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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.

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La FDA aprueba la primera vacuna para proteger a los recién nacidos del virus respiratorio sincitial

22 ago. La Administración de Alimentos y Medicamentos de Estados Unidos (FDA, por sus siglas en inglés) aprobó este lunes la primera vacuna que protege a los recién nacidos del virus respiratorio sincitial, conocido como RSV (por sus siglas en inglés).

La vacuna, fabricada por Pfizer, se administra a las madres al final del embarazo y brinda protección a los bebés durante los primeros seis meses de vida.

En un ensayo con más de 7.000 personas embarazadas y sus bebés, la vacuna, llamada Abrysvo, redujo el riesgo de que los bebés necesitaran ver a un médico o ser ingresados en el hospital.

El virus respiratorio sincital es una enfermedad común y una causa importante de hospitalización en bebés y ancianos cada año. Por lo general, afecta con más fuerza durante los meses de invierno, y la última temporada de RSV fue más larga y grave de lo habitual, lo que abrumó a los hospitales infantiles.

"El virus respiratorio sincital es una causa común de enfermedad en los niños, y los bebés se encuentran entre los que corren mayor riesgo de sufrir una enfermedad grave, lo que puede conducir a la hospitalización", dijo en un comunicado el Dr. Peter Marks, director del Centro de Evaluación e Investigación de Productos Biológicos de la FDA. "Esta aprobación brinda una opción para que los proveedores de atención médica y las personas embarazadas protejan a los bebés de esta enfermedad potencialmente mortal".

Después de décadas de estudio e intentos fallidos de desarrollar vacunas contra el RSV, ahora existen varias ofertas para proteger contra el virus, incluida una inyección de anticuerpos recientemente aprobada que se puede administrar a todos los bebés después del nacimiento y nuevas vacunas para personas de 60 años o más.

"La aprobación de Abrysvo como la primera y única inmunización materna para ayudar a proteger a los recién nacidos desde el nacimiento hasta los seis meses contra el RSV marca un hito importante para la comunidad científica y para la salud pública", dijo en un comunicado Annaliesa Anderson, vicepresidenta senior y directora científica de investigación y desarrollo de vacunas de Pfizer.

Pfizer dijo que la vacunación materna podría evitar hasta 16.000 hospitalizaciones y más de 300.000 visitas al médico por RSV cada año, si la vacuna se aplicara universalmente.

Aún así, la vacuna, administrada entre las semanas 32 y 36 de edad gestacional, no brinda protección a largo plazo. Durante los primeros tres meses después del nacimiento, la vacuna tuvo una eficacia del 82% para prevenir la enfermedad grave por RSV y del 57% para evitar que los bebés necesitaran consultar al médico debido a una infección por RSV.

Seis meses después del nacimiento, la vacuna tenía una eficacia del 69% para prevenir la enfermedad grave por RSV y del 51% para prevenir una visita al médico por problemas respiratorios relacionados con el RSV. Después de unos seis meses, era tan eficaz como un placebo para evitar que los bebés acudieran al consultorio del médico.

A principios de este año, los asesores de vacunas de la FDA votaron por unanimidad que la vacuna era eficaz y 10 a 4 que los datos respaldaban su seguridad. Un análisis de la agencia encontró que había una proporción ligeramente mayor de nacimientos prematuros en bebés cuyas madres recibieron la vacuna RSV en comparación con aquellos que recibieron un placebo: 5,7% frente a 4,7%, respectivamente. La diferencia no se consideró estadísticamente significativa, por lo que podría deberse al azar.

Pfizer dijo que planea un gran estudio de seguridad posterior a la comercialización que utilizará grandes bases de datos de reclamaciones comerciales, incluidos datos de Medicaid, para ayudar a evaluar los criterios de valoración de seguridad (incluido el parto prematuro) en todas las personas que reciben la vacuna.

La compañía también está estudiando la vacuna en niños de mayor riesgo de entre 2 y 18 años y en adultos de 18 a 60 años que tienen un mayor riesgo de contraer el RSV debido a afecciones médicas subyacentes o que tienen sistemas inmunológicos debilitados.

Fuente: CNN Salud. Disponible en https://goo.su/2e75LU

Una variante más de un coronavirus que no quiere irse

22 ago. Desde hace casi cuatro años, la humanidad tuvo que aprender a convivir no sólo con el coronavirus SARS-CoV-2 -un único y nuevo agente infeccioso que la azotó con su pandemia-, sino también con los sucesivos miembros de su prolífera y deletérea familia, dada por sus variantes y subvariantes.

Y, como en todas las familias los integrantes tienen caracteres diversos, en el caso de los miembros de ésta, sus caracteres los llevaron a interactuar de modo distinto con los seres humanos: con mayor o menor agresividad, con diferente capacidad de transmisibilidad entre las personas, y disímil susceptibilidad a los anticuerpos generados por las sucesivas vacunas que se fueron desarrollando.

Si bien la presencia de nuevos casos parecería no perturbar demasiado a la comunidad ni a los organismos de Salud Pública, la aparición de un “nuevo” virus no deja de impactar y debería ser tenida en cuenta, especialmente cuando protagoniza casos graves o que requieren internación.

La última variante conocida que ha irrumpido es EG.5 (también denominada ERIS) y proviene de la variante anterior llamada XBB, ambas de la familia ómicron. Innumerables transformaciones en su código genético han dado origen a EG.5, responsable de aproximadamente el 17% de los recientes casos de Covid-19 a nivel nacional en los EE. UU., según los datos más recientes proporcionados por los Centros para el Control y la Prevención de Enfermedades de Estados Unidos.

La Organización Mundial de la Salud (OMS) ya la ha declarado como variante de interés hace unos pocos días, y en la Argentina ya se han detectado los primeros casos. Pero, ¿supone una amenaza? ¿Es diferente al resto de variantes que ya conocemos?

Lo primero que debería tenerse en cuenta es que EG.5 representa una modificación adicional del virus en lugar de un cambio evolutivo significativo como lo fue la variante original y de impacto mundial: ómicron. Los síntomas asociados siguen siendo similares: dolor de garganta, congestión nasal, secreción nasal, tos y fiebre. Dada su capacidad de crecimiento y sus características de evasión inmunológica, la variante EG.5 “tiene el potencial de generar un aumento en la incidencia de casos y podría llegar a prevalecer en ciertos países, o incluso a nivel global”.

A pesar de la mayor prevalencia, la capacidad de crecimiento y características de evasión inmunológica

observadas en EG.5, la OMS ha manifestado que no se han registrado modificaciones en la severidad de la enfermedad -hasta el momento-. En conjunto, las pruebas disponibles no sugieren que tenga riesgos adicionales para la salud pública en relación con los otros linajes descendientes de ómicron que circulan actualmente. Sin embargo, la misma organización asegura que será necesario una evaluación más exhaustiva del riesgo planteado. Hasta el 7 de agosto, se habían recopilado 7.354 secuencias de EG.5 procedentes de 51 países, la mayor parte (30,6%, 2.247 secuencias), de China.

Para el control global del Covid son importantes tanto las revacunaciones como la vigilancia epidemiológica informando datos sobre la enfermedad, especialmente en lo que respecta a la mortalidad y la morbilidad. Lamentablemente, algunos países ya no registran ni informan sobre hospitalizaciones e ingresos en unidades de cuidados intensivos relacionados con el virus.

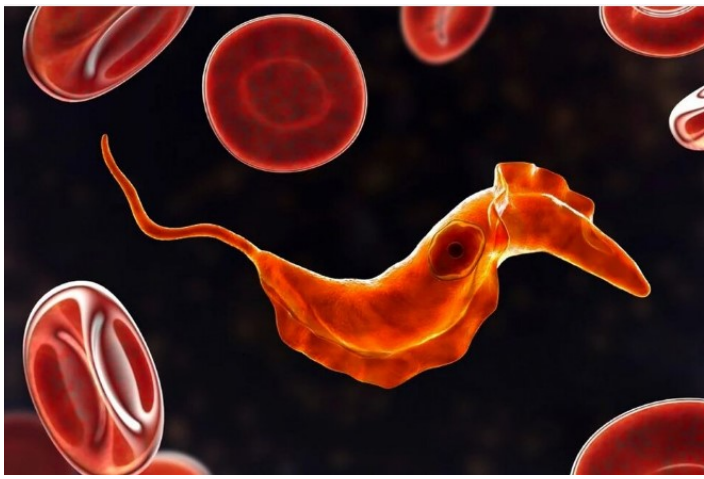
Los casos graves, hospitalizaciones y muertes se mantuvieron bajos en sitios con altas tasas de inmunizaciones. Muchos estudios señalan que aquellos países con altas cobertura de vacunación anticovid tomaron la delantera en la lucha contra la pandemia y fueron desacoplando las infecciones de las muertes, incluso ante nuevas olas.

Sin embargo, hoy el dilema parece otro. Los expertos observan una reducción en la protección a lo largo del tiempo contra casos leves a moderados y es el motivo por el cual se va camino a una actualización permanente de las vacunas, tal como ocurre con la de la gripe. Las vacunas denominadas “actualizadas” o bivalentes disponibles en la Argentina protegen tanto contra el virus original que causa el Covid-19 como contra la variante ómicron Y si bien todavía no existe una vacuna específica dirigida a esta nueva variante, los refuerzos que estarán disponibles este otoño en el hemisferio norte se están actualizado para luchar contra las nuevas subvariantes de ómicron que han sido dominantes desde 2023.

La nueva variante recombinante EG.5 parece demostrarnos que el Covid no quiere irse. Está muy cómodo entre nosotros, sus huéspedes, y es poseedora de una singular resiliencia, ya que continúa reinventándose a sí mismo. Siempre es válido el recordatorio que, hasta que no se encuentre con una fórmula para eliminarlo definitivamente, debemos seguir cumpliendo con las recomendaciones de cuidado de los organismos internacionales para continuar protegiendo a los miembros de nuestras familias (particularmente a ancianos e inmunocomprometidos) del coronavirus.

Fuente: La Nación. Disponible en https://goo.su/BNdHU5

Enfermedad de Chagas: la vacuna de la UBA está lista para empezar las pruebas en humanos



25 ago. La vacuna contra el Chagas, desarrollada por la Universidad de Buenos Aires (UBA), ya está lista para empezar la fase de prueba en humanos. Se trata de una vacuna "de última generación", de aplicación nasal y sin agujas llamada Cruziva. El anuncio se hizo el viernes 25 de agosto, en el Día Nacional por una Argentina sin Chagas.

La vacuna ya pasó las pruebas en ratones, perros y primates no humanos. También superó satisfactoriamente los estudios de seguridad y toxicidad. Ahora, resta que los resultados de los estudios se presenten ante las agencias regulatorias para

obtener autorización del estudio de fase I en humanos con el fin de evaluar la seguridad y la dosis.

Los investigadores esperan que la vacuna Cruzivax pueda utilizarse como prevención, pero también de manera terapéutica para tratar a quienes ya están infectados. Emilio Malchiodi, investigador UBA/Conicet y director del proyecto, explicó: "Nos aprovechamos del sistema inmune de mucosas, que puede generar una respuesta inmune importante que luego se hace sistémica". Es decir, primero aparecen los anticuerpos en la mucosa nasal, y luego en el torrente sanguíneo.

"Este antígeno quimérico, que llamamos Traspaína, en combinación con un adyuvante de última generación, demostró ser protectivo contra la infección por Trypanosoma cruzi", agregó Malchiodi, que también es profesor titular de Inmunología en la Facultad de Farmacia y Bioquímica de la UBA.

El Chagas es una de las 20 enfermedades que la OMS califica como desatendidas, y por ella fallecen más de 12.000 personas al año, en su mayoría en Latinoamérica. En Argentina, hay 1,6 millones de personas infectadas y 7 millones en riesgo, mientras que en el mundo el número es de entre 6 y 8 millones.

El equipo de Malchiodi trabaja actualmente en el desarrollo de otras dos vacunas, una para la fiebre amarilla y otra para la leishmaniasis, dos enfermedades también producidas por parásitos.

Cómo se contagia el Chagas

El Chagas es una enfermedad causada por un parásito que puede vivir en la sangre de personas, animales e insectos como la vinchuca o chinche. La enfermedad se detecta con un análisis de sangre. Existen tres maneras en las que se puede transmitir la enfermedad:

Modo vertical: si una persona gestante tiene Chagas, en algunos casos se puede transmitir durante la gestación o en el momento del parto.

Modo vectorial: a través de la picadura de los insectos conocidos como “vinchucas” o “chinches”, si están infectados con el parásito T. cruzi. Al picar para alimentarse, la vinchuca defeca sobre la piel de la persona y cuando ésta se rasca, introduce los parásitos (que están en las heces/caca) en la herida de la propia picadura. También la persona puede introducir los parásitos a su cuerpo al tocarse los ojos, la boca o alguna lesión cutánea abierta con la mano con la que se rascó la picadura.

Transfusión de sangre: de personas con la infección (razón por la cual las personas con Chagas no deben donar sangre). En Argentina esta vía de transmisión se encuentra controlada.

Otras vías poco frecuentes de contagio en Argentina son por trasplante de órganos de donantes que tienen Chagas, a través de la ingesta de bebidas o alimentos contaminados; accidentes en laboratorios o por el uso compartido de agujas y jeringas.

Cuáles son los síntomas del Chagas

Desde que el parásito ingresa al organismo, una décima parte de las personas infectadas presenta en las primeras dos semanas manifestaciones clínicas generales, como fiebre prolongada, diarrea, dolor de cabeza, cansancio, irritabilidad, vómitos y falta de apetito. Sin embargo, en la gran mayoría de los casos, esta etapa inicial pasa inadvertida y es asintomática.

En tanto, el 30% de las personas infectadas desarrolla la enfermedad de Chagas con afección del corazón y/o del sistema digestivo. En estos casos, los síntomas son: dolor en el pecho, palpitaciones, dificultad para tragar y constipación.

Un gran porcentaje de los pacientes con miocarditis chagásica (inflamación del músculo del corazón) sufre daños cardíacos que muchas veces pueden resultar en muerte súbita o en insuficiencia cardíaca progresiva. El 70% restante de las personas infectadas puede pasar toda su vida sin desarrollar la enfermedad.

Fuente: Página 12. Disponible en https://goo.su/XF8UKIr

Las autoridades anuncian que las vacunas contra la COVID-19 actualizadas saldrán a mediados de septiembre

25 ago. A mediados de septiembre podrían estar disponibles unas nuevas vacunas de refuerzo contra la COVID-19, adaptadas para que se dirijan a las variantes que circulan ahora.

Se prevé que la Administración de Alimentos y Medicamentos (FDA) de EE. UU. las apruebe en una semanas, reportó CNN, citando a funcionarios sénior de la administración que no nombró.

Los Centros para el Control y la Prevención de Enfermedades (CDC) de EE. UU. realizarán poco después una revisión de seguridad y sus recomendaciones. Su Comité Asesor de Prácticas de Inmunización se reunirá el 12 de septiembre.

Será una oportunidad para que las personas mejoren sus niveles menguantes de anticuerpos contra el virus. Apenas un 17 por ciento de los que eran elegibles para recibir la vacuna bivalente contra la COVID el otoño pasado la recibieron, según CNN.

Se prevé que los estadounidenses puedan elegir entre dos vacunas de ARNm, producidas por Pfizer y Moderna, además de una vacuna con subunidades de proteína de Novavax.

La vacuna de Novavax contiene un ingrediente que fortalece al sistema inmunitario para que produzca anticuerpos, informó CNN.

El plan de la FDA es aprobar las vacunas de Pfizer y de Moderna para las personas de a partir de 12 años. Se prevé que autorice las vacunas de Novavax, además de vacunas para las personas de 11 años o menores, bajo una autorización de uso de emergencia, según CNN.

Las nuevas vacunas se dirigirán a la subvariante XBB.1.5 del coronavirus, y ofrecerá cierta protección contra las cepas relacionadas de cerca. También serán efectivas contra la EG.5.

No habrá una cobertura gubernamental gratuita, aunque la mayoría de los planes de seguro están obligados a cubrir el costo completo, sin copagos, según la Ley del Cuidado de Salud a Bajo Precio (*Affordable Care Act*).

Las personas sin seguro pueden utilizar un programa de puente del gobierno para recibir vacunas gratis.

"Este programa de puente existirá a través de algunos canales", comentó la Dra. Mandy Cohen, directora de los CDC, en una entrevista en CNN. "Las personas pueden acudir a un centro de salud con calificación

federal, o pueden ir a su departamento de salud pública ...Y la tercera opción es que estamos trabajando con farmacias asociadas, como CVS, Walgreens, Walmart y otras para que también esté disponible en las farmacias".

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Además, la Reserva Nacional todavía tiene pruebas para la COVID-19, y continúa enviándolas a donde se necesiten.

La noticia sobre los refuerzos llega en un momento en que los casos de COVID están en aumento, según se observa en las visitas a la sala de emergencias, las hospitalizaciones, las pruebas de viajeros en los aeropuertos, y la monitorización de las aguas residuales.

Ahora mismo, hay más de 12,000 estadounidenses hospitalizados con el virus. Esto representa un aumento de un 22 por ciento en la semana más reciente, reportó CNN.

La inmunidad a partir de las vacunas e infecciones anteriores ha mantenido ese número de casos de COVID-19 en alrededor de un tercio respecto a estas fechas en el verano pasado.

Fuente: infobae. Disponible en https://goo.su/GbB0

Vaccination in less developed countries

Aug 26. Vaccine are one of big steps health care in human history. Thanks to them this is possible. prevent millions of deaths worldwide and ensure the protection of the population from certain diseases. However, there is disparity in the use of vaccines across the planet, as not all countries can buy them at the same level. That's why the alliance GAVI helps eliminate this disparity.

GAVI is alliance various entities globally, as UNICEF, WHO, World Bank and Bill & Melinda Gates Foundation, which is responsible for the delivery of vaccines to all countries of the world. This is a public and private cooperation that includes, for example, Spain.

In fact, "Gavi has been one of Spain's main partners in global health over the past two decades, and

cooperation has strengthened in the context of the fight against the Covid-19 pandemic," the government explained. In fact, in the same year, in June, our country was responsible for holding a high-level ministerial event. In addition, Spain has been a Gavi donor since 2006.

This organization is governed by a strategy in five phase. **The first** of them began in the year 2000. During the first five years of the organization's existence, until 2005, Gavi's focus was on sending funds to countries to expand the coverage and quality of immunization programs. In these first years of life, they focused primarily on three vaccines that were underused: hepatitis B (HepB), Haemophilus influenzae type b (Hib), and yellow fever.

Second stage It already covers the period from 2006 to 2010. As explained in the organization itself, this stage has already been marked by important innovations and changes. Two new vaccines have been included: pneumococcal and rotavirus infection. In addition, they wanted to improve their vaccine investment strategy and create a platform to accelerate the introduction of new vaccines in developing countries.

Third stage this project, from 2011 to 2015, represented an "unprecedented period of accelerating introduction from vaccine' as explained. It built on "the lessons of the previous 10 years and set a roadmap to complete the introduction of pentavalent vaccines and accelerate the advent of a new generation of life."

Fourth stage, already somewhat later, from 2016 until last year 2020, served to establish a new strategy with an overview of the previous fifteen years. This new strategy was designed to "adapt to a changing environment" and included some principles. They will be based on increased country leadership, community ownership, global engagement, and a catalytic, sustainable, integrated, innovative, collaborative and accountable process.

V present we are already in fifth phasecorresponding 2021-2025. In June 2019, the Gavi Council approved this new strategy. "Gavi 5.0", with the idea "immunization leaves no one behind". This plan includes some changes such as the adoption of a centralized approach to achieve children with "zero dose" and lost communities with capital; more differentiated, personalized and targeted approaches; more attention to sustainability program; or provide support to other countries.

To that end, our goals for the future include introducing and expanding coverage of highly effective vaccines, improving equity, making immunization programs more sustainable, and ensuring healthy markets for vaccines and related products. In addition, they want to reach the so-called "zero dose" children, i.e. those whose communities are more difficult to reach and who, therefore,not receiving any dose of vaccine. Every tenth child corresponds to this classification.

Fuente: The Goa Spotlight. Disponible en https://goo.su/V0qNh6D

A trial is underway that could be 'the last roll of the dice' for an HIV vaccine this decade

Aug 27. A novel trial that has been described as "the last roll of the dice" for a generation of HIV vaccines has entered its latter stages.

Called PrEPVacc, the trial is testing two vaccines alongside two forms of pre-exposure prophylaxis (PrEP) to test vaccine efficacy while offering protection to prevent the spread of HIV.

African-led and coordinated out of Entebbe, Uganda, with international support, its success could mark the

start of a new phase of vaccine development. Should it fail, it could also see immunologists give up on a generation of vaccines.

Nearly 40 years since HIV was identified as the cause of AIDS, and 36 years since the first HIV vaccine trial, the medical community still does not have a working vaccine. Although antiretroviral treatments are well established, access varies. UNAIDS estimates 630,000 people died from AIDS-related illness globally in 2022, while 39 million people are living with HIV, including 1.3 million people newly infected last year.

The hope is that PrEPVacc will succeed where other trials have fallen short – most recently HVTN 702 (dubbed "Uhambo"), halted in February 2020, HVTN 705 ("Imbokodo"), discontinued in 2021 and HVTN 706 ("Mosaico") in 2023, all of which were found to be safe but ineffective at preventing HIV.

Only one clinical trial, which took place in Thailand with results published in 2009, has been found to show modest effectiveness at preventing HIV infection. The efficacy of that vaccine, RV144, was about 30% (although the findings continue to be debated). For PrEPVacc to be considered a success, either of the two vaccines being tested will need to achieve an efficacy of at least 70%.

One vaccine combines pieces of synthetic HIV DNA with a protein base, while the other combines DNA, MVA (a weakened pox virus) and a protein base, like that used in RV144.

"This is an evolution (of RV144), not a revolution," said Jonathan Weber, lead applicant and coordinator of PrEPVacc, and director of the Imperial College Academic Health Science Centre in London. "These are both regimens which have never gone into efficacy study before," he added, describing the vaccines as "the best we feel, at the moment, that medical science can provide."

The clinical trial began enrollment December 2020 and signed up the last of its 1,513 participants in March 2023. The participants are all between 18-40 years old and live in South Africa, Uganda or Tanzania.

All three countries have high rates of HIV/AIDS in adults, sitting within the top 15 countries in the world per 2021 estimates. But that is not necessarily why they were chosen to participate, said Eugene Ruzagira, PrEPVacc trial director.

Ruzagira is himself Ugandan, based in Entebbe at the Medical Research Council/Uganda Virus Research Institute, and oversees a team of researchers at trial sites in Durban, South Africa, Masaka, Uganda, and Dar es Salam and Mbeya, Tanzania. These locations, he explained, "had experience doing HIV prevention studies, not only vaccine trials, have established very good connections with the communities, and have the infrastructure we require."

Though funding for PrEPVacc came from the European Union-sponsored EDCTP, "this genuinely needed to be an African study led by Africans and coordinated in Africa, where the data is analyzed in Africa and the laboratory work is done in Africa," said Weber.

"It's about time," Ruzagira said. "We've had a few decades of preparation."

Combining a vaccine with PrEP

PrEPVacc investigators in the laboratory at the Muhimbili University of Health and Allied Sciences, Dar es Salaam, Tanzania.

In the randomized trial, each participant receives four injections of either vaccine A or B or a saline placebo over a 48-week schedule, along with a course of PrEP taken daily until week 26, a fortnight after the third injection – the logic being that the immune response will peak around then, said Ruzagira.

The US Centers for Disease Control and Prevention estimates PrEP taken as prescribed reduces the risk of getting HIV from sex by about 99%, and among people injecting drugs by at least 74%. The PrEPVacc trial is distributing two forms of PrEP pills, Truvada or Descovy, and is testing if the newer Descovy has the same or better effectiveness among the trial cohort. (Descovy currently holds FDA approval for use by men but not women.) Evaluating the combination of a trial HIV vaccine and PrEP is a first, say organizers.

Luwano Geofrey was the first trial participant in Masaka, Uganda. "I felt this was a big project that needed our support as a community," he told CNN, in an interview conducted in the Luganda language by a PrEPVacc community engagement officer.

"One of the things I liked most was that participants would have routine HIV counseling and testing, free condoms, PrEP and support and care," he explained. "I live and work in (a) fishing community. Most times, we lack these services."

PrEP has not achieved high usage levels in Africa, said Weber, describing "massive issues about access and uptake (and) acceptance of PrEP as a reasonable intervention."

Social stigma can complicate matters. In Uganda, for instance, PrEP is still distributed by HIV clinics, said Ruzagira, and being seen to enter a well-known HIV clinic can put people off seeking the medication.

"What we always hoped was once people started PrEP, they would see that it was easy, it was tolerable, it was acceptable, and would continue using it as long as they were at risk," said Weber.

After 26 weeks, trial participants are given the option to access PrEP from public health facilities, but not everyone is transitioning to long-term use, say organizers.

Geofrey said his PrEP use during the 26 weeks was not always consistent, and that afterward, he tried to secure the drug from a local facility, but "more often than not (it) ran out of stock."

Such issues are not limited to Uganda. "I would say that PrEP uptake is not what we would like it to be," said Nishanta Singh, principal investigator at the Verulam clinical research site in Durban, South Africa.

"But it's something that the community and the general population is starting to learn about," she added. "We are seeing an increase in PrEP uptake as the weeks of the trial go by. Obviously, it's not optimal, but it's a

work in progress."

The forecast for a successful vaccine

In Verulam, more than half of participants have already received all four injections. As with the other trial sites, participants are tested and receive counselling every four to eight weeks, and will be monitored until October 2024.

The trial team is blind to the data, which is processed by an Independent Data Monitoring Committee. The results of the trial are scheduled for release in the fourth quarter of 2024.

In the case of vaccine trials, no news can be good news. Trials can be halted by monitoring committees if early data indicates a lack of efficacy (as was the case with HVTN 702) but that has not yet been the case for PrEPVacc.

"This is indeed a good sign, however, it is possible that there have been very few infection events in this trial, given that PrEP use was also encouraged in all participants," said Sharon Lewin, a professor of medicine at The University of Melbourne.

Lewin, also president of the International AIDS Society, is not associated with the PrEPVacc trial, and offered caution regarding the vaccines' potential efficacy.

"I would predict that the DNA, MVA and protein vaccines won't provide too much protection from HIV infection, based on what we know from prior studies," she said, although she commended the integration of PrEP into the Africa-led study, noting, "it's also fantastic to see the first Phase 3 vaccine trial funded from outside the US."

Should one or both vaccines prove effective, further trials would be needed and would likely involve multiple international partners. Should it fall short, "it's really back to basics," said Weber. "There's nothing else around which looks any better of this generation of vaccine products."

"In this decade, it will be the last roll of the dice," he added. "My prediction is there won't be another efficacy study of an HIV vaccine until the 2030s."

Lewin does not believe that will be the case, pointing to new and rapidly advancing science.

One approach undergoing early testing is germline targeting, in which a series of slightly different vaccines are administered, designed to stimulate B-cells into producing "broadly neutralizing antibodies." These powerful but hard-to-elicit antibodies could potentially damage the HIV virus as it mutates in an attempt to escape them, scientists theorize.

And last summer, a Phase 1 trial began in the US and another in Rwanda and South Africa of multiple vaccines utilizing mRNA (messenger ribonucleic acid). mRNA instructs the body to create proteins which induce an immune response and has already been used successfully in two Covid-19 vaccines.

But for the PrEPVacc team and its participants, there's no option but to hold tight until the end of 2024 and hope that the results will be better than for other trials. "I did my very first HIV vaccine trial in 1991," recalled Weber. "I think that probably tells you all you need to know about the agony of the search."

Geofrey recalled what the trial asked of him: being told he and his wife should not bear children during its run; her initial concern that the PrEP bottles he came home with meant he was being treated for HIV; the initial

disinformation in his community that the study was introducing HIV to participants, rather than seeking to prevent it. “It takes a lot of courage and time to be part of a trial like this,” he reflected.

“I know if the vaccines being tested give us positive results, I will consider myself, other participants, and scientists as the heroes of this century.”

Fuente: CNN Health. Disponible en https://goo.su/th8b6y

Study: New Vaccine Modality Using Biopolymer Particles Shows Promise in Group A Streptococcus

Aug 29. Investigators have developed a new vaccine modality, which is currently at the proof-of-concept stage and in early development, that shows promise treating group A Streptococcus (Strep A), according to the results of a study from Griffith University.

Bernd Rehm, PhD, and Shuxiong Chen, PhD, from the Griffith Institute for Drug Discovery and Centre for Cell Factories and Biopolymers, tested the vaccine modality against a more established vaccine from Griffith for Strep A and is currently performing strongly in human trials in Canada.

"It's a synthetic vaccine based on our innovative technology that uses reprogrammed safe Escherichia coli cells to assemble vaccine particles at high yield," Rehm said in a statement. "To develop the vaccine, we reprogrammed bacterial cell factories to assemble biopolymer particles coated with the Griffith Strep A antigens and found the particles were safe and protected against infection.”

Investigators of the study used a biopolymer particle approach for Strep A vaccine candidate peptides p*17 derived from M protein and K4S2 derived from non-M protein. They gathered biopolymer particles that displayed both peptides densely (BP-p*17-S2) and assembled them in a single step, inside an engineered endotoxin-free Escherichia coli strain.BP-p*17-S2 was formulated with aluminum hydroxide as adjuvant.

The study authors reported no cytotoxicity when tested against HEK-293 cells. The study on stability revealed that BP-p*17-S2 is ambient-stable temperature, according to the results.

Additionally, investigators reported that mice showed no adverse reactions when immunized with the vaccine candidate. There were also high titers of peptide-specific antibodies and cytokines produced. The study authors stated that the immune response could be related to the protective immunity in animal models of infection, including mice with Strep A that had intranasal challenges. Investigators said that there was a significant reduction of greater than 100-fold of pathogen burden in the nose-associated lymphoid tissues, lung, and spleen.

Rehm said that the results showed technology has helped the development of vaccines that are safe to use and induce strong immune responses against Strep A. According to Chen, this advancement could serve as a medical breakthrough for developing future vaccines.

"We developed a cost-effective manufacturing process, and the resulting vaccines are ambient-temperature stable, strongly facilitating stockpiling and dissemination in developing countries where refrigeration is not

always available," Rehm added in the statement.

The study authors said that the cost-effective manufacturing of the stable biopolymer particles coated with Strep A peptides could offer an alternative to current Strep A vaccine development. They added that the immunogenic properties are also promising.

According to the investigators, Strep A leads to a wide range of illnesses, including mild pharyngitis and impetigo, as well as more invasive diseases, such as toxic shock syndrome, necrotizing fasciitis, and cellulitis.

One challenge with Strep A is mortality that is indirectly caused by the development of antimicrobial resistance, which results from the consumption of too many antibiotics.

The CDC has estimated that approximately 14,000 to 25,000 cases of Strep A occur in the United States each year, with 1500 to 2300 individuals dying due to the disease annually, with the most recent 5 years of data available.

Fuente: Pharmacy Times. Disponible en https://goo.su/skalLN

Regulador europeo aprueba nueva vacuna anticovid de Pfizer

30 ago. La Agencia Europea de Medicamentos (EMA) aprobó el miércoles (30.08.2023) una versión adaptada de la vacuna contra la COVID-19 de la biofarmaceútica alemana BioNTech y su socio estadounidense Pfizer para enfrentar la infección por medio de una subvariante muy difundida del virus en el invierno.

Aunque la Organización Mundial de la Salud (OMS) no considera a la COVID-19 una emergencia mundial de salud desde mayo, el virus sigue circulando en todos los países y nuevas cepas siguen emergiendo.

La EMA precisó este miércoles en un comunicado que recomendó autorizar el medicamento adaptado "teniendo como objetivo la subvariante Ómicron XBB.1.5".

El regulador europeo había recomendado en junio que las vacunas fueran actualizadas para tener como objetivo la cepa XBB del virus, la cual se volvió dominante en Europa y otras partes del mundo.

La nueva vacuna de tecnología ARN mensajero, llamada Comirnaty Ómicron XBB.1.5, está destinada a prevenir la enfermedad en adultos y niños desde los seis meses.

Fuente: DW. Disponible en https://goo.su/e4qcAK3

Newly published Lancet paper paves the way to improved pneumococcal vaccination strategies in Malawi and further afield

Aug 31. A ground-breaking new trial(link is external)(opens in a new tab) offers explanations for differences in pneumococcal vaccine effectiveness between populations in the Global North and Global South and paves the way to inform improved strategies to prevent severe pneumonia.

Pneumococcal bacteria are commonly found in the human nose (we call this carriage) and do not cause disease for the majority of people, but this is the mechanism by which infections spread ("coughs and sneezes spread diseases"). In addition, in vulnerable individuals the pneumococcus can invade past the nose and cause severe disease including pneumonia, sepsis and meningitis, and is a major cause of death throughout the world. An effective pneumococcal vaccine should prevent the bacteria from growing in the nose, prevent spread of infections and reduce the risk of severe disease. Pneumococcal conjugate vaccines (PCV) have dramatically reduced pneumococcal disease around the world by preventing or reducing carriage. The reduction in spread of infection has led to a 'herd effect' among unvaccinated populations. In Malawi, the PCV13 vaccine has resulted in substantial reductions in pneumococcal disease in vaccinated children by preventing severe disease but there are still high rates of pneumococcal carriage among vaccinated children. This increases the risk of transmission to unvaccinated children and vulnerable groups such as people living with HIV, reducing the 'herd effect' in these populations.

About the study

This study was designed to find out if PCV13 was protective against experimental human pneumococcal carriage in Malawian adults. The trial design builds on extensive experience with the controlled human infection model (CHIM) in Liverpool and Blantyre, Malawi. More than 2000 participants have received pneumococcus in this way, none developing serious side effects. In this study, 278 healthy Malawian adults were recruited to a double-blind randomised control trial. Half of the study volunteers were given a vaccine against pneumococcal disease (PVC13 injection) and the rest a placebo (saltwater injection). Four weeks later (the time taken for the immune system to respond to the vaccine), all the volunteers were given a small dose of pneumococcal bacteria via their noses. Researchers found that across the trial those who had received the vaccine had lower rates of pneumococcal bacteria colonising their noses than those who had received the placebo; vaccine efficacy was rated as 62%. This was less than a similar study conducted in the UK where vaccine efficacy was 78%.

Why is this important?

This study is important for several reasons. First, it was the first vaccine trial using a bacterial human infection study or CHIM in Africa and provides important data demonstrating the safety of this approach to understand vaccine effects in populations that need them most. Secondly, the researchers found that the vaccine was less effective in Malawian compared to UK participants using a similar study design. They will now use participant samples taken during this study to understand if and how the immune system responds differently to the vaccine between populations. The partnership between LSTM (studies UK populations) and Malawi Liverpool Wellcome Research Programme (MLW) is unique in that it will allow the researchers to directly compare effects between populations to understand how vaccines can be improved to prevent severe disease and save lives.

Stephen Gordon from MLW, who led the study, said:

"This landmark study, the first human challenge study in Malawi and the first study of its kind in Africa, paves the way for pneumococcal vaccine research and further human infection discovery. We can now explore better pneumococcal vaccination strategies to protect vulnerable people, such as people living with HIV, and to protect against strains for which no current vaccine is effective. We can also explore the potential of human challenge studies in diagnosis and prevention of other infections, such as salmonella and tuberculosis."

In trying to understand these results, it should be noted that a similar study using UK-based individuals showed higher levels of protection than that in Malawi, but there was higher natural exposure to pneumococcal bacteria in the community among the Malawi participants. This requires further evaluation using longitudinal immunological samples and the pooling of Malawi and UK data.

Ben Morton from LSTM, who developed and implemented the study in Malawi, said:

"It is fantastic to see the culmination of many years of work demonstrating safety in the UK; exploring acceptability; and completing feasibility studies to make sure it was safe and possible to do this work in Malawi. This trial provides essential data to underpin epidemiological observations of reduced herd immunity effects from pneumococcal conjugate vaccine in sub-Saharan Africa populations compared to populations in the Global North. As our work progresses and we explore how vaccine immune responses differ in samples taken from trial participants we are in a unique position to inform improved vaccination strategies to protect populations vulnerable to pneumococcal disease."

Human infection trials – the podcast

Human infection trials, such as the one used in this study, are a quick and effective way to gather data. Wellcome, which funded this research, recently produced a podcast on the model featuring Dr Dingase Dula of Malawi Liverpool Wellcome Research Programme. In the podcast, Dr Dula talks about this trial and the benefits of the model in general.

Fuente: LSTM. Disponible en https://goo.su/TflhB

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Patentes registradas en Patentscope

Estrategia de búqueda: *Vaccine in the title or abstract AND 20230822:20230831 as the publication date 51 records*

1.WO/2023/160425MONOVALENT ADJUVANTED VACCINE FOR INFECTIOUS HEMATOPOIETIC NECROSIS AND INFECTIOUS PANCREATIC NECROSIS OF SALMON AND TROUT, AND BIVALENT ADJUVANTED VACCINE THEREOF AND PREPARATION METHOD THEREFOR
WO - 31.08.2023

Clasificación Internacional A61K 39/39 Nº de solicitud PCT/CN2023/075791 Solicitante HEILONGJIANG RIVER FISHERIES RESEARCH INSTITUTE , CHINESE ACADEMY OF FISHERY SCIENCES Inventor/a XU, Liming
Provided are a monovalent adjuvanted vaccine for infectious hematopoietic necrosis and infectious pancreatic necrosis of salmon and trout, and a bivalent adjuvanted vaccine thereof and a preparation method therefor. The provided bivalent vaccine is prepared by means of mixing an infectious hematopoietic necrosis vaccine with an infectious pancreatic necrosis vaccine at a volume ratio of 1 : (1-9), wherein the infectious hematopoietic necrosis vaccine is composed of an infectious hematopoietic necrosis virus inactivation solution and a Montanide TM GEL 02 PR adjuvant; and the infectious pancreatic necrosis vaccine is composed of an infectious pancreatic necrosis virus inactivation solution and a Montanide TM GEL 02 PR adjuvant. The bivalent adjuvanted vaccine can help a host to effectively resist the infections of both IHNV and IPNV, and has a protection period of up to 4 months; and the bivalent vaccine has good safety.

2.2615784mRNA vaccine
GB - 23.08.2023
Clasificación Internacional A61K 39/12 Nº de solicitud 202202186 Solicitante PHION THERAPEUTICS LTD Inventor/a HELEN MCCARTHY
A vaccine comprises an mRNA polynucleotide comprising an open reading frame (ORF) encoding an antigen from an infectious microorganism and an amphipathic cell penetrating peptide (CPP) having at least 80% homology to the RALA peptide WEARLARALARALARHLARALARALRACEA (SEQ ID_No 1). Preferably, the vaccine further comprises a second mRNA and the two mRNAs are present in at a 50:50 w/w ratio. More preferably, the vaccine comprises mRNA encoding HPV antigens E6 or E7 from one of HPV 6, 8, 11, 16 or 18, most preferably the mRNAs encode HPV16 E6 or E7. The vaccine may further comprise a mRNA encoding an immunoadjuvant cytokine, e.g. human IL15. The mRNAs may comprise a five-prime cap (5' cap), modified uridine nucleotides and unmodified cytidine nucleotides. The vaccine may comprise nanoparticles and mannose and trehalose. Preferably the ratio of amphipathic cell penetrating peptide: mRNA polynucleotide in the vaccine is about 8.5-9.5:1. The vaccine may be used to prevent or treat HPV infection and thus treat at least some cancers.

3.WO/2023/160654PREPARATION AND USE OF RECOMBINANT MULTICOMPONENT SARS-COV-2 TRIMERIC PROTEIN VACCINE CAPABLE OF INDUCING BROAD-SPECTRUM NEUTRALIZING ACTIVITY
WO - 31.08.2023
Clasificación Internacional C07K 19/00 Nº de solicitud PCT/CN2023/078135 Solicitante SINOCELLTECH LTD Inventor/a XIE, Liangzhi
The present invention relates to the field of molecular vaccinology. Provided in the present invention is a recombinant multicomponent SARS-CoV-2 trimeric protein vaccine capable of inducing a broad-spectrum neutralizing activity. Recombinant protein ingredients include, but are not limited to, homotrimeric proteins formed by means of introducing mutation sites and trimeric auxiliary structures to the extracellular domains (ECD) of spike proteins (S proteins) of Alpha (B.1.1.7), Beta (B.1.351), Delta (B.1.617.2) and BA.1 (B.1.1.529.1). The multicomponent vaccine contains an ECD trimeric protein of the above variants, either alone or in any combination, and a pharmaceutically acceptable adjuvant. The vaccine combination shows excellent immunogenicity in mice, while also maintaining long-term humoral immunity and cellular immune responses. The multicomponent SARS-CoV-2 trimeric protein vaccine can be used for preventing infection-related diseases caused by infections with SARS-CoV-2 and variants thereof.

4.WO/2023/155236EBNNA3A-TRUNCATED MRNA-RELATED VACCINE, AND PREPARATION METHOD THEREFOR AND USE THEREOF
WO - 24.08.2023
Clasificación Internacional C12N 15/85 Nº de solicitud PCT/CN2022/078158 Solicitante SUN YAT-SEN UNIVERSITY CANCER CENTER(SYSUCC) Inventor/a ZENG, Musheng
Provided is an EBNNA3A-truncated mRNA-related vaccine, and a preparation method therefor and use thereof. The truncated mRNA has a nucleotide sequence set forth in SEQ ID NO: 8 or SEQ ID NO: 14. Compared with full-length EBNA3A, truncation C has a better immune effect. The mRNA vaccine is prepared on the basis of truncation C, and it is found that the mRNA vaccine can significantly inhibit tumor development, improve survival time and antibody and immune responses, and has high safety. This suggests that the mRNA vaccine can provide good protection for mice, and can be used for developing therapeutic vaccines for EBV-related tumors.

5.WO/2023/157880MALARIA VACCINE AND MALARIA PREVENTION/TREATMENT METHOD
WO - 24.08.2023
Clasificación Internacional A61K 39/015 Nº de solicitud PCT/JP2023/005232 Solicitante NATIONAL UNIVERSITY CORPORATION KANAZAWA UNIVERSITY Inventor/a SHIDA Hisatoshi
[Problem] To provide a malaria vaccine which has an excellent preventative effect against infection and excellent effect of inhibiting malaria transmission, as compared to conventional malaria vaccines. [Solution] It was found that using, as a prime, a recombinant vaccinia virus which includes a gene that codes a CSP amino acid sequence and a gene that codes an s25 amino acid sequence, and using, as a boost, a recombinant adeno-associated virus which includes a gene that codes a CSP amino acid sequence and a gene that codes an s25 amino acid sequence results in a malaria vaccine which has an excellent preventative effect against infection and excellent effect of inhibiting malaria transmission.

6.20230265130SWINE INFLUENZA A VIRUS VACCINE COMPRISING A NUCLEIC ACID CONSTRUCT HAVING A SPECIFIC ORDER OF GENES
US - 24.08.2023
Clasificación Internacional C07K 14/11 Nº de solicitud 18010418 Solicitante Intervet Inc. Inventor/a Mark A. Mogler
The present invention relates to a nucleic acid construct that encodes, in this order, a first Swine influenza A (IAV-S) hemagglutinin (HA) antigen of the Scot/94 lineage and a second Swine influenza A (IAV-S) hemagglutinin (HA) antigen of the Eurasian avian-like (EA) lineage, and a nucleic acid construct that encodes, in this order, a first IAV-S HA antigen of the Gent/84 lineage and a second IAV-S HA antigen of pandemic09 (pdm09) lineage. In other embodiments, the present invention relates to RNA replicon particles comprising one or both nucleic acid constructs, an immunogenic composition, such as a vaccine, which may be used against influenza A virus infections, and comprising the replicon particles. Further provided are methods of making the vaccine and use of the vaccine.

7.20230265129Subunit Vaccine Composition For African Swine Fever, And Preparation Therefor And Use Thereof
US - 24.08.2023
Clasificación Internacional C07K 14/01 Nº de solicitud 18005367 Solicitante NOVO BIOTECH CORP Inventor/a Qiang ZHANG
The present invention provides a subunit vaccine composition for African swine fever, and a preparation therefor and use thereof, which fall within the technical field of animal vaccines and veterinary biological products. The vaccine comprises an exterior envelope protein CD2V derived from African swine fever virus and an exterior envelope capsid protein p72 derived from African swine fever virus and a

pharmaceutically acceptable adjuvant. The method for preparing the vaccine comprises: 1) preparing the exterior envelope protein CD2V derived from African swine fever virus and the exterior envelope capsid protein p72 derived from African swine fever virus; 2) mixing the exterior envelope protein CD2V derived from African swine fever virus with the exterior envelope capsid protein p72 derived from African swine fever virus prepared in step 1), so as to prepare an antigen solution; and 3) emulsifying the antigen solution and ISA 201 VG at a volume ratio of 46:54.

8.20230263881Vaccine compositions for SARS-related coronaviruses and methods of use
US - 24.08.2023
Clasificación Internacional A61K 39/215 Nº de solicitud 17920191 Solicitante Richard ASCIONE Inventor/a Richard ASCIONE
The invention provides a pan-Severe Acute Respiratory Syndrome (SARS) vaccine compositions (i.e., vaccine compositions useful against multiple SARS viruses such as MERS, SARS-CoV-2, etc.), a vaccination regimen for immunization against such coronavirus diseases, and its use in medicine and in augmenting immune responses to various antigens present in such viruses and to methods of preparation of such compositions. In particular, the invention relates to polyvalent multi-targeting immunogenic compositions comprising SARS-coronaviral antigens or antigen preparations thereof from multiple strains associated with human pandemic outbreaks in combination with accessory delivery vehicle(s) and adjuvants.

9.4230657FUSIONSPROTEIN UND IMPFSTOFF
EP - 23.08.2023
Clasificación Internacional C07K 19/00 Nº de solicitud 21882789 Solicitante UNIV OSAKA RES FOUND FOR MICROBIAL DISEASES Inventor/a YOSHIOKA YASUO
The present invention provides a new component that is useful as a SARS-CoV-2 vaccine antigen that uses as a target a receptor binding domain of SARS-CoV-2. The present invention contains the fusion protein, which includes hemagglutinin and a receptor binding domain of SARS-CoV-2, and a vaccine containing the fusion protein.

10.20230263875PROTEIN NANOPARTICLES AND COMBINATION THERAPY FOR CANCER IMMUNOTHERAPY
US - 24.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 17934996 Solicitante THE REGENTS OF THE UNIVERSITY OF CALIFORNIA Inventor/a Szu-Wen Wang
Cancer-testis antigens were simultaneously packaged with CpG adjuvant and incorporated into an E2 nanoparticle platform to increase cancer vaccine efficacy. Also described herein is a combination of checkpoint blockade therapy and the nanoparticle vaccine platform to deliver cancer antigens with adjuvant for treatment of tumors and prevention of future tumors. The nanoparticle vaccine platform includes a protein capsule to which are attached adjuvants in the internal hollow cavity and cancer epitopes to the surface. Whereas single-therapies only increase survival, the combined therapy can both increase survival time as well as prevent tumor development in pre-existing tumor conditions by increasing tumor antigen-specific responses (via the nanoparticle vaccines) while simultaneously blocking checkpoints to remove immune suppression (via immune checkpoint inhibition). Furthermore, tumor rechallenge studies show evidence of T cell memory which can prevent tumor development in some individuals.

11.WO/2023/159082NANOTECHNOLOGY BASED INTRANASAL VACCINE FOR COVID-19 COMPRISING CHITOSAN
WO - 24.08.2023

Clasificación Internacional A61K 39/215 Nº de solicitud PCT/US2023/062681 Solicitante OHIO STATE INNOVATION FOUNDATION Inventor/a GOURAPURA, Renukaradhya J.
Disclosed herein are compositions comprising SARS-CoV-2 antigen associated with a nanoparticle, wherein the SARS-CoV-2 antigen comprises spike protein (S) or an antigenic fragment thereof, and a nucleocapsid protein (N) or an antigenic fragment thereof, wherein the nanoparticle comprises chitosan. These compositions can be present in the form of a vaccine for administration. The vaccine can be present in a kit, for example. The composition can be administered to a subject in need thereof in order to prevent, or lessen the severity of, SARS-CoV-2 infection in the subject.

12.WO/2023/159787USE OF BCG GENE BCG_1820 IN PREPARING TUBERCULOSIS VACCINE RECOMBINANT BCG
WO - 31.08.2023
Clasificación Internacional C12N 1/21 Nº de solicitud PCT/CN2022/095396 Solicitante SHANGHAI PULMONARY HOSPITAL Inventor/a GE, Baoxue
Provided are a BCG recombinant strain ΔBCG_1820 in which BCG_1820 gene is knocked out, a preparation method therefor, and the use thereof in preparing a tuberculosis vaccine. The BCG recombinant strain ΔBCG_1820 can induce macrophages to produce more antibacterial peptides, so as to endow a host with a stronger capability to resist tubercle bacillus infection, and has the potential to be a candidate vaccine for tubercle bacillus.

13.WO/2023/155067SECURITY NEEDLE SLEEVE OF VACCINE SYRINGE
WO - 24.08.2023
Clasificación Internacional A61M 5/34 Nº de solicitud PCT/CN2022/076468 Solicitante WANG, Chiyang Inventor/a WANG, Chiyang
Provided is a security needle sleeve (1) of a vaccine syringe, comprising a protection end (11), an extension end (12), and a snapping part (13). The extension end (12) is arranged between the protection end (11) and the snapping part (13). The extension end (12) comprises an extension part (121) having the same outer diameter as the protection end (11) and spirally surrounding the protection end (11). The two ends of the extension part (121) are respectively connected to the protection end (11) and the snapping part (13). A destructible structure (14) is provided between an edge of the extension part (121) adjacent to a plurality of spiral structures formed by spirally surrounding the protection end (11) and an edge adjacent to the protection end (11) and the snapping part (13). By means of pushing the protection end (11) forward, the pushing force from the protection end (11) drives the destructible structure (14) to rotate and break up, such that the extension part (121) extends along with the forward movement of the protection end (11) and the protection end (11) sheathes the distal end of the needle of the vaccine syringe, thereby protecting the operators from being scratched or stabbed by the needle tip due to the exposure of the syringe needle tip.

14.4230209PHARMAZEUTISCHE ZUSAMMENSETZUNG, PHARMAZEUTISCHE KOMBINATION UND KOMBINATIONS-KIT ZUR PRÄVENTION ODER BEHANDLUNG VON CHRONISCHER HEPATITIS B
EP - 23.08.2023
Clasificación Internacional A61K 31/522 Nº de solicitud 21894866 Solicitante CHA VACCINE RES INSTITUTE CO LTD Inventor/a YUM JUNG SUN
The present invention relates to a pharmaceutical composition, a pharmaceutical combined formulation, and a combined formulation kit, each comprising, as active ingredients, an oral antiviral agent and a therapeutic vaccine including a lipopeptide and a poly(I:C) adjuvant. When the pharmaceutical composition, the pharmaceutical combined agent, and the combined formulation kit are administered/used in hepatitis B patients, a remarkable synergy occurs in terms of therapeutic index for

chronic hepatitis B, compared to patients who have undergone standard therapy including the administration of conventional antiviral agents, exhibiting the possibility of completely curing the disease.

15.WO/2023/159121NOVEL LIVE MULTI-ANTIGENIC RECOMBINANT VACCINE AGAINST TUBERCULOSIS
WO - 24.08.2023
Clasificación Internacional A61K 39/04 Nº de solicitud PCT/US2023/062733 Solicitante THE REGENTS OF THE UNIVERSITY OF CALIFORNIA Inventor/a HORWITZ, Marcus A.
Embodiments of the invention comprise an improved vaccine for generating an immune response and preventing or treating mycobacterial diseases such as tuberculosis in humans and animals. Embodiments of the invention also comprise a method for using the vaccine against such mycobacterial diseases.

16.WO/2023/159081NANOTECHNOLOGY BASED INTRANASAL VACCINE FOR COVID-19
WO - 24.08.2023
Clasificación Internacional A61K 39/12 Nº de solicitud PCT/US2023/062680 Solicitante OHIO STATE INNOVATION FOUNDATION Inventor/a GOURAPURA, Renukaradhya
Disclosed herein are compositions comprising SARS-CoV-2 antigen associated with a nanoparticle, wherein the SARS-CoV-2 antigen comprises spike protein (S) or an antigenic fragment thereof, and a nucleocapsid protein (N) or an antigenic fragment thereof. These compositions can be present in the form of a vaccine for administration. The vaccine can be present in a kit, for example. The composition can be administered to a subject in need thereof in order to prevent, or lessen the severity of, SARS-CoV-2 infection in the subject.

17.20230265159METHOD OF COMPACT PEPTIDE VACCINES USING RESIDUE OPTIMIZATION
US - 24.08.2023
Clasificación Internacional C07K 14/74 Nº de solicitud 18192274 Solicitante Think Therapeutics, Inc. Inventor/a David Kenneth GIFFORD
A system for selecting an immunogenic peptide composition comprising a processor and a memory storing processor-executable instructions that, when executed by the processor, cause the processor to create a first peptide set by selecting a plurality of base peptides, wherein at least one peptide of the plurality of base peptides is associated with a disease, create a second peptide set by adding to the first peptide set a modified peptide, wherein the modified peptide comprises a substitution of at least one residue of a base peptide selected from the plurality of base peptides, and create a third peptide set by selecting a subset of the second peptide set, wherein the selected subset of the second peptide set has a predicted vaccine performance, wherein the predicted vaccine performance has a population coverage above a predetermined threshold, and wherein the subset comprises at least one peptide of the second peptide set.

18.20230263886VACCINES, VACCINE PRIMING, AND ANTIGEN DOSE SPARING
US - 24.08.2023
Clasificación Internacional A61K 39/39 Nº de solicitud 18011064 Solicitante ADJUVANCE TECHNOLOGIES, INC. Inventor/a J. Tyler MARTIN
The present application relates to new vaccines, improved vaccine priming, and antigen dose sparing in connection with triterpene glycoside saponin-derived adjuvants, salt forms thereof, and pharmaceutical compositions, as well as related methods.

19.20230266317ANTIGEN BINDING PROTEIN AND ASSAYS
US - 24.08.2023
Clasificación Internacional G01N 33/569 Nº de solicitud 17641315 Solicitante GLAXOSMITHKLINE BIOLOGICALS SA Inventor/a Michael CHAPLET

The present invention relates to in vitro assays, more particularly ELISA assays. Said ELISA assays comprise antibodies capable of binding Ubiquitous surface protein A2 (UspA2) from *Moraxella catarrhalis*. The present invention relates to assays for assessing the binding of antibodies to UspA2 and the relative potency of vaccine test samples comprising UspA2. In particular, the invention relates to in vitro relative potency assays used in the release of vaccine that comprises UspA2 to the public.

20.4230742TEMPERATUREMPFINDLICHER BETACORONAVIRUS-STAMM UND IMPFSTOFF
EP - 23.08.2023
Clasificación Internacional C12N 15/50 Nº de solicitud 21880152 Solicitante UNIV OSAKA RES FOUND FOR MICROBIAL DISEASES Inventor/a OKAMURA SHINYA
Provided is a strain that is effective as an active ingredient of a vaccine against betacoronavirus. This SARS-CoV-2 includes non-structural protein(s) that has the following responsible mutation(s): a mutation in the amino acid residue corresponding to the L of position 445 of SEQ ID NO: 1 in NSP3; a mutation in the amino acid residues corresponding to the G of position 248 and the G of position 416 of SEQ ID NO: 2 in NSP14; and/or a mutation in the amino acid residue corresponding to the V of position 67 of SEQ ID NO: 3 in NSP16.

21.20230263873PERSONALIZED IMMUNOTHERAPY AGAINST SEVERAL NEURONAL AND BRAIN TUMORS
US - 24.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 18178055 Solicitante Immatics Biotechnologies GmbH Inventor/a Sabrina KUTTRUFF-COQUI
The present invention relates to peptides, 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 cytotoxic T cell (CTL) peptide epitopes, alone or in combination with other tumor-associated peptides that serve as active pharmaceutical ingredients of vaccine compositions that stimulate anti-tumor immune responses. The present invention relates to peptide sequences and their variants derived from HLA class I and class II molecules of human tumor cells that can be used in vaccine compositions for eliciting anti-tumor immune responses.

22.4230741KALTAKKLIMATISIERTER BETA-CORONAVIRUS-STAMM UND IMPFSTOFF
EP - 23.08.2023
Clasificación Internacional C12N 15/50 Nº de solicitud 21880151 Solicitante UNIV OSAKA RES FOUND FOR MICROBIAL DISEASES Inventor/a OKAMURA SHINYA
Strains that is effective as the active component of a vaccine against the betacoronavirus is provided. A SARS-CoV-2 containing structural protein(s) and/or non-structural protein(s) having the following mutation(s): the amino acid residue mutations in NSP3, corresponding to V at position 404, L at position 445, K at position 1792 and/or D at position 1832 in SEQ ID No. 1; the amino acid residue mutations in NSP14, corresponding to G at position 248, G at position 416, and/or A at position 504 in SEQ ID No. 2; the amino acid residue mutation in NSP16, corresponding to V at position 67 in SEQ ID No. 3; the amino acid residue mutations in the spike, corresponding to L at position 54, T at position 739 and/or A at position 879 in SEQ ID No. 4; the amino acid residue mutation in the envelope, corresponding to L at position 28 in SEQ ID No. 5; and/or, the amino acid residue mutation in the nucleocapsid, corresponding to S at position 2 in SEQ ID No. 6;

23.WO/2023/156676A NOVEL CATIONIC ADJUVANT COMPOSITION
WO - 24.08.2023
Clasificación Internacional A61K 39/39 Nº de solicitud PCT/EP2023/054284 Solicitante STATENS SERUM INSTITUT Inventor/a WOODWORTH, Joshua

The present invention relates to an adjuvant composition comprising dimethyldioctadecyl ammonium salt (DDA), monomycoloyl glycerol (MMG), and the CpG ODN 2006 oligodeoxynucleotide having SEQ ID NO:1 or a sequence having 90% identity to SEQ ID NO:1. Another aspect of the present invention is a vaccine comprising said adjuvant composition and at least one antigen, and the use of said vaccine in prevention or treatment of an infectious disease.

24.WO/2023/158646AUTOLOGOUS STEM CELL VACCINE AND METHODS
WO - 24.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/US2023/013061 Solicitante RUSYN, Elena Inventor/a RUSYN, Elena
The invention provides an immunogenic composition and methods for making and using the composition to generate an immune response. The immunogenic composition comprises stem cells pulsed with an antigen against which an immune response is desired. The stem cells can be autologous mesenchymal stem cells (MSCs), hematopoietic stem cells (HSCs), or stromal vascular fraction (SVF) cells. The cellular vaccine composition finds use in generating an immune response against viral, bacterial and parasitic infections, cancer, and senescent cells.

25.20230265140B*44 RESTRICTED PEPTIDES FOR USE IN IMMUNOTHERAPY AGAINST CANCERS AND RELATED METHODS
US - 24.08.2023
Clasificación Internacional C07K 14/47 Nº de solicitud 18189448 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.

26.WO/2023/161649RHINOVIRUS VACCINE
WO - 31.08.2023
Clasificación Internacional A61K 39/125 Nº de solicitud PCT/GB2023/050427 Solicitante IP2IPO INNOVATIONS LIMITED Inventor/a JOHNSTON, Sebastian
The invention relates to immunogenic compositions, and in particular, to immunogenic compositions for preventing, treating or ameliorating human rhinovirus (RV) infections. The invention is especially concerned with RV VPo peptides (or proteins) and polynucleotides encoding such peptides, and their use in immunogenic compositions for eliciting an immune response and preventing rhinovirus infections.

27.WO/2023/161715NEXT GENERATION MRNA VACCINES
WO - 31.08.2023
Clasificación Internacional A61K 39/215 Nº de solicitud PCT/IB2023/000094 Solicitante FUTR BIO LTDA. Inventor/a MANSUR, Daniel, Santos
Described herein are next generation vaccine compositions, including mRNA vaccines having flavivirus untranslated regions and vaccines comprising a (major histocompatibility complex) MHC binding peptide.

28.WO/2023/158989DENGUE VACCINE BATCH MIXING PROCESS
WO - 24.08.2023
Clasificación Internacional A61K 9/00 Nº de solicitud PCT/US2023/062530 Solicitante TAKEDA VACCINES, INC. Inventor/a BRONSON, Sean

The present invention relates to a batch mixing process for preparing a liquid pharmaceutical composition (LPC) comprising at least one biological active agent and at least one adjustable excipient, wherein the at least one biological active agent has a target concentration in the LPC ($^{T}[A_i]_{LPC}$) and the at least one adjustable excipient has a target concentration in the LPC ($^{T}[E_x]_{LPC}$).

29.20230263830PEPTIDES AND COMBINATION OF PEPTIDES OF NON-CANONICAL ORIGIN FOR USE IN IMMUNOTHERAPY AGAINST DIFFERENT TYPES OF CANCERS
US - 24.08.2023
Clasificación Internacional A61K 35/17 Nº de solicitud 18173159 Solicitante Immatics 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.

30.WO/2023/161346ARGINASE 2 VACCINE
WO - 31.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/EP2023/054568 Solicitante IO BIOTECH APS Inventor/a ANDERSEN, Mads Hald
The present invention relates to novel polypeptides derived from Arginase 2 (ARG2), polynucleotides encoding said polypeptides, and compositions comprising said polypeptides or polynucleotides. The invention also concerns uses of said polypeptides, polynucleotides and compositions.

31.4228658IONISIERBARE LIPIDE UND VERFAHREN ZUR HERSTELLUNG UND VERWENDUNG DAVON
EP - 23.08.2023
Clasificación Internacional A61K 31/7088 Nº de solicitud 21881024 Solicitante GEORGE MASON RES FOUNDATION INC Inventor/a BUSCHMANN MICHAEL DARO
The invention encompasses novel ionizable lipids compounds and their use in lipid nanoparticles delivery systems that are useful in the delivery of nucleic acids to a mammalian subject that can be included for use, for example, as cancer vaccines, gene editing therapeutics, delivery of nucleic acid (*e.g.*, mRNA) encoding antibodies, vaccines for infectious disease, and protein replacement therapeutics. Additionally, the invention encompasses compositions and therapeutics comprising the ionizable lipids in the lipid nanoparticles and the use of the composition and therapeutics for the preparation of a pharmaceutical composition, especially a vaccine, (*e.g.*, for use in the prophylaxis or treatment of infectious diseases, tumor or cancer diseases, rare diseases, allergies, or autoimmune diseases). The invention encompasses methods of treatment or prophylaxis of the aforementioned diseases.

32.20230263885EXTRACELLULAR VESICLES FOR VACCINE DELIVERY
US - 24.08.2023
Clasificación Internacional A61K 39/385 Nº de solicitud 18050027 Solicitante Codiak BioSciences, Inc. Inventor/a Raymond J. MONIZ
The present disclosure relates to extracellular vesicles (EVs), e.g., exosomes, comprising a payload (e.g., an antigen, adjuvant, and/or immune modulator) and/or a targeting moiety. Also provided herein are methods for producing the EVs (e.g., exosomes) and methods for using the EVs (e.g., exosomes) to treat

and/or prevent diseases or disorders, e.g., cancer, graft-versus-host disease (GvHD), autoimmune disease, infectious diseases, or fibrotic diseases.

33.4228690WW-DOMÄNENAKTIVIERTE EXTRAZELLULÄRE VESIKEL ZUM TARGETING VON CORONAVIREN
EP - 23.08.2023
Clasificación Internacional A61K 39/39 Nº de solicitud 21881160 Solicitante HARVARD COLLEGE Inventor/a LU QUAN
Disclosed herein are methods, systems, compositions and strategies for the creation and use WW-domain- Activated Extracellular Vesicles, or WAEVs for presenting SARS-CoV-2 antigen domains, for example the SARS-CoV-2 M protein, the SARS-CoV-2 E protein, or the SARS-CoV-2 S protein. These WAEVs can be harnessed to deliver and present SARS-CoV-2 antigens useful for vaccine development.

34.WO/2023/161962MURAMYL DIPEPTIDES AND PROCESS FOR PREPARATION THEREOF
WO - 31.08.2023
Clasificación Internacional C07K 9/00 Nº de solicitud PCT/IN2023/050177 Solicitante COUNCIL OF SCIENTIFIC & INDUSTRIAL RESEARCH Inventor/a KUMAR, Halmuthur Mahabalarao Sampath
The present invention relates to Muramyl dipeptide compounds having adjuvant activity. The present invention also discloses the process for the preparation of Muramyl dipeptide compound and their intermediates. The immuno-modulating properties of the Muramyl dipeptide compound and their use as NOD2 agonistic adjuvants in vaccine formulations is also disclosed.

35.20230265128STABILISED VIRAL FUSION PROTEINS
US - 24.08.2023
Clasificación Internacional C07K 14/005 Nº de solicitud 17910598 Solicitante Oxford University Innovation Limited Inventor/a Alexander DOUGLAS
The invention relates to stabilised pre-fusion conformation Class III fusion proteins. The inve ntion also provides vaccine compositions for immunising a subject against viral infections.

36.WO/2023/162731VACCINATION METHOD AND FARMED FISH
WO - 31.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/JP2023/004653 Solicitante NISSUI CORPORATION Inventor/a UMEDA, Naoko
A vaccination method in which an injection needle is inserted into a muscle in the dorsal region or tail region of a farmed fish to inoculate the farmed fish with a vaccine solution.

37.20230265452Phagemid Vector
US - 24.08.2023
Clasificación Internacional C12N 15/86 Nº de solicitud 17956257 Solicitante IMPERIAL COLLEGE INNOVATIONS LIMITED Inventor/a Amin Hajitou
The invention provides hybrid and recombinant phagemid vectors for expressing a transgene in a target cell transduced with the vector. A recombinant phagemid particle comprises at least one transgene expression cassette which encodes an agent which exerts a biological effect on the target cell, characterised in that the phagemid particle comprises a genome which lacks at least 50% of its bacteriophage genome. The invention extends to the use of such phagemid expression systems as a research tool, and for the delivery of transgenes in a variety of gene therapy applications, DNA and/or peptide vaccine delivery and imaging techniques. The invention extends to in vitro, in vivo or in situ methods for producing viral vectors, such as recombinant adeno-associated viruses (rAAV) or lentivirus vectors (rLV), and to genetic constructs used in such methods.

38.20230266320METHOD FOR DETECTING CYTOMEGALOVIRUS (CMV) AND MEASURING AND QUANTIFYING PENTAMERIC COMPLEX USING AN INDIRECT SANDWICH ELISA
US - 24.08.2023
Clasificación Internacional G01N 33/569 Nº de solicitud 17779011 Solicitante MERCK SHARP & DOHME CORP. Inventor/a Cindy J. Pauley
The present invention relates to a method of detecting the presence of *Cytomegalovirus* and measuring antigenicity through detection and quantification of a pentameric complex by an indirect sandwich ELISA assay which ensures an appropriate concentration of this critical glycoprotein complex is present in the vaccine.

39.20230263877NOVEL VACCINE COMPOSITIONS
US - 24.08.2023
Clasificación Internacional A61K 39/112 Nº de solicitud 17769130 Solicitante GLAXOSMITHKLINE BIOLOGICALS SA Inventor/a Francesco Citiulo
A *Shigella flexneri* O-antigen of a first serotype or subserotype are provided for use in raising an immune response against one or more *Shigella flexneri* O-antigen of a different serotype or subserotype, together with associated binding moieties, pharmaceutical compositions, kits, uses or methods.

40.4228669WW-DOMÄNENAKTIVIERTE EXTRAZELLULÄRE VESIKEL
EP - 23.08.2023
Clasificación Internacional A61K 38/00 Nº de solicitud 21881181 Solicitante HARVARD COLLEGE Inventor/a LU QUAN
Disclosed herein are methods, systems, compositions and strategies for the creation and use WW-domain- Activated Extracellular Vesicles, or WAEVs. These WAEVs can be harnessed to deliver and present viral or bacterial antigens useful for vaccine development; to display homing molecules for targeted delivery of therapeutic molecules to specific cells or tissues; and for packaging and delivery of therapeutic molecules via interactions with the WW domains.

41.4228668WW-DOMÄNENAKTIVIERTE EXTRAZELLULÄRE VESIKEL ZUM TARGETING VON HIV
EP - 23.08.2023
Clasificación Internacional A61K 38/00 Nº de solicitud 21881163 Solicitante HARVARD COLLEGE Inventor/a LU QUAN
Disclosed herein are methods, systems, compositions and strategies for the creation and use WW-domain-Activated Extracellular Vesicles (WAEVs) for presenting HIV antigen domains. These WAEVs can be harnessed to deliver and present HIV antigens useful for vaccine development. Specifically, the disclosure provides a fusion protein comprising: (a) a WW-containing domain; (b) a transmembrane domain; and (c) an extracellular domain, wherein the extracellular domain is an HIV antigen domain. Further provided are sequences of each domain as well as methods of producing and using the fusion protein.

42.2023902599Vaccine Antigen
AU - 24.08.2023
Clasificación Internacional Nº de solicitud 2023902599 Solicitante Macfarlane Burnet Institute for Medical Research and Public Health Limited Inventor/a Not Given

43.20230266307BIOINFORMATICS
US - 24.08.2023
Clasificación Internacional G01N 33/543 Nº de solicitud 17923526 Solicitante University of Helsinki Inventor/a Vincenzo Cerullo

The invention concerns a device for tumour antigen identification and a method for tumour antigen identification; a tumour antigen identified following use of said device and/or method; a pharmaceutical composition comprising said tumour antigen; a method of treating cancer using said device and/or said method; a method of stratifying patients for cancer treatment using said device and/or said method; a treatment regimen involving stratifying patients for cancer treatment using said device and/or method and then administering a cancer therapeutic; and a tumour antigen identified using said device and/or said method for use as a cancer vaccine or immunogenic agent or cancer therapy.

44.4228681KOMBINATION AUS EINEM STING-AGONISTEN UND EINEM KOMPLEX MIT EINEM ZELLPENETRIERENDEN PEPTID, EINEM CARGO- UND EINEM TLR-PEPTID-AGONISTEN
EP - 23.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 21786992 Solicitante BOEHRINGER INGELHEIM INT Inventor/a ROSSI MATTEO
The present invention provides a combination of an agonist of stimulator of interferon response cGAMP interactor (1) (STING) and a vaccine including specific antigens or antigenic epitopes, namely, a complex comprising a cell penetrating peptide, at least one antigen or antigenic epitope, and a TLR peptide agonist. Such a combination is particularly useful in medicine, in particular in the prevention and/or treatment of cancer. Moreover, the present invention also provides compositions, such as a pharmaceutical compositions and vaccines, which are useful, for example, in the prevention and/or treatment of cancer.

45.WO/2023/159197MRNAS ENCODING CHECKPOINT CANCER VACCINES AND USES THEREOF
WO - 24.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/US2023/062844 Solicitante MODERNATX, INC. Inventor/a FREDERICK, Joshua P.
The disclosure features lipid nanoparticle (LNP) compositions comprising checkpoint cancer vaccines and uses thereof. The LNP compositions of the present disclosure comprise mRNA therapeutics encoding checkpoint cancer vaccine comprising IDO and PD-L1 antigenic peptides. The LNP compositions of the present disclosure can induce an immune response and stimulate T effector cells in vivo and, accordingly are useful in treating cancer.

46.4228686T-ZELLEN-IMPFSTOFF FÜR SARS-VIRUS
EP - 23.08.2023
Clasificación Internacional A61K 39/12 Nº de solicitud 21880960 Solicitante UNIV JOHNS HOPKINS Inventor/a ROSARIO MAXIM
The disclosure is directed to a nucleic acid sequence encoding an immunogen that induces a T cell immune response against a coronavirus (e.g., SARS-CoV-2), as well as compositions comprising same and methods of inducing an immune response against a coronavirus in a mammal.

47.WO/2023/156596mRNA VACCINE
WO - 24.08.2023
Clasificación Internacional A61K 38/10 Nº de solicitud PCT/EP2023/054037 Solicitante PHION THERAPEUTICS LTD Inventor/a MCCARTHY, Helen
The present specification relates to vaccines comprising an mRNA polynucleotide encoding an antigen from an infectious microorganism; and an amphipathic cell penetrating RALA peptide.

48.20230264202DIGITAL TO BIOLOGICAL CONVERTER
US - 24.08.2023
Clasificación Internacional B01L 7/00 Nº de solicitud 18129775 Solicitante Telesis Bio Inc. Inventor/a J. Craig Venter

The present invention provides a system for receiving biological sequence information and activating the synthesis of a biological entity. The system has a receiving unit for receiving a signal encoding biological sequence information transmitted from a transmitting unit. The transmitting unit can be present at a remote location from the receiving unit. The system also has an assembly unit connected to the receiving unit, and the assembly unit assembles the biological entity according to the biological sequence information. Thus, according to the present invention biological sequence information can be digitally transmitted to a remote location and the information converted into a biological entity, for example a protein useful as a vaccine, immediately upon being received by the receiving unit and without further human intervention after preparing the system for receipt of the information. The invention is useful, for example, for rapidly responding to viral and other biological threats that are specific to a particular locale.

49.20230268038PROXIMITY-BASED FILE SHARING SYSTEM AND METHOD
US - 24.08.2023
Clasificación Internacional G16H 10/60 Nº de solicitud 18005207 Solicitante Medyear, Inc., (formerly Known As: Personiform Inc., dba Medyear) Inventor/a Panha Chheng
A computer-based method for sharing a digital file based on proximity and, in particular, for sharing a digital medical record file such as the result(s) from a virus test or a vaccine record. The method includes: (i) periodically transmitting, by a first mobile device of a first user, a geographic location of the first mobile device; (ii) periodically transmitting, by a second mobile device or a second user, a geographic location of the second mobile device; (iii) determining, when the second mobile device is within the predetermined zone of the first mobile device based on the transmitted geographic locations of the first mobile device and the second mobile device; and (iv) transmitting, when the second mobile device is within the predetermined zone of the first mobile device, a file associated with the first user to the second mobile device for use by the second user.

50.WO/2023/159036AMHR2-ED CANCER VACCINE FORMULATIONS
WO - 24.08.2023
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/US2023/062617 Solicitante THE CLEVELAND CLINIC FOUNDATION Inventor/a TUOHY, Vincent K.
Provided herein are compositions, systems, kits, and methods of using a composition comprising at least a portion of an Anti-Mullerian Hormone Receptor Type II extracellular domain (AMHR-ED), and an adjuvant comprising: i) squalene oil, ii) a non-ionic surfactant (e.g., Tween 80), iii) an emulsifier (e.g., sorbitan trioleate), and iv) a buffer (e.g., citrate buffer). In certain embodiments, such compositions are administered to a female subject to treat or prevent ovarian or endometrial cancer (e.g., by inducing expression of anti-AMHR2-ED IgG antibodies by the subject *in vivo*).

51.WO/2023/161378POLYMER-LIPID HYBRID NANOPARTICLES COMPRISING A LIPID AND A BLOCK COPOLYMER AS WELL AS METHODS OF MAKING AND USES THEREOF
WO - 31.08.2023
Clasificación Internacional A61K 9/51 Nº de solicitud PCT/EP2023/054613 Solicitante ACM BIOLABS PTE LTD Inventor/a NALLANI, Madhavan
The present invention relates to a polymer-lipid hybrid nanoparticle comprising a lipid and a block copolymer, wherein the amount of said lipid, expressed in mole percentage (mole %) present in the polymer-lipid hybrid nanoparticle, wherein the mole percentage refers to the total amount of all components that form the polymer-lipid nanoparticle, is greater than the amount of said block copolymer, expressed in mole percentage, present in the polymer-lipid hybrid nanoparticle. The invention also relates to such a polymer-lipid hybrid nanoparticle further comprising a soluble encapsulated antigen, wherein said soluble encapsulated antigen is a protein and/or polynucleotide. The invention further relates to a

method of encapsulating such an antigen in such a polymer-lipid hybrid nanoparticle as well as to a composition comprising such a polymer-lipid hybrid nanoparticle and uses of such a polymer-lipid hybrid nanoparticle and/or composition as a vaccine, a pharmaceutical, means of targeting cells, tissues and/or organs and/or non-viral delivery system capable of delivering nucleotides to inside a cell.

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