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Usted puede realizar sugerencias sobre los contenidos y de esa forma crear una retroalimentación que nos permita acercarnos más a sus necesidades de información.

EN ESTE NÚMERO

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

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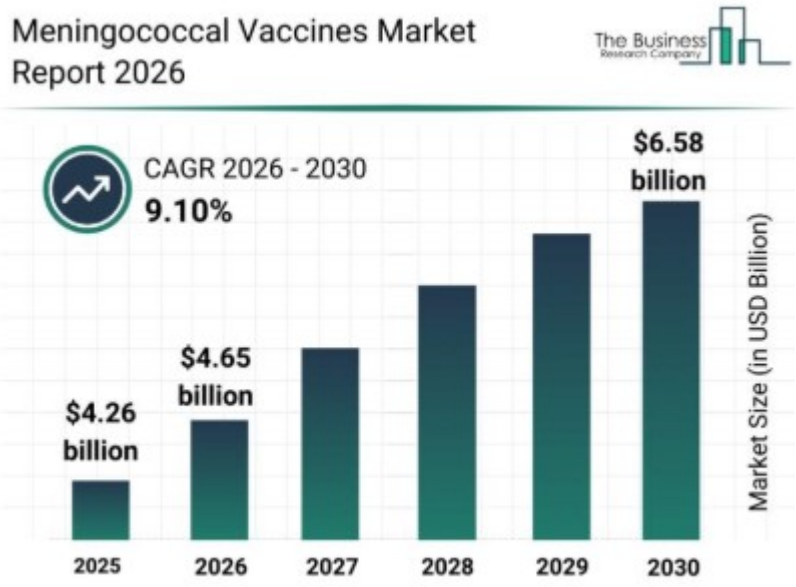
Noticias en la Web

Leading Companies Enhancing Their Presence in the Meningococcal Vaccines Market

May 1. The meningococcal vaccines market is set to experience significant expansion over the coming years as efforts to combat meningococcal disease intensify worldwide. With advancements in vaccine technology and broader immunization campaigns, this sector is positioned for robust growth through 2030.

Strong Growth Outlook for the Meningococcal Vaccines Market Size by 2030



The meningococcal vaccines market is anticipated to reach $6.58 billion by 2030, growing at a compound annual growth rate (CAGR) of 9.1%. This upward trajectory is fueled by continuous improvements in vaccine technologies, the expansion of global immunization programs, heightened awareness about meningococcal disease, and strategic collaborations among industry leaders. Additionally, initiatives aimed at increasing vaccination coverage among adolescents and young adults are contributing to this positive market momentum. Trends forecasted to influence growth include the broadening of pediatric vaccination schedules, development of vaccines targeting multiple strains, enhanced government immunization efforts, and the rise of vaccination drives in educational institutions.

Key Industry Players Driving the Meningococcal Vaccines Market

Several prominent companies are at the forefront of the meningococcal vaccines market, including Pfizer Inc., GlaxoSmithKline plc, Sanofi Pasteur, Merck & Co. Inc., Serum Institute of India Pvt. Ltd., Bio-Manguinhos, Walvax Biotechnology Co. Ltd., Bharat Biotech, Panacea Biotec Ltd., CSL Limited, Minhai Biotechnology Co. Ltd., Hualan Biological Engineering Inc., Shenzhen Kangtai Biological Products Co. Ltd., Chongqing Zhifei Biological Products Co. Ltd., Incepta Pharmaceuticals Ltd., Biological E. Limited, Biokangtai, Biomed Pvt Ltd., Biocine SCL, and Bavarian Nordic A/S. In a notable development in September 2023, South Africa's Biovac Institute partnered with South Korea's EuBiologics Co., Ltd. to transfer technology for meningitis vaccine production. This collaboration is expected to increase local manufacturing capacity, improve vaccine accessibility, bolster regional immunization efforts, and promote innovation in vaccine development.

Emerging Developments Positively Affecting the Meningococcal Vaccines Market Leading vaccine manufacturers are focusing on developing new formulations to cover a wider range of meningococcal serogroups, thereby enhancing their competitive edge and market presence. Meningococcal vaccines are preventative solutions targeting infections caused by specific Neisseria meningitidis serogroups.

For example, in October 2023, Pfizer Inc. received FDA approval for PENBRAYA, currently the most comprehensive meningococcal vaccine approved in the U.S., protecting against serogroups A, B, C, W, and Y. This approval was supported by strong Phase 2 and 3 clinical trial results demonstrating that PENBRAYA's immune response was not inferior to existing vaccines such as Trumenba and Menveo, along with a favorable safety profile. Pfizer's announcement in September 2022 highlighted positive Phase 3 trial outcomes showing comparable safety, tolerability, and immunogenicity with other licensed meningococcal vaccines.

Fuente: OPEN PR. Disponible en https://n9.cl/o8t9o

From Smallpox to Polio: The Deadly Diseases Gen Z Never Had to Fear Thanks to Vaccines

May 2. For much of human history, infectious diseases shaped entire generations - causing widespread death, disability, and fear. Today, however, many of these once-devastating illnesses are rarely seen, especially among Gen Z. And even if you fall once in a while, the intensity of infections is not as high as it used to be. However, according to experts, this transformation did not happen by chance. It is the result of decades of global vaccination efforts.

With the introduction of effective vaccines in the mid-20th century, cases have dropped dramatically

Vaccines have fundamentally reshaped public health, preventing millions of deaths and reducing the burden of infectious diseases worldwide.

"Vaccination remains one of the most effective, evidence-backed interventions in preventive healthcare. It significantly reduces the burden of infectious diseases and their complications. Vaccines are focused on strengthening preventive care by driving awareness around vaccine-preventable illnesses and improving access to essential immunization services," said Gaurav Verma, Chief Business Officer at PharmEasy (API Holdings).

Diseases that vaccines can ward off

Here's a closer look at the major illnesses Gen Z has largely been shielded from - thanks to immunisation.

Smallpox – the only eradicated human disease

Smallpox was once one of the deadliest diseases known to humanity, responsible for millions of deaths over centuries. Through a coordinated global vaccination campaign, it became the first and only human disease to be completely eradicated in 1980. Today, younger generations have never encountered it outside of history books.

Polio: From paralysis to near elimination

Polio once paralysed thousands of children every year. With the introduction of effective vaccines in the mid-20th century, cases have dropped dramatically. While not fully eradicated, polio is now confined to a few regions, making it a rare disease for most of the world.

Measles: A once-common childhood killer

Before vaccination, Measles outbreaks were frequent and often fatal, particularly among children. Since the vaccine's introduction in 1963, global cases have declined significantly, although occasional outbreaks still occur where vaccination rates drop.

Mumps: Reduced but not forgotten

Mumps caused painful swelling and complications such as hearing loss. The introduction of the MMR (measles, mumps, rubella) vaccine has greatly reduced its prevalence, making it uncommon among vaccinated populations.

Rubella: Protecting mothers and babies

Rubella, or German measles, posed serious risks during pregnancy, leading to miscarriages and congenital disabilities. Vaccination has significantly reduced cases and protected millions of newborns from lifelong complications.

Hepatitis B: Preventing chronic disease

Hepatitis B can lead to chronic liver disease and even cancer. Since the introduction of its vaccine in the 1980s, infection rates have dropped sharply, particularly in countries with strong immunisation programmes.

Haemophilus influenzae type b (Hib): A silent threat

Haemophilus influenzae type b once caused severe illnesses like meningitis in children. Vaccination has drastically reduced cases, preventing thousands of deaths and disabilities annually.

Tetanus: Rare but still preventable

Tetanus, caused by bacteria entering wounds, leads to painful muscle stiffness and can be fatal. While the bacteria still exist in the environment, vaccines have made the disease rare in many parts of the world.

Why is vaccination important?

Despite these successes, vaccines remain crucial. Diseases like measles and polio can resurface if immunisation rates fall. Public health experts stress the importance of maintaining high vaccination coverage to prevent outbreaks and protect vulnerable populations.

The fact that Gen Z has grown up without facing these deadly diseases is one of the greatest achievements in modern medicine. Vaccines didn't just reduce illness; they changed what it means to live a healthy life.

Fuente: TIMES NOW. Disponible en https://n9.cl/knmge

Se confirma la efectividad de la vacuna conjugada frente a la fiebre tifoidea

4 may. La mejoría en las condiciones económicas e higiénicas de países con alta endemia de fiebre tifoidea ha conducido a una reducción en la incidencia global de la enfermedad desde 10,9 millones de casos registrados en 2017 a 7,1 millones en 2021. A pesar de ello, la carga de enfermedad continúa siendo muy elevada en Asia y África, especialmente en niños menores de 5 años. Por ello, la vacunación desempeña un papel fundamental al contribuir de forma importante a la prevención mundial de la fiebre tifoidea.

Actualmente existen disponibles dos vacunas, una de administración oral (atenuada) y otra de administración parenteral (inactivada). Ambas vacunas tienen la limitación de no estar autorizadas en niños pequeños: la vacuna oral se indica en mayores de 5 años y la vacuna parenteral en mayores de 2 años.

En 2023 nos hacíamos eco del desarrollo de la primera vacuna conjugada frente a la fiebre tifoidea (CAV-AEP, 2023), vacuna polisacárida capsular conjugada con toxoide tetánico (Vi-TT), que la OMS recomendó, en dosis única, en niños de 6 meses a 2 años de edad, con campañas de rescate hasta los 15 años. Además, la OMS, cuando precalificó la vacuna conjugada Vi-TT, estableció la recomendación de realizar estudios para generar datos sobre la inmunogenicidad y eficacia.

Entre las vacunas antitifoideas disponibles, la OMS recomienda la vacuna conjugada (VCT) como la preferida para todos los grupos de edad debido a la alta inmunogenicidad observada, especialmente en niños pequeños, y a la mayor duración de la protección. Un metaanálisis recientemente publicado concluye una eficacia de la VCT del 80-85 % en los dos primeros años, muy superior a la conseguida con la vacuna polisacárida, que además muestra una disminución de la eficacia con el paso del tiempo (67 % en el primer año, que descendió al 56·% en el segundo).

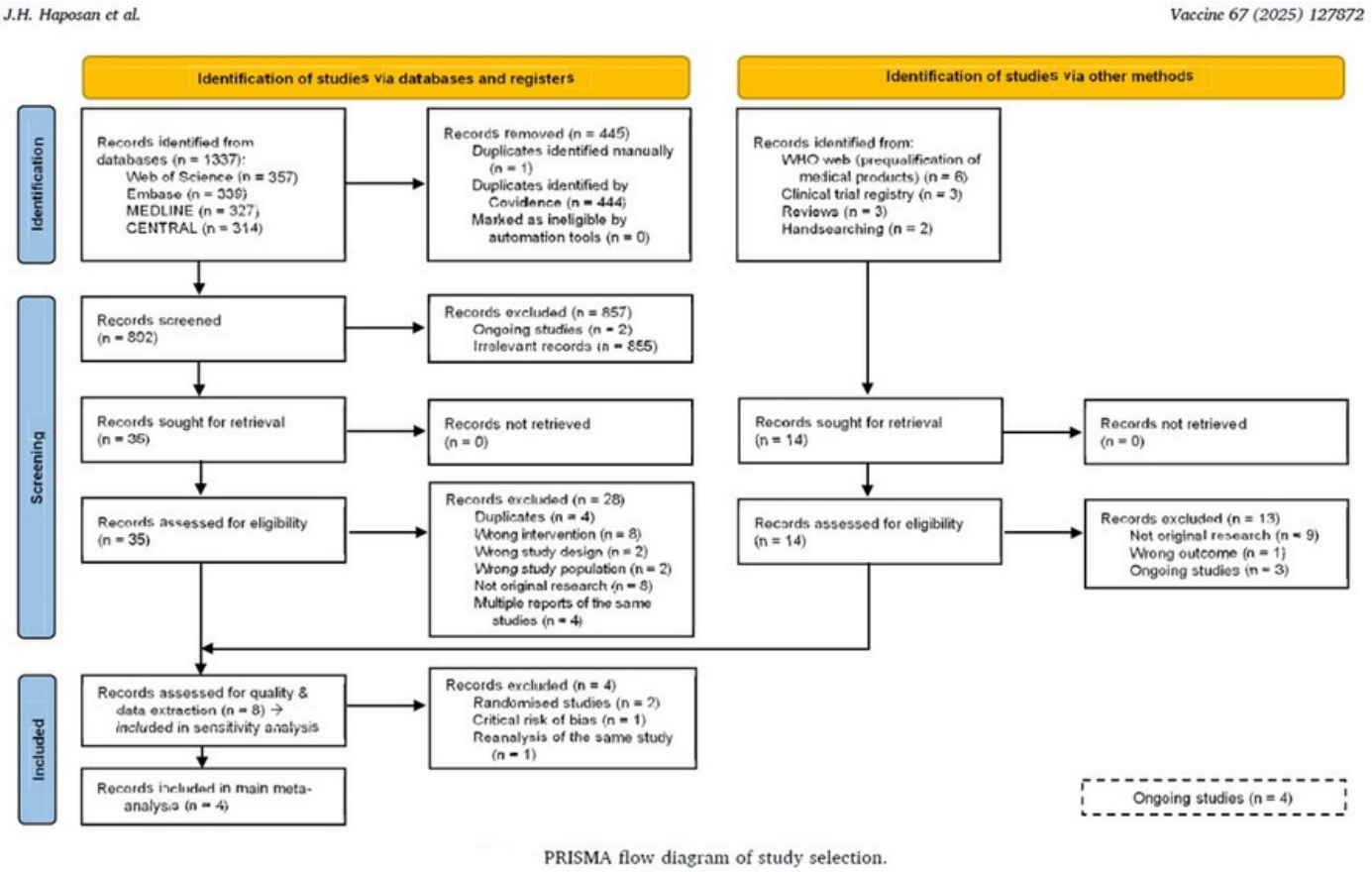
Hasta la fecha 10 países han introducido la VCT en sus calendarios de inmunización y otros cuatro están planificando su introducción. Todos ellos son países endémicos de fiebre tifoidea y/o con riesgo de brotes por cepas de *Salmonella typhi* multirresistentes. Aunque los ensayos clínicos efectuados demuestran la eficacia de la VCT, la evidencia sobre la efectividad en el mundo real tras su introducción a nivel nacional en distintos países sigue siendo limitada. Recientemente, cuatro estudios no aleatorizados incluyendo a 24.180 personas en tres países endémicos de fiebre tifoidea han establecido que la VCT es altamente eficaz en la prevención de casos de fiebre tifoidea confirmados por cultivo, con una efectividad combinada de la vacuna (EV) del 87 %.

Se ha publicado en 2025 una revisión sistemática y metaanálisis de la efectividad de la vacuna conjugada frente a fiebre tifoidea en niños y adolescentes. En ella se evalúan los datos disponibles sobre la efectividad de la vacuna en la prevención de la fiebre tifoidea tras su implementación en los programas de inmunización de los países que la adoptaron inicialmente. El objetivo de este estudio es aclarar y orientar a los responsables sanitarios en la toma de decisiones basadas en la evidencia real de la vacuna sobre las estrategias de introducción e implementación de la VCT en países

endémicos de fiebre tifoidea. Sin embargo, la evidencia sigue siendo limitada, ya que la primera VCT precalificada por la OMS se aprobó en 2017, y la pandemia de COVID-19 ha retrasado las introducciones previstas en los países que reciben apoyo de Gavi.

Descripción del estudio

En esta revisión sistemática y metaanálisis se realizaron búsquedas en las principales bases de datos: MEDLINE (PubMed), EMBASE, Web of Science y Cochrane Library. Se buscaron los artículos que evaluaban la efectividad de las vacunas contra la fiebre tifoidea en niños, publicados hasta el 14 de agosto de 2025, con la fiebre tifoidea confirmada por cultivo como criterio de valoración.



PRISMA flow diagram of study selection.

Efectividad de la vacuna frente a casos de fiebre tifoidea confirmados por cultivo

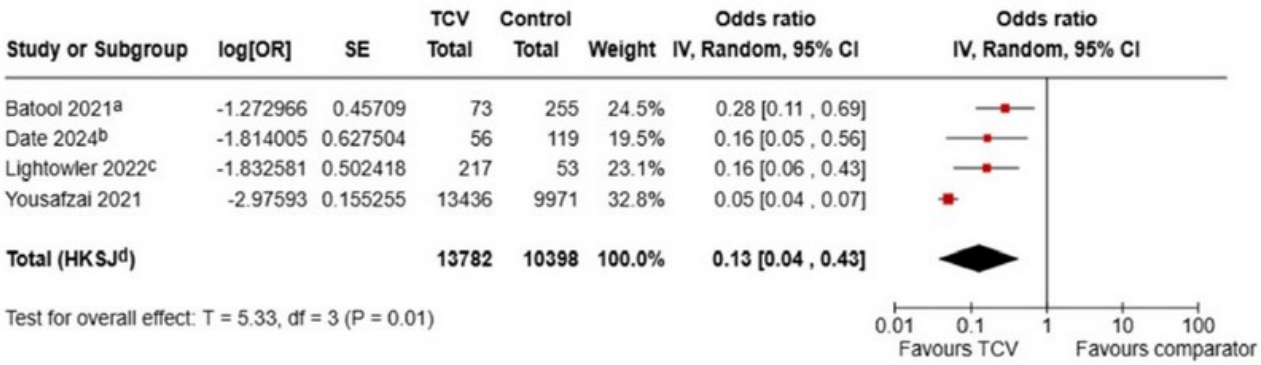
En varios estudios se aportaron resultados de efectividad vacunal frente a casos de fiebre tifoidea con confirmación microbiológica, que fue de un 87 % (IC 95 % 57-94 %). El OR conjunto fue de 0.13 (IC·95·%: 0,04–0,43). Estos resultados indican una protección significativa en los niños vacunados frente a los no vacunados (p≤0,01), aunque existió importante heterogeneidad en los estudios.

Efectividad de la vacuna frente a casos de fiebre tifoidea probables, sospechosos y confirmados por cultivo

Dos de esos estudios aportaron estos datos. El OR global fue de 0.45 (IC 95 %: 0,43–0,48), indicando una efectividad global del 55 % (IC 95 % 52-57 %). Estos resultados señalan una protección significativa entre los receptores de la vacuna y los niños no vacunados, con p<0,001.

Efectividad de la vacuna frente a infección por *Salmonella typhi* multirresistente

Solo un estudio aportó datos de la efectividad de la vacuna VCT en la prevención de la infección por *S. Typhi* multirresistente, con un OR de 0,03 (IC 95 %: 0,02-0,05), lo que corresponde a una efectividad del 97 % (IC 95 %: 95-98 %) al comparar entre niños vacunados y niños no vacunados.



Footnotes

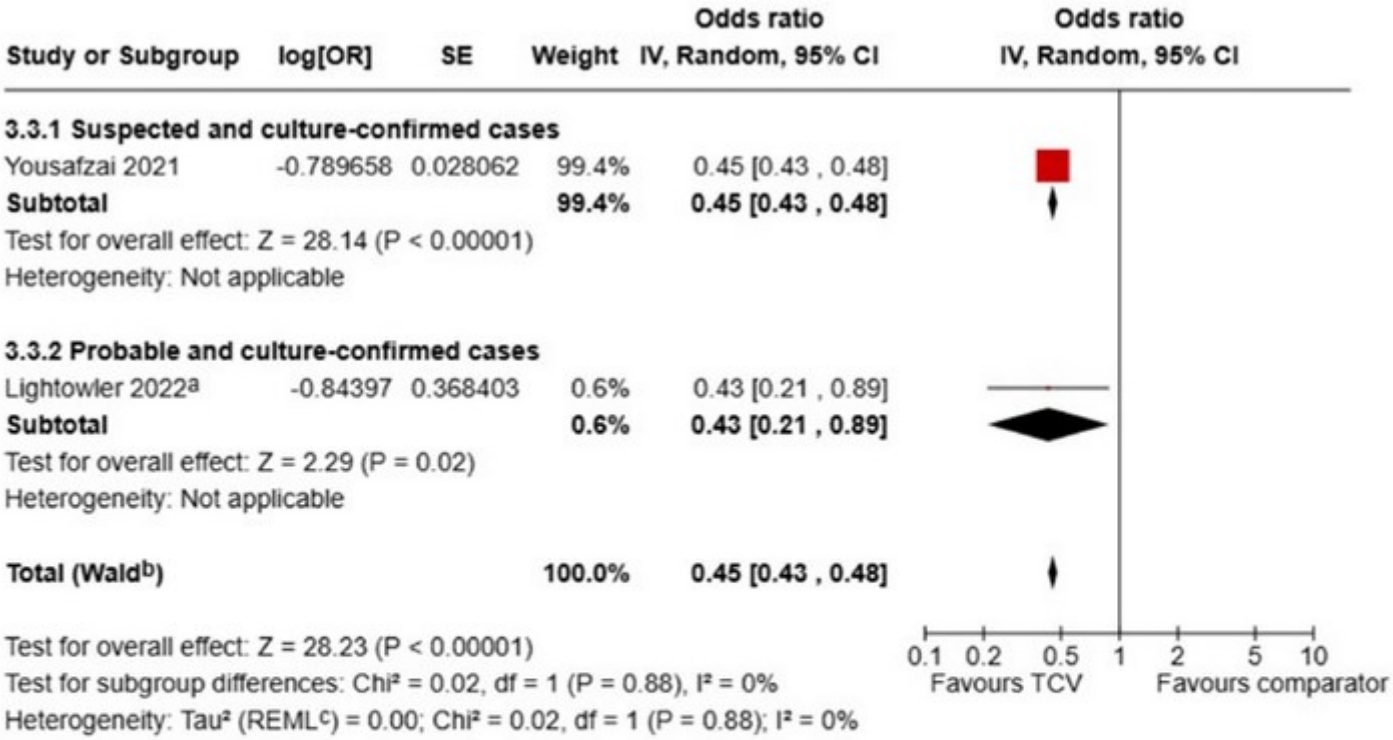
[a]Adjusted for age and gender; using community and hospital controls.
[b]Adjusted for demographics, household characteristics
[c]Adjusted for the source and treatment of drinking water, place for defecation; using community controls
[d]CI calculated by Hartung-Knapp-Sidik-Jonkman method.
[e]Tau² calculated by Restricted Maximum-Likelihood method.

Forest plot of TCV odds ratio against culture-confirmed cases among children and adolescents.

El estrecho intervalo de confianza sugiere una estimación precisa del efecto, sin embargo, la evidencia se basa en un estudio de cohortes en Pakistán, donde la *S. Typhi* XDR tiene una alta prevalencia.

Efectividad de la vacuna frente a casos confirmados por cultivo por subgrupos de edad

Entre los niños menores de 5 años, el OR global fue de 0,06 (IC 95%: 0,04-0,09), lo que corresponde a una efectividad vacunal del 94 % en la prevención de fiebre tifoidea confirmada por cultivo en niños vacunados frente a no vacunados (p<0,001).



Footnotes

[a]Adjusted for the source and treatment of drinking water, place for defecation
[b]CI calculated by Wald-type method.
[c]Tau² calculated by Restricted Maximum-Likelihood method.

En niños mayores de 5 años el OR fue de 0,05 (IC 95 %: 0,03–0,08), reflejando una efectividad del 95 % en la prevención de infección por *S. typhi* confirmada por cultivo.

Duración de la protección vacunal

La valoración de la duración de la protección solo se pudo basar en el análisis de sensibilidad debido al bajo número de estudios incluidos. En los dos primeros años tras la vacunación, la efectividad de la VCT fue muy elevada, del 89 % (IC 95 %: 80–93 %). A los 3 y a los 4 años se mantuvo muy alta, con una efectividad del 81 % (IC 95 %: 78–87 %) y 77 % (IC 95 %: 42–91 %) respectivamente. A los 5 años de la vacunación la efectividad ya no fue estadísticamente significativa (EV 39 %; IC 95 %: 23-70 %).

Consideraciones finales

Los autores concluyen que las vacunas conjugadas frente a la fiebre tifoidea muestran una efectividad elevada en la prevención de casos de infección por *Salmonella typhi* tanto confirmados por cultivo, como probables, sospechosos y multirresistentes en países endémicos.

Consideran los autores que esta revisión sistemática y metaanálisis apoya la inclusión de la VCT en los programas nacionales de inmunización de países endémicos.

Fuente: Comité Asesor de Vacunas e Inmunizaciones. Disponible en https://n9.cl/9ve9d

Claves sobre la evolución del brote de hantavirus en un crucero de expediciones

5 may. Los hechos en torno al brote de hantavirus en un crucero dedicado a las expediciones se van aclarando, mientras la prioridad es desembarcar a las dos personas que se encuentran enfermas a bordo para que sean tratadas, rastrear a posibles contactos cercanos de personas que resultaron infectadas y dar una solución a los pasajeros que siguen en el buque.

¿Cuál ha sido el origen del brote de hantavirus?

El 2 de mayo de 2026 se notificó a la Organización Mundial de la Salud (OMS) de un grupo de pasajeros a bordo de un crucero que padecían una enfermedad respiratoria grave.

Los expertos de la organización han reunido diversas informaciones, incluidas epidemiológicas, que le han llevado a partir del supuesto de que el contagio inicial se inició por contacto con algún tipo de roedor, sus excrementos o saliva, y que esto ocurrió antes de que la o las personas infectadas abordaran el crucero.

Para ello han tenido en cuenta el periodo de incubación (de una a seis semanas) y a partir de ello manejan una primera hipótesis que apunta a que el punto inicial de contaminación fue en Argentina, donde se embarcaron personas que luego enfermarían.

Una segunda hipótesis tiene en cuenta que varios de los participantes en la expedición se dedicaban a la observación de aves y a otras actividades

relacionadas con la fauna silvestre, y que en algunas de las remotas islas que visitaron -figuran la Antártida, Georgia del Sur, la isla Nightingale, Tristán da Cunha, Santa Elena y Ascensión- hay poblaciones importantes de roedores, que son el reservorio del hantavirus.

¿Cuántas personas han sido infectadas?

Hasta hoy se ha hablado de siete posibles infectados, aunque la OMS ha emitido dudas sobre uno de ellos, que después de presentar un poco de fiebre se ha recuperado y ahora se encuentra totalmente asintomático.

Es habitual que en situaciones de este tipo y mientras las investigaciones avanzan, las cifras de afectados puedan variar.

De los otros seis, tres personas han muerto: el primer caso fue el de un hombre que murió el 11 de abril en el barco, cinco días después de presentar síntomas. Su esposa desembarcó en la isla de Santa Elena ya con síntomas y tomó un vuelo a Johannesburgo, pero murió en los servicios de emergencia de un hospital de esta ciudad.

Ambos habían viajado por Sudamérica, incluida Argentina, antes de embarcar en el crucero.

Una segunda mujer falleció el 2 de mayo, cuatro días después de empezar a mostrar signos de neumonía.

Un cuarto caso corresponde a una persona que empezó a presentar síntomas graves en el barco y fue evacuada en la isla Ascensión y trasladada a Sudáfrica, donde está hospitalizada en cuidados intensivos. La OMS indicó que ha empezado a mostrar cierta mejoría.

Otras dos personas a bordo han presentado fiebre y síntomas gastrointestinales, aunque en uno de ellos los síntomas son leves. Ambos están recibiendo atención de equipos médicos facilitados por Cabo Verde -frente a cuyas cosas el barco está anclado- y que también están recolectando muestras para que sean examinadas.

No hay ninguna otra persona que presente síntomas.

¿Qué está pasando con el resto de pasajeros?

La embarcación lleva actualmente a 147 personas, de los cuales 88 son pasajeros y 59 miembros de la tripulación, de un total de 23 nacionalidades.

El barco debería salir rumbo a alguna de las Islas Canarias, donde la OMS espera que pueda haber una evacuación médica de los casos sospechosos que están abordo y que serían trasladados a Países Bajos para recibir tratamiento.

¿Cuál es el riesgo para personas fuera del barco?

La OMS evalúa como «bajo» el riesgo para la población en general, aunque continúa con su vigilancia epidemiológica y puede actualizar en todo momento esta observación.

Sobre el riesgo que pueden haber corrido los pasajeros que viajaban en el vuelo entre Santa Elena y Johannesburgo, en el que viajó la segunda persona fallecida ya con síntomas, la OMS indica que se está haciendo un rastreo de contactos.

También ha reconocido que con uno de los subtipos de virus, denominado 'de los Andes', se ha visto en el pasado una limitada transmisión entre humanos, pero siempre en casos de contactos muy cercanos y prolongados, particularmente en brotes en Argentina y Chile.

«No significa que porque se haya ido en el mismo avión hay un gran riesgo de exposición (al virus)», ha declarado una responsable de la OMS.

Fuente: PANAM POST. Disponible en https://n9.cl/s0pp5

EE.UU. ha prohibido la publicación de varios estudios sobre vacunas contra la COVID-19

6 may. La Administración de Alimentos y Medicamentos (FDA, por sus siglas en inglés) de EE.UU. ha bloqueado la publicación de varios estudios que respaldaban la seguridad de vacunas ampliamente utilizadas contra la COVID-19 en los últimos meses, informó *The New York Times*, citando a un portavoz del Departamento de Salud y Servicios Humanos (HHS, por sus siglas en inglés) del país norteamericano.

Las investigaciones, que costaron millones de dólares a las arcas públicas, fueron realizadas por científicos de la agencia, quienes trabajaron con empresas de análisis de datos para examinar millones de historiales clínicos de pacientes. Concluyeron que los efectos secundarios graves eran muy poco frecuentes.

"Los estudios se retiraron porque los autores extrajeron conclusiones generales que no estaban respaldadas por los datos subyacentes. La FDA actuó para proteger la integridad de su proceso científico y garantizar que cualquier trabajo asociado con la agencia cumpla con sus altos estándares", explicó Andrew Nixon, portavoz del HHS.

Fuente: CUBA SÍ. Disponible en https://n9.cl/waa2bd

La bacteria neumocócica causa más de 1,6 millones de muertes en todo el mundo

7 may. Las bacterias neumocócicas son agentes infecciosos que causan aproximadamente 1,6 millones de muertes al año en todo el mundo. En Vietnam, se registran alrededor de 2,9 millones de casos de neumonía y aproximadamente 4000 muertes anualmente. Resulta alarmante que la tasa de mortalidad pueda ser significativamente mayor en niños pequeños y ancianos.

"La neumonía neumocócica representa una importante carga para el sistema de salud. Cada año, Vietnam registra aproximadamente 2,9 millones de casos de neumonía y alrededor de 4000 muertes. Resulta alarmante que la tasa de mortalidad pueda ser significativamente mayor en niños pequeños y ancianos."

En el Centro Pediátrico del Hospital Bach Mai, las estadísticas de los primeros nueve meses de 2025 muestran que la bacteria neumocócica representó el 12 % de las cepas bacterianas aisladas en el área de hospitalización. Cabe destacar que, en los casos ambulatorios, el estudio reveló que el 55 % de los casos de neumonía fueron causados por este agente. Estas cifras reflejan la elevada carga de morbilidad en la comunidad.

Según el Dr. Nguyen Nguyen Huyen, director del Centro para el Control y la Prevención de Enfermedades del Hospital Nacional de Enfermedades Tropicales, la bacteria neumocócica es la principal causa de neumonía grave, meningitis y sepsis, y resulta especialmente peligrosa para los niños pequeños, los ancianos y las personas con enfermedades crónicas.

La vacunación contra la enfermedad neumocócica es actualmente la medida más eficaz.

La bacteria neumocócica, conocida científicamente como *Streptococcus pneumoniae*, puede existir en la nariz y la garganta de personas sanas sin causar síntomas evidentes.

Sin embargo, cuando el sistema inmunitario se debilita, especialmente durante periodos de frío intenso, esta bacteria puede multiplicarse fácilmente y causar enfermedades. Las personas con enfermedades crónicas como asma, enfermedad pulmonar obstructiva crónica, diabetes, enfermedades cardiovasculares, enfermedades hepáticas o renales, o aquellas con sistemas inmunitarios debilitados, son las más susceptibles a la infección neumocócica.

El Dr. Huyen hizo hincapié en que las enfermedades causadas por la bacteria neumocócica comienzan con síntomas inespecíficos como fiebre, escalofríos, tos, dolor en el pecho, respiración rápida o dificultad para respirar.

Muchas personas piensan inicialmente que se trata solo de un resfriado común, pero la enfermedad puede progresar muy rápidamente, provocando neumonía grave, sepsis o meningitis, e incluso puede ser mortal si no se detecta y trata a tiempo.

Según las estadísticas, cada año se producen aproximadamente 1,6 millones de muertes relacionadas con la bacteria neumocócica en todo el mundo , lo que demuestra que no se puede subestimar el peligro que supone este patógeno.

Fuente: VIETNAM.VN. Disponible en https://n9.cl/5eip5u

Korea University and Moderna have been working on mRNA hantavirus vaccine since 2023

May 7. Korea University's Vaccine Innovation Center (VIC-K) and US biotech firm Moderna (formerly ModeRNA Therapeutics), made world-famous by its multibillion-dollar Covid-19 vaccine profits, have been jointly developing an mRNA-based hantavirus vaccine since signing a research and development agreement in September 2023, with the candidate now awaiting funding to begin human clinical trials.

The deal was struck under Moderna's mRNA Access initiative, a programme that supplies preclinical mRNA vaccine candidates to academic teams working on emerging or neglected infectious diseases. The two sides had begun exploring possible collaboration as early as 2021.

A research team led by Professor Park Man-sung of Korea University College of Medicine's microbiology department confirmed in February 2025 that experimental doses prevented hantavirus infection in mice, according to Seoul Economic Daily.

Under the agreement, VIC-K provided Moderna with hantavirus antigen sequence information and Moderna in turn supplied the corresponding mRNA material, which the centre then used in antigen expression studies. The Korean partner had hosted an mRNA Access Partnership Seminar with Moderna on July 4, 2024 to set out the joint roadmap.

Hantavirus causes Haemorrhagic Fever with Renal Syndrome, marked by high fever, bleeding and kidney damage. Korea records 300 to 400 cases a year, mostly among young men in their twenties and thirties on military service, and the Korea Disease Control and Prevention Agency has placed the pathogen on its list of nine priority threats for future pandemic preparedness.

The World Health Organization has classified hantavirus as a possible "Disease X" pathogen. An older Korean inactivated vaccine, Hantavax, has been available since 1990 but offers limited long-term protection and does not cover hantavirus pulmonary syndrome strains found in the West.

VIC-K director Heejin Cheong said when the partnership was first announced that the project was meant to "continue the legacy" of Korea University Emeritus Professor Lee Ho-wang, who first isolated the virus in 1976. Moderna chief medical officer Francesca Ceddia said at the time that the deal would "strengthen mRNA vaccine research and development capabilities in Korea".

The collaboration has been supported in part by a 10 billion won (€6.5 million) personal donation from Hyundai Motor Group Honorary Chairman Chung Mong-koo, who had previously given 100 billion won (€65 million) to establish the centre at Korea University.

Producing clinical-grade material at Good Manufacturing Practice (GMP) facilities, though, requires between 10 billion won (€6.5 million) and 20 billion won (€13 million) – sums that exceed the team's available budget. Seoul Economic Daily reported on April 13, 2026 that human clinical trials had been on hold for more than a year while researchers waited to be selected for a national project.

Such sums are dwarfed by Moderna's pandemic earnings. The company booked revenues of $18.5 billion (€17 billion) in 2021 and $19.3 billion (€17.8 billion) in 2022, mostly from Spikevax COVID-19 vaccine sales, before total revenue fell to $6.8 billion (€6.3 billion) in 2023.

Fuente: BRUSSELS SIGNAL. Disponible en https://n9.cl/1w9gaj

CEPI 3.0 explained: Vaccines and viral families

May 7. Under CEPI 3.0, our work is organised around three priority areas: strengthening vaccine development across the pathogens and viral families most likely to spark new outbreaks; advancing rapid-response platform technologies that can be adapted quickly to the unknown; and building interconnected global networks for research, manufacturing and regulatory readiness so the world can act as one system when new threats emerge.

A key shift in this new strategy is the move from a pathogen-by-pathogen approach to a viral family framework — a more flexible and future-proof way of preparing for both known threats and Disease X.

We spoke with Dr Mandeep Singh Dhingra, MD, CEPI's Director of R&D Programmes, to unpack what this change means and its role in CEPI 3.0 and the 100 Days Mission.

How does the vaccines and viral families priority area ensure the next outbreak doesn't catch the world off guard?

When we talk about preparedness, we're preparing for two things at once: the known threats we already track and the unknown, a Disease X. The viral family framework helps us do both.

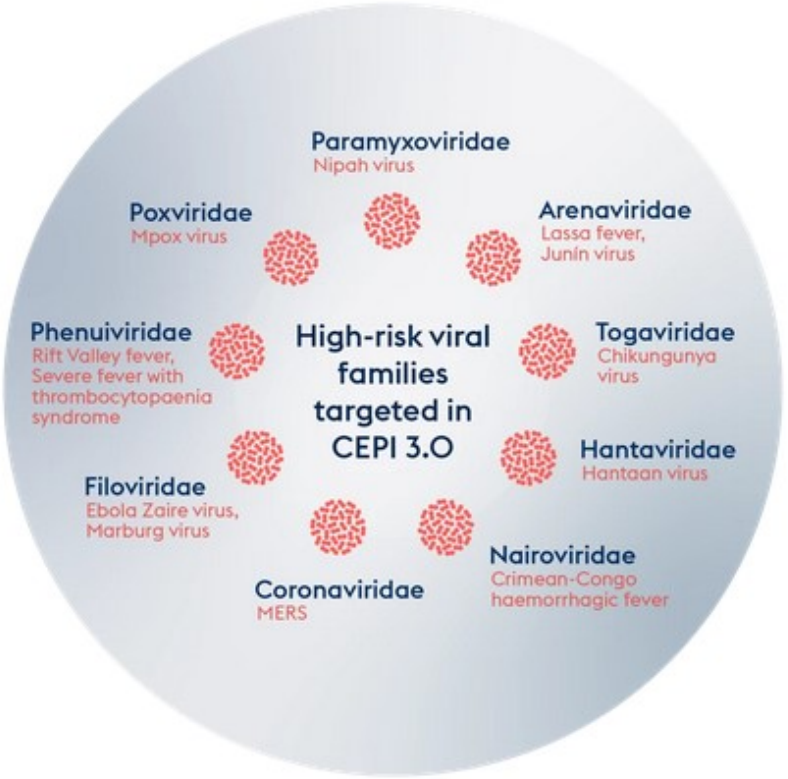
Instead of preparing for one pathogen at a time, we prepare for whole families of viruses. That means building knowledge and countermeasures that could potentially apply across a family, so we're better positioned if a new virus emerges.

Because viral families are diverse, we focus on areas where our work can have the biggest impact across multiple pathogens and invest in pathways that we believe will most efficiently lead to real-world countermeasures. That's how CEPI 3.0 reduces the risk of being caught off guard.

How does this priority area move us from reacting to outbreaks to proactively preparing for them?

First, we're widening our field of view. Instead of investing in a single pathogen, we ask whether today's work builds broader readiness and whether insights from one pathogen strengthen our understanding of others, even potentially those from different viral families.

Second, this approach strengthens CEPI's role as a connector. Preparedness isn't something CEPI can deliver alone. But we can act as a glue, bringing together the right partners, institutions, and countries. If we can introduce the flexibility and agility that the viral family framework is designed to deliver, it becomes a major step toward proactive global readiness.



High-risk viral families and example pathogens within the family.

At the heart of the CEPI 3.0 strategy is the 100 Days Mission. How does this priority area help to achieve that goal?

The 100 Days Mission is about responding as quickly as possible, where the response is needed most, with tools that make a real difference. The viral family framework helps us get there by shifting our focus from the actual activities that we support to what impact they deliver. I think of it as shifting our philosophy from 'the what' to the 'so what' and shifting our approach from reaction to readiness. That's why every investment is assessed for its potential to shorten timelines, generate actionable scientific intelligence and support rapid vaccine development.

But the engine isn't only scientific. Countries and regions must also own and prioritise the 100 Days Mission. CEPI can act as the integrating factor, but success depends on partnership and local execution.

How do we ensure this approach is regionally anchored and not just for high-income countries?

Equity is already embedded in CEPI's work, and the viral family framework makes this even more deliberate. Many pathogens we focus on, like Nipah and Lassa, are regionally concentrated, so strengthening research and manufacturing capacity in those regions is essential. It also helps build the self-sufficiency needed to deliver the 100 Days Mission.

Whether that's working with partners in India to ensure future Nipah vaccine doses can be manufactured regionally, or strengthening partnerships in Africa and Latin America for diseases like Lassa and Chikungunya, respectively, we're already taking this approach. This means that, say a Disease X emerges from the paramyxoviruses, Nipah's viral family, in theory, that region would be better prepared to respond at pace.

This regional capability is central to global equity.

How does this work prepare us for a Disease X?

Disease X represents the pathogen we can't predict, but we can prepare for it both by working directly on knowledge generation and indirectly by using the known to inform the unknown. CEPI is already actively supporting knowledge-generation work, including the use of artificial intelligence, to help predict which pathogens could emerge and what antigenic structures might generate the strongest immune response.

The viral family framework broadens this readiness. By working across families and tailoring our scientific efforts accordingly, we reduce the likelihood of starting from scratch when the next unknown threat appears.

How does this priority area rely on and strengthen the others?

Everything in CEPI 3.0 is interconnected. The viral family approach depends on and strengthens our work on platforms and networks. You can think of them a bit like a lamp, a lightbulb, and a power socket: each has a role, but only together do they produce light. It's the combination that creates real capability.

Platforms allow us to quickly adapt vaccine candidates for different viruses within a family in ways regulators can accept. Manufacturing partnerships ensure those vaccines can be produced rapidly and, where possible, regionally. And our networks help move products through development efficiently and anchor everything under the 100 Days Mission.

Fuente: CEPI. Disponible en https://n9.cl/naxe1

Global Health Watch: Vaccine Science Blocked; Hantavirus Highlights System Strain; Zambia Rejects "Trade for Aid"

May 8. The US administration again blocks key vaccine safety and effectiveness data; a hantavirus incident underscores growing strain and fragmentation in the global health system; and Zambia rejects a "trade for aid" deal tying health assistance to geopolitical and economic interests—with implications for HIV programs and global health cooperation.

Continued Suppression of Vaccine Science

The US Administration continues to block publication of key vaccine safety and effectiveness data. This week, officials at the US Food and Drug Administration (FDA) stopped publication of studies on COVID-19 and shingles vaccines including the analyses of millions of US patient records that found no new major safety concerns associated with COVID-19 vaccines and confirmed the established safety profile of the shingles vaccine. Despite already being accepted by peer-reviewed journals and/or undergoing the standard scientific review, FDA officials reportedly ordered some studies withdrawn and refused to approve conference abstracts for others.

This follows last week's decision by US Centers for Disease Control and Prevention (CDC) leadership to block publication of a Morbidity and Mortality Weekly Report (MMWR) showing that COVID-19 vaccines reduced hospitalizations and emergency visits by roughly 50% among healthy adults. Despite passing rigorous internal scientific reviews, the report was withheld over "methodological concerns".

IMPLICATIONS: At a time of reduced vaccine confidence, suppressing findings on safety and effectiveness risks continues to fuel rising vaccine misinformation and hesitancy. And the continued politicization of vaccine science that prevents publication of validated research undermines trust and limits access to evidence that should be used to support vaccination strategies and policy. Taken together, communities that stand to benefit the most from vaccines may delay or forgo receiving vaccinations for themselves and/or their families.

Trade for Aid: Zambia Rejects Deal with US

Zambian government officials rejected a proposed bilateral Memorandum of Understanding (MoU) with the US offering up to $2 billion over the next five years under certain terms, including access to sensitive health data and to the country's critical minerals. The deal was rejected due to the "incorporation of terms that the Zambian government considers unacceptable." Ghana and Zimbabwe are also reported to have rejected bilateral MoUs.

These decisions come alongside the broader shift in US global health policy, with new Global Health Security and Diplomacy (GHSD) implementation guidance outlining an "America First" transactional approach that prioritizes bilateral agreements, co-financing, and alignment with US strategic interests. Scripps News reports on this "trade for aid" theme, raising concerns that access to HIV treatment and prevention could hinge on geopolitical and/or commercial interests.

IMPLICATIONS: The Zambian bilateral MoU experience illustrates the dangers of the country-by-country, transactional model for global health and foreign assistance, which effectively will make it harder to see and measure the true scale of the HIV epidemic in the wake of funding cuts and politicization of health. Referring to the recent PEPFAR data that was released last month, AVAC's Mitchell Warren notes that "we're [already] seeing a decrease in people accessing prevention

services, and we're seeing a decrease in those accessing the community-based programs that were really critical because those programs have been taken offline." This "thinning at the margins" described in HIV programs signals a deeper risk: even as treatment numbers hold, the erosion of prevention and community services could lead to increased infections over time and destabilize the effectiveness of the global HIV response.

Fuente: AVAC. Disponible en https://n9.cl/jli7c

Aluminum in vaccines not linked to autism, other health problems, study finds

May 8. Aluminum additives used in vaccines are not linked to serious medical problems or long-term conditions in children, according to a report published today in *The BMJ*. In particular, researchers found no increased risk of asthma, autism, or autoimmune conditions such as type 1 diabetes.

The analysis, which included 59 studies conducted over many years, adds to a large body of research finding no ties between aluminum in childhood vaccines and serious health problems, including a 24-year study of more than 1.2 million Danish children published last year in the *Annals of Internal Medicine*.

"The evidence shows that vaccines containing aluminum are safe," said Joseline Zafack, MD, PhD, MPH, senior author of the study and an epidemiologist at the Centre for Immunization Surveillance and Programs at the Public Health Agency of Canada.

The researchers found only one, benign medical condition potentially related to certain aluminum-containing vaccines: small skin nodules that go away on their own. Fewer than 1% of people given vaccines that prevent diphtheria, tetanus, and pertussis (DTaP) develop these nodules.

Vaccine makers have safely used tiny amounts of aluminum in vaccines for 100 years as a way to generate a better immune response. By boosting the immune system's response, aluminum allows people to get strong protection from disease with a smaller quantity of vaccine and fewer doses.

Aluminum is used in routinely recommended childhood vaccines such as those that prevent hepatitis A, hepatitis B, diphteria-tetanus-pertussis, Haemophilus influenzae type b, human papillomavirus (HPV), meningococcus B and ABCWY, and pneumococcus.

A review of all available evidence

One strength of the new report is that it considers the totality of the evidence, not just one study, Zafack said.

Individual studies can be flawed or biased. Anti-vaccine activists and others who spread misinformation often cherry-pick single studies that confirm their opinions, holding them up as proof of vaccine injuries even after the research is retracted or discredited, said Peter Hotez, MD, co-director Texas Children's Hospital Center for Vaccine Development, who was not involved in the new report.

The evidence shows that vaccines containing aluminum are safe.

The report is a systematic review, a type of analysis that collects all available evidence, assesses its quality, then synthesizes the results. These types of reviews give more weight to rigorous, well-done studies than to ones with weaker designs. They consider a specific, predefined question, such as "Does aluminum in vaccines cause harm?"

Especially important, systematic reviews explain their process very clearly, so that other researchers using the same methods can get the same results.

"People should not be drawing conclusions about one study that is presented in the media," Zafack said. "We should review all of the evidence that's available and account for the quality of the evidence in order to draw conclusions."

Aluminum-containing vaccines under attack

Anti-vaccine activists, including Health and Human Services Secretary Robert F. Kennedy Jr., have attacked the use of aluminum in vaccines for years.

Kennedy, an attorney who has made millions of dollars working with a law firm suing a vaccine manufacturer, last year called for the Annals of Internal Medicine to retract the 2025 Danish study that found no link between aluminum in vaccines and autism. The journal's editors refused.

There's no reason to suspect aluminum as a cause of autism, Hotez said.

"This is what they do," Hotez said. "It's just made up."

Dozens of studies have consistently found no link between vaccines and autism or other serious illnesses. But vaccines have saved more than 150 million lives over the past 50 years, according to the World Health Organization.

In spite of that research, anti-vaccine activists are constantly finding new reasons to oppose vaccination, Hotez said, whether it's aluminum or some other ingredient.

When science shows that anti-vaccine arguments have no merit, and that a vaccine ingredient is safe, activists move on to another reason to attack vaccines, Hotez said.

"It's a game of Whack-A-Mole," he said.

There's no escaping aluminum

Humans are constantly exposed to aluminum, not just in vaccines, but from pots, pans, soda cans, food, and hundreds of other products, according to Children's Hospital of Philadelphia Vaccine Education Center. Aluminum, the third-most abundant mineral on the planet, is found in plants, water, soil, and air.

Adults ingest 7 to 9 milligrams of aluminum a day, and babies are exposed to much more aluminum from breast milk and formula than from vaccines.

"You have levels of aluminum in your bloodstream that are higher than anything you would get in a vaccine," said Paul Offit, MD, director of the Vaccine Education Center.

Will the new report end questions about aluminum in vaccines?

"In a normal world, this would reassure people like Robert F. Kennedy Jr.," said Offit, who was not involved in the report. "But he has a fixed, immutable, science-resistant belief."

You have levels of aluminum in your bloodstream that are higher than anything you would get in a vaccine.

Hotez agreed the new report won't satisfy anti-vaccine activists.

"The anti-vaccine lobby will try to find ways to poke holes in the paper, and even if they would accept that aluminum doesn't cause autism, they will come up with something else," Hotez said. "They will move the goal posts."

But Offit said he hopes the new report will reassure parents that vaccines containing aluminum are safe.

"It's perfectly reasonable to ask the question," Offit said. "The good news is that there are systems in place that allow us to answer the question. We look to see whether there is any difference [in health] in children who receive vaccines that contain aluminum and those who don't. But once the question has been answered, we have to accept that answer."

Fuente: CIDRAP. Disponible en https://n9.cl/4o17y

Ab&B Bio-Tech Receives China IND Approval for mRNA RSV Vaccine Candidate Following US FDA Clearance

May 9. Ab&B Bio-Tech CO., LTD. JS (Stock Code: 2627), a China-based innovative vaccine company, has announced a significant milestone in the development of its self-developed mRNA RSV vaccine candidate. This development is likely to be of substantial interest to shareholders and potential investors, as it represents a key advancement in the company's pipeline and could have a meaningful impact on the company's valuation.

Key Highlights of the Announcement

Investigational New Drug (IND) Approvals: Ab&B Bio-Tech has secured IND approval from two major regulatory agencies:

- The U.S. Food and Drug Administration (FDA) approved the company's IND application for its mRNA RSV vaccine candidate on November 7, 2025.
- The Center for Drug Evaluation (CDE) of China's National Medical Products Administration (NMPA) has also approved the IND application for the same candidate.

Targeted Disease – RSV: Respiratory Syncytial Virus (RSV) is a common pathogen causing respiratory tract infections, particularly severe in vulnerable groups such as the elderly and chronically ill. Current treatment options in China are limited to broad-spectrum antivirals and symptomatic management, underscoring a substantial unmet clinical need.

mRNA Vaccine Platform: The candidate leverages mRNA technology, which has demonstrated strong cellular and long-lasting humoral immune responses in clinical studies. This positions the vaccine as a promising solution for severe lower respiratory tract infections, especially in high-risk populations.

Strategic Implications for Ab&B Bio-Tech

Pipeline Expansion and Market Positioning: The RSV vaccine candidate adds to the company's innovative pipeline, which also includes quadrivalent and trivalent subunit influenza vaccines, and a lyophilized human rabies vaccine candidate. Ab&B Bio-Tech aims to replace traditional and imported vaccines in China and to expand into international markets.

Competitive Advantage: The successful IND approvals position Ab&B Bio-Tech as a front-runner in the race to develop and commercialize a much-needed RSV vaccine in China, potentially capturing significant market share in the premium vaccine segment.

Shareholder & Price Sensitive Information

Suspension of Trading: Investors should be aware that trading in the H Shares of Ab&B Bio-Tech on The Stock Exchange of Hong Kong Limited has been suspended since 9:00 a.m., April 1, 2026, and will remain suspended until further notice. This is a critical point affecting liquidity and immediate share value realization.

Further Announcements: The company has committed to making further announcements to update shareholders and potential investors on any material developments. This means investors should closely monitor regulatory and corporate disclosures for future price-sensitive information.

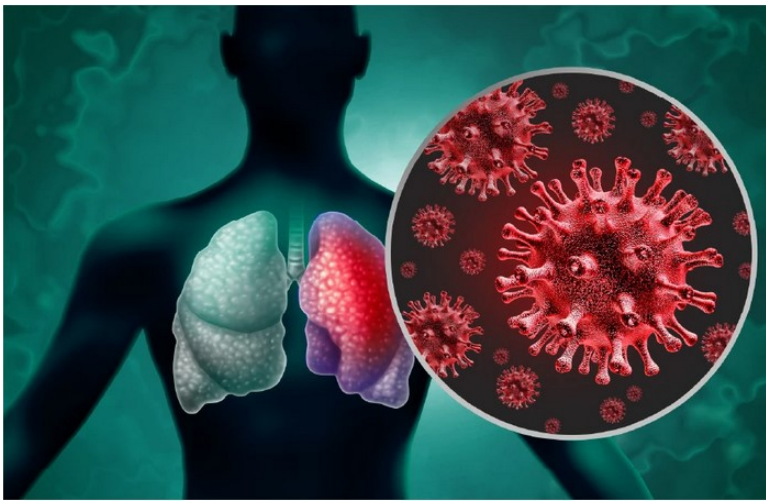
Board Composition: The company's leadership includes a mix of executive, non-executive, and independent non-executive directors, providing governance oversight during this period of pipeline expansion and trading suspension.

Conclusion: Why This News Matters to Investors

The dual IND approvals for Ab&B Bio-Tech's mRNA RSV vaccine candidate mark a pivotal step in the company's journey toward commercialization of innovative vaccines. The regulatory progress, coupled with the company's strategic focus on premium and replacement vaccines in China and abroad, could be materially positive for the company's long-term valuation. However, the current suspension of trading on the Hong Kong Stock Exchange is an immediate factor that may impact shareholder liquidity and short-term price discovery. Investors should remain alert for further disclosures from the company.

Fuente: Minichart. Disponible en https://n9.cl/pa7ta

Advances in RSV Vaccine Research and Development



May 11. According to Current Worldwide Circulation and Burden of Respiratory Syncytial Virus (RSV), this is a highly contagious, seasonal pathogen and a leading global cause of acute lower respiratory infections (ALRIs). Globally, RSV is responsible for an immense health and economic burden, causing an estimated 33 million new ALRI cases and over 3 million hospitalizations each year in children under the age of five. Furthermore, it accounts for approximately 118,000 annual pediatric deaths, with the vast majority (>99%) occurring in low- and middle-income countries (LMICs). Beyond the pediatric population, RSV is now widely recognized as a major cause of severe respiratory disease and mortality in older adults and immunocompromised individuals. At the epidemiological level, current global circulation is largely defined by specific viral lineages: for the RSVA subtype, the A.D.3 lineage has been steadily increasing in prevalence since 2022, while the B.D.E.1 lineage has been dominating RSVB circulation since 2023 (Figure 1). This widespread transmission, evolving strain dynamics, and high disease burden underscore the urgent need for effective preventive strategies, driving heavy global investment into RSV vaccine and monoclonal antibody research.

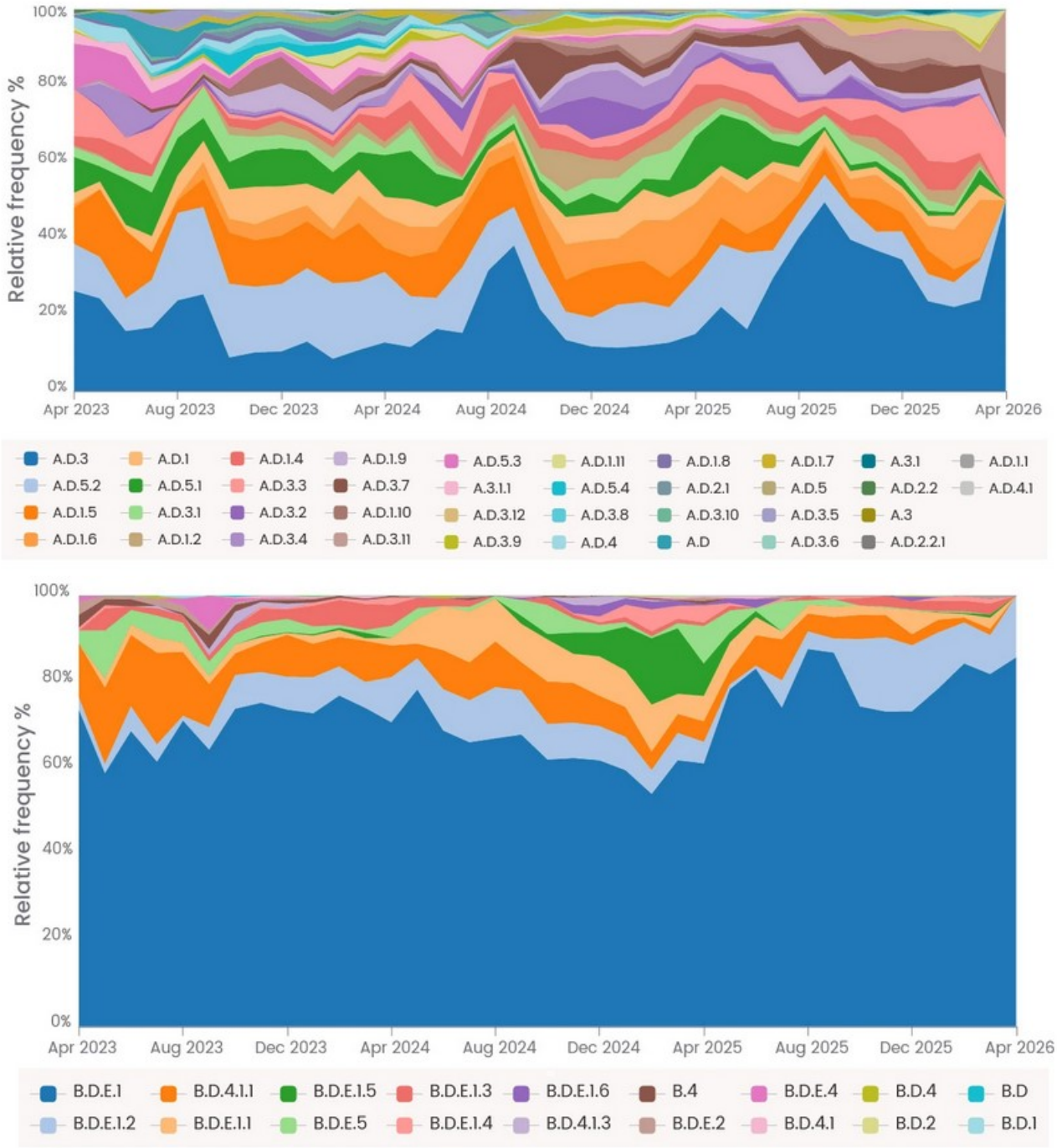


Figure 1. Lineage Progression of RSV Subtype A and B since 2023. (Image source: https://gisaid.org/rsv-subtypes-dashboard)

Clinical Research Status of RSV Vaccines

The clinical landscape for RSV prevention has advanced rapidly in recent years, largely driven by breakthroughs in the structural biology of the RSV fusion (F) glycoprotein—specifically the stabilization of the prefusion (preF) conformation. Currently, the global RSV pipeline includes dozens of active vaccine candidates and monoclonal antibodies (mAbs) in clinical trials. Vaccine development is heavily segmented into three primary target populations: pediatric (via mAbs or live-attenuated vaccines), maternal (to induce protective antibodies for newborns), and older adults (relying on adjuvanted subunit, mRNA, and vector-based platforms). With several first-generation RSV vaccines recently receiving regulatory approval, clinical research has shifted toward optimizing immunogenicity, evaluating the durability of revaccination, and developing combination respiratory vaccines.

Examples of Current Vaccines Under Clinical Trials

The clinical pipeline for next-generation RSV vaccines is highly active, showcasing a variety of advanced platforms and combination strategies:

- Clover Biopharmaceuticals (SCB-1019 & Combination Vaccines): Clover is advancing a recombinant RSV preF subunit vaccine (SCB-1019). Recent Phase 1 data demonstrated its potential as a highly effective revaccination booster for older adults who previously received other approved RSV vaccines. Expanding on this, Clover initiated a Phase 2 trial evaluating multivalent respiratory combination candidates—SCB-1022 (RSV + hMPV) and SCB-1033 (RSV + hMPV + PIV3)—utilizing their protein-based trimer platform .
- Moderna (mRNA-1365): After launching its RSV mRNA vaccine (mRESVIA), Moderna began Phase 1 clinical trials for mRNA-1365, a combination vaccine utilizing mRNA technology to target both RSV and human metapneumovirus (hMPV) in a single dose .
- The PIPELINE-RSV Trial: This massive international adaptive platform trial is evaluating a combined prevention approach. The trial randomly assigns pregnant women and their infants to receive a maternal RSV vaccine, an infant monoclonal antibody, or both simultaneously to determine if dual administration provides superior infant protection .

Real-World Effectiveness of RSV Vaccines in Vulnerable Populations

While phase 3 clinical trials have consistently demonstrated moderate to high efficacy for RSV preF vaccines, assessing their impact in real-world settings is crucial. Clinical trials often underrepresent the populations at the highest risk for severe RSV disease, such as individuals over 80 years old, those with extensive cardiopulmonary comorbidities, and immunocompromised patients. Recent observational studies are bridging this gap. A multicentre, test-negative case–control study by Symes and colleagues evaluated the bivalent RSV preF vaccine across 14 hospitals in England. Focusing on adults admitted with acute respiratory illness (ARI), the study reported highly encouraging real-world protection rates:

- 82.3% effectiveness against hospital admission for RSV-associated ARI.
- 86.7% effectiveness against severe RSV disease requiring oxygen use, intensive care unit admission, or mechanical ventilation.
- 78.8% protection against hospital admission for exacerbations of chronic lung disease, heart disease, and/or frailty.
- 72.8% estimated vaccine effectiveness among those with immunosuppression.

Research Applications

Recombinant respiratory syncytial virus (RSV) fusion (F) proteins, especially prefusion-stabilized pre-F antigens, are now important tools in RSV vaccine research. They are used as vaccine antigens. They are also used as design tools for new vaccines and as assay reagents for antigen testing and immune-response analysis. Recent studies show that recombinant pre-F proteins support RSV vaccine development from clinical vaccines to nanoparticle and mRNA vaccine studies. In a phase 3 trial, Papi et al. demonstrated that an AS01E-adjuvanted subunit vaccine using recombinant prefusion RSV F protein (RSVPreF3 OA) provided older adults with strong protection against RSV-related lower respiratory tract disease and acute infection (Figure 2). This confirms that recombinant pre-F functions successfully as a highly effective clinical vaccine antigen. Marcandalli et al. utilized recombinant

prefusion-stabilized RSV F trimers (DS-Cav1) as the scaffold for a self-assembling nanoparticle vaccine (Figure 3). Displaying multiple copies of recombinant preF on nanoparticles yielded significantly stronger neutralizing antibody responses than soluble trimers alone, highlighting its value in structure-guided vaccine design. In developing an AAV5-based RSV vaccine, Ma et al. leveraged recombinant RSV proteins for crucial testing and immune response analysis. They utilized RSV-F antibodies (11049-R302, Sino Biological) for Western blot expression confirmation, alongside recombinant RSV-F (11049-V08B, Sino Biological) and RSV-G (40041-V08H, Sino Biological) proteins as ELISA coating antigens to track post-vaccination serum antibody responses (Figure 4). In a 2025 study, Sun et al. developed a Pre-F-EABR eVLP mRNA vaccine, utilizing the pre-F construct as the immunogen scaffold (Figure 5). To precisely analyze immune responses, they used Sino Biological recombinant RSV Pre-F (11049-VNAS, Sino Biological) and Post-F (11049-V08H5, Sino Biological) as ELISA coating antigens to successfully differentiate and confirm robust, pre-F-specific protective antibodies.

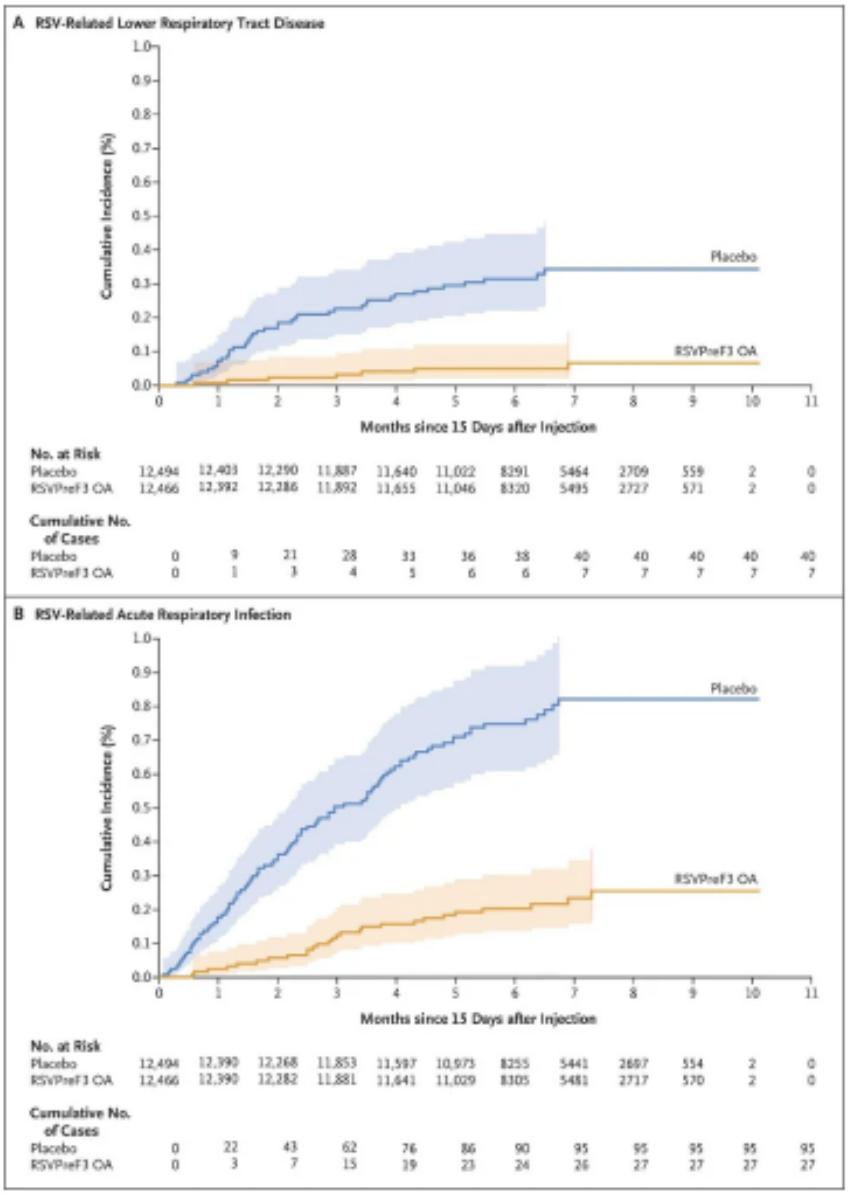


Figure 2. Cumulative incidence of RSV-related lower respiratory tract disease and RSV-related acute respiratory infection in older adults receiving the RSVPreF3 OA vaccine or placebo. (doi: 10.1016/j.cell.2019.01.046). (Image source: https://www.nejm.org/doi/10.1056/NEJMoa2209604)

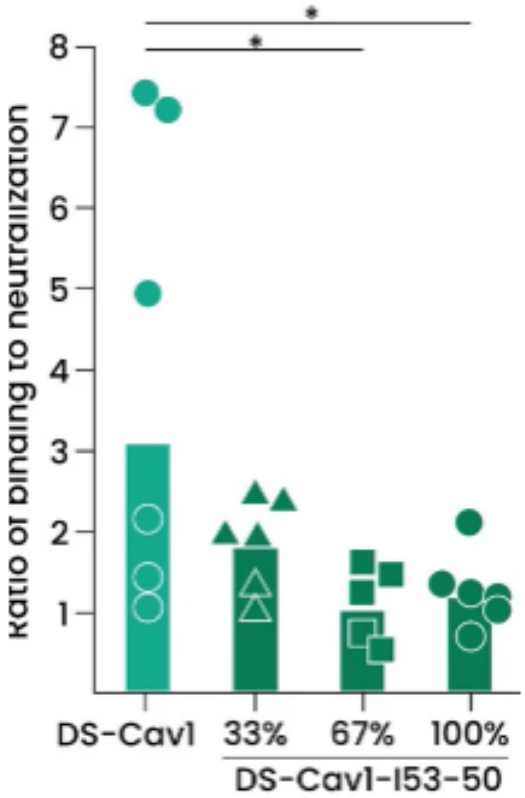


Figure 3. Structure-based design of a self-assembling nanoparticle displaying 20 copies of prefusion RSV F and its stronger induction of neutralizing antibody responses. (doi: 10.1016/j.cell.2019.01.046)
(Image source: https://pmc.ncbi.nlm.nih.gov/articles/PMC6424820/)

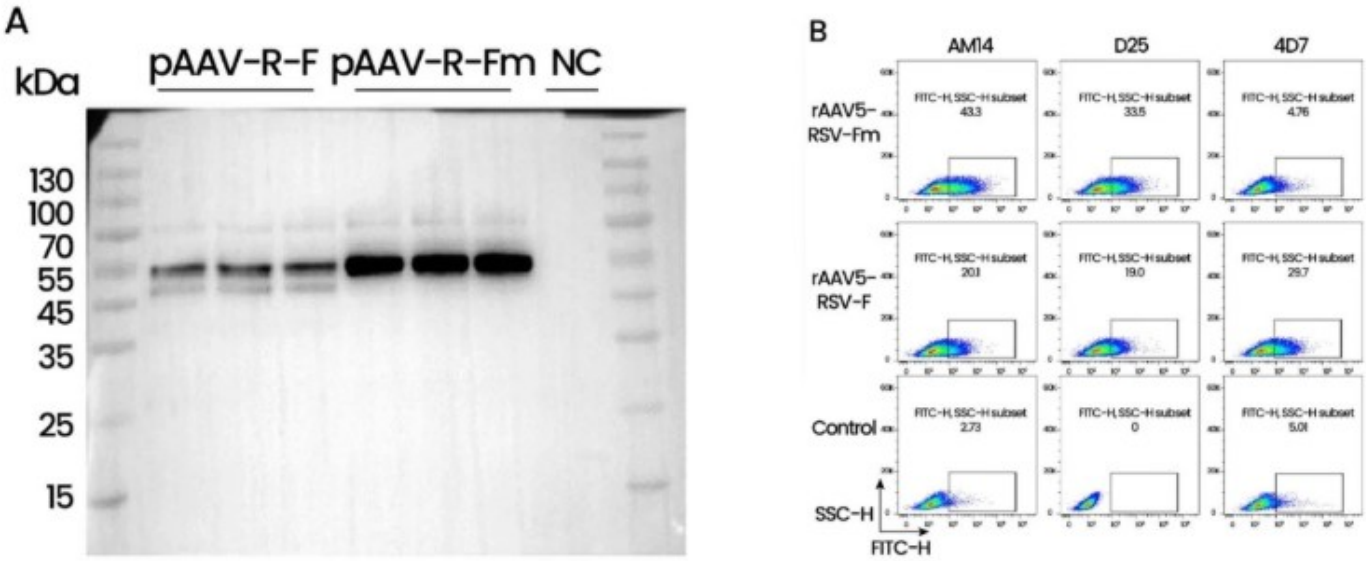


Figure 4. Sino Biological RSV reagents supported antigen expression confirmation and conformational characterization of RSV F in an AAV5-based vaccine study. (doi: 10.3389/fimmu.2024.1451433)
(Image source: https://pmc.ncbi.nlm.nih.gov/articles/PMC11513327/)

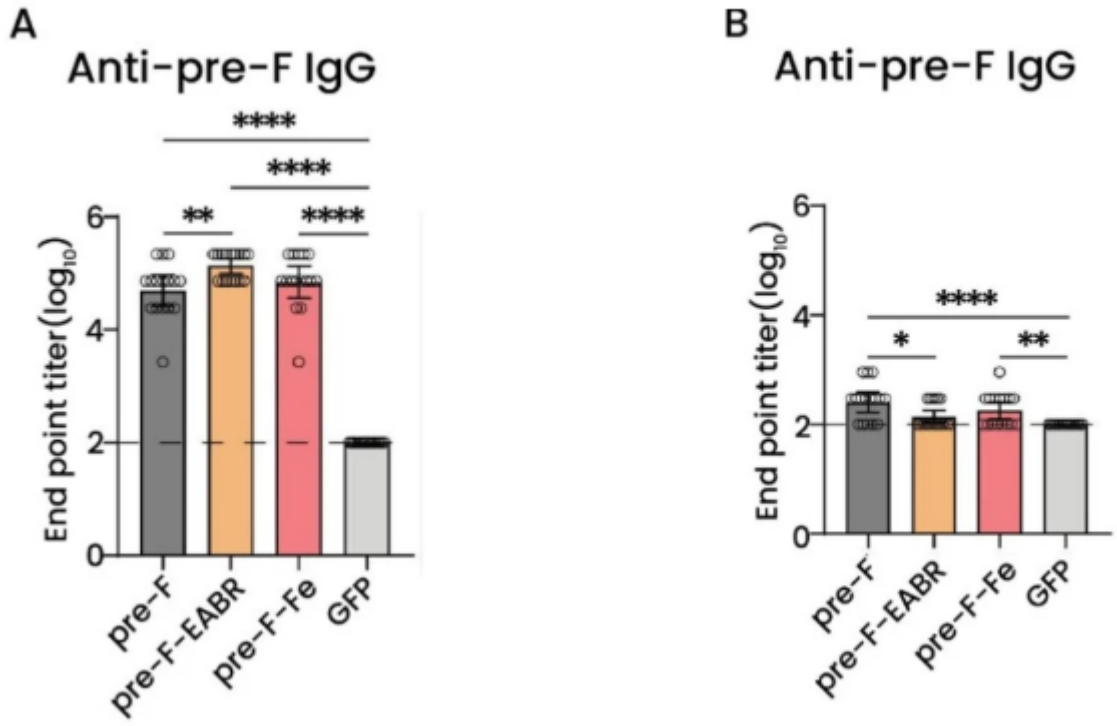


Figure 5. Sino Biological Recombinant Pre-F and Post-F proteins were used as ELISA coating antigens to distinguish preF-specific and postF-specific antibody responses elicited by RSV mRNA vaccine candidates. (doi: 10.1128/jvi.01209-25). (Image source: https://pmc.ncbi.nlm.nih.gov/articles/PMC12548431/)

Fuente: BioSpace. Disponible en https://n9.cl/no509j

La OPS selló un acuerdo para reservar vacunas contra la influenza pandémica en América Latina y el Caribe

12 may. La Organización Panamericana de la Salud (OPS) estableció un acuerdo a largo plazo con la compañía CSL Seqirus destinado a asegurar "una reserva de parte de la producción de vacunas contra la influenza pandémica para los países de América Latina y el Caribe durante una futura pandemia de influenza", según consta en la comunicación oficial.

En el documento se resalta que esta medida marca un cambio fundamental en la estrategia regional, al permitir el acceso anticipado y priorizado a dosis críticas en situaciones donde la demanda global supera la capacidad de producción, un fenómeno evidenciado durante la pandemia de COVID-19.

En este marco, la organización regional destacó que, por primera vez, los países latinoamericanos y caribeños podrán negociar condiciones de adquisición de vacunas como bloque regional y no como mercados individuales.

Según informó la OPS, "el acuerdo establece un mecanismo que reserva un porcentaje fijo de la producción mundial de vacunas contra la influenza pandémica de la empresa para los Estados

Miembros de la OPS participantes. Los países participantes tendrán la opción de acceder a una asignación inicial de dosis reservadas".

Se trata de un mecanismo que, en palabras de Jarbas Barbosa, director de la OPS, constituye "una respuesta directa a las duras lecciones que dejó la COVID-19 y representa un paso importante para fortalecer la seguridad sanitaria y la preparación ante pandemias en las Américas".

El acuerdo incorpora la transferencia de tecnología y la producción regional, aspecto relevante en función de la experiencia reciente de desabastecimiento y competencia internacional desventajosa para los países de ingresos medios. De acuerdo a lo comunicado por la OPS, parte de la fabricación se realizará en Argentina a través de la empresa Sinergium Biotech, fortaleciendo la capacidad manufacturera local y la resiliencia de las cadenas de suministro de vacunas en la región.

El objetivo central del entendimiento es reducir los tiempos de acceso a vacunas en contextos de emergencia, cuando la presión de la demanda global y la escasez de insumos afectan especialmente a los países de ingresos medios, que históricamente han enfrentado desventajas estructurales en el mercado internacional.

La OPS precisó que las dosis reservadas se asignarán de acuerdo con datos epidemiológicos y riesgos para la salud pública, asegurando prioridad a los grupos más vulnerables durante una pandemia. A través de los Fondos Rotatorios Regionales, el organismo facilita una compra conjunta y equitativa, aliviando las diferencias que suelen existir entre países de alto y mediano ingreso.

Este mecanismo innovador se apoya en la demanda sostenida que los países latinoamericanos y caribeños expresan anualmente a través de dichos fondos, un instrumento que, según la OPS, ha permitido expandir la producción regional y consolidar relaciones de suministro estratégico con empresas globales como CSL Seqirus. En palabras de David Ross, vicepresidente ejecutivo y gerente general de CSL Seqirus, la empresa se enorgullece de establecer "este tipo de alianza en América Latina y el Caribe por primera vez" y de combinar "dosis reservadas, capacidad regional de manufactura y un compromiso público-privado de largo plazo".

El proceso que desembocó en el acuerdo fue internacional y competitivo, extendiéndose durante un año de negociaciones. Según explicó la OPS, se trata de uno de los primeros acuerdos diseñados específicamente para mejorar el acceso de países de ingresos medios, quienes no cuentan con el mismo poder de negociación que las economías de altos ingresos, quedando frecuentemente relegados en momentos críticos de escasez de vacunas.

La respuesta regional ante la amenaza de virus respiratorios

El valor estratégico del reciente acuerdo se inscribe en un contexto de aumento de la exposición a virus respiratorios en la región. Entre los patógenos de mayor circulación, la OPS identifica la influenza, el virus SARS-CoV-2 y el virus respiratorio sincicial (VRS), agentes que afectan principalmente las vías respiratorias superiores y se transmiten por secreciones respiratorias, siendo

especialmente peligrosos para recién nacidos, personas adultas mayores y quienes presentan comorbilidades crónicas.

La OPS advirtió, mediante una reciente alerta epidemiológica, sobre desafíos inmediatos en el hemisferio sur durante la temporada 2026, tras observarse en el hemisferio norte predominancia del virus de la influenza A(H3N2) del subclado K. Este subtipo, según la Organización, ocasionó actividad epidémica intensa en plazos breves y mostró una efectividad moderada de la vacuna antigripal.

Basándose en datos de la temporada 2025-2026 del hemisferio norte, la OPS y la OMS recomendaron a los Estados Miembros elevar el monitoreo virológico y epidemiológico, especialmente mediante la caracterización genómica de los virus, e intensificar los planes de preparación hospitalaria ante la posible presión sistémica ocasionada por la co-circulación de influenza A(H3N2) y VRS.

La entidad instó además a adelantar campañas de vacunación, resaltando que “la vacunación contra la influenza antes del inicio de la circulación del virus estacional sigue siendo la mejor medida preventiva contra la influenza grave”. La OPS subrayó que la inmunización resulta esencial para prevenir hospitalizaciones y muertes asociadas no sólo a influenza estacional, sino también a COVID-19 y VRS.

Se recomendó priorizar a adultos mayores, pacientes con enfermedades subyacentes, niños entre seis y 59 meses y mujeres embarazadas para la inmunización anual, y continuar con la administración de refuerzos de vacuna contra COVID-19 cada seis a doce meses para estos grupos, salvo para los menores de 59 meses, quienes sólo deben recibir la vacuna antigripal.

La prevención va más allá de la vacunación: el lavado de manos, el uso de mascarilla en personas sintomáticas y la permanencia en el hogar durante episodios febriles o de síntomas respiratorios son considerados por la OPS prácticas esenciales para limitar la transmisión. La organización enfatizó la importancia de la etiqueta respiratoria y recomendó que los escolares con fiebre o síntomas respiratorios permanezcan en sus domicilios hasta la remisión de los síntomas.

En términos de comunicación de riesgos, la OPS propuso integrar las campañas informativas de prevención de influenza y COVID-19, aprovechando los saberes adquiridos por la población tras la experiencia de la pandemia reciente. Sugirió a los Estados Miembros desarrollar estrategias de comunicación que refuercen la percepción y el cumplimiento de las medidas preventivas múltiples.

“Por primera vez, los países latinoamericanos y caribeños se posicionan en condiciones más equitativas frente a una futura emergencia sanitaria mundial, no como mercados individuales, sino como región”, afirmó el doctor Barbosa. Resaltó que el entendimiento es “una demostración de lo que es posible cuando actuamos juntos y aprovechamos el poder de las compras conjuntas”.

La OPS considera que la preparación ante amenazas como la influenza aviar y otras enfermedades zoonóticas debe constituir una prioridad duradera. Destacó que los virus de influenza de origen animal continúan entre los agentes patógenos con mayor probabilidad de generar eventos pandémicos de gran escala a futuro.

Fuente: infobae. Disponible en https://n9.cl/zb9f9q

El mosquito antidengue: un avance pero no una panacea en Brasil

13 may. Casi con amor, el científico brasileño Luciano Moreira sostiene una caja de vidrio donde se arremolinan mosquitos antidengue: una apuesta que ha resultado eficaz contra la enfermedad, pero que muestra sus límites para extenderse en Brasil.

Para que nadie descubra secretos del método, los asesores de Moreira piden no fotografiar equipos de esta biofábrica en Curitiba, en el sur de Brasil, donde funciona el mayor criadero de "wolbitos" del mundo.

Así llama este reputado entomólogo, de 59 años, a los Aedes aegypti inoculados con Wolbachia, una bacteria que les impide desarrollar dengue.

"Estamos en un momento decisivo para lograr expandirnos en Brasil", dice a la AFP Moreira, reconocido por su trabajo en 2025 entre los diez científicos más destacados del mundo por la revista Nature y este año entre las 100 personas más influyentes de Time.

El método consiste en liberar "wolbitos" en zonas urbanas, donde en cuestión de meses sustituyen por transmisión generacional a los mosquitos que contagian dengue.

Cien millones de huevos semanales

La biofábrica se inauguró en 2025 con apoyo del instituto público Fiocruz y la ONG internacional World Mosquito Program (WMP).

En su sala de reproducción, algunos de sus 70 empleados se limpian el sudor.

La calefacción está regulada a gusto de los mosquitos, encerrados en grandes e iluminadas jaulas de tela traslúcida.

La sala huele a su alimento: sangre caliente de caballo y agua con azúcar.

Las hembras pueden dar cien millones de huevos por semana infectados con Wolbachia, que se transmite a las crías.

El investigador Luciano Moreira sostiene una caja con mosquitos Aedes aegypti antidengue tras una entrevista con la AFP, el 19 de marzo de 2026 en Curitiba, al sur de Brasil © Nelson Almeida / AFP

Embalados en cápsulas, los huevos se despachan a centros municipales, donde los eclosionan y liberan.

En dos ciudades con estudios científicos sobre el método, Niterói -cerca de Rio de Janeiro- y Campo Grande (centro-oeste), los resultados fueron espectaculares: caídas de 89% y 63% del dengue, respectivamente.

"Antes no había dengue"

Pero la cura no avanza más rápido que la enfermedad. Primeramente, el cambio climático "aumenta la diseminación del virus. En el sur del país, que era mucho más frío, antes no había dengue" y ahora sí, alerta Moreira, fundador de la biofábrica y hoy asesor del WMP.

Además, aunque el gobierno de izquierda de Luiz Inácio Lula da Silva reconoció al método Wolbachia como un medida de salud pública, los tiempos del Estado no van a a la par con la procreación de mosquitos.

Los huevos producidos en Curitiba se distribuyen a otras ciudades siguiendo órdenes de las autoridades sanitarias.

Pero la fábrica tuvo que reducir la producción porque la demanda (del ministerio de Salud) no estaba tan alta, dice Moreira.

Según la bióloga y epidemióloga Ludimila Raupp, profesora de la Pontificia Universidad Católica de Rio, hay "urgencia" en expandir el método Wolbachia para luchar contra el dengue en Brasil.

Pero ampliar la cobertura nacional "no es fácil" y cita el caso de Rio de Janeiro donde la implementación tuvo "graves fallas" y una "descoordinación institucional", dice a la AFP.

Según esta experta, la ciudad registró resultados modestos porque los equipos sanitarios hicieron un uso intensivo de larvicidas perjudiciales para los "wolbitos".

La violencia del crimen organizado también complicó la implementación en favelas cariocas, según Moreira.

Desafíos

La expansión del método tiene desafíos "técnicos, operacionales, logísticos y financieros", admite a la AFP el ministro de Salud, Alexandre Padilha.

Sin embargo, defiende los avances: solo en 2026 este se implementará en 54 municipios de Brasil, para totalizar 70 a finales de año.

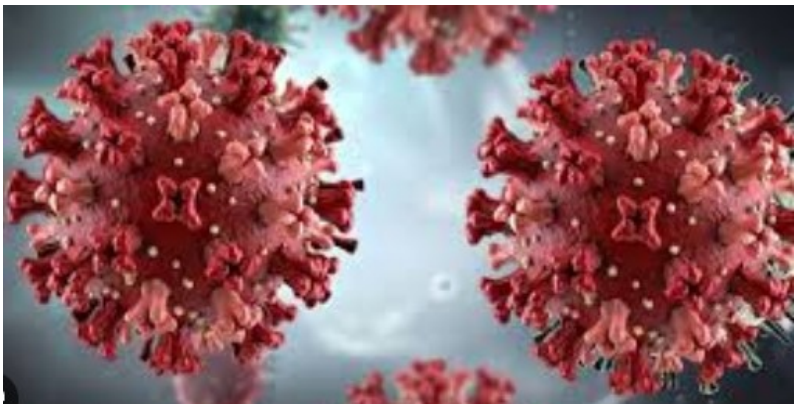
Moreira explica que la técnica demora unos dos años para mostrar resultados y avisa que no es una fórmula "mágica", sino una estrategia "complementaria" a otras como la vacuna.

Los "wolbitos" de Moreira descienden de Aedes aegypti inoculados con Wolbachia casi dos décadas atrás en Australia, donde el científico hizo su posdoctorado en entomología.

El equipo que integraba descubrió en 2008 que esa bacteria común en otros insectos bloquea el dengue, el zika y el chikungunya.

Fuente: France24. Disponible en https://n9.cl/kvxa7

COVID-19, hantavirus, and disease X: Preparing for the next epidemic



May 14. The hantavirus is currently circulating on a passenger ship. The virus threatens and has already killed people. For many, this evokes fear and memories of the COVID-19 pandemic.

The following questions are currently occupying not only scientists and futurologists: 1. Can hantavirus mutate? 2. Does it have the potential of COVID-19 and what are the fundamental differences? 3. What viral infection could be even more dangerous in the future than COVID-19 or the Spanish flu? 4. What would a virus be that contains elements of human immunodeficiency virus (HIV), Ebola, and influenza?

A type of “Ebolapox”? Would this be dangerous or could it be quickly brought under control with vaccinations? Defined in short sentences that are understandable to laypeople:

1. Can hantavirus mutate? Yes. Like all viruses, hantavirus mutates. Viruses constantly copy their genetic material, which can lead to minor errors. These errors usually don’t change anything fundamental, but they allow the virus to adapt to new environments or hosts (such as humans).

2. Hantavirus vs COVID-19: The potential. While hantavirus is often more deadly than COVID-19 (depending on the type, up to 40 percent of those infected die), it has so far had a significantly lower pandemic potential.

Transmission: Hantaviruses are typically transmitted by rodents (urine and feces). Human-to-human transmission is extremely rare (known only for one specific type in South America). Infectiousness: COVID-19 spreads extremely quickly through the air (aerosols).

Hantaviruses are far less efficient in this regard. 3. More dangerous infections of the future: Scientists are primarily observing the so-called “Disease X”—a still unknown pathogen. Particularly dangerous could be: Avian influenza variants. If they learn to spread easily from person to person, this combines high mortality with rapid spread. Nipah virus: It has a very high mortality rate (up to 75 percent), but fortunately, so far, it is not easily transmitted. Resistant bacteria: While these are not viruses, they could usher in an era in which simple infections are no longer curable.

4. A “hybrid virus” (HIV + Ebola + influenza): Such an artificial or mutated virus would theoretically be the most dangerous scenario imaginable: Influenza component: Would cause rapid airborne spread. Ebola component: Would lead to severe internal bleeding and massive mortality. HIV component: Would disable the immune system in the long term and make it difficult for the body to detect it.

Control: Such a virus would be extremely difficult to control with vaccinations. HIV, for example, mutates so rapidly that even after decades we still don’t have a perfect vaccine. The combination of rapid mutation (HIV/influenza) and high virulence (Ebola) would likely overwhelm the health care system immediately. Hantavirus jumping from person to person on a ship would be a highly unusual and novel event, immediately triggering the strictest quarantine measures worldwide. Usually, the danger remains localized to contact with rodents.

Since serving as a young adult in the military in a biodefense unit and briefly in a biosafety laboratory level 4, I have been fascinated by viruses, bacteria, and toxins from a scientific perspective. These existed long before humans and will continue to exist long after we are gone. Let's hope for the best, but prepare for the worst.

Fuente: INQUIRER.NET. Disponible en https://n9.cl/adkga

Los virus más peligrosos del mundo según la OMS: desde el ébola hasta la enfermedad X

15 may. Dentro del contexto actual existen algunos virus que se han consolidado dentro de los más peligrosos del mundo. Todos son patógenos que tienen un alto potencial pandémico debido a la interconexión poblacional. Además cada uno es capaz de transformar la realidad médica, social y económica del planeta como ha quedado demostrado en fechas recientes.

El ejemplo más claro se vivió con la pandemia de Covid-19. El microorganismo irrumpió de manera intempestiva y en cuestión de semanas se expandió por todo el planeta. A la fecha se estima que hubo un total de 7,111,504 decesos confirmados por la infección directa del virus SARS-CoV-2; sin embargo, la cifra real podría ser mucho mayor.

¿Cómo se mide la peligrosidad de un virus?

La Organización Mundial de la Salud (OMS) clasifica la peligrosidad de los virus no sólo por su letalidad individual, sino por su potencial epidémico o pandémico y la ausencia de tratamientos o vacunas eficaces.

Para lo anterior utiliza la plataforma científica del R&D Blueprint (Plan de Acción de I+D para las Epidemias), la cual prioriza familias virales enteras para acelerar la contención global.

¿Cuáles son los virus más peligrosos del mundo?

Una vez establecido el parámetro general, los virus más peligrosos y bajo máxima vigilancia del mundo se agrupan en las siguientes categorías prioritarias.

Filovirus (muy alta letalidad)

Son virus que causan fiebres hemorrágicas graves con tasas de mortalidad que pueden rozar el 90%.

- ⇒ Virus del ébola: Sigue estando al frente de las alarmas internacionales. Precisamente, la OMS se mantiene en alerta máxima debido al desarrollo de un nuevo brote de ébola en la República Democrática del Congo.
- ⇒ Virus de Marburgo: Estrechamente ligado al ébola, este patógeno ha provocado brotes críticos y recientes en zonas de África oriental como Tanzania y Etiopía, presionando gravemente los sistemas de salud.

Virus de la Influenza Tipo A (amenaza pandémica inminente)

Gripe Aviar Altamente Patógena (H5N1): Es uno de los virus más peligrosos del mundo porque su dispersión sin precedentes en mamíferos y los casos esporádicos detectados en humanos mantienen a la OMS bajo alerta de bioseguridad ante el riesgo latente de que el virus mute y adquiera una transmisión interhumana eficiente.

Henipavirus (ataque al sistema nervioso)

Virus Nipah: Transmitido originalmente por murciélagos de la fruta, es uno de los patógenos más temidos debido a su capacidad para provocar encefalitis grave y problemas respiratorios. Su tasa de mortalidad se sitúa entre el 40% y el 70%, y en los ciclos de 2025 y 2026 se han vuelto a registrar brotes localizados en Asia (como Bangladesh e India).

Arbovirus emergentes (transmitidos por vectores)

El cambio climático y la urbanización han acelerado la expansión geográfica de virus transmitidos por insectos.

- ⇒ Virus Oropouche: Ha cobrado un protagonismo inusual en el radar de la OMS tras un marcado incremento de casos en América. A principios de enero de 2026, la organización publicó una hoja de ruta específica de investigación y desarrollo (R&D roadmap) para combatir este virus debido a la expansión del mosquito que lo transmite.
- ⇒ Dengue, Zika y Chikungunya: Todos se mantienen dentro de la lista de los virus más peligrosos por su enorme carga de morbilidad y la falta de contención efectiva en zonas tropicales y templadas.

Poxvirus (emergencias continentales)

Mpox (Viruela del mono): El virus de Mpox, particularmente la variante clado I, continúa catalogado como una Emergencia de Salud Pública de Seguridad Continental debido a su persistencia en más de una veintena de países africanos y exportaciones de casos a nivel global.

Arenavirus de Fiebre Hemorrágica

Fiebre de Lassa y Fiebre Hemorrágica de Crimea-Congo: Virus endémicos en varias regiones que causan brotes estacionales con altas tasas de letalidad y para los cuales la OMS mantiene guías prioritarias de desarrollo de contramedidas médicas.

La "Enfermedad X"

La OMS mantiene siempre este concepto en su lista de máximas amenazas. No es un virus real conocido, sino una reserva metodológica: representa el peligro latente de un patógeno actualmente desconocido que pueda emerger en el futuro y causar una epidemia humana internacional, para la cual la infraestructura científica mundial debe estar preparada para responder en un plazo menor a 100 días.

Fuente: SALUDIARIO. Disponible en https://n9.cl/njcqen

WHO declares international emergency as Ebola outbreak kills more than 80 in DR Congo

May 17. An Ebola outbreak in the Democratic Republic of Congo has killed more than 80 as authorities warned there was no vaccine for the strain in a crisis that the World Health Organization declared an international health emergency on Sunday.

A total of 88 deaths and 336 suspected cases of the highly contagious haemorrhagic fever have been reported, the Africa Centres for Disease Control and Prevention (CDC Africa) said in an update on Saturday.

The Geneva-based WHO said early on Sunday the outbreak caused by the Bundibugyo strain of Ebola constituted a "public health emergency of international concern" - the second-highest level of alert under international health regulations.

The global health body warned the true scale of the number of cases and spread was not clear but stopped short of declaring a pandemic emergency, the highest alert level introduced in 2024.

Medical aid group Doctors Without Borders (MSF) said it was preparing a "large-scale response", calling the rapid spread of the outbreak "extremely concerning", in warnings echoed by authorities.

"The Bundibugyo strain has no vaccine, no specific treatment," DR Congo's Health Minister Samuel-Roger Kamba said.

"This strain has a very high lethality rate, which can reach 50 percent."

The strain - which was first identified in 2007 - has also killed a Congolese national in neighbouring Uganda, officials said Saturday.

Vaccines are only available for the Zaire strain, which was identified in 1976 and has a higher fatality rate of 60-90 percent.

Health officials had confirmed the latest outbreak Friday in Ituri province in northeastern DRC, bordering Uganda and South Sudan, according to CDC Africa.

"We've been seeing people die for the past two weeks," said Isaac Nyakulinda, a local civil society representative contacted by AFP by phone.

"There is nowhere to isolate the sick. They are dying at home and their bodies are being handled by their family members."

According to Kamba, patient zero was a nurse who reported to a health facility in Ituri's provincial capital Bunia on April 24, with symptoms suggesting Ebola.

Symptoms of the disease include fever, haemorrhaging and vomiting.

"The number of cases and deaths we are seeing in such a short timeframe, combined with the spread across several health zones and now across the border, is extremely concerning," says Trish Newport, MSF Emergency Programme Manager, which is mobilising medical and support staff to the area.

Large-scale transport of medical equipment is a challenge in DR Congo, a country of more than 100 million people which is four times the size of France but has poor communications infrastructure.

High risk of spread

It is the 17th Ebola outbreak to hit the DRC, and officials warned of a high risk of spread.

"There are significant uncertainties to the true number of infected persons and geographic spread," the WHO said.

But it added the high positivity rate of initial samples, the confirmation of cases in two countries, and the increasing reports of suspected cases, "all point towards a potentially much larger outbreak than what is currently being detected and reported, with significant local and regional risk of spread."

The previous outbreak of Ebola - which has killed around 15,000 people in Africa over the past 50 years, despite advances in vaccines and treatment - was last August in the central region.

That episode killed at least 34 people, before being declared eradicated in December.

Nearly 2,300 people died in the deadliest outbreak in the DRC between 2018 and 2020.

Ebola, believed to have originated in bats, can cause severe bleeding and organ failure.

Outbreaks over the past half century have seen a mortality rate among those affected of between 25 percent and 90 percent, according to WHO

The virus spreads from person to person through bodily fluids or exposure to the blood of an infected persons, who become contagious only once they display symptoms. The incubation period can last up to 21 days.

Fuente: GULF NEWS. Disponible en https://n9.cl/veozz3

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Estrategia de búqueda: *(Vaccine) AND DP:([01.05.2026 TO 17.05.2026]) as the publication date 56 records.*

1.WO/2026/090880POLYPEPTIDE CHIRAL VACCINE, PREPARATION METHOD THEREFOR AND USE THEREOF IN TREATMENT OF PROTEIN CONFORMATIONAL DISEASES

WO - 07.05.2026

Clasificación Internacional C07K 7/08Nº de solicitud PCT/CN2024/128339Solicitante HUAHAN ZEPING (BEIJING) TECHNOLOGY CO., LTDInventor/a LI, Meijun

Provided are a polypeptide chiral vaccine, a preparation method therefor and the use thereof in the treatment of protein conformational diseases. Firstly, a D-amino acid is introduced into a polypeptide to obtain a polypeptide having a D-amino acid, which is abbreviated to a D-polypeptide. Then, the D-polypeptide is assembled to obtain a polypeptide assembly. The prepared polypeptide assembly has a conformation similar to that of a pathological protein aggregate and is a cross antigen of the pathological protein aggregate. The polypeptide assembly is then used as an active ingredient to prepare a vaccine, i.e., the chiral vaccine. After injection of the chiral vaccine, antibodies produced by the body can target pathological protein aggregates, thereby preventing and/or treating protein conformational diseases.

2.WO/2026/092023RECOMBINANT TOXOPLASMA GONDII VACCINE HAVING UNDERGONE GENE DELETION AND CONSTRUCTION METHOD THEREFOR

WO - 07.05.2026

Clasificación Internacional C12N 1/11Nº de solicitud PCT/CN2025/124480Solicitante CHINA AGRICULTURAL UNIVERSITYInventor/a SUO, Xun

Belonging to the field of genetic engineering, a recombinant Toxoplasma gondii vaccine having undergone gene deletion and a construction method therefor are provided. Specifically, a recombinant Toxoplasma gondii strain having undergone gene deletion, a medicament and/or biological product containing same, a construction method, and a use thereof are provided. A live attenuated toxoplasmosis vaccine developed on the basis of the recombinant Toxoplasma gondii strain is suitable for immunoprophylaxis of toxoplasmosis in various mammals, can block transmission of toxoplasmosis to humans and other animals, and is particularly suitable for immunoprophylaxis of feline Toxoplasma gondii infection and/or toxoplasmosis. The provided vaccine is easy to produce, is high in safety, has excellent efficacy, has long immune duration, is capable of distinguishing vaccine immunization from natural infection, does not harm animals or the environment, is capable of effectively reducing residual Toxoplasma oocysts in the environment, and is capable of reducing the risk of human infection with toxoplasmosis.

3.WO/2026/092314ADJUVANT COMPOSITION, RESPIRATORY SYNCYTIAL VIRUS VACCINE COMPOSITION, AND USE THEREOF

WO - 07.05.2026

Clasificación Internacional A61K 39/39Nº de solicitud PCT/CN2025/129804Solicitante HUAPU

SHIJIAZHUANG PHARMACEUTICAL CO., LTD.Inventor/a GUO, Qiran

The present invention relates to the technical field of biomedicine, and in particular to an adjuvant composition, a respiratory syncytial virus (RSV) vaccine composition, and a use thereof. An aluminum adjuvant and a CpG ODN adjuvant are combined in proportion to form an adjuvant composition. An RSV vaccine composition comprising the adjuvant composition has better immunostimulatory activity, can enable early induction of a high humoral immune response, can maintain a strong cellular immune response for a long time, can produce an immune response comparable to that of a licensed vaccine Arexvy, and is a safe, effective and promising human RSV candidate vaccine.

4.WO/2026/090881METHOD FOR PREPARING CONFORMATIONAL POLYPEPTIDE VACCINE AND USE THEREOF IN TREATMENT OF PROTEIN CONFORMATIONAL DISEASE

WO - 07.05.2026

Clasificación Internacional A61K 39/00Nº de solicitud PCT/CN2024/128341Solicitante HUAHAN ZEPING (BEIJING) TECHNOLOGY CO., LTDInventor/a LI, Meijun

A method for preparing a conformational polypeptide vaccine and the use thereof in the treatment of a protein conformational disease. Provided is a novel idea of using a conformational antigen as an active ingredient of a vaccine. The conformational antigen is a polypeptide assembly, is formed by self-assembly of an artificially designed polypeptide, has a conformation similar to that of a pathological protein aggregate having a β structure, and is a cross antigen for the pathological protein aggregate having the β structure. The conformational antigen is used as an active ingredient to prepare a vaccine. After the vaccine is injected, an antibody generated by the body can target the pathological protein aggregate having the β structure, thereby preventing and/or treating a protein conformational disease.

5.20260130977PREPARATION METHOD FOR ADENOVIRUS P53-LOADED DENDRITIC CELL VACCINE

US - 14.05.2026

Clasificación Internacional A61K 39/00Nº de solicitud 19002625Solicitante Scinosen (Shenzhen) Gene Industry Development Co. Ltd.Inventor/a Diosdado Bautista

The present disclosure belongs to the field of biotechnology, and specifically relates to a preparation method for an adenovirus p53 (Ad-p53)-loaded dendritic cell (DC) vaccine. The present disclosure includes steps of peripheral blood collection and peripheral blood mononuclear cell (PBMC) separation, PBMC sorting, DC activation, Ad-P53-transfected DC and DC vaccine preparation. P53 can be expressed on a surface of DC as a tumor-associated antigen (TAA) through DC purification, specific multiplicity of infection (MOI) and infection modes, and the Ad-P53-transfected DC has obvious antigen presentation effect, which can be used as a vaccine to activate T cells to kill tumors.

6.WO/2026/096970EPSTEIN-BARR VIRUS ANTIGENS AND RELATED USES

WO - 07.05.2026

Clasificación Internacional A61K 39/245Nº de solicitud PCT/US2025/053653Solicitante VACCINE COMPANY, INC.Inventor/a WEIDENBACHER, Payton,

Anders-Benner

Provided herein are engineered Epstein-Barr virus (EBV) polypeptides, polynucleotides encoding the same, related vectors and vaccine compositions, and related methods of making and using said compositions. The compositions disclosed herein may be useful for vaccination against EBV.

7.20260124296NINE-COMPONENT ANTIGEN AFRICAN SWINE FEVER SUBUNIT VACCINE

US - 07.05.2026

Clasificación Internacional A61K 39/295Nº de solicitud 19353610Solicitante LANZHOU VETERINARY RESEARCH INSTITUTE, CHINESE ACADEMY OF AGRICULTURAL SCIENCESInventor/a Haixue ZHENG

The present disclosure belongs to the field of biotechnology, and specifically relates to a nine-component antigen African swine fever subunit vaccine. The present disclosure first provides an African swine fever virus antigen protein combination composed of the African swine fever virus P34 protein, P30 protein, P54 protein, A104R protein, E165R protein, C129R protein, P72 protein, X protein, and Y protein. This African swine fever virus antigen protein combination can induce a strong immune response in the host. Furthermore, the present disclosure provides a nine-component antigen African swine fever subunit vaccine including the aforementioned African swine fever virus antigen protein combination. The nine-component antigen African swine fever subunit vaccine exhibits good immunoprotection rates against challenge with the parental virulent African swine fever virus strain, poses no biosafety risks, overcomes the difficulty that existing African swine fever subunit vaccines domestically and internationally cannot provide effective immunoprotection for pigs.

8.20260124289SEVEN-COMPONENT ANTIGEN AFRICAN SWINE FEVER SUBUNIT VACCINE

US - 07.05.2026

Clasificación Internacional A61K 39/12Nº de solicitud 19353597Solicitante LANZHOU VETERINARY RESEARCH INSTITUTE, CHINESE ACADEMY OF AGRICULTURAL SCIENCESInventor/a Haixue ZHENG

The present disclosure belongs to the field of biotechnology, and specifically relates to a seven-component antigen African swine fever subunit vaccine. The present disclosure first provides an African swine fever virus antigen protein combination composed of the African swine fever virus P34 protein, P30 protein, P54 protein, A104R protein, C129R protein, X protein, and Y protein. This African swine fever virus antigen protein combination can induce a strong immune response in the host. Furthermore, the present disclosure provides a seven-component antigen African swine fever subunit vaccine including the aforementioned African swine fever virus antigen protein combination. The seven-component antigen African swine fever subunit vaccine exhibits good immunoprotection rates against challenge with the parental virulent African swine fever virus strain, poses no biosafety risks, overcomes the difficulty that existing African swine fever subunit vaccines domestically and internationally cannot provide effective immunoprotection for pigs.

9.4737563REKOMBINANTES ONKOLYTISCHES VACCINIAVIRUS UND VERWENDUNG DAVON

EP - 06.05.2026

Clasificación Internacional C12N 7/01Nº de solicitud 23943445Solicitante SUZHOU ONLYV

BIOTECHNOLOGY LTD COMPANYInventor/a 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 anti-tumor immunity by means of exciting a 4-1BB signal of 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.

10.20260130988SARS-CoV-2 universal recombinant antigen polypeptides, polynucleotides and uses thereof

US - 14.05.2026

Clasificación Internacional A61K 39/215Nº de solicitud 19344363Solicitante Korea National Institute of HealthInventor/a Mi Ran YUN

Proposed herein are a polypeptide including a SARS-CoV-2 universal antigen amino acid sequences, and a polynucleotide encoding the polypeptide. Also proposed herein are a vaccine composition for preventing SARS-CoV-2 infection, and a pharmaceutical composition for preventing or treating SARS-CoV-2 infection, wherein the vaccine and pharmaceutical compositions contain the polypeptide or polynucleotide as an active ingredient. The present invention provides a universal antigen polypeptide capable of responding not only to wild-type SARS-CoV-2 and currently circulating SARS-CoV-2 variants, but also to hypothetical SARS-CoV-2 variants, as well as a polynucleotide encoding the same. In addition, the present invention provides a SARS-CoV-2 universal antigen polypeptide with enhanced structural stability through amino acid substitutions at specific positions of the universal antigen polypeptide, and a polynucleotide encoding the same. Furthermore, the present invention provides a vaccine composition and a pharmaceutical composition comprising the SARS-CoV-2 universal antigen polypeptide or the polynucleotide as an active ingredient.

11.4734968ABGABESYSTEM AUF CALIXARENBASIS UND VERWENDUNGSVERFAHREN

EP - 06.05.2026

Clasificación Internacional A61K 9/51Nº de solicitud 24723121Solicitante PHOENIX BIOSCIENCES SAInventor/a VANDER STRAETEN AURÉLIEN

The current invention relates to a delivery system to deliver one or more cargo to one or more cells, wherein the cargo delivery system comprises at least a calixarene, a phospholipid, an additional lipid such as sterol. The invention further relates to a method of delivering cargo to a subject using the delivery system and a pharmaceutical composition comprising the delivery system. The invention also relates to the use of a calixarene in an immunogenic composition, wherein said composition comprises an immunogenic component

encapsulated in a lipid nanoparticle (LNP) comprising said calixarene and wherein said LNP has an adjuvant effect in said immunogenic composition. The invention also relates to a vaccine, wherein said vaccine comprises an immunogenic component encapsulated in a lipid nanoparticle, wherein said lipid nanoparticle comprises at least one calixarene molecule and said lipid nanoparticle acts as an adjuvant in said vaccine. The invention also relates to a method of preparing an immunogenic composition and a composition comprising a lipid nanoparticle (LNP) adjuvant comprising calixarene.

12.4737567IMPFSTOFFZUSAMMENSETZUNG GEGEN STREPTOCOCCUS SUIS-INFEKTION

EP - 06.05.2026

Clasificación Internacional C12N 9/50Nº de solicitud 26163630Solicitante CEVA SANTE ANIMALE S AInventor/a SEELE JANA

Described is a vaccine composition comprising an effective amount of at least one polypeptide selected from the group of IdeSsuis, rIdessuis, an analogue or a fragment thereof, or a polynucleotide encoding the same. This vaccine composition is used in the prophylactic, metaphylactic or therapeutic treatment of a Streptococcus suis infections in pigs or humans.

13.20260130979MALARIA IMMUNOGEN AND METHODS OF USING SAME

US - 14.05.2026

Clasificación Internacional A61K 39/015Nº de solicitud 19121222Solicitante UNM RAINFOREST INNOVATIONSInventor/a Bryce C. CHACKERIAN

An immunogen generally includes an immunogenic carrier that includes a virus-like particle (VLP) and an antigenic Anopheles spp. TRIO peptide that includes amino acids VDDLMAKFN (SEQ ID NO:1) or AANLRDKFN (SEQ ID NO:5) linked to the immunogenic carrier. The immunogen can be formulated into a composition such as vaccine. The composition or vaccine may be used to treat a subject having, or at risk of having malaria. The composition or vaccine may be used to treat a subject having Plasmodium falciparum blood stage parasitemia.

14.WO/2026/096971ORTHOGONAL FERRITIN NANOPARTICLES

WO - 07.05.2026

Clasificación Internacional A61K 39/385Nº de solicitud PCT/US2025/053654Solicitante VACCINE COMPANY, INC.Inventor/a WEIDENBACHER, Payton Anders-Benner

Provided herein are compositions comprising a first and a second polypeptide, wherein each polypeptide comprises an antigen and a ferritin, and wherein the ferritins are not the same. Also provided herein are polynucleotides encoding the same, related vectors and methods of making and using said compositions, polynucleotides, and vectors. The compositions, polynucleotides, and vectors disclosed herein may be useful as vaccines.

15.WO/2026/093412HBV VACCINE

WO - 07.05.2026

Clasificación Internacional A61K 39/12Nº de solicitud PCT/EP2025/081310Solicitante NEC ONCOIMMUNITY ASInventor/a STRATFORD, Richard

The present invention relates to polypeptides, polynucleotides, compositions, microorganisms, vectors, and vaccine compositions optimised for the treatment or prophylaxis of a disease or infection caused by the Hepatitis B virus (HBV). In particular, the invention provides a polypeptide comprising one or more of SEQ ID NOs: 1 to 7, preferably SEQ ID NOs: 5 and/or 7, or a variant thereof having at least 70% sequence identity thereto, said polypeptide being no more than 1500 amino acids in length.

16.WO/2026/096822ANTI-TICK VACCINE COMPOSITIONS AND RELATED METHODS

WO - 07.05.2026

Clasificación Internacional A61K 39/00Nº de solicitud PCT/US2025/053417Solicitante ARIZONA BOARD OF REGENTS ACTING FOR AND ON BEHALF OF NORTHERN ARIZONA UNIVERSITYInventor/a WAGNER, David

Implementations of an anti-tick vaccine composition may include one or more conserved tick proteins from a tick species; and one or more conserved outer membrane proteins of an endosymbiont of the tick species.

17.4737572HERSTELLUNGSVERFAHREN FÜR KASTRATIONSIMPFSTOFF MIT AP205 VIRUS-ÄHNLICHER PARTIKELUNTEREINHEIT

EP - 06.05.2026

Clasificación Internacional C12N 15/62Nº de solicitud 23942827Solicitante SHENZHEN HERZ LIFE SCIENCE TECH CO LTDInventor/a 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.

18.WO/2026/100837RECOMBINANT ANTIGEN PROTEIN FOR PREVENTING ACUTE HEPATOPANCREATIC NECROSIS DISEASE IN SHRIMP AND VACCINE COMPOSITION COMPRISING SAME

WO - 15.05.2026

Clasificación Internacional C07K 14/28Nº de solicitud PCT/KR2025/001714Solicitante CJ FEED&CARE CORPORATIONInventor/a PARK, Hee Ju

The present application relates to a recombinant antigen protein for preventing acute hepatopancreatic necrosis disease in shrimp and a vaccine composition comprising same. The recombinant antigen protein according to one aspect of the present invention can maintain stability under seawater treatment conditions, does not affect the growth of shrimp, and can significantly lower the mortality rate of shrimp, and thus can be effectively used as an immune enhancer or a feed additive in shrimp farming.

19.20260134966PRECISION-BASED IMMUNO-MOLECULAR AUGMENTATION (PBIMA) COMPUTERIZED SYSTEM, METHOD, AND THERAPEUTIC VACCINE

US - 14.05.2026

Clasificación Internacional G16H 20/10Nº de solicitud 19445844Solicitante Neo7Bioscience, Inc.Inventor/a Shamsuddin Sultan Khan

A precision-based immunomolecular augmentation (PBIMA) apparatus and method for designing and treating a patient with customized therapeutic peptides or peptide vaccine, comprising: at least a processor; and a memory communicatively connected to the at least a processor, the memory containing instructions configuring the at least a processor to receive a data input containing patient data comprising one or more measurements of next generation sequencing data; generate a patient specific organoid using the patient data to identify a patient specific target; compute a precision data output of a peptide sequence composition specific to the patient data and configured to elicit an effective therapeutic response at the patient specific target; and conduct an immunopeptide synthesis and manufacturing of the peptide composition.

20.20260130985NUCLEIC ACID-BASED UNIVERSAL VACCINE AND METHODS OF USE THEREOF

US - 14.05.2026

Clasificación Internacional A61K 39/215Nº de solicitud 19114594Solicitante ADVANCED RNA VACCINE (ARV) TECHNOLOGIES, INC.Inventor/a Huabin ZHU

Described herein are compositions including a nucleic acid sequence (e.g., mRNA) encoding an infection agent antigenic polypeptide and a nucleic acid sequence (e.g., mRNA) encoding at least one universal T-cell epitope (UTE), as well as compositions including a nucleic acid sequence (e.g., mRNA) encoding an infection agent antigenic polypeptide and at least one universal T-cell epitope, and methods for using the compositions.

21.20260124292MULTIEPITOPE UNIVERSAL INFLUENZA VACCINE

US - 07.05.2026

Clasificación Internacional A61K 39/145Nº de solicitud 19114661Solicitante UNIVERSITY OF VETERINARY MEDICINE HANNOVER, FOUNDATIONInventor/a Sharmistha Dam

Polyepitope vaccine formulations relating to at least 5 of influenza A virus (IAV) derived peptides capable of inducing IFNγ by CD8+ T cells selected from the group of peptides with amino acid sequences SEQ ID NO:1 (ILRGSVAHK), SEQ ID NO:2 (ELRSRYWAI), SEQ ID NO:3 (SRYWAIRTR), SEQ ID NO:4 (CTELKLSDY), SEQ ID NO:5 (GILGFVFTL), SEQ ID NO:6 (SIIPSGPLK), SEQ ID NO:7 (ASCMGLIY), SEQ ID NO:8 (FMYSDFHFI), SEQ ID NO:9 (FVRQCFNPM), SEQ ID NO:10 (VSDGGPNLY), SEQ ID NO:11 (FLKDVMESM), SEQ ID NO:12 (NMLSTVLGV), SEQ ID NO:13 (MMMGMFNML), SEQ ID NO:14 (YSHGTGTGY), SEQ ID NO:15 (HSNLNDATY), SEQ ID NO:16 (RRSGAAGAAVK), SEQ ID NO:17 (LLTEVETYV), SEQ ID NO:18 (MVLASTTAK), SEQ ID NO:19 (RGINDRNFW) and SEQ ID NO:20 (FLLMDALKL).

22.4736870VERBESSERUNGEN BEI DER HERSTELLUNG VON INFLUENZAVIRUS-

IMPFSTOFFANTIGENEN

EP - 06.05.2026

Clasificación Internacional A61K 39/145Nº de solicitud 25224012Solicitante SEQIRUS UK LTDInventor/a HAUSSMANN CHRISTOPH

A number of improvements for preparing vaccine antigens from disintegrated influenza viruses are disclosed. A splitting step can be followed by detergent exchange. Splitting can take place in the presence of a buffer with a higher ionic strength and/or in the presence of phosphate buffer.

23.4735025REKOMBINANTE VIRUSÄHNLICHE PARTIKEL

EP - 06.05.2026

Clasificación Internacional A61K 39/00Nº de solicitud 24831206Solicitante SEQIRUS INCInventor/a 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.

24.WO/2026/096272EQUINE LYME DISEASE VACCINES AND METHODS

WO - 07.05.2026

Clasificación Internacional A61K 39/02Nº de solicitud PCT/US2025/052158Solicitante VIRGINIA COMMONWEALTH UNIVERSITYInventor/a CONLEE, Douglas

A vaccine against Lyme disease is provided, comprising a B burgdorferi antigen and an adjuvant comprising oil, surfactant, and a polyoxyethylene-polyoxypropylene block copolymer. A method of using said vaccine to prevent Lyme disease in equines is also provided.

25.4736871IMPFSTOFF GEGEN DAS RESPIRATORISCHE SYNZYTIALVIRUS (RSV)

EP - 06.05.2026

Clasificación Internacional A61K 39/155Nº de solicitud 24825333Solicitante SHENZHEN SHENXIN BIOTECHNOLOGY CO LTDInventor/a LI LINXIAN

The present invention relates to a respiratory syncytial virus (RSV) vaccine, the nucleic acid comprises a polynucleotide for encoding a mutant of RSV F protein comprising, as compared to a wild-type RSV F protein, one or more of the following mutations: disulfide bond mutations, a cavity filling mutation and an electrostatic mutation.

26.4737571VARICELLA ZOSTER VIRUS (VZV) IMPFSTOFF

EP - 06.05.2026

Clasificación Internacional C12N 15/38Nº de solicitud 24830988Solicitante SHENZHEN SHENXIN

BIOTECHNOLOGY CO LTDInventor/a LI LINXIAN

The present invention relates to a non-natural nucleic acid, a genetic engineering vector, a host cell, a delivery carrier, a pharmaceutical composition and use thereof, and a varicella zoster virus (VZV) vaccine, wherein the non-natural nucleic acid comprises a polynucleotide encoding a VZV gE protein or a fragment thereof.

27.WO/2026/096276STABLE VACCINE FORMULATIONS

WO - 07.05.2026

Clasificación Internacional A61K 39/00Nº de solicitud PCT/US2025/052194Solicitante ZOETIS SERVICES LLCInventor/a CONLEE, Douglas

Provided is a stable vaccine comprising a protein antigen having a pI at or above about 7.0 or at least four consecutive positively charged amino acids, and a CpG oligonucleotide, and a buffer. Methods of stabilizing such subunit vaccines and assays determining whether the antigen adheres to container walls are also provided.

28.WO/2026/099253VACCINE DELIVERY OF HIV-1 ENV TRIMERS TO LANGERHANS CELLS

WO - 15.05.2026

Clasificación Internacional C07K 16/28Nº de solicitud PCT/EP2025/081952Solicitante INSTITUT NATIONAL DE LA SANTÉ ET DE LA RECHERCHE MÉDICALEInventor/a CARDINAUD, Sylvain

Developing an effective HIV-1 vaccineis contingent on generating protective antibodies (Abs). Novel antigen delivery methods are needed to enhance immune responses. One promising approach involves directing antigens to dendritic cells (DC) through fused monoclonal antibodies (mAbs) to amplify both cellular and humoral responses. Here, vaccine candidates such as LC3.SOSIP(w) and LC3.SOSIP(s) showed promising results in New Zealand white rabbits. These candidates elicited significantly higher Env-specific IgG levels than controls, demonstrated high affinity for SOSIP antigens in ELISA binding assays, and achieved broad neutralizing capabilities against multiple HIV-1 pseudoviruses in TZM-bl neutralization assays. In conclusion, HIV Env antigen can be adaptively targeted to LC as a trimer, intensifying both the magnitude and quality of humoral responses. The present invention thus relates to the use of such constructs as LC targeting HIV-1 vaccines.

29.4742249VERFAHREN ZUR AUSWAHL EINES NEOANTIGENS ZUR ENTWICKLUNG EINES PERSONALISIERTEN KREBSIMPFSTOFFS

EP - 13.05.2026

Clasificación Internacional G16B 40/20Nº de solicitud 24856859Solicitante LG CHEMICAL LTDInventor/a JEONG SEIHWAN

Provided are a method of selecting a tumor-specific neoantigen (immunogenic peptide), and a use of the selected tumor-specific neoantigen for preparing a personalized cancer vaccine.

30.WO/2026/102413MULTIVALENT TUBERCULOSIS VACCINE

WO - 15.05.2026

Clasificación Internacional A61K 39/04Nº de solicitud PCT/US2025/054848Solicitante BOARD OF REGENTS, THE UNIVERSITY OF TEXAS SYSTEMInventor/a GASSENSMITH, Jeremiah

A multivalent tuberculosis vaccine comprises one or both Mycobacterium tuberculosis transmembrane copper transporters CtpV (SEQ ID NO: 1) and MctB (SEQ ID NO: 2) reconstituted into proteoliposomes at a protein-to-lipid ratio of 1:15 to 1:40 (w/w). The proteoliposomes, optionally combined in a 1:1 to 3:1 ratio and formulated with CpG ODN 2395, 7909, or 1018, are encapsulated in ZIF-8 or multivariate Mn-ZIF (15-50 % Mn) to yield shelf- stable nanoparticles. Intranasal or pulmonary administration elicits robust Thl-biased immunity, polyfunctional CD4+ T-cells, and IgG2a-dominant antibodies, achieving >0.3 login CPU reduction in lungs versus saline and superior Th1/Th2 balance versus BCG in murine aerosol challenge models. A metalloimmunological adjuvant comprising CDA-loaded Mn-ZIF synergistically activates cGAS-STING, enhancing dendritic cell maturation and protective efficacy when combined with tuberculosis antigens. Kits and methods for vaccination and manufacture are provided.

31.20260124294IMMUNOGENIC COMPOSITIONS AGAINST THE OMICRON VARIANT OF SEVERE ACUTE RESPITORY SYNDROME CORONAVIRUS 2 (SARS-COV-2)

US - 07.05.2026

Clasificación Internacional A61K 39/215Nº de solicitud 19118726Solicitante Medigen Vaccine Biologics CorporationInventor/a Charles CHEN

The present invention relates to immunogenic compositions against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), especially to immunogenic compositions having recombinant SARS-CoV-2 S proteins derived from Omicron subvariants.

32.WO/2026/093547METHODS AND VACCINE COMPOSITIONS FOR THE TREATMENT OF CANCER

WO - 07.05.2026

Clasificación Internacional A61K 39/00Nº de solicitud PCT/EP2025/081567Solicitante INSTITUT NATIONAL DE LA SANTÉ ET DE LA RECHERCHE MÉDICALEInventor/a GALON, Jérôme

In the present invention, the inventors reveal that noncoding RNA, a known source of noncanonical peptides (also called dark matter) and tumour-specific antigens, can shape the precancer immune contexture and are associated with polyp and cancer risk. Through the multimodal characterisation of a unique dataset of 135 well-annotated cancer and precancer lesions from patients developing polyps at low and high frequency, the inventors identified high expression of noncoding RNAs, as a major differentiator of polyp development rate. Noncoding RNAs were also associated with increased immunogenicity associated with increased mature tertiary lymphoid structures within the microenvironment of pre-cancer lesion, higher quantity and quality of adaptive immune cells, including B- and T-cells. Thus, the inventors propose that early carcinogenesis is shaped by noncoding RNA expression and immune microenvironment. These compelling findings reveal potential targets for immune modulation approaches in individuals at high risk of developing colorectal cancer.

More particularly, the inventors identified dark antigens (i.e. peptides) that can be used in vaccines for the treatment of cancer, in particular, the prophylactic treatment of cancer.

33.20260130983STABILIZATION OF VIRUS-BASED THERAPEUTIC AGENT

US - 14.05.2026

Clasificación Internacional A61K 39/205Nº de solicitud 19118699Solicitante ELAREX INC.Inventor/a Jeremy Andrew IWASHKIW

A virus-based active agent is mixed with trehalose and water and dried. The mixture may also contain one or more of pullulan and albumin. The mixture may be dried to a moisture content of 0.1-10%. The drying may be under vacuum sufficient to produce a foam. Some or all of the drying may be at a temperature in the range of 15-40° C., or at a temperature in the range of 1-15° C., or both. The active agent may be based on a vesicular stomatitis virus (VSV) or an adenovirus (AdV). The dried mixture may be stored at a temperature in the range of 1-55° C. A composition includes a virus, which may be a derived or modified form of a virus such as VSV or AdV. The composition also includes trehalose and optionally one or more of pullulan, and albumin. The composition may be used for a virus-based vaccine.

34.20260132173MANUFACTURE AND APPLICATION OF FLAGELLIN IMMUNOPOTENTIATING DERIVATIVES WITH TLR5 ACTIVITY USING EUKARYOTIC CELL EXPRESSION SYSTEMS

US - 14.05.2026

Clasificación Internacional C07K 14/28Nº de solicitud 19121637Solicitante Joon HaengInventor/a Joon Haeng RHEE

The present invention relates to the manufacture and application of flagellin immunopotentiating derivatives with TLR5 activity using an eukaryotic cell expression system. The flagellin derivative according to the present invention has a high immunostimulatory effect and can be used in various vaccine and immunotherapy compositions.

35.20260124291RHINOVIRUS MRNA VACCINE

US - 07.05.2026

Clasificación Internacional A61K 39/125Nº de solicitud 19242040Solicitante Sanofi PasteurInventor/a Catherine BERRY

The present invention provides a method for identifying the amino acid sequence of a naturally occurring polyprotein from a group A or C rhinovirus that can be used as an immunogen capable of eliciting an immune response against rhinoviruses from multiple serotypes within the same group. The invention also provides immunogenic compositions that comprise at least one mRNA comprising a non-naturally occurring optimized nucleic acid encoding a polyprotein identified by this method.

36.WO/2026/101847METHODS OF INFLUENZA VACCINATION AND COMPOSITIONS FOR THE SAME

WO - 15.05.2026

Clasificación Internacional A61K 39/12Nº de solicitud PCT/US2025/053858Solicitante BLUEWILLOW BIOLOGICS, INC.Inventor/a KALICHARRAN, Kishna

The present invention relates to compositions and methods for inducing a robust cross-strain immune protection against influenza infection in a subject. The methods comprise administering a prime-boost combination of vaccines intranasally and intramuscularly, wherein at least one of the administered vaccines is a nanoemulsion influenza vaccine.

37.4735467SARS-COV-2-PROTEINEPITOPE UND VERWENDUNG DAVON BEI DER VORBEUGUNG UND DIAGNOSE VON CORONAVIRUSINFEKTIONEN

EP - 06.05.2026

Clasificación Internacional C07K 14/005Nº de solicitud 24832564Solicitante INST IMMUNOLOGII I TERAPII DOSWIADCZALNEJ IM LUDWIKA HIRSZFELDA PAN WE WROCLAWIUInventor/a 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.

38.WO/2026/098644TARGETED PROTEIN DEGRADATION AGENT, AND PHARMACEUTICAL COMPOSITION AND USE THEREOF

WO - 15.05.2026

Clasificación Internacional A61K 47/68Nº de solicitud PCT/CN2025/133479Solicitante BEIJING SYNTHETIC VACCINE BIOSCIENCES CO., LTD.Inventor/a WANG, Zhisong

Disclosed in the present invention are a targeted protein degradation agent, and a pharmaceutical composition and the use thereof. The novel targeted protein degradation agent prepared in the present invention has significant target protein degradation activity. The novel targeted protein degradation agent of the present invention is used as a payload of an antibody-drug conjugate. By using the targeting property of the antibody and the antigen-mediated internalization effect, more effective and safer degradation of a target protein is achieved. The present invention can be used for treating target protein-mediated diseases (such as tumors), showing broad application prospects and research and development value in the pharmaceutical field.

39.WO/2026/099815POLYMERIC-CARBOHYDRATE CONJUGATES OR NANOPARTICLE VACCINES, METHODS AND USES THEREOF

WO - 15.05.2026

Clasificación Internacional A61K 47/61Nº de solicitud PCT/IB2025/061410Solicitante UNIVERSIDADE DE COIMBRAInventor/a ANTUNES COLAÇO, Mariana Raquel

The present disclosure relates to a polymeric–carbohydrate conjugate or nanoparticle comprising a chitosan derivative and the use of said conjugate or nanoparticle as a vaccine delivery system. Moreover, it relates to

the use of said conjugate or nanoparticle in immunization or gene therapy, in particular, for the treatment of infectious diseases.

40.WO/2026/092136COMBO VACCINES FOR RESPIRATORY DISEASES

WO - 07.05.2026

Clasificación Internacional A61K 39/295Nº de solicitud PCT/CN2025/127642Solicitante SICHUAN CLOVER BIOPHARMACEUTICALS, INC.Inventor/a LIANG, Joshua

The present invention provides a combo vaccine against PIV, hMPV and/or RSV, and methods of use thereof.

41.4735034KOMBINATION AUS RNA-IMPFSTOFF

EP - 06.05.2026

Clasificación Internacional A61K 39/145Nº de solicitud 24831209Solicitante SEQIRUS INCInventor/a 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).

42.WO/2026/098601LIPID NANOPARTICLE FOR DELIVERING LOAD

WO - 15.05.2026

Clasificación Internacional A61K 9/51Nº de solicitud PCT/CN2025/133256Solicitante BEIJING JITAI LIFE SCIENCES LTDInventor/a LIU, Andong

Provided are a lipid nanoparticle for delivering a load, a composition comprising same, and use of the lipid nanoparticle and the composition in the preparation of a drug or vaccine for treating a disease, wherein the load is selected from any one or more of a small molecule compound, a polypeptide, a protein, and a nucleic acid molecule.

43.2026903863Vaccine production methods

AU - 07.05.2026

Clasificación Internacional Nº de solicitud 2026903863Solicitante Griffith UniversityInventor/a Given, Not

44.2701711Silica encapsulated biomolecules

GB - 06.05.2026

Clasificación Internacional A61K 9/51Nº de solicitud 202415936Solicitante ENSILICATED TECH LTDInventor/a ASWIN DOEKHIE

The invention relates to a particle comprising a biomolecule 1 encapsulated in a silica shell 2 which is directly deposited about the surface of the biomolecule and wherein at least a portion of the interior surface of the

shell is functionalised and comprises a Si-C bond. The biomolecule may have an isoelectric point between 0.5 and 12 and may be a live attenuated or inactivated virus, such as Newcastle disease virus, a nucleic acid lipid nanoparticle, a protein, vaccine, or cell. The silica shell may be formed of a first silica precursor functionalised with a basic or positively-charged group, such as an alkylamine or alkylammonium, and a second non-functionalised silica precursor, wherein deposition of silica is nucleated by non-covalent interactions between the first silica precursor and the negatively-charged biomolecule surface, and between the non-functionalised precursor and the positively-charged biomolecule surface. The biomolecule is thus protected from surrounding conditions. [FIGURE 2]

45.4735028GENETISCH ENTGIFTETER MUTANT VON NEISSERIA UND MEMBRANVESIKEL (OMV)-IMPFSTOFF

EP - 06.05.2026

Clasificación Internacional A61K 39/095Nº de solicitud 24743601Solicitante US HEALTHInventor/a 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.

46.WO/2026/093724ANTIVIRAL THERAPEUTICS

WO - 07.05.2026

Clasificación Internacional C12N 9/00Nº de solicitud PCT/GB2025/052342Solicitante KING'S COLLEGE LONDONInventor/a HONARMAND EBRAHIMI, Kourosh

The invention provides an hSAND protein and a CYB5R3 protein for use in the prevention or treatment of a viral infection in a subject. The invention also provides one or more polynucleotides encoding an hSAND protein and a CYB5R3 protein for use in the prevention or treatment of a viral infection in a subject, a fusion protein, a polynucleotide encoding the fusion protein, a vector, a host cell, an immunogenic composition, and an antiviral vaccine.

47.20260125673ARTIFICIAL POLYNUCLEOTIDES FOR EXPRESSING PROTEINS

US - 07.05.2026

Clasificación Internacional C12N 15/11Nº de solicitud 19117531Solicitante CERTEST BIOTEC, S.L.Inventor/a ESTHER BROSET BLASCO

A polynucleotide comprising, in the 5' to 3' direction, a 5' untranslated region (5'-UTR) and an open reading frame (ORF), wherein 5'-UTR including at least two tandem repeats of sequence 5'-GCCNCC-3' operatively linked to the ORF, and wherein N is any nucleotide. A composition comprising a lipid nanoparticle and the polynucleotide and a pharmaceutical composition, and their use in medicine, particularly for use as a vaccine or for use in gene therapy.

48.WO/2026/096440METHODS AND COMPOSITIONS FOR GENERATING AN IMMUNE RESPONSE AGAINST A PICORNAVIRUS

WO - 07.05.2026

Clasificación Internacional A61K 39/135Nº de solicitud PCT/US2025/052805Solicitante TIBA BIOTECHInventor/a CHAHAL, Jasdave S

Vaccine compositions for protecting a subject against diseases caused by viral pathogens of the Picornaviridae family are disclosed. These vaccines comprise nucleic acids encoding the capsid polyprotein (P1 polyprotein) mixed with the viral 3C protease that processes the P1 polyprotein, and encapsulated within nanoparticle carriers. Methods of preventing, reducing, inhibiting, or delaying the symptoms of an infection caused by a viral pathogen, or of inducing an immune response against a viral pathogen in a subject are provided. Methods of making the vaccines are also described.

49.4735032ZUSAMMENSETZUNGEN ZUR PRÄVENTION DES KARDIOMYOPATHIESYNDROMS

EP - 06.05.2026

Clasificación Internacional A61K 39/12Nº de solicitud 24832852Solicitante INTERVET INT BVInventor/a 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.

50.20260130980SYNTHETIC MULTIVALENT TUBERCULOSIS VACCINE

US - 14.05.2026

Clasificación Internacional A61K 39/04Nº de solicitud 19118630Solicitante The Wistar Institute of Anatomy and BiologyInventor/a David Weiner

Compositions comprising a nucleic acid molecule that encodes TB proteins are disclosed. Methods of inducing an immune response against TB in an individual are disclosed. Method of treating an individual who has been diagnosed with TB are disclosed. Method of preventing TB infection in an individual are disclosed.

51.3903810PRÆPARAT OMFATTENDE VACCINEADJUVANS

DK - 04.05.2026

Clasificación Internacional A61K 9/19Nº de solicitud 19905802Solicitante Sumitomo Pharma Co., Ltd.Inventor/a ONITA, Maiko

Provided is a composition that is useful as a vaccine adjuvant and has excellent storage stability and immunostimulatory activity. Specifically provided is a freeze-dried preparation that has high storage stability, said preparation containing a (4E, 8E, 12E, 16E, 20E)-N-{2-[{4-[(2-amino-4-{[(3S)-1-hydroxyhexane-3-yl]amino}-6-methylpyrimidine-5-yl)methyl]benzyl}(methyl)amino]ethyl}-4,8,12,17,21,25-hexamethylhexacosa-

4,8,12,16,20,24-hexaenamide, squalene, a hydrophilic surfactant, and an oleophilic surfactant, and being characterized by containing an ascorbic acid-based antioxidant and an excipient.

52.4735029MULTIVALENTE INFLUENZA-MRNA-IMPFSTOFFE

EP - 06.05.2026

Clasificación Internacional A61K 39/12Nº de solicitud 24758880Solicitante SANOFI VACCINES US INCInventor/a 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).

53.3903810PREPARATION INCLUDING VACCINE ADJUVANT

PL - 04.05.2026

Clasificación Internacional A61K 9/19Nº de solicitud 19905802SolicitanteInventor/a MAIKO ONITA

54.20260132324COMPOSITIONS CONTAINING PHASE CHANGE MATERIALS, METHODS FOR FORMING OBJECTS USING THE SAME, AND METHOD FOR USING THE SAME

US - 14.05.2026

Clasificación Internacional C09K 5/06Nº de solicitud 19118710Solicitante PHASE CHANGE ENERGY SOLUTIONS, INC.Inventor/a Reyad I. SAWAFTA

A PCM-containing composition described herein includes at least the following components: a PCM-containing plasticizer component; and a scaffold component, which may or may not contain a PCM. The latent heat of fusion of the scaffold component used in these compositions is from 50 J/g to 250 J/g less, or from 75 J/g to 250 J/g less, than a latent heat of fusion of the PCM-containing plasticizer component. Also described herein is a method of forming extruded objects that includes extruding an extrusion mixture of a PCM-containing plasticizer component and a scaffold component. The PCM-containing compositions, or extruded objects formed from the composition may be used for controlling temperature and/or storing thermal energy at a desired temperature for a particular end-use, e.g., vaccine storage or transport, pharmaceutical storage or transport, food storage or transport, etc.

55.WO/2026/101714UNIVERSAL T CELL TARGETED INFLUENZA VACCINE CONSTRUCT

WO - 15.05.2026

Clasificación Internacional C07K 14/11Nº de solicitud PCT/US2025/052089Solicitante SAINT LOUIS UNIVERSITYInventor/a HOFT, Daniel F.

The present disclosure provides compositions and methods for generation of an anti-influenza immune

response. In particular, multiple T cell epitopes have been identified and further screened for those for coverage of a wide variety of different influenza strains to ensure broad coverage approaching universality. Methods for vaccinating subjects with formulations of such peptides for the treatment or prevention of influenza infection also are described.

56.20260130982METHODS FOR ASSEMBLING PROTEIN-CONJUGATED NANOCARRIER VACCINES

US - 14.05.2026

Clasificación Internacional A61K 39/155Nº de solicitud 19120101Solicitante Northwestern UniversityInventor/a Neha Prashant Kamat

Provided herein are vaccine compositions for preparing nanocarriers comprising NiVF and NiVG virus proteins. Methods for preparing and using the nanocarriers for eliciting neutralizing antibodies or treating a Nipah virus infection are also described herein.

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