene is provided. The transgene encodes a plurality of peptides and is packaged in the vector, in which the peptides in order include a secretion signal peptide, at least one tumor antigen, at least one co-inhibitory peptide and a toll-like receptor 9 (TLR9) antagonist.

13. [20220370597](#) RECOMBINANT PROTEIN AND VACCINE COMPOSITION OF PORCINE EPIDEMIC DIARRHEA VIRUS

US - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud 17586211 Solicitante Jiangsu Academy of Agricultural Sciences Inventor/a Bin Li

A recombinant protein and a vaccine composition for porcine epidemic diarrhea (PED) are provided. The recombinant protein is a fusion protein formed by connecting the truncated segment of S protein (Spike protein) from porcine epidemic diarrhea virus (PEDV) in tandem with the Fc fragment of porcine IgG, and

the truncated fragment of S protein is preferably selected from N-terminal domain (NTD) with sialic acid binding activity in S1 subunit of S protein, neutralizing epitope domain (COE) and multiple B-cell epitopes in S2 subunit; the vaccine composition contains recombinant protein and adjuvants. The recombinant protein of the application can produce IgG antibody and neutralizing antibody titers of rather high level after immunizing mice, and the proportions of CD3⁺CD4⁺, CD3⁺CD8⁺ lymphocytes and the concentrations of IFN- γ and IL-4 in lymphocytes are significantly increased.

14. [2606693](#) Fusion protein

GB - 23.11.2022

Clasificación Internacional [C07K 14/165](#) N° de solicitud 202105044 Solicitante EXOSIS INC Inventor/a JAMES ROBERT EDGAR

The fusion protein comprises a tetraspanin exosomal protein and one or more immunogenic proteins. The tetraspanin may be CD63, CD9 or CD81, or a fragment or variant thereof. The protein may be capable of eliciting an immune response against a SARS-CoV-2 protein, such as the spike protein. Also claimed is an exosome or membrane preparation comprising the fusion protein, a vaccine composition comprising the exosome or membrane preparation, a nucleic acid molecule, an expression vector and a cell comprising the fusion protein. Also claimed is a method of preventing or ameliorating an infection comprising providing the subject with a therapeutically effective amount of the exosome, membrane preparation or vaccine composition. The exosome may comprise a DC receptor ligand and/or an immune enhancing moiety.

15. [WO/2022/244801](#) HTLV-1 NUCLEIC ACID LIPID PARTICLE VACCINE

WO - 24.11.2022

Clasificación Internacional [A61K 39/21](#) N° de solicitud PCT/JP2022/020646 Solicitante NATIONAL INSTITUTES OF BIOMEDICAL INNOVATION, HEALTH AND NUTRITION Inventor/a ISHII Ken

Provided is a vaccine for the treatment and/or prevention of infection by human T-cell leukemia virus type 1 (HTLV-1). A lipid particle of the present invention has encapsulated therein a nucleic acid that enables expression of the Tax antigen or the gp46 antigen of HTLV-1. The particle includes a lipid including a cationic lipid represented by general formula (Ia) or a pharmaceutically acceptable salt thereof. In the formula: R1 and R2 independently represent a C1-C3 alkyl group; L1 represents a C17-C19 alkenyl group optionally having one or more C2-C4 alkanoyloxy groups; L2 represents a C10-C19 alkyl group optionally having one or more C2-C4 alkanoyloxy groups or represents a C10-C19 alkenyl group optionally having one or more C2-C4 alkanoyloxy groups; and p represents 3 or 4.

16. [WO/2022/244831](#) CORONAVIRUS VACCINE SUITABLE FOR ELDERLY INDIVIDUALS

WO - 24.11.2022

Clasificación Internacional [A61K 39/12](#) N° de solicitud PCT/JP2022/020772 Solicitante OKINAWA

INSTITUTE OF SCIENCE AND TECHNOLOGY SCHOOL CORPORATION Inventor/a ISHIKAWA Hiroki The present invention provides a vaccine or an immunogenic composition that can be useful in an elderly human subject.

17. [WO/2022/242446](#) LACTOBACILLUS PLANTARUM AND USE THEREOF IN PREPARATION OF COVID-19 VACCINE IMMUNOPOTENTIATOR

WO - 24.11.2022

Clasificación Internacional [C12N 1/20](#) N° de solicitud PCT/CN2022/089867 Solicitante SHANGHAI PUBLIC HEALTH CLINICAL CENTER Inventor/a XU, Jianguo

Disclosed in the present invention is a strain of Lactobacillus plantarum guanke, wherein the strain has the deposit number CGMCC NO. 21720, was deposited on 22 January, 2021, has the classification name Lactobacillus plantarum guanke, and was deposited in the China General Microbiological Culture Collection Center. The strain provided in the present invention can significantly improve the neutralizing

antibody titer in serum carrying SARS-CoV-2 and prolong the protection time. Further provided in the present invention is the use of the strain in the preparation of a vaccine immunopotentiator.

18. [20220372081](#) WHOLE AVIAN-ORIGIN REVERSE GENETIC SYSTEM AND RECOMBINANT H5N2 SUBTYPE AVIAN INFLUENZA VIRUS, VACCINE AND USES THEREOF

US - 24.11.2022

Clasificación Internacional [C07K 14/005](#) N° de solicitud 17726567 Solicitante SOUTH CHINA

AGRICULTURAL UNIVERSITY Inventor/a Wenbao QI

The present disclosure discloses a whole avian-origin reverse genetic system, a recombinant H5N2 subtype avian influenza virus, a vaccine containing the virus, and a preparation method and application thereof. The genome of the recombinant virus is comprised of a modified HA gene derived from a highly pathogenic H5N6 subtype avian influenza virus strain, as well as PB2, PB1, PA, NP, NA, M and NS genes derived from H5N2 subtype avian influenza D7 virus strain. The recombinant virus is a recombinant H5N2 avian influenza virus rescued from the D7 virus strain as a backbone, which is an avirulent virus strain with the original immunogenicity, and can maintain a high virus titer during the chick embryo culture process. The recombinant virus fully meets the biological safety requirements and has a good application prospect.

19. [WO/2022/244825](#) INFLUENZA VIRUS NUCLEIC ACID LIPID PARTICLE VACCINE

WO - 24.11.2022

Clasificación Internacional [A61K 39/145](#) N° de solicitud PCT/JP2022/020745 Solicitante DAIICHI

SANKYO COMPANY, LIMITED Inventor/a TOMOZAWA Takanori

Provided is a vaccine for preventing and/or treating infection caused by influenza viruses, in which a lipid particle contains a nucleic acid capable of expressing a hemagglutinin (HA) protein of an influenza virus, wherein a lipid includes a cationic lipid represented by general formula (Ia) or a pharmaceutically acceptable salt thereof. [In the formula, R1, R2, p, L1, and L2 are defined as in the description of the specification.]

20. [WO/2022/246292](#) ELECTROCHEMICAL DIAGNOSTIC SYSTEM AND METHODS OF OBTAINING AND USING ELECTROCHEMICAL DIAGNOSTIC RESULTS

WO - 24.11.2022

Clasificación Internacional [G01N 33/543](#) N° de solicitud PCT/US2022/030393 Solicitante PERSOWN,

INC. Inventor/a KARUMANCHI, Devi Kalyan

Devices, systems, kits, methods, and techniques are described herein that are useful for to detecting analytes in body or test fluids using a functionalized electrochemical test strip and potentiostatic measurements, allowing for quickly (within 5 minutes) identifying whether or not an individual has a particular disease or condition, such as infection by SARS-CoV-2 or a variant or vaccine-induced immunity or natural immunity to infection by SARS-CoV-2 or a variant, or whether an individual would benefit from a vaccine booster. The test results can be used for applications including facilitating or controlling access at events, venues, or transportation systems, or generating exposure notifications. The electrodes include a SAM linked to the capture agents via a click chemistry based linker. There's also a charged passivation component (e.g. thiolated PEG) in the SAM. Charged glycosaminoglycans in the SAM contribute to anti-fouling and improving the sensitivity of the device.

21. [20220370581](#) VACCINE AND METHOD FOR TREATING CANCER

US - 24.11.2022

Clasificación Internacional [A61K 39/00](#) N° de solicitud 17746112 Solicitante China Medical University

Inventor/a Kun-San Chao

A vaccine including a vector and a transgene is provided. The transgene encodes a plurality of peptides and is packaged in the vector, in which the peptides in order include a secretion signal peptide, at least one tumor antigen, at least one co-inhibitory peptide and a toll-like receptor 9 (TLR9) antagonist.

22. [20220370600](#)MULTIGENIC MVA-SARS-COV-2 VACCINE

US - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud 17747358 Solicitante BOARD OF REGENTS, THE UNIVERSITY OF TEXAS SYSTEM Inventor/a Haitao HU

The present invention includes compositions and methods of making and using an immunogenic protein for mucosal delivery comprising at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% amino acid identity to a multigenic coronavirus vaccine on a modified vaccinia ankara (MVA) vector that expresses a viral nucleoprotein (N) protein and a spike (S) protein.

23. [20220373510](#)METHODS OF OBTAINING AND USING ELECTROCHEMICAL DIAGNOSTIC RESULTS

US - 24.11.2022

Clasificación Internacional [G01N 27/49](#) N° de solicitud 17566836 Solicitante PERSOWN, Inc. Inventor/a Devi Kalyan Karumanchi

Methods and techniques are described for analyzing test fluids to determine presence, absence, or concentration of analytes in the test fluids. The methods may correspond to diagnostic testing, such as quickly (within 5 minutes) identifying whether or not an individual may have a particular disease or condition, such as infection by SARS-CoV-2 or a SARS-CoV-2 variant or vaccine-induced immunity or natural immunity to infection by SARS-CoV-2 or a SARS-CoV-2 variant, or whether an individual would benefit from a vaccine booster. The test results can be used for a variety of applications including facilitating or controlling access at events, venues, or transportation systems, or generating exposure notifications.

24. [4091629](#)DIVERGENTE IMPFSTOFFZUSAMMENSETZUNG GEGEN PCV2B UND VERFAHREN ZUR VERWENDUNG

EP - 23.11.2022

Clasificación Internacional [A61K 39/12](#) N° de solicitud 22171259 Solicitante ZOETIS SERVICES LLC Inventor/a NITZEL GREGORY PAUL

This invention provides a vaccine composition for protecting pigs against PCV2, including a highly virulent porcine circovirus type 2b (PCV2b) divergent strain, the composition including a PCV2b divergent ORF2 polypeptide, wherein the ORF2 polypeptide comprises Leucine (L) at position 89, Threonine (T) at position 90, and Asparagine (N) at position 134, according to the numbering of SEQ ID NO: 1 herein.

25. [20220370587](#)Cellular Adjuvants for Viral Infection

US - 24.11.2022

Clasificación Internacional [A61K 39/108](#) N° de solicitud 17684121 Solicitante NantBio, Inc. Inventor/a Kayvan Niazi

Two-component vaccine formulations and methods are contemplated where the vaccine has an adjuvant component and a therapeutic component. The therapeutic component comprises preferably a recombinant therapeutic virus encoding a therapeutic antigen while the adjuvant component comprises a non-host cell or immune stimulating portion thereof. Notably, use of the adjuvant component will result in significant uptake of the therapeutic component into immune competent cells, even in the absence of receptors for entry of the therapeutic component. In addition, such adjuvant also stimulates expression of the therapeutic antigen.

26. [WO/2022/244815](#)HPV INFECTIOUS DISEASE VACCINE

WO - 24.11.2022

Clasificación Internacional [C12N 15/88](#) N° de solicitud PCT/JP2022/020713 Solicitante DAIICHI SANKYO COMPANY, LIMITED Inventor/a ONODERA Yoshikuni

Provided are lipid particles in which is encapsulated a nucleic acid, whereby: a vaccine for preventing and/or treating an infection by human papillomavirus type-6 and/or type-11 can be provided; and an E6 antibody and an E7 antibody to the human papillomavirus can be expressed. The lipid particles contain: a lipid that is a cationic lipid represented by general formula (Ia); or a pharmaceutically acceptable salt thereof. [In the formula, R1, R2, p, L1 and L2 are defined as described in the specification.]

27. [20220370499](#) IMMUNOTHERAPIES FOR TARGETING OF TUMOR VASCULATURE

US - 24.11.2022

Clasificación Internacional [A61K 35/17](#) N° de solicitud 17748997 Solicitante Therapeutic Solutions International, Inc. Inventor/a Thomas E. Ichim

Disclosed are novel means, protocols, and compositions of matter for creating targeted immune responses and/or induction of immunological memory towards the tumor vasculature. In one embodiment pluripotent stem cells are transfected with one or more genes capable of eliciting immunity, induced to differentiate into endothelial-like cells which resemble the tumor endothelial cells, and utilized as a vaccine. In some embodiment's genes are engineered under control of specific promoters to allow for various specificities of activity. In one specific embodiment pluripotent stem cells engineered to endow properties capable of inducing expression of the α -Gal epitope (Gal α 1,3Gal α 1,4GlcNAc-R). Addition of adjuvants to enhance antigen presentation of the vaccine composition, as well as means of stimulating systemic enhancement of circulating endothelial specific T cells are also disclosed.

28. [20220370603](#) COMPOSITIONS OF CARDIOLIPIN ADJUVANTS AND METHODS OF USE THEREOF

US - 24.11.2022

Clasificación Internacional [A61K 39/39](#) N° de solicitud 17324752 Solicitante The University of Hong Kong Inventor/a Liwei Lu

Compositions and methods for enhancing antigen-specific immunity in a subject are provided. Pharmaceutical compositions including an effective amount of an immuno-stimulatory cardiolipin as an adjuvant in combination with an antigen and methods of use thereof for stimulating protective immunity to the antigen in a subject are provided. Administration of the combination of the antigen and cardiolipin adjuvant is effective to enhance antigen-specific immunity in a subject to a greater degree than administering to the subject the same amount of the antigen alone. The active agents can be administered together or separately. In preferred forms the cardiolipin is cardiolipin species (C18:2)₄. In preferred forms the antigen is formulated as a vaccine, such as an influenza vaccine. A preferred amount by weight of each reagent is about 10-40% cardiolipin to about 90-60% antigen(s), inclusive.

29. [20220370292](#) AUTOMATED SYRINGE FILLING AND MEASURING SYSTEM AND METHODS OF USING SAME

US - 24.11.2022

Clasificación Internacional [A61J 1/20](#) N° de solicitud 17303141 Solicitante Auto Vaccine Innovation Inventor/a Akhil Seth

Methods and devices are provided precision filling of medical syringes. Generally, the methods and devices are designed to determine and measure dosages and fill a syringe with a precise amount from a medication vial and to store or transmit to a medical records storage system data associated with the process. In one embodiment, the fill apparatus weighs, photographs and stores information on a syringe and medicine vial, fills the syringe from the vial and confirms transfer of the medicine to the syringe from the vial.

30. [4091630](#) IMPFSTOFFE MIT R-DOTAP

EP - 23.11.2022

Clasificación Internacional [A61K 39/145](#) N° de solicitud 22150878 Solicitante PDS BIOTECHNOLOGY CORP Inventor/a BEDU-ADDO FRANK

The present disclosure provides vaccine compositions comprising at least one adjuvant and at least one antigen, wherein the adjuvant is a cationic lipid. The disclosure also provides methods of treating a disease in a mammal, methods of preventing a disease in a mammal, and methods of effecting antigen cross presentation to induce a humoral immune response and a cellular immune response in a mammal utilizing the vaccine compositions. Cross presentation of various antigens can be achieved by formulating the specific antigens with cationic lipids possessing adjuvant properties.

31. [20220372500](#) ATTENUATED *NOCARDIA SERIOLAE* AND CONSTRUCTION METHOD AND USE THEREOF

US - 24.11.2022

Clasificación Internacional [C12N 15/76](#) N° de solicitud 17428791 Solicitante GUANGDONG OCEAN UNIVERSITY Inventor/a Liqun XIA

The present disclosure provides an attenuated *Nocardia seriolae* and its construction method and use thereof, which belongs to the technical field of genetic engineering. In the present disclosure, part or all of the glutamate endopeptidase homologue (GluNS) gene sequence of wild-type *Nocardia seriolae* is knocked out by means of genetic engineering to construct an attenuated strain with the characterized of good protection to the host. The attenuated strain may not only effectively reduce the pathogenicity of the bacteria, but also retain good immunogenicity. At the same time, the attenuated *Nocardia seriolae* constructed in the present disclosure may also have the characteristics of high genetic stability and may be used as a vaccine candidate strain for the preparation of a vaccine or other biological products for preventing and treating Nocardiosis.

32. [20220372158](#) RNA-CODED ANTIBODY

US - 24.11.2022

Clasificación Internacional [C07K 16/28](#) N° de solicitud 17813530 Solicitante CureVac AG Inventor/a Ingmar HOERR

The present application describes an antibody-coding, non-modified or modified RNA and the use thereof for expression of this antibody, for the preparation of a pharmaceutical composition, in particular a passive vaccine, for treatment of tumours and cancer diseases, cardiovascular diseases, infectious diseases, autoimmune diseases, virus diseases and monogenetic diseases, e.g. also in gene therapy. The present invention furthermore describes an in vitro transcription method, in vitro methods for expression of this antibody using the RNA according to the invention and an in vivo method.

33. [20220372104](#) IMMUNOTHERAPY WITH B*07 RESTRICTED PEPTIDES AND COMBINATION OF PEPTIDES AGAINST CANCERS AND RELATED METHODS

US - 24.11.2022

Clasificación Internacional [C07K 14/725](#) N° de solicitud 17832383 Solicitante Immatrics Biotechnologies GmbH Inventor/a Heiko SCHUSTER

The present invention relates to peptides, proteins, nucleic acids and cells for use in immunotherapeutic methods. In particular, the present invention relates to the immunotherapy of cancer. The present invention furthermore relates to tumor-associated T-cell peptide epitopes, alone or in combination with other tumor-associated peptides that can for example serve as active pharmaceutical ingredients of vaccine compositions that stimulate anti-tumor immune responses, or to stimulate T cells ex vivo and transfer into patients. Peptides bound to molecules of the major histocompatibility complex (MHC), or peptides as such, can also be targets of antibodies, soluble T-cell receptors, and other binding molecules.

34. [20220370601](#) SARS-CoV-2 POLYPEPTIDES

US - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud 17748715 Solicitante MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH Inventor/a Gregory A. POLAND

This document provides methods and materials related to selected severe acute respiratory distress coronavirus 2 (SARS-CoV-2) polypeptides. For example, this document provides vaccine compositions that contain one or more selected SARS-CoV-2 polypeptides provided herein and that have the ability to induce or increase immune responses against coronaviruses such as SARS-CoV-2 within a mammal (e.g., a human).

35. [20220375624](#) SYSTEMS, APPARATUS AND METHODS OF REAL-TIME CELLULAR COMMUNICATION ASSISTED VACCINE TRACKING SYSTEM

US - 24.11.2022

Clasificación Internacional [G16H 50/80](#) N° de solicitud 17323175 Solicitante AT&T Intellectual Property I, L.P. Inventor/a Yupeng Jia

Aspects of the subject disclosure may include, for example, a method that includes receiving, by a processing system including a processor coupled to a communication network, data regarding participation by a network subscriber in a public health program. The data includes a real-time report of an event relating to the subscriber participation, and is sent from subscriber equipment to a base station of the communication network via a dedicated information element. The method also includes determining a rate of participation in the program by a population of a community in a coverage area of the base station. The method further includes training a model for participation in the program by members of the community; the training comprises applying machine learning to the model. The method also includes adjusting the model in accordance with the data; administration of the program is modified in accordance with the model. Other embodiments are disclosed.

36. [WO/2022/242432](#) PEPTIDE VACCINE FOR VIRUS INFECTION

WO - 24.11.2022

Clasificación Internacional [C07K 7/04](#) N° de solicitud PCT/CN2022/089266 Solicitante VACINO BIOTECH CO., LTD. Inventor/a CHANG, Jia-Ming

Provided is an immunogenic composition against virus infection, especially to an immunogenic composition having peptides that are capable of binding to major histocompatibility complex (MHC) molecules and inducing a broad-spectrum immunity against coronavirus.

37. [20220370583A](#)*03 RESTRICTED PEPTIDES FOR USE IN IMMUNOTHERAPY AGAINST CANCERS AND RELATED METHODS

US - 24.11.2022

Clasificación Internacional [A61K 39/00](#) N° de solicitud 17876899 Solicitante Immatics Biotechnologies GmbH Inventor/a Colette SONG

The present invention relates to peptides, proteins, nucleic acids and cells for use in immunotherapeutic methods. In particular, the present invention relates to the immunotherapy of cancer. The present invention furthermore relates to tumor-associated T-cell peptide epitopes, alone or in combination with other tumor-associated peptides that can for example serve as active pharmaceutical ingredients of vaccine compositions that stimulate anti-tumor immune responses, or to stimulate T cells ex vivo and transfer into patients. Peptides bound to molecules of the major histocompatibility complex (MHC), or peptides as such, can also be targets of antibodies, soluble T-cell receptors, and other binding molecules.

38. [20220373498](#) ELECTROCHEMICAL DIAGNOSTIC SYSTEM

US - 24.11.2022

Clasificación Internacional [G01N 27/327](#) N° de solicitud 17566828 Solicitante PERSOWN, Inc. Inventor/a Devi Kalyan Karumanchi

Described are devices, systems, kits, methods, and techniques for analyzing test fluids to determine presence, absence, or concentration of analytes in the test fluids and useful for performing diagnostic testing, such as to quickly identify whether or not an individual may have a particular disease or condition, such as infection by SARS-CoV-2 or a SARS-CoV-2 variant or vaccine-induced immunity or natural immunity to infection by SARS-CoV-2 or a SARS-CoV-2 variant. The devices, systems, kits, methods, and techniques described herein can be used to detect analytes in body fluids using a functionalized electrochemical test strip and potentiostatic measurements, allowing for prompt identification of whether or not an individual has a particular disease or condition, such as in a period of 5 minutes or less.

39. [20220370596](#) SYNTHETIC pDNA VACCINES AGAINST COVID-19

US - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud 17323357 Solicitante Imam Abdulrahman Bin Faisal University Inventor/a Iman ALMANSOUR

A pDNA-based vaccine against SARS-CoV-2 and methods for preventing or treating COVID-19 using it.

40. [WO/2022/246084](#) SARS-COV-2 POLYPEPTIDES

WO - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud PCT/US2022/030068 Solicitante MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH Inventor/a POLAND, Gregory A.

This document provides methods and materials related to selected severe acute respiratory distress coronavirus 2 (SARS-CoV-2) polypeptides. For example, this document provides vaccine compositions that contain one or more selected SARS-CoV-2 polypeptides provided herein and that have the ability to induce or increase immune responses against coronaviruses such as SARS-CoV-2 within a mammal (e.g., a human).

41. [4090348](#) VERFAHREN ZUM BEHANDELN VON VIRALINFEKTIONEN

EP - 23.11.2022

Clasificación Internacional [A61K 38/00](#) N° de solicitud 21741817 Solicitante UNIV CALIFORNIA Inventor/a HARTIGAN-O'CONNOR DENNIS J

Provided herein are methods for preventing or treating a human immunodeficiency virus (HIV) infection or a simian immunodeficiency virus (SIV) infection in a subject. The methods include administering to the subject (a) a reservoir-depleting agent that binds to a host protein on a reservoir cell, and (b) an antiviral vaccine.

42. [WO/2022/244845](#) THERAPEUTIC AGENT FOR DISEASE ASSOCIATED WITH ABNORMAL LIPID

WO - 24.11.2022

Clasificación Internacional [A61K 39/00](#) N° de solicitud PCT/JP2022/020850 Solicitante NATIONAL UNIVERSITY CORPORATION KUMAMOTO UNIVERSITY Inventor/a OIKE, Yuichi

The purpose of the present invention is to provide a novel therapeutic agent for dyslipidemia, which targets angiopoietin-like factor 3. According to the present invention, a vaccine composition is provided, which contains a peptide having a portion of the sequence for angiopoietin-like factor 3 (ANGPTL3) as an active ingredient, in which the peptide comprises at least one peptide selected from the group consisting of EPKSRFA (SEQ ID NO: 3), EPKSRFAMLD (SEQ ID NO: 4) and EPKSRFAMLDVVK (SEQ ID NO: 5).

43. [WO/2022/246327](#) A BROADLY PROTECTIVE PROPHYLACTIC VACCINE AGAINST

PSEUDOMONAS AERUGINOSA

WO - 24.11.2022

Clasificación Internacional [G01N 21/25](#) N° de solicitud PCT/US2022/030565 Solicitante UNIVERSITY OF KANSAS Inventor/a PICKING, Wendy L.

Disclosed are compositions comprising a fusion polypeptide comprising i) a fusion of a needle tip protein or an antigenic fragment thereof and/or a translocator protein or an antigenic fragment thereof from a

Type III secretion system (T3SS) of a Gram negative bacteria and ii) the A1 subunit of the labile toxin (LTa1) from enterotoxigenic Escherichia coli or cholera toxin. and methods of their use.

44. [20220370599](#) MESSENGER RNA THERAPEUTICS AND COMPOSITIONS

US - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud 17734703 Solicitante Greenlight Biosciences, Inc. Inventor/a James Robbins ABSHIRE

In the various aspects and embodiments, this disclosure provides messenger RNA (mRNA) constructs for therapeutic delivery, as well as methods for making such mRNA constructs and pharmaceutical compositions comprising the same (including mRNA vaccine compositions). In still other aspects, the invention provides methods for treating patients by expression of therapeutic proteins, including for preventing or reducing probability of infection by, or illness involving, a virus. Exemplary viruses include coronaviruses (such as SARS-CoV-2 and variants thereof) and influenza viruses, among others.

45. [4090322](#) VON TUMORZELLEN STAMMENDE EXOSOMEN UND VERFAHREN ZUM BEHANDELN VON KOLOREKTALEM KREBS

EP - 23.11.2022

Clasificación Internacional [A61K 31/00](#) N° de solicitud 21705012 Solicitante UNIV MINNESOTA Inventor/a SUBRAMANIAN SUBBAYA

The present invention provides tumor-derived extracellular vesicles (EVs) lacking an immune suppressive factor, for example, miR-424, methods of making and methods of use for treating cancer. Further the present invention provide vaccine compositions comprising modified tumor-derived EVs for use in treating secondary tumors.

46. [WO/2022/241760](#) SAFER VACCINES

WO - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud PCT/CN2021/095146 Solicitante WANG, Huiru Inventor/a WANG, Huiru

The invention provides safer vaccines that induce less adverse reactions particular the serious adverse reactions in a host. Also provided are compositions including these safer vaccines, as well as polynucleotides, vectors, host cells, methods, and kits related thereto. Further provided are methods and kits for preventing or treating infectious diseases, infection-relating diseases, and adverse reactions of vaccines in an individual by administering to the individual a safer vaccine that induce less adverse reactions, or by administering to the individual a pathogenic antigen that neutralize pathogenic antibodies. Yet further provided are methods for identification of the presence of pathogenic antibodies inducible by a pathogen or the vaccines relating to the pathogen.

47. [20220373559](#) DETECTION OF ANTIBODIES AGAINST RAN PROTEINS FROM SERUM AND TISSUE LYSATES

US - 24.11.2022

Clasificación Internacional [G01N 33/68](#) N° de solicitud 17761764 Solicitante University of Florida Research Foundation, Incorporated Inventor/a Laura Ranum

Aspects of the disclosure relate to methods and compositions (e.g., kits) for detecting anti-repeat-associated non-ATG (RAN) protein antibodies in a subject (e.g., a subject that has been administered a therapeutic anti-RAN protein antibody or a vaccine against a disease or disorder associated with RAN protein expression, translation, and/or accumulation, for example amyotrophic lateral sclerosis (ALS) and/or frontotemporal dementia (FTD)). In some embodiments, methods described by the disclosure comprise detecting one or more anti-RAN protein antibodies in a biological sample obtained from a subject by an electrochemiluminescence-based immunoassay using one or more target di-amino acid

repeat peptides. In some embodiments, the disclosure relates to kits comprising one or more di-amino acid repeat peptides and an electrochemiluminescence-based immunoassay plate and/or reagents.

48. [20220370007](#) METHOD AND APPARATUS FOR ANALYZING SPECTRUM OF AUDITORY THERAPY FREQUENCIES

US - 24.11.2022

Clasificación Internacional [A61B 5/00](#) N° de solicitud 17641986 Solicitante Sound Vaccine, Inc. Inventor/a Eun Yee KWAK

An apparatus for auditory therapy frequency spectrum analysis includes: a processor and a memory connected to the processor, wherein the memory stores program instructions executable by the processor to receive a hearing threshold of a user for each of n frequency bands in which an audible frequency band is divided with 1/k octave resolution, calculate n hearing threshold representative values for each of the n frequency bands according to a preset criterion, determine a group to which the user belongs by using the calculated n hearing threshold representative values, and determine acoustic stimulus signals of frequency bands sequentially required for the user to be treated based on the determined group.

49. [20220370604](#) PEPTIDE VACCINE FOR VIRUS INFECTION

US - 24.11.2022

Clasificación Internacional [A61K 39/39](#) N° de solicitud 17726688 Solicitante Vacino Biotech Co., Ltd. Inventor/a Jia-Ming CHANG

The present invention relates to an immunogenic composition against virus infection, especially to an immunogenic composition having peptides that are capable of binding to major histocompatibility complex (MHC) molecules and inducing a broad-spectrum immunity against coronavirus.

50. [WO/2022/245258](#) ARTIFICIAL GENE N1NEW FOR ENCODING THE NUCLEOCAPSID PROTEIN OF THE CORONAVIRUS SARS-COV-2, AND RECOMBINANT PLASMID PET-28A-N1NEW FOR EXPRESSING SAID ARTIFICIAL GENE

WO - 24.11.2022

Clasificación Internacional [A61K 39/215](#) N° de solicitud PCT/RU2022/050153 Solicitante THE FEDERAL STATE UNITARY ENTERPRISE "THE SAINT-PETERSBURG SCIENTIFIC RESEARCH INSTITUTE OF VACCINES AND SERUMS AND THE ENTERPRISE FOR THE PRODUCTION OF BACTERIAL PREPARATIONS" OF FEDERAL MEDICAL AND BIOLOGIC AGENCY Inventor/a BELOZEROVA, Natalia Sergeevna

The invention relates to biotechnology and immunology. Proposed are a gene that allows the production of an artificial protein having immunogenic properties with respect to SARS-CoV-2, a plasmid containing said gene, as well as the artificial protein itself, which is obtained using an E.coli cell line modified by said plasmid. The recombinant protein obtained has immunogenic properties with respect to SARS-CoV-2 and can be used as an active substance for producing a vaccine against SARS-CoV-2.

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Edición: Annia Ramos Rodríguez aramos@finlay.edu.cu
Ma. Victoria Guzmán Sánchez mguzman@finlay.edu.cu
Randelys Molina Castro rmolina@finlay.edu.cu
Irina Crespo Molina icrespo@finlay.edu.cu
Yamira Puig Fernández yamipuig@finlay.edu.cu
Rolando Ochoa Azze ochoa@finlay.edu.cu

