



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.

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Noticias en la Web

India's Dengue Vaccine Candidate Advancing to Approval

Mar 1. The mosquito-transmitted dengue virus remains a significant public health challenge in tropical regions around the world. In India alone, over one million dengue cases and at least 1,500 deaths have been recorded since 2021.

“DengiAll dengue vaccine is conducting Phase III clinical trials.”

To address this public health challenge, India's Panacea Biotec Limited has made substantial progress with its vaccine candidate, DengiAll®.

As of March 1, 2026, the company is conducting Phase III clinical trials for DengiAll, a single-dose vaccine designed to provide balanced protection against all four dengue virus serotypes: DENV-1, DENV-2, DENV-3, and DENV-4. This represents a crucial step toward potentially introducing India's first domestically developed dengue vaccine, which would offer an accessible preventive option in areas where dengue is endemic.

"We will try to get this vaccine out there as soon as possible," said Syed Khalid Ali, Chief Scientific Officer at Panacea Biotec, in a media statement on February 26, 2026.

DengiAll is a live-attenuated, recombinant, lyophilized tetravalent vaccine based on attenuated strains licensed from the U.S. National Institutes of Health, which Panacea Biotec has further developed since 2006. Early clinical data from Phase I/II trials in healthy Indian adults showed that a single dose generated strong immunogenicity against all four serotypes, while maintaining a favorable safety profile.

If successful, DengiAll could become a widely available single-dose dengue vaccine, following recent approvals of similar single-shot candidates in other countries, such as Brazil.



Currently, several dengue vaccines are approved in various countries, though availability remains limited globally, with no dengue vaccine licensed for public use in India yet.

Dengvaxia®: The first approved dengue vaccine, a live-attenuated tetravalent chimeric vaccine requiring three doses and pre-vaccination screening for prior dengue infection. It is approved in the U.S. (Puerto Rico). However, production is being discontinued in 2026.

Qdenga®: A live-attenuated tetravalent vaccine administered in two doses, approved without requiring prior dengue testing in most indications. It is authorized in over 40 countries, and over 18 million doses have been distributed.

Butantan-DV: The world's first single-dose tetravalent live-attenuated dengue vaccine, approved by Brazil's Anvisa in November 2025. It is being launched in Brazil, with millions of doses planned for distribution.

Panacea Biotec's initiatives align with global efforts to combat dengue through vaccination, particularly in high-burden regions. Positive outcomes from Phase III trials may lead to regulatory review and potential introduction as soon as next year, depending on favorable data.

While the U.S. Centers for Disease Control and Prevention does not highlight dengue as a health risk when visiting India, as of March 2026, it has recently identified measles and rabies as concerns.

Fuente: VAX BEFORE TRAVEL. Disponible en <https://n9.cl/r2fo8h>

Burnet Institute and WEHI unveil immune blueprint for next generation malaria vaccines

Mar 2. New research co-led by Burnet Institute and WEHI has uncovered how the human immune system fights *Plasmodium vivax*, paving the way for the first effective vaccine against the most widespread form of malaria.



Published in *Immunity*, the study provides critical

evidence of how protective immunity to *P. vivax* works, identifying specific targets on the parasite and explaining how antibodies function to prevent and clear infection.

Burnet Senior Research Fellow Dr Herbert Opi said progress in global malaria control efforts has stalled despite decades of progress.

“While two malaria vaccines have been rolled out in parts of Africa, both target *Plasmodium falciparum* and offer no protection against *P. vivax*, which dominates in Asia and the Pacific,” he said.

A major obstacle to developing a *P. vivax* vaccine has been limited understanding of what protective immunity actually looks like.

Professor James Beeson, Head of Malaria Immunity and Vaccines at Burnet, said the findings provide critical evidence to guide vaccine design.

“These exciting findings open new avenues for developing *P. vivax* vaccines to combat the malaria burden globally and support a path to elimination,” Professor Beeson said.

WEHI Laboratory Head Dr Rhea Longley said global malaria research and vaccine investment has overwhelmingly focused on *P. falciparum*, leaving major knowledge gaps for *P. vivax*.

“Unlike *P. falciparum*, *P. vivax* has unique biological features including a dormant liver stage that causes relapses, making it more difficult to eliminate,” she said.

“Strategies that work for one species do not translate to the other.”

Using blood samples from children in Papua New Guinea – a region heavily affected by *P. vivax* – researchers examined how antibodies interact with the immune system to prevent disease.

The findings show that protection from *P. vivax* is not driven by the presence of antibodies, but by how those antibodies function and which parasite proteins they target.

Researchers identified antibody responses that recruit immune cells and activate immune pathways to attack the parasite. The immune system response was significantly stronger when it targeted multiple proteins at once.

Targeting the right combination of proteins was crucial and could reduce malaria risk by more than 75% – a finding that provides a clear strategy for future vaccine development.

The study involved a collaborative partnership between Burnet, WEHI, PNG Institute of Medical Research, and Ehime University Japan.

Fuente: BioMelbourne Network. Disponible en <https://n9.cl/jdit7>

Burnet Institute and WEHI unveil immune blueprint for next generation malaria vaccines

Mar 2. China-based WuXi XDC Cayman Inc. (WuXi XDC), a leading global CRDMO (Contract Research, Development, and Manufacturing Organization) specialising in antibody-drug conjugates (ADCs) and other bioconjugates, has announced a strategic collaboration with Earendil Labs on WuXi XDC's proprietary WuXiTecan-2 payload-linker technology platform.

Earendil Labs is an AI-powered biotech company focused on researching and developing next-generation innovative biologics for the treatment of autoimmune diseases, cancer, and other conditions with unmet medical needs.

This collaboration marks the establishment of a robust strategic partnership aimed at accelerating the development of next-generation ADCs by synergistically combining WuXi XDC's globally leading ADC technology platform with Earendil Labs' cutting-edge AI-driven antibody discovery and development capabilities to address significant unmet medical needs.

Under the agreement, WuXi XDC will grant Earendil Labs an exclusive global license to its proprietary WuXiTecan-2 payload-linker technology for use against multiple specific targets. Earendil Labs will utilise this technology to conjugate antibodies and bispecific antibodies discovered through its AI platform and to advance the development of the ADC candidates against these specific targets.



The total potential deal value could reach up to approximately \$885 million, comprising an upfront payment, and certain development, regulatory, and sales milestone payments. Additionally, WuXi XDC will be eligible to receive tiered royalties on net sales upon commercialization of any resulting ADC products.

Fuente: BioSpectrum. Disponible en <https://n9.cl/e4fp5>

Advancing Influenza Vaccine Development: Sino Biological Launches Antigens for the 2026-2027 Northern Hemisphere Influenza Vaccine Strains

Mar 3. The World Health Organization (WHO) has announced its recommendations for the 2026–2027 Northern Hemisphere influenza vaccine composition. The update highlights two key developments: the continued spread of A (H3N2) subclade K and the growing circulation of new B/Victoria lineage strains. In rapid response, Sino Biological, Inc. (Shenzhen Stock Exchange: 301047.SZ), a global leader in recombinant technology, has launched a comprehensive panel of antigens for the 2026-2027 Northern Hemisphere influenza vaccine strains[1] to accelerate influenza vaccine development.

Decoding the 2026-2027 Northern Hemisphere Influenza Vaccine Strains

Since its identification in August 2025, H3N2 subclade K (J.2.4.1) has become the dominant influenza A strain worldwide. Defined by the T135K and S144N mutations, this strain exhibits enhanced immune escape, prompting WHO's selection of A/Darwin/1454/2025 (egg-based, cell-based) as the new H3N2 reference viruses. The H1N1 component has been updated to A/Missouri/11/2025 (egg-based, cell-based).

Alongside H3N2, influenza B activity is rising sharply. In regions such as Hong Kong and the U.S., the proportion of B/Victoria lineage viruses recently increased from 6% to over 20%. These trends led WHO to recommendations B/Tokyo/EIS13-175/2025 (egg-based) and B/Pennsylvania/14/2025 (cell-based) strains for the upcoming season.

Sino Biological's Comprehensive Reagents for 2026-2027 Influenza Vaccine Research

To support global influenza vaccine research and development, Sino Biological has launched an extensive portfolio of recombinant antigens for the 2026-2027 Northern Hemisphere influenza vaccine strains[2], spanning key viral antigens including Hemagglutinin (HA), Neuraminidase (NA), and Nucleoprotein (NP). These include:

- ⇒ H1N1 Reagents: A/Missouri/11/2025 (H1N1) HA Trimer (HEK293 cell-expressed, purity $\geq 90\%$ verified by SEC-MALS, activity validated by ELISA), NA, and NP antigens are available now.
- ⇒ H3N2 Subclade K Proteins: Recombinant HA, NA, NP aligned with A/Darwin/1454/2025—available now.
- ⇒ Influenza B Reagents: In development for B/Tokyo/EIS13-175/2025 and B/Pennsylvania/14/2025.
- ⇒ Stable HA Trimers: High-purity, SEC-MALS-validated trimeric HA maintaining native conformation for accurate immune characterization.

"Our mission is to provide the scientific community with the highest quality tools as rapidly as possible when infectious disease evolution threatens global health preparedness," said Dr. Rob Burgess, Chief

Business Officer at Sino Biological US. "Sino Biological remains committed to delivering reliable reagents that advance global influenza preparedness and vaccine innovation."

About Sino Biological

Sino Biological is a global biotechnology company specializing in high-quality recombinant proteins, antibodies, and customized research services. Serving researchers in more than 90 countries, Sino Biological supports basic research, drug discovery, vaccine development, and diagnostics through its comprehensive product portfolio, proprietary quality systems, and innovative research platforms.

Fuente: BioSpace. Disponible en <https://n9.cl/yhosbo>

Moderna recibe la opinión positiva del CHMP de la EMA para mCOMBRIAX, su vacuna combinada de ARNm frente a la gripe y la COVID-19

Mar 3. Moderna ha anunciado que el Comité de Medicamentos de Uso Humano (CHMP) de la Agencia Europea de Medicamentos (EMA) ha adoptado una opinión positiva recomendando la autorización de comercialización en la Unión Europea de mCOMBRIAX (mRNA-1083), la vacuna combinada de Moderna indicada para la inmunización activa frente a la gripe y la COVID-19 causada por el SARS-CoV-2 en personas de 50 años o más.

“La opinión positiva del CHMP representa un hito importante para la vacunación frente a los virus respiratorios y para Moderna, con la introducción de la primera vacuna combinada frente a la gripe y la COVID-19 del mundo. De aprobarse, sería el cuarto medicamento comercializado de Moderna en Europa”, ha señalado Stéphane Bancel, director ejecutivo de Moderna. “Los vacunas combinadas tienen el potencial de simplificar la vacunación y contribuir a mejorar los resultados en salud. Agradecemos la rigurosa revisión científica llevada a cabo por la EMA”, ha añadido.

mCOMBRIAX se basa en los avances de mNEXSPIKE, la vacuna frente a la COVID-19 de Moderna, y en mRNA-1010, la vacuna estacional en investigación frente a la gripe de Moderna, cuya solicitud ha sido aceptada para revisión en Estados Unidos, la Unión Europea, Canadá y Australia.

La opinión del CHMP está respaldada por los resultados del ensayo clínico pivotal de fase 3, un estudio aleatorizado, ciego y con control activo, que evaluó la seguridad, la reactogenicidad y la inmunogenicidad de mRNA-1083 en dos grupos de edad de aproximadamente 4.000 adultos cada uno.

Un grupo incluyó a adultos de 65 años o más y comparó mRNA-1083 con la coadministración de Fluzone HD (autorizada en la Unión Europea como Efluelda), una vacuna antigripal de alta dosis, y Spikevax®, la vacuna frente a la COVID-19 autorizada de Moderna. El segundo grupo incluyó a adultos de entre 50 y 64 años y comparó mRNA-1083 con la coadministración de Fluarix, una vacuna antigripal de dosis estándar, y Spikevax.



En el ensayo clínico se cumplieron todos los criterios de valoración principales que demostraban la no inferioridad de las respuestas inmunitarias. Tras una única dosis, mRNA-1083 indujo respuestas inmunitarias significativamente superiores frente a tres cepas del virus de la gripe (A/H1N1, A/H3N2 y B/Victoria) y frente al SARS-CoV-2 en ambos grupos de edad. La cepa B/Yamagata, que ya no se recomienda para su inclusión en las vacunas antigripales estacionales, fue la única cepa para la que no se observó una respuesta inmunitaria significativamente superior en adultos de 65 años o más en comparación con las vacunas comparables autorizadas administradas conjuntamente.

mRNA-1083 mostró un perfil de seguridad y tolerabilidad aceptable. Las reacciones adversas más frecuentes fueron de grado 1 o 2 en cuanto a intensidad y similares a las observadas en las vacunas autorizadas utilizadas en el ensayo.

Tras la opinión positiva del CHMP, la Comisión Europea estudiará la recomendación y se espera que adopte una decisión final sobre la autorización de comercialización. Una vez que la Comisión Europea aprueba un medicamento, la autorización de comercialización es válida en todos los Estados miembros de la UE, así como en los países del Espacio Económico Europeo (EEE), que incluyen a Islandia, Liechtenstein y Noruega. Tras la aprobación por parte de la Comisión Europea, Moderna colaborará con las autoridades regulatorias y sanitarias nacionales para apoyar el acceso y la implementación a nivel local.

Fuente: pmfarma. Disponible en <https://n9.cl/af0ygg>

Aprobada en España la financiación de V116, vacuna que previene la enfermedad neumocócica en el adulto

5 mar. La Sanidad española ha aprobado la financiación de V116, la vacuna diseñada específicamente para la prevención de la enfermedad neumocócica en el adulto, uno de los grupos más vulnerables frente al neumococo teniendo en cuenta que la tasa general de hospitalización y letalidad asociada a esta patología aumenta con la edad.

“En MSD llevamos más de 100 años dedicados a la investigación y a la prevención de enfermedades a lo largo de toda la vida. Fuimos pioneros en el desarrollo de la primera vacuna contra el neumococo hace más de cuatro décadas y, desde entonces, hemos seguido innovando para ampliar la protección frente a esta afección. Las infecciones causadas por neumococo continúan representando una importante causa de morbimortalidad, especialmente entre los adultos de alto riesgo y las personas de edad avanzada, lo que nos impulsa a continuar reforzando la prevención en este grupo poblacional”, explica el Dr. Joaquín Mateos, director médico de MSD en España.

“El nuevo suero vacunal ofrece protección frente a los serotipos que causan el 75,9% de los casos de esta patología invasiva (ENI) en personas de 65 años o más edad.”

Protección frente a una larga lista de serotipos

V116 ofrece cobertura frente a los serotipos que causan el 75,9% de los casos de enfermedad neumocócica invasiva (ENI) en personas de 65 años o más edad en territorio español. En 2025, la Comisión Europea autorizó su uso para la inmunización activa para la prevención de la enfermedad invasiva y la neumonía causadas por los serotipos de *Streptococcus pneumoniae* 3, 6A, 7F, 8, 9N, 10A, 11A, 12F, 15A, deOAc15B, 16F, 17F, 19A, 20A, 22F, 23A, 23B, 24F, 31, 33F y 35B en individuos de 18 años o más. Esta aprobación se basa en un robusto programa clínico.

“Este avance en la prevención de la enfermedad neumocócica en adultos es el resultado de nuestro esfuerzo continuo en investigación. Además, contribuye directamente a la Estrategia de Salud Pública del Ministerio de Sanidad, que subraya la necesidad de mejorar las coberturas de vacunación en la adolescencia y la edad adulta, las cuales aún están por debajo de los objetivos establecidos. Por ello, es fundamental avanzar conjuntamente en estrategias que refuercen la protección en este grupo de edad, no solo ofreciendo vacunas específicas, sino también promoviendo el valor de la vacunación”, destaca Mateos.

Las infecciones causadas por neumococo o *Streptococcus pneumoniae*, principalmente la enfermedad neumocócica invasiva (ENI) y la neumonía neumocócica, siguen siendo un importante problema de salud pública a nivel mundial. En adultos, esta bacteria es la causa más común de neumonía adquirida en comunidad a nivel mundial, suponiendo el 30-50% de los episodios microbiológicamente documentados en España.

“Vacunar a los mayores y a los grupos de riesgo es una inversión coste-efectiva” El neumococo sigue siendo una causa importante de morbilidad y mortalidad a nivel mundial, especialmente entre adultos mayores y personas con condiciones médicas subyacentes. En 2024, España registró 462 muertes por enfermedad neumocócica invasiva. De ellas, el 75 % de las defunciones en los hombres se produjeron en el grupo de 65 y más años (206 fallecimientos), mientras que en las mujeres este grupo de edad concentró el 82 % de las muertes (155).

En España la población cada vez está más envejecida y el porcentaje de personas mayores de 65 años supone el 20,4 % de la población. “En este contexto, vacunar a los adultos mayores y a los grupos de riesgo es una inversión coste-efectiva, ya que ayuda a reducir la carga de enfermedad”, afirma el Dr. José Antonio Navarro, consultor honorario del Área de Vacunas del Ministerio de Sanidad y miembro de la Real Academia de Medicina y Cirugía de la Región de Murcia.

“La vigilancia epidemiológica desempeña un papel crucial en la identificación continua de los serotipos más prevalentes y aquellos que causan formas invasivas de la enfermedad neumocócica, las cuales presentan una mayor letalidad. Este seguimiento es fundamental para evaluar el efecto de las estrategias de vacunación y la posible sustitución de serotipos. Además, permite conocer los patrones de resistencia antibiótica, lo que facilita la adaptación de las estrategias de vacunación, mejorando así la protección contra las formas graves de la patología”, concluye.

Menos tasas de inmunización en comparación con la vacuna antigripal

Las coberturas de la inmunización antineumocócica en adultos son inferiores a las de otras vacunas recomendadas, como la antigripal. Según los datos del Sistema de Información de Vacunaciones del Ministerio de Sanidad (SIVAMIN), en 2024, solo el 34,19 % de los mayores de 65 años habían recibido una vacuna conjugada contra el neumococo, frente al 58,47 % que se había vacunado frente a la gripe.

“Es importante destacar la estrategia de esta nueva vía preventiva, diseñada específicamente para proteger a adultos mayores de 65 años frente al neumococo. La selección de serotipos es especialmente relevante, ya que incluye una selección de los más prevalentes en este grupo de edad. No obstante, resulta crucial reforzar la concienciación de la población para mejorar las coberturas de inmunización frente al neumococo”, señala la Dra. María Fernández Prada, facultativa del Área de Gestión Clínica de Medicina Preventiva y Salud Pública del Hospital Vital Álvarez Buylla

en Mieres, Asturias. V116 está indicada para la inmunización activa para la prevención de la enfermedad invasiva y neumonía causadas por *Streptococcus pneumoniae* en personas a partir de 18 años de edad.

Fuente: FARMACOSALUD. Disponible en <https://n9.cl/p1son>

India to Launch First Dedicated Rs.1,000 Crore Medtech Investment Fund

Mar 7. India's medical technology (medtech) sector is set to receive a major boost with the launch of its first dedicated investment fund aimed at supporting innovation and manufacturing. A group of investors and industry veterans, led by Ganesh Sabat, former CEO of Sahajanand Medical Technologies (SMT), has launched a ₹1,000 crore growth-stage fund to strengthen the country's medtech ecosystem and align with the government's Make in India initiative.

MedArtha Capital Receives Regulatory Approval

The new fund, named MedArtha Capital, recently secured approval from the Securities and Exchange Board of India (SEBI). The fund plans to deploy capital over the next two to three years and will focus on investing in 10 to 12 high-growth medtech companies across India.

According to Sabat, the fund will primarily support small but promising companies that require capital and operational expertise to scale their manufacturing capabilities and expand their market presence.

Government May Contribute Through RDI Scheme

In a significant development, the government may also invest approximately ₹500 crore in the fund through its Research Development and Innovation (RDI) scheme.

MedArtha Capital has already submitted an application under the scheme, which allows eligible entities to receive investment support of up to 50% of the total fund size. The RDI initiative,



announced last year with a ₹1 lakh crore corpus, aims to accelerate investments in research, development, and innovation across key sectors.

Focus on Scaling Growth-Stage Medtech Companies

Unlike early-stage venture funds, MedArtha Capital will operate as a scale-up platform. The fund intends to invest in companies with annual revenues between ₹30 crore and ₹80 crore, helping them expand manufacturing capacity and strengthen their technological capabilities.

Through this strategy, the fund aims to support companies that already have proven products but require financial and operational backing to grow further and compete globally.

Reducing India's Dependence on Imported Medical Devices

As reported by TOI, the fund will focus on critical medtech segments where India remains heavily dependent on imports. These include MRI machines, CT scanners, cathlab devices, and neurovascular devices used in the treatment of stroke and heart failure.

By supporting domestic manufacturing in these areas, the fund aims to reduce reliance on imported medical equipment while strengthening India's healthcare infrastructure.

Building Contract Manufacturing Capabilities

In addition to supporting product development, the fund also plans to build contract development and manufacturing capabilities within the medtech sector. Currently, such specialised manufacturing ecosystems remain largely absent in India.

Therefore, MedArtha Capital intends to fill this gap by encouraging companies to develop scalable manufacturing platforms that can support both domestic demand and global exports.

Overall, the initiative marks an important step toward strengthening India's medtech industry, encouraging innovation, and advancing the country's ambition to become a global hub for medical device manufacturing.

Fuente: The Indian Practitioner. Disponible en <https://n9.cl/axtrqx>

Future pandemics may be fought faster with mRNA and advanced vaccine platforms

Mar 9. The world's experience with COVID-19 reshaped expectations for how quickly vaccines can be developed during a global health emergency. Advances in genetic sequencing, biotechnology, and international collaboration enabled vaccines to be designed and deployed within months. These developments have raised new questions about whether similar technologies could improve preparedness for other major pandemic threats.

In a paper titled "mRNA and Next-Generation Vaccine Platforms for Pandemic Influenza Preparedness," published in *Vaccines*, researcher Rick A. Bright evaluates how lessons from COVID-19 vaccine development and advances in mRNA technology could help global health systems respond more effectively to future influenza pandemics.

Why pandemic influenza still poses a global threat

Unlike seasonal influenza, which circulates predictably each year, pandemic influenza arises when a novel virus emerges from animal reservoirs and spreads efficiently among humans.

These viruses evolve rapidly, often mutating or reassorting their genetic material in ways that make them difficult to predict and control.

Modern global conditions amplify these risks. Rapid international travel enables infectious diseases to spread across continents within days. Human populations are increasingly exposed to animal hosts through agriculture, wildlife trade, and environmental changes. At the same time, influenza viruses remain highly adaptable pathogens capable of rapid genetic shifts.

Despite sustained investments in influenza surveillance and vaccination programs, current vaccine systems remain poorly suited to respond to a pandemic. Most licensed influenza vaccines rely on manufacturing processes that require months of preparation. Producers must select viral strains early in the production cycle, often before scientists fully understand which variants will dominate the outbreak.

This early decision-making introduces a major risk: the vaccine may not match the circulating virus by the time production is completed. If a virus mutates after manufacturing begins, there is little opportunity to adjust vaccine composition. As a result, the protective effect of the vaccine can be reduced.

These structural limitations highlight the need for more adaptable vaccine technologies capable of responding to rapidly evolving pathogens.

How mRNA platforms could transform pandemic response

The study argues that messenger RNA vaccine platforms represent one of the most promising tools for improving pandemic preparedness. Unlike traditional vaccines, which rely on growing viruses in eggs or cell cultures, mRNA vaccines use genetic instructions that teach human cells to produce specific viral proteins. This approach allows scientists to design vaccine candidates quickly using only the genetic sequence of the virus.

The COVID-19 pandemic demonstrated the power of this technology. Once the SARS-CoV-2 genome was identified, researchers were able to design mRNA vaccine candidates within weeks. Large-scale manufacturing and clinical trials followed soon afterward, leading to vaccine deployment in record time.

This experience fundamentally changed expectations for vaccine development timelines. Historically, vaccines could take years to develop and produce. The success of mRNA technology showed that safe and effective vaccines could be developed much faster when supported by strong regulatory frameworks, manufacturing infrastructure, and coordinated global investment.

For influenza preparedness, the advantages of mRNA platforms extend beyond speed. Influenza viruses evolve constantly through processes such as antigenic drift, meaning the viral surface proteins targeted by vaccines can change rapidly. Traditional vaccine production requires fixed strain selection months before the vaccine becomes available.

On the other hand, mRNA platforms allow scientists to update vaccine antigen sequences without redesigning the entire manufacturing process. If new viral data emerges during an outbreak, vaccine formulations could potentially be revised quickly.

This flexibility could significantly reduce the consequences of vaccine mismatch, a common problem in seasonal influenza vaccination campaigns. Severe influenza seasons dominated by rapidly evolving strains illustrate how traditional vaccines sometimes struggle to keep pace with viral evolution.

Recent clinical trials also support the feasibility of mRNA vaccines for influenza. Phase III studies of seasonal influenza mRNA vaccines have demonstrated strong immune responses and favorable safety profiles, particularly among older adults who face the highest risk of severe influenza complications.

These findings suggest that mRNA platforms could play a critical role in pandemic response by enabling faster vaccine development and more adaptable manufacturing systems.

Another global initiative shaping pandemic preparedness is the "100 Days Mission," which aims to develop and deploy vaccines for emerging threats within approximately one hundred days of identifying a new pathogen. Achieving this goal will require technologies capable of rapid design, large-scale production, and flexible adaptation as outbreaks evolve.

Building a diverse and resilient vaccine ecosystem

While mRNA technology offers significant advantages, the study emphasizes that pandemic preparedness should not rely on a single vaccine platform. Traditional influenza vaccines remain a vital component of global health systems and continue to provide large-scale production capacity.

Conventional vaccine approaches include egg-based vaccines, cell-culture vaccines, recombinant protein vaccines, and live attenuated influenza vaccines. These technologies benefit from decades of regulatory experience and established manufacturing infrastructure.

Egg-based vaccines, for example, still account for the majority of global influenza vaccine production. However, these systems depend on large supplies of fertilized eggs and require extended production timelines. During a pandemic, these limitations can delay vaccine availability.

Cell-based and recombinant vaccines offer greater flexibility and avoid some of the constraints associated with egg-based production. However, they still involve manufacturing processes that may not adapt quickly enough during rapidly evolving outbreaks.

Emerging vaccine technologies aim to expand the range of tools available for pandemic response. Nanoparticle-based vaccines are being explored to enhance immune responses by presenting viral proteins in optimized structures. Self-amplifying RNA vaccines represent another promising approach that could reduce the amount of vaccine material required per dose, potentially expanding supply during emergencies.

Researchers are also investigating advanced protein expression systems using microbial, plant-based, or cell-free technologies to accelerate vaccine manufacturing and reduce costs.

The study suggests that combining multiple vaccine technologies could create a more resilient preparedness system. If one platform encounters manufacturing or regulatory obstacles, alternative approaches could still provide protection.

Manufacturing capacity and supply chain resilience remain critical challenges in global pandemic response. Vaccine production relies on complex networks of raw materials, specialized equipment, and skilled personnel. Even highly adaptable platforms require operational facilities capable of scaling production quickly.

To address this issue, global health organizations are promoting the concept of "warm-base" manufacturing. This approach involves maintaining vaccine production infrastructure and trained workforces even during periods without active pandemics. By keeping facilities operational, manufacturers can rapidly expand production when a new threat emerges.

Expanding regional manufacturing capacity is another important priority. Many low- and middle-income countries currently depend on vaccine imports from a small number of manufacturing hubs. During pandemics, these supply chains can become strained, leading to unequal access to life-saving vaccines.

Programs such as the World Health Organization's mRNA technology transfer initiative aim to help countries develop their own vaccine production capabilities. These efforts focus on building technical expertise, regulatory capacity, and supply networks that can support local manufacturing.

Scientific challenges also remain. Influenza viruses interact with the immune system in complex ways that complicate vaccine development. Previous exposure to influenza strains can influence how the immune system responds to new vaccines, a phenomenon known as immune imprinting.

Researchers are also working to identify more reliable indicators of vaccine protection beyond traditional antibody measurements. Advances in immunology and systems biology may help scientists design vaccines that provide broader and longer-lasting protection.

Artificial intelligence and computational biology are emerging as powerful tools in this effort. Machine learning algorithms can analyze large datasets of viral genetic sequences to predict how influenza viruses may evolve. These insights can guide vaccine design and help scientists target viral regions less likely to mutate.

New vaccine delivery technologies may also play a role in improving pandemic response. Microneedle patches, for example, could allow vaccines to be administered without traditional syringes, simplifying mass vaccination campaigns. Oral vaccine formulations and thermostable vaccines that do not require ultra-cold storage could further improve access in resource-limited regions.

Maintaining public trust will be equally important. Rapid vaccine development must be accompanied by transparent safety monitoring and clear communication about benefits and risks. Large-scale safety monitoring systems implemented during the COVID-19 pandemic demonstrated that adverse events can be detected and investigated quickly even during mass vaccination campaigns.

Fuente: Devdiscourse. Disponible en <https://n9.cl/0ae5e>

Varios países de África sufrirán escasez temporal de vacunas contra rotavirus

9 mar. Kenia, Benín, Chad, Tanzania y Zimbabue experimentarán un desabastecimiento temporal de hasta dos meses en las vacunas contra el rotavirus, después de que tres fabricantes mundiales informasen sobre problemas operativos "inesperados", confirmó la Alianza para las Vacunas, Gavi.

"En 2026, el suministro mundial de la vacuna contra el rotavirus será inferior a la demanda prevista de los países que implementan la iniciativa Gavi en aproximadamente 21 millones de dosis", reza un comunicado compartido por correo por un portavoz de la Alianza.

La vacuna previene la gastroenteritis grave en bebés, causante de diarrea y vómitos, y se administra por vía oral a los bebés a las seis, a las diez y a las 14 semanas de edad, una profilaxis que es especialmente necesaria en el África subsahariana.

Mientras que dos de los proveedores experimentaron retrasos



Vacuna rotavirus en África. Foto: Reuters

relacionados con mejoras "esenciales" en la fabricación y un rendimiento de producción inferior al previsto, otro notificó a principios de 2025 reducciones de suministro por complicaciones en su proceso de mejora de sus instalaciones.

"En conjunto, estos problemas han reducido significativamente la producción total. Como resultado, se prevén desabastecimientos temporales de uno a dos meses en cinco países (Kenia, Benín, Chad, Tanzania y Zimbabue)", añadió el portavoz.

Fuente: NOTICIAS VENEVISIÓN. Disponible en <https://n9.cl/27aud>

Ainnocence Calls for Global Collaboration to Deploy AI-Driven Antibody and Vaccine Discovery Against the World's Deadliest Infectious Diseases

Mar 9. Ainnocence Inc., a biotechnology company pioneering AI-driven therapeutic antibody design, today announced the publication of its landmark study, "AI designed, mutation resistant broad neutralizing antibodies against multiple SARS-CoV-2 strains", in Nature Scientific Reports (May 2025). The article demonstrates that artificial intelligence can design antibodies capable of neutralizing viral variants that did not yet exist at the time of design, effectively predicting and pre-empting viral evolution.

"The study demonstrates mutation-resistant antibodies with 269× affinity improvement, a critical proof point for achieving CEPI's 100 Days Mission and closing the therapeutic gap for 2.5 billion people at risk."

What the Study Demonstrated

The published research describes the construction of a "digital twin" for SARS-CoV-2, a computational model that integrates viral genomic data, protein structural modeling, graph neural networks, and protein sequence language modeling to simulate how the virus mutates and how antibodies interact with its spike protein.

Using this digital twin, the Ainnocence team computationally designed neutralizing antibodies against more than 1,300 historical strains of SARS-CoV-2, encompassing 64 distinct mutations in the receptor binding domain (RBD). More than 10^9 antibody mutation candidates were generated and screened in silico before the most promising candidates were selected for experimental validation.

- ⇒ 70 AI-designed antibodies were experimentally validated through binding assays and live viral neutralization assays across multiple SARS-CoV-2 strains.
- ⇒ 14% achieved triple cross-binding reactivity against the RBD of multiple strains in ELISA assays, demonstrating broad-spectrum potential from a single design cycle.
- ⇒ 10 antibodies neutralized the Delta variant with IC50 values below 10 µg/mL, and one antibody neutralized the Omicron variant, a strain that was not present in the original design database, confirming the model's predictive power against future variants.
- ⇒ Sub-nanomolar binding affinity was achieved with a 269× improvement over parental antibody candidates, representing one of the highest affinity gains reported in AI-driven antibody design to date.

"What makes this work significant is not just the binding numbers," said Dr. Lurong Pan, Founder and CEO of Ainnocence. "It is that our AI designed antibodies that worked against viral variants the model had never seen. That is not optimization. That is prediction."

And prediction is what you need when the next pandemic pathogen emerges and you have days, not years, to respond.”

The SentinusAI® Methodology: Sequence-First, Structure-Free, Animal Free

Ainnocence’s proprietary SentinusAI® platform, built on the AINN-P1 protein foundation model, a 167-million-parameter deep learning model trained on more than 53 million protein sequences.

Unlike conventional antibody discovery, antibody discovery approaches that rely on structural data and animal immunization and months of iterative phage display or hybridoma screening; SentinusAI® operate from sequence alone. The platform requires only the amino acid sequence of a target protein to initiate antibody design, no 3D structure, no prior lead compound, no animal model.

The methodology described in the Nature Scientific Reports publication integrates multiple AI architectures in parallel:

- ⇒ Graph Neural Networks (GNNs) to model antibody-antigen molecular interactions as graph structures, capturing spatial and topological relationships between residues.
- ⇒ Protein Sequence Language Models (transformer and LSTM architectures) to learn the “grammar” of protein sequences, identifying hidden dependencies between amino acids that govern folding, binding, and stability.
- ⇒ De novo generation and virtual screening of up to 10^{10} candidate antibody sequences per target, with simultaneous multi-objective optimization for binding affinity, humanization, developability, and off-target safety.
- ⇒ DevProScore™ manufacturability assessment evaluating thermal stability, aggregation propensity, post-translational modification liabilities, and isoelectric point to ensure candidates are developable before entering the wet lab.

The entire pipeline from target sequence input to fully characterized; developability-scored antibody leads operates in approximately 30 days, compared with 3-6 months for traditional methods. This represents an 80% reduction in both timeline and cost, with hit rates reaching 80% versus approximately 50% for conventional approaches.

Why This Matters for the 100 Days Mission

The Coalition for Epidemic Preparedness Innovations (CEPI) has set what it calls a “moonshot” goal: the 100 Days Mission. The ambition, endorsed by G7 and G20 leaders, is for the world to be able to develop safe, effective vaccines, therapeutics, and diagnostics within 100 days of recognizing a pathogen with pandemic potential. Had this capability existed at the start of the COVID-19 pandemic, modeling by Imperial College London suggests that 8 million excess deaths and \$1.4 trillion in productivity losses could have been averted.

The 100 Days Mission is achievable for vaccines, where platform technologies like mRNA have already compressed development timelines. But for therapeutic antibodies, which serve as critical first-line countermeasures before vaccines achieve population-scale immunity, no equivalent acceleration technology existed.

Until now

SentinusAI® is the antibody equivalent of what mRNA platforms achieved for vaccines. When a novel pathogen is identified and its genome sequenced, SentinusAI® can generate therapeutic antibody candidates within 30 days, leaving 70 days within the 100-day window for preclinical validation,

manufacturing scale-up, and regulatory filing.

The published Nature Scientific Reports data proves this is not theoretical: AI-designed antibodies already neutralized variants that emerged after the design phase, demonstrating exactly the kind of rapid, predictive countermeasure development the 100 Days Mission demands.

“The 100 Days Mission cannot be met with conventional antibody discovery,” said Dr. Pan. “Traditional methods require 12-18 months from target identification to lead candidate. That timeline does not bend to political will. It bends only to fundamentally different technology. SentinusAI® provides that technology and our published results prove it works.”

A Career Built for This Moment

Ainnocence's infectious disease capabilities are rooted in the expertise of founder Dr. Lurong Pan, who holds a PhD in Computational Chemistry (UAB) and an MS in AI (Georgia Tech), with 16+ years at the intersection of computational science, AI, and drug discovery.

In 2020, at the height of the COVID-19 pandemic, Dr. Pan was awarded the Merck Pandemic Preparedness Award by Merck KGaA for her “Digital Twin for COVID-19” project, the foundational research that would become the SentinusAI® platform and the basis for the subsequently published Nature Scientific Reports paper.

A Call for Collaboration: 60+ Disease Targets, Zero Approved Antibody Therapeutics

The need is urgent and the gaps are staggering. More than 2.5 billion people live in regions where the deadliest infectious diseases, Nipah virus (40-75% case fatality), Lassa fever (300,000+ cases annually), Marburg virus (up to 88% mortality), MERS-CoV (35% case fatality) have zero approved monoclonal antibody therapeutics. For diseases like Oropouche fever, which caused explosive outbreaks across Latin America in 2024, there is no therapeutic pipeline of any kind.

Ainnocence has mapped 60+ infectious disease targets across all six continents where SentinusAI® can make an immediate impact. These span WHO Blueprint priority pathogens, neglected tropical diseases, and emerging outbreak threats.

Ainnocence Inc. is inviting collaborations:

- ⇒ Government agencies and multilateral health organizations seeking to accelerate pandemic preparedness programs and stockpile development under the 100 Days Mission framework.
- ⇒ Product development partnerships (PDPs) working on neglected tropical diseases where conventional antibody discovery is too slow and too expensive for the available funding.
- ⇒ Pharmaceutical and biotechnology companies looking to add AI-accelerated antibody

scientific reports

OPEN AI designed, mutation resistant broad neutralizing antibodies against multiple SARS-CoV-2 strains

Yue Kang, Kevin Jin & Lurong Pan¹

In this study, we developed a digital twin for SARS-CoV-2 by integrating diverse data and metadata with multiple data types and processing strategies, including machine learning, natural language processing, protein structural modeling, and protein sequence language modeling. This approach enabled us to computationally design neutralizing antibodies against over 1300 historical strains of SARS-CoV-2, encompassing 64 mutations in the receptor binding domain (RBD) region. 70 AI-designed antibodies were experimentally validated through binding assay and real viral neutralization assays against various strains, including later Omicron strains (not present in the initial design database). 14% of these antibodies exhibited strong reactivity against the RBD of multiple strains, achieving triple cross-binding hit rates using ELISA assay. 10 antibodies neutralized the cytopathic effects (CPE) of the Delta strain at IC50 values of <math>< 10 \mu\text{g/ml}</math>, and one antibody neutralized the CPE of Omicron. These findings demonstrate the potential of our approach to influence future therapeutic design for existing virus strains and predict hidden patterns in viral evolution that AI can leverage to develop emerging antiviral treatments.

The evolution of new strains of SARS-CoV-2 has rendered many previously approved antibody therapeutics ineffective, especially those that target the spike protein of the virus. Among the hundreds of various mutations in its genome, those within the ACE2 receptor binding domain (RBD) of the spike protein have been the major focus for researchers, as these mutations drastically affect the binding strength of the spike protein with the ACE2 receptor. For instance, the L452R substitution found in the B.1.427 and B.1.429 lineages significantly reduce virus susceptibility to bamastivimab¹, as well as modestly decreasing its susceptibility to the combination of bamastivimab and etesevimab^{2,3}.

In the present study, we used artificial intelligence (AI) to generate more than 10^7 antibody mutations in silico and then virtually screen antibody sequences for candidates that can bind broadly and with high affinities to known spike protein RBD variants.

Graph neural networks (GNNs)⁴ are neural network architectures designed specifically to cope with graph data. Nodes in the graph are designed to learn an embedding that contains information about their associated neighbors. The embeddings can function as characteristic features for node labeling, edge prediction, and graph representation with proper readout and pooling methods^{5,6}. The intrinsic design of GNN makes it well-suited to study molecular and biological interactions and other chemical and physical properties. We therefore seek to describe antibody-antigen interactions in a graph-based manner.

Language-based networks can also model proteins based on the assumption that the primary protein structure is analogous to natural language sequences^{7,8}. Hidden dependencies and interactions between amino acids may be trainable by the temporal dynamic inhomogeneity designed in the basic recurrent neural networks, such as long short-term memory networks (LSTM) and transformer neural networks.

We explored several modeling strategies for GNN and natural language processing architectures, in which protein sequences are described using graph-based and language-based representations, respectively.

Overall, this study describes an AI-based approach using deep learning which can capture information for antibody-antigen binding using the protein sequences without any additional data. This model can predict the mutational impact of the protein-protein interaction for rapidly evolving targets such as the different strains of SARS-CoV-2. Our study describes using a deep learning model to computationally design effective and broad-spectrum mutations against various strains of the virus' spike protein, and subsequent wet-lab experimentation confirms the findings. Because of the efficient nature of this AI-driven antibody discovery approach, it may

Ainnocence Inc., Suite B PMB 1147, Mountain View, CA 94040, USA. [✉]email: lurong.pan@ainnocence.com

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nature portfolio

candidates to their infectious disease pipelines or license the SentinusAI® platform for internal discovery.

- ⇒ Academic and public health research institutions study high-consequence pathogens who need rapid, cost-effective antibody design against novel targets.

Ainnocence offers three engagement models:

1. Fee-for-service (target to leads in 3-4 weeks)
2. Co-development partnerships (discovery through IND with shared milestones)
3. Platform licensing (dedicated SentinusAI® deployment within partner organizations).

Looking Ahead

“COVID-19 taught the world a painful lesson: we cannot discover our way out of a pandemic at the speed of traditional R&D,” said Dr. Pan. “Our published data shows that AI can design antibodies that not only bind today’s pathogens but anticipate tomorrow’s variants. That capability, predictive, rapid, and scalable is exactly what the 100 Days Mission requires. We have the platform and the proof. Now we need partners who share the urgency.”

About Ainnocence Inc.

Founded in 2021 and headquartered in Mountain View, California, Ainnocence Inc. is a next-generation biotechnology company uses its proprietary generative AI platform to screen up to 10 billion molecules within hours to accelerate drug discovery across antibodies, small molecules, cell therapies, and synthetic biology. Working directly from sequence data, without 3D structural modeling; the platform has been applied across 60+ therapeutic programs. The company partners with leading pharmaceutical companies, academic institutions, and global health organizations to accelerate the discovery of life-saving biologics. For more information, visit www.ainnocence.com.

Fuente: BioSpace. Disponible en <https://n9.cl/gj6kg>

Los cofundadores de BioNTech crearán una empresa sobre ARN mensajero

10 mar. Los cofundadores del laboratorio alemán BioNTech anunciaron el martes que dejarán sus cargos directivos para crear una empresa dedicada a las innovaciones en ARN mensajero (ARNm), tecnología que impulsó el éxito de su vacuna contra la COVID-19.

Esta empresa biotecnológica independiente contará con "recursos, operaciones y opciones de financiación separadas de BioNTech y estará dedicada a la investigación y desarrollo de innovaciones de nueva generación basadas en ARNm", indica un comunicado.

Ugur Sahin y Özlem Türeci, un matrimonio de investigadores alemanes de origen turco, dejarán la empresa que fundaron en 2008 y que se convirtió en pionera en la carrera por la vacuna durante la pandemia. De hecho lograron imponerse a sus competidores al obtener, junto con la estadounidense Pfizer, la primera autorización de comercialización para una vacuna contra el coronavirus.

Posteriormente BioNTech registró enormes beneficios y una fuerte expansión.

Hoy, sin embargo, sus ingresos disminuyeron y los costos de desarrollo de tratamientos contra el cáncer y otras enfermedades son elevados. Como resultado el grupo con sede en Maguncia (oeste de Alemania) registró una pérdida de 1.100 millones de euros en 2025.

Ugur Sahin y esposa quieren "volver a ser pioneros en la investigación del ARNm" y ven "oportunidades extraordinarias para liberar la próxima generación de innovaciones transformadoras", señala el comunicado.

Esto podría lograrse "en combinación con la inteligencia artificial", declaró el cofundador de BioNTech al diario económico Handelsblatt.

BioNTech prevé mantener un vínculo con la futura start-up, aportándole derechos de propiedad intelectual y tecnologías de ARNm a cambio de una participación minoritaria, regalías y pagos vinculados al cumplimiento de hitos clave. Todo ello se formalizará mediante un acuerdo vinculante antes de finales de junio, según el comunicado.

Los directivos se incorporarán a la dirección de su nueva empresa antes de finales de 2026.

Fuente: France 24. Disponible en <https://n9.cl/tj5w7>

Dengue vaccine remains 80.5% effective against severe cases after five years

Mar 11. In a phase 3 clinical trial, the tetravalent dengue vaccine, developed by the Butantan Institute in São Paulo, Brazil, was 80.5% effective against severe dengue cases with warning signs over a five-year period. The results of the trial are published in *Nature Medicine*.

The study was conducted at 16 research centers across Brazil's five regions. From February 2016 to July 2019, 16,235 participants between the ages of 2 and 59 were recruited. Of those, 10,259 received a single dose of the vaccine, while 5,976 received a placebo.

There were no reports of hospitalization in the vaccinated group, compared to eight cases in the placebo group.

Overall, the vaccine was 65% effective in preventing symptomatic dengue (caused by any serotype) during the five years of monitoring.

The vaccine, called Butantan-DV, was approved by the Brazilian Health Regulatory Agency (ANVISA) on November 26, 2025, for use by the Brazilian population aged 12 to 59. Since then, the institute has sent 1.3 million doses to the National Immunization Program (PNI), which distributes them to Brazil's national public health network, the SUS (Sistema Único de Saúde).

In January 2026, the Ministry of Health began a pilot project to immunize 90% of the target population in Nova Lima (Minas Gerais state), Maranguape (Ceará state), and Botucatu (São Paulo state). The vaccination of primary care health professionals began on February 9.

The vaccine protects against different types of the dengue virus because of its tetravalent composition. This means that it contains specific components to combat the four known serotypes: DENV-1, DENV-2, DENV-3, and DENV-4.

The vaccine uses live viruses that have been "weakened" (attenuated) in a laboratory setting so that they cannot cause disease, yet are still able to stimulate an immune response. The strains used are based on technology originally developed by the United States National Institutes of Health (NIH).



For DENV-1, DENV-3, and DENV-4, the vaccine uses nearly complete genomes of the respective viruses. For DENV-2, protection is built using a chimeric virus consisting of DENV-2 surface proteins mounted on the attenuated structure ("skeleton") of the DENV-4 virus.

Once administered, the vaccine generates vaccine viremia, the controlled replication of these attenuated viruses in the body. This process induces the immune system to produce neutralizing antibodies specific to each of the four serotypes. The goal is to create specific immunity to each serotype so that the body recognizes and neutralizes each variant individually.

"This vaccine is establishing itself as a very important tool in the fight against dengue in Brazil, with the potential to contribute to reducing the circulation of the virus, in addition to individual protection," Fernanda Boulos, the institute's medical director of clinical trials, told the Butantan Communications Office.

Fuente: MedicalXpress. Disponible en <https://n9.cl/wuvc1>

Pfizer Advances Next-Gen Pneumococcal Vaccine With Completed Phase 2 Toddler Study

Mar 12. Pfizer Inc. (PFE) has completed a Phase 2 study called "A Phase 2, Randomized, Partially Double-Blind Trial to Evaluate the Safety, Tolerability, and Immunogenicity of a Multivalent Pneumococcal Conjugate Vaccine Administered in Healthy Toddlers 12 Through 15 Months of Age." The goal is to see how well a new pneumococcal vaccine protects toddlers and how safe and tolerable it is, a key step to defend against serious childhood infections and to extend Pfizer's vaccine franchise.

The trial tests a new multivalent pneumococcal conjugate vaccine, code-named PG4, and compares it with Pfizer's marketed 20-valent pneumococcal conjugate vaccine, Prevnar 20 (20vPnC). PG4 is designed to broaden protection against more strains of pneumococcal bacteria, while Prevnar 20 serves as an active control and helps benchmark safety and immune response in a real-world commercial context.

The study is interventional and randomized, meaning toddlers are assigned by chance to one of several groups. It uses a parallel design with a partially blinded setup, so most participants and study staff do not know which vaccine is given, and the main aim is prevention, not treatment, allowing a cleaner read on vaccine safety and immune response.

Children are split into three groups: a PG4 1-dose arm, a PG4 2-dose arm, and a single-dose Prevnar 20 arm. The PG4 groups differ only in how many injections they receive, while the Prevnar 20 group helps Pfizer gauge if PG4 can match or beat the current standard, which is critical for future approval and commercial positioning in the pediatric market.

The study was first submitted on July 23, 2024, marking the formal start of regulatory tracking and signaling the early clinical push for PG4. The latest update was filed on March 9, 2026, and the status now shows as completed, which means data collection is done and investors can start to look ahead to upcoming readouts and possible conference presentations.

While primary and final completion dates are not detailed here, toddlers participated for about 6 to 8 months depending on dose group. This window covered clinic visits, vaccine administration, and blood draws, and it suggests that immune-response and safety data should be robust enough to support

dose and schedule decisions for a potential Phase 3 program.

For investors, the main takeaway is that Pfizer continues to invest in next-generation pneumococcal vaccines, a category that already generates material revenue through Prevnar. A positive Phase 2 outcome for PG4 could extend Pfizer's lead in pediatric vaccines, protect share against rivals like Merck in pneumococcal disease, and underpin long-term, high-margin recurring sales from national immunization programs.

In the near term, sentiment around PFE could benefit from the perception that its vaccine pipeline is deeper than current earnings suggest, especially as COVID vaccine revenue normalizes. The real share-price impact will depend on how PG4's safety and immune profile compares with Prevnar 20, but a completed Phase 2 study in toddlers is a meaningful de-risking step for this asset.

The trial is now listed as completed and has been recently updated, and investors can track future data releases and regulatory steps as they appear on the ClinicalTrials portal.

Fuente: THE GLOBE AND MAIL. Disponible en <https://n9.cl/eju8q>



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Patentes registradas en Patentscope

Estrategia de búsqueda: (Vaccine) AND DP:([1.03.2026 TO 12.03.2026]) as the publication date 39 records.

1. [WO/2026/050432](#) ENGINEERED FLAVIVIRUS ANTIGENS AND USES THEREOF

WO - 05.03.2026

Clasificación Internacional [A61K 39/12N](#)° de

solicitud PCT/US2025/043820 Solicitante [VACCINE](#) COMPANY, INC. Inventor/a WEIDENBACHER, Payton Anders-Benner

The present disclosure provides modified flavivirus polypeptides useful as antigens and polynucleotides encoding the same, and related compositions, methods of making, and methods of using. Also provided herein are enveloped virus-like particles and cells comprising all or a portion of said modified flavivirus polypeptides. In particular, these modified flavivirus polypeptides are useful for eliciting an immune response against flavivirus infection.

2. [20260061046](#) COMBINATION [VACCINE](#) FOR PREVENTION OF INFLUENZA AND CORONAVIRUS INFECTIONS

US - 05.03.2026

Clasificación Internacional [A61K 39/145N](#)° de solicitud 19382507 Solicitante NATIONAL UNIVERSITY CORPORATION HOKKAIDO UNIVERSITY Inventor/a Masashi SHINGAI

Disclosed is a combination [vaccine](#) for prevention of influenza and novel coronavirus infections. The combination [vaccine](#) for vaccination against influenza and novel corona viruses was obtained by inactivating all influenza virus particles and all novel coronavirus particles respectively, thereby inducing the antibodies to each virus without affecting each [vaccine](#) effect, so that the defensive effects were obtained against the attacks of each virus. In addition, the combination [vaccine](#) with this combination exhibited favorable neutralizing antibody induction and defensive effects to the attacks of these viruses even without addition of an adjuvant.

3. [WO/2026/049474](#) IMMUNOGENIC COMPOSITION COMPRISING MALONATE SEMIALDEHYDE DECARBOXYLASE (MSAD), AND [VACCINE](#) COMPOSITION FOR PREVENTING OR TREATING NONTUBERCULOUS MYCOBACTERIA INFECTION, COMPRISING SAME

WO - 05.03.2026

Clasificación Internacional [A61K 39/04N](#)° de solicitud PCT/KR2025/012997 Solicitante SEOUL NATIONAL UNIVERSITY R&DB FOUNDATION Inventor/a KIM, Bum-Joon

The present invention relates to an immunogenic composition comprising a malonate semialdehyde decarboxylase (MSAD) protein or a polynucleotide encoding same, and a [vaccine](#) composition and a pharmaceutical composition for preventing or treating nontuberculous mycobacteria infection, which

comprise same. The vaccine composition and the pharmaceutical composition, which comprise the MSAD protein or the polynucleotide encoding same, of the present invention, have excellent preventive and therapeutic efficacy against nontuberculous mycobacteria infection. In addition, the vaccine composition and the pharmaceutical composition, which comprise the MSAD protein or the polynucleotide encoding same, of the present invention, have a greater effect of preventing and treating nontuberculous mycobacteria infection when administered intranasally, and have a greater effect of preventing and treating nontuberculous mycobacteria infection when used in combination with an immune adjuvant.

4. [WO/2026/055587](#) VESICULAR STOMATITIS VIRUS MARBURG VIRUS VACCINE

WO - 12.03.2026

Clasificación Internacional [A61K 39/12N](#)° de

solicitud PCT/US2025/045321 Solicitante INTERNATIONAL AIDS VACCINE INITIATIVE, INC. Inventor/a PARKS, Christopher, L.

The present invention relates to a vesicular stomatitis virus vaccine vector encoding a MARV glycoprotein (rVSVAG-MARV-GP). Vaccination with as little as 200 plaque-forming units was 100% efficacious against MARV lethality and prevented development of viremia. rVSVAG-MARV-GP vaccination induced MARV GP-specific serum IgG, and virus-neutralizing activity in serum was detectable in animals vaccinated with the highest doses. Vaccination may occur via intramuscular administration, oral administration, or intranasal administration.

5. [WO/2026/049553](#) COMPOSITION FOR ENHANCING VACCINE IMMUNE RESPONSE, COMPRISING INTESTINAL MICROORGANISMS AS ACTIVE INGREDIENTS

WO - 05.03.2026

Clasificación Internacional [A61K 39/39N](#)° de solicitud PCT/KR2025/013268 Solicitante KOREA UNIVERSITY RESEARCH AND BUSINESS FOUNDATION Inventor/a SONG, Joon-young

The present invention relates to an intestinal microorganism-based composition for enhancing the efficacy of vaccinations, in particular, the persistence of antibody reactions and booster effects. The present inventors have found that specific intestinal microorganisms are significantly abundant in individuals having a long antibody half-life following vaccination with an mRNA vaccine or an adenovirus vector vaccine, or exhibiting a high immune response upon booster vaccination. Specifically, it was found that a specific microbial community including *Faecalibacterium prausnitzii* is associated with antibody persistence and booster response enhancement following mRNA vaccination, and *Escherichia coli* is associated with antibody persistence following adenovirus vector vaccination.

6. [WO/2026/047307](#) HSP110-ENRICHED AUTOLOGOUS CANCER VACCINE

WO - 05.03.2026

Clasificación Internacional [A61K 39/00N](#)° de

solicitud PCT/FR2025/050775 Solicitante HASTIM Inventor/a ROUQUET, Nicole

The invention relates to an autologous cancer vaccine and to the method for preparing same. The autologous vaccine according to the present invention is based on hydroxyapatite and/or tricalcium phosphate particles on which tumor proteins are adsorbed, these tumor proteins being enriched in HSP110.

7.WO/2026/046276MULTIVALENT INFLUENZA MRNA **VACCINE**

WO - 05.03.2026

Clasificación Internacional C12N 15/62Nº de solicitud PCT/CN2025/117472Solicitante RINUAGENE BIOTECHNOLOGY CO., LTD.Inventor/a DONG, Yijie

The present invention provides an isolated mRNA molecule, comprising the following elements in sequence from a 5' end to a 3' end: (1) a 5' cap; (2) a 5'UTR region; (3) an immunogenic fragment-coding region of influenza virus hemagglutinin (HA); (4) a 3'UTR region; and (5) a PolyA tail. The PolyA and coding region sequence of the mRNA molecule are both optimized, so that an mRNA influenza **vaccine** has controllable quality during production and exerts optimal immune response. Also provided are a composition and **vaccine** comprising the mRNA, and a method for using same to induce an immune response to an influenza virus in a subject.

8.WO/2026/045872NOVEL ADJUVANT POLYPEPTIDE SEQUENCE AND USE THEREOF

WO - 05.03.2026

Clasificación Internacional C07K 14/33Nº de solicitud PCT/CN2025/113132Solicitante RONGCAN (SHANGHAI) BIOTECH CO., LTDInventor/a ZHANG, Xueqing

The present invention relates to the field of vaccines, and in particular to a novel adjuvant polypeptide sequence and a use thereof. The adjuvant polypeptide sequence provided by the present invention comprises amino acid sequences of tetanus toxoid epitopes P2 and P16 and further comprises amino acid sequences of P30 and/or PX. The adjuvant polypeptide sequence aims to expand the coverage population of immune responses by increasing epitope diversity. In addition, the present invention uses an LNP (lipid nanoparticle) delivery system to introduce an mRNA encoding an adjuvant polypeptide and an initial antigen protein into a human body, thereby improving the immunostimulatory ability of the initial antigen. The adjuvant polypeptide sequence provided by the present invention and the initial antigen sequence are preferably fused, thereby simplifying the composition of mRNA in a nucleic acid **vaccine** and reducing the complexity of **vaccine** preparation.

9.WO/2026/054672PNEUMONIA **VACCINE**

WO - 12.03.2026

Clasificación Internacional C07K 14/255Nº de solicitud PCT/RU2025/050110Solicitante DUKHOVLINOV, Iliia VladimirovichInventor/a DUKHOVLINOV, Iliia Vladimirovich

The invention relates to the field of health care, and more particularly to the prevention of infections that cause pneumonia and other illnesses using an immunogenic protein containing fragments of the proteins FliC, PspA, OmpA and PE, connected by rigid linkers, wherein: - the FliC protein fragment contains SEQ ID NOs: 2 and 3 connected to one another by a flexible linker; - the PspA protein fragment contains SEQ ID NO: 4; the OmpA protein fragment contains SEQ ID NOs: 5-8 connected to one another by flexible linkers; - the PE fragment contains SEQ ID NO: 9. Also proposed are a host cell and a method for producing the protein. The immunogenic protein is suitable for use as a broad-spectrum polyvalent **vaccine** and exhibits a marked protective effect against Streptococcus pneumoniae, Haemophilus influenzae and Klebsiella pneumoniae, as well as providing for production efficiency and safety.

10.WO/2026/047168POLYPEPTIDE SUBDOMAIN MALARIA **VACCINE**

WO - 05.03.2026

Clasificación Internacional A61K 39/015N° de solicitud PCT/EP2025/074592 Solicitante STICHTING RADBOUD UNIVERSITAIR MEDISCH CENTRUM Inventor/a JORE, Matthijs Miklas

The invention is in the field of vaccines, particularly in the field of polypeptide vaccines that target malaria. Malaria is caused by a parasite that is transmitted by mosquitoes. Transmission-blocking vaccines can prevent transmission from human to mosquito and thus can prevent spread of the disease. The invention provides polypeptides that show remarkable efficiency when used in a transmission-blocking vaccine strategy.

11. WO/2026/052881 CHIKUNGUNYA VIRUS VACCINE MULTIDOSE FORMULATION AND USE THEREOF IN OUTBREAKS

WO - 12.03.2026

Clasificación Internacional A61K 39/12N° de solicitud PCT/EP2025/075699 Solicitante VALNEVA AUSTRIA GMBH Inventor/a WALLE, Prasad

The present invention relates to a multidose lyophilized vaccine composition for the prevention or treatment of a chikungunya virus infection and/or a chikungunya virus associated clinical illness of any severity. Further provided are methods for manufacturing lyophilized multidose compositions comprising an attenuated chikungunya virus and kits comprising such compositions.

12. 20260061047 NEWCASTLE DISEASE VIRUS WITH IMPROVED HEAT RESISTANCE, AND NEWCASTLE DISEASE VIRUS VACCINE COMPRISING SAME

US - 05.03.2026

Clasificación Internacional A61K 39/17N° de solicitud 19125251 Solicitante BIOPOA, INC. Inventor/a Sun-Hee Cho

The present specification provides: a Newcastle disease virus with improved heat resistance; a Newcastle disease vaccine comprising the virus; a polypeptide comprising an L protein in the virus; a polynucleotide encoding same; and a recombinant vector comprising the polynucleotide.

13. WO/2026/045748 USE OF tRNA IN PROMOTING PROTEIN-CODING ABILITY OF mRNA

WO - 05.03.2026

Clasificación Internacional C12N 15/113N° de solicitud PCT/CN2025/109246 Solicitante PEKING UNIVERSITY Inventor/a XIA, Qing

The present invention relates to the use of tRNA in promoting the protein-coding ability of mRNA. The expression level of a target protein is improved by means of overexpressing tRNA, and a codon corresponding to the tRNA can promote or improve the stability of the mRNA. Further provided is a new tRNA+mRNA immunopotentiating vaccine. By means of introducing one or more tRNA molecules, the antigen protein encoding ability of an mRNA vaccine is enhanced, thereby eliciting stronger humoral and cellular immune responses in vivo. Further provided is a recombinant cell for producing an antibody. The recombinant cell overexpresses tRNA capable of increasing the expression level of the antibody, and the tRNA comprises a tRNA isodecoder family. Further provided is a recombinant cell for producing or packaging recombinant AAV, wherein the recombinant cell overexpresses tRNA capable of improving the AAV packaging efficiency.

14. WO/2026/046768 MUCOSAL VACCINE ADJUVANT

WO - 05.03.2026

Clasificación Internacional A61K 39/12N° de solicitud PCT/EP2025/073597 Solicitante THE

PROVOST, FELLOWS, FOUNDATION SCHOLARS, AND THE OTHER MEMBERS OF BOARD, OF THE COLLEGE OF THE HOLY AND UNDIVIDED TRINITY OF QUEEN ELIZABETH, NEAR DUBLIN
Inventor/a LAVELLE, Ed

This invention relates to a mucosal **vaccine** composition and to an adjuvant comprising highly deacetylated chitosan for use in a method of immunotherapy, wherein the adjuvant is administered by a mucosal administration.

15. WO/2026/045325A FUSION PROTEIN FOR THE PREVENTION OF STREPTOCOCCUS PNEUMONIAE INFECTION AND ITS APPLICATION

WO - 05.03.2026

Clasificación Internacional A61K 39/09N° de solicitud PCT/CN2025/090122 Solicitante NANJING CHENGSHI BIOMEDICAL TECHNOLOGY CO., LTD. Inventor/a HAN, Tiyun

The present invention relates to a fusion protein, immunogenic composition, recombinant **vaccine**, and molecular architecture design and application, etc., for the prevention of Streptococcus Pneumoniae infection. The present invention starts from the protein molecular tertiary structures of ply and PhtD, and via creatively screening, the C-terminal domain of ply protein and the N-terminal domain of phtD protein are finally selected to construct a fusion protein, and the elements such as Fc domain and STABILON are further added. The fusion protein molecule of the present invention can weaken tissue lesions caused by Streptococcus Pneumoniae infection, has good immunogenicity, has an effective preventive and immunoprotective effect, and efficiently prevents Streptococcus Pneumoniae infection. The immunogenic composition, fusion protein, and recombinant **vaccine** for preventing Streptococcus Pneumoniae infection of the present invention have broad application prospects.

16. WO/2026/046991 **VACCINE**

WO - 05.03.2026

Clasificación Internacional A61K 39/12N° de solicitud PCT/EP2025/074270 Solicitante NEC ONCOIMMUNITY AS Inventor/a VARDAXIS, Alexandros Ioannis

The present invention relates to immunogenic protein sequences, and polynucleotides, compositions, and **vaccine** compositions thereof, which have been optimised for the prophylactic or therapeutic treatment of an infection caused by Betacoronaviruses, and have the ability to confer a broad immunity against multiple Betacoronavirus subgenera, species, and viral variants.

17. WO/2026/050864 **VACCINES AND METHODS FOR THE TREATMENT OF NEISSERIA GONORRHOEAE INFECTIONS**

WO - 12.03.2026

Clasificación Internacional A61K 39/095N° de solicitud PCT/CA2025/051173 Solicitante ENGINEERED ANTIGENS INC. Inventor/a FEGAN, Jamie E.

Disclosed are novel **vaccine** compositions comprising multiple N. gonorrhoeae TbpB proteins or immunogenically equivalent portions thereof. The **vaccine** compositions may be used to ameliorate or prevent pathogenic infections in humans, caused by N. gonorrhoeae. Related methods and uses are also disclosed.

18. WO/2026/047025 **PHOTOCONTROLLABLE CONJUGATE, PHARMACEUTICAL COMPOSITION**

AND KIT COMPRISING THE SAME, AND USES THEREOF

WO - 05.03.2026

Clasificación Internacional A61K 41/00Nº de solicitud PCT/EP2025/074341 Solicitante RHEINISCHE FRIEDRICH-WILHELMS-UNIVERSITÄT BONN Inventor/a HARTMANN, Gunther

The present invention relates to a light-activatable photocaged conjugate, which, upon activation, is capable of inducing an immune response, wherein said conjugate comprises: (a) at least one double-stranded oligonucleotide, comprising: (i) a first strand of a ribonucleic acid having a length of at least eight nucleotides; and (ii) a second strand of a ribonucleic acid having a length of at least eight nucleotides and forming complementary base pairs with the first strand; and (b) at least one photoremovable protecting group (PPG); wherein the at least one PPG is coupled to a ribose at the 2'-O-position or a nucleobase of a nucleotide in the first or second strand of the at least one double-stranded oligonucleotide according to item (a). The present invention moreover provides a pharmaceutical composition, a drug delivery system, an adjuvant, a **vaccine** and kit for use in medicine, each of them comprising a conjugate according to the invention. The present invention also relates to said conjugate for use as a medicament, for use as a **vaccine**, for use as an adjuvant, for use in a method of treatment or prevention of a disease, for use in a method of infiltrating immune cells, preferably T cells, and for use in a method of turning cold into hot tumours.

19. WO/2026/055709 MITOCHONDRIA-FACILITATED DELIVERY OF MRNA

WO - 12.03.2026

Clasificación Internacional A61K 35/12Nº de solicitud PCT/US2025/045647 Solicitante WASHINGTON UNIVERSITY Inventor/a CURIEL, David

Among the various aspects of the present disclosure is the provision of compositions and methods of a gene delivery system. The compositions include at least one therapeutic molecule and an isolated mitochondria, and optionally further complexed to a lipid nanoparticle. Methods of molecule delivery include the use of isolated mitochondria as a vector for the delivery of the therapeutic molecule. A method of treating a patient in need of a gene **vaccine** is also described, in which the mRNA of the administered composition encodes a **vaccine** antigen, including but not limited to at least a portion of a SARS-CoV-2 spike protein.

20. 3293912 CORONAVIRUS **VACCINE** COMPOSITION, METHOD THEREFOR AND USE THEREOF

CA - 01.03.2026

Clasificación Internacional A61K 38/00Nº de solicitud 3293912 Solicitante SICHUAN CLOVER BIOPHARMACEUTICALS, INC. Inventor/a Peng LIANG

21. 3292600 **VACCINE** COMPOSITION AGAINST AFRICAN SWINE FEVER VIRUS

CA - 01.03.2026

Clasificación Internacional A61K 39/12Nº de solicitud 3292600 Solicitante CENTRO DE INGENIERÍA GENÉTICA Y BIOTECNOLOGÍA Inventor/a Mario Pablo ESTRADA GARCIA

22. 3287856 METHOD FOR TREATING TUMORS USING COMBINATION OF ONCOLYTIC VIRUS **VACCINE** AND IMMUNE CELLS

CA - 01.03.2026

Clasificación Internacional A61K 35/766Nº de solicitud 3287856 Solicitante JOINT BIOSCIENCES

(SH) LTD.Inventor/a Guoqing ZHOU

23.WO/2026/047192IONIZABLE LIPIDS

WO - 05.03.2026

Clasificación Internacional C07C 323/12Nº de solicitud PCT/EP2025/074647Solicitante ETHERNA IMMUNOTHERAPIES NVInventor/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 formula (I). 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 comprising nanoparticle compositions based on the ionizable lipid disclosed herein.

24.WO/2026/050132DOMINANT NEGATIVE TOXOID ANTIGEN APPROACH FOR PROPHYLACTIC AND POST-INFECTION TREATMENT OF SWINE AGAINST AFRICAN SWINE FEVER VIRUS WITH DIFFERENTIATING INFECTED FROM VACCINATED ANIMALS (DIVA) CAPABILITY

WO - 05.03.2026

Clasificación Internacional A61K 39/12Nº de solicitud PCT/US2025/043301Solicitante MALCOLM, ThomasInventor/a MALCOLM, Thomas

A composition including modified ASFV outer-membrane protein antigen mutants (termed dominant negative toxoid antigens) that exhibit non-binding affinity to RBCs while inducing an antibody-mediated response capable of neutralizing unmodified proteins found on infectious outer-membrane-laden ASFV virions. A method for the treatment and/or prevention of ASFV by administering a dominant negative toxoid antigenic composition to animals, thereby averting RBC aggregation caused by the antigen and concurrently treating and/or preventing ASFV. An ASFV **vaccine** composition including dominant negative toxoid antigens. A composition including dominant negative toxoid antigens in conjunction together and in conjunction with antigens derived from capsid-based proteins, which collectively target both lysogenic and lytic viral replication cycles, thereby achieving optimal immune stimulatory protection. Methods and compositions allowing for differentiation of infected from vaccinated animals (DIVA).

25.3297782VIRAL-VECTOR RECOMBINANT **VACCINE** AGAINST PORCINE EPIDEMIC DIARRHEA

CA - 01.03.2026

Clasificación Internacional A61K 39/215Nº de solicitud 3297782Solicitante LABORATORIO AVI-MEX, S.A. DE C.V.Inventor/a Bernardo LOZANO-DUBERNARD

26.WO/2026/052882YELLOW FEVER VIRUS (YFV) COMPOSITIONS AND PRODUCTION THEREOF

WO - 12.03.2026

Clasificación Internacional C12N 7/02Nº de solicitud PCT/EP2025/075700Solicitante VALNEVA AUSTRIA GMBHInventor/a SCHLEGL, Robert

The present invention relates to a process for producing high yields of yellow fever virus (YFV) particles for **vaccine** manufacture. Also provided are liquid frozen or lyophilized YFV or chikungunya virus (CHIKV) formulations, and their use in the prevention of a yellow fever and chikungunya virus

infections. Further provided are combination liquid or lyophilized formulations of YFV and CHIKV, and their use in the prevention of yellow fever virus and chikungunya virus infections.

27. [3297282](#) VARICELLA-ZOSTER VIRUS (VZV) **VACCINE**

CA - 01.03.2026

Clasificación Internacional [A61K 39/25](#)Nº de solicitud 3297282 Solicitante SHENZHEN SHENXIN BIOTECHNOLOGY CO., LTD. Inventor/a Linxian LI

28. [3296649](#) RESPIRATORY SYNCYTIAL VIRUS (RSV) **VACCINE**

CA - 01.03.2026

Clasificación Internacional [A61K 39/12](#)Nº de solicitud 3296649 Solicitante SHENZHEN SHENXIN BIOTECHNOLOGY CO., LTD. Inventor/a Linxian LI

29. [WO/2026/055516](#) METHOD FOR PREVENTION AND TREATMENT OF VIRAL DISEASE

WO - 12.03.2026

Clasificación Internacional [A61K 39/145](#)Nº de solicitud PCT/US2025/045185 Solicitante MOREHOUSE SCHOOL OF MEDICINE Inventor/a GRAHAM, Barney S.

A method for reducing mortality resulting from viral infection, reducing viral load resulting from viral infection, or increasing immunity to viral infection in a subject is described. The method comprises administering a hybrid protein comprising a first domain comprising a sequence encoding a surface protein of an enveloped RNA virus and a second domain comprising a sequence encoding an ectodomain of a type 2 transmembrane domain protein, wherein the second domain is located at the C-terminal of the first domain. The hybrid protein or an mRNA encoding such protein can be used as a **vaccine** against the infection of the enveloped RNA virus.

30. [3289084](#) RECOMBINANT EXPRESSION VECTOR FOR PRODUCTION OF VIRUS-LIKE PARTICLE-BASED MULTIVALENT NOROVIRUS **VACCINE** AND MANUFACTURING METHOD THEREFOR

CA - 01.03.2026

Clasificación Internacional [A61K 39/125](#)Nº de solicitud 3289084 Solicitante INTHERA INC. Inventor/a Deog Young CHOI

31. [WO/2026/054725](#) USE OF MIR-342 ENRICHED, TAMOXIFEN LOADED, MESENCHYMAL STEM CELL DERIVED EXOSOMES FOR OVERCOMING TAMOXIFEN RESISTANCE IN BREAST CANCER

WO - 12.03.2026

Clasificación Internacional [A61K 31/7105](#)Nº de solicitud PCT/TR2024/051057 Solicitante BURSA ULUDAĞ ÜNİVERSİTESİ Inventor/a ÇEÇENER, Gülşah

The invention relates to a pharmaceutical composition comprising tamoxifen-loaded mesenchymal stem cell-derived exosomes enriched with miR-342 for use in the pharmaceutical and **vaccine** industry, in the treatment of cancer, in the treatment of breast cancer, in overcoming tamoxifen resistance in the treatment of estrogen receptor positive breast cancer using tamoxifen.

32. [3295010](#) RSV **VACCINE** COMPOSITION, METHOD AND USE THEREOF

CA - 01.03.2026

Clasificación Internacional [A61K 39/155](#)Nº de solicitud 3295010 Solicitante SICHUAN CLOVER

BIOPHARMACEUTICALS, INC.Inventor/a Joshua LIANG

33.325774RSV **VACCINE**

IL - 01.03.2026

Clasificación Internacional A61K 39/00Nº de solicitud 325774Solicitante ASTRAZENECA

ABIInventor/a LALIBERTE, Jason Paul

34.3294011ADENOVIRAL VECTOR **VACCINE**, AND PREPARATION METHOD AND USE THEREOF

CA - 01.03.2026

Clasificación Internacional A61K 35/761Nº de solicitud 3294011Solicitante CANSINO BIOLOGICS

INC.Inventor/a Juan SHAO

35.20260061045METHOD FOR PREVENTION AND TREATMENT OF VIRAL DISEASE

US - 05.03.2026

Clasificación Internacional A61K 39/145Nº de solicitud 19320827Solicitante MOREHOUSE SCHOOL OF MEDICINEInventor/a Barney S. GRAHAM

A method for reducing mortality resulting from viral infection, reducing viral load resulting from viral infection, or increasing immunity to viral infection in a subject is described. The method comprises administering a hybrid protein comprises a first domain comprising a sequence encoding a surface protein of an enveloped RNA virus and a second domain comprising a sequence encoding an ectodomain of a type 2 transmembrane domain protein, wherein the second domain is located at the C-terminal of the first domain. The hybrid protein or an mRNA encoding such protein can be used as a **vaccine** against the infection of the enveloped RNA virus.

36.3301211METHOD OF SELECTING NEOANTIGEN FOR DEVELOPMENT OF PERSONALIZED CANCER **VACCINE**

CA - 01.03.2026

Clasificación Internacional G16B 25/00Nº de solicitud 3301211Solicitante LG CHEM,

LTD.Inventor/a Seihwan JEONG

37.WO/2026/050666PREFUSION-STABILIZED EBV GB PROTEINS

WO - 05.03.2026

Clasificación Internacional A61K 39/245Nº de solicitud PCT/US2025/044221Solicitante BOARD OF REGENTS, THE UNIVERSITY OF TEXAS SYSTEMInventor/a MCLELLAN, Jason

Provided herein are engineered EBV gB polypeptides. In some aspects, the engineered gB polypeptides exhibit enhanced conformational stability and/or immunogenicity/antigenicity of the prefusion conformation. Methods are also provided for use of the engineered gB polypeptides as diagnostics, in screening platforms, and/or in **vaccine** compositions.

38.WO/2026/050341IMMUNOGENIC COMPOSITIONS CONTAINING LIPOOLIGOSACCHARIDES AND METHODS OF USE THEREOF

WO - 05.03.2026

Clasificación Internacional A61K 39/385Nº de solicitud PCT/US2025/043665Solicitante STIRX

INCInventor/a GILL, Davinder

Immunogenic and **vaccine** compositions containing a *Neisseria gonorrhoeae* lipooligosaccharide (LOS), or a fragment thereof, are provided. The LOS may be conjugated to a carrier such as a carrier

protein, virus-like particle (VLP), liposome, inorganic gold particle, dendrimer, outer membrane vesicle (OMV), generalized modules for membrane antigens (GMMA), and protein nanocages. Methods of protecting or treating a subject from *Neisseriagonorrhoeae* infection and methods of manufacturing the compositions are also provided.

39.20260063627METHOD OF TREATMENT OF HIV INFECTION WITH VACCINE

US - 05.03.2026

Clasificación Internacional G01N 33/543Nº de solicitud 19065036Solicitante Gilead Sciences, Inc.Inventor/a Christian BRANDER

The present disclosure relates to methods for determining the magnitude of a subject's immune response against a HIVACAT T-cell immunogen (HTI or "HTI immunogen") and whether the subject can avoid antiretroviral therapy (ART). These methods are helpful for treating human immunodeficiency virus (HIV) and/or deciding whether to administer, continue or stop antiretroviral therapy in a subject. The present disclosure also relates to antigens, compositions, and kits related to such methods.

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Edición: Annia Ramos Rodríguez aramos@finlay.edu.cu
 Randelys Molina Castro rmolina@finlay.edu.cu
 Claudia Camejo Salas ccamejo@finlay.edu.cu
 Yamira Puig Fernández yamipuig@finlay.edu.cu

