



# Covid-19 Vaccines and Public Health Efforts: A Brief Summary

**Ianni Andrea<sup>1</sup>; Orsini Massimiliano<sup>2</sup>; Virgili Roberto<sup>3</sup>; Marchetti Anna<sup>4</sup>; Piredda Michela<sup>4</sup>; De Marinis Maria Grazia<sup>5</sup>; Petitti Tommasangelo<sup>1\*</sup>**

<sup>1</sup>Research Unit in Hygiene, Statistics and Public Health (Dir. Prof. T. Petitti), Campus Bio-Medico University, Italy.

<sup>2</sup>Italian health authority and research organization for animal health and food safety, IZSve, Italy.

<sup>3</sup>Anatomic Pathologic Unit, Campus Bio-Medico University Hospital Italy.

<sup>4</sup>Research Unit in Nursing (Dir. Prof. M.G. De Marinis), Campus Bio-Medico University Italy.

<sup>5</sup>Faculty of Medicine and Surgery, Professor of Microbiology, Campus Bio-Medico University Italy.

**\*Corresponding Author(s): Tommasangelo Petitti**

Research Unit in Hygiene, Statistics and Public Health

Campus Bio-Medico University, Rome, Italy.

Email: t.petitti@unicampus.it

Received: Jul 21, 2023

Accepted: Aug 09, 2023

Published Online: Aug 16, 2023

Journal: Annals of Epidemiology and Public Health

Publisher: MedDocs Publishers LLC

Online edition: <http://meddocsonline.org/>

Copyright: © Petitti T (2023). *This Article is distributed under the terms of Creative Commons Attribution 4.0 International License*

## Mini-Review

The road to Covid-19 vaccines has been a real challenge. The genetic sequence of SARS-CoV-2 was obtained in January, 2020: Earlier vaccinal studies began on Spring 2020 and in less than 12 months (December, 2020) the European Medicines Agency (EMA) could recommend the first conditional authorisation for a Covid-19 vaccine [1]. Immediately after (6th January, 2021) a second recommendation was given, for another Covid-19 vaccine [2].

Such a development in less than 1 year from the identification of the virus is unprecedented in the history of vaccinology [3]. Shortly after the discovery of that novel and extremely pathogenic Coronavirus (SARS-CoV-2), much effort was put into developing a vaccine. More than 150 companies and academic

institutions started working on COVID-19 vaccines [4], using DNA-based and RNA-based vaccines, Non-Replicating Viral Vectors (NRVV), Replicating Viral Vectors (RVV), Inactivated Vaccines (IAcV), Live-Attenuated Vaccines (LAVs) and protein subunits, among other strategies [1]. Other than the development strategy for the seasonal influenza flu vaccine, typical vaccine development for a novel pathogen was expected to take several years of research to fully understand the viral structure-function relationship and the critical protective host immunity pathways [2]. However, COVID-19 pandemic diffusion and the subsequent worldwide increase in mortality and severe pneumonia incidence rendered the development of an effective vaccine urgently relevant. A need was widely recognized to develop a safe vaccine that would save lives, time, and money [5]: Government cooperation was globally developed, in order to



**Cite this article:** Ianni A, Orsini M, Virgili R, Marchetti A, Piredda M, et al. Covid-19 Vaccines and Public Health Efforts: A Brief Summary. *A Epidemiol Public Health*. 2023; 6(2): 1110.

give people a concrete option to receive the vaccine just when necessary [6]. Moreover, a tight collaboration between governments and pharmaceutical companies while adhering to regulations to create safe and effective vaccines played a crucial role in that way to develop an effective vaccine [7].

When analyzing vaccine development, it can be recognized that any step was completed successfully, by mixing effective main factors as [8]: Previous research about mRNA technology; human Coronavirus studies, especially those about SARS (Severe Acute Respiratory Syndrome) and MERS (Middle East Respiratory Syndrome); huge economic resources and scientific and technological efforts as well; vaccine production starting in parallel with the completion of the authorization process; results evaluation by national/international regulatory agencies by the way that those results were obtained (rolling review process).

Usually, the typical time needed to develop a vaccine using conventional methods was 15 years [9]. That type of conventional process could start with exploratory work on design and evaluation in animal models, followed by a phase involving more extensive pre-clinical experiments: After those steps, vaccine production process could be designed, towards clinical trials construction [7]. Such a typical process could end by submitting a license application to appropriate regulatory agencies, after obtaining final results applied to the appropriate endpoints; one or two more years could be needed for licensing [10,11].

The scale of population impact of the Covid-19 pandemic has driven a completely new strategy design, with the use of next-generation vaccine technology platforms through novel paradigms just to accelerate an effective and rapid vaccine development [8]. Both standardized and innovative methods were integrated in such a novel strategy, in order to successfully obtain a vaccine in a short time, with a lot of effort and money [3].

One thing that was learned from Covid-19 pandemic first phase was that previous pharmaceutical market's financial and regulatory mechanisms did not give enough incentive to support vaccine development before that catastrophic outbreak occurred [5]. To compensate, academic institutions and enterprises all around the world started early to create an enormous number of vaccine candidates [12], by using some different methods: mRNA or DNA technology, or identification of specific immunogenic epitopes and proteins [13]. Even more and more research appeared to be needed, in order to find the most effective vaccine candidate that could start reducing the rising number of Covid-19 cases [14].

Novel vaccine development paradigms were applied, involving parallel and adaptive development phases, innovative regulatory processes and scaling manufacturing capacity [15]. Besides, a strong international coordination and cooperation between public health bodies and governments, regulators and vaccine developers soon appeared as one of the key factors for a successful end with several promising late-stage vaccine candidates [2].

The vaccine was recognized as a powerful tool to tackle the pandemic: However, concern about the extraordinary low timeline of its development was one of the main causes of people hesitancy in accepting those new vaccines [3]. It must be recognized that the real starting point of the timeline for SARS-CoV-2 vaccine development and discovery was not January 2020, date

for the publication of virus genetic sequence but almost more than two decades earlier, with early studies about mRNA technology [8].

Another relevant contribution came from the pandemic trend, which involved some unusual circumstances, as compared to other public health crises in the past [16]. It can be recognized that SARS-CoV-2 genome was sequenced, assembled and released very early in the course of the pandemic. That genomic information drove biomedical response studies against this novel pathogen in several different ways [17]. In September 2020 over 180 vaccine candidates were in development, many of which employed traditional vaccine technologies [9], whereas public attention globally focused on vaccine development platforms that used new technologies (mRNA vaccines). Since then, the utilization of highly adaptable vaccine platforms (RNA) in combination with the adaptation of structural biology tools to design agents (immunogens) that could powerfully stimulate the immune system [18] lead to a rapid success.

Despite these important efforts, more than three years since the outbreak of Covid-19 it is well known that the causative SARS-CoV-2 has been continuously evolving and generating variants [19]. In some circumstances, existing vaccine-induced antibodies could not fully neutralize the variants, especially the newly isolated variants [20]. It can be highlighted that mutated strains have brought new challenges to Covid-19 preventing and controlling strategies [8], so that a request for vaccines that could provide more effective and broad-spectrum protection has appeared [7,21]. In the last more than three years, efforts involving countries from all around the world, regardless of geographical characteristics and/or political orientation, have contributed to a useful joined involvement [22] and collaboration to obtain speedy and viable Covid-19 vaccines, whose research and development has not ended yet.

## References

1. Kumar V, Kumar S, Sharma PC. Recent advances in the vaccine development for the prophylaxis of SARS Covid-19. *Int Immunopharmacol.* 2022; 111: 109175.
2. Kulkarni R, Kallepalli SP, Dharia S, Kamble G, Parvathaneni M. A Review on Strategies for COVID-19 Vaccine Development and Regulatory Requirement, *J Drug Deliv Ther.* 2023; 13: 159-164.
3. Fauci AS. The story behind COVID-19 vaccines. *Science.* 2021; 372: 109.
4. Awadasseid A, Wu Y, Tanaka Y, Zhang W. Current advances in the development of SARS-CoV-2 vaccines. *Int J Biol Sci.* 2021; 17: 8-19.
5. Al-Kassmy J, Pedersen J, Kobinger G. Vaccine Candidates against Coronavirus Infections. Where does COVID-19 stand? *Viruses.* 2020; 12: 861.
6. Tregoning JS, Flight KE, Higham SL, Wang Z, Pierce BF. Progress of the COVID-19 vaccine effort: viruses, vaccines and variants versus efficacy, effectiveness and escape. *Nat Rev Immunol.* 2021; 21: 626-636.
7. Zhao F, Zai X, Zhang Z, Xu J, Chen W. Challenges and developments in universal vaccine design against SARS-CoV-2 variants. *NPJ Vaccines* 2022; 7: 167.
8. Szabó GT, Mahiny AJ, Vlatkovic I. COVID-19 mRNA vaccines: Platforms and current developments. *Mol Ther.* 2022; 30: 1850-1868.

9. Rando HM, Lordan R, Lee AJ, Naik A, Wellhausen N, et al. COVID-19 Review Consortium; Gitter A, Greene CS. Application of traditional vaccine development strategies to SARS-CoV-2. *ArXiv*. 2023; e0092722.
10. Kayser V, Ramzan I. Vaccines and vaccination: history and emerging issues. *Hum Vaccin Immunother*. 2021; 17: 5255-5268.
11. Iserson K. SARS-CoV-2 (COVID-19) vaccine development and production: An ethical way forward. *Cambridge Quarterly Healthcare Ethics*. 2021; 30: 59-68.
12. Barrett ADT, Titball RW, MacAry PA, Rupp RE, von Messling V, et al. The rapid progress in COVID vaccine development and implementation. *NPJ Vaccines*. 2022; 7: 20.
13. Dong Y, Dai T, Wei Y, Zhang L, Zheng M, et al. A systematic review of SARS-CoV-2 vaccine candidates. *Signal Transduct Target Ther*. 2020; 5: 237.
14. Röltgen K, Nielsen SCA, Silva O, Younes SF, Zaslavsky M, et al. Immune imprinting, breadth of variant recognition, and germinal center response in human SARS-CoV-2 infection and vaccination. *Cell*. 2022; 185: 1025-1040.e14.
15. Zhao J, Zhao S, Ou J, Zhang J, Lan W, et al. COVID-19: Coronavirus vaccine development updates. *Front Immunol*. 2020; 11: 602256.
16. Simões RSQ, Rodríguez-Lázaro D. Classical and next-generation vaccine platforms to SARS-CoV-2: biotechnological strategies and genomic variants. *Int J Environ Res Public Health*. 2022; 19: 2392.
17. Bellamkonda N, Lambe UP, Sawant S, Nandi SS, Chakraborty C, et al. Immune response to SARS-CoV-2 vaccines. *Biomedicines*. 2022; 10: 1464.
18. Muhar BK, Nehira J, Malhotra A, Kotchoni SO. The race for COVID-19 vaccines: The various types and their Strengths and Weaknesses. *J Pharm Pract*. 2022; 18: 8971900221097248.
19. Elmancy L, Alkhatib H, Daou A. SARS-CoV-2: An analysis of the vaccine candidates tested in combatting and eliminating the COVID-19 virus. *Vaccines*. 2022; 10: 2086.
20. Singh H, Dahiya N, Yadav M, Sehrawat N. Emergence of SARS-CoV-2 new variants and their clinical significance. *Can J Infect Dis Med Microbiol*. 2022; 2022: 7336309.
21. Zhang J, Xia Y, Liu X, Liu G. Advanced vaccine design strategies against SARS-CoV-2 and emerging variants. *Bioengineering*. 2023; 10: 148.
22. Chakraborty C, Bhattacharya M, Dhama K. SARS-CoV-2 Vaccines, vaccine development technologies, and significant efforts in vaccine development during the pandemic: the lessons learned might help to fight against the next pandemic. *Vaccines*. 2023; 11: 682.