

# Weekly Evidence Report



Health Technology Assessment Philippines

20 - 26 November 2021

## Overview

The following report presents summaries of evidence the Department of Health (DOH) - Health Technology Assessment (HTA) Unit reviewed for the period of 20 – 26 November 2021. The HTA Unit reviewed a total of 9 studies for the said period.

Evidence includes 3 studies on Epidemiology; 1 study on Transmission; 1 study on Drugs; 2 studies on Vaccines, 0 study on Equipment and Devices; 0 study on Medical and Surgical Procedures; 0 study on Traditional Medicine; 1 study on Preventive & Promotive Health; and 1 study on Other Health Technologies.

The following report notes that 0 study have not been peer-reviewed.



## Sections

Epidemiology

Transmission

Drugs

Vaccines

Equipment & Devices

Medical & Surgical Procedures

Traditional Medicine

Preventive & Promotive Health

Other Health Technologies

## Evidence on Epidemiology

Local COVID-19 Tracker: <https://www.doh.gov.ph/covid19tracker>Local COVID-19 Case Tracker: <https://www.doh.gov.ph/covid-19/case-tracker>

Date	Author/s	Title	Journal/ Article Type	Summary
23 Nov 2021	WHO Global	<a href="#">Weekly epidemiological update on COVID-19 - 23 November 2021</a>	WHO Global Situation Report	<ul style="list-style-type: none"> <li>Under 3.6 million new cases and over 51,000 new deaths were reported globally the past week.</li> <li>New weekly cases of COVID-19 in the European regions were reported to increase while the South-East Asian and Eastern Mediterranean regions reported a decrease in new cases.</li> <li>The Western Pacific Region and the Region of Americas reported an increase in the cases of deaths while the African and South-East Asian regions reported a decrease in new weekly deaths.</li> </ul>
24 Nov 2021	ASEAN Biodiaspora Virtual Center	<a href="#">COVID-19 Situational Report in the ASEAN Region</a>	ASEAN Biodiaspora Virtual Center (Situation Report)	<ul style="list-style-type: none"> <li>The ASEAN region reported a total of 13,870,871 confirmed cases and a total 288,800 deaths, with Case Fatality Rate (CFR) of 2.1</li> <li>Vietnam's Ministry of Health reported the highest number of daily new cases (i.e., 11,132 new cases) on November 23, in over two months.</li> <li>The Laos' Ministry of Health approved the production of molnupiravir pills by the State Enterprise Pharmaceutical Factory No. 3, for treatment of COVID-19.</li> <li>In terms of vaccination, Malaysia reported that as of November 23, 95.8% of its adult population have completed the COVID-19 vaccination. Meanwhile, 64.5% of adults in Laos are reported to have been fully vaccinated against COVID-19.</li> </ul>
26 Nov 2021	WHO	<a href="#">Classification of Omicron (B.1.1.529): SARS-CoV-2 Variant of Concern</a>	WHO Statement	<ul style="list-style-type: none"> <li>The Technical Advisory Group on SARS-CoV-2 Virus Evolution (TAG-VE) classified the new SARS-CoV-2 Omicron (B.1.1.529) variant which was first reported to WHO from South Africa last 24 November 2021 as a variant of concern (VOC).</li> <li>According to the TAG-VE that preliminary evidence suggests the variant has an increased risk of reinfection as compared to other VOCs. Furthermore, the TAG-VE reports that the variant has a large number of concerning mutations.</li> <li>The WHO requests countries to enhance surveillance and sequencing efforts to better understand circulating variants. Moreover, everyone is reminded to observe minimum public health and social measures in reducing the spread of the virus.</li> </ul>

## Evidence on Transmission

Date	Author/s	Title	Journal/ Article Type	Summary
25 Nov 2021	Mousa et al.	<a href="#">Social contact patterns and implications for infectious disease transmission: a systematic review and meta-analysis of contact surveys</a>	<i>eLife Sciences / Systematic review and meta-analysis</i>	<ul style="list-style-type: none"> <li>The study aimed to understand the patterns and contact and mixing among populations of respiratory diseases such as SARS-CoV-2 to predict the spread and assess effectiveness of control efforts with the use of individual-level data across 27 surveys.</li> <li>Mousa et al. (2021) reported that contact rates declined with age in high- and upper-middle-income settings as compared to low-income settings. The authors identified household size to be a key determinant of contact frequency with low-income settings showing highest characteristics mostly due to the presence of intergenerational households. Meanwhile, in high-income settings, a higher proportion of contacts were made in work/school.</li> </ul>

## Evidence on Drugs

Date	Author/s	Title	Journal/ Article Type	Summary
25 Nov 2021	Kow et al.	<a href="#">Clinical outcomes of sofosbuvir-based antivirals in patients with COVID-19: a systematic review and meta-analysis of randomized trials</a>	<i>Pubmed / Systematic review and meta-analysis of RCTs</i>	<ul style="list-style-type: none"> <li>The meta-analysis of 11 trials (n=2,161) aimed to investigate the effects of sofosbuvir-based direct-acting antivirals on the clinical outcomes in COVID-19 patients.</li> <li>Kow et al. (2021) reported that administration of sofosbuvir-based direct-acting antiviral agents among patients with COVID-19 showed statistically significant reduction in terms of odds of mortality [pooled OR: 0.59 (95% CI: 0.36 to 0.99)] but no statistically significant difference in the odds of development of composite endpoint of severe illness [pooled OR: 0.79 (95% CI: 0.43 to 1.44)] as compared to non-admission of sofosbuvir-based direct-acting antivirals.</li> <li>The authors concluded that Sofosbuvir-based direct-acting antiviral agents offer no protective effects against severe COVID-19 with the current dosing regimen.</li> </ul>

## Evidence on Vaccines

### Bloomberg Vaccine Tracker:

<https://www.bloomberg.com/graphics/covid-vaccine-tracker-global-distribution/>

### WHO COVID-19 Vaccine Tracker:

<https://www.who.int/publications/m/item/draft-landscape-of-covid-19-candidate-vaccines>

Date	Author/s	Title	Journal/ Article Type	Summary
22 Nov 2021	Pfizer Inc.	<a href="#">Follow-up Data from Phase 3 Trial Of Pfizer-BioNTech COVID-19 Vaccine Support Safety and High Efficacy in Adolescents 12 Through 15 Years of Age</a>	<i>Pfizer.com / Press Release</i>	<ul style="list-style-type: none"> <li>Pfizer and BioNTech announced that the long-term analysis of a Phase 3 trial data showed that their two-dose series of Pfizer-BioNTech COVID-19 vaccine was 100% effective among adolescents 12-15 years old measured for seven days to more than four months after the second dose.</li> </ul>
23 Nov 2021	Rotshild et al.	<a href="#">Comparing the clinical efficacy of COVID-19 vaccines: a systematic review and network meta-analysis</a>	<i>Nature / Systematic review and network meta-analysis</i>	<ul style="list-style-type: none"> <li>The authors performed a systematic search using leading medical databases to compare the efficacy of new COVID-19 vaccines in preventing symptomatic and severe disease among the adult population and symptomatic COVID-19 among the elderly population.</li> <li>The results showed that although each of the nine vaccines (BNT162b2, mRNA-1273, Gam-COVID-Vac, NVX-CoV23730, CoronaVac, BN02, WIV04, and Ad26.COV2.S) was tested in unique clinical trials, indirect comparison ranked BNT162b2 (Pfizer) and mRNA-1273 (Moderna) vaccines with the highest probability of efficacy against COVID-19 (P-scores 0.952 and 0.843, respectively). Meanwhile no statistically significant difference among vaccines was reported in terms of preventing symptomatic disease in the elderly.</li> <li>Furthermore, no vaccine was statistically significantly associated with a decreased risk of severe COVID-19. However, the authors noted mRNA-1273 (Moderna) and Gam-COVID-Vac (Sputnik V) to have greater protection against severe disease compared to other vaccines as indicated by their P-scores (0.899 and 0.816, respectively).</li> </ul>

## Evidence on Equipment and Devices

Date	Author/s	Title	Journal/ Article Type	Summary
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## Evidence on Medical and Surgical Procedures

Date	Author/s	Title	Journal/ Article Type	Summary
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## Evidence on Traditional Medicine

Date	Author/s	Title	Journal/ Article Type	Summary
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## Evidence on Preventive & Promotive Health

### Evidence on Screening

Date	Author/s	Title	Journal/ Article Type	Summary
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### Evidence on Personal Measures

Date	Author/s	Title	Journal/ Article Type	Summary
23 Nov 2021	Iezadi et al.	<u>Effectiveness of non-pharmaceutical public health interventions against COVID-19: A systematic review and meta-analysis</u>	<i>PLOS One / Systematic review and meta-analysis</i>	<ul style="list-style-type: none"> <li>Iezadi et al. (2021) aimed to examine the effects of Non-pharmaceutical public health interventions (NPHIs) on the COVID-19 case growth rate, death growth rate, Intensive Care Unit (ICU) admission, and reproduction number in countries where NPHIs have been implemented. NPHIs included lockdown, stay-at-home orders, social distancing, and other interventions (mask-wearing, contact tracing, and school closure)</li> <li>Results of the study showed that NPHIs have resulted in a 4.68% (95% CI: -6.94 to -2.78) decrease in daily case growth rates, 4.8% (95% CI: -8.34 to -1.40) decrease in daily death growth rates, 1.90 (95% CI: -2.23 to -1.58) decrease in the COVID-19 reproduction number, and 16.5% (95% CI: -19.68 to -13.32) decrease in COVID-19 daily ICU admission.</li> </ul>

## Evidence on Other Health Technologies

Date	Author/s	Title	Journal/ Article Type	Summary
20 Nov 2021	Axfors et al.	<u>Association between convalescent plasma treatment and mortality in COVID-19: a collaborative systematic review and meta-analysis of randomized clinical trials</u>	<i>Springer Nature / Systematic Review and Meta-Analysis of RCTs</i>	<ul style="list-style-type: none"> <li>The study aimed to assess the benefits of using convalescent plasma treatment compared to placebo against all-cause mortality in patients with COVID-19 with the use of data from all available (published, unpublished, and on-going) RCTs</li> <li>Results from 33 trials showed that convalescent plasma treatment against COVID-19 did not reduce all-cause mortality [RR: 0.97 (95% CI: 0.92 to 1.02), <math>I^2=0\%</math>]. The authors concluded that the results provide strong evidence against the use of convalescent plasma treatment in patients with COVID-19 outside RCTs.</li> </ul>