VacCiencia

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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.

- Noticias más recientes en la Web sobre vacunas.
- Artículos científicos más recientes de Medline sobre vacunas Covid.
- Patentes más recientes en Patentscope sobre vacunas.

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La Habana: Concluye primera etapa del ensayo clínico con vacuna antineumocócica Quimi-Vio para niños con enfermedades crónicas

16 nov. El Instituto Finlay de Vacunas anunció en esta fecha el cierre en La Habana de la primera etapa del ensayo clínico con Quimi-Vio, candidato vacunal para la prevención de neumonías, meningitis, otitis y sepsis causadas por *Streptococcus pneumoniae* o neumococo, en población pediátrica con enfermedades crónicas.

Foto: Instituto Finlay de Vacunas.

Tras intensas jornadas de trabajo por la salud de nuestros niños se reconoció el esfuerzo de todo el personal involucrado.

"Celebramos el cierre de la primera etapa del ensayo clínico NeumoRiesgo. En apenas 3 semanas, se vacunaron con Quimi-Vio más de 7500 niños que padecen enfermedades crónicas, de todos los municipios de la capital, para protegerlos de la enfermedad neumocócica", escribió en Facebook la Vicedirectora de Investigaciones del Instituto Finlay de Vacunas de Cuba, Dra. Dagmar García Rivera.

"Desde el Instituto Finlay de Vacunas agradecemos a los equipos de investigación, médicos, enfermeros, técnicos, de los 32 sitios clínicos, por su compromiso con la salud de los niños. A las autoridades de salud de La Habana por entender y apoyar como siempre, y por el compromiso de seguir haciendo lo que haga falta", agregó la científica cubana.

La actividad coincidió con el 504 aniversario de la capital y fue una maravillosa manera de homenajear a La Habana.

Quimi-Vio es una vacuna conjugada heptavalente que protege contra los serotipos de mayor prevalencia mundial de la bacteria. Está basada en la plataforma de vacunas conjugadas, ampliamente utilizada y conocida por su seguridad y eficacia en población pediátrica.

Fuente: Cubadebate. Disponible en https://goo.su/h2rvbn

Hipra anuncia el inicio del estudio clínico de su vacuna monovalente XBB.1.16 contra la COVID-19

16 nov. La farmacéutica biotecnológica enfocada en prevención para salud animal y humana, Hipra, ha recibido la autorización de la Agencia Española de Medicamentos y Productos Sanitarios (AEMPS) para iniciar un nuevo ensayo clínico de fase IIb/III doble ciego, aleatorizado, con control activo, multicéntrico de no -inferioridad para evaluar la seguridad y respuesta inmunológica de una dosis de refuerzo con su vacuna adaptada contra las variantes actuales de la COVID-19, concretamente la variante XBB.1.16, en adultos anteriormente vacunados contra esta infección.

En concreto, esta vacuna adaptada consiste en una proteína recombinante adyuvada basada en una variante Ómicron del SARS-CoV-2. Esta vacuna se trata de la primera adaptación de BIMERVAX, ya avalada por la Agencia Europea del Medicamento (EMA), aprobada por la Comisión Europea y por la Medicines and Healthcare products Regulatory Agency (HMRA) de Inglaterra, y aprobada ('precalificada' en términos técnicos) por la Organización Mundial de la Salud (OMS).

Bimervax de Hipra (Foto. Sanidad)

Todos los participantes recibirán una dosis de una vacuna adaptada contra las variantes actuales de la COVID-19 que, aleatoriamente, podrá ser Hipra o bien otra compañía farmacéutica autorizada en España

El ensayo clínico contará con la participación de un total de 612 personas voluntarias mayores de edad que no estén afectadas por una patología grave. Según apuntan desde Hipra, estas personas deben haber sido vacunadas anteriormente con un mínimo de tres dosis mRNA.

Todos los participantes recibirán una dosis de una vacuna adaptada contra las variantes actuales de la COVID-19 que, aleatoriamente, podrá ser Hipra o bien otra compañía farmacéutica autorizada en España. Además, aclaran que ni el equipo investigador ni la persona participante sabrán qué vacuna se asigna en cada caso.

Los 10 hospitales y centros de atenciónprimaria donde se llevará a cabo el ensayo son: Hospital Germans Trias i Pujol (Barcelona), Hospital Clínico Universitario de Valencia, HM Nou Delfos (Barcelona), HM Sanchinarro (Madrid), HM Puerta del Sur (Madrid), Hospital Dr. Josep Trueta (Girona), Hospital Quirónsalud (Madrid), Hospital Regional de Málaga, CAP Centelles y Hospital de Cruces (Barakaldo).

Fuente: ConSalud.es. Disponible en https://goo.su/kfkR

Why are so few people getting the latest COVID-19 vaccine?

Nov 17. The COVID-19 vaccines were hailed as a miracle upon their arrival. They were delivered earlier than anyone thought possible and proved exceptionally effective in preventing hospitalizations and deaths. More than 80 percent of all Americans, and more than 90 percent of adults, received at least one dose of the vaccines, remarkable penetration in a country where less than half of people get their flu shot every year.

But so far this year, just 14 percent of adults have received a dose of the new vaccine formulation that became available in September — compared to 28 percent who have gotten a flu shot.

Jeff Kowalsky/AFP via Getty Images

This raises a question that would have seemed unthinkable three years ago: What if we make a miraculous vaccine and nobody wants it?

Ever since that first shot, the public's interest in subsequent COVID-19 vaccines has been steadily dropping. Less than 70 percent of the US finished their initial two-dose vaccine series. Less than 20 percent of the country received last year's bivalent booster shot.

Experts say the public's disinterest in the latest Covid shots is likely a combination of poor messaging from authorities, a diminishing fear about a virus that three years ago was wholly unknown, and the political polarization of the pandemic itself. But whatever the reasons, that vaccine ambivalence still poses a health threat.

Elderly people and very young infants continue to have a higher chance than the rest of the population that they will be hospitalized with COVID-19. Vaccination rates have fallen off for the former group, who are also most likely to die from an infection, and they were never strong to begin with for the latter; 95 percent of children under 4 are unvaccinated. About half of seniors being hospitalized for COVID-19 these days have never gotten a vaccine, experts say, affirming that the unvaccinated continue to be hit much harder by the virus.

Infectious disease experts saw 2023 as a pivotal year for the country's transition out of the pandemic. It would test whether the US health system could marshal a strong response to the winter Covid-cold-and-flu season, specifically through a successful vaccination campaign. The dismal start to that campaign may force a difficult question upon the public health community: If Americans don't care about getting vaccinated against Covid-19 anymore, what do we do now?

Why Americans aren't getting their COVID-19 shots

Part of the story is simply human nature. COVID-19 arrived in 2020 behaving strangely (with so much asymptomatic transmission) and incurring a deadly toll (the first iteration of the virus was notably more virulent than the flu). Much of the economy shut down and people were confined to their homes. It was a scary time and vaccines offered hope for a future in which not only would you be less likely to get seriously ill but that life could get back to normal. When shots went out to hospitals, pharmacies, and vaccination clinics in December of 2020, Americans were eager to get them.

But three years and multiple new vaccine formulations later, the novelty is gone.

Americans aren't as worried about COVID-19 now. More than 70 percent of US adults said they were not concerned about getting seriously ill from Covid-19 in a November survey from the KFF health policy think tank. That figure has been about the same for the flu and RSV, suggesting Americans have come to view the novel coronavirus as a similar health risk to other cold-weather illnesses that have been circulating for a long time. Half of the people who were previously vaccinated but do not plan to get the updated Covid-19 vaccine cited a lack of concern about the virus as a reason for skipping the latest shot, per KFF.

"People aren't scared of this virus anymore," Paul Offit, director of the Vaccine Education Center at the Children's Hospital of Philadelphia, told me.

As evidence, he recounted that he had ridden the subway with "100 screaming, maskless" football fans heading to the Eagles-Cowboys game. "No one on that subway car had a mask on," he said. "We are close to winter, and this is in theory a winter virus."

Familiarity is one part of that change in attitudes. Another is political polarization: Republicans, both the rank-and-file and their political leaders, have grown more and more hostile toward the COVID-19 vaccines, with a general skepticism toward government mandates spilling into conspiracy theories and disinformation. (Offit marveled at that turn of events: These vaccines are "the most amazing medical and scientific accomplishment" of his lifetime and "the greatest accomplishment of the Trump administration." And yet.)

Only 23 percent of Republicans said in KFF's November poll that they had or would get the latest version of the Covid-19 vaccine this fall or winter. Another 43 percent of the party said they received an earlier dose but will not get the new shot and 34 percent said they have never been vaccinated at all. To compare, 40 percent of independents said they had or would get the new shot and 72 percent of Democrats said the same. While reality does not exactly match up to those responses, the gap between Republicans and the rest shows partisanship is driving vaccine attitudes.

"It's become part of somebody's identity that they're not somebody who gets Covid shots in particular," said Dr. Céline Gounder, a senior fellow at KFF and editor-at-large for Public Health at KFF Health News. "That may spill over to vaccines, but it starts with COVID-19."

There are worrying signs of a more general resurgence in vaccine skepticism: 3 percent of US schoolchildren reported a vaccine exemption for the coming school year, the highest share on record according to the CDC. Ten states have an exemption rate above 5 percent; only two did three years ago.

But while that uptick is worrying, it is clear, as Gounder noted, that Covid is a special case for Americans. Flu vaccination rates last season were in line with rates from before the pandemic: Lower than you'd like (57 percent for kids, 46 percent for adults) but historically unremarkable. Flu vaccinations this year are on track with last year's pace, according to the CDC.

People were already accustomed to the annual flu vaccination campaign before the pandemic and they seem to be mostly sticking to old habits. So why do so many seem so immune to the public health community's plea that they get a COVID-19 shot at the same time?

The other factor may be that Americans have become inured to such public health messaging after years of living through a public health emergency.

Partly, the vaccines are a victim of their own success. The initial clinical trials reported incredible results not only in stopping severe disease (the primary public health goal) but in stopping any illness at all. The gobsmacked headlines may have led the public to expect to never get sick at all, and public health messages failed to break through with the reality check that while you may still feel sick, it is much less likely you'll end up in the hospital — and that should count as a win. When reality didn't meet expectations, seeds of doubt and distrust were sown.

For the later shots, Gounder said the public health messaging itself, which generally encourages everyone to get another Covid-19 shot, may be part of the problem. People are more familiar with the virus now — and that means many have a general idea of how it works. They may know, for example, that age and chronic health conditions are the best indicators of one's risk of serious illness or death from an infection.

Other countries, such as the United Kingdom, have targeted their recommendations to people over 65 and people at a heightened risk because of their health, as well as the people who live with and care for those at-risk folks.

The United States has to date instead erred toward simplicity with its vaccine messaging and recommendations: Everyone older than 6 months is recommended for yet another shot. Experts acknowledge there is an argument for that strategy. But as COVID-19 has become a more familiar illness and people have a better understanding of it, there may be a better argument for a more nuanced approach.

At this point, people have likely lived through an infection of their own and have firsthand experience with Covid-19. The initial vaccination campaign was crucial because people had no immunity to COVID-19 at all; the population was naive. But the public health reality has changed three years later: Most people have either been vaccinated or infected or both.

So when the official vaccine guidance remains largely unchanged, and the messages public health authorities are sending fail to acknowledge the varying risks or that people do possess some immunity, they may end up being ignored.

“I understand some of the skepticism,” Gounder said. “When you tell everyone you’re all at risk, get your shot, it doesn’t correspond with your lived reality.”

What the future may hold for Covid-19 vaccines

There are short-term steps the US could be taking to bolster Covid-19 vaccine uptake, particularly for the most vulnerable. Additional funding for nursing homes to hold vaccination campaigns, for example: Only 17 percent of nursing home residents are up to date on their shots. Experts also stressed the importance of communicating to people that the very young can get seriously ill with COVID-19; even if they don’t die, the health complications can be serious. Gounder said she’d like to see that messaging start with more of a focus on pregnant women, who can pass some immunity to their unborn child.

But there is a larger question brewing when only 10 percent of the US population is showing much urgency about getting a COVID-19 vaccine: How are we going to keep doing this?

Pfizer said in September that it expected about one in four Americans to get the latest shot. Though there is still time, current vaccination rates are well short of that goal. It is an open question how the for-profit pharmaceutical manufacturers who produce these vaccines will respond to what the market is telling them.

Gounder said it is difficult to imagine a cessation of COVID-19 vaccinations entirely. The public health case for immunizing the elderly in particular is strong. But drug makers may scale back their production, especially if the government’s recommendations become more targeted.

The federal government is putting a lot of money behind pharma’s pursuit of a universal Covid vaccine, but until those efforts bear fruit (if they ever do), there may also be less interest in producing new formulations of the vaccine after uptake for this season’s new shot was so paltry.

The known unknowns for the future, which could spur another round of investment and interest in updated Covid-19 vaccines, are biological. The virus has been evolving and will continue to evolve and could, in theory, reach a point where the current vaccines are ineffectual.

The other question mark is inside of us. The reason many people still enjoy protection from serious illness is because our body’s T-cells are familiar with the virus and can activate when they detect it. They may not be able to stop an infection entirely (that is the role of antibodies, which are quicker to fade) but they can stamp out the virus before a person becomes too sick.

What we don't know today is how long our T cells' memory will last, and how durable that immunity really is. The only way to find out is for more time to pass.

Fuente: Vox. Disponible en https://goo.su/TttmEp

Pfizer to produce pneumococcal vaccine in Kazakhstan

Nov 18. Kazakhstan's SK-Pharmacy and Pfizer international bio-pharmaceutical company entered into a long-term agreement, as per which the pharmaceutical giant undertakes to supply a 20-valent pneumococcal conjugate vaccine to Kazakhstan for 10 years after localization of contract production of the innovative vaccine in the territory of the country.

Photo: Pixabay

Patrick van der Loo, Regional President of Pfizer for Middle East, Russia and Africa, arrived in Kazakhstan to sign the document.

Kazakhstan became the first country in the Eurasian region and Central Asia where Pfizer plans to establish contract production of the innovative vaccine.

In February 2023, a roadmap for the implementation of the project was signed between Pfizer, Kazakhstan's healthcare and foreign affairs ministries.

The vaccination against pneumococcal infection has been included in the National Immunization Schedule of Kazakhstan since 2010. Prior to the launch of mass immunization, pneumonia was one of the leading causes of death in infants in the country. The introduction of vaccination into the National Immunization Schedule made it possible to reduce the mortality rate among children in this age group by more than 2.5 times.

Fuente: Kazinform International News Agency. Disponible en https://goo.su/UlikIS

República Dominicana inicia vacunación contra neumococo

20 nov. El Ministerio de Salud Pública abrió la primera Jornada de vacunación contra el neumococo para personas diabéticas e instaló un centro de vacunación en el INDEN.

Ministro Salud encabezó el inicio de la vacunación.

La jornada inició en el Instituto Nacional de la Diabetes, Endocrinología y Nutrición (INDEN) y la encabezó el ministro de Salud, Daniel Rivera, quien explicó que la inyección puede disminuir el riesgo de complicaciones y fallecimientos.

"Estamos buscando proteger a una parte importante de la población que padece diabetes, una enfermedad que compromete en gran medida diferentes órganos del cuerpo", agregó.

DOCE POR CIENTO DE LA POBLACIÓN PADECE DIABETES

El funcionario recordó que el índice de diabetes en el país alcanza el 12 por ciento, además de que el 70 por ciento de la población evaluada tiene sobrepeso y un 32.3 por ciento padece de hipertensión.

Insistió en que llevar un estilo de vida saludable sigue siendo la mejor opción para disminuir los factores de riesgo y aseguró que la Prevenal 13 es una vacuna con alta efectividad, frente a la neumonía.

Tras finalizar el acto, las autoridades de Salud procedieron a dejar abierto el centro fijo de vacunación, el cual cuenta con 17 vacunas gratuitas que protegen contra 19 enfermedades inmunoprevenibles.

MÁS DE MIL PUESTOS DE VACUNACIÓN

La vacuna contra el neumococo se aplicará en los más de mil puestos fijados, incluido el que se dejó instalado en el INDEN.

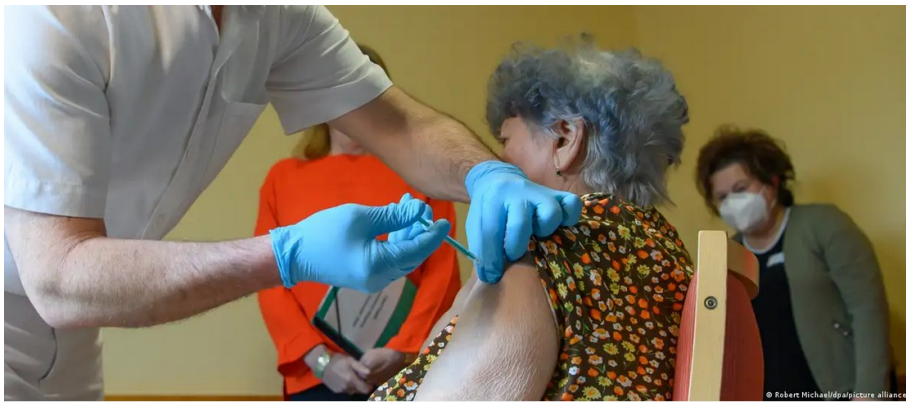
Las provincias vacunarán en todos los centros y trascendió que hasta septiembre pasado existía una cobertura en menores de un año de un 100.3 por ciento y 87 por ciento en mayores de un año.

La vacuna contra el neumococo se aplica a los dos y cuatro meses de nacido y un refuerzo al cumplir el año. También se destina a adultos mayores que pernoctan en los hogares de ancianos.

Fuente: Al Momento. Disponible en https://goo.su/waaj

La vacunación contra el COVID-19 vuelve a ser necesaria

22 nov. Los médicos recomiendan encarecidamente vacunarse, ya que nadie debe tomarse a la ligera el coronavirus ni la gripe. La vacunación contra el COVID-19 puede combinarse con la de la gripe: en Alemania, el Comité Permanente de Vacunación (STIKO), y en Estados Unidos, los Centros para el Control y la Prevención de Enfermedades (CDC) están de acuerdo con eso. Pero se cree que es mejor no aplicar las dos en el mismo brazo debido a que pueden producirse hinchazón y enrojecimiento en el lugar de la inyección. Es decir: sería mejor colocar una en el brazo derecho, y la otra en el izquierdo.



Los grupos de riesgo son los adultos mayores y las personas con ciertas enfermedades crónicas. Imagen: Robert Michael/dpa/picture Alliance.

Vacuna combinada

La Organización Mundial de la Salud (OMS) recomienda en varios países administrar la vacuna contra el COVID-19 y la de la gripe al mismo tiempo. Lo ideal sería aplicar las dos en una sola inyección. Las grandes empresas farmacéuticas se están enfrentando a este desafío. En Estados Unidos, la Administración de Alimentos y Medicamentos (FDA) ha concedido a una vacuna combinada basada en ARNm el estatus de *fast-track* (vía rápida). Esto significa que el desarrollo y el lanzamiento al mercado se consideran especialmente importantes y, en consecuencia, puede acelerarse.

Una vacuna de Pfizer y Biontech recibió ese estatus de vía rápida, y ahora se encuentra en un estudio de la fase III pertinente para la autorización necesaria. Además, los estudios realizados por la compañía de la

competencia, Moderna, también están dando buenos resultados. La empresa aspira a obtener la autorización de comercialización de su vacuna combinada en 2025.

Una vacuna contra tres enfermedades

Un paso más allá se está dando al investigar el desarrollo de una triple combinación: una vacuna contra el COVID-19, la gripe y el virus respiratorio sincitial (VRS), que afecta las vías respiratorias y provoca síntomas similares a los del resfriado común. En lactantes y niños pequeños, el virus respiratorio sincitial puede ser a menudo el desencadenante de una bronquitis aguda.

Actualmente, las vacunas contra el VRS sólo pueden administrarse individualmente. La autoridad estadounidense no tiene reservas sobre la aplicación de las tres vacunas individuales al mismo tiempo. Según los CDC, no es necesario respetar un periodo mínimo de espera entre ambas.

Las cifras de COVID-19 vuelven a aumentar

En opinión de los expertos, es preocupante que se vacune a un número demasiado bajo de personas. Una de las razones puede ser que muchos simplemente están cansados de vacunarse, el coronavirus ya ha desaparecido de la conciencia de muchas personas, y el riesgo parece estar ya lejos.

No obstante, las consultas médicas reciben cada vez más pacientes con tos y mocos. Esto no siempre se debe al coronavirus, ya que también puede deberse a un simple resfriado o una gripe. Sin embargo, quienes han contraído el coronavirus suelen padecer los síntomas durante una o dos semanas, aunque en unos pocos casos la enfermedad toma un curso tan grave que los afectados tienen que ser hospitalizados.

Los grupos de riesgo siguen en peligro

El consejo urgente de vacunarse contra el COVID-19, pero también contra la gripe, se aplica, sobre todo, a los grupos de riesgo. Entre ellos se encuentran, por ejemplo, las personas mayores de 60 años, y aquellas con enfermedades preexistentes, como cardiopatías coronarias o hipertensión arterial. En el grupo de riesgo también están los pacientes con bronquitis crónica, enfermedad hepática crónica y los diabéticos. Los niños y adolescentes con una enfermedad subyacente también siguen considerándose especialmente expuestos.

Los médicos advierten urgentemente contra la subestimación del coronavirus y la gripe. Además de las vacunas, las medidas ya olvidadas también pueden ayudar, por lo cual las mascarillas vuelven a ser obligatorias en muchas clínicas y consultas médicas de Alemania, y cada vez más personas las llevan en público para protegerse y proteger a los demás de la infección por el coronavirus.

Fuente: DW. Disponible en https://goo.su/awe1fFY

Enfermedad neumocócica invasiva: los especialistas alertan del incremento de casos

22 nov. La enfermedad neumocócica invasiva es grave y está provocada por la *Streptococcus pneumoniae*. Conocida como la bacteria del neumococo, es una de las principales causas de infecciones respiratorias agudas e invasivas, como la neumonía, en todas las edades.

Además de neumonía, la enfermedad neumocócica puede provocar otras afecciones como:

- Otitis media
- Meningitis neumocócica

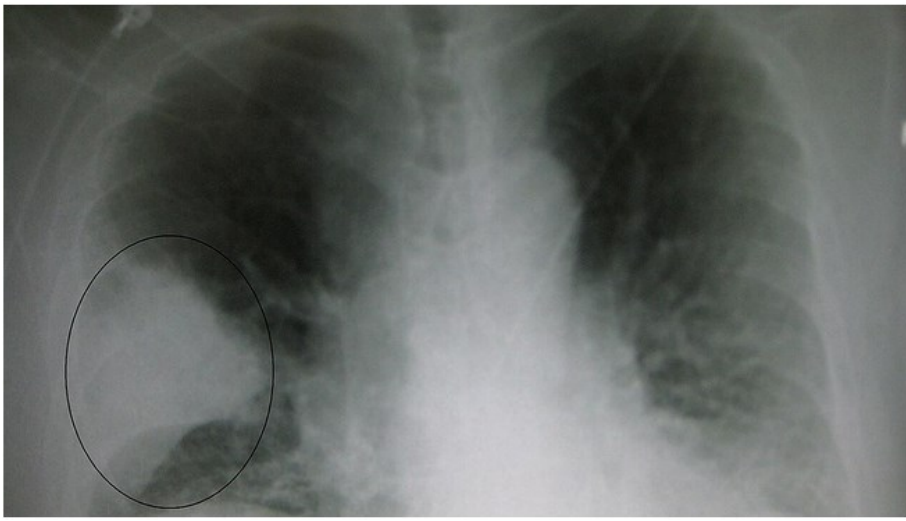
- Bacteriemia
- Septicemia.

Este tipo de infecciones afecta fundamentalmente a dos grupos de población: los niños y las personas de más edad, y es la responsable de un elevado número de hospitalizaciones.

De hecho, los estudios demuestran que las tasas de hospitalización por esta bacteria en niños de hasta 1 año fueron de 18,6 casos por cada 10.000 habitantes, disminuyendo con la edad hasta la adolescencia y volviendo a aumentar con la edad hasta alcanzar los 65,75 casos por cada 10.000 en los mayores de 85 años.

¿Qué es la neumonía bacteriana?

La neumonía es un tipo de infección respiratoria aguda que afecta a los pulmones. Puede estar provocada por virus (gripe, virus respiratorio sincitial, rinovirus, entre otros), hongos o, como en este caso, la bacteria del neumococo.



Este tipo de infecciones afecta fundamentalmente a dos grupos de población: los niños y las personas de más edad, y es la responsable de un elevado número de hospitalizaciones. / Wikimedia Commons.

Como consecuencia de la infección, los pulmones se inflaman y acumulan agua o pus, lo que provoca síntomas como:

- Dolor torácico al respirar o toser.
- Tos con flemas.
- Fiebre alta.
- Dificultad para respirar.
- Náuseas o vómitos.

Hablamos de una infección grave, cuyo diagnóstico se realiza mediante una auscultación y la realización de una radiografía torácica. Y aunque existe tratamiento para curarla, los antibióticos, lo cierto es que se debe vigilar muy de cerca porque puede producir graves complicaciones como:

- Bacteriemia: las bacterias causantes de la neumonía pasan a la sangre poniendo en riesgo el resto de los órganos.
- Insuficiencia respiratoria grave.
- Derrame pleural: acumulación de líquido alrededor de los pulmones.
- Absceso pulmonar. Formación de pus en el pulmón.

La importancia de la vacunación

Para evitar la infección por la bacteria neumocócica y, por tanto, todas las complicaciones que puede suponer, la prevención es esencial.

Afortunadamente, en España, el uso de las vacunas conjugadas neumocócicas ha contribuido a una disminución en la incidencia de los serotipos vacunales causantes de enfermedades invasivas y no invasivas, tanto en niños vacunados como en no vacunados y en adultos.

“La vacunación sistemática contra el neumococo en niños ha representado un antes y un después al reducir la carga de enfermedad y los casos más graves”

Y tal y como explica el doctor Fernando Baquero Mochales, Profesor de Investigación en el Área de Biología y Evolución de Microorganismos, Instituto Ramón y Cajal de Investigaciones Sanitarias (IRYCIS), Servicio de Microbiología del Hospital Ramón y Cajal, e investigador del grupo 33 del Centro de Investigación Biomédica en Red en Epidemiología y Salud Pública (CIBERESP):

“Los más vulnerables son los niños menores de 5 años y, en particular, los menores de 2 años. El desarrollo de vacunas conjugadas antineumocócicas representa un gran avance, ya que aportan mayor protección a largo plazo y actúan sobre la nasofaringe de los niños, que es el principal foco de transmisión de la enfermedad”.

Además de las vacunas, los especialistas señalan otras medidas de protección frente al *Streptococcus pneumoniae*, como la higiene de manos y dejar el tabaco.

Aumento de casos en el último año

Pero a pesar de disponer de estas vacunas lo cierto es que entre el año 2022 y 2023 los especialistas han notado un aumento de casos.

Mientras que en 2020, primer año de la pandemia, se produjo una marcada reducción de los casos de enfermedad neumocócica invasiva en el grupo de edad de menos de 2 años, en 2022, coincidiendo con el fin de las medidas no farmacológicas, se observó un restablecimiento de los niveles prepandémicos.

De hecho, entre 2022 y 2023 se ha observado un aumento importante del serotipo 3 en niños, convirtiéndose también en el dominante en adultos mayores de 65 años.

“Teniendo en cuenta el carácter evolutivo de la bacteria, resulta imprescindible contar con sistemas robustos de vigilancia epidemiológica para evaluar en cada momento los serotipos más prevalentes y así poder modificar las estrategias incorporando las vacunas que mejor respondan a las necesidades de cada momento”.

Fuente: Faro de Vigo. Disponible en https://goo.su/WLIm

Cuba y Vietnam reforzarán nexos en el campo de la biotecnología

24 nov. El Instituto Finlay de Vacunas de Cuba y la empresa vietnamita Vabiotech acordaron en esta capital reforzar los nexos en el campo de la biotecnología.

“Visitó el @FinlayInstituto una delegación de la empresa vietnamita Vabiotech, encabezada por su director, Nguyen Anh Tuan. Se dialogó sobre la colaboración conjunta y futuros proyectos. Los representantes de Vietnam recibieron una actualización del trabajo de la Institución”, precisa un mensaje de la entidad caribeña en la red social X.

“En el intercambio entre @FinlayInstituto y la empresa vietnamita Vabiotech, se expresó la voluntad de continuar ampliando los vínculos de colaboración entre ambas instituciones de la biotecnología”, subraya el texto.

Vabiotech es una de las empresas líderes en Vietnam en la fabricación, comercialización, investigación y desarrollo de una amplia gama de vacunas, kit de diagnósticos, productos biológicos, terapéuticos, farmacéuticos; cosméticos, alimenticios, además de la prestación de servicios sanitarios.

Actualmente, Vabiotech produce cuatro vacunas: Hepatitis B, Hepatitis A, Encefalitis Japonesa y Cólera oral, además importa inmunógenos para combatir paperas, rubéola, meningococo y varicela.

El Instituto Finlay de Vacunas de Cuba cuenta con inyectables glycoconjugados, sintéticos, combinados, terapéuticos y contra enfermedades infecciosas.

Son reconocidos los efectos de esos productos en el control de epidemias como la causada por Neisseria meningitidis en 1989 en Cuba y fue erradicada con el VA-MENGOC-BC.

También se obtuvo una vacuna antileptospirósica trivalente de células inactivadas de Lectospira interrogans (serovares Canicola canicola, Pomona mozdok e Icterohaemorrhagiae copenhageni) para combatir brotes de leptospirosis, entre otros logros científicos que garantizan en gran parte la soberanía de la nación en este campo.

Fuente: Prensa Latina. Disponible en https://goo.su/hVQLE

"No ha desaparecido, está matando": Las variantes del COVID que la OMS vigila de cerca

27 nov. Hay varias subvariantes circulando de Ómicron en todo el mundo. Pero, ¿qué son y por qué no nos preocupa tanto como a los responsables de la OMS?

Aunque el punto álgido de la pandemia haya pasado, el virus causante de la COVID-19 sigue mutando, con múltiples variantes circulando en todos los países.

A pesar de ello, las pruebas y la vigilancia han disminuido, y los expertos instan a la población a seguir tomándose en serio la amenaza de esta enfermedad.

"El mundo ha dejado atrás la COVID-19 y, en muchos aspectos, eso es bueno porque la gente puede protegerse y mantenerse a salvo, pero este virus no se ha ido a ninguna parte. Sigue circulando. Está cambiando, está matando, y tenemos que seguirle el ritmo", declaró a Euronews Next Maria Van Kerkhove, responsable técnico de COVID-19 en la Organización Mundial de la Salud (OMS).

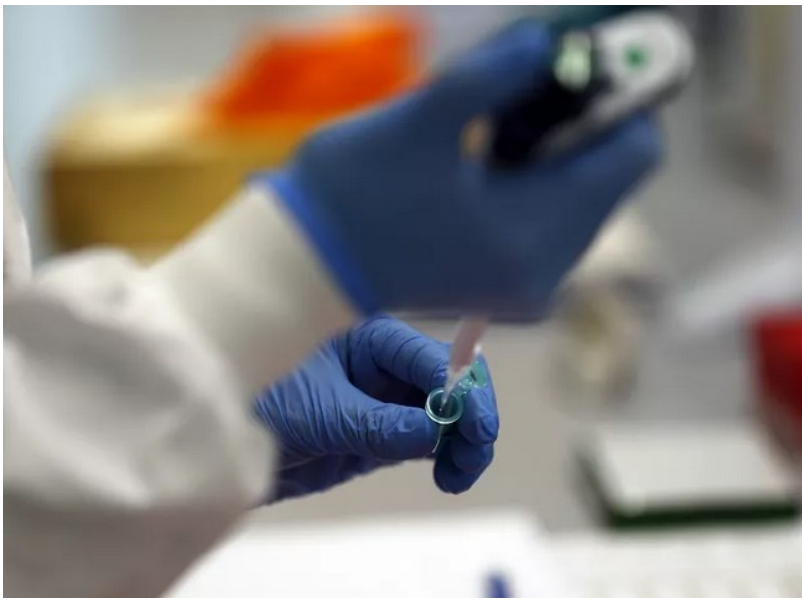
¿Cuáles son las variantes de COVID más comunes hoy en día?

Todas las variantes que circulan hoy en día son sublinajes de Omicron, una variante altamente transmisible de COVID-19 que apareció por primera vez hace dos años.

Un sublinaje, EG.5, también apodado Eris, representa actualmente más de la mitad de las variantes de COVID-19 que circulan en todo el mundo. La OMS la declaró variante de interés en agosto.

Los casos de EG.5 aumentaron durante el verano, pero recientemente fue superada en los Estados Unidos

por una subvariante estrechamente relacionada llamada HV.1. Esta subvariante representa ahora la mitad de los casos de COVID-19 en todo el mundo. El 29% de los casos de COVID-19 en EE.UU., según las últimas cifras de los Centros para el Control y la Prevención de Enfermedades (CDC).



Un asistente de laboratorio utiliza una pipeta para preparar el ARN Coronavirus para la secuenciación en el Instituto Wellcome Sanger en Cambridge, 2021. Frank Augstein/AP Photo.

"HV.1 es esencialmente una variante derivada de EG.5.1 (y anteriormente XBB.1.5) que está acumulando unas pocas mutaciones que le permiten infectar mejor a las personas que tienen inmunidad frente al SARS-CoV-2", explicó a Euronews Next Andrew Pekosz, profesor de microbiología molecular e inmunología de la Universidad Johns Hopkins de EE.UU.

Pekosz, que estudia la replicación de los virus respiratorios, dijo que estas variantes probablemente surgieron como mutaciones aleatorias como parte de la evolución natural de los virus.

Según los Centros Europeos para el Control y la Prevención de Enfermedades (ECDC), las variantes similares a XBB 1.5, como EG.5 -o Eris- son actualmente dominantes, y representan alrededor del 67% de los casos en los países de la UE/EEE.

Fuente: Euronews. Disponible en https://goo.su/bUs7j

Vacuna COVID-19: ¿qué sigue para proteger la salud pública mundial?

28 nov. La pandemia de COVID-19 puso en relieve el papel crucial de la innovación y aceleración científica en la lucha contra las emergencias mundiales de salud pública. Uno de los avances más notables logrados durante este periodo fue el rápido desarrollo y despliegue de vacunas, donde destacó la tecnología de ARNm.

Aprovechar el potencial de esta tecnología ha sido vital en la lucha mundial contra la COVID-19. La versatilidad del ARNm permitió a los investigadores reaccionar rápidamente ante la aparición de este virus y las nuevas variantes al modificar la secuencia de ARNm según fuera necesario.

Al transmitir las instrucciones de la proteína de la espiga del virus SARS-CoV-2, las vacunas de ARNm provocan una respuesta inmunitaria sin introducir el virus en el organismo. Se ha demostrado que este enfoque proporciona una protección eficaz contra la enfermedad grave y, en última instancia, reduce las

hospitalizaciones, los daños a la salud y la mortalidad por COVID-19.

Considerando que en América se ha experimentado un impacto particularmente devastador de la pandemia de COVID-19, se debe gestionar este virus de manera efectiva. Según la Organización Panamericana de la Salud (OPS), en la región, se han notificado más de 193 millones de infecciones y cerca de 3 millones de muertes acumuladas por COVID-19, según los últimos datos disponibles de este año.

Estas alarmantes cifras subrayan la urgencia de priorizar la vacunación y aplicar estrategias eficaces para detener la propagación del virus que no deja de mutar.

RECOMENDACIONES PARA LA VACUNACIÓN EN OTOÑO-INVIERNO

Aunque se cuenten con dosis anteriores de la vacuna, lo importante es tener en cuenta la fecha en que se aplicó. Poner al día el sistema inmune con vacunas actualizadas que enseñen al cuerpo a combatir las subvariantes es clave para estar protegidos y evitar cualquier complicación.

Teniendo en cuenta la evolución de los conocimientos sobre el virus y las variantes emergentes, los expertos en salud pública recomiendan dar prioridad a la vacunación contra la COVID-19 en los siguientes grupos:

Personas de alto riesgo. La vacunación debe ser una prioridad para las personas con mayor riesgo de enfermedad grave y complicaciones, incluidos los ancianos y las personas con problemas de salud crónicos. Proteger a estas poblaciones vulnerables no solo salva vidas, sino que también disminuye la carga sobre los sistemas sanitarios.

Trabajadores de primera necesidad. Los trabajadores de sectores esenciales, como los servicios sanitarios, la educación, el transporte y los servicios alimentarios, deben tener prioridad en la vacunación. Esto ayuda a salvaguardar la continuidad de los servicios críticos a la vez que previene brotes en entornos de alto contacto.

Comunidades con bajas tasas de vacunación. Deben realizarse esfuerzos para garantizar un acceso equitativo a las vacunas, especialmente para las comunidades con las tasas de vacunación más bajas. Para ello, los esfuerzos de concienciación pueden contribuir a hacer frente a barreras como las dudas sobre las vacunas y la desinformación.

CUIDAR LA SALUD TRAS LA EXPERIENCIA DEL COVID-19

La rápida evolución del virus del SRAS-CoV-2 exige una vigilancia constante. La Organización Mundial de la Salud (OMS), en colaboración con organizaciones sanitarias y expertos científicos de todo el mundo, así como en América Latina a través de la OPS, desempeña un papel crucial en la identificación de las variantes más prevalentes y preocupantes.

Mediante el seguimiento de los datos de vigilancia genómica y la evaluación del impacto potencial de las nuevas cepas, proporcionan recomendaciones para nuevas vacunas dirigidas a las mutaciones prevalentes del virus. Cabe mencionar que la FDA estadounidense aconsejó actualizar las vacunas de COVID-19 a una composición monovalente XBB.1.5.

Esta recomendación coincide con la de otros reguladores y organismos mundiales de salud pública que también han aconsejado una composición XBB monovalente. Gracias a la tecnología ARNm, ya existe una vacuna con estas características, que en septiembre fue aprobada por la Administración de Alimentos y Medicamentos (FDA, por sus siglas en inglés) y la Agencia Europea (EMA), así como otros organismos reguladores, para la temporada de vacunación de otoño de 2023.

Actualmente, la vacuna está en proceso de aprobación en México por parte de la Comisión Federal para la Protección contra Riesgos Sanitarios (Cofepris) que, a través de su Comité de Moléculas Nuevas, conformado por representantes de las asociaciones académicas del país, analizará que cumpla con la calidad, seguridad y eficacia que requiere la población mexicana.

Fuente: Newsweek en español. Disponible en https://goo.su/X9b8OW

La OMS incluye la vacuna para la COVID-19 de Novavax en su Lista de Uso de Emergencia

28 nov. La Organización Mundial de la Salud (OMS) ha aprobado la inclusión de Nuvaxovid, la vacuna basada en proteínas para la COVID-19 de Novavax en la Lista de Uso de Emergencia (EUL, por sus siglas en inglés) para la inmunización activa que permita la prevención de la COVID-19 en personas mayores de 12 años.

La vacuna ha demostrado su eficacia contra múltiples variantes, incluida la XBB.1.5.

La EUL ayuda a los Estados miembros a evaluar las vacunas con el objetivo de acelerar la disponibilidad y permite acelerar las aprobaciones regulatorias para importar y administrar la vacuna.

"La inclusión de nuestra vacuna en la Lista de Uso de Emergencia de la OMS permite agilizar las aprobaciones reglamentarias para sus 194 estados miembros y las agencias de las Naciones Unidas, como UNICEF, apoyando así el acceso equitativo a nuestra vacuna en todo el mundo", ha señalado John C. Jacobs, presidente y director ejecutivo de Novavax.

"Las zonas rurales o de difícil acceso pueden beneficiarse de la facilidad de transporte y el perfil de almacenamiento que tiene nuestra vacuna", ha asegurado Jacobs.

Datos de ensayos clínicos

La vacuna de Novavax se puede almacenar entre 2 y 8 grados Celsius y tiene una vida útil de 12 meses, lo que simplifica la entrega, disminuye la huella de carbono y reduce el desperdicio. 1-4

La EUL se basó en datos no clínicos que mostraban que la vacuna COVID-19 de Novavax inducía respuestas inmunitarias funcionales contra las variantes XBB.1.5, XBB.1.16 y XBB.2.3. Datos no clínicos adicionales demostraron que la vacuna de Novavax indujo respuestas de anticuerpos neutralizantes a las subvariantes BA.2.86, EG.5.1, FL.1.5.1 y XBB.1.16.6, así como respuestas celulares (células T) polifuncionales CD4+ contra EG.5.1. y XBB.1.16.6. Estos datos indican que la vacuna de Novavax puede estimular ambos brazos del sistema inmunológico y puede inducir una respuesta amplia contra las variantes que circulan actualmente. 5,6

En los ensayos clínicos, las reacciones adversas más comunes asociadas incluyeron dolor de cabeza, náuseas o vómitos, dolor muscular, dolor en las articulaciones, sensibilidad en el lugar de la inyección, dolor en el lugar de la inyección, fatiga y malestar.

Fuente: Gaceta Médica. Disponible en https://goo.su/hzLcH

Clinical Updates On COVID-19 Vaccine Options

Nov 28. Today, when it comes to COVID-19 vaccination, there are multiple options available for patients. The currently FDA-authorized vaccines include options from Pfizer-BioNTech (Comirnaty), Moderna (Spikevax), and Novavax (Covovax). All of these vaccines are given intramuscularly in the upper arm for both adults and children.

Many individuals have questions about the ingredients in these vaccines. For those interested, health care providers should always mention that these vaccines do not have preservatives such as thimerosal or mercury, they do not contain antibiotics, and do not contain medications, food proteins, metals, or latex materials.

Messenger RNA (mRNA) vaccines, such as Pfizer's and Moderna's vaccines, are designed to instruct the body's cells on how to make a protein that can trigger the immune response. The mRNA portion from the vaccine is then broken down within a few days after vaccination and is discarded from the body. Some of the ingredients in the Pfizer vaccine include nucleoside-modified mRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2, lipids, sugars, and tromethamine.

Some of the ingredients in the Moderna vaccine include mRNA nucleoside-modified mRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2; lipids; salt and sugars including sodium acetate and sucrose; tromethamine; and acetic acid (the main ingredient in white household vinegar).

The ingredients in the Novavax vaccine include SARS-CoV-2 recombinant spike protein; lipids such as cholesterol and phosphatidylcholine; adjuvants such as fraction A and fraction C of Quillaja saponaria Molina extract; and salts and sugars.

Many patients question how well these vaccines work. Research has repeatedly shown that those that are up to date with their vaccinations have a lower risk of severe illness, hospitalization, and death from COVID-19, compared to those who are not vaccinated or have not completed their required doses. The updated 2023 COVID-19 vaccines can provide additional protection to those who may be exposed to COVID-19 virus.

Some of the adverse effects related to these vaccines include body ache, fever, chills, tiredness, headache, and injection site pain. Some individuals may experience severe allergic reactions to these vaccines as well, so it is important for the vaccination team to be prepared to respond to such events. Some cases of myocarditis and pericarditis have also been reported in those receiving the Novavax COVID-19 vaccine.

The Pfizer vaccine comes in a multi-dose vial with a yellow cap for ages 6 months through 4 years; a single dose vial with a blue cap for ages 5 to 11 years; and a single dose vial with a gray cap for those 12 years and older.

The Moderna vaccine comes in single dose vial with a dark blue cap and green label for those ages 6 months to 11 years old, and a single dose vial with a dark blue cap and blue label for those ages 12 years and older. The dosing for those aged 6 months to 11 years old is 0.25 mL, and 0.5 mL for those 12 years and older.

The Novavax vaccines come with a blue cap and blue label. They are indicated only for those 12 years and older and should be administered 0.5 mL intramuscularly.

Regardless of which of these vaccines patients receive, as long as they receive them according to the prescribed schedules, they can protect themselves and their community against the COVID-19 virus and the possible consequences that may come with it.

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

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Patentes registradas en Patentscope

Estrategia de búqueda: *Vaccine in the title or abstract AND 20231116:20231130 as the publication date 70 records*

1.2618818Vaccine
GB - 22.11.2023
Clasificación Internacional A61K 31/7115 Nº de solicitud 202207281 Solicitante PHION THERAPEUTICS LTD Inventor/a HELEN MCCARTHY
A vaccine comprises an mRNA polynucleotide encoding a coronavirus antigen, and an amphipathic cell penetrating RALA peptide. The vaccine may comprise up to three mRNA polynucleotides, which may encode SARS-CoV-2 antigens such as the Membrane, Envelope, Spike, and/or Nucleoprotein antigens. The polynucleotides may be present in an equal or unequal copy ratio. The vaccine may have an immunoadjuvant such as a cytokine or granulocyte-macrophage colony-stimulating factor. The mRNA polynucleotide may comprise N1-methylpseudouridine nucleotides and unmodified cytidine nucleotides. The vaccine may comprise nanoparticles. The N:P ratio of amphipathic cell penetrating peptide:mRNA polynucleotide may be about 8.5-9.5:1. The vaccine may further comprise trehalose. A method of preparing a nanoparticle formulation of the vaccine in an automated mixing system is also provided. The vaccine may be used to treat coronavirus infection, particularly SARS-CoV-2. A method of treating COVID-19 is also provided. The RALA complexed mRNA nanoparticles may have improved intracellular delivery of the mRNA cargo, protecting it from degradation, and may be readily lyophilised whilst maintaining function.

2.20230372466UNIVERSAL MAMMALIAN INFLUENZA VACCINE
US - 23.11.2023
Clasificación Internacional A61K 39/145 Nº de solicitud 18296150 Solicitante Iowa State University Research Foundation, Inc. Inventor/a David Verhoeven
The present invention provides vaccine or immunogenic compositions comprising novel antigens derived from the equine strain of influenza H3N8. These proteins and specific immunogenic domains are effective as primary universal influenza antigens. The disclosed vaccines or immunogenic compositions are highly effective in inducing HA specific antibodies reactive to different influenza viruses, mucosal and systemic immune responses, and cross-protection regardless of influenza virus subtypes. In some embodiments, the vaccine is cross-protective against two or more (e.g., 2, 3, 4, 5, or 6) subtypes of influenza with or without the use of an adjuvant.

3.WO/2023/229239METHOD FOR PREDICTING AND ANALYZING SIDE EFFECTS OF VACCINE BY USING ARTIFICIAL INTELLIGENCE LEARNING MODEL BASED ON VACCINE SUBJECT VARIABLE INFORMATION, AND APPARATUS THEREFOR
WO - 30.11.2023
Clasificación Internacional G16H 20/10 Nº de solicitud PCT/KR2023/005635 Solicitante CHA UNIVERSITY INDUSTRY-ACADEMIC COOPERATION FOUNDATION Inventor/a JANG, Eun Chan
An operation method for a vaccine side effect prediction and analysis apparatus, according to an embodiment of the present invention, comprises the steps of: acquiring subject variable information about vaccine side effect prediction and analysis subjects; acquiring side effect variable information corresponding to the subject variable information; acquiring an estimated vaccine side effect classification model and probability information by inputting the subject variable information and the side effect variable information into a pre-constructed vaccine side effect variable learning-based artificial intelligence model; and outputting vaccine side effect prediction and analysis information on the basis of the estimated vaccine side effect classification model and the probability information.

4.WO/2023/225722LIPID NANOCARRIER VACCINE
WO - 30.11.2023
Clasificación Internacional A61K 9/107 Nº de solicitud PCT/AU2023/050449 Solicitante ROYAL MELBOURNE INSTITUTE OF TECHNOLOGY Inventor/a SARKAR, Sampa
The present disclosure relates to a lipid nanoparticle which is a carrier for an antigen. The present disclosure also relates to an immunogenic composition comprising the antigen. The immunogenic composition may be a vaccine composition. The present disclosure further relates to methods and uses of the carrier and immunogenic composition.

5.WO/2023/226261IDO1-RELATED VACCINE AND USE THEREOF
WO - 30.11.2023
Clasificación Internacional C07K 14/705 Nº de solicitud PCT/CN2022/120993 Solicitante SHENZHEN GINO BIOTECHNOLOGY CO., LTD. Inventor/a LI, Bo
Provided are an IDO1-related vaccine and the use thereof. The IDO1-related vaccine comprises an isolated polypeptide, an isolated nucleic acid, an antigen presenting cell, an immune cell and/or an antibody; the isolated polypeptide has an amino acid sequence as shown in any one of SEQ ID NOs: 2, 3, 5, 6, 8, 9, 11, 13-15, 18-20, 22-24, 26-28, 30, and 32-36 or is a functional analog thereof.

6.WO/2023/218322PROCESS FOR PRODUCING OF VACCINE FORMULATIONS WITH PRESERVATIVES
WO - 16.11.2023
Clasificación Internacional A61K 39/09 Nº de solicitud PCT/IB2023/054758 Solicitante PFIZER INC. Inventor/a BRUCHSALER, Michael David
The present invention relates to a process for the production of a conjugate vaccine comprising a preservative. The invention relates in particular to a process for the production of a conjugate vaccine where the preservative is hydrophobic and viscous (such as 2-phenoxyethanol (2-PE)).

7.WO/2023/220645VACCINE FOR HUMAN T-LYMPHOTROPIC VIRUS-1
WO - 16.11.2023
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/US2023/066839 Solicitante THE UNITED STATES OF AMERICA, AS REPRESENTED BY THE SECRETARY, DEPARTMENT OF HEALTH AND HUMAN SERVICES Inventor/a FRANCHINI, Genoveffa
Provided herein is a nucleic acid-based vaccine for human T-cell leukemia virus type 1 (HTLV-1). In some aspects, the vaccine includes a combination of nucleic acid molecules encoding HTLV-1 gag protein and one or both of Type A HTLV-1 Envelope (Env) and Type C HTLV-1 Env. In some aspects, the vaccine

includes a combination of nucleic acid molecules encoding HIV-1 gag protein and one or both of Type A HTLV-1 Envelope (Env) and Type C HTLV-1 Env. When administered to a subject, the Env and Gag proteins are expressed in the host and form HTLV-1 virus-like particles (VLPs) that are secreted from cells within the host and elicit an immune response that inhibits HTLV-1 infection.

8.11826418Virus-like particle (VLP)-based vaccine against CVB4
US - 28.11.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 18151409 Solicitante KING FAISAL UNIVERSITY Inventor/a Jawhar Gharbi
The virus-like particle (VLP)-based vaccine against CVB4 infection includes a virus-like particle (VLP) derived from VP1 of Coxsackievirus B4 (CVB4). The vaccine is devoid of virus RNA. The virus-like particles may be in nanoparticle form and coated with a polymer coating. The polymeric coating may be albumin, e.g., bovine serum albumin (BSA).

9.WO/2023/226295PD-L1-RELATED VACCINE AND USE THEREOF
WO - 30.11.2023
Clasificación Internacional C07K 14/705 Nº de solicitud PCT/CN2022/128039 Solicitante SHENZHEN GINO BIOTECHNOLOGY CO., LTD. Inventor/a LI, Bo
Provided are a PD-L1-related vaccine and the use thereof. The PD-L1-related vaccine comprises an isolated polypeptide, an isolated nucleic acid, an antigen-presenting cell, an immune cell and/or an antibody, wherein the isolated polypeptide has an amino acid sequence as shown in any one of SEQ ID NOs: 1, 3, 5, 7, 8, 9, 11, 13, 14, 17, 18, 19, 21, 24, 25, 27, 28 and 30-34, or a functional analog thereof, or an amino acid sequence having at least 60% homology thereto.

10.20230364221VIRAL VACCINE COMPOSITIONS FOR INOCULATING A SUBJECT AGAINST A CORONAVIRUS, AN INFLUENZA VIRUS, OR BOTH
US - 16.11.2023
Clasificación Internacional A61K 39/215 Nº de solicitud 18029812 Solicitante Atossa Therapeutics, Inc. Inventor/a Steven C. QUAY
Described herein are viral vaccine compositions for inoculating a subject against a coronavirus, an influenza virus, or both. The viral vaccine compositions may contain coronavirus antigens, influenza virus antigens, or both to elicit a sustained immune response in the subject. A viral vaccine may be formulated for nasal delivery. Also described herein are methods of administering viral vaccine compositions to a subject to prevent a coronavirus infection, influenza, or both. The viral vaccine compositions may be administered intranasally and may elicit an antigen-specific mucosal immune response in the subject.

11.20230364223CORONAVIRUS VACCINE
US - 16.11.2023
Clasificación Internacional A61K 39/215 Nº de solicitud 18179352 Solicitante CureVac SE Inventor/a Susanne RAUCH
The present invention is directed to a nucleic acid suitable for use in treatment or prophylaxis of an infection with a coronavirus, preferably with a Coronavirus SARS-CoV-2, or a disorder related to such an infection, preferably COVID-19. The present invention is also directed to compositions, polypeptides, and vaccines. The compositions and vaccines preferably comprise at least one of said nucleic acid sequences, preferably nucleic acid sequences in association a lipid nanoparticle (LNP). The invention is also directed to first and second medical uses of the nucleic acid, the composition, the polypeptide, the combination, the vaccine, and the kit, and to methods of treating or preventing a coronavirus infection, preferably a Coronavirus infection.

12.WO/2023/217206NOVEL CORONAVIRUS CHIMERIC NUCLEIC ACID VACCINE AND USE THEREOF
WO - 16.11.2023
Clasificación Internacional C07K 19/00 Nº de solicitud PCT/CN2023/093373 Solicitante INSTITUTE OF MICROBIOLOGY, CHINESE ACADEMY OF SCIENCES Inventor/a GAO, Fu
A polynucleotide, a related product thereof, a use thereof in the preparation of a novel coronavirus vaccine, and a chimeric nucleic acid vaccine or immunogenic composition based on the polynucleotide; the polynucleotide encodes a recombinant chimeric antigen directly series-connecting or connecting via a linker: a novel coronavirus prototype S protein RBD domain to a Beta variant S protein RBD domain, or a Delta variant S protein RBD domain to a Beta variant S protein RBD domain, or a Delta variant S protein RBD domain to an Omicron variant S protein RBD domain; the chimeric nucleic acid vaccine based on the polynucleotide can provide relatively strong immune protection efficacy for various novel coronavirus strains, and when sequential immunization is performed with other types of vaccines, can induce a significant increase to immune response level for various strains of the novel coronavirus (i.e., broad-spectrum).

13.20230364220SAR-COV-2 DNA Vaccine and Method of Administering Thereof
US - 16.11.2023
Clasificación Internacional A61K 39/215 Nº de solicitud 18029437 Solicitante The Government of the United States, as Represented by the Secretary of the Army Inventor/a Jay W. Hooper
The current disclosure provides a severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) spike-based DNA vaccine capable of eliciting immune response to a SARS-CoV-2 in a human subject upon administration. Also provided is a method of eliciting an immune response to a SARS-CoV-2 in a human subject by administering the SARS-CoV-2 spike-based DNA vaccine, for example, intramuscularly using a jet injector.

14.20230372462HIGH DOSE SHIGELLA VACCINE PREPARATION
US - 23.11.2023
Clasificación Internacional A61K 39/112 Nº de solicitud 18031218 Solicitante EVELIQURE BIOTECHNOLOGIES GMBH Inventor/a Eszter NAGY
A *Shigella* vaccine preparation comprising 10E8-10E12 CFU of a live, genetically attenuated *Shigella flexneri* strain that comprises a chromosomal deletion of setBA and which is non-invasive as determined by the Sereny test and an in vitro invasion assay using HeLa cells, wherein the strain comprises an endogenous invasion plasmid that is genetically engineered to incorporate a heterologous expression construct expressing a pathogen-specific antigen.

15.20230364217Influenza vaccine, composition, and methods of use
US - 16.11.2023
Clasificación Internacional A61K 39/02 Nº de solicitud 18303512 Solicitante Institut Pasteur de Lille Inventor/a Sylvie Claudette Alonso
The invention relates to compositions and vaccines that include a mutated *Bordetella* strain for treating or preventing an influenza infection in a mammal. In addition, the invention further provides methods for protecting a mammal against infection by influenza and/or eliciting an immune response against an influenza virus in a mammal using the composition or vaccine.

16.20230364213METHOD FOR LYOPHILIZING LIVE VACCINE STRAINS OF FRANCISELLA TULARENSIS
US - 16.11.2023
Clasificación Internacional A61K 39/02 Nº de solicitud 18350946 Solicitante NATIONAL RESEARCH COUNCIL OF CANADA Inventor/a Joseph Wayne CONLAN

There are provided compositions and methods for lyophilization and/or storage of live vaccine strains of *Francisella tularensis*. More specifically, there are provided lyophilization media and uses thereof for the preparation and long-term storage of *Francisella tularensis* vaccines.

17.WO/2023/224882METHODS FOR PREDICTING EFFICACY OF A MODIFIED LIVE PORCINE REPRODUCTIVE AND RESPIRATORY SYNDROME VIRUS (PRRSV) VACCINE
WO - 23.11.2023
Clasificación Internacional C07K 14/08 Nº de solicitud PCT/US2023/022074 Solicitante ELANCO US INC. Inventor/a HAMMER, Mark
Methods are provided for eliciting heterologous immunogenicity against heterologous porcine reproductive and respiratory syndrome virus (PRRSV) strains to allow assessment of innate immunity and adaptive immunity. In other aspects are provided methods for determining the efficacy of a vaccine against PRRSV. In still other aspects are provided methods for predicting the efficacy of a vaccine against PRRSV in pigs suspected of having an infection with PRRSV.

18.11819327Method and apparatus for providing a multi-dimensional audiogram
US - 21.11.2023
Clasificación Internacional A61B 5/12 Nº de solicitud 18147086 Solicitante Sound Vaccine, Inc. Inventor/a Sangyeop Kwak
A multi-dimensional audiogram providing apparatus includes a processor; and a memory connected to the processor, and the memory stores program instructions that, when executed, cause the processor to output a pure tone audiogram related to a hearing threshold for a subject measured in N frequency on a first surface of a polyhedron; to define a plurality of harmonic templates by rearranging the N frequency bands into a frequency set including a plurality of element frequencies; to calculate a standard deviation of hearing thresholds of a plurality of element frequencies to calculate a harmonic template instability degree; to output the calculated harmonic template instability degree on a second surface of the polyhedron; to calculate an average of the hearing thresholds of the plurality of element frequencies to calculate a harmonic template hearing; and to output the calculated harmonic template hearing on a third surface of the polyhedron.

19.WO/2023/219198CORONAVIRUS VACCINE USING REPLICATION-DEFECTIVE ADENOVIRUS THAT SIMULTANEOUSLY EXPRESSES CORONAVIRUS SPIKE PROTEIN, NUCLEOCAPSID PROTEIN, AND PGSA PROTEIN
WO - 16.11.2023
Clasificación Internacional C12N 7/00 Nº de solicitud PCT/KR2022/007208 Solicitante BL CORPORATION Inventor/a LEE, Do Young
The present invention relates to: a recombinant adenovirus in which coronavirus spike and nucleocapsid proteins and PgsA are expressed in the form inserted into the E1 region and the E3 region of a replication-defective adenovirus; and a coronavirus vaccine using same. A vaccine composition according to the present invention can induce immune responses to SARS-CoV-2 and a mutant virus thereof by inducing a humoral immune response and a cell-mediated response.

20.20230364211NUCLEOTIDE SEQUENCE EXPRESSING AN EXOSOME-ANCHORING PROTEIN FOR USE AS VACCINE
US - 16.11.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 18157534 Solicitante ISTITUTO SUPERIORE DI SANITÀ Inventor/a Maurizio Paolo Maria FEDERICO
The present invention concerns a nucleotide sequence expressing a fusion protein, said fusion protein comprising or consisting of an exosome-anchoring protein fused at its C-terminus with an antigen, or a DNA expression vector comprising said nucleotide sequence, for use as vaccine.

21.4277704MASERN-HIV- ODER MASERN-HTLV-IMPFSTOFF
EP - 22.11.2023
Clasificación Internacional A61P 31/12 Nº de solicitud 22700774 Solicitante VIROXIS Inventor/a HEIDMANN THIERRY
The invention relates to recombinant measles virus expressing Immunodeficiency virus (IV) or HTLV polypeptides, and concerns in particular immunogenic immunodeficiency virus particles expressed by a measles virus and/or virus like particles (VLPs) that contain proteins of at least one immunodeficiency virus or Human T-lymphotropic virus. These particles may be recombinant infectious particles able to replicate in a host after an administration. The invention provides means, in particular nucleic acid constructs, vectors, cells and rescue systems to produce these recombinant infectious particles. The invention also relates to the use of these recombinant infectious particles, in particular under the form of a composition, more particularly in a vaccine formulation, for the treatment or prevention of an infection by HIV or HTLV.

22.WO/2023/230479COMBINED VACCINE CONTAINING INFECTIOUS BRONCHITIS VIRUS ATTENUATED MASSACHUSETTS AND RECOMBINANT LASOTA VIRUS EXPRESSING ARKANSAS SPIKE
WO - 30.11.2023
Clasificación Internacional C07K 14/165 Nº de solicitud PCT/US2023/067361 Solicitante AUBURN UNIVERSITY Inventor/a TORO GUZMAN, Haroldo, E.
Disclosed are compositions comprising rLS/ArkSe.GMCSF and a live attenuated IBV vaccine, and methods of using the same for inducing an immune response against IBV or vaccinating against IBV.

23.20230365631Tuberculosis Compositions And Methods Of Treating Or Preventing Tuberculosis
US - 16.11.2023
Clasificación Internacional C07K 14/35 Nº de solicitud 18316631 Solicitante International AIDS Vaccine Initiative, Inc. Inventor/a Ravi P. Anantha
The present disclosure provides fusion proteins comprising *Mycobacterium tuberculosis* (Mtb) antigens, nucleic acid molecules encoding the same, vectors comprising nucleic acid molecules, compositions comprising the same, and methods of eliciting an immune response against tuberculosis.

24.WO/2023/227608NUCLEIC ACID BASED VACCINE ENCODING AN ESCHERICHIA COLI FIMH ANTIGENIC POLYPEPTIDE
WO - 30.11.2023
Clasificación Internacional A61K 39/108 Nº de solicitud PCT/EP2023/063799 Solicitante GLAXOSMITHKLINE BIOLOGICALS SA Inventor/a ADAMO, Roberto
The disclosure is directed to a coding RNA encoding an antigenic polypeptide which is selected or derived from Escherichia coli FimH. The present disclosure is also directed to compositions and vaccines comprising said coding RNA. Further, the disclosure concerns a kit, particularly a kit of parts comprising the coding RNA, or the composition, or the vaccine. The disclosure is also directed to methods of treating or preventing a disorder caused by E. coli.

25.4277608ZUSAMMENSETZUNG MIT MANIPULIERTEN EXTRAZELLULÄREN VESIKELN AUS PFLANZEN UND VERWENDUNG DAVON ALS IMPFSTOFF
EP - 22.11.2023
Clasificación Internacional A61K 9/51 Nº de solicitud 22701184 Solicitante EVOBIOTECH S R L Inventor/a CAMUSSI GIOVANNI
The present invention provides a composition comprising non-immunomodulating, engineered, plant-derived extracellular vesicles (EVs) for use as a vaccine, said vesicles being loaded with an exogenous nucleic acid molecule encoding a protein antigen. There is further provided a method for the preparation

of said composition, which makes use of one or more polycationic substances and one or more sugar molecules.

26.20230374080METHODS FOR CONTROL OF AN INFECTIVE DISEASE WITH A VACCINE
US - 23.11.2023
Clasificación Internacional C07K 14/165 Nº de solicitud 17948406 Solicitante RUSSELLVILLE CARDIOLOGY CONSULTANTS, P.A. Inventor/a Dai Yuan Wang
The COVID-19 pandemic has led to a worldwide health crisis and devastating economic and social issues. The present invention provides a method enhancing the effectiveness of the vaccines currently used for the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which comprises three incremental doses of a vaccine to elicit an enhanced immune response against in a subject. The first dose, second dose, and final dose are administered in the amount of 10-25%, 45-55%, and about 100% of the vaccine's full-strength dose, respectively.

27.WO/2023/220842A FUSION PROTEIN AS A SUBUNIT VACCINE IMMUNOGEN AGAINST SARS-COV-2 AND THE PREPARATION THEREOF
WO - 23.11.2023
Clasificación Internacional C07K 14/165 Nº de solicitud PCT/CN2022/000090 Solicitante SHENZHEN GENIUS BIOTECH SERVICE CO.,LTD. Inventor/a LIU, Xiaolin
Provided is a fusion protein as a subunit vaccine immunogen against SARS-CoV-2 comprising of receptor binding domain (RBD) fragment of SARS-CoV-2 spike protein and Tetanus toxoid fragment P2, they are fused by a linker sequence. Also provided is a method of obtaining the fusion protein.

28.20230374469BETA CORONAVIRUS COLD ACCLIMATIZED STRAIN AND VACCINE
US - 23.11.2023
Clasificación Internacional C12N 7/00 Nº de solicitud 18031599 Solicitante THE RESEARCH FOUNDATION FOR MICROBIAL DISEASES OF OSAKA UNIVERSITY Inventor/a Shinya OKAMURA
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;

29.WO/2023/218399METHOD OF PREPARING AND EXPANDING A POPULATION OF IMMUNE CELLS FOR CANCER THERAPY, POTENCY ASSAY FOR TUMOR RECOGNITION, BIOLOGICAL VACCINE PREPARATION AND EPITOPE TARGET FOR ANTIBODIES
WO - 16.11.2023
Clasificación Internacional C12N 5/0783 Nº de solicitud PCT/IB2023/054882 Solicitante FUNDAÇÃO D. ANNA DE SOMMER CHAMPALIMAUD E DR. CARLOS MONTEZ CHAMPALIMAUD - CENTRO DE INVESTIGAÇÃO DA FUNDAÇÃO CHAMPALIMAUD Inventor/a MENDONÇA GORGULHO, Carolina
The present invention relates to a method of preparing and expanding a population of immune cells, a potency assay for tumor recognition, a biological vaccine preparation to provide anti-tumor response or an antiviral response for cancer therapy and epitopes targets for antibodies which are useful for the construction of chimeric antigen receptors. The present invention is based on the fact that private or commonly shared tumor-associated antigens or private target antigens can be recognized by clinically

relevant immune cells. Such target antigens could be used to prepare a biological vaccine preparation to provide anti-tumor response or an antiviral response by expanding a certain set of T-cells or B-cells and boosting the immune response in cancer therapy. The present invention guides the selection of viable target antigens in designing an anti-tumor vaccine to remove potentially harmful autoimmune responses or pro- tumorigenic immune responses and aids to select the biologically and clinically most relevant set of immune cells specifically directed against cancer cells harvested from tumor infiltrating lymphocytes or from different anatomical sites for the active cellular therapy of patients with cancer.

30.WO/2023/224096CANCER VACCINE USING COMMON CANCER ANTIGEN COCKTAIL, TCR/CAR-T CELL THERAPEUTIC, COMPANION DIAGNOSTIC METHOD, AND METHOD FOR DIAGNOSING CANCER ONSET RISK BY BLOOD-CIRCULATING CANCER CELL DETECTION
WO - 23.11.2023
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/JP2023/018618 Solicitante NATIONAL CANCER CENTER Inventor/a NAKATSURA Tetsuya
The present invention addresses the problem of providing a cancer vaccine that uses a common cancer antigen cocktail, a TCR/CAR-T cell therapeutic, a companion diagnostic method, and a method for diagnosing cancer onset risk by blood-circulating cancer cell detection. The present invention provides a cancer vaccine that includes (1) common cancer antigens including 3 or more of GPC3, ROBO1, EPHB4, CLDN1, and LAT1, (2) partial peptides of the 3 or more common cancer antigens that have CTL inducibility, (3) dendritic cells stimulated by the partial peptides, or (4) mRNA that codes for the common cancer antigens or the partial peptides.

31.WO/2023/228116INTRANASAL ADMINISTRATION OF THERMOSTABLE RNA VACCINES
WO - 30.11.2023
Clasificación Internacional A61K 9/51 Nº de solicitud PCT/IB2023/055355 Solicitante ACCESS TO ADVANCED HEALTH INSTITUTE Inventor/a VOIGT, Emily
A novel thermostable nanostructured lipid carrier (NLC)-based RNA vaccine delivery system for intranasally delivery of self-amplifying RNA (saRNA) vaccines is disclosed herein. The disclosed delivery system is generally composed of saRNA complexed to NLC particles comprising (a) an oil core comprising a liquid phase lipid and 5 a solid phase lipid, (b) a cationic lipid, (c) a hydrophobic surfactant, and (d) an additional surfactant. The ratio of NLC-contained-amine-group to RNA-phosphate (N/P ratio) in the vaccine delivery system is optimized to minimize reactogenicity and optimize immunogenicity of the vaccine for intranasal delivery. The vaccine delivery system is suitable for intranasal delivery of vaccines for SARS-CoV-2, influenza, and other 10 respiratory viruses.

32.WO/2023/230241UNIVERSAL ADJUVANT FOR NASAL, ORAL, AND INTRAMUSCULAR DELIVERY OF VACCINES
WO - 30.11.2023
Clasificación Internacional A61K 39/39 Nº de solicitud PCT/US2023/023550 Solicitante DESIGN-ZYME LLC Inventor/a PETILLO, Peter
Self-adjuvanting vaccine compositions comprising at least one modified immunogen via in vitro glycosylation methods that provide a rational approach for generating glycosylated versions of immunogens via the reducing end of a linear carbohydrate, the reducing end containing an N-acyl-2-amino moiety. Self-adjuvanting vaccine compositions comprising a plurality of heterologous immunogens associated with a multivalent carrier, wherein at least one immunogen is glycosylated to allow for mucosal delivery. Self-adjuvanting vaccine compositions comprising multivalent carriers and related methods using the self-adjuvanting vaccine compositions in various therapeutic and prophylactic applications for inducing an immune response against, treating, or preventing a bacterial, viral, fungal, or protozoan infection. Pathogens for which this approach may be useful include, but are not limited to, influenza viruses,

rhinoviruses, human immunodeficiency viruses (HIV), respiratory syncytial virus (RSV), coronaviruses, Babesia, Borrelia, Neisseria, and Chlamydia, and the related diseases thereof.

33.WO/2023/227124SKELETON FOR CONSTRUCTING MRNA IN-VITRO TRANSCRIPTION TEMPLATE
WO - 30.11.2023
Clasificación Internacional C12N 15/64 Nº de solicitud PCT/CN2023/096643 Solicitante SHENZHEN SANYUANSHENG BIOTECH CO., LTD Inventor/a ZHANG, Dan
Provided is a skeleton for constructing an mRNA transcript. Specifically, provided is an application of a universal skeleton for constructing an mRNA transcript in mRNA preparation and/or optimization. The universal skeleton can effectively enhance the stability and translation activity of mRNA, so that the stability of an mRNA vaccine is ensured, and the expression of the mRNA vaccine is optimized.

34.WO/2023/226988METHOD FOR ENHANCING IMMUNOGENICITY OF SARS-COV-2 VARIANT AND USE THEREOF
WO - 30.11.2023
Clasificación Internacional C07K 14/165 Nº de solicitud PCT/CN2023/095829 Solicitante SUN YAT-SEN UNIVERSITY Inventor/a ZHANG, Hui
Disclosed herein are a method for enhancing the immunogenicity of an SARS-CoV-2 variant and use thereof. By means of point mutation on certain amino acid positions of the spike protein of the SARS-CoV-2 variant, the present invention enhances the immunogenicity of the SARS-CoV-2 variant, and overcomes the defect of low immunogenicity in existing SARS-CoV-2 mutants. On this basis, the present invention further provides an antigen with enhanced immunogenicity and an SARS-CoV-2 vaccine. Compared with a vaccine prepared from a virus without amino acid mutations as the immunogen, the vaccine can effectively improve the titer of specific antibodies after vaccination, neutralize the virus, and prevent the virus from invading the human body.

35.3223846ADJUVANSSAMMENSÆTNINGER OG TILHØRENDE FREMGANGSMÅDER
DK - 20.11.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 15862713 Solicitante Huvepharma, Inc. Inventor/a MILLER, Timothy J.
The present disclosure provides for an adjuvant composition that is suited for injectable as well as transdermal administration. The adjuvant composition generally comprises a lipophile, a polymer of acrylic or methacrylic acid, saline, cholesterol, a saponin, and sodium hydroxide. A vaccine composition is also provided for that generally includes the vaccine composition of the present disclosure and an antigen. A method for vaccinating animals and humans utilizing the adjuvant composition of the present disclosure is also provided.

36.20230372473VACCINE COMPOSITIONS
US - 23.11.2023
Clasificación Internacional A61K 39/245 Nº de solicitud 18030633 Solicitante VIROKINE THERAPEUTICS LIMITED Inventor/a Ursula Adele Gompels
A sterile pharmaceutical composition comprising one or more nucleic acid molecules comprising a plurality of immunogen coding regions which collectively encode a plurality of herpesvirus polypeptides, wherein the one or more nucleic acid molecules are capable of expressing the plurality of herpesvirus polypeptides when introduced into a vertebrate cell in an expression vector, wherein each of the plurality of immunogen coding regions has at least 90% sequence identity to a native coding region for a corresponding native full-length herpesvirus polypeptide from the same herpesvirus species, wherein the plurality of herpesvirus polypeptides are: (i) gD of herpes simplex virus 2 or herpes simplex virus 1; gE or gI of varicella zoster virus; gp350 or gp42 of Epstein Barr virus; gp42 of Epstein Ban virus, gO selected

from genotypes 1-8 of human cytomegalovirus; gO of human herpesvirus 6A; gO of human herpesvirus 6B; gO of human herpesvirus 7; or K8.1 (A/B) of Kaposi's sarcoma associated herpesvirus; and (ii) gB, gH and gl of the respective cognate human herpesvirus; and wherein the pharmaceutical composition is provided in a sealed sterile container for delivery.

37.WO/2023/225207METHOD AND SYSTEMS FOR PREDICTION OF HLA CLASS II-SPECIFIC EPITOPES AND CHARACTERIZATION OF CD4+ T CELLS
WO - 23.11.2023
Clasificación Internacional C07K 16/28 Nº de solicitud PCT/US2023/022751 Solicitante BIONTECH US INC. Inventor/a SROUJI, John
Methods for preparing a personalized cancer vaccine and a method to train a machine-learning HLA-peptide presentation prediction model.

38.20230372475STABILIZATION OF ANTIGENS FOR LONG TERM ADMINISTRATION IN TRANSDERMAL MICRONEEDLE PATCHES
US - 23.11.2023
Clasificación Internacional A61K 39/39 Nº de solicitud 18247962 Solicitante UNIVERSITY OF CONNECTICUT Inventor/a Vivek Agrahari
Described herein are compositions and methods for stabilizing RNA and protein antigens for long-term storage and use in transdermal microneedle patches, methods for filling microneedles, and methods of use. A stabilized RNA vaccine composition comprises: a complex of RNA with one or more cationic polymers; and one or more cationic lipid entities. A method for stabilizing RNA comprises: forming a complex comprising the RNA with one or more cationic polymers; mixing the complex with one or more cationic lipid entities comprising liposomes or lipid nanoparticles to form a lipid mixture; and drying the lipid mixture under vacuum. The compositions and methods may be employed in the preparation of vaccine medicaments.

39.20230372460METHODS OF TREATING CANCER AND MONITORING ANTI-CANCER IMMUNITY
US - 23.11.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 18081178 Solicitante LURONG ZHANG Inventor/a LURONG ZHANG
The invention relates to induced neoantigen vaccines and a method of using same to treat cancer by enhancing a patient's anti-cancer immunity. The method involves application of an induction radiation to the patient to generate an “in situ vaccine” in vivo, subsequent removal of the tumor, subjecting its cells to a survival pressure for further production of neoantigens in vitro, and processing of the cells to obtain a self-tumor vaccine. The invention provides comprehensive mobilization of individualized anti-cancer active immunity via sequential combination of means of cancer treatments (e.g., radiotherapy, surgery, chemotherapy). Another aspect of the invention relates to an immunoassay protocol to monitor parameters indicative of the cellular and humoral anti-cancer immunity of a patient.

40.20230372464CHOLERA VACCINE FORMULATION
US - 23.11.2023
Clasificación Internacional A61K 39/02 Nº de solicitud 18027657 Solicitante VALNEVA SWEDEN AB Inventor/a Valentina Screpanti-Sundquist
Described herein are dry compositions that can be stored at ambient temperature without major loss of potency.

41.4277650ADJUVANTIEN ZUR STIMULIERUNG DER BREITEN UND PERSISTENTEN ANGEBORENEN IMMUNITÄT GEGEN VERSCHIEDENE ANTIGENE
EP - 22.11.2023

Clasificación Internacional A61K 39/00 Nº de solicitud 22740232 Solicitante UNIV LELAND STANFORD JUNIOR Inventor/a PULENDRAN BALI
Methods are provided herein for modulating the epigenome of immune cells by administration of an immunostimulatory composition comprising adjuvants, e.g. vaccine adjuvants, to stimulate broad and persistent innate immunity against pathogens unrelated to antigens present in the composition.

42.WO/2023/230295RNA COMPOSITIONS FOR DELIVERY OF MONKEYPOX ANTIGENS AND RELATED METHODS
WO - 30.11.2023
Clasificación Internacional A61K 39/12 Nº de solicitud PCT/US2023/023632 Solicitante BIONTECH SE Inventor/a PORAN, Asaf
The present disclosure provides pharmaceutical compositions for delivery of monkeypox antigens (e.g., a monkeypox vaccine) and related technologies (e.g., components thereof and/or methods relating thereto). For example, the present disclosure provides polyribonucleotides encoding one or more monkeypox antigens or fragments thereof.

43.20230364215COMPOSITIONS COMPRISING INACTIVATED MICROBES, AND METHODS FOR USE AND PRODUCTION THEREOF
US - 16.11.2023
Clasificación Internacional A61K 39/04 Nº de solicitud 18029640 Solicitante Colorado State University Research Foundation Inventor/a Ramond P. Goodrich
Provided herein are methods for inactivating a microbe, the methods comprising contacting the microbe with UV light in the presence of riboflavin. In some embodiments, the microbe is a *Mycobacterium tuberculosis.* Vaccine compositions comprising inactivated microbes, and methods of use thereof, are also provided.

44.20230364261TARGETED ANTIGEN DELIVERY SYSTEM AND USES THEREOF
US - 16.11.2023
Clasificación Internacional A61K 47/69 Nº de solicitud 18246083 Solicitante SRI International Inventor/a Kathlynn C. Brown
Disclosed are antigen delivery systems comprising a nanoparticle, wherein the nanoparticle is surface-modified with a cancer-specific cell targeting peptide and comprises an immunogenic HLA class I restricted peptide, wherein the HLA class I restricted peptide is a vaccine-dependent, immunogenic HLA class I restricted peptide; methods of treating a subject having cancer comprising administering said delivery systems; methods of killing cancer cells comprising contacting cancer cells delivery systems, wherein upon entry of the liposome into the cancer cells, the cancer cells present said peptide from said delivery system, wherein the cancer cells generate an immune response said peptide, and wherein the immune response to said peptide targets and kills the cancer cells presenting the vaccine-dependent, peptide; methods of generating a non-cancer secondary immune response that targets cancer cells comprising administering said delivery systems to a subject having cancer cells.

45.WO/2023/225646USING FUNGAL CONSTRUCTS TO PRODUCE VIRAL PROTEIN ANTIGENS
WO - 23.11.2023
Clasificación Internacional A61P 31/12 Nº de solicitud PCT/US2023/067237 Solicitante PHIBRO ANIMAL HEALTH CORPORATION Inventor/a KOVALCHUK, Andriy
The present disclosure concerns using transgenic fungus to express recombinant viral antigens. The composition, production, and administration of vaccines comprising those viral antigens also are disclosed. In some embodiments, these viral antigens can be used to formulate a vaccine against Newcastle Disease. These vaccines can be administered, for example, via intramuscular injection.

46.20230372467USING FUNGAL CONSTRUCTS TO PRODUCE VIRAL PROTEIN ANTIGENS
US - 23.11.2023
Clasificación Internacional A61K 39/17 Nº de solicitud 18320558 Solicitante Phibro Animal Health Corporation Inventor/a Andriy Kovalchuk
The present disclosure concerns using transgenic fungus to express recombinant viral antigens. The composition, production, and administration of vaccines comprising those viral antigens also are disclosed. In some embodiments, these viral antigens can be used to formulate a vaccine against Newcastle Disease. These vaccines can be administered, for example, via intramuscular injection.

47.WO/2023/227563PROTECTIVE STAPHYLOCOCCAL EXOTOXIN VACCINE
WO - 30.11.2023
Clasificación Internacional A61K 39/085 Nº de solicitud PCT/EP2023/063709 Solicitante BIOMEDIZINISCHE FORSCHUNG & BIO-PRODUKTE AG Inventor/a EIBL, Martha M.
A detoxified Staphylococcal Exotoxin C (SEC) toxin that is genetically modified by detoxifying SEC mutations that comprise at least deletion of two amino acids in the region between amino acid positions (aa) 21 to 25 in the SEC toxin sequence SEQ ID NO:1, or at a corresponding region in any other wild-type SEC toxin sequence.

48.WO/2023/220614RECOMBINANT SUBUNIT BASED UNIVERSAL INFLUENZA AND RESPIRATORY VIRUS VACCINES
WO - 16.11.2023
Clasificación Internacional A61K 39/295 Nº de solicitud PCT/US2023/066804 Solicitante GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION, INC. Inventor/a KANG, Sang-Moo
In accordance with the purpose(s) of the present disclosure, as embodied and broadly described herein, the disclosure relates to universal influenza vaccines and methods of making the same. Also disclosed is method for vaccinating a subject for influenza A that involves administering a cross-protective influenza vaccine disclosed herein to a subject in need thereof by intranasal, intramuscular, subcutaneous, transdermal, or sublingual administration.

49.20230364226RNA CONSTRUCT
US - 16.11.2023
Clasificación Internacional A61K 39/39 Nº de solicitud 18257548 Solicitante Imperial College Innovations Limited Inventor/a Robin Shattock
The invention relates to RNA constructs, and particularly, although not exclusively, to mRNA constructs and saRNA replicons and to nucleic acids and expression vectors encoding such RNA constructs. The invention extends to the use of such RNA constructs in therapy, for example in treating diseases and/or in vaccine delivery. The invention extends to pharmaceutical compositions comprising such RNA constructs, and methods and uses thereof.

50.WO/2023/222870IONIZABLE LIPIDS
WO - 23.11.2023
Clasificación Internacional C07C 323/12 Nº de solicitud PCT/EP2023/063465 Solicitante ETHERNA IMMUNOTHERAPIES NV Inventor/a DE KOKER, Stefaan
The present invention generally relates to the field of ionizable (also termed cationic) lipids,and in particular provides a novel type of such lipids as represented by any of the formulae disclosed herein. The present invention further provides methods for making such lipids as well as uses thereof, in particular in the preparation of nanoparticle compositions, more in particular nanoparticle compositions comprising nucleic acids. It further provides vaccine formulations and pharmaceutical formulations comprising nanoparticle compositions based on the ionizable lipids disclosed herein.

51.WO/2023/230482ALU SINES OF THE MIR-498(46) CISTRON MEDIATE INTRINSIC INTERFERON AND ANTIVIRAL RESPONSE IN HUMAN PLACENTA
WO - 30.11.2023
Clasificación Internacional C12Q 1/70 Nº de solicitud PCT/US2023/067369 Solicitante UNIVERSITY OF SOUTH FLORIDA Inventor/a TOTARY-JAIN, Hana
Described herein relates to novel methods for determining susceptibility for infection and/or disease (e.g., pregnancy complication and/or cancer), and/or predicting severity of infection and/or disease by measuring circulating Alu RNA by RT-PCR (e.g., circulating blood, serum, and/or plasma). Additionally, described herein relates to novel methods of treating infection and/or disease (e.g., pregnancy complication and/or cancer), via increasing immune response, optimizing vaccine delivery, via administering at least one Alu RNA into the subject.

52.2023255035Development of dengue virus vaccine components
AU - 16.11.2023
Clasificación Internacional Nº de solicitud 2023255035 Solicitante The Government of the United States of America, as represented by the Secretary, Department of Health and Human Services Inventor/a BLANEY, Joseph E.

53.WO/2023/220557SET DOMAIN-CONTAINING 2 (SETD2) VACCINE
WO - 16.11.2023
Clasificación Internacional C12N 15/11 Nº de solicitud PCT/US2023/066716 Solicitante INSTITUTE FOR CANCER RESEARCH D/B/A THE RESEARCH INSTITUTE OF FOX CHASE CANCER CENTER Inventor/a ABBOSH, Philip
Pharmaceutical compositions comprising one or more peptides derived from aberrantly translated retained introns (ATaRIs), methods for treating cancer with the same, and methods of immunizing a subject against cancer or eliciting an immune response to one or more peptides derived from ATaRIs are provided herein.

54.20230372469T-CELL VACCINE FOR SARS VIRUS
US - 23.11.2023
Clasificación Internacional A61K 39/215 Nº de solicitud 18031163 Solicitante THE JOHNS HOPKINS UNIVERSITY Inventor/a Maxim Rosario
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.

55.WO/2023/227758VACCINE WITH REDUCED ANTI-VECTOR ANTIGENICITY
WO - 30.11.2023
Clasificación Internacional A61K 39/12 Nº de solicitud PCT/EP2023/064144 Solicitante MAX-PLANCK-GESELLSCHAFT ZUR FÖRDERUNG DER WISSENSCHAFTEN E.V. Inventor/a FÄSSLER, Reinhard
The present invention relates to a recombinant replication-deficient or replication competent negative-strand RNA virus, (i) capable of displaying a heterologous antigen on the surface, and thus capable of inducing mucosal immunity in host, (ii) after entering a host cell, producing a heterologous antigen, thereby improving immune response of the host to the antigen, and (iii) having a reduced anti-vector antigenicity in comparison to the wildtype vector, thus reducing an immune response of the host to the vector.

56.20230364209IMMUNOGENIC SCHISTOSOMA COMPOSITIONS
US - 16.11.2023

Clasificación Internacional A61K 39/00 Nº de solicitud 18248130 Solicitante THE ROYAL INSTITUTION FOR THE ADVANCEMENT OF LEARNING/MCGILL UNIVERSITY Inventor/a Momar NDAO
The present disclosure provides an immunogenic composition comprising an emulsion of an epitope or a nucleic acid molecule. The emulsion comprises an oil phase and a water phase. The emulsion is an oil-in-water emulsion and/or a nanoemulsion. The epitope is present on a peptide or a polypeptide derived from *Schistosoma* sp. and can optionally be glycosylated. The immunogenic composition (which can be provided as a pharmaceutical composition or as a vaccine) can be used to prevent, treat or alleviation the symptoms of a *Schistosoma* sp. infection.

57.20230366877EBIV NUCLEIC ACID COMPOSITION AND APPLICATION THEREOF
US - 16.11.2023
Clasificación Internacional G01N 33/50 Nº de solicitud 18312072 Solicitante Wuhan Institute of Virology, Chinese Academy of Sciences Inventor/a Han XIA
The present application discloses a nucleic acid composition for expressing recombinant EBIV-related genes and proteins and the use thereof. The nucleic acid composition includes a nucleic acid molecule having sequences shown in SEQ ID NO. 14, 15, 16, and 17. In the present application, a recombinant EBIV is also constructed with this nucleic acid composition. The virus not only has broad-spectrum infectivity to mammalian and mosquito cells, can be stably passaged, but also has green fluorescence, which can provide a research foundation for in vitro and in vivo virus tracing, virus detection, antiviral drugs, vaccine screening, with significant application prospects.

58.WO/2023/222757VACCINE FOR PREVENTING OR TREATING CRONAVIRUS INFECTION
WO - 23.11.2023
Clasificación Internacional A61K 39/215 Nº de solicitud PCT/EP2023/063244 Solicitante PHION THERAPEUTICS LTD Inventor/a MCCARTHY, Helen
The present specification relates to vaccines comprising an mRNA polynucleotide encoding a coronavirus antigen; and an amphipathic cell penetrating RALA peptide.

59.WO/2023/225562MULTIVALENT VACCINE FOR PARAMYXOVIRUSES AND USES THEREOF
WO - 23.11.2023
Clasificación Internacional A61K 39/12 Nº de solicitud PCT/US2023/067127 Solicitante ICOSAVAX, INC. Inventor/a FELDHAUS, Andrew, L.
Provided are compositions pharmaceutical compositions, comprising two or more virus-like particles (VLPs), wherein a first virus-like particle (VLP) comprises a first component comprising a respiratory syntactical virus (RSV) F protein ectodomain or antigenic variant thereof; and a second virus-like particle (VLP) comprises a first component comprising a comprises a human metapneumovirus (hMPV) F protein ectodomain or antigenic variant thereof. Further provided are methods of using said compositions for vaccination.

60.20230365651PEPTIDES AND COMBINATION OF PEPTIDES FOR USE IN IMMUNOTHERAPY AGAINST OVARIAN CANCER AND OTHER CANCERS
US - 16.11.2023
Clasificación Internacional C07K 14/74 Nº de solicitud 18297064 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.

61.20230365622PROTEIN RECEPTACLE, POLYNUCLEOTIDE, VECTOR, EXPRESSION CASSETTE, CELL, METHOD FOR PRODUCING THE RECEPTACLE, METHOD OF IDENTIFYING PATHOGENS OR DIAGNOSING DISEASES, USE OF THE RECEPTACLE AND DIAGNOSTIC KIT
US - 16.11.2023
Clasificación Internacional C07K 1/04 Nº de solicitud 17638108 Solicitante FUNDÃÇAO OSWALDO CRUZ Inventor/a David William PROVANCE, Jr.
The present invention relates to a protein receptacle capable of receiving several exogenous polyamino acid sequences, concomitantly, for expression in various systems and for different uses. The present invention relates to polynucleotides capable of generating the aforementioned protein receptacle. The present invention also relates to vector and expression cassette comprising the aforementioned polynucleotide. The present invention further relates to the cell comprising the aforementioned expression vector or cassette. The present invention further relates to a method for producing said protein receptacle and for pathogen identification or disease diagnosis in vitro. The present invention further relates to the use of said protein receptacle and kit comprising said protein receptacle for diagnostic purposes or as vaccine compositions.

62.20230371883SYSTEM AND METHOD FOR ALLERGEN-SPECIFIC EPICUTANEOUS IMMUNOTHERAPY
US - 23.11.2023
Clasificación Internacional A61B 5/00 Nº de solicitud 18123830 Solicitante TEPIT, LLC Inventor/a Chamkurkishtiah Panduranga Rao
A method of immunological evaluation includes cleaning a patient skin surface area. A controlled amount of heat is then applied to the skin surface area. The controlled amount of heat is removed after the skin surface area reaches a predetermined temperature. An amount of antigen is deposited onto the skin surface area and incubated for a predetermined amount of time on the skin surface area. The antigen is removed from the skin surface area and an immunological response at the skin surface area is evaluated, such as but not limited to disease detection or antibody response. According to at least one other version, the method can further be utilized for purposes of vaccine immunization. Apparatuses for administering heat and memorializing the immunological evaluation are also disclosed.

63.WO/2023/217005TANDEM-TYPE HYBRID TRIMERIC SARS-COV-2 VACCINE
WO - 16.11.2023
Clasificación Internacional C07K 14/165 Nº de solicitud PCT/CN2023/092402 Solicitante INSTITUTE OF MICROBIOLOGY, CHINESE ACADEMY OF SCIENCES Inventor/a GAO, George F
Disclosed in the present invention are a recombinant chimeric antigen of the prototype strain and Delta and Omicron variant strains of SARS-CoV-2, a preparation method therefor, and the use thereof. The recombinant chimeric antigen is formed by directly tandemly linking, or tandemly linking by an appropriate linking sequence, the amino acid sequences or derived sequences thereof from the RBDs of the prototype strain of and the Delta and Omicron variant strains of SARS-CoV-2. Compared with an RBD homotrimer of the SARS-CoV-2 prototype strain, the recombinant chimeric antigen has higher immunogenicity and can efficiently activate a broadly protective antibody.

64.20230364210ß-AMYLOID VACCINE FOR THE TREATMENT OF ALZHEIMER'S DISEASE
US - 16.11.2023
Clasificación Internacional A61K 39/00 Nº de solicitud 18245523 Solicitante OTHAIR PROTHENA LIMITED Inventor/a Robin Barbour

The disclosure provides peptide compositions and immunotherapy compositions comprising an amyloid-beta (Aβ) peptide. The disclosure also provides methods of treating or effecting prophylaxis of Alzheimer's disease or other diseases with beta-amyloid deposition in a subject, including methods of clearing deposits, inhibiting or reducing aggregation of Aβ, blocking the uptake by neurons, and clearing amyloid in a subject having or at risk of developing Alzheimer's disease or other diseases containing amyloid-beta accumulations. The methods include administering to such patients the compositions comprising an. amyloid-beta (Aβ) peptide.

65.WO/2023/225637REPLICATING RNA VACCINE FOR CRIMEAN-CONGO HEMORRHAGIC FEVER VIRUS
WO - 23.11.2023
Clasificación Internacional A61K 39/12 Nº de solicitud PCT/US2023/067226 Solicitante THE UNITED STATES OF AMERICA, as represented by the Secretary, DEPARTMENT OF HEALTH AND HUMAN SERVICES Inventor/a HAWMAN, David
Described herein are constructs, compositions, and methods for eliciting an immune response against CCHFV. In particular, the disclosure relates to self-replicating RNAs expressing encoding at least one heterologous polypeptide comprising an epitope that elicits an immune response against CCHFV. The disclosure also relates to compositions and nanoparticles comprising the disclosed self-replicating RNAs, and the use of such nanoparticles and compositions to elicit an immune response against CCHFV in an individual, thereby protecting the individual from infection with CCHFV.

66.4279088EXOSOME MIT CORONAVIRUS-ABGELEITETEM ANTIGENPROTEIN ODER GEN ZUR CODIERUNG DES PROTEINS UND VERWENDUNG DAVON
EP - 22.11.2023
Clasificación Internacional A61K 39/385 Nº de solicitud 22739768 Solicitante EXOLLENCE CO LTD Inventor/a KWON KI HWAN
The present invention relates to an extracellular vesicle including a coronavirus-derived antigen protein or a gene encoding the protein, and a use of the extracellular vesicle. According to the present invention, when mice are immunized by administering an activated immune cell-derived extracellular vesicle loaded with an antigen protein or mRNA, excellent antigen-specific neutralizing antibody production and T cell response induction effects are confirmed. When the extracellular vesicle is stored under room-temperature and refrigerated conditions after freeze-drying, high stability and an excellent antibody production effect are experimentally confirmed. From these results, the extracellular vesicle according to the present invention or a vaccine composition including the same may serve as a platform applicable to various diseases with an excellent antigen-specific immune response induction effect and excellent stability, and thus is expected to be effectively used for the development of vaccines for preventing or treating various diseases including infectious diseases, particularly coronavirus infections.

67.20230365942ENGINEERED AAV VECTORS
US - 16.11.2023
Clasificación Internacional C12N 7/00 Nº de solicitud 18044628 Solicitante LUDWIG-MAXIMILIANS-UNIVERSITÄT MÜNCHEN Inventor/a Stylianos MICHALAKIS The present invention relates to an adeno-associated vims (AAV) or an adeno-associated virus-like particle (AAVLP), comprising an insert of about 75-400 amino acids in the viral proteins (VPs) VP1, VP2 and/or VP3 at an insertion site (I) at the top of variable region VIII and/or variable region IV (VR-VIII and/or VR-IV) of the VP, wherein the insert is an immunogenic protein or a portion thereof and/or wherein the insert is a protein comprising a binding domain, such as an antigen-binding domain specific for a target antigen. The present invention also relates to pharmaceutical compositions comprising said AAV or AAVLP and to the pharmaceutical composition or the AAV or AAVLP for use in therapy, particularly for use as a vaccine, for use in the

treatment or the prevention of a diseases and/or for use in gene therapy. Also concerned is a method for producing the AAV of AAVLP of the present invention.

68.WO/2023/230008METHODS AND COMPOSITIONS FOR A UNIVERSAL AND LONG-LASTING VACCINE
WO - 30.11.2023
Clasificación Internacional A61K 47/64 Nº de solicitud PCT/US2023/023127 Solicitante ZHANG, Gongyi Inventor/a ZHANG, Gongyi
Applicants disclose vaccines effective for broad protection against various viruses as well as methods of making and using those vaccines. The disclosed vaccines induce production of broadly neutralizing antibodies. The presently disclosed vaccines are able to inhibit various influenza and coronavirus viruses. Applicant's methods and compositions are not only useful in creating vaccines with broad activity against a specific virus and existing subtypes but are efficient in generating long-lasting immunity to emergent variants. This can be accomplished using recombinant protein antigens or inactivated virus.

69.WO/2023/217189ADENOVIRAL VECTOR VACCINE AGAINST RESPIRATORY SYNCYTIAL VIRUS, AND PREPARATION METHOD THEREFOR AND USE THEREOF
WO - 16.11.2023
Clasificación Internacional A61K 39/155 Nº de solicitud PCT/CN2023/093287 Solicitante CANSINO BIOLOGICS INC. Inventor/a YANG, Zening
Provided in the present invention are a composition that fights respiratory syncytial virus (RSV) infection, a preparation method therefor, and a use thereof. The composition comprises a recombinant adenoviral vector, a gene encoding an RSV antigen is inserted into the recombinant adenoviral vector, and the composition is a mucosal administration preparation.

70.WO/2023/228225METHOD FOR IN VITRO EVALUATION OF THE IMMUNE RESPONSE AFTER VACCINATION WITH A MRNA VACCINE
WO - 30.11.2023
Clasificación Internacional G01N 33/50 Nº de solicitud PCT/IT2023/050132 Solicitante FONDAZIONE DEL PIEMONTE PER L'ONCOLOGIA Inventor/a PACE, Luigia
The present invention concerns a method for in vitro evaluation of the immune response after a mRNA vaccination in a subject by detecting specific biomarkers.

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