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VacCiencia es una publicación dirigida a investigadores y especialistas dedicados a la vacunología y temas afines, con el ojetivo de serle útil.

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La OMS insta a mantener la vacunación contra COVID-19 como medida clave de salud pública

26 dic. La Organización Mundial de la Salud (OMS) ha instado a los Estados miembros a continuar ofreciendo la vacunación contra la COVID-19 como una herramienta esencial de salud pública. Esta recomendación forma parte de las conclusiones alcanzadas durante la reciente reunión del Grupo Asesor Técnico sobre la Composición de la Vacuna COVID-19 (TAG-CO-VAC), celebrada entre el 10 y el 12 de diciembre de 2024.

El principal objetivo de este encuentro fue analizar la evolución genética y antigénica del SARS-CoV-2, las respuestas inmunitarias generadas tanto por infecciones previas como por las vacunas, y el rendimiento de las fórmulas actualmente aprobadas frente a las variantes predominantes. La OMS destacó que, en 2024, el SARS-CoV-2 sigue teniendo un impacto significativo a nivel global, siendo responsable de enfermedades graves, afecciones posteriores a la COVID-19 y fallecimientos.

Vacunación prioritaria en grupos vulnerables

La OMS subraya que la mayoría de las muertes relacionadas con la COVID-19 continúan ocurriendo entre personas mayores de 65 años o con afecciones coexistentes. “El SARS-CoV-2 sigue circulando por todo el mundo, causando enfermedad grave y muerte, especialmente en los grupos más vulnerables”, recalca el organismo.

Sin embargo, uno de los puntos que genera preocupación es la falta de datos actualizados sobre casos, hospitalizaciones y defunciones en varios países, lo que dificulta evaluar con precisión las tendencias epidemiológicas actuales. La OMS alerta sobre este problema, destacando que las brechas en la notificación de datos están creciendo.

La OMS alerta sobre la falta de datos actualizados sobre casos, hospitalizaciones y defunciones

Las variantes del SARS-CoV-2 que actualmente están en circulación derivan del linaje JN.1. Entre ellas, XEC muestra una proporción semanal en aumento, mientras que otras variantes de interés, como KP.2, KP.3 o LB.1, están disminuyendo en prevalencia. Aunque estas variantes tienen una presencia limitada, el TAG-CO-VAC ha identificado mutaciones en algunas que podrían conferirles ventaja competitiva en el futuro.

En este contexto, el TAG-CO-VAC ha recomendado mantener una composición monovalente basada en el linaje JN.1 para futuras formulaciones de las vacunas contra el Covid-19. El objetivo de esta estrategia es optimizar las respuestas inmunitarias ante las variantes predominantes, garantizando una protección adecuada.

La OMS señala la importancia de no retrasar la vacunación

La OMS enfatiza que los programas de inmunización no deben detenerse mientras se desarrollan nuevas formulaciones. “La vacunación debe continuar utilizando las fórmulas actuales incluidas en la lista de uso de emergencia o preclasificadas por la OMS”, señalan los expertos.

Esta postura refuerza la importancia de la vacunación como una medida preventiva frente a la COVID-19,

especialmente en un momento en el que el virus sigue siendo una amenaza para la salud pública global. La OMS recuerda que los Estados miembros deben basarse en las recomendaciones de su Grupo Estratégico Consultivo de Expertos en Inmunización (SAGE) para garantizar la accesibilidad de las vacunas a sus poblaciones.

Con estas indicaciones, la OMS busca consolidar una respuesta global que minimice el impacto del virus y proteja a las poblaciones más vulnerables. La vacunación, en este contexto, sigue siendo una herramienta clave para frenar las complicaciones graves y salvar vidas, incluso en un escenario en el que las variantes del virus continúan evolucionando.

Fuente: iSanidad. Disponible en https://lc.cx/5KCMmX

La OMS publica los datos de COVID-19 cinco años después del primer caso: más de siete millones de muertes en 234 países

28 dic. La Organización Mundial de la Salud (OMS) ha comunicado que, desde el inicio de la pandemia hasta el 10 de noviembre de 2024, se han notificado más de 776 millones de casos confirmados de COVID-19 y más de siete millones de muertes en 234 países diferentes.

Así ha informado la OMS en una edición especial de la actualización epidemiológica sobre COVID-19 que ofrece una visión general de la situación desde que la enfermedad se notificó por primera vez hace casi cinco años.

En el último periodo de notificación de cuatro semanas, del 14 de octubre al 10 de noviembre de 2024, 77 países notificaron casos de COVID-19 y 27 muertes en todo el mundo. El número de casos notificados disminuyó en un 39% y el de muertes en un 36 % en comparación con los 28 días anteriores. Aunque la OMS advierte de que estos datos deben interpretarse con cautela debido a la disminución de las pruebas y la secuenciación, junto con los retrasos en la notificación en muchos países.

En este sentido, la mayoría de las muertes asociadas a COVID-19 se produjeron en 2020, 2021 y 2022, con un aumento de la inmunidad que condujo a una disminución significativa de las muertes. Además, según destaca la OMS, el SARS-CoV-2, el virus que causa la COVID-19, “circula en gran medida sin una estacionalidad clara y sigue infectando, causando enfermedad aguda grave y afección posterior a la COVID-19”.

Del mismo modo, el impacto varía según el país, y la capacidad de la OMS para controlar la circulación, la gravedad y la evolución del virus, algo que lo dificulta “la reducción de la vigilancia, las pruebas, la secuenciación y la limitada integración en los programas de prevención a largo plazo”. En este punto, la OMS lamenta que los Estados miembros no han adoptado las medidas necesarias de enfermedades infecciosas a más largo plazo, y la presentación de informes.

Menos ingresos hospitalarios

En general, los ingresos en UCI por cada 1.000 hospitalizaciones han ido disminuyendo desde el pico de julio de 2021, cuando la tasa fue de 245 por cada 1.000 hospitalizaciones, cayendo por debajo de 132 por cada 1.000 hospitalizaciones a principios de 2022, y a menos de 69 por cada 1.000 hospitalizaciones a finales de

2023. A principios de 2024, se produjo un aumento de los ingresos en UCI por cada 1.000 hospitalizaciones, superando los 191 por 1.000 hospitalizaciones en marzo, y descendiendo a 108 por 1.000 hospitalizaciones a principios de noviembre de 2024.

Mientras tanto, las muertes por 1.000 hospitalizaciones mostraron un descenso constante desde junio de 2021, cuando alcanzaron 253 por 1.000 hospitalizaciones, hasta un nivel bajo de 59 por 1.000 hospitalizaciones en agosto de 2023. Desde enero de 2024, la tasa ha seguido disminuyendo hasta alcanzar 41 muertes por 1.000 hospitalizaciones a principios de noviembre de 2024.

La afección posterior a la COVID-19, denominada por algunos Covid persistente, sigue suponiendo para la OMS "una carga importante para los sistemas sanitarios, ya que se calcula que el 6 % de las infecciones sintomáticas por SARS-CoV-2 dan lugar a síntomas de este tipo".

Aunque la COVID-19 grave es un factor de riesgo importante de Covid persistente, más del 90 % de los casos de Covid persistente surgen tras una COVID-19 leve debido al gran volumen de infecciones. "La vacunación parece ofrecer un efecto protector, reduciendo la probabilidad de desarrollar Covid persistente", apuntan desde la OMS.

Vacunación

En cuanto al despliegue de la vacuna COVID-19, ha evolucionado desde 2021, y en un principio la OMS resalta que las tasas de vacunación eran más elevadas en los países de ingresos altos. A partir de enero de 2024, la OMS pasó de medir la cobertura continua de la vacunación con COVID-19 desde el inicio del despliegue de la vacuna a medir la aceptación anual.

A finales de 2023, el 67 por ciento de la población mundial había completado la serie primaria y el 32 por ciento había recibido al menos una dosis de refuerzo, aunque solo el 5 por ciento de los habitantes de países de ingresos bajos recibieron una dosis de refuerzo.

Utilizando el nuevo enfoque de seguimiento, a finales del tercer trimestre de 2024, 39,2 millones de personas de 90 Estados miembros (que representan el 31 por ciento de la población mundial) recibieron una dosis este año, y 14,8 millones solo en el tercer trimestre.

Fuente: Noticias y Protagonistas. Disponible en https://lc.cx/0PDAdC

Minsa autoriza transferencia para adquisición de vacunas contra el VPH

28 dic. El Ministerio de Salud (Minsa) peruano autorizó una transferencia financiera a favor de la Organización Panamericana de la Salud (OPS/OMS), para la adquisición de dosis de vacunas contra el Virus de Papiloma Humano (VPH) tetravalente, hasta por 1 millón 786 mil 635 soles.

Así lo señala una resolución ministerial publicada este sábado en la Edición Extraordinaria del boletín Normas Legales del Diario Oficial El Peruano.

El dispositivo indica que la mencionada adquisición es necesaria para las intervenciones estratégicas sanitarias definidas por el Minsa. Se precisa también que los recursos de la transferencia financiera no podrán ser destinados, bajo responsabilidad, a fines distintos para los cuales son transferidos.

En la parte considerativa se señala que el Convenio de Cooperación Técnica, para la adquisición de vacunas, jeringas y otros insumos relacionados, suscrito entre la cartera y la OPS/OMS, se mantiene vigente hasta el 31 de diciembre de 2024.

Asimismo, se indica que la transferencia para la adquisición de la vacuna de dosis única contra el VPH se realizó a solicitud del Centro Nacional de Abastecimiento de Recursos Estratégicos en Salud (Cenares), por ser necesaria para las intervenciones estratégicas del Minsa. La norma lleva la firma del titular del sector Salud, César Vásquez.

Fuente: Andina Agencia Peruana de Noticias. Disponible en https://lc.cx/DW3R1i

FDA pushes RSV vaccines for kids despite halted Moderna trials

Dec 29. Advisers to the FDA recently met to discuss the future of respiratory syncytial virus (RSV) vaccines for children. This followed Moderna's forced halt of its mRNA RSV vaccine trials after alarming data showed higher rates of severe RSV in vaccinated infants compared to those given a placebo. Clinical trial data revealed 12.5% of vaccinated children developed severe RSV disease, compared to just 5% in the placebo group.

These outcomes raised alarms due to past experiences with RSV vaccines. In the 1960s, trials of a formalin-inactivated RSV vaccine led to vaccine-associated enhanced respiratory disease (VAERD), where vaccination worsened illness instead of preventing it. That trial resulted in two toddler deaths and hospitalization for 80% of the vaccinated participants. Despite decades of research, the risks tied to VAERD remain unresolved.

FDA advisers emphasized the "unmet need" for pediatric RSV vaccines, framing RSV as a leading cause of infant hospitalizations in the US annually. Vaccine makers, spurred by a projected $13.59 billion global RSV vaccine market by 2030, are developing 26 RSV vaccines or monoclonal antibodies for all age groups.

An FDA representative said the Centers for Disease Control and Prevention (CDC) estimates that RSV causes 100-200 infant deaths annually. However, internist Dr. Meryl Nass argued these numbers are overstated. Citing a CDC study analyzing RSV deaths in infants from 2005 to 2016, Nass highlighted that there were 314 deaths in children under age 1 during that period, averaging 25 per year. Only 17 of those deaths listed RSV as the direct cause, raising questions about the urgency for widespread vaccination.

The FDA explored the potential for sequential administration of RSV monoclonal antibodies and vaccines for infants and toddlers. This approach would begin with monoclonal antibodies or maternal vaccination to provide "passive immunity" — ready-made antibodies to fight RSV. Later, a two- or three-shot course of RSV vaccines would aim to develop "active immunity," enabling the child's own immune system to combat the virus in subsequent seasons.

While committee members saw potential in sequential administration, they acknowledged insufficient safety data, fueling concerns that industry profits are being prioritized over child safety.

Fuente: Sharyl Attkisson. Disponible en https://lc.cx/SOWAKB

Navarra incorpora al calendario la vacuna frente al rotavirus para los bebés que nazcan a partir del 1 de enero de 2025

30 dic. El Departamento de Salud del Gobierno de Navarra actualiza su estrategia de vacunación y, como principal novedad, incorpora al calendario de vacunaciones a lo largo de toda la vida de 2025 la inmunización frente al rotavirus para los bebés que nazcan a partir del próximo 1 de enero. Esta medida de protección se podrá ofrecer a unos 4.800 nacimientos, según las estimaciones de la sección de Enfermedades Transmisibles y Vacunaciones del Instituto de Salud Pública y Laboral de Navarra (ISPLN).

El rotavirus es un virus que causa gastroenteritis aguda. Esta infección, más frecuente en los meses de invierno y principalmente en el ámbito pediátrico, se caracteriza por diarrea, náuseas y/o vómitos y, en ocasiones, fiebre alta. Además, una de las complicaciones que puede generar es la deshidratación grave, más habitual en los 2 primeros años de vida.

Desde 2019, la vacuna frente al rotavirus está incluida en la estrategia destinada a prematuros de entre 25 y 32 semanas de gestación. Dada su seguridad, su elevada efectividad para prevenir tanto la infección como las hospitalizaciones por esta causa y que muchas familias desde hace más de 15 años la estaban pagando de forma privada –situándose las coberturas en torno al 70%-, este año la Comisión de Salud Pública del Ministerio de Sanidad acordó su inclusión en el calendario de vacunaciones.

Así, tras la aprobación de la Comisión asesora técnica de vacunas de Navarra, el calendario de vacunaciones incluirá la inmunización frente al rotavirus para todas las personas que nazcan a partir del 1 de enero. La administración de esta vacuna (por vía oral) se realizará a los 2 y 4 meses de edad aprovechando las revisiones pediátricas que se realizan en Atención Primaria. Esta medida supondrá una inversión anual de unos 143.000 euros.

La pauta frente al VPH pasa de dos dosis a una

Asimismo, a partir del curso escolar 2024-2025 –desde el pasado mes de septiembre- la pauta frente al virus del papiloma humano (VPH) pasa de dos dosis a una. La Organización Mundial de la Salud (OMS) avaló esta decisión, según explica el ISPLN, tras constatar la evidencia científica acumulada en los últimos años que una sola dosis proporciona una protección frente a este virus similar a la pauta con dos.

Al respecto, cabe recordar que esta vacuna se ofrece actualmente a los niños y niñas de 12 años y a las mujeres no vacunadas hasta los 26 años.

Además, a lo largo este curso académico y del siguiente se ofrecerá también a los chicos menores de 18 años que no se hayan vacunado. Así, en el presente curso (2024-2025) se está invitando a los nacidos en los años 2007, 2008 y 2009 y en el curso 2025-2026, a los nacidos en 2010 y 2011.

Actualizaciones en otras vacunas

El tercer cambio que se contempla en esta estrategia es que se administrará la vacuna neumocócica conjugada 20-valente (VNC-20) a las personas de 65 años no vacunadas previamente frente a esta

enfermedad, en lugar de la vacuna polisacárida 23 valente que se utilizaba hasta ahora.

Finalmente, frente al herpes zóster se recomienda la administración de la vacuna a las personas de 65 y 75 años residentes en Navarra. De este modo, en 2025 se incorporarán las nacidas en 1950 y en 1960, respectivamente, de manera que la protección podría extenderse a entre 6.000 y 10.000 personas, en función de la cobertura que se alcance, estima el ISPLN.

Todos estos cambios se realizan con el máximo rigor científico, de acuerdo a las recomendaciones de vacunación propuestas por la Comisión de Salud Pública del Ministerio de Sanidad, y tras ser aprobados por la Comisión Asesora Técnica de Vacunaciones de Navarra.

Fuente: navarra.es. Disponible en https://lc.cx/nDqeZl

COVID-19: se cumplen cinco años de la pandemia que paralizó al planeta

30 dic. Era la última noche del 2019 y en Wuhan, una ciudad de más de 10 millones de habitantes en China, las celebraciones por el Año Nuevo daban la bienvenida a lo que parecía ser un año alentador.

Sin embargo, lejos de los festejos, un reporte de la Comisión Municipal de Salud comenzaba a levantar alarmas: 27 casos de "neumonía de origen desconocido" habían sido detectados. Los pacientes compartían algo en común: habían visitado el mercado de alimentos de Huanan.

Lo que en ese momento parecía un problema local pronto se convertiría en una amenaza global. Los días siguientes, la Organización Mundial de la Salud (OMS) monitoreó de cerca la situación, emitiendo su primer comunicado el 5 de enero de 2020.

"Desde los primeros días de incertidumbre hasta las campañas masivas de vacunación, el virus no solo cambió la vida tal cual se la conocía, sino que también expuso una serie de desigualdades a nivel mundial."

No obstante, nadie podía prever que, en pocas semanas, el mundo entero y no sólo China estaría enfrentando la peor pandemia del último siglo: la COVID-19.

Un virus que paralizó al planeta: ¿cuál fue el impacto global de la COVID-19?

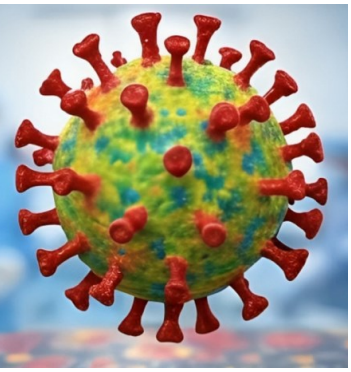


Foto: Pexels.

A medida que el virus se propagaba, quedó claro que no era una simple neumonía. Su capacidad para transmitirse entre humanos desató el pánico y llevó a la OMS a declarar una emergencia sanitaria internacional el 30 de enero de 2020. Meses después, el 11 de marzo, la situación fue catalogada oficialmente como pandemia.

De un día para otro, todo cambió drásticamente. En 2020, calles normalmente concurridas se vaciaron, y los confinamientos, las mascarillas y las restricciones en los viajes se convirtieron en parte del día a día. Millones de familias se enfrentaron a la pérdida de seres queridos, mientras los hospitales luchaban por atender a una creciente cantidad de pacientes en estado crítico.

Para muchos, el impacto emocional fue mucho más devastador que el virus en sí. Las videollamadas reemplazaron los abrazos, y las despedidas se dieron a distancia. Mientras tanto, los científicos de todo el mundo emprendieron una carrera contrarreloj para desarrollar una vacuna, logrando un avance histórico en menos de un año con la creación de las primeras dosis basadas en ARN mensajero.

El costo humano de la pandemia

Hoy, cinco años después de aquellos primeros reportes, las cifras oficiales de la OMS hablan de siete millones de muertos. Sin embargo, los expertos estiman que el número real supera los 20 millones. Estas estadísticas colocan a la COVID-19 en la misma categoría que pandemias históricas como la gripe española de 1918, aunque el mundo de entonces era menos poblado y menos interconectado.

Los contagios reportados alcanzan los 777 millones, aunque la cifra real es aún mayor, ya que muchos casos leves o asintomáticos nunca fueron diagnosticados. Sin embargo, más allá de los números, lo que perdura es el impacto en la vida de las personas: el miedo, la incertidumbre y las cicatrices emocionales que dejó la pandemia.

Aunque los confinamientos masivos quedaron en el pasado, la COVID-19 sigue presente. Una de las preocupaciones más actuales es el llamado "Covid persistente", una condición que afecta a quienes, semanas o incluso meses después de la infección inicial, continúan experimentando síntomas como fatiga extrema, dificultad para concentrarse y problemas respiratorios.

Maria Van Kerkhove, epidemióloga líder de la OMS, señaló que aproximadamente el 6 % de los pacientes que sufrieron infecciones graves desarrollan esta condición. Según los estudios, el riesgo aumenta con las reinfecciones, pero la vacunación demostró ser una herramienta efectiva para reducir su incidencia en hasta un 50 %.

La pandemia también dejó al descubierto profundas desigualdades en la respuesta global. Mientras los países desarrollados lograron inmunizar rápidamente a sus poblaciones, muchas naciones de ingresos bajos enfrentaron serias dificultades para acceder a vacunas y equipos médicos.

Para evitar que una crisis similar vuelva a ocurrir, la OMS lidera las negociaciones para un tratado internacional que fortalezca la preparación ante futuras pandemias. Este acuerdo busca garantizar una distribución equitativa de recursos y establecer mecanismos de cooperación más sólidos.

A pesar de sus potenciales beneficios, la propuesta enfrenta numerosas resistencias, especialmente de países con industrias farmacéuticas poderosas, que ven con malos ojos la posibilidad de flexibilizar patentes en momentos de emergencia.

La COVID-19 no solo marcó una era: transformó la forma en la que se comprende al sistema de salud, a la sociedad y, si se quiere, al planeta. Frente a la interrogante "¿Qué traerán los próximos años?" o "Qué pasará ahora?", solo el tiempo tendrá una respuesta, ya que el virus más devastador del último siglo pareciera haber llegado para quedarse.

Fuente: CANAL 26. Disponible en https://lc.cx/indf5t

Personas vulnerables ya reciben vacuna Patria contra COVID-19

31 dic. Las autoridades sanitarias de México ya aplican la vacuna Patria, de elaboración nacional, para proteger a la población ante la COVID-19, declaró la presidenta mexicana, Claudia Sheinbaum. La campaña de vacunación en el territorio nacional se extenderá hasta febrero de 2025.

“Son poco más de 700.000 vacunas Patria las que [son] utilizadas. La [inyección] contra la COVID-19 no se aplica de manera generalizada, la orientación por parte de las instituciones médicas de la Secretaría de Salud es que se aplique en personas vulnerables, con problemas de diabetes o hipertensión”, dio a conocer en conferencia de prensa.

La mandataria mexicana refirió que esta cantidad de dosis es porque los casos de coronavirus han disminuido tanto en el país, como en el mundo.

No se dio recurso adicional para fabricar muchas más [vacunas Patria] porque ya no es necesario", apuntó.

En mayo de 2023, la ex directora general del entonces Consejo Nacional de Humanidades, Ciencias y Tecnologías (Conahcyt), María Elena Álvarez-Buylla, destacó que la vacuna Patria, ya estaba lista para emplearse como refuerzo para proteger a la población contra el SARS-CoV-2, y que solamente debía pasar por la fase de revisión y aprobación.

Ante ello, el 30 de enero de 2024, el exdirector de la Comisión Federal para la Protección contra Riesgos Sanitarios (Cofepris), Alejandro Svarch, anunció que el país produciría hasta 2,5 millones de dosis. Patria "es segura y eficaz como refuerzo para prevenirse del contagio y las secuelas del virus SARS-CoV-2, específicamente para mayores de 18 años y con comorbilidades comunes como obesidad y diabetes", expuso Svarch en conferencia de prensa.

Fuente: La Verdad del Sureste. Disponible en https://lc.cx/TUhIFU

COVID-19: se cumplen cinco años de la pandemia que paralizó al planeta

Dec 31. A recent study published by the JAMA Network measured antibody response to Respiratory syncytial virus (RSV) vaccinations in immunocompromised individuals.

This Research Letter, published on December 30, 2024, disclosed a heterogeneous antibody response to RSV vaccines among immunocompromised persons.

In contrast to universal seroconversion and preF IgG fold rises greater than 10 in immunocompetent persons, approximately 40% of immunocompromised participants did not seroconvert or achieve a conservative neutralization threshold postvaccination.

Better neutralization was seen among RSVA-AS01E (AREXVY™) recipients, suggesting possible augmentation by the vaccine adjuvant.

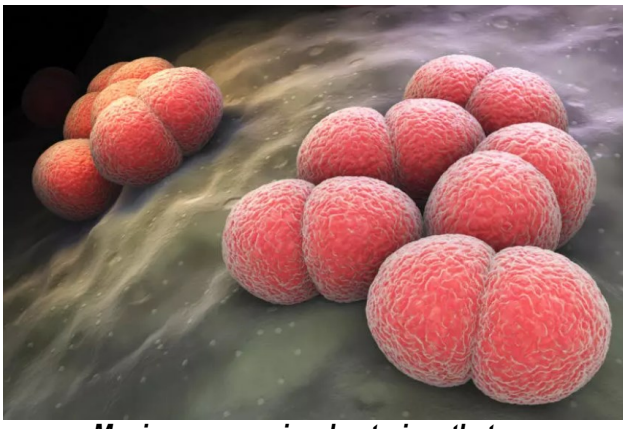
These researchers wrote, 'Low antibody titers may indicate a role for additional vaccine doses to enhance immune response among immunocompromised persons.

As of December 31, 2024, various RSV vaccines are offered at local pharmacies, and monoclonal antibody passive immunization is approved.

Fuente: VAX BEFORE TRAVEL. Disponible en https://lc.cx/tF90X2

France boosts meningitis vaccinations to fight rise in deadly infections

Jan 1. The move aims to combat infections caused by meningococcal bacteria, which can lead to bacterial meningitis – a highly contagious and potentially deadly illness.



Meningococcus is a bacterium that can cause meningitis and other forms of meningococcal disease. ©Shutterstock / Tatiana Shepeleva

Bacterial meningitis presents symptoms such as high fever and stiff neck and can result in rapid death if untreated.

Even with treatment, it has a 10 percent mortality rate and can cause long-term complications such as amputation, cognitive impairments and deafness.

Meningococci, the bacteria responsible, spread easily among individuals, making vaccination critical to prevent an epidemic.

The extension of the vaccination drive comes as the French Ministry of Health aims to enhance protection for infants against the infections amid a resurgence of cases in recent years.

This increase is partially attributed to Covid-19 pandemic restrictions, which inadvertently reduced exposure to meningococcal disease and led to lower vaccination rates.

From January to November 2024, more than 500 cases of meningococcal disease were reported in France, the highest in over two decades and slightly up from 2023.

'Dangerous' evolution of bacteria

Health authorities are also concerned about changes in the prevalence of meningococcal strains.

The main bacteria are divided into families: A, B, C, W and Y.

While the B strain remains common, the decline of the C strain has allowed the more dangerous W and Y strains to emerge. These strains are harder to diagnose and can cause atypical infections.

Previously, vaccination covered mainly B and C strains – a strategy now looked upon as outdated by health experts.

Infant vaccination mandatory

France's updated vaccination schedule now includes mandatory coverage for all meningococcal strains in infants.

For teenagers aged 11 to 14, a booster dose targeting strains A, C, W and Y is recommended, even for those previously vaccinated.

The B vaccine remains focused on younger children, as health authorities believe its benefits for older age groups are limited.

The vaccination booster is not compulsory but will be largely reimbursed by France's National Health Insurance.

Fuente: rfi. Disponible en https://lc.cx/H7SgxP

Las pequeñas biotecnológicas ganan terreno entre las aprobaciones de la FDA en 2024

Jan 2. La comparación entre las listas de aprobaciones de nuevos medicamentos de la FDA en 2023 y 2024 evidencia una notable diferencia en el perfil de las empresas que lograron éxitos regulatorios. En 2023, de las 68 aprobaciones destacadas en el informe anual deFiercePharma, 43 (equivalente al 63 %) fueron respaldadas o copatrocinadas por empresas con ingresos de al menos 3 mil millones de dólares (2.897 millones de euros) en ese año.

"En 2024, solo dos colaboraciones lograron la aprobación de empresas que habían asegurado un socio comercial: Syndax con Incyte y Genfit con Ipsen."

En contraste, en 2024, de las 55 aprobaciones registradas, solo 23 (42 %) tuvieron como patrocinadores o copatrocinadores a empresas con ventas que superaron los 3 mil millones de dólares en 2023. Este cambio refleja una tendencia donde las empresas de biotecnología han mostrado mayor resistencia a ser adquiridas por grandes compañías. Además, estas empresas más pequeñas están optando cada vez más por comercializar sus productos de forma independiente en lugar de asociarse con grandes farmacéuticas.

En 2024, solo dos colaboraciones lograron la aprobación de empresas que habían asegurado un socio comercial: Syndax con Incyte y Genfit con Ipsen. Esto contrasta con 2023, donde en el momento de las aprobaciones se registraron 11 colaboraciones de este tipo.

El año 2024 destacó por el éxito de pequeñas empresas en obtener aprobaciones ante la FDA. Entre las primeras ocho compañías que lograron aprobar nuevos medicamentos figuran nombres menos conocidos como Ligand, Iovance, Allecra, Hugel, BeiGene, Madrigal, Kyowa Kirin e Idorsia. Hacia finales del año, otras compañías como Iterum, Autolus, PTC, Syndax, Jazz, BridgeBio, Merus, Checkpoint, Neurocrine, Betta, Mesoblast e Ionis también lograron importantes aprobaciones.

En 2024, ninguna empresa obtuvo más de dos aprobaciones, marcando un cambio significativo respecto a 2023, cuando Pfizer lideró con siete aprobaciones y otras grandes compañías como GSK, Biogen y UCB lograron tres cada una. Además de un número significativo de aprobaciones, las biotecnológicas protagonizaron varias de las aprobaciones más relevantes de la FDA en 2024. Tras décadas de espera por un tratamiento efectivo para la esteatohepatitis asociada a disfunción metabólica, Madrigal marcó un hito con Rezdiffra, un medicamento que Evaluate señala que alcanzará ventas de 2.100 millones de dólares (2.028 millones de euros) en 2030.

Otro avance esperado fue para el tratamiento del trastorno pulmonar obstructivo crónico. Verona respondió a esta necesidad con Ohtuvayre, que según Evaluate generará ingresos de 1.500 millones de dólares (1.448 millones de euros) en 2030. Asimismo, Ascendis Pharma logró la aprobación de Yorvipath, el primer tratamiento en Estados Unidos para el hipoparatiroidismo en adultos, con ventas estimadas en 1.800 millones de dólares (1.738 millones de euros) para 2030.

Evaluate también anticipa ventas de 1.700 millones de dólares (1.641 millones de euros) en 2030 para dos nuevos medicamentos de pequeñas empresas: Nemluvio, de Galderma, para el tratamiento del prurigo nodular, y Anktiva, de ImmunityBio, una inmunoterapia contra el cáncer. La mayoría de las compañías farmacéuticas que lograron múltiples aprobaciones en 2024 fueron las habituales en la industria, como Eli Lilly, Merck, Pfizer y Roche. Sin embargo, también destacó una empresa menos conocida que consiguió un par de aprobaciones.

Tras décadas de espera por un tratamiento efectivo para la esteatohepatitis asociada a disfunción metabólica, Madrigal marcó un hito con Rezdiffra

Syndax, una biotecnológica con sede en Massachusetts y 19 años de existencia, que contaba con solo 107 empleados a principios de 2023, logró sus dos aprobaciones en un lapso de tres meses. En agosto, la FDA aprobó Niktimvo, desarrollado junto a su socio Incyte, para tratar la enfermedad crónica de injerto contra huésped. Luego, en noviembre, Syndax obtuvo otra aprobación con Revuforj, el primer inhibidor de la menina para tratar un tipo genético de leucemia conocido como lisina metiltransferasa 2A.

Por otro lado, Merck aprovechó dos importantes aprobaciones. Evaluate proyecta que Winrevair, el primer tratamiento modificador de la enfermedad para la hipertensiónarterialpulmonar, generará ingresos de 3.000 millones de dólares (2.897 millones de euros) en 2030. Además, la compañía obtuvo la aprobación de Capvaxeve, la primera vacuna neumocócica diseñada específicamente para adultos.

Fuente: ConSalud. Disponible en https://lc.cx/zFgBIK

Sanofi, SK Bioscience Launch Phase III Trial Program to Develop PCV21 for Pneumococcal Conjugate Vaccines

Jan 3. Sanofi and SK Bioscience announced that they have entered a new collaboration to develop next-generation pneumococcal conjugate vaccines (PCVs) targeting both pediatric and adult populations. According to Sanofi, the joint venture aims to address invasive pneumococcal disease (IPD), driven by serotypes not covered by existing vaccines.

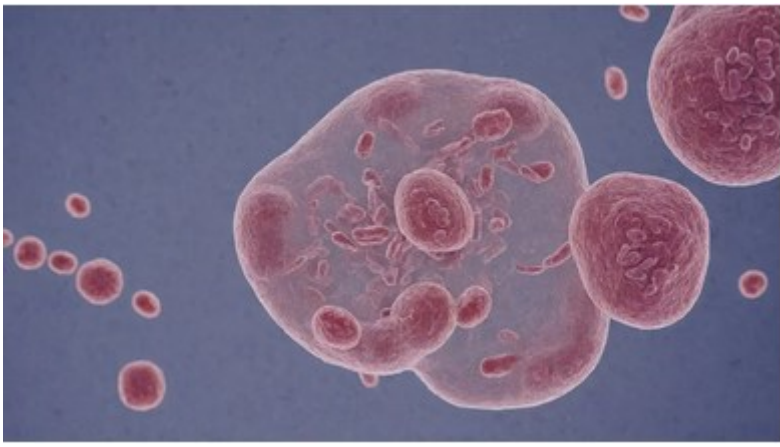


Image Credit: Adobe Stock Images/Daria

As part of the collaboration, Sanofi and SK will initiate a Phase III trial for PCV21 following positive Phase II results reported in 2023. The new program is expected to include over 7,700 infants, toddlers, young children, and adolescents across the United States, Europe, Australia, Asia, and Latin America.

“Given the vast unmet public health needs in IPD, we’re delighted to expand this collaboration and continue our pursuit of innovative work in PCV. Our collaboration leverages SK bioscience’s capabilities and Sanofi’s expertise in developing and bringing innovative vaccines to people worldwide with the collective aim of reducing the global impact of pneumococcal disease,” said Thomas Triomphe, EVP, vaccines, Sanofi, in a press release.

Under terms of the deal, Sanofi will provide an upfront payment of approximately $51 million to SK and will also provide future development and commercial milestone payments. Both companies will co-fund research and development costs. While SK will maintain commercialization rights in South Korea, Sanofi will lead commercialization efforts globally, with SK receiving royalty payments on product sales outside South Korea.

In 2023, SK announced positive Phase II trial results for PCV21. The study, which enrolled 140 toddlers aged 12 to 15 months and 712 infants aged 42 to 89 days, demonstrated comparable immunogenicity of GBP410 compared to the control vaccine, following the primary vaccination at two, four, and six months of age as well as the booster vaccination for ages 12 to 15 months. Additionally, data from the trial demonstrated

a well-tolerated safety profile, with a comparable reactogenicity profile to the control vaccine and no vaccine-related serious adverse events.

"The successful Phase II clinical trials of pneumococcal conjugate vaccine signifies that SK bioscience's technology and capability in vaccine development can deliver best in class vaccine candidates," said Ahn, in a press release.

"We're so proud to collaborate with an excellent partner, Sanofi, and we continue to be committed to developing and manufacturing vaccines based on the global partnership with major pharmaceutical companies."

According to the Centers for Disease Control and Prevention, children younger than five years of age and adults over 65 years of age are at increased risk for pneumococcal disease. Additionally, common conditions and risk factors include alcoholism; cerebrospinal fluid leak; chronic heart, kidney, liver, or lung disease; cigarette smoking; cochlear implant; decreased immune function from disease or drugs; diabetes mellitus; and chronic lung conditions such as chronic obstructive pulmonary disease, emphysema, and asthma. While it is currently unknown why, individuals of African American, Alaska Native, or American Indian descent have increased rates of pneumococcal disease.

According to the World Health Organization, there are two classes of pneumococcal vaccines currently available, with one based on olysaccharides and the other based on polysaccharides conjugated to a carrier protein. They noted that the e polysaccharide vaccine consists of purified capsular polysaccharides from the 23 serotypes causing about 90% of invasive pneumococcal infection in industrialized countries. Responses are age-dependent and serotype-dependent.

"We're thrilled about the expansion of our collaboration with Sanofi, which serves as the core of our strategy to develop new solutions to combat pneumococcal disease. The ongoing expansion of our state-of-the-art manufacturing base, cofinanced by Sanofi, will support launch of PCV21 and future next generation vaccines," said Jaeyong Ahn, CEO, president, SK Bioscience, in the press release.

Fuente: Pharmaceutical Executive. Disponible en https://lc.cx/fHgHoE

Human Metapneumovirus HMPV cases in India: Is it a new virus? How is it similar to COVID-19? Is there any vaccine? What we know so far

Jan 5. An outbreak of Human Metapneumovirus (HMPV) in China has raised alarm globally. Several countries, including India, are monitoring the virus and its spread closely. But should one worry about it? Has India reported any such virus cases? How is this virus similar to the COVID-19 virus? What are its symptoms, and what have experts said so far? Is there a vaccine for HMPV? Here's all you need to know.

What is Human Metapneumovirus (HMPV)?

Human metapneumovirus (HMPV) is a common respiratory virus that causes lower and upper respiratory infections (like a cold). It is a seasonal disease that usually occurs in the winter and early spring, similar to Respiratory Syncytial Virus (RSV) and the flu.

HMPV cases in India

Five cases of the HMPV virus were reported in India on Monday, January 6. The Ministry of Health confirmed that two babies, one 3-month-old and another eight-month old, were infected with the virus at a Bengaluru hospital. Two other cases were reported in Chennai. One case was detected in Ahmedabad.

Is HMPV a new virus?

HMPV is not a newly discovered virus. It was first discovered in 2001, the US Centers for Disease Control and Prevention (CDC) said. However, some serologic evidence suggests that the virus has been widespread since at least 1958, an expert said. HMPV falls in the Pneumoviridae family along with RSV.

Is HMPV similar to COVID-19 virus?

Yes. Coronavirus disease or COVID-19 is an infectious disease which is caused by the SARS-CoV-2 virus. The HMPV virus and the SARS-CoV-2 virus are similar in some ways:

1. Both viruses cause respiratory disease in people of all ages. Young children, older adults, and people with weakened immune systems are likely to be most at risk.
2. Symptoms are also similar. Symptoms commonly associated with HMPV include cough, fever, nasal congestion, and shortness of breath. These are also the symptoms shown by people infected with the COVID-19 virus.
3. Both viruses are most likely spread from an infected person to others through secretions from coughing and sneezing and close personal contact. They also spread by touching objects or surfaces that have the viruses on them and then touching the mouth, nose, or eyes.
4. As per Science Direct, COVID-19 appears to be temperature-sensitive and, therefore, seasonal. Similarly, HMPV circulates in distinct annual seasons, the US CDC said. Although HMPV can be detected throughout the year, infections typically peak in the United States from late winter to early spring.

Is there a vaccine to prevent HMPV spread?

No. There is currently no vaccine, and antiviral treatment is not recommended. But patients can help prevent the spread of HMPV and other respiratory viruses by following these steps:

- Wash hands often with soap and water for at least 20 seconds (see CDC's Clean Hands Save Lives!)
- Avoid touching eyes, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Patients who have cold-like symptoms should cover their mouth and nose when coughing and sneezing.
- Avoid sharing cups and eating utensils with others.

HMPV cases in India: Who is at risk?

The HMPV virus poses a significant risk, particularly to vulnerable populations such as young children, the elderly, pregnant women, and those with weakened immune systems.

Fuente: Live Mint. Disponible en https://lc.cx/t-jTXA

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Patentes registradas en Patentscope

Estrategia de búqueda: (Vaccine) AND DP:([26.12.2024 TO 05.01.2025]) *as the publication date 44 records.*

1.20240424081SOLUBLE NEEDLE ARRAYS FOR DELIVERY OF INFLUENZA VACCINES
US - 26.12.2024
Int.Class A61K 39/145 Appl.No 18592672 Applicant Seqirus UK Limited Inventor Derek O'HAGAN

Influenza vaccines are administered using solid-biodegradable microneedles. The microneedles are fabricated from the influenza vaccine in combination with solid excipient(s) and, after penetrating the skin, they dissolve in situ and release the vaccine to the immune system. The influenza vaccine is (i) a purified influenza virus surface antigen vaccine, rather than a live vaccine or a whole-virus or split inactivated vaccine (ii) an influenza vaccine prepared from viruses grown in cell culture, not eggs, (iii) a monovalent influenza vaccine e.g. for immunising against a pandemic strain, (iv) a bivalent vaccine, (v) a tetravalent or >valent vaccine, (vi) a mercury-free vaccine, or (vii) a gelatin free vaccine.

2.20240424080Multi-Epitope Vaccine Platform
US - 26.12.2024
Int.Class A61K 39/12 Appl.No 18338054 Applicant Institute of Advanced Sciences Inventor Bal Ram Singh

The present invention comprises of a vaccine technology to produce one or more novel vaccine compositions, method of making, and administering, for protecting against at least two of the four serotypes of the dengue virus. The vaccine technology is based on four important ideas: a) using a backbone for a vaccine candidate

comprising detoxified tetanus neurotoxin—DrTeNT; b) selecting epitopes that can activate both B-cells and T-cells in a patient to whom the vaccine is administered to provide long term immunity; c) immunizing against all the four serotypes of dengue; and d) an oral/sublingual/buccal/nasal delivery platform and formulation.

3.20240424084UNDIRECTED MUTATED MRNA VACCINE
US - 26.12.2024
Int.Class A61K 39/215 Appl.No 18683880 Applicant Dennis R. BURTON Inventor Dennis R. BURTON

We claim vaccines and a method of making vaccines targeted against diseases caused by viruses, including influenza virus and SARS CoV-2, against cancer, and diseases caused by bacteria, fungi, and other biomaterials/diseases that are combatted with an immune response. The mRNA vaccine is injected into the body whereupon the injected mRNA hijacks the translational machinery of the cells to produce an antigen such as a virus spike protein or surface protein (or part thereof) and stimulates an immune response. The mRNA in the vaccine is a mixture of mRNAs and where at least one or more of the RNAs are undirected mutant variants of the parent mRNA. The vaccine is a poly vaccine and provides protection against multiple variants. The vaccine may comprise mRNA species encoding several random undirected mutations directed against unknown variants.

4.20240424077A METHOD TO PRODUCE A VACCINE AGAINST STREPTOCOCCUS SUIS AND THE SAID VACCINE
US - 26.12.2024
Int.Class A61K 39/09 Appl.No 18708248 Applicant Intervet Inc. Inventor Antonius Arnoldus Christiaan Jacobs

The invention pertains to a method to produce a vaccine to protect a pig against a pathogenic infection with *Streptococcus suis*, the method comprising recombinantly expressing an IgM protease antigen in *E. coli* bacteria, subjecting the *E. coli* bacteria to a high pressure homogenisation operation at a pressure of at least 500 bar to induce lysis of the *E. coli* bacteria and release of the IgM protease antigen into the supernatant of the lysate, separating the supernatant from the pellet and mixing the supernatant comprising the IgM protease antigen with a pharmaceutically acceptable carrier to constitute the vaccine. The invention also pertains to a vaccine produced with this method.

5.WO/2024/261351IMMUNOLOGICALLY ACTIVE SAPONIN FRACTIONS AND ADJUVANT FORMULATIONS
WO - 26.12.2024
Int.Class Appl.No PCT/EP2024/075374 Applicant VACCINE FORMULATION INSTITUTE CH LTD. Inventor COLLIN,, Nicolas
Disclosed are immunologically active saponin fraction composition, its method of manufacture and use in vaccine adjuvants, and in adjuvanted vaccines. Methods of preparation, vaccine and treatment kits comprising the adjuvants, and uses of vaccines and vaccine kits comprising the adjuvants are also disclosed.

6.20240424076INDUSTRIAL PRODUCTION METHOD FOR STAPHYLOCOCCUS AUREUS VACCINE
US - 26.12.2024
Int.Class A61K 39/085 Appl.No 18269978 Applicant WESTVAC BIOPHARMA CO., LTD. Inventor Zhenling WANG

The present invention belongs to the field of biomedicine, and particularly relates to an industrial production method for a *Staphylococcus aureus* vaccine. The method provided by the present invention ensures industrial production of a vaccine comprising multiple immunogenic components such as whole-cell *Staphylococcus aureus* with stable and controllable quality. The vaccine prepared by the present invention

has good immunogenicity, not only an actual inoculated dose is low, but also the vaccine can prevent multiple infectious diseases caused by drug-resistant *Staphylococcus aureus.*

7.WO/2025/000972RECOMBINANT ONCOLYTIC VACCINIA VIRUS AND USE THEREOF
WO - 02.01.2025
Int.Class C12N 7/01 Appl.No PCT/CN2023/140367 Applicant SUZHOU ONLYV BIOTECHNOLOGY LIMITED COMPANY Inventor JU, Songguang
Provided in the present invention is a recombinant oncolytic vaccinia virus, which is operably inserted into a synonymously mutated exogenous gene capable of expressing 4-1BBL; and also provided is the use of the recombinant oncolytic vaccinia virus in the preparation of a drug for preventing or treating tumors and cancers. The present invention has the following beneficial effects: the synonymous-mutation-based recombinant vaccinia virus VV-mH4-1BBL retains the original oncolytic effect of the oncolytic virus and the functions thereof of initiating and enhancing anti-tumor immune responses, and improves the safety by means of deleting the TK gene; 4-1BBL is highly expressed on the surface of a tumor cell, such that 4-1BBL can enhance the anti-tumor immunity by means of exciting a 4-1BB signal from 4-1BB+ immune cells (including T cells) in the tumor microenvironment, and 4-1BBL is also confined within tumor tissues to exert the function thereof in a centralized manner, thereby avoiding potential systemic toxic side effects; and the introduction of a synonymous mutation site enables the virus to detect the expression of a therapeutic (exogenous) 4-1BBL gene during treatment.

8.20240424087MULTIEPITOPE SELF-ASSEMBLED NANOPARTICLE VACCINE PLATFORM (MSN-VACCINE PLATFORM) AND USES THERE OF
US - 26.12.2024
Int.Class A61K 39/215 Appl.No 18700563 Applicant Translational Health Science and Technology Institute Inventor Sweety Samal

The present invention is drawn to a next generation nano vaccine platform by using structure-based design to utilize the conserved or less variable or highly immunogenic domains or epitopes and displaying it in a nano cage and produces it in as nanoparticle protein in prokaryotic expression system. The present invention is illustrated in detail by a vaccine design and construct for SARS CoV-2, SARS-CoV-2 variants, betacorona viruses, Monkey pox virus and Dengue virus.

9.WO/2024/260359MRNA VACCINE AGAINST RESPIRATORY SYNCYTIAL VIRUSES AND PREPARATION METHOD THEREFOR
WO - 26.12.2024
Int.Class A61K 39/155 Appl.No PCT/CN2024/100015 Applicant CSPC MEGALITH BIOPHARMACEUTICAL CO., LTD. Inventor FAN, Chao
A mRNA vaccine for preventing respiratory syncytial viruses, main components of said vaccine comprising a mRNA having a mutation site and lipid nanoparticles. The mRNA vaccine has good immune effects on various subtype respiratory syncytial viruses.

10.WO/2025/006263DESIGN OF UNIVERSAL INFLUENZA VACCINE CANDIDATES VIA ANTIGEN REORIENTATION
WO - 02.01.2025
Int.Class Appl.No PCT/US2024/034466 Applicant CZ BIOHUB SF, LLC Inventor XU, Duo
New vaccine compositions comprising a modified antigen H7 HA bound to the surface of an adjuvant or carrier by electrostatic interactions are disclosed. The antigen of the vaccine composition is presented in a defined orientation on an adjuvant surface such that epitope accessibility is altered, and an immune response is redirected toward specific epitopes. In some embodiments the vaccine composition comprises one or more

recombinant antigen polypeptides adsorbed to an alum particle. In some embodiments, the recombinant antigen polypeptide comprises a Region of Repetitive Carboxylic Groups (RRC) or a Region of Repetitive Lysyl/Guanidino Groups (RRL).

11.20240424088Nant COVID Vaccine Cross Reactivity
US - 26.12.2024
Int.Class A61K 39/215 Appl.No 18882219 Applicant ImmunityBio, Inc. Inventor Patrick Soon-Shiong

Recombinant SARS-CoV2 vaccine compositions and methods are presented that have unexpected cross-reactivity against a variety of other coronaviruses, and particularly against SARS-CoV1, MERS-CoV, OC43-CoV, and HKU1-CoV in addition to significant reactivity against SARS-CoV2A. Moreover, the vaccine compositions presented herein also produced cross-reactive memory B cells as well as cross-reactive memory T cells with cross-reactivity spanning a relatively wide range of different coronaviruses.

12.20240424078GROUP B STREPTOCOCCUS CAPSULAR POLYSACCHARIDE VACCINE AND METHODS OF USE
US - 26.12.2024
Int.Class A61K 39/09 Appl.No 18761709 Applicant GLAXOSMITHKLINE BIOLOGICALS SA Inventor Zourab BEBIA

A method of immunizing a human female subject to decrease the risk of Group B *Streptococcus* (GBS) disease in an infant born to the subject, by providing a priming dose of a GBS vaccine and, more than thirty days after the priming dose, providing a boosting dose of a GBS vaccine.

13.WO/2024/259624A MODIFIED RSV F PROTEIN, A NANOPARTICLE, A COMPOSITION AND A VACCINE AGAINST RESPIRATORY SYNCYTIAL VIRUS INFECTION
WO - 26.12.2024
Int.Class C07K 14/135 Appl.No PCT/CN2023/101642 Applicant SHENZHEN GENIUS BIOTECH SERVICE CO. LTD Inventor LIV, Hongliang
The present invention provides a modified RSV F protein, a nanoparticle, a composition and a vaccine adapted for mucosal administration, and in particular for intranasal administration. Intranasal administration of the modified RSV F protein, the nanoparticle, the composition and the vaccine can elicit mucosal and systemic antiviral immunity, resulting in the reduced virus-associated pathology and reduced viral burdens, thereby preventing, ameliorating and/or treating disease caused by infection of the RSV virus.

14.WO/2025/005260VACCINE ADJUVANT COMPOSITION AND USE THEREOF
WO - 02.01.2025
Int.Class A61K 39/39 Appl.No PCT/JP2024/023566 Applicant JAPAN AS REPRESENTED BY DIRECTOR GENERAL OF NATIONAL INSTITUTE OF INFECTIOUS DISEASES Inventor TAKAHASHI, Yoshimasa
The present disclosure provides a vaccine adjuvant composition containing: a macromolecular polymer having acrylic acid as a constituent unit; and a cationic surfactant.

15.WO/2025/000310PREPARATION METHOD FOR CASTRATING AP205 VIRUS-LIKE PARTICLE SUBUNIT VACCINE
WO - 02.01.2025
Int.Class C12N 15/62 Appl.No PCT/CN2023/103567 Applicant SHENZHEN HERZ LIFE SCIENCE TECHNOLOGY CO., LTD Inventor ZHA, Lisha
The present invention relates to the fields of molecular biology, virology, immunology and medicine, and in particular to a preparation method for a castrating AP205 virus-like particle subunit vaccine.

16.WO/2025/006385NOVEL MALARIA VACCINE COMPRISING AMA1 AND RON2 ANTIGENS

WO - 02.01.2025
Int.Class A61K 39/00 Appl.No PCT/US2024/035244 Applicant THE UNITED STATES OF AMERICA, AS REPRESENTED BY THE SECRETARY, DEPARTMENT OF HEALTH AND HUMAN SERVICES Inventor TOLIA, Niraj
Apical membrane antigen 1 (AMA1) is a key malaria vaccine candidate and target of neutralizing antibodies. AMA1 binds to a loop in rhoptry neck protein 2 (RON2L) to form the moving junction during parasite invasion of host cells, and this complex is conserved among apicomplexan parasites. AMA1-RON2L complex immunization achieves higher growth inhibitory activity than AMA1 alone and protects mice against Plasmodium yoelii challenge. Here, three single-component AMA1-RON2L immunogens were designed that retain the structure of the two-component AMA1-RON2L complex: one structure-based design (SBD1) and two insertion fusions. All immunogens elicited high antibody titers with potent growth inhibitory activity, yet these antibodies did not block RON2L binding to AMA1. The SBD1 immunogen induced significantly more potent strain-transcending neutralizing antibody responses against diverse strains of Plasmodium falciparum than AMA1 or AMA1-RON2L complex vaccination. This indicates that SBD1 directs neutralizing antibody responses to strain-transcending epitopes in AMA1 that are independent of RON2L binding. This work underscores the importance of neutralization mechanisms that are distinct from RON2 blockade. The stable single-component SBD1 immunogen elicits potent strain-transcending protection that may drive the development of next-generation vaccines for improved malaria and apicomplexan parasite control.

17.WO/2024/261766LYOPHILISED VACCINE FORMULATION
WO - 26.12.2024
Int.Class A61K 39/12 Appl.No PCT/IN2023/051177 Applicant GENNOVA BIOPHARMACEUTICALS LTD. Inventor SINGH, Sanjay
A lyophilised COVID-19 vaccine formulation. The present invention relates, a method of preparing a lyophilized formulation of mRNA complexed onto lipid nano-emulsion particles or nano-carriers for intradermal application. It particularly provides a method for preparation of the mRNA adsorbed onto lipid nano-emulsion particles in liquid and dehydration of said mRNA complexes as such by lyophilization.

18.WO/2024/260446RESPIRATORY SYNCYTIAL VIRUS (RSV) VACCINE
WO - 26.12.2024
Int.Class A61K 39/155 Appl.No PCT/CN2024/100631 Applicant SHENZHEN SHENXIN BIOTECHNOLOGY CO., LTD. Inventor LI, Linxian
Provided is a respiratory syncytial virus (RSV) vaccine. The nucleic acid comprises a polynucleotide for encoding a mutant of an RSV F protein. Compared with a wild-type RSV F protein, the mutant at least comprises one or more of the following mutations: a disulfide bond mutation, a cavity-filling mutation and an electrostatic mutation.

19.WO/2024/263202COMPOSITIONS AND METHODS FOR ENHANCEMENT OF MRNA VACCINE PERFORMANCE AND VACCINATION AGAINST MPOX
WO - 26.12.2024
Int.Class A61K 39/275 Appl.No PCT/US2023/081090 Applicant YALE UNIVERSITY Inventor CHEN, Sidi
The current disclosure includes a modular vaccine platform. Also included are monkeypox vaccines that protect against pathogenic monkeypox species, as well as their variants. The vaccines typically include a modified mRNA encoding at least one immunogen, such as a viral envelope protein, cell surface binding protein, or a biologically effective/significant fragment thereof. The mRNA can be encapsulated into lipid nanoparticles or other carriers and formulated as pharmaceutical compositions that can be used to generate an immune response to pathogens, including monkeypox virus, in a subject.

20.WO/2025/003976RECOMBINANT VIRUS-LIKE PARTICLES

WO - 02.01.2025
Int.Class Appl.No PCT/IB2024/056308 Applicant SEQIRUS INC. Inventor CAI, Yongfei
The present disclosure relates to a recombinant virus-like particle (VLP) comprising an antigen for use as a vaccine. In an aspect, the present disclosure relates to a recombinant VLP comprising a capsid fusion protein for use as a vaccine.

21.20240424074ANTI-TUMOR DNA VACCINE WITH PD-1 AND LAG-3 PATHWAY BLOCKADE
US - 26.12.2024
Int.Class A61K 39/00 Appl.No 18597446 Applicant WISCONSIN ALUMNI RESEARCH FOUNDATION Inventor Douglas McNeel

The present invention provides combination therapies and methods of treating cancer, including, cancers that are resistant to PD-1 therapy. The combination therapies described herein comprise a DNA vaccine to a tumor antigen, anti-PD-1 therapy, and an anti-LAG-3 therapy, which provides an increased T cell response against the cancer.

22.WO/2025/002359VARICELLA ZOSTER VIRUS (VZV) VACCINE
WO - 02.01.2025
Int.Class C12N 15/38 Appl.No PCT/CN2024/102410 Applicant SHENZHEN SHENXIN BIOTECHNOLOGY CO., LTD. Inventor LI, Linxian
Provided are a non-natural nucleic acid, a genetic engineering vector, a host cell, a delivery vector, a pharmaceutical composition and a use thereof, and a varicella zoster virus (VZV) vaccine. The non-natural nucleic acid comprises a polynucleotide encoding a VZV gE protein or a fragment thereof.

23.20240424073CONTRACEPTIVE VACCINE BASED ON THE SPERM-ASSOCIATED PROTEIN CATSPER
US - 26.12.2024
Int.Class A61K 39/00 Appl.No 18437608 Applicant Rensselaer Polytechnic Institute Inventor Christopher BYSTROFF

A composition includes a contraceptive chimeric virus-like particle with an antigenic carrier domain and one or more antigenic regions from a sperm cell in the antigenic carrier domain, with the antigenic carrier domain including human papillomavirus L1 capsid protein and the antigenic regions including one or more structural elements of the Catsper ion channel complex. When administered to a patient, the contraceptive vaccine stimulates production of anti-sperm antibodies that, upon binding to a sperm cell, inhibit the sperm cell's motility and thus inhibit the ability of the sperm cell to fertilize an egg cell. The induced immunoinfertility of the composition can be reversed for brief or extended lengths of time by overdosing the patient with a reversal agent lacking the antigenic carrier domain but having a protein sequence substantially identical to that of the one or more antigenic regions to sequester the anti-sperm antibodies.

24.WO/2024/263059FUSION PRECURSOR PROTEINS OF PEPTIDE IMMUNOGENS AS COMPONENTS OF A COVID-19 VACCINE
WO - 26.12.2024
Int.Class C07K 19/00 Appl.No PCT/RU2024/050132 Applicant OOO "GEROPHARM" Inventor KHASANSHINA, Zukhra Ramilevna
The group of inventions relates to the field of biotechnology, and more particularly to genetic engineering. Proposed are embodiments of SUMO-containing fusion precursor proteins of SEQ ID NO: 1, SEQ ID NO: 2, SEQ ID NO: 3, SEQ ID NO: 4, which can be used to produce peptide immunogens of SEQ ID NO: 9, SEQ ID NO: 10, SEQ ID NO: 11, SEQ ID NO: 12 for use as components of a vaccine composition against the

coronavirus infection COVID-19, encoding nucleotide sequences thereof, as well as recombinant plasmid DNA and strains of *Escherichia coli* produced using same for the expression of SUMO fusion proteins.

25.20240424086CORONAVIRUS FUSION PROTEIN
US - 26.12.2024
Int.Class A61K 39/215 Appl.No 18689994 Applicant UNIVERSITE DE TOURS Inventor Nicolas AUBREY

A fusion protein including fragments of the spike protein and of the nucleoprotein of a coronavirus. Also a vaccine, a composition, a pharmaceutical composition, or a diagnostic kit including the fusion protein, a method for diagnosing an infection by a coronavirus and to a method for preventing or treating a coronavirus infection based on the use of the fusion protein.

26.WO/2024/261647IMPROVED SEED VIRUSES
WO - 26.12.2024
Int.Class A61K 39/145 Appl.No PCT/IB2024/055963 Applicant SEQIRUS INC. Inventor EKBERG, Gregory
The present disclosure relates to the field of influenza viruses. More particularly, this disclosure relates to donor or seed influenza viruses for use in preparing reassortant influenza viruses for vaccine production.

27.WO/2025/005816SARS-COV-2 PROTEIN EPITOPES AND USE THEREOF IN PREVENTION AND DIAGNOSIS OF CORONAVIRUS INFECTIONS
WO - 02.01.2025
Int.Class C07K 14/005 Appl.No PCT/PL2024/050047 Applicant INSTYTUT IMMUNOLOGII I TERAPII DOŚWIADCZALNEJ IM.LUDWIKA HIRSZFELDA PAN WE WROCŁAWIU Inventor GÓRSKA, Sabina
The subject of the invention are novel peptides derived from SARS-CoV-2 coronavirus proteins, the peptides being immunoreactive epitopes that interact with convalescent serum, use thereof in prevention and diagnosis of SARS-CoV-2 infections, and an innovative SARS-CoV-2 vaccine, comprising immunoreactive peptides and a thermostable nanoadjuvant that enables effective intranasal administration.

28.20240425550ENGINEERED RABIES VIRUS GLYCOPROTEIN, COMPOSITIONS, AND METHODS OF USE THEREOF
US - 26.12.2024
Int.Class C07K 14/005 Appl.No 18700922 Applicant LA JOLLA INSTITUTE FOR IMMUNOLOGY Inventor Erica Ollmann Saphire

Provided herein are, inter alia, methods and compositions for treating and preventing rhabdoviridae infection, including rabies virus. Compositions include recombinant rabies virus glycoproteins that are able to form glycoprotein trimers. The glycoprotein trimers are contemplated to be effective for preventing and/or treating rabies virus infections, including for use in the formulation of rabies virus vaccine compositions.

29.WO/2024/262942CORONA VIRUS PACKAGING SIGNAL ELEMENT AND USE THEREOF
WO - 26.12.2024
Int.Class C12N 7/00 Appl.No PCT/KR2024/008492 Applicant SEOUL NATIONAL UNIVERSITY R&DB FOUNDATION Inventor KIM, V. Narry
The present invention relates to a corona virus packaging signal element and use thereof. A polynucleotide comprising the coronavirus packaging signal element, according to the present invention, can be used in an attenuated coronavirus vaccine and in a composition for preventing or treating coronavirus infection.

30.20240425546Epitope Modification
US - 26.12.2024
Int.Class C07K 1/107 Appl.No 18686393 Applicant NANTONG YICHEN BIOPHARMA. CO. LTD. Inventor Feng WANG

The present invention relates to epitope modification based on a chemical cross-linking reactive group and the use thereof in changing the immunogenicity of an antigen and enhancing animal immune response to a target epitope of an antigen. The present invention relates to the administration of a mutant antigen incorporated by a group with chemical cross-slinking activity on the target epitope of a wild-type antigen or derivative thereof to an animal, wherein the antibody reaction in the animal is directed and enriched to the target epitope of the mutant antigen. Provided are a method for selecting antibodies against a target epitope of an antigen and the antibodies obtained thereby; further provided is the use of the method in the preparation of a vaccine for preventing and treating diseases.

31.2993356NEW ATTENUATED VIRUS STRAIN AND USE THEREOF AS A VACCINE
ES - 27.12.2024
Int.Class A61K 39/12 Appl.No 19758792 Applicant Université Claude Bernard Lyon 1 Inventor ROSA-CALATRAVA, Manuel

32.WO/2024/259508MULTI-EPITOPE ANTIGEN, IMMUNOGENIC COMPOSITION COMPRISING SAID ANTIGEN, PNEUMOCOCCAL DIAGNOSTIC KIT, AND USES OF SAID ANTIGEN
WO - 26.12.2024
Int.Class C07K 14/315 Appl.No PCT/BR2024/050260 Applicant INSTITUTO BUTANTAN Inventor ALVES, Vítor Dos Santos
The present invention relates to a multi-epitope antigen comprising 20 epitope blocks of 20 to 36 amino acids from proteins selected from the group consisting of NanA, PcsB, PhtD, Ply, PncO, StkP, PspA-F1 and PspA-F2. In addition, the present invention relates to an immunogenic composition comprising said antigen and a pharmaceutically acceptable vehicle and/or adjuvant. In addition, a pneumococcal diagnostic kit comprising said antigen or a biologically active fragment thereof bound to a detectable fraction; an antibody generated by said antigen; and instructions for use is also disclosed. In addition, the present invention relates to the use of said antigen to be used in the preparation of a vaccine to prevent diseases caused by pneumococcus bacteria; and for the production of monoclonal and polyclonal antibodies. Lastly, the present invention relates to an in vitro method for diagnosing pneumococcus which comprises applying the said antigen or a biologically active fragment of it bound to a detectable fraction, in contact with samples of body fluids selected from among blood, mucus expelled from the lower airways and urine.

33.WO/2025/003979COMBINATION RNA VACCINE
WO - 02.01.2025
Int.Class Appl.No PCT/IB2024/056311 Applicant SEQIRUS INC. Inventor RAMANATHAN, Palaniappan
The present disclosure relates to combination RNA vaccines and uses thereof. The present disclosure also relates to conventional mRNA vaccines and self-replicating RNA vaccines for the treatment of diseases or conditions including respiratory syncytial virus (RSV).

34.WO/2025/001408PHOSPHORUS-CONTAINING OR SULFUR-CONTAINING MACROCYCLIC PYRAZOLOPYRIMIDINE COMPOUND AND USE THEREOF
WO - 02.01.2025
Int.Class C07D 515/18 Appl.No PCT/CN2024/086746 Applicant ZHEJIANG YANGSHENGTANG INSTITUTE OF NATURAL MEDICATION CO., LTD. Inventor XU, Pan
The present application relates to the field of biomedicine, and particularly relates to a small-molecule phosphorus-containing or sulfur-containing macrocyclic pyrazolopyrimidine compound, which has better immunomodulatory activity. Also provided in the present invention is the use of the small-molecule phosphorus-containing or sulfur-containing macrocyclic pyrazolopyrimidine compound in the prevention or

treatment of TLR7-related diseases, and the use thereof as a vaccine adjuvant, a photodynamic therapeutic agent and a conjugated drug.

35.WO/2025/006577COMPOSITIONS FOR PREVENTION OF CARDIOMYOPATHY SYNDROME
WO - 02.01.2025
Int.Class Appl.No PCT/US2024/035580 Applicant ELANCO US INC. Inventor MACDONALD, Alicia
The present disclosure provides exemplary sequences and compositions that can be used to active immunization of animals to aid in the prevention of cardiomyopathy syndrome (CMS) caused by Piscine Myocarditis Virus (PMCV). Vaccines and kits comprising the sequences and compositions are also provided, as well as methods of administering the vaccine to non-human animals.

36.WO/2025/001407POLYARYL-CONTAINING MACROCYCLIC COMPOUNDS AND USES THEREOF
WO - 02.01.2025
Int.Class C07D 498/18 Appl.No PCT/CN2024/086745 Applicant ZHEJIANG YANGSHENGTANG INSTITUTE OF NATURAL MEDICATION CO., LTD. Inventor XU, Pan
The present application relates to the field of biological medicine, and particularly relates to small-molecule polyaryl-containing macrocyclic compounds which have better immunoregulation activity. Further provided in the present invention are the use of the small-molecule polyaryl-containing macrocyclic compounds in preventing or treating TLR7-related diseases, and the uses of same as vaccine adjuvants, photodynamic therapeutic agents and drug conjugates.

37.WO/2024/261648MULTIVALENT SUBTYPE INFLUENZA VACCINE
WO - 26.12.2024
Int.Class A61K 39/145 Appl.No PCT/IB2024/055964 Applicant SEQIRUS INC. Inventor ROCKMAN, Steven
The present disclosure relates to multivalent subtype influenza vaccines to treat and prevent influenza-associated diseases, disorders or conditions.

38.WO/2024/263770TOLL-LIKE RECEPTOR (TLR) AGONIST LIPIDOID COMPOUNDS, LIPID NANOPARTICLES (LNPS) COMPRISING THE SAME, AND METHODS OF USE THEREOF
WO - 26.12.2024
Int.Class C07D 487/06 Appl.No PCT/US2024/034807 Applicant THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA Inventor MITCHELL, Michael J.
The present disclosure relates to lipidoid compounds comprising toll-like receptor (TLR) agonists, lipid nanoparticles (LNPs) comprising the same, and methods of use thereof. In certain embodiments, the LNPs described herein are useful for enhancing the therapeutic and/or prophylactic effect of vaccine compositions.

39.WO/2025/006737GENETICALLY DETOXIFIED MUTANT OF NEISSERIA AND OUTER MEMBRANE VESICLE (OMV) VACCINE
WO - 02.01.2025
Int.Class A61K 39/095 Appl.No PCT/US2024/035804 Applicant THE UNITED STATES OF AMERICA, as represented by the secretary, DEPARTMENT OF HEALTH AND HUMAN SERVICES Inventor BASH, Margaret C.
Disclosed are isolated PorA-PorB-RmpM-LpxL1-N. meningitidis and compositions including an effective amount of OMVs produced from these PorA-PorB-RmpM-LpxL1- N. meningitidis. Also disclosed are methods for using these compositions to induce an immune response to Neisseria, such as N. meningitidis and N. gonorrhoeae.

40.WO/2025/003756MULTIVALENT INFLUENZA MRNA VACCINES
WO - 02.01.2025
Int.Class A61K 39/12 Appl.No PCT/IB2024/000346 Applicant SANOFI Inventor ALEFANTIS, Timothy

The present disclosure provides multivalent influenza vaccine compositions comprising at least three messenger RNAs (mRNAs) encoding a combination of influenza A and influenza B hemagglutinin (HA) antigens, wherein the mRNA encoding the HA antigen of the influenza A virus is present in a different ratio (w/w) than the mRNA encoding the influenza B virus, and methods of eliciting an immune response by administering said compositions. In particular, the disclosures relate to mRNA encoding these antigens formulated in a lipid nanoparticle (LNP).

41.20240425558PEPTIDES FOR USE IN IMMUNOTHERAPY AGAINST CANCERS
US - 26.12.2024
Int.Class C07K 14/47 Appl.No 18760718 Applicant Immatics Biotechnologies GmbH Inventor Colette SONG

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

42.WO/2024/259734RECOMBINANT FOWLPOX VIRUS EXPRESSING P1 AND 3C GENES OF AVIAN ENCEPHALOMYELITIS VIRUS AND CONSTRUCTION METHOD THEREFOR
WO - 26.12.2024
Int.Class C12N 7/01 Appl.No PCT/CN2023/102429 Applicant TIANJIN RINGPU BIO-TECHNOLOGY CO., LTD. Inventor QI, Ting
Provided in the present invention are a recombinant fowlpox virus expressing P1 and 3C genes of avian encephalomyelitis virus and a construction method therefor. In the present invention, firstly an AEV P1-3C expression cassette is constructed; the AEV P1-3C expression cassette is inserted into pBlue-FPV-244 vector to obtain recombinant plasmid FPV-AEV; then an eGFP expression cassette is constructed; the eGFP expression cassette is inserted into the FPV-AEV by means of infusion technique to obtain FPV-AEV-eGFP; then a recombinant fowlpox virus with the eGFP screening gene is obtained by means of transfecting chicken embryo fibroblasts and screening positive clones; and finally the screening gene is removed using cre enzyme to finally obtain the recombinant fowlpox virus expressing P1 and 3C genes of avian encephalomyelitis virus. A vaccine prepared from the recombinant fowlpox virus can induce a body to generate a specific antibody against AEV, which plays an immunoprotective role in chickens, especially chicks.

43.2993361ORAL DISPERSIBLE VACCINE COMPRISING VIROSOMES
ES - 27.12.2024
Int.Class A61K 39/12 Appl.No 19813465 Applicant Catalent U.K. Swindon Zydis Limited Inventor WONG, Yik Teng

44.WO/2025/002588METHOD FOR SCREENING OF EXTRACELLULAR TISSUE PEPTIDES IN MAMMALIAN TISSUE SAMPLES FOR HEALTH STATUS EVALUATION, DISEASE DIAGNOSTICS AND NEOANTIGEN DISCOVERY
WO - 02.01.2025
Int.Class G01N 33/569 Appl.No PCT/EP2023/081235 Applicant UNIWERSYTET GDANSKI Inventor KOTE, Sachin
This invention refers to method for screening of extracellular tissue peptides in mammalian tissue samples for health status evaluation, disease diagnosis and neoantigen discovery. The invention involved preparing and analyzing tissue samples from solid tumors, focusing on extracellular peptidomics and tissue major

histocompatibility complex (MHC) class I immunopeptidomics. The method is antibody-free, utilizing amino acid sequencing with tandem mass spectrometry. It is a straightforward, inexpensive, and rapid way to comprehensively profile the solid tumor peptidomics (extracellular peptidome and MHC class I immunopeptidomics). The method has potential to screen and used as biomarkers for health status evaluation, disease diagnostics, neoantigen discovery and prognosis of salivary gland tumors. Furthermore, the tissue MHC class I immunopeptidomics approach for neoantigen discovery, vaccine development, and design of immunotherapies.

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