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VacCiencia es una publicación dirigida a investigadores y especialistas dedicados a la vacunología y temas afines, con el objetivo de serle útil. Usted puede realizar sugerencias sobre los contenidos y de esta forma crear una retroalimentación que nos permita acercarnos más a sus necesidades de información.

- Seguimiento de las variantes del SARS-CoV-2.
- Artículos científicos más recientes de Medline sobre vacunas.
- Patentes más recientes en Patentscope sobre vacunas.
- Patentes más recientes en USPTO sobre vacunas.

IFV INSTITUTO FINLAY DE VACUNAS

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Seguimiento de las variantes del SARS-CoV-2

Todos los virus cambian con el paso del tiempo, y también lo hace el SARS-CoV-2, el virus causante de la COVID-19. La mayoría de los cambios tienen escaso o nulo efecto sobre las propiedades del virus. Sin embargo, algunos cambios pueden influir sobre algunas de ellas, como por ejemplo su facilidad de propagación, la gravedad de la enfermedad asociada o la eficacia de las vacunas, el tratamiento, los medios de diagnóstico u otras medidas de salud pública y social.

La OMS, en colaboración con asociados, redes de expertos, autoridades nacionales, instituciones e investigadores, ha estado vigilando y evaluando la evolución del SARS-CoV-2 desde enero de 2020. La aparición de variantes que suponían un mayor riesgo para la salud pública mundial, a finales de 2020, hizo que se empezaran a utilizar las categorías específicas de «variante de interés» (*Variants of Interest*, VOI) y «variante preocupante» (*Variants of Concern*, VOC), con el fin de priorizar el seguimiento y la investigación a escala mundial y, en última instancia, orientar la respuesta a la pandemia de COVID-19. Asi, se lleva a cabo un seguimiento de los cambios que experimenta el SARS-CoV-2 para que, en caso de que se detecten sustituciones significativas en aminoácidos, se pueda informar a los países y a la población acerca de las medidas que se deban adoptar a fin de reaccionar ante la variante y de prevenir su propagación.

Denominación de las variantes del SARS-CoV-2

Los sistemas de nomenclatura establecidos para nombrar y rastrear los linajes genéticos del SARS-CoV-2 por GISAID, Nextstrain y Pango se siguen utilizando en círculos científicos y en la investigación científica. Para este caso la OMS ha recomendado el uso de denominaciones basadas en las letras del alfabeto griego, es decir, Alfa, Beta, Gamma, que serán más fáciles de usar y más prácticas para los debates del público no científico.

VARIANTES DEL SARS-CoV-2 (existentes hasta el 6 de julio de 2021)

Definición funcional de las variantes de interés (VOI)

Las VOI son variantes del SARS-CoV-2 que:

- presentan cambios en el genoma que, según se ha demostrado o se prevé, afectan las características del virus como su transmisibilidad, la gravedad de la enfermedad que causa y su capacidad para escapar a la acción del sistema inmunitario, ser detectado por medios diagnósticos o ser atacado por medicamentos; y

- según se ha comprobado, dan lugar a una transmisión significativa en medio extrahospitalario o causan varios conglomerados de COVID-19 en distintos países, con una prevalencia relativa creciente y ocasionando números cada vez mayores de casos con el tiempo, o bien que presentan, aparentemente, otras características que indiquen que pueden entrañar un nuevo riesgo para la salud pública mundial.

Tabla 1. Variantes de interés actuales (VOI)

Denominación de la OMS	Linaje Pango	Clado/linaje GISAID	Clado Nextstrain	Primeras muestras documentadas	Fecha de designación
Eta	B.1.525	G/484K.V3	21D	Múltiples países, diciembre 2020	17 marzo 2021
Iota	B.1.526	GH/253G.V1	21F	Estados Unidos de América, noviembre 2020	24 marzo 2021
Kappa	B.1.617.1	G/452R.V3	21B	India, octubre 2020	4 abril 2021
Lambda	C.37	GR/452Q.V1	20D	Perú, diciembre 2020	14 junio 2021

Dentro de las VOI destacan Épsilon y Lambda. Si se toma como referencia un reciente estudio elaborado por la University of Washington School of Medicine (Estados Unidos), la variante Épsilon cuenta con tres mutaciones en la proteína de pico que disminuyen la potencia neutralizadora de los anticuerpos generados a través de las vacunas y de las infecciones naturales. El estudio ha sido publicado en la revista *Science* y sus autores consideran que las mutaciones permiten a Épsilon evadir de forma total los anticuerpos monoclonales específicos y reducir la eficacia de los anticuerpos del plasma en las personas vacunadas.

La variante Lambda es la responsable de la mayor parte de los nuevos contagios en Perú y ha generado una alta incidencia en Argentina y Chile. A pesar de que fue descubierta hace más de un año no ha sido hasta ahora cuando la OMS ha considerado que debía incluirse entre las VOI a vigilar.

La evidencia científica con la que se cuenta hasta el momento sugiere que Lambda tendría una mayor capacidad para esquivar los anticuerpos que las variantes Alfa y Gamma. Han hallado ciertas similitudes de comportamiento con la variante Delta, pero no se ha encontrado evidencia concluyente de que Lambda sea capaz de evadir la respuesta inmunitaria mediada a través de las vacunas. El motivo por el que esta variante ha comenzado a ser vigilada de cerca por la OMS es su alta transmisibilidad. En menos de un año ha pasado de representar apenas el 1 % de los nuevos casos de COVID-19 en Perú a ser responsable de

casi el 90 %. La detección de los primeros brotes provocados por Lambda en Europa, entre los que se encuentra uno localizado en Cantabria, han hecho que se refuercen los esfuerzos de vigilancia.

Definición funcional de las variantes preocupantes (VOC)

Las VOC son variantes del SARS-CoV-2 que cumplen con los criterios para ser definida como una VOI y en relación con la cual se ha demostrado, tras una evaluación comparativa, que está asociada a uno o más de los siguientes cambios en un grado que resulte significativo para la salud pública mundial:

- aumento de la transmisibilidad o cambio perjudicial en la epidemiología de la COVID-19; o
- aumento de la virulencia o cambio en la presentación clínica de la enfermedad; o
- disminución de la eficacia de las medidas sociales y de salud pública o de los medios de diagnóstico, las vacunas y los tratamientos disponibles.

Tabla 2. Variantes preocupantes actuales (VOC)

Denominación de la OMS	Linaje Pango	Clado/linaje GISAID	Clado Nextstrain	Otros cambios en aminoácidos que se están examinando*	Primeras muestras documentadas samples	Fecha de designación
Alpha	B.1.1.7	GRY	20I (V1)	+S:484K +S:452R	Reino Unido, septiembre 2020	18 diciembre 2020
Beta	B.1.351 B.1.351.2 B.1.351.3	GH/501Y.V2	20H (V2)	+S:L18F	Sudáfrica, mayo 2020	18 diciembre 2020
Gamma	P.1 P.1.1 P.1.2	GR/501Y.V3	20J (V3)	+S:681H	Brasil, noviembre 2020	11 enero 2021
Delta	B.1.617.2 AY.1 AY.2 AY.3	G/478K.V1	21A	+S:417N	India, octubre 2020	VOI: 4 abril 2021 VOC: 11 mayo 2021

**Se están examinando cambios significativos en aminoácidos de la proteína espicular (o proteína S) que se están encontrando en un número reducido de muestras secuenciadas.*

Variante Alfa: Identificada por primera vez en septiembre de 2020, la variante Alfa circula actualmente en 170 países. Es aproximadamente un 50% más transmisible que la cepa original del SARS-CoV-2 y, aunque ha habido informes contradictorios, parece que la variante Alfa puede causar una enfermedad más grave con mayor riesgo de mortalidad. Sin embargo, la variante Alfa es neutralizada por los anticuerpos monoclonales terapéuticos y los anticuerpos generados tras la vacunación o la recuperación de COVID-19, lo que sugiere que el riesgo de reinfección o de infección de entrada tras la vacunación es bajo.

Variante Beta: La variante Beta fue la primera que se identificó en esta clase en mayo de 2020, y se le concedió la designación de estatus VOC en diciembre. Está asociada a una mayor transmisibilidad y se ha detectado en 119 países. Quizás lo más preocupante es que la variante Beta está asociada a una menor eficacia de la terapia con anticuerpos monoclonales y de la vacunación. También es posible la reinfección después de la COVID-19, ya que se reduce la neutralización por el suero de convalecencia.

Variante Gamma: Existe un debate sobre si la variante Gamma está asociada a una mayor transmisibilidad. Sin embargo, la variante Gamma es capaz de evadir la neutralización por parte de los anticuerpos (terapias monoclonales y los inducidos por la infección por el SARS-CoV-2 o la vacunación), lo que aumenta el riesgo de reinfección y de infección por el virus.

Variante Delta: La variante más reciente que se ha elevado a la categoría de variante preocupante es la variante Delta. Esta variante fue la responsable de la devastadora segunda oleada de la India y contribuyó a prolongar las restricciones de bloqueo a pesar de la vacunación generalizada en el Reino Unido, donde ya se ha vuelto dominante y representa el 90% de los casos nuevos. Debido a su mayor transmisibilidad y a la menor eficacia de los anticuerpos inducidos por la infección y la vacuna, se espera que se convierta en la cepa dominante a nivel mundial. Se estima que la variante delta es entre 30% y 60% más transmisible que otras variantes del coronavirus. La variante Delta se aisló por primera vez en octubre de 2020 en la India, ya se encuentra en más de 110 países de varias regiones geográficas y se espera que se imponga en el mundo en las próximas semanas. De igual forma, se asocia a más de un 90 por ciento de los casos de Reino Unido y Rusia, más del 20 en Francia y del 30 en Estados Unidos; de ahí que en junio de 2021 se declarara por la OMS como variante de preocupación, acotó Guzmán Tirado. Con respecto a la transmisibilidad, se considera la más contagiosa de todas, siendo un 64 por ciento más transmisible en relación a la Alfa que es entre un 40 y un 50 por ciento.

Variantes del SARS-CoV-2 en Cuba

La vigilancia genómica se lleva a cabo en nuestro país por un equipo de científicos de varias instituciones, organizado por el MINSAP y coordinado por el IPK, al que pertenecen los laboratorios de diagnóstico molecular del país, centros provinciales de Higiene y Epidemiología, la Universidad de las Ciencias Informáticas y las facultades de Matemática y Computación y de Biología de la Universidad de La Habana. También forman parte, el Instituto Finlay de Vacunas, los centros de Inmunología Molecular, de Ingeniería Genética y Biotecnología y de Investigaciones Científicas de la Defensa Civil.

Según la Doctora en Ciencias María Guadalupe Guzmán Tirado, jefa del Centro de Investigación, Diagnóstico y Referencia del Instituto de Medicina Tropical Pedro Kourí (IPK), en enero de este año se anunció la presencia de la variante genética notificada en Sudáfrica, en un viajero asintomático, aunque no existió transmisión hacia sus contactos. En abril se identificaron 11 variantes genéticas, cinco de ellas registradas a escala mundial.

A partir del análisis de secuencia aplicado a visitantes extranjeros, a fallecidos por COVID-19 y en poblaciones donde se registraron brotes de transmisión autóctona, se identificó que en la nación seguía predominando la variante D614G, la cual sustituyó, en 2020, a la cepa original de Wuhan a nivel mundial. No obstante, ya otras variantes también circulaban, predominando en orden de frecuencia las identificadas en Sudáfrica y California, seguidas por siete variantes más, incluyendo la notificada en Reino Unido y la original de Wuhan.

Fig. 1. Estratificación atendiendo al número de variantes-patrones de SARS-CoV-2 circulando, según provincias. Cuba 2020-2021.

A la altura del mes de julio, se determinó que la variante Delta del SARS-CoV-2 se encontraba en Cuba y en estos momentos se está imponiendo en el país. Esta mutación notificada por primera vez en la India se ha detectado en Artemisa (una viajera), La Habana, Villa Clara, Holguín, Ciego de Ávila y Matanzas, donde predomina. No obstante, en todos los territorios del país hay variantes circulando, aseveró la investigadora del IPK, quien además acotó que a través de la vigilancia genómica desde enero a la fecha se secuenciaron 1000 064 muestras de todas las provincias, incluyendo casos graves y críticos, fallecidos, viajeros y en brotes de la enfermedad, donde se detectó la circulación de la cepa original de Wuhan, además de 11 variantes y cinco patrones mutacionales. Entre ellas se encuentran las cuatro consideradas por la OMS como de preocupación: Alfa (notificada en Reino Unido), Beta, Gamma (notificada en Brasil) y Delta, y dos de las variantes de interés: Epsilon (notificada en California) y P2 Brasil.

Fuentes:

World Health Organization. Seguimiento de las variantes del SARS-CoV-2. Disponible en https://cutt.ly/tQY3d7P

EBSCO post. Nuevas variantes del SARS-CoV-2 (VOC), nombres y actualización. Disponible en https://cutt.ly/1QI7MOM

Ministerio de Salud Pública. Variantes de SARS-CoV-2 en Cuba: motivo más para fortalecer las medidas de aislamiento. Disponible en https://cutt.ly/0QUl32V

Ministerio de Salud Pública. Variantes genéticas aumentan la severidad de la COVID-19. Disponible en https://cutt.ly/sQUzZMR

ConSalud.es. Épsilon y Lambda: ¿deberían preocuparnos estas "variantes de interés" del SARS-CoV-2? Disponible en https://cutt.ly/QQUbidW

Noticias en la Web

Los países pobres son los más desfavorecidos en el acceso a las vacunas contra la Covid-19, ratifica la OMS

1 ago. La representante de la Organización Mundial de la Salud (OMS) en Egipto, Gaeema Al Gasseer, lamentó este domingo la falta de disponibilidad de vacunas contra la Covid-19 para los países más pobres.

El plan inicial era distribuir dos mil millones de dosis entre esas naciones a través del mecanismo Covax, una iniciativa global impulsada para tal fin, pero fue imposible alcanzar esa cifra porque la producción es menor que la demanda, subrayó en una entrevista con el diario Al Ahram.

Al Gasseer explicó que el objetivo era inmunizar al 10 por ciento de la población mundial en septiembre de 2021, el 40 por ciento en diciembre y el 70 por ciento para el próximo año, lo cual no se logró.

Como ejemplo citó el caso de África, donde se vacunó hasta la fecha a menos del uno por ciento de sus habitantes.

En el caso de Egipto, destacó los avances del país en el combate a la pandemia, lo cual fue reconocido por la OMS.

Todos los sectores trabajaron juntos para enfrentar la amenaza, resaltó la funcionaria.

La ministra de Salud Hala Zayed reveló la pasada semana que esta nación norafricana obtendrá más de 148 millones de dosis de vacunas contra la Covid-19 en los últimos cinco meses del año, suficientes para inmunizar a 83,7 millones de personas.

Precisó que en ese lapso llegarán al país 20 millones de dosis de la vacuna rusa Sputnik V, igual cifra de la Johnson & Johnson, 35,6 millones de AstraZeneca y 2,4 millones de Pfizer.

Zayed apuntó que también arribarán las materias primas necesarias para producir 70,2 millones de dosis de la china Sinovac.

Fuente: Cubadebate. Disponible en https://cutt.ly/PQOYGPp

Las vacunas funcionan contra las nuevas variantes del SARS-CoV-2

3 ago. La vacunación es de momento efectiva frente a la aparición de nuevas variantes, como la delta. No obstante, los expertos subrayan la importancia de tener la pauta completa para estar protegidos contra las nuevas versiones del virus.

La variante Delta (B.1.617.2) representará el 90% de los casos en Europa a finales de agosto, según las previsiones del Centro Europeo para la Prevención y el Control de las Enfermedades y la Agencia Europea de Medicamentos. ¿Es la vacunación efectiva contra esta y otras versiones del SARS-CoV-2?

"Las vacunas protegen contra las nuevas variantes cuando tienes la pauta completa de vacunación."

"Las vacunas protegen contra las nuevas variantes cuando tienes la pauta completa de vacunación, particularmente de los síntomas graves de la enfermedad que requieren hospitalización", resume Iñaki

Comas, investigador del Consejo Superior de Investigaciones Científicas (CSIC) en el Instituto de Biomedicina de Valencia.

Numerosos estudios respaldan esta hipótesis. Un trabajo reciente, publicado en la revista Nature, concluye que las vacunas de Pfizer/BioNTech y Oxford/AstraZeneca continúan siendo efectivas contra la variante Delta, identificada inicialmente en la India, pero solo tras la segunda dosis.

"Una sola dosis no activa cantidades suficientes de anticuerpos neutralizantes", advierte a SINC Oliver Schwartz, coautor del estudio e investigador del Instituto Pasteur, en París (Francia). Según Rafael Toledo, investigador de la Universidad de Valencia que no ha participado en el estudio, "es un trabajo científicamente bueno que redunda en la importancia de recibir las dos dosis de la vacuna".

En la misma línea, la vacuna monodosis de Janssen también continúa protegiendo contra la nueva variante Delta hasta ocho meses después de recibirla, según resultados preliminares publicados a principios de julio en el repositorio bioRxiv.

No obstante, las personas que ya hayan pasado la COVID-19 de manera natural tendrán suficiente con una sola dosis de la vacuna a los seis meses de haber superado la enfermedad, ya que poseen una respuesta inmune muy elevada y superior a la de quienes no han sido infectadas por el virus.

Protección contra otras variantes

Más allá de la variante delta, investigadores de todo el mundo han publicado incontables artículos en revistas científicas, donde demuestran que las vacunas aprobadas actualmente continúan siendo efectivas contra otras variantes.

Por ejemplo, este trabajo, publicado a principios de julio en Cell Reports Medicine, señala que las vacunas son capaces de generar anticuerpos que reconozcan a las variantes del virus alpha (B.1.1.7.), beta (1.351) y gamma (P.1), identificadas por primera vez en Reino Unido, Sudáfrica y Brasil, respectivamente.

También a principios de julio, otro estudio aparecido en Nature Medicine, concluyó que la vacuna de Moderna tenía una efectividad de un 100 % contra la variante Alpha y de un 96 % contra la Beta, a las dos semanas de recibir la segunda dosis entre población vacunada de Qatar.

Combinación de vacunas contra la COVID-19

Las personas menores de 60 años que recibieron una primera dosis de la vacuna de Oxford/AstraZeneca y una segunda de otra vacuna, como la de Pfizer/BioNTech, también están protegidas contra las nuevas variantes.

Esta pauta de vacunación, conocida como heteróloga, induce mayores frecuencias de linfocitos T —tanto CD4 como CD8—, que protegen contra las nuevas variantes Alfa (B.1.1.7.), Beta (B.1.351) y Gamma (P.1), tal y como se desprende de un estudio publicado recientemente en la revista Nature.

Preocupación por los cambios en la espícula del virus

La Organización Mundial de la Salud (OMS) hace un seguimiento de las variantes de preocupación y de interés del nuevo coronavirus para saber si los cambios afectan a su transmisibilidad, severidad de la enfermedad o efectividad sobre las vacunas, terapias y pruebas diagnósticas.

En el caso de las vacunas, cualquier cambio del virus en la proteína de la espícula, situada en su

característica corona, es especialmente preocupante, ya que son la puerta de entrada del SARS-CoV-2 al organismo y lo que desencadena la infección.

"Sabemos que estos cambios pueden reducir la capacidad de los anticuerpos de neutralizar las nuevas variantes del virus, pero no lo suficiente", tranquiliza Comas sobre las nuevas formas del virus.

"Mientras no se consiga controlar los niveles de circulación del virus es probable que surjan nuevas variantes de interés para la salud pública", advertía a finales de marzo Francisco Díez-Fuertes, investigador en el Centro Nacional de Microbiología del Instituto de Salud Carlos III (ISCIII).

Fuente: sinc. Disponible en https://cutt.ly/jQSf5GD

Cuba ¿con qué se vacuna?

4 ago. Bastaron unos 400 días para que dos esquemas de inmunización cubanos contra la COVID-19 demostraran 92,28 y 91,2 por ciento de eficacia frente a la enfermedad sintomática.

Tres dosis de Abdala y la unión de dos inyecciones de Soberana 02 más una de Soberana Plus dicen que esta isla caribeña se vacuna con propuestas sobresalientes.

Dos millones 745 mil 421 personas están completamente vacunadas en la nación con alguna de esas propuestas, más del 23 por ciento de la población del país (11 millones 333 mil aproximadamente). Cuba supera así la media mundial de población completamente inmunizada.

Según el sitio internacional Our World in Data, a casi ocho meses de iniciar la vacunación en todo el orbe, solo el 29 por ciento de la población del planeta ha recibido al menos una dosis de la vacuna antiCovid-19 y el 14,8 por ciento está vacunado.

Parecieran datos fríos, como el algodón con alcohol que le ponen a cada voluntario en el hombro antes de recibir la inyección; pero no lo son. Cada por ciento representa una respuesta: a los síntomas, gravedad, infección o muerte.

Empecemos con el análisis interino de Abdala. Los científicos del Centro de Ingeniería Genética y Biotecnología (CIGB) a cargo del inmunizante, anunciaron que ya cuentan con los datos del ensayo fase III de Abdala con excelentes resultados, y en estos momentos se escala a un estudio de efectividad con más de 300 mil personas.

Durante dicha fase, Abdala, que ya había evidenciado un 92,28 por ciento de eficacia frente a la enfermedad sintomática de Covid-19 y recibió la aprobación por la autoridad regulatoria del país caribeño para su uso de emergencia, también demostró una eficacia del 100 por ciento para prevenir enfermedad sistémica severa y fallecimientos.

Pongamos la lupa en el reporte interino del Instituto Finlay de Vacunas sobre la eficacia clínica del esquema heterólogo de dos dosis de Soberana 02 y una de refuerzo de Soberana Plus.
La fase III del ensayo clínico con Soberana 02 dividió sus 44 mil 10 voluntarios de ocho municipios de La Habana en tres grupos para el estudio: dos experimentales y otro control con placebo.

El que recibió placebo estaba integrado por 13 mil 895 personas, mientras los que recibieron el esquema heterólogo de Soberana 02 más Soberana Plus lo conformaron 13 mil 452 sujetos.

Al comparar variables como enfermedad sintomática, infección, eficacia contra casos graves/severos y para

prevenir muertes; el análisis interino parcial demostró un 91, 2 por ciento de eficacia para el padecimiento con síntomas.

A ello se sumó un 75.7 contra el contagio y 100 por ciento contra casos graves o severos e igual valor para prevenir muertes; todo ello 14 días después de administrada la última de las tres dosis. Los especialistas del Instituto Finlay de Vacunas detallaron que después de la primera dosis de soberana 02 se reporta una eficacia de 39.8 por ciento en la prevención de la enfermedad sintomática, para la segunda el resultado es de 65.6, y con la tercera (esta de soberana plus) 91.2.

Como parte de los resultados de los ensayos clínicos también se obtuvieron datos de la eficacia por estratos de edad y comorbilidades: en menores de 65 años se reporta de 92.3 por ciento, mientras en las personas mayores de 65 años el porcentaje es de 77.

Para aquellos sin comorbilidades con el esquema de tres dosis, la eficacia se incrementa a 96.7 por ciento, en tanto el de quienes presentan comorbilidades es de 83.1.

Durante el desarrollo del ensayo clínico con Soberana 02 más Soberana plus, en La Habana circulaban diferentes variantes del virus, principalmente la Beta (identificada por primera vez en Sudáfrica). El director general del IFV, Vicente Vérez, especificó que en el período del ensayo se aisló un 74 por ciento de Beta y un 14 por ciento de Epsilon (reportada en california); por lo cual 'la eficacia en realidad es fundamentalmente contra la beta', aseguró.

Otro de los ensayos que transcurre en Cuba con candidatos propios contra la COVID-19 es Soberana Centro en la provincia de Cienfuegos, que incluye los tres candidatos vacunales del Instituto Finlay. El estudio se realiza con Soberana 01, producto que demostró seguridad en ensayo clínico Fase I y tuvo excelentes resultados preliminares de inmunogenicidad en adultos de 19 a 59 años. Contará con dos grupos experimentales de 583 personas cada uno: en el primero recibirán dos dosis de Soberana 01 más una de Soberana Plus, y en el segundo, dos dosis de Soberana 02 y una de Soberana Plus.

De acuerdo con los líderes del proyecto, el objetivo es comparar la respuesta inmune inducida por Soberana 01 respecto a Soberana 02.

En este caso Soberana 01 tendrá que demostrar que no es inferior desde el punto de vista inmunológico a Soberana 02, afirmó recientemente la doctora Meiby Rodríguez González, directora de Investigaciones Clínicas del IFV.

El pequeño Lucas de la compañía de teatro infantil La Colmenita, lleno de alegría y de sus buenos consejos, fue uno de los voluntarios que integró el grupo de niños entre tres y 11 años en el ensayo clínico Soberana Pediatría, que transita por estos días en su fase I/II. Para los pequeños y hasta sus familias Lucas es un referente, por su ingenioso personaje Chamaquili de la colección homónima del repentista cubano Alexis Díaz Pimienta, al salir de los textos y convertirse en varias mini-series para reflexionar sobre la necesidad del cuidado y protección ante el virus SARS-Cov-2. Chamaquili (Lucas), es uno de los 25 que ya recibieron la primera dosis y los más grandes de 12 a 18 transitan por la segunda inyección de un esquema de tres, similar al de los que adultos a quienes se les aplicó dos dosis de Soberana 02 más otra de Soberana Plus, con el objetivo de evaluar la seguridad, reactogenicidad e inmunogenicidad de dichos candidatos en intervalos de 28 días.

En total los 350 pequeños y adolescentes ya recibieron su primera dosis de este estudio que dio luz verde el Centro de Control Estatal de Medicamentos y Equipos Médicos (Cecmed) ante las elevadas cifras de contagios diarios en menores de 20 años reportados en lo que va de 2021.

Por su parte, Abdala echó a andar y hasta la oriental provincia de Camagüey llegó la vacuna para su prueba en unos 592 niños. A su estudio en esta vez no lo identificará el poema dramático del intelectual cubano José Martí sino los versos dedicados a su hijo Ismaelillo.

Los que lo integran también tienen entre tres a 18 años y contarán con el esquema de cero, 14 y 28 días.

Soberana Pediatría

Ensayo clínico fase I/II en el cual participan 350 voluntarios de entre tres y 18 años, a los que se les administra un esquema vacunatorio heterólogo, de 0-28 y 56 días, con dos dosis de los candidatos Soberana 02 y una de Soberana Plus, ambos desarrollados por el Instituto Finlay de Vacunas (IFV).d.

Ismaelillo

Ensayo clínico fase I/II adaptativo, aleatorizado, de grupos paralelos, a doble ciego, para evaluar la seguridad e inmunogenicidad de la vacuna Abdala del Centro de Ingeniería Genética y Biotecnología, en niños y adolescentes cubanos, aparentemente sanos, de dos niveles de dosis de 25 y 50 microgramos.

Pero la ciencia cubana va más allá. El país inició la vacunación de embarazadas en el segundo y tercer trimestre de gestación, así como las puérperas que lactan, a quienes se les administrará también de forma escalonada el inyectable Abdala.

La ruta diseñada en la nación caribeña para la estrategia de vacunación alcanza también grupos vulnerables integrados por 10 mil pacientes de hospitales psiquiátricos, hogares de ancianos y centros médicos psicopedagógicos.

Se suman más de tres mil pacientes nefrópatas sometidos a régimen de hemodiálisis, reciben en estos días el inmunógeno para completar el ciclo a principios de agosto.

A BUENAS PREGUNTAS, MEJORES RESPUESTAS... DE LA CIENCIA

¿Qué sucederá con aquellas personas en Cuba que son alérgicas al tiomersal y aún no pueden vacunarse con los candidatos incluidos en el proceso de inmunización antiCovid-19? Ante esta interrogante, tanto el CIGB como el Finlay prepararon compuestos sin esa sustancia para dicho grupo poblacional.

Las autoridades científicas detallaron que para las personas alérgicas al tiomersal se producen lotes monodosis sin ese compuesto.

La directora de Investigaciones del Instituto Finlay, Dagmar García, dijo que habrá vacunas para todos esos sujetos excluidos de los ensayos clínicos por dicha causa.

Con relación al candidato Abdala, la directora general del CIGB, Marta Ayala, confirmó que se trabaja a nivel de escala productiva en vacunas sin tiomersal y la propuesta vacunal Mambisa, de este mismo centro, en su aplicación mediante un spray nasal no contiene ese antiséptico.

ASIGNATURAS CONVALIDADAS POR CUBA

Cuando la OMS se debate entre la necesidad de una dosis de refuerzo en muchas vacunas. Las grandes farmacéuticas transnacionales piden aprobaciones para llevar a cabo esa investigación. Cuba, ya tiene las suyas: Mambisa y Soberana Plus.

Sin dudas el Plus de Soberana 01 A es un signo de más y muy positivo de la biotecnología cubana frente a la COVID-19.

Encargada de reforzar el esquema de vacunación ya descrito con Soberana 02 y que evidenció un 91, 2 por ciento de eficacia; fue el primer candidato- de los cinco diseñados en Cuba- específico para convalecientes.

Calificado como seguro, es capaz de elevar los anticuerpos en aquellos que padecieron la COVID-19 o fueron inmunizados con una vacuna.

Por su parte, Abdala y Mambisa se unen en el segundo ensayo clínico para convalecientes de la COVID-19 en el país.

Unas 120 personas que hayan padecido la enfermedad están incluidos en el estudio fase I/II para evaluar la seguridad e inmunogenicidad de ambos productos, diseñados por el Centro de Ingeniería Genética y Biotecnología de la isla.

De acuerdo con el registro público cubano de estudios clínicos, entre los objetivos de esta etapa está comprobar la inmunogenicidad y funcionalidad de la administración por spray nasal y por gotas del proyecto Mambisa.

Además, trabajarán en identificar, de acuerdo al balance beneficio-riesgo-costo, la variante de administración nasal de Mambisa a utilizar en la etapa II del estudio.

También, evaluarán la inmunogenicidad y funcionalidad de la administración intramuscular de Abdala.

El estudio en convalecientes con ambos productos, será intervencional, abierto, aleatorizado y no controlado para voluntarios entre 19 y 80 años, que hayan padecido la COVID-19 y lleven al menos dos meses de alta.

De acuerdo con el registro público, se espera con este ensayo clínico que el 55 por ciento o más de los sujetos tratados con ambos candidatos vacunales, incrementen en cuatro veces la determinación inicial de los títulos de los anticuerpos específicos contra el virus SARS-CoV-2, patógeno causante de a COVID-19.

Asimismo, prevén que se eleven en al menos un 20 por ciento los títulos de inhibición de unión al receptor ACE2, sin el riesgo de que se observen más de un cinco por ciento de individuos con eventos adversos graves con causalidad consistente con la vacunación.

EN IRÁN Y VENEZUELA TAMBIÉN SE VACUNAN CON LAS PROPUESTAS CUBANAS

El pasado 29 de junio, las autoridades iraníes dieron luz verde al uso de emergencia en ese país de Soberana 02.

“La aprobación fue otorgada al Instituto Pasteur de Irán que comercializará la vacuna en territorio iraní con el nombre Pasteur, en el marco de un acuerdo de colaboración firmado con el Instituto Finlay de Vacunas el pasado mes de enero', señaló el informe de la institución cubana.

Asimismo, detalla que la Autoridad Regulatoria del país persa otorgó el permiso de uso de emergencia sobre la base del reconocimiento de los resultados del desarrollo farmacéutico del producto, las evidencias de seguridad e inmunogenicidad demostradas en los ensayos clínicos de las fases I y II realizados en Cuba.

Otro de los criterios que tuvieron en cuenta fue el 62 por ciento de eficacia clínica para el esquema de dos dosis reportado en el análisis intermedio del ensayo fase III.

'Se consideró además, la seguridad demostrada de la vacuna en un segundo ensayo clínico fase III con la vacuna Soberana 02 el cual se desarrolla actualmente con 24 mil sujetos en varias provincias iraníes', refirió el texto.

Soberana 02 complementó sus ensayos clínicos fase III en la nación persa a inicios de este 2021, luego de que el IFV y el Pasteur firmaran un acuerdo de colaboración con el objetivo de complementar la fase III de Soberana 02 y realizar estudios clínicos multicéntricos conjuntos de dicho período. Además de la ese país, otro de que confió plenamente en las vacunas cubanas es Venezuela.

Desde el 26 de junio comenzó en la nación suramericana el proceso de inmunización contra la COVID-19 con Abdala.

Venezuela acordó con Cuba el suministro de 12 millones de dosis de la vacuna Abdala, para incorporarla a la campaña nacional de inmunización contra la COVID-19, informó la vicepresidenta Delcy Rodríguez.

Como hace treinta años con la VA-MENGOC-BC®, primera en el mundo eficaz contra la enfermedad meningocócica del serogrupo B, Cuba llega a casi 18 meses de COVID-19 con cinco productos propios para inmunizar a su población.

“La única alternativa para el país ante la actual pandemia era desarrollar sus propias vacunas, porque teníamos que tener SOBERANÍA”, ha dicho la doctora Dagmar García en disímiles ocasiones.

“Cuba será posiblemente el primer país en vacunar a toda su población con una vacuna propia”, afirmó el presidente del Grupo de las Industrias Biotecnológica y Farmacéutica, BioCubaFarma, Eduardo Martínez.

Y esta isla caribeña, se vacuna con ciencia propia.

Fuente: Prensa Latina. Disponible en https://cutt.ly/qQDOXYY

¿Cómo evolucionará el coronavirus? Desde variantes más letales a un virus endémico leve

3 ago. Un informe británico contempla cuatro posibles escenarios futuros sobre la evolución del virus que provoca la COVID-19. A continuación, las claves de este estudio sobre el SARS-CoV-2.

El Grupo Asesor Científico para Emergencias del Reino Unido (SAGE por sus siglas en inglés, Scientific Advisory Group for Emergencies) ha elaborado un informe en el que analiza los posibles escenarios en la

evolución del virus que provoca la Covid-19.

Los expertos descartan casi por completo la erradicación total del virus, calificando esta hipótesis como "improbable". El SAGE "tiene la seguridad de decir que siempre habrá variantes", aunque "el número de las mismas dependerá de las medidas de control".

El documento, titulado "¿Podemos predecir los límites de las variantes del SARS-CoV-2 y sus consecuencias fenotípicas?" contempla cuatro posibles futuros en la evolución del SARS-CoV-2.

ESCENARIO UNO: Surge una variante más contagiosa y letal

El primer posible futuro en la evolución del virus es quizás uno de los más catastrofistas. Y es que podría ser que las mutaciones del virus y la recombinación con otros genes, (sean del huésped o de otras variantes del virus), provoquen el origen de una nueva variante que cause una enfermedad más grave de lo que hemos observado hasta la fecha. Esta nueva variante podría convertir al virus en más contagioso y potencialmente más mortal.

"Un aumento en la morbilidad y mortalidad podría esperarse aún con la vacunación"

Según el informe, la probabilidad de que suceda es "realista" y el impacto sería "alto". Con todo, a no ser que hubiese un cambio significativo en la proteína en espiga del SARS-CoV-2, las vacunas actuales que giran alrededor de esta proteína, "muy probablemente continuarían protegiendo contra la enfermedad grave".

No obstante, "un aumento en la morbilidad y mortalidad podría esperarse aún con la vacunación, pues las vacunas no proporcionan una absoluta inmunidad ni previenen la infección en muchos individuos", apostilla el informe británico.

Ante esta situación, los expertos sugieren que se podrían adoptar diferentes medidas como inocular una dosis de refuerzo, así como seguir manteniendo las medidas para evitar la propagación del virus y por tanto, reducir las hipótesis de que el virus mute y se recombine. Además, con este mismo fin, contemplan la posibilidad de vacunar o eutanasiar animales.

ESCENARIO DOS: Aparecen variantes que resisten a las vacunas actuales

El SAGE prevé también que el virus evolucione hasta evadir las vacunas vigentes. Sería una "posibilidad realista", sin embargo, ante este escenario, podría desarrollarse "con rapidez" una vacuna similar y efectiva que utilice el mismo mecanismo de acción que los sueros vigentes.

"Se prevé que surjan variantes que resistan a determinados agentes de los medicamentos"

Igualmente, aunque sería viable adaptar las vacunas actuales a algunas mutaciones del virus, se necesitaría tiempo para producir este nuevo suero, por lo que sería esencial controlar y frenar la propagación del virus. El seguimiento de la evolución de las variantes, así como el control de las mismas y considerar la vacunación o incluso eutanasia de algunos animales para evitar los contagios, son potenciales soluciones.

ESCENARIO TRES: Se detectan variantes que resisten el tratamiento actual contra la COVID-19

Debido al uso de fármacos antivirales, podría esperarse que surjan variantes resistentes a determinados agentes de los medicamentos, como por ejemplo los que utilizan anticuerpos monoclonales para combatir la

COVID-19. Los expertos señalan que es “probable” que ocurra, a menos que los fármacos se utilicen correctamente.

Sin embargo, el impacto sería “medio”, siempre y cuando no suceda que se necesite utilizar estos tratamientos ampliamente. La solución para evitar este posible futuro pasa por utilizar la combinación de terapias antivirales con más de dos fármacos, solo en aquellos pacientes con enfermedad severa y, en cualquier caso, hacer un buen uso de estos medicamentos.

ESCENARIO CUATRO: Las variantes del SARS-CoV-2 evolucionan hacia una menor virulencia

En otras palabras, el virus se convierte en un tipo más de coronavirus como los que causan resfriados y gripes comunes, disminuyendo considerablemente la severidad de la enfermedad y constituyéndose como una infección endémica. Desde el SAGE apuntan a que es improbable que suceda en el corto plazo, aunque es realista pensar que podría ocurrir en el largo plazo.

Fuente: ConSalud.es. Disponible en https://cutt.ly/FQDJDJo

Novavax pide aprobación de su vacuna contra COVID en India

5 ago. El fabricante de vacunas Novavax anunció el jueves que solicitó a los organismos reguladores de India, Indonesia y Filipinas que permitan el uso de emergencia de su vacuna contra el COVID-19, ofreciéndola a algunos países en desarrollo antes que a los países ricos que tienen amplio acceso a vacunas.

Novavax, con sede en Estados Unidos, se asoció con el Instituto del Suero de la India para presentar la solicitud en los tres países, y tiene previsto solicitar a este mes la revisión de la Organización Mundial de la Salud para formar parte del programa mundial de vacunas COVAX.

El director general de Novavax, Stanley Erck, calificó las solicitudes como un “paso importante hacia el acceso a millones de dosis de una vacuna segura y eficaz para los países que tienen una necesidad urgente de controlar la pandemia”.

La empresa anunció que también planea presentar pronto solicitudes en Gran Bretaña, y después en Europa, Australia, Canadá y Nueva Zelanda, pero no en Estados Unidos sino hasta finales de año.

La vacuna de dos dosis de Novavax se hace con copias de la proteína espiga que recubre el coronavirus cultivadas en laboratorio. Esto la diferencia de otras vacunas de uso generalizado que proporcionan instrucciones genéticas para que el organismo produzca su propia proteína espiga.

Las vacunas de Novavax son más fáciles de almacenar y transportar que otras, y desde hace tiempo se espera que desempeñen un papel fundamental a la hora de proporcionar más vacunas a los países pobres.

En junio, Novavax anunció que la vacuna había demostrado un 90% de eficacia contra el COVID-19 sintomático en un estudio de casi 30.000 personas en Estados Unidos y México. También

funcionó contra las variantes que circulaban en esos países en ese momento. Los efectos secundarios fueron en su mayoría leves.

En cuanto a la variante delta, la cual es altamente contagiosa y circula por gran parte del mundo, Novavax también anunció el jueves que la administración de una dosis de refuerzo seis meses después de la segunda inyección reactivó los anticuerpos que combaten el virus y que pueden hacer frente a esa variante.

En otros estudios realizados en Gran Bretaña y otros países se analiza si la inyección de Novavax puede utilizarse como refuerzo después de otros tipos de vacunas contra el COVID-19.

Fuente: Santa Maria Times. Disponible en https://cutt.ly/kQDKCVO

Los anticuerpos ante el Sars-CoV-2 se mantienen estables e incluso aumentan siete meses tras la infección

6 ago. Los niveles de anticuerpos IgG frente a la proteína Spike del Sars-CoV-2 se mantienen estables, o incluso aumentan, siete meses después de la infección, según un estudio de seguimiento en una cohorte de personal sanitario coordinado por el Instituto de Salud Global de Barcelona (ISGlobal) en colaboración con el Hospital Clínic de Barcelona.

Los resultados, publicados en la revista 'Nature Communications', también apoyan la idea de que los anticuerpos preexistentes contra los coronavirus del resfriado común pueden proteger contra la covid-19, han informado en un comunicado conjunto ISGlobal --centro impulsado por la Fundación La Caixa-- y el Clínic.

Para poder predecir la evolución de la pandemia y desarrollar estrategias eficaces es vital entender la dinámica y duración de la inmunidad frente al Sars-CoV-2 y el posible papel de anticuerpos preexistentes contra los coronavirus del resfriado común.

Con este objetivo, el equipo liderado por la investigadora del ISGlobal Carlota Dobaño siguió desde el inicio de la pandemia a una cohorte de trabajadores sanitarios del Hospital Clínic, con el objetivo de evaluar los niveles de diferentes tipos de anticuerpos dirigidos contra diferentes antígenos del Sars-CoV-2 a lo largo del tiempo.

"Se trata del primer estudio en evaluar la respuesta de anticuerpos frente a un panel tan amplio de antígenos del Sars-CoV-2 a lo largo de siete meses", ha subrayado Dobaño.

Los anticuerpos ante el Sars-CoV-2 se mantienen estables e incluso aumentan siete meses tras la infección
El equipo investigador analizó muestras de sangre de 578 participantes, tomadas en cuatro momentos distintos entre marzo y octubre de 2020, y usó la tecnología Luminex para medir, a partir de la misma muestra, el nivel y tipo de anticuerpos IgA, IgM o IgG frente a seis antígenos diferentes del virus, así como la presencia de anticuerpos contra los cuatro coronavirus que causan el resfriado común.

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También se analizó la actividad neutralizante de los anticuerpos en colaboración con investigadores de la Universitat de Barcelona.

Los resultados revelan que la gran mayoría de las infecciones en personal sanitario ocurrió durante la primera ola --el porcentaje de personas con anticuerpos frente a Sars-CoV-2 subió poco entre marzo y octubre, del 13,5% al 16,4%--.

A excepción de los anticuerpos IgM y de los IgG contra la nucleocápside del virus, los demás anticuerpos de tipo IgG, incluyendo los anticuerpos neutralizantes, se mantuvieron estables a lo largo del tiempo, confirmando los resultados de otros estudios recientes.

"De manera sorprendente, en el 75% de las personas se vio incluso un aumento de anticuerpos IgG anti-spike a partir de los cinco meses, sin ninguna evidencia de que hubieran estado reexpuestas al virus", ha señalado la coautora Gemma Moncunill.

RESFRIADO COMÚN

En cuanto a los anticuerpos contra los coronavirus del resfriado común (HcoV), los resultados obtenidos sugieren que podrían conferir una protección cruzada frente a la infección o la enfermedad por COVID-19.

Las personas que se infectaron por Sars-CoV-2 tenían niveles más elevados de IgG e IgA anti-HCoV, y las personas asintomáticas tenían niveles más elevados de IgG e IgA anti-HCoV que las persona sintomáticas.

"Aunque la protección cruzada por inmunidad preexistente a los coronavirus del resfriado común aun no se ha confirmado, podría ayudar a explicar la susceptibilidad tan diferente de la población a la enfermedad", ha señalado Dobaño.

Fuente: Europa Press. Disponible en https://cutt.ly/WQDXnjR

La India aprueba el uso de la vacuna anticovid de Johnson & Johnson

7 ago. El Gobierno indio anunció este sábado que la vacuna contra el coronavirus del laboratorio estadounidense Johnson & Johnson ha sido aprobada para su uso de emergencia en la India, sumándose así a otras cuatro fórmulas empleadas en el país.

“La vacuna contra la covid-19 de dosis única de Johnson & Johnson ha sido aprobada para su uso de emergencia en la India”, afirmó el ministro de Salud, Mansukh Mandaviya, en su cuenta oficial de Twitter.

El ministro destacó que “ahora la India dispone de cinco vacunas” que han recibido la Autorización para su Uso de Emergencia (EUA) en el país, algo que “impulsará aún más la lucha colectiva nacional contra la covid-19”, remarcó.

La fórmula de Johnson & Johnson cuenta con dos ventajas: es más fácil de almacenar que otras fórmulas por no precisar temperaturas excesivamente bajas y para la inmunización completa solo hace falta una dosis.

Esta vacuna se une así a la indígena Covaxin, del laboratorio indio Bharat Biotech; a Covishield, de AstraZeneca y producida en el Instituto Serum de la India (SII); la fórmula rusa Sputnik V, y la estadounidense Moderna.

La última vacuna en unirse a la campaña de inmunización en la India trata de impulsar un proceso que ha sido criticado por su lentitud, sobre todo por la falta de dosis suficientes para este país de 1.350 millones de habitantes, pese a ser conocido como “la farmacia del mundo” y albergar la mayor fábrica de vacunas.

Desde que la India comenzó el pasado enero la campaña, ha administrado 500 millones de dosis, casi 5 millones en las últimas 24 horas, pero solo 110 millones de personas han recibido la pauta completa.

Para revertir este déficit, el país limitó las exportaciones de vacunas en mayo, autorizó el uso de emergencia de preparados extranjeros y se hizo con el 70 % de la producción de los fabricantes de vacunas locales para repartirlas entre los estados sin costo alguno, en un intento por satisfacer la demanda interna.

Esto también ha presionando el sistema de distribución internacional, después de que el Gobierno indio bloqueara en la práctica las exportaciones desde abril, en pleno pico de la segunda ola del coronavirus.

Uno de los principales afectados es el programa COVAX, que impulsa la Organización Mundial de la Salud (OMS), en el que la producción india de Covishield es fundamental, especialmente para las economías de bajos ingresos.

El país, que confía en la inmunización como la única salida para erradicar la pandemia, se ha visto presionado a acelerar la vacunación y evitar así una posible tercera ola de casos, después de que en abril y mayo sufriera una devastadora segunda ola.

Entonces, llegó a alcanzar un pico de más de 400.000 contagios y 4.000 fallecidos diarios, colapsando hospitales y crematorios, algo que contrasta con los menos de 40.000 casos y 617 muertes registradas en el país en las últimas 24 horas.

Fuente: HOLA NEWS. Disponible en https://cutt.ly/JQDCSMg

Concluye intervención sanitaria con Soberana Plus en trabajadores de salud convalecientes de COVID-19

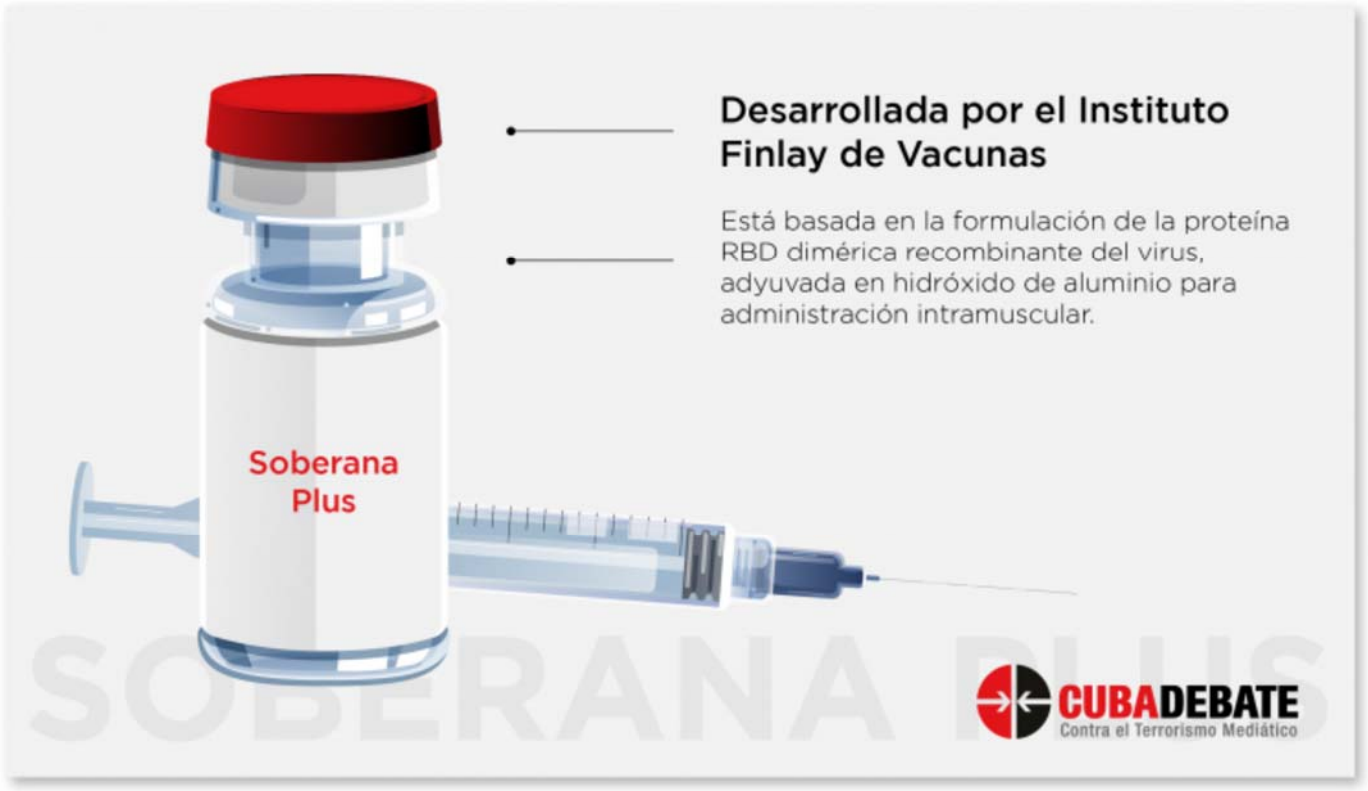
8 ago. La intervención sanitaria con el candidato vacunal Soberana Plus (con un esquema de dosis única), en trabajadores de la salud convalecientes de covid-19, concluyó y se preparan las condiciones para extender su uso al resto de la población, informó en su cuenta en Twitter el Instituto Finlay de Vacunas (IFV).

Esta intervención comenzó el día 4 de junio en La Habana y luego se fue extendiendo a todo el país.

Criterios de inclusión: el trabajador de la salud debía haber padecido la enfermedad y tener el alta poscovid de dos meses atrás. Además, debían haber cursado la enfermedad de forma leve o moderada, pues no se aplicaba en este caso a los graves y críticos, sino a los asintomáticos y a los casos leves o moderados.

De acuerdo con el doctor Arturo Chang Monteagudo, especialista de I y II grado en Inmunología e investigador principal del ensayo clínico, al inicio de la pandemia, cuando se estudiaron los anticuerpos específicos anti-SARS-CoV2 en cubanos convalecientes donantes de plasma se encontró que los títulos disminuían con el paso de los meses.

De esta forma, se identificó que estas personas constituían un grupo poblacional con secuelas físicas y psicológicas que debería ser protegido con una vacuna para evitar que padecieran nuevamente la enfermedad.



Datos publicados por el Ministerio de Salud Pública refieren que al cierre del 5 de agosto se acumulaban en el país 10 713 247 dosis administradas con los candidatos vacunales cubanos Soberana 02 y Soberana Plus, y con la vacuna cubana Abdala.

Hasta la fecha, 4 597 637 personas han recibido al menos una dosis de uno de los candidatos vacunales cubanos y de Abdala. De ellas ya tienen segunda dosis 3 317 481 personas y tercera dosis 2 798 129 personas.

Total de dosis administradas durante la Vacunación Masiva: 1 089 794.

Total de dosis administradas durante la Intervención Sanitaria: 9 023 830.

Total de dosis administradas durante el Estudio de Intervención: 450 259.

Total de dosis administradas durante los Ensayos Clínicos: 149 364 (se excluye de esta cifra las dosis de placebos administradas durante los Ensayos Clínicos).

Fuente: Cubadebate. Disponible en https://cutt.ly/pQDV5aH

Avanza ensayo clínico Soberana-Pediatría de Cuba con tercera dosis

9 ago. Los primeros 25 adolescentes incluidos en el ensayo clínico antiCovid-19 de Cuba, Soberana-Pediatría, recibirán hoy la dosis del candidato vacunal Soberana Plus y concluyen así el esquema de vacunación, anunciaron líderes del proyecto.

Dicho grupo de voluntarios de entre 12 y 18 años de edad ya cuentan con dos inyecciones del proyecto Soberana 02, desarrollado -al igual que Soberana Plus- por el Instituto Finlay de Vacunas (IFV), institución rectora del estudio.

El esquema heterólogo que fue administrado en el análisis pediátrico evidenció recientemente un 91, 2 por ciento de eficacia frente a la enfermedad sintomática (considerada la variable principal del estudio fase III de Soberana 02).

La propuesta también mostró en su examen interino parcial un 75.7 por ciento sobre la infección y 100 por ciento para prevenir casos graves o severos e igual valor ante los fallecimientos.

Por otro lado, explicaron los expertos del Finlay, en el análisis final de la eficacia sobre la enfermedad sintomática para el esquema de dos dosis de Soberana 02, esa variable se incrementó del 62 por ciento reportado en el estudio intermedio, a 65,6 por ciento. En días pasados, se culminó la administración de la segunda dosis al grupo etario de 12 a 18 años de la segunda etapa de Soberana Pediatría, así como a los pequeños de tres a 11 años de la Fase I del ensayo. La selección de los menores de 12 se realizó luego de que fuera comprobada la seguridad de la primera inyección de Soberana 02 en los adolescentes quienes tuvieron un seguimiento médico de 24, 48, 72 horas y una semana después de inmunizados.

A partir de esos resultados se hizo un informe para recibir la aprobación del Centro para el Control Estatal de Medicamentos, Equipos y Dispositivos Médicos, autoridad regulatoria, sobre la inclusión del resto de los más pequeños y la muestra con los adolescentes se amplió a 150.

La directora de investigaciones del Instituto Finlay de Vacunas, Dagmar García detalló que esperan contar a fines de agosto y principios de septiembre con los primeros datos de la investigación en edades pediátricas para luego presentar los documentos necesarios a fin de iniciar la vacunación en esa población. Autoridades sanitarias de Cuba han resaltado en disímiles ocasiones que la inmunización contra la Covid-19 en niños y adolescentes juega un papel fundamental, pues podría tener un efecto muy positivo en la contención de la progresión de esta enfermedad.

Desde el inicio de la pandemia en el país en marzo de 2020, más de 72 mil infantes han sido confirmados con el SARS-CoV-2, patógeno causante de la Covid-19.

Las cifras han aumentado en los últimos meses de 2021 con un promedio de más de mil 500 casos diarios en ese grupo etario.

Fuente: Prensa Latina. Disponible en https://cutt.ly/dQDNjEq

Avanza producción de los inmunógenos anti-COVID-19 del Instituto Finlay de Vacunas

10 ago. En la actualidad se encuentra en marcha la producción de miles de dosis de los candidatos vacunales anti-COVID-19 de la serie Soberana, desarrollados por el Instituto Finlay de Vacunas, aseguró Vicente Vérez Bencomo, director general de esa institución.

En exclusiva con la Agencia Cubana de Noticias, el directivo señaló que para el venidero mes de septiembre se prevé, tras la autorización de uso de

emergencia por el Centro para el Control Estatal de Medicamentos, Equipos y Dispositivos Médicos, la incorporación de Soberana 02 y la Plus a la vacunación en el país, donde se incluirían tanto niños y adolescentes como convalecientes.

Además, dijo que avanzan los ensayos clínicos con Soberana 01 en la provincia de Cienfuegos, donde se compara ese inmunógeno con Soberana 02, con refuerzo de Plus, y detalló que la primera es más ventajosa para personas de la tercera edad y con deficiencias del sistema inmune.

Significó que la 01 pudiera ser un buen complemento de la inmunización en los adultos mayores independientemente de haber completado el esquema previsto.

Asimismo, el IFV estudia la respuesta inmunológica de los sujetos que participaron en la primera etapa de los ensayos clínicos de Soberana 01 para determinar su permanencia en el tiempo.

En el contexto actual, la ciencia cubana siempre tratará de estar lo más delante posible, no se puede esperar a que el virus cambie y es preciso prever hacia futuro, concluyó el experto.

Soberana 01 (FINLAY-FR-01) contiene vesículas de la membrana externa del meningococo serogrupo B (base de la vacuna cubana contra la meningitis meningocóccica), mientras que Soberana 02 (FINLAY-FR-02) el RBD está unido al toxoide tetánico que se utiliza como parte del esquema con el objetivo de aumentar la inmunogenicidad de la vacuna, y en ambos casos la seguridad ha sido probada con anterioridad.

Soberana Plus, formulación más sencilla, está conformada por dos moléculas de RBD (formato dimérico), adyuvadas en hidróxido de aluminio.

La tecnología de estos fármacos ya había sido utilizada con éxito en otras vacunas fabricadas en la nación antillana y una alianza entre el IFV, el Centro de Inmunología Molecular y el Centro Nacional de Biopreparados propicia su sistema de producción.

Fuente: Agencia Cubana de Noticias. Disponible en https://cutt.ly/CQDM9Xc

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Estrategia de búqueda: *Vaccine in the title or abstract AND 20210801:20210810 as the publication date 44 records.*

1.20210236633METHODS AND COMPOSITIONS FOR TREATING CANCERS
US - 05.08.2021
Clasificación Internacional A61K 39/39 Nº de solicitud 17265580 Solicitante INSERM (INSTITUT NATIONAL DE LA SANTÉ ET DE LA RECHERCHE MÉDICALE) Inventor/a Frank GRISCELLI
The invention relates to a method for treating cancers. Many cancers harbour sternness signature to de-differentiate into immature progenitors confer to tumor clones the re-expression of genes from fetal development. Inventors have obtained mice per group which received two boosts of vaccine 7 and 14 days with 2×106 irradiated hESCs cells that were mixed with 3 different adjuvants: 500 µg of TLR3, 50 µg of TLR9 agonist or 50 µg/ml of Quil Saponin vaccine adjuvant. After 14 days 5×104 4T1 cells were injected into the mammary fat pad of the mice and Valproic acid added in the drinking water at the dose of 4 mg/ml. They have shown that in contrast to the non-vaccinated mice, the mice vaccinated with hESC combined with a TLR3 agonist have generated the highest reduction of breast tumor volume ($p<0.001$) compared to the use of a TLR9 agonist or to Quil-A® Saponin vaccine adjuvant. Accordingly, the invention relates to a method for treating a subject suffering from a cancer with i) an agent that induces MHC-I presentation of antigens, ii) a vaccine composition containing an immunogenic element and iii) an adjuvant.

2.3858369KREBSTHERAPIE, BEI DER ONKOLYTISCHES VACCINIA-VIRUS UND IMMUN-CHECKPOINT-INHIBITOR IN KOMBINATION VERWENDET WERDEN, UND PHARMAZEUTISCHE ZUSAMMENSETZUNG UND DARIN VERWENDETES KOMBINATIONSARZNEIMITTEL
EP - 04.08.2021
Clasificación Internacional A61K 35/768 Nº de solicitud 19867263 Solicitante ASTELLAS PHARMA INC Inventor/a NAKAO SHINSUKE

The present invention provides a combination therapy of genetically modified vaccinia virus (particularly oncolytic vaccinia virus) and another cancer therapy for use in treating cancer, and a pharmaceutical composition and a combination kit for use in the therapy. More specifically, the invention provides a therapy with vaccinia virus containing a polynucleotide encoding interleukin-7 (IL-7) and a polynucleotide encoding interleukin-12 (IL-12) in combination with an immune checkpoint inhibitor, and a pharmaceutical composition and a combination kit for use in the therapy.

3.20210236610ALLOGENEIC TUMOR CELL VACCINE
US - 05.08.2021
Clasificación Internacional A61K 39/00 Nº de solicitud 17233124 Solicitante ALLOPLEX BIOTHERAPEUTICS, INC. Inventor/a Frank Borriello
The described invention provides a tumor cell vaccine comprising genetically modified tumor cell line of a particular tumor type that stably expresses high levels of two or more immunomodulators. According to some embodiments, an immunogenic amount of the tumor cell line variants may be selected for concomitant expression of two or more of recombinant membrane expressed IgG1, CD40L, TNF-alpha, as well as membrane and soluble forms of GM-CSF, and Flt-3L peptides that are effective to elicit an anti-tumor immune response compared to the parent unmodified tumor cell line as measured in vitro by a one-way mixed lymphocyte tumor reaction assay using human peripheral blood mononuclear cells and the genetically modified allogeneic cell vaccine candidate. According to some embodiments, the tumor cell vaccine candidate will induce an immune response in the recipient cancer patient that cross reacts with the patient's own (autologous) tumor cells, the effects of which will be sufficient to result in enhanced anti-tumor immunity contributing to the increased survival of a vaccinated patient cohort compared to a matched unvaccinated patient cohort.

4.20210236615TARGETED VACCINATION IN THE LIVER
US - 05.08.2021
Clasificación Internacional A61K 39/015 Nº de solicitud 17147438 Solicitante UNIVERSITY OF WASHINGTON Inventor/a Sean C. MURPHY
In one aspect, the present disclosure provides a trapping vaccine composition comprising a trapping antigenic component, a protective component, and a liver cell-targeting component, wherein the trapping antigenic component comprises a nucleic acid molecule or a protein, the protective component comprises a synthetic or non-natural molecule or formation of synthetic or non-natural molecules, and wherein the liver cell-targeting component is capable of delivering the vaccine composition to a liver cell or liver tissue. The present disclosure additional provides vaccination methods comprising (i) administering a priming composition comprising a priming antigenic component or a first dose comprising the priming composition to the mammal; and (ii) administering a trapping composition comprising a trapping antigenic component, a protective component, and a liver cell-targeting component, or a second dose comprising the second composition to the mammal, wherein the priming and trapping compositions or doses are not administered concurrently and wherein the number of resident memory T cells in the liver are increased following administration of the trapping composition. In certain embodiments, vaccine compositions and regimes are provided that protect against liver-tropic pathogens, e.g., a malarial infection. In an embodiment, a vaccine composition and regimen are provided that protect against an infection caused by *P. falciparum* or *P. yoelli* sporozoites.

5.20210236614VACCINE COMPOSITION AND USES THEREOF
US - 05.08.2021
Clasificación Internacional A61K 39/00 Nº de solicitud 16966442 Solicitante Imugene Limited Inventor/a Nicholas Ede

Disclosed herein is a vaccine composition for raising a humoral response to PD1, and uses thereof, for treating a cancer characterised by an involvement of PD1, wherein the vaccine composition comprises an effective amount of an immunogen that induces an antibody response in which the antibody binds to a B cell epitope of PD1.

6.3856199TARGETING VON MODC ZUR ERHÖHUNG DER IMPFWIRKUNG AUF DER SCHLEIMHAUTOBERFLÄCHE
EP - 04.08.2021
Clasificación Internacional A61K 31/7076 Nº de solicitud 19865436 Solicitante UNIV FLORIDA Inventor/a JIN LEI
Described herein are novel vaccine compositions and methods for use thereof in inducing an immune response in a subject especially aged subjects. Specifically exemplified are vaccine compositions that include an antigen; a cyclic dinucleotide; soluble tumor necrosis factor (TNF); or a CD64 antibody or antibody fragment. Optionally, the vaccine composition comprises a TNF conjugated with a moDC targeting moiety in addition to or in place of TNF or CD64 antibody or antibody fragment, or both TNF and CD64 antibody or antibody fragment.

7.WO/2021/153873LIVE ATTENUATED VACCINE STRAIN FOR PORCINE EPIDEMIC DIARRHEA VIRUS, COMPOSITION COMPRISING SAME, AND METHOD FOR PREPARING SAME
WO - 05.08.2021
Clasificación Internacional C12N 7/00 Nº de solicitud PCT/KR2020/012091 Solicitante REPUBLIC OF KOREA(ANIMAL AND PLANT QUARANTINE AGENCY) Inventor/a AN, Dong Jun
The present invention relates to a live attenuated vaccine strain for porcine epidemic diarrhea virus, a composition comprising same, and a method for preparing same. More specifically, the present invention relates to: a live attenuated vaccine strain for porcine epidemic diarrhea virus, which is a monoclonal virus strain established by co-inoculating host cells with a plurality of gene-deficient virus strains derived from wild-type porcine epidemic diarrhea virus; a vaccine composition containing same; a method for producing same; and uses of same.

8.3858380INAKTIVIERTER GANZVIRUS-INFLUENZAIMPFSTOFF UND VERFAHREN ZU SEINER HERSTELLUNG
EP - 04.08.2021
Clasificación Internacional A61K 39/145 Nº de solicitud 19865376 Solicitante DENKA COMPANY LTD Inventor/a MITSUMATA RYOTARO
Provided is an inactivated whole-virus influenza vaccine in which the antibody-inducing ability is maintained or enhanced and which causes less side reactions. A method for preparing an inactivated whole-virus influenza vaccine using an embryonated chicken egg method, comprising a step of subjecting a virus solution comprising a whole influenza virus collected from embryonated chicken eggs to a hypotonic treatment.

9.WO/2021/155149METHODS OF INDUCING NEOEPITOPE-SPECIFIC T CELLS WITH A PD-1 AXIS BINDING ANTAGONIST AND AN RNA VACCINE
WO - 05.08.2021
Clasificación Internacional A61K 39/00 Nº de solicitud PCT/US2021/015710 Solicitante GENENTECH, INC. Inventor/a MUELLER, Lars
The present disclosure provides methods for inducing neoepitope-specific CD8+ T cells in an individual or for inducing trafficking of neoepitope-specific CD8+ T cells to a tumor in an individual using an RNA vaccine or using an RNA vaccine in combination with a PD-1 axis binding antagonist. Also provided herein are PD-1 axis binding antagonists and RNA vaccines that include one or more polynucleotides encoding one or more neoepitopes resulting from cancer-specific somatic mutations present in a tumor

specimen obtained from the individual for use in methods of inducing neoepitope-specific CD8+ T cells in an individual or for inducing trafficking of neoepitope-specific CD8+ T cells to a tumor in an individual.

10.20210236624VACCINES FORMED BY VIRUS AND ANTIGEN CONJUGATION
US - 05.08.2021
Clasificación Internacional A61K 39/215 Nº de solicitud 17186941 Solicitante Kentucky BioProcessing, Inc. Inventor/a Steven D. Hume
Disclosed herein are methods of forming compounds and exemplary stable compounds in the nature of a conjugated compound at refrigerated or room temperature, which in some embodiments comprises an antigen and virus particle mixed in a conjugation reaction to form a conjugate mixture, such that the conditions and steps of forming these products allow for use of the conjugate mixture as a vaccine, including but not limited to use as a vaccine against various pathogens including for treatment of diseases caused by novel coronaviruses (including SARS-COV 2).

11.20210236623T-CELL INDUCING VACCINE COMPOSITION COMBINATION AND USES THEREOF
US - 05.08.2021
Clasificación Internacional A61K 39/21 Nº de solicitud 17044952 Solicitante Altimmune, Inc. Inventor/a Bertrand Georges
Provided herein are vaccine combinations and methods for enhancing an antigen specific T cell induced response in a subject in need thereof. The methods combine systemic vaccination with a first composition containing a non-replicating viral vector encoding an antigen or immunogen containing one or more CD8+ T cell epitopes; and/or a second composition with micelles containing fluorocarbon-linked peptides, wherein each peptide linked to the fluorocarbon is: i) 15 to 75 amino acid residues long; ii) from the antigen or immunogen of the first composition; and, iii) contains one or more of the CD8+ T cell epitopes of the first composition from the antigen or immunogen to induce antigen specific CD8+ T cells; and optionally a third composition comprising an immune modulator composition.

12.20210236608PCSK9 VACCINE AND METHODS OF USING THE SAME
US - 05.08.2021
Clasificación Internacional A61K 39/00 Nº de solicitud 17155549 Solicitante THE USA, AS REPRESENTED BY THE SECRETARY, DEPT. OF HEALTH AND HUMAN SERVICES Inventor/a Alan Remaley
A vaccine construct comprising an antigenic PCSK9 peptide and an immunogenic carrier, and methods of using the same that are effective to lower blood cholesterol levels in a mammal and treat dyslipidemias and related disease states in a mammal without the frequency of administration required by passive immunity strategies.

13.WO/2021/154055MUTANT STRAIN OF EUROPEAN PORCINE REPRODUCTIVE AND RESPIRATORY SYNDROME VIRUS AND VACCINE COMPOSITION COMPRISING SAME
WO - 05.08.2021
Clasificación Internacional C12N 7/00 Nº de solicitud PCT/KR2021/001262 Solicitante BIOPOA, INC. Inventor/a CHO, Sun-Hee
The present invention relates to a mutant strain of European porcine reproductive and respiratory syndrome virus, in which silencing mutation is introduced into a specific site of the genome through codon pair deoptimization, and to a use thereof. The virus mutant strain provided by the present invention is attenuated and decreases in proliferative ability in pigs, compared to the wild-type strain and, as such, can be utilized as a vaccine for prevention of European porcine reproductive and respiratory syndrome.

14.20210236631VACCINES HAVING AN ANTIGEN AND INTERLEUKIN-21 AS AN ADJUVANT
US - 05.08.2021

Clasificación Internacional A61K 39/39 Nº de solicitud 17231534 Solicitante The Trustees of the University of Pennsylvania Inventor/a David B. Weiner
Disclosed herein is a vaccine comprising an antigen and IL-21. Also disclosed herein are methods for increasing an immune response in a subject. The methods may comprise administering the vaccine to the subject in need thereof.

15.3858867MUTANTE VON L1-PROTEIN DES MENSCHLICHEN PAPILLOMAVIRUS TYP 51
EP - 04.08.2021
Clasificación Internacional C07K 19/00 Nº de solicitud 19867338 Solicitante UNIV XIAMEN Inventor/a LI SHAOWEI
Provided are a mutated HPV51 L1 protein or a variant thereof, a coding sequence thereof, a preparation method therefor, and a virus-like particle containing same, wherein the protein or the variant and the virus-like particle thereof are capable of inducing neutralizing antibodies against at least two types of HPV (for example, HPV51 and HPV69, or HPV51, HPV69 and HPV26). Also provided is the use of the above-mentioned protein and the virus-like particle for preparing a pharmaceutical composition or a vaccine, wherein the pharmaceutical composition or the vaccine can be used to prevent infections of the at least two types of HPV and diseases caused by the infections, such as cervical cancer and condyloma acuminatum.

16.20210238227NOVEL IMMUNOTHERAPY AGAINST SEVERAL TUMORS INCLUDING NEURONAL AND BRAIN TUMORS
US - 05.08.2021
Clasificación Internacional C07K 7/06 Nº de solicitud 17238806 Solicitante Immatics Biotechnologies GMBH Inventor/a Toni WEINSCHENK
The present invention relates to peptides, nucleic acids and cells for use in immunotherapeutic methods. In particular, the present invention relates to the immunotherapy of cancer. The present invention furthermore relates to tumor-associated cytotoxic T cell (CTL) peptide epitopes, alone or in combination with other tumor-associated peptides that serve as active pharmaceutical ingredients of vaccine compositions that stimulate anti-tumor immune responses. The present invention relates to 30 peptide sequences and their variants derived from HLA class I and class II molecules of human tumor cells that can be used in vaccine compositions for eliciting anti-tumor immune responses.

17.20210236625HSV-2-DELTA-gD VACCINES AND METHODS FOR THEIR PRODUCTION AND USE
US - 05.08.2021
Clasificación Internacional A61K 39/245 Nº de solicitud 17051992 Solicitante Albert Einstein College of Medicine Inventor/a William Jacobs, Jr.
Recombinant herpes simplex virus 2 (HSV-2) vaccine vectors, compositions and vaccines comprising such, and methods of use thereof are each provided.

18.WO/2021/1546641H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014978 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a TARBY, Christine M.
Compounds according to formula I are useful as agonists of Toll-like receptor 7 (TLR7). (I) Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

19.20210236620COMPOSITIONS AND METHODS OF VACCINATION AGAINST DENGUE VIRUS IN CHILDREN AND YOUNG ADULTS
US - 05.08.2021

Clasificación Internacional A61K 39/12 Nº de solicitud 17229109 Solicitante TAKEDA VACCINES, INC. Inventor/a Derek WALLACE
Embodiments herein concern compositions, methods, and uses for inducing an immune response to all four dengue virus serotypes in a child or young adult from about 1 year to about 20 years of age. Some embodiments concern compositions that can include dengue virus chimeras that, either alone or in combination with other constructs, can be used in vaccine compositions against all four dengue virus serotypes. Compositions can include constructs of more than one serotypes of dengue virus, such as dengue-1 (DEN-1) virus, dengue-2 (DEN-2) virus, dengue-3 (DEN-3) virus and/or dengue-4 (DEN-4) virus, at various concentrations or ratios to improve protection from infection in children and young adults. In certain embodiments, viruses of the formulations are limited to dengue virus serotypes. Other embodiments concern methods of administering immunogenic compositions against dengue virus that can include chimeric dengue constructs and live, attenuated dengue viruses using single, dual or other regimens.

20.WO/2021/1546661H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014980 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a COX, Matthew
Compounds according to formula I or II are useful as agonists of Toll-like receptor 7 (TLR7). (I) (II) Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

21.3856260MUTANTE REVERSE TETRACYCLIN-TRANSAKTIVATOREN ZUR EXPRESSION VON GENEN
EP - 04.08.2021
Clasificación Internacional A61K 48/00 Nº de solicitud 19787521 Solicitante HARVARD COLLEGE Inventor/a SINCLAIR DAVID A
Provided herein are mutant reverse tetracycline transactivator (rtTA) proteins and engineered nucleic acids (*e.g.*, viral vectors, including lentiviral vectors, adenoviral vectors, AAV vectors, herpes viral vectors, and retroviral vectors, and non-viral vectors, including RNA and plasmid DNA) that encode a mutant rtTA that are useful, for example, in regulating gene expression, inducing cellular reprogramming, tissue repair, tissue regeneration, organ regeneration, reversing aging, treating a disease (*e.g.*, acute injuries, neurodegenerative disease, chronic diseases, proliferative diseases, cardiovascular diseases, genetic diseases, inflammatory diseases, autoimmunue diseases, neurological diseases, hematological diseases, painful conditions, psychiatric disorders, metabolic disorders, cancers, aging, age-related diseases, and diseases affecting any tissue in a subject), or any combination thereof. Also provided herein are recombinant viruses (*e.g.*, lentiviruses, adenoviruses, alphaviruses, vaccinia viruses, retroviruses, herpes viruses, or A A Vs) comprising the engineered nucleic acids and methods of regulating (*e.g.*, inhibiting or inducing) cellular reprogramming, tissue repair, tissue regeneration, or any combination thereof by administering an engineered nucleic acid or recombinant virus comprising the same in a cell, tissue or subject (*e.g.*, a cell or tissue of a subject with a condition, which includes any disease (*e.g.*, ocular disease), aging, neurodegenerative diseases, cancer, and age-related diseases) comprising administering a mutant rtTA and an inducible nucleic acid (*e.g.*, an engineered nucleic acid, including an expression vector) encoding a transgene.

22.20210236622SELF-ATTENUATED PROPHYLACTIC AND THERAPEUTIC VACCINES AGAINST PATHOGENS
US - 05.08.2021

Clasificación Internacional A61K 39/145 Nº de solicitud 17048714 Solicitante Texas Tech University System Inventor/a Mingtao Zeng
The present invention includes a live, self-attenuated therapeutic vaccine, virus and methods of making and using the same, comprising: an isolated virus comprising a viral genome that expresses one or more viral antigens; and an artificial microRNA 30 (amiR-30) expression cassette inserted into a viral neuraminidase (NA) or a viral non-structural (NS) gene segment that expresses an amiR-30 that specifically inhibits the expression of a host gene essential for influenza virus replication in host cells.

23.WO/2021/1546621H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014976 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a COX, Matthew
Compounds according to formula I are useful as agonists of Toll-like receptor 7 (TLR7). Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

24.WO/2021/154812CORONAVIRUS VACCINE FORMULATIONS
WO - 05.08.2021
Clasificación Internacional A61K 39/215 Nº de solicitud PCT/US2021/015220 Solicitante NOVAVAX, INC. Inventor/a SMITH, Gale
Disclosed herein are coronavirus Spike (S) proteins and nanoparticles comprising the same, which are suitable for use in vaccines. The nanoparticles present antigens from pathogens surrounded to and associated with a detergent core resulting in enhanced stability and good immunogenicity. Dosages, formulations, and methods for preparing the vaccines and nanoparticles are also disclosed.

25.WO/2021/154667C3-SUBSTITUTED 1H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014981 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a TARBY, Christine M.
Compounds according to formula I are useful as agonists of Toll-like receptor 7 (TLR7). Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

26.20210236611COMPOSITION AND PROCESS FOR PREPARING VACCINE
US - 05.08.2021
Clasificación Internacional A61K 39/00 Nº de solicitud 17249362 Solicitante TREOS BIO LIMITED Inventor/a Levente MOLNÁR
The disclosure relates to polypeptides, polynucleic acids and pharmaceutical compositions comprising polypeptides that find use in the prevention or treatment of cancer. The disclosure also relates to methods of inducing a cytotoxic T cell response in a subject or treating cancer by administering pharmaceutical compositions comprising the peptides, and companion diagnostic methods. The disclosure also relates to a method of preparing a peptide or polynucleic acid for use in a method of inducing a T cell response against a target polypeptide, wherein the method comprises identifying epitopes in the antigen that bind to multiple alleles of receptors of the highest proportion of subjects in a target population.

27.20210236536USE OF BETA-GLUCAN EXTRACT IN IMMUNOPOTENTIATION OF AN AVIAN ANIMAL
US - 05.08.2021

Clasificación Internacional A61K 31/716 Nº de solicitud 17052478 Solicitante LESAFFRE ET COMPAGNIE Inventor/a Cheng HE
The present invention relates to use of β-glucan extracts in the immunopotentiation of an avian animal Specifically, the present invention provides a kit, wherein the kit comprises (1) an immunopotentiator used for immunopotentiation of an avian animal, wherein the immunopotentiator comprises a β-glucan extract which is extracted from *Saccharomyces cerevisiae* cell wall; and (2) a virus vaccine. The present invention also provides use of a β-glucan extract which is extracted from *Saccharomyces cerevisiae* cell wall, in the preparation of a kit used for immunopotentiation of an avian animal and immunopotentiator. The present invention uses a β-glucan extract, which is extracted from *Saccharomyces cerevisiae* cell wall, for immunopotentiation of an avian animal, which can enhance lymphocyte proliferation responses and T cell responses of vaccinated animals; decrease the viral load; reduce the morbidity or mortality; produce antibodies in advance; and increase antibody production; and/or restrict the spread of the virus.

28.WO/2021/154745GONORRHEA SUBUNIT VACCINE
WO - 05.08.2021
Clasificación Internacional A61K 39/095 Nº de solicitud PCT/US2021/015117 Solicitante OREGON STATE UNIVERSITY Inventor/a SIKORA, Aleksandra E.
Methods are disclosed for inducing an immune response to Neisseria gonorrhoeae in a mammalian subject. These methods include administering to the mammalian subject an effective amount of a MetQ protein and an effective amount of a K-type CpG oligodeoxynucleotide, thereby inducing the immune response. Also disclosed are immunogenic compositions including an effective amount of a MetQ protein and an effective amount of a K-type CpG oligodeoxynucleotide.

29.20210236618Mutant of L1 Protein of Human Papillomavirus Type 66
US - 05.08.2021
Clasificación Internacional A61K 39/12 Nº de solicitud 15734750 Solicitante Xiamen University Inventor/a Shaowei LI
The invention relates to a mutated HPV66 L1 protein (or a variant thereof), a sequence encoding the same, a method for preparing the same, and a virus-like particle comprising the same, wherein the protein (or a variant thereof) and the virus-like particle can induce the generation of neutralizing antibodies against at least two HPV types (e.g. HPV66 and HPV56, or HPV66, HPV56 and HPV53), and therefore can be used to prevent infection by said at least two HPV types, and a disease caused by said infection, such as cervical cancer and condyloma acuminatum. The invention further relates to the use of the protein and the virus-like particle in the manufacture of a pharmaceutical composition or a vaccine for preventing infection by said at least two HPV types, and a disease caused by said infection, such as cervical cancer and condyloma acuminatum.

30.WO/2021/1546691H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014983 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a HE, Liqi
Compounds according to formula I or II are useful as agonists of Toll-like receptor 7 (TLR7). Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

31.WO/2021/1546611H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021

Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014975 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a CHENG, Heng
Compounds according to formula I are useful as agonists of Toll-like receptor 7 (TLR7). Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

32.3858382MUKOSALES ADJUVANS
EP - 04.08.2021
Clasificación Internacional A61K 39/39 Nº de solicitud 19865238 Solicitante DENKA COMPANY LTD Inventor/a MISUMI SHOGO
Provided is a mucosal adjuvant which has high mucosal immunogenicity and high safety and is useful in the preparation of mucosal vaccines, and a mucosal vaccine composition comprising the same. The present invention provides a mucosal adjuvant comprising TGDK.

33.3858377INJIZIERBARE ZUSAMMENSETZUNG
EP - 04.08.2021
Clasificación Internacional A61K 39/00 Nº de solicitud 19864323 Solicitante SUMITOMO DAINIPPON PHARMA CO LTD Inventor/a MORITA AKIHIRO
The present invention relates to a lyophilized preparation comprising two or more cancer antigen peptides derived from WT1 protein with an activity of inducing cytotoxic T lymphocytes for cancer peptide vaccine therapy.

34.20210236632USE OF TOLL-LIKE RECEPTOR 2 (TLR-2) AGONIST FOR MODULATING HUMAN IMMUNE RESPONSE
US - 05.08.2021
Clasificación Internacional A61K 39/39 Nº de solicitud 17263515 Solicitante Children's Medical Center Corporation Inventor/a David J. Dowling
Provided herein are Toll-like receptor 2 (TLR2) agonists for use in enhancing human immune response and/or as adjuvants in vaccines. The TLR2 agonists include thiophenes, imidazoles, or phenyl-containing compounds, which may be compounds of Formulae (I), (II), (III), and pharmaceutically acceptable salts, solvates, hydrates, polymorphs, co-crystals, tautomers, stereoisomers, isotopically labeled derivatives, prodrugs, and compositions thereof. The compounds described herein are used as enhancers of an immune response (e.g., innate and/or adaptive immune response), and are useful in treating and/or preventing a disease, as adjuvants in a vaccine for the disease, (e.g., proliferative disease, inflammatory disease, autoimmune disease, infectious disease, or chronic disease). Also provided in the present disclosure are pharmaceutical compositions, kits, methods, and uses including or using a compound described herein.

35.WO/2021/1546631H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014977 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a POUDEL, Yam B.
Compounds according to formula I are useful as agonists of Toll-like receptor 7 (TLR7). (I) Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

36.WO/2021/155323COMPOSITIONS AND METHODS FOR PREVENTING AND TREATING CORONAVIRUS INFECTION-SARS-COV-2 VACCINES
WO - 05.08.2021

Clasificación Internacional C07K 14/005 Nº de solicitud PCT/US2021/015946 Solicitante BETH ISRAEL DEACONESS MEDICAL CENTER, INC. Inventor/a BAROUCH, Dan, H.
The invention relates to immunogenic compositions and vaccines containing a coronavirus (e.g., Wuhan coronavirus (2019-nCoV; also referred to as SARS-CoV-2)) protein or a polynucleotide encoding a coronavirus (e.g., Wuhan coronavirus (2019-nCoV; SARS-CoV-2)) protein and uses thereof. The invention also provides methods of treating and/or preventing a coronavirus (e.g., Wuhan coronavirus (2019-nCoV; SARS-CoV-2)) infection by administering an immunogenic composition or vaccine to a subject (e.g., a human). The invention also provides methods of detecting and/or monitoring a protective anti-coronavirus (e.g., Wuhan coronavirus (2019-nCoV; SARS-CoV-2)) antibody response (e.g., anti-coronavirus antibody response, e.g., anti-2019- nCoV antibody response, e.g., anti-Spike antibody response, e.g., anti-Spike neutralizing antibody response). The present invention relates to isolated nucleic and/or recombinant nucleic acid encoding a coronavirus S protein, in particular a SARS-CoV-2 S protein, and to the coronavirus S proteins, as well as to the use of the nucleic acids and/or proteins thereof in vaccines.

37.20210236531CYCLIC DINUCLEOTIDES AS AGONISTS OF STIMULATOR OF INTERFERON GENE DEPENDENT SIGNALLING
US - 05.08.2021
Clasificación Internacional A61K 31/7084 Nº de solicitud 17065304 Solicitante Board of Regents, The University of Texas System Inventor/a Maria Emilia DI FRANCESCO
Disclosed herein are new cyclic dinucleotide compounds and compositions and their application as pharmaceuticals for the treatment of disease. Methods of modulation of immune response to disease, and induce Stimulator of Interferon Genes (STING) dependent type I interferon production and co-regulated genes in a human or animal subject are also provided for the treatment diseases such as cancer, particularly metastatic solid tumors and lymphomas, inflammation, allergic and autoimmune disease, infectious disease, and for use as anti-viral agents and vaccine adjuvants.

38.20210236617POULTRY VACCINE FOR CLOSTRIDIUM PERFRINGENS
US - 05.08.2021
Clasificación Internacional A61K 39/08 Nº de solicitud 17167893 Solicitante UNIVERSITY OF GEORGIA RESEARCH FOUNDATION, INC. Inventor/a Ramesh Kumar Selvaraj
The present disclosure relates to nanoparticle compositions for use as vaccines against *Clostridium perfringens* in poultry which causes necrotic enteritis in poultry. Such compositions include one or more *Clostridium perfringens* extracellular proteins entrapped in a polyanhydride or chitosan nanoparticle. The one or more *Clostridium perfringens* extracellular proteins may include one or more *Clostridium perfringens* toxins, such as, for example, alpha toxin (CPA), beta toxin (CPB), epsilon toxin (ETX), iota toxin (ITX), perfringolysin O (PFO), enterotoxin (CPE), beta2 toxin (CPB2), or NetB toxin. In some aspects, the composition further includes a *Salmonella enteritidis* flagellar protein. The present invention also includes methods for the oral delivery of one or more *Clostridium perfringens* extracellular proteins to the mucosal membrane of the intestinal tract of a bird of the order Galliformes.

39.WO/2021/1546651H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014979 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a ZHANG, Qian
Compounds according to formula I are useful as agonists of Toll-like receptor 7 (TLR7). Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

40.20210236549IMPROVED T-CELL THERAPY METHOD
US - 05.08.2021
Clasificación Internacional A61K 35/17 Nº de solicitud 17051410 Solicitante IMMUNOTECH BIOPHARM CO., LTD. Inventor/a Yu WANG
The present invention belongs to the field of biomedicine. Specifically, the present invention relates to an improved T-cell therapy. More specifically, the present invention relates to enhancing the cancer treatment efficacy of therapeutic T cells (such as CAR-T or TCR-T cells) through stimulation with living cells expressing cancer-related antigens.

41.WO/2021/1546681H-PYRAZOLO[4,3-d]PYRIMIDINE COMPOUNDS AS TOLL-LIKE RECEPTOR 7 (TLR7) AGONISTS
WO - 05.08.2021
Clasificación Internacional C07D 487/04 Nº de solicitud PCT/US2021/014982 Solicitante BRISTOL-MYERS SQUIBB COMPANY Inventor/a POUDEL, Yam B.
Compounds according to formula I are useful as agonists of Toll-like receptor 7 (TLR7). (I) Such compounds can be used in cancer treatment, especially in combination with an anti-cancer immunotherapy agent, or as a vaccine adjuvant.

42.20210238243IMMUNOTHERAPY WITH A*01 RESTRICTED PEPTIDES AND COMBINATION OF PEPTIDES AGAINST CANCERS AND RELATED METHODS
US - 05.08.2021
Clasificación Internacional C07K 14/47 Nº de solicitud 17229592 Solicitante Immatics Biotechnologies GmbH Inventor/a Heiko SCHUSTER
The present invention relates to peptides, proteins, nucleic acids and cells for use in immunotherapeutic methods. In particular, the present invention relates to the immunotherapy of cancer. The present invention furthermore relates to tumor-associated T-cell peptide epitopes, alone or in combination with other tumor-associated peptides that can for example serve as active pharmaceutical ingredients of vaccine compositions that stimulate anti-tumor immune responses, or to stimulate T cells ex vivo and transfer into patients. Peptides bound to molecules of the major histocompatibility complex (MHC), or peptides as such, can also be targets of antibodies, soluble T-cell receptors, and other binding molecules.

43.3856238VERFAHREN ZUR INDUZIERUNG EINER IMMUNANTWORT GEGEN DAS MENSCHLICHE IMMUNSCHWÄCHEVIRUS DURCH CO-LOKALISIERTE VERABREICHUNG VON IMPFSTOFFKOMPONENTEN
EP - 04.08.2021
Clasificación Internacional A61K 39/12 Nº de solicitud 19769826 Solicitante JANSSEN VACCINES & PREVENTION BV Inventor/a WEGMANN FRANK
Methods of inducing an immune response against human immunodeficiency virus (HIV) are described. In particular, methods of inducing an immune response against HIV by co-locally administering an immunogenically effective amount of an isolated HIV envelope (Env) polypeptide and an immunogenically effective amount of an adenovirus vector encoding an HIV antigen, e.g., Env antigen are described. The isolated HIV Env polypeptide and adenovirus vector can be administered in a single composition or in separate compositions, in which the composition or compositions do not contain an adjuvant.

44.20210236630METHODS OF ENHANCING IMMUNOGENICITY OF POORLY IMMUNOGENIC ANTIGEN-SPECIFIC VACCINES USING ORAL YEAST BETA-GLUCANS
US - 05.08.2021
Clasificación Internacional A61K 39/39 Nº de solicitud 17049759 Solicitante Memorial Sloan Kettering Cancer Center Inventor/a Nai-Kong CHEUNG

The present disclosure provides methods for enhancing the immunogenicity of a poorly immunogenic antigen-specific vaccine as well as methods for promoting diversification of the gut microbiome in a subject in need thereof comprising administering to the subject an effective amount of a beta-glucan extract derived from yeast. Kits for use in practicing the methods are also provided.

Patentes registradas en la United States Patent and Trademark Office (USPTO)

Results Search in US Patent Collection db for: (ABST/vaccine AND ISD/20210810->20210801), 8 records.

	PAT. NO.	Title
1	11,083,784	Peptides and combination of peptides for use in immunotherapy against CLL and other cancers
2	11,078,491	Vaccines against Zika virus based on Zika structure proteins
3	11,078,257	Recombinant gram negative bacteria and methods of generating and utilizing same
4	11,078,253	Peptides and combination of peptides for use in immunotherapy against ovarian cancer and other cancers
5	11,078,237	Antigen delivery platforms
6	11,077,185	Vaccine to pathogenic immune activation cells during infections
7	11,077,181	Vaccine comprising a PCV2 ORF2 protein of genotype 2b
8	11,077,142	Peptides and combination of peptides of non-canonical origin for use in immunotherapy against different types of cancers

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