



17TH WORLD CONGRESS ON PUBLIC HEALTH 2023 May 2-6 ROME ITALY

ABSTRACT BOOK



Abstract book by:





ORGANISING COMMITTEE

CMC

The three organising partners of the 17th World Congress on Public Health established a Congress Management Committee (CMC) consisting of representatives of WFPHA, SItI, ASPHER and the PCO. The CMC has the full managerial and financial management responsibility for the Congress.

Chair: Walter Ricciardi

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ICC

The International Congress Council (ICC) consisted of the Congress Management Committee and international public health experts representing various regions of the WFPHA, international health organisations, European health non-governmental organisations and Italian universities and institutes. The ICC in particular develops, in consultation with the CMC, the scientific programme including subthemes and plenary programme of the WCPH and identify speakers/panellists/moderators of the plenary sessions.

Chair: Walter Ricciardi

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ISC

The International Scientific Committee (ISC) consists of experienced public health experts from around the world nominated by WFPHA, SItI and Aspher. It mainly advises the ICC on scientific matters of the conference and contributes to the scientific evaluation of the conference. We would like to thank the ISC for their support.

Aim & Scope

Population Medicine is an open-access double-blind peer-reviewed scientific journal that encompasses all aspects of population, preventive, and public health research including health care systems and health care delivery. Its broader goal is to address major and diverse health issues, to provide evidence-based information to professionals at all levels of the health care system, and to inform policymakers who are responsible for the formation of health policies that can lead to evidence-based actions.

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Strategic Development Editor

Constantine Vardavas
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of the vaccination campaign (i.e., from the first up to the third booster dose) and individual trust in scientific and political institutions in each period of the vaccination campaign. Secondly, we implemented different message-framed vaccine safety and efficacy treatments to evaluate how they influence individual intention to uptake the new dose.

Overall, theory-driven structural equation analysis will reveal what factors are significant predictors of the willingness to vaccinate in a balanced sample of 500 Italian participants.

Results: We show a distinct evolution of the perceived efficacy and safety during the vaccine campaign and the importance of message targeting this latter component to increase vaccination intention. Moreover, we investigate how trust in political and scientific institutions changes during a pandemic according to vaccine beliefs. Conclusion: Vaccination campaign could benefit from messages based on vaccination safety more than efficacy perception and needs to consider a dynamic evolution of these components during multiple vaccination stages and the role of trust in scientific institutions more than governmental ones.

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Lessons learnt from the vaccination strategy against COVID-19 in Spain

Ana Fernandez-Dueñas¹, Carmen Olmedo¹, Aurora Limia¹, Laura Sanchez-Cambronero¹, Sonia Fernandez-Conde¹, Elena Cantero², Rocio Villa-Pizarro³

¹Immunization Programme Area, General Directorate of Public Health, Ministry of Health, Spain, ²Technical Assistance TRAGSATEC to the Ministry of Health of Spain, ³Servicio de Medicina Preventiva y Salud Pública - Hospital Clínico Universitario de Valladolid, Spain

Background and objective: Vaccination policy in Spain is characterised by the decentralisation of national health system. Regional departments of health are the vaccination programmes managers and the Ministry of health, coordinates and oversees. However, a single vaccination strategy against COVID-19 was developed.

The objective is to describe the lessons learned from this process and the strategy. Methods: Structure, work and decision-making process of the working groups (WG) of the strategy were assessed: the multidisciplinary technical WG for the development of the strategy (which included the national immunization technical advisory group and experts from bioethics, sociology, pharmacovigilance, etc.), WGS on mathematical models, vaccine effectiveness and on the development of the COVID-19 registry. Additionally, results of a survey to the members of the technical WG.

Results: Recommendations from the technical WGs were not always implemented at political level.

Given the uncertainty of the pandemic, the strategy was continuously revised. Having a multidisciplinary team of independent experts and other useful tools for decision-making such as mathematical models, effectiveness studies was essential.

COVID-19 vaccination registry is the first single national vaccination registry developed in Spain. It has boosted regional information systems and enabled a real-time monitoring of the vaccination strategy implementation. Vaccination data from all residents was brought together in a homogeneous and standardized way. A lack of technical information suitable to the needs of the population was identified.

Conclusion: Having multidisciplinary WGs are necessary along with their independence in the decision-making process.

Mathematical models and effectiveness studies are valuable tools to revise and improve vaccination policies.

High quality information on vaccination implementation programmes is essential to monitor them. Strengthening information systems in public health is critical, notably their flexibility and interoperability.

It is necessary to incorporate providing technical communication to the population as an essential element in vaccination strategies.

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Genomic surveillance of sars-cov-2 in tunisia : January 2021-december 2022

Mouna Safer¹, Wissal Kalai¹, Arwa Neffati¹, Aicha Hchaichi¹, Sonia Dhaouadi¹, Hajer Letaief¹, Fatma Youssef¹, Emna Mziou², Souha Bougatef², Leila Bouabid², Sondes Derouiche², Nissaf Alaya², Ilhem Boutiba¹, Henda Triki³, Hela Karray⁴, Tunisia MASTOUR⁵

¹Observatory of New and Emerging Diseases Tunis Tunisia, ²Charles Nicolle Hospital, Tunis Tunisia, ³Pasteur Institute, Tunis Tunisia, ⁴Habib Bourguiba Hospital Sfax TUNISIA, ⁵Fattouma Bourguiba Hospital Monastir Tunisia

Background and objective: Since emergent Variant Of Concern(VOC) has threatened public health and has impacted vaccination effectiveness, genomic surveillance of these variants was becoming a crucial approach allowing to monitor the evolution of SARS-CoV-2 variants and to guide COVID-19 pandemic response.

The objective of this study was to describe the genomic epidemiology from January 2021 to December 2022.

Methods: Sequences were performed on nasopharyngeal specimens With CT less than 25 tested in all Tunisian laboratories of clinical virology. The sample selection strategy was conducted in accordance with the Tunisian sequencing strategy of SARS-CoV-2 based on two approaches : First,on a weekly randomly stratified sample by gouvernorate and second on a targeted sampling focusing on specific subsets: imported cases, vaccinated cases, reinfections, severe cases... SARS-CoV-2 genome sequencing methods applied during this study were: whole-genome sequencing(wgs), partial s gene sequencing and variant-specific real-time rt-pcr tests. clinical virology laboratories involved were Charles nicolle hospital, tunis Pasteur institute Habib bourguiba hospital sfax and fatouma bourguiba hospital, monastir.

Results: During this study a total of 5999 nasopharyngeal samples have been sent to laboratories of clinical virology. Using the three sequencing methods a total of 4937(82 ;3%) lineages were assigned and 4105(83.15%) were classified as VOC : 1442 Omicron(35.2%) ;1418 Delta(34,6%),1230 Alpha(30%) ;7 Beta(0.2%) ; 1 Alpha and 1 coinfection Delta omicron.

Periods of predominance of VOC were identified as following : Alpha variant was predominant from ISO week3/2021 to ISO week 25/2021 ; Delta variant from ISO week 26/2021 to ISO week 50/2021 and Omicron from ISO week 1/2022.

Conclusion: This study was the first Tunisian national analysis of main lineages of SARS-CoV-2 circulating during two years . This Epidemiological genomic surveillance of SARS CoV 2 have contributed to implement preventive measures in a timely manner.

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Ethical justifications for the need for pandemic preparedness from sars to SARS-CoV-2: a scoping review

Rocio Villa-Pizarro¹, Miguel Ángel Royo Bordonada², Fernando José García López², Marife Muñoz Moreno⁴, María Pilar Arnáiz Ibañez⁵, Natalia Madueño Moreno⁶

¹Servicio de Medicina Preventiva y Salud Pública - Hospital Clínico Universitario de Valladolid Spain, ²Escuela Nacional de Sanidad (Instituto de Salud Carlos III), ³Centro Nacional de Epidemiología, Instituto de Salud Carlos III Spain, ⁴Unidad de Investigación Biomédica (ibC), Hospital Clínico Universitario de Valladolid, Spain, ⁵Hospital Clínico Universitario Natalia, ⁶Instituto de Psiquiatría y Salud Mental, Hospital Gregorio Marañón Spain

Background and objective: The 21st century has seen numerous epidemics with pandemic potential, and during these years literature has been published urging competent authorities to prepare regions for a future pandemic. However, the crisis caused by SARS-CoV-2 has been devastating and marked by improvisation. We ask what part of this literature clarified the ethical justifications for choosing to prepare and what arguments were present in it.

The objective of this overview review is to describe the ethical justifications for pandemic preparedness proposed in the period between 2004 and 2020.

Methods: Any type of literature published between 2004 and 2019 in whose title or abstract the ethical justification for pandemic preparedness is described as the main topic was included. The sources of information searched were PubMed and Cochrane. The literature available in full text was examined for eligibility. Finally, data (curation) was extracted.

Results: From an initial identification of 120 articles, 13 were finally included for analysis. That is, although some texts deal with the ethical obligation to be prepared for a pandemic, these are scarce and rarely develop this ethical justification beyond how this preparation should be fulfilled. Ethical guidance is even presented in an instrumental manner (as a way to improve citizen collaboration), without going into the discernment (principles, assumptions...) that underpins these moral proposals.

Conclusion: The disparity between the insistences of the last 15 years before the SARS-CoV-2 pandemic and the response capacity and preparedness that were available at the beginning of the crisis is an area for improvement in risk communication. Moreover further reflection on the ethical justifications could help authorities and society as a whole to focus their efforts, during this inter-pandemic period, on preparing for future pandemics. A need to involve the population in preparedness and to make decisions in a transparent manner was shown.

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