World Health Organization

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In reply please refer to:

Your reference:

Commissione Medico Scientifica
Indipendente (CMSi)
Italie

30 June 2023

Dear Professor Alberto Donzelli and CMSi members,

Request for an open discussion about the questionable perseverance in advocating repeated anti-COVID-19 vaccinations

Thank you for your letter expressing your concerns about limited effectiveness of COVID-19 vaccination and the safety profile of COVID-19 vaccines.

The World Health Organization (WHO) reviews on a continuous basis the effectiveness and safety of the COVID-19 vaccines that have received Emergency use status by WHO. The link here provides a connection to our living systematic review and analysis of safety and effectiveness: https://view-hub.org/vaccine/covid/effectiveness-studies. At this stage 482 effectiveness and 375 safety studies have been analyzed.

This information is reviewed by WHO's Strategic Advisory Group of Experts on Immunization (SAGE) and its COVID-19 Working Group to develop and update vaccination policies. WHO applies the highest standards of evidence-based medicine in the development of its policies, and scrutinizes closely for any conflict of interest of its advising experts. All relevant information is publicly available.

Reading your concern about diminished vaccine effectiveness, please refer to WHO's updated Roadmap for prioritizing uses of COVID-19 vaccines (30 March 2023). The emphasis and prioritization of vaccination as laid out in this document has not changed since the termination of the PHEIC on 5 May 2023, which was declared on 30 January 2020. SARS-CoV2 continues to kill, and the Roadmap has re-emphasized its vaccination recommendations to prevent severe disease and death, which remains our principal concern. We acknowledge that the current vaccines show modest and short-term effectiveness against infection from the currently circulating SARS COV-2 strains.

In more detail, the updated Roadmap is focusing on the adequate vaccination of populations at highest risk, which are first and foremost older adults, people with certain co-morbidities, immunocompromised individuals, but also pregnant women. The spacing of repeat booster vaccination has been extended for most of these groups in light of the combined vaccine and infection induced immunity status (so called hybrid immunity). In population groups at lower risk of severe disease, vaccination recommendations have been further relaxed.

The continued monitoring of the virus evolution and the performance of vaccines has led WHO to recently issue a recommendation on the viral strain composition of future vaccines (Statement by the WHO Technical Advisory Group on COVID-19 Vaccine Composition). We recognize that effectiveness of authorized vaccines against infection is diminished against the currently circulating Omicron sub strain (XBB.1 sub lineages), and new formulations based on XBB.1 virus may lead to better adapted immune responses, in particular against infection.

Our expert group has also investigated the possible negative effect of so-called immunological imprinting of the current vaccines, which is claimed by one of the papers you quote. While such effects can be observed in the laboratory, the clinical relevance has not been established, and methodological explanations have been found for the observations on negative vaccine effectiveness that you quote. The recommendation that future vaccines should be based on an updated viral strain acknowledges the considerations.

We would like to state again that the current vaccines continue to be highly effective against the prevention of severe disease and death, even for the currently circulating virus strains. There are many countries that still have insufficient vaccination coverage in their populations at highest risk of disease.

The virus continuous to evolve as does the population immunity. We will continue to monitor the virological, epidemiological and immunological situation and will adapt our recommendations as needed. We are aware of fatigue in large parts of the population about COVID vaccination. However, the disease will stay with us and we need to protect the most vulnerable populations.

Yours sincerely,

Dr Katherine O'Brien
Director
Immunization, Vaccines and Biologicals