

# GUIDELINES AND RESEARCH UPDATES





#### **TECHNICAL DOCUMENTS:**

D1. Considerations in boosting COVID vaccine immune responses: WHO consultation on COVID-19 vaccines research- Report of consultation (WHO, 13 August) [LINK]

 The link contains presentations on emerging variants effect on protection levels, duration of protection, safety of booster vaccines and research to evaluate various delivery strategies.

#### D2. COVID-19 vaccine post-introduction evaluation (cPIE) (WHO, 25 August) [LINK]

• This COVID-19 vaccine post-introduction evaluation (cPIE) tool is designed to provide a systematic method for evaluating a COVID-19 vaccination programme, using structured interviews at the national, subnational, and health facility level, and with specific target groups, and is supplemented with systematic observations of vaccination sessions and vaccine storage sites.

### D3. WHO compendium of innovative health technologies for low-resource settings 2021. COVID-19 and other health priorities (WHO, 31 August) [LINK]

 This document is a guidance on- selection of innovative technologies that can impact COVID-19 preparedness and response. It describes advantages and challenges associated with adoption of innovative health technologies in low-resource settings; acknowledges some success stories and raises awareness of the pressing need for appropriate and affordable solutions.

### D4. Digital documentation of COVID-19 certificates: vaccination status: web annex A: DDCC:VS core data dictionary (WHO, 27 August) [LINK]

• This is a guidance document for countries on the technical requirements for developing digital information systems for issuing standards-based interoperable digital certificates for COVID-19 vaccination status, and considerations for implementation of such systems, for the purposes of continuity of care, and proof of vaccination.

D5. Digital documentation of COVID-19 certificates: vaccination status: technical specifications and implementation guidance (WHO, 27 August) [LINK]

• This document guides countries on the technical requirements for developing digital information systems for issuing standards-based interoperable digital certificates for COVID-19 vaccination status, and considerations for implementation of such systems, for the purposes of continuity of care, and proof of vaccination.

# D6. Considerations for the Implementation and Management of Contact Tracing for Coronavirus Disease 2019 (COVID-19) in the Region of the Americas, 5 August 2021 (PAHO, 5 August) [LINK]

• This publication from the Pan American Health Organization (PAHO) is an updated version of the June 2020 publication 'Considerations for the Implementation and Management of Contact Tracing for Coronavirus Disease 2019 (COVID-19)' intended to complement the interim guidance by the World Health Organization (WHO) on contact tracing in the context of COVID-19. The present publication includes guidance for contact tracing among vaccinated contacts and international travelers, and in settings with community transmission along with updated definitions for cases, contacts, and community transmission published by WHO.

## **D7.** Data collection on COVID-19 outbreaks in closed settings with a completed vaccination programme: long-term care facilities (European Center for Disease Prevention and Control, 3 September) [LINK]

• This document helps in the methodical collection of information on the severity of breakthrough COVID-19 infections in outbreaks at long-term care facilities (LTCFs) and to obtain a timely estimate of vaccine effectiveness in these settings, by SARS-CoV-2 variant and vaccine product. It provides a structure for the collection of these data with the objectives to assess the characteristics of COVID-19 outbreaks among vaccinated LTCF residents and staff; to monitor disease severity of infections in vaccinated LTCF residents and staff, by vaccine brand and VOC; and to inform rapid risk assessments on COVID-19.

#### JOURNAL ARTICLES

### J1. 1-year outcomes in hospital survivors with COVID-19: a longitudinal cohort study (The Lancet, 28 August) [LINK]

- The aim of this study was to compare consequences between 6 months and 12 months after symptom onset among hospital survivors with COVID-19. The findings suggest that most COVID-19 survivors had a good physical and functional recovery during 1-year follow-up and had returned to their original work and life. The health status in the cohort of COVID-19 survivors at 12 months was still lower than that in the control population.
- J2. Associations of BNT162b2 vaccination with SARS-CoV-2 infection and hospital admission and death with covid-19 in nursing homes and healthcare workers in Catalonia: prospective cohort study (British Medical Journal, 18 August) [LINK]

• The study determined associations of BNT162b2 vaccination with SARS-CoV-2 infection and hospital admission and death with covid-19 among nursing home residents, nursing home staff, and healthcare workers. The study concludes that vaccination was associated with 80-91% reduction in SARS-CoV-2 infection in all three cohorts and greater reductions in hospital admissions and mortality among nursing home residents for up to five months.

### J3. SARS-CoV-2 infection and transmission in school settings during the second COVID-19 wave: a cross-sectional study, Berlin, Germany, November 2020 (Eurosurveillance, 26 August) [LINK]

• The study assessed SARS-CoV-2 infections and sero-reactivity in 24 randomly selected school classes and connected households in Berlin, Germany. Findings demonstrated that school attendance under rigorously implemented preventive measures seems reasonable. Balancing risks and benefits of school closures need to consider possible spill-over infection into households. Deeper insight is required into the infection risks due to being a schoolchild vs attending school.

## J4. Sensitivity and specificity of the antigen-based anterior nasal self-testing programme for detecting SARS-CoV-2 infection in schools, Austria, March 2021 (Eurosurveillance, 26 August) [LINK]

• This study evaluated the performance of the antigen-based anterior nasal screening programme implemented in all Austrian schools to detect SARS-CoV-2 infections. The findings indicates that only a subset of infected individuals are detected with the antigen-based screening programme at Austrian schools (low to moderate sensitivity). Non-infected individuals were largely tested negative (very high specificity).

## J5. Hospital admission and emergency care attendance risk for SARS-CoV-2 delta (B.1.617.2) compared with alpha (B.1.1.7) variants of concern: a cohort study (The Lancet Infectious Diseases, 27 August) [LINK]

 The study assessed the severity of the delta variant compared with the alpha variant by determining the relative risk of hospital attendance outcomes. The authors observe a higher hospital admission or emergency care attendance risk for patients with COVID-19 infected with the delta variant compared with the alpha variant. Results suggest that outbreaks of the delta variant in unvaccinated populations might lead to a greater burden on health-care services than the alpha variant.

## J6. Efficacy of Bamlanivimab/ Etesevimab and Casirivimab/Imdevimab in Preventing Progression to Severe COVID-19 and Role of Variants of Concern (Infectious Disease & Therapy, 25 August) [LINK]

• This study evaluated the risk of hospitalization or death in patients infected by SARS-CoV2 variants of concern (VOCs) receiving combinations of monoclonal antibodies

(mAbs), bamlanivimab/etesevimab or casirivimab/ imdevimab. The findings suggest that in patients infected by the SARS-CoV-2 Gamma variant, bamlanivimab/etesevimab should be used with caution because of the high risk of disease progression.

### J7. Vaccine nationalism and the dynamics and control of SARS-CoV-2 (Science, 17 August) [LINK]

• To examine the potential epidemiological and evolutionary impacts of 'vaccine nationalism', the study analyses the scenarios of stockpiling. The authors observe that waning of natural immunity contributes most to evolutionary potential, sustained transmission in low access geographies results in an increased potential for antigenic evolution, which may result in the emergence of novel variants. The results stress the importance of rapid equitable vaccine distribution for global control of the pandemic.