

TECHNICAL DOCUMENTS:

D1. A clinical case definition for post COVID-19 condition in children and adolescents by expert consensus (WHO, 16 February 2023) [LINK]

 Informed by the best available evidence and through an expert consensus process, a clinical case definition for post COVID-19 condition in children and adolescents was developed. This definition may change over time as our understanding of the condition evolves, and more high-quality evidence becomes available

D2. Good practice statement on the use of variant-containing COVID-19 vaccines (WHO, 20 February 2023) [LINK]

 This good practice statement summarizes current evidence on variant-containing vaccines and provides guidance on their use in the context of the continued availability of ancestral virus-only (monovalent) COVID-19 vaccines. This publication is based on the advice issued by the Strategic Advisory Group of Experts (SAGE) on Immunization.

D3. Considerations for integrating COVID-19 vaccination into immunization programmes and primary health care for 2022 and beyond (WHO, 21 February 2023) [LINK]

 This document lays out key programmatic considerations essential for moving from mass campaigns for COVID-19 vaccination to integrating COVID-19 vaccination into immunization programmes, PHC and other relevant health services for 2022 and beyond.

D4. WHO Policy Brief: Gatherings in the context of COVID-19 (WHO, 19 January 2023) [LINK]

 The aim of this policy brief is to present WHO's position on, and guidance in relation to, holding gatherings during the COVID-19 pandemic. The information is derived from WHO publications and on a review of evidence extracted from the scientific literature.

D5. Early warning alert and response (EWAR) in emergencies: an operational guide (WHO, 27 January 2023) [LINK]

 This operational guidance aims to guide decision-making on when and how to implement and strengthen Early Warning Alert and Response (EWAR) in preparation for and response to emergencies. Each module aims to provide updated operational guidance for EWAR practices, which may be more easily understood and applied during emergencies.

D6. Overview of the implementation of COVID-19 vaccination strategies and deployment plans in the EU (ECDC, 3 March 2023) [LINK]

 This publication provides an updated overview on the progress of national COVID-19 vaccination strategies and deployment in European Union/European Economic Area (EU/EEA) countries; including updates on- overall vaccine uptake and uptake by target group, and vaccination strategies and policies.

D7. SARS-CoV-2 in animals: susceptibility of animal species, risk for animal and public health, monitoring, prevention and control (ECDC, 28 February 2023) [LINK]

• This publication throws light on epidemiological situation of SARS-CoV-2 in humans and animals which is still evolving. It highlights that animal species known to transmit SARS-CoV-2 are American mink, raccoon dog, cat, ferret, hamster, house mouse, Egyptian fruit bat, deer mouse and white-tailed deer. Among farmed animals, American mink have the highest likelihood to become infected from humans or animals and further transmit SARS-CoV-2.

JOURNAL ARTICLES

J1. Molnupiravir plus usual care versus usual care alone as early treatment for adults with COVID-19 at increased risk of adverse outcomes (PANORAMIC): an open-label, platform-adaptive randomised controlled trial (The Lancet, 28 January 2023) [LINK]

 The study aimed to establish whether the addition of molnupiravir to usual care reduced hospital admissions and deaths associated with COVID-19. The findings demonstrate that Molnupiravir did not reduce the frequency of COVID-19associated hospitalisations or death among high-risk vaccinated adults in the community.

J2. Past SARS-CoV-2 infection protection against re-infection: a systematic review and meta-analysis (The Lancet, 16 February 2023) [LINK]

• In this meta-analysis, the authors analyzed the effectiveness of past infection by outcome (infection, symptomatic disease, and severe disease), variant, and time

since infection. The results demonstrate that protection from past infection against re-infection from pre-omicron variants was very high and remained high even after 40 weeks. Protection was substantially lower for the omicron BA.1 variant and declined more rapidly over time than protection against previous variants. Protection from severe disease was high for all variants.

J3. Maternal mRNA covid-19 vaccination during pregnancy and delta or omicron infection or hospital admission in infants: test negative design study (BMJ, 8 February 2023) [LINK]

• The study estimates the effectiveness of maternal mRNA covid-19 vaccination during pregnancy against delta and omicron SARS-CoV-2 infection and hospital admission in infants. It concludes that maternal covid-19 vaccination with a second dose during pregnancy was highly effective against delta and moderately effective against omicron infection and hospital admission in infants during the first six months of life. A third vaccine dose bolstered protection against omicron. Effectiveness for two doses was highest with maternal vaccination in the third trimester, and effectiveness decreased in infants beyond eight weeks of age.

J4. Correlates of Protection, Thresholds of Protection, and Immunobridging among Persons with SARS-CoV-2 Infection (CDC, Emerging Infectious Diseases, February 2023) [LINK]

• The study aimed to reconcile the studies that have been conducted on threshold provided by antibodies against SARS-CoV-2. It highlighted several studies that have demonstrated that neutralizing antibody levels correlate with immune protection from COVID-19 and have estimated the relationship between neutralizing antibodies and protection. It further highlights that study results converge on a consistent relationship between antibody levels and protection from COVID-19. This finding can be useful for planning future vaccine use, determining population immunity, and reducing the global effects of the COVID-19 pandemic.

J5. Effect of Higher-Dose Ivermectin for 6 Days vs Placebo on Time to Sustained Recovery in Outpatients With COVID-19 (JAMA Network, 20 February 2023) [LINK]

The study aimed to evaluate the effectiveness of ivermectin at a maximum targeted dose of 600 $\mu g/kg$ daily for 6 days, compared with placebo, for the treatment of early mild to moderate COVID-19. The findings demonstrated that among outpatients with mild to moderate COVID-19, treatment with ivermectin, with a maximum targeted dose of 600 $\mu g/kg$ daily for 6 days, compared with placebo did not improve time to sustained recovery. These findings do not support the use of ivermectin in patients with mild to moderate COVID-19

J6. Higher risk of SARS-CoV-2 Omicron BA.4/5 infection than of BA.2 infection after previous BA.1 infection, the Netherlands (Eurosurveillance, 16 February 2023) [LINK]

• The study investigated whether previous infection and/or vaccination against SARS-CoV-2 provides different protection against a new infection with the Omicron BA.4/5 or BA.2 variant. The results suggest a stronger reduction in protection against infection from previous infection against BA.4/5 compared with the BA.2 variant. This immune evasion is also observed within the Omicron lineage, especially for the first Omicron lineage that became dominant, BA.1.

J7. Minimising school disruption under high incidence conditions due to the Omicron variant in France, Switzerland, and Italy (Eurosurveillance, 2 February 2023) [LINK]

• The study assessed the effectiveness of three protocols, performed in minimizing school disruption; 'reactive screening', 'weekly screening' and 'reactive class closure'. The findings suggest that when incidence of SARS-CoV-2 infections is high, school protocols based on reactive screening lead to a substantial and unplanned demand for testing resources, while little infection prevention is achieved. With the same resources, proactive weekly screening considerably reduces the peak of infections, limiting schooldays lost. Reactive class closure leads to large disruption with successive closures.