

Meeting of the EU scientific advice platform on COVID-19

Meeting Report

Friday 05/02/2021 at 17:00

1. COVID-19 Epidemiological update

ECDC provided an update on the epidemiological situation across the EU, which remains extremely serious.

Overall, we observe a slow decreasing trend, although a few countries still observe increases. Absolute values of the indicators remain anyway high in all countries, including those with stable or decreasing trends in these indicators, suggesting that transmission is still widespread. Conditions are not met to lift measures in place.

The emergence of variants is a major concern. ECDC updated its [sequencing guidance](#) that sets target levels for sequencing that are currently not met by many Member States. The B.1.1.7 variant seems to increase to various degrees across EU Member States. Other variants do not seem as widely spread so far, although the lack of systematic and large scale sequencing may not provide a complete picture of the situation. ECDC is setting up a contract to support Member States with sequencing capacity, covering shipping and analytics. The contract should be in place next week.

ECDC [vaccine tracker](#) is now live. ECDC and the Commission encouraged regular reporting by national authorities (at least twice a week) to ensure the timeliness and quality of the online data.

Following the ECDC presentation, Member States' experts shared observations about the situation in their country. The exchanged views on topics such as:

- The **presence of different variants** of the SARS-CoV-2 virus in circulation observed in their country, depicting a very diverse picture across the EU, but with an overall increasing trend for the B.1.1.7 variant. Sequencing rates are also variable across countries. The fact that the number of new infections in the United Kingdom is now decreasing significantly shortly after the introduction of non-pharmaceutical interventions was seen as an indication that 'regular' public health measures are effective against variants. Experts agreed that, considering that the variants are likely to take over the wild type virus, it would be useful to learn more about each variant and their properties, including how they respond to different types of interventions. ECDC will follow up by continuing to monitor the presence of variants as well as the effectiveness of different measures against different strains.
- **Public health measures** in place: There also, the picture at European level is diverse, with some Member States progressively lifting some measures introduced last year while others introduce new ones. All experts shared concerns on the importance not

to lift measures too quickly, and to monitor closely the consequences of lifting at each step.

- **Outbreaks in specific settings:** experts exchanged on specific situations such as the occurrence of nosocomial outbreaks as well as ways to detect and control them early.
- **Vaccination:** experts reported on progress with vaccination campaigns in their country. Several countries indicated that they are reaching a high vaccination coverage of elderly patients in long-term care and individuals in residential homes. Experts also touched upon solutions used to monitor the entire vaccine supply chain down to vaccination coverage.

2. COVID-19 vaccination – State of play

DG SANTE updated members of the platform on the Commission's work on vaccines. The Director General reported on the state of play of contracts with and deliveries from different manufacturers who signed an Advance Purchase Agreement with the Commission and the Member States. The portfolio of vaccines composed by the Commission covers the main technology platforms and secures access to vaccine doses for all Europeans and beyond.

EMA updated on the review of the vaccine developed by AstraZeneca, which was completed on 29/1 and recommended the use of this vaccine in adults over 18 years of age. The recommended dosage interval is 4 – 12 weeks. A trial currently conducted in the United States enrolling 30,000 participants including 25% aged 65 and above, should provide additional data in March/April on the vaccine's efficacy in older age groups. The AstraZeneca vaccine is now authorised and EMA is following up on post marketing obligations.

EMA is working to identify the studies needed to determine the likely impact of variants jointly with scientists and regulators, in order to have a common approach to the type of data needed to assess efficacy against variant strains.

EMA informed about the launch of a 'Rolling review' process for the Novavax vaccine. For the vaccine by Johnson&Johnson, already under rolling review, the submission of an application for a conditional marketing authorisation should come in the next couple of weeks. EMA is also in contact with BioNTech to ensure that additional production sites can be authorised to support upscaling of manufacturing capacity. EMA is in contact with many other manufacturers at different stages prior to [rolling reviews](#).

Following these presentations, experts discussed a range of issues such as dose intervals or the different age ranges recommended by different Member States for different vaccines. They also discussed the attribution of different vaccines to different population groups and the importance of communicating clearly on such attributions. Platform members also briefly discussed recent [studies](#) (not peer reviewed) that would indicate that people, especially younger ones, who have had SARS-CoV-2 infection might only need one dose of mRNA vaccine. Even if confirmed, the logistics of implementing such an approach would prove extremely complex and burdensome.

3. AOB

The next meeting is scheduled on 18 February at 17:00.

Participation

Platform participants:

1. Professor Steven VAN GUCHT (Belgium)
2. Dr. Angel KUNCHEV (Bulgaria)
3. Ivan KUROLT (Croatia)
4. Dr Zoe PANA (Cyprus)
5. Marika MADAROVA (Czechia)
6. Dr Helene Bilsted PROBST (Denmark)
7. Professor Irja LUTSAR (Estonia)
8. Professor Arnaud FONTANET (France)
9. Mr Miklós SZOCSKA (Hungary)
10. Desmond HICKEY (Ireland)
11. Professor Silvio BRUSAFERRO (Italy)
12. Professor Uga DUMPIS (Latvia)
13. Professor Edita SUZIEDELIENE (Lithuania)
14. Dr Charles MALLIA AZZOPARDI (Malta)
15. Dr Aura TIMEN (The Netherlands)
16. Professor Andrzej HORBAN (Poland)
17. Professor Henrique DE BARROS (Portugal)
18. Mrs Diana Loreta PAUN (Romania)
19. Professor Pavol JARCUSKA (Slovakia)
20. Fernando SIMON (Spain)
21. Dr Anders TEGNELL (Sweden)

European Commission:

- Commissioner Stella KYRIAKIDES (Chair)
- Prof. Peter PIOT, Special Advisor to the President of the European Commission
- Ms Julia SPENCER, Policy Advisor to Prof. Piot
- Gionrgos ROSSIDES, Head of Cabinet of Commissioner Kyriakides
- Kurt VANDENBERGHE, Member of Cabinet of President von der Leyen
- Roberto REIG RODRIGO, Member of Cabinet of Commissioner Kyriakides
- Peter WAGNER, Secretariat General
- Nicolas PRADALIE, Secretariat General
- Jeremy BRAY, Secretariat General
- Deputy Director General Pierre DELSAUX, DG SANTE
- Thomas VAN CANGH, Policy Assistant to Director General Gallina
- Sigrid WEILAND, DG RTD

ECDC

- Dr Andrea AMMON, Director

EMA

- Ms Emer COOKE, Executive Director
- Marco CAVALLERI, Head of the office Anti-infectives and Vaccines