

## Salvagene SARS-CoV-2 Task Force: Prospects of an effective and sustainable medication or vaccine remain gloomy

**KEYNOTE**

Dear Premium Customers,

**The prospects of an effective and sustainable medication or vaccine to combat SARS-CoV-2 becoming available any time soon remain gloomy.**

“No light at the end of the tunnel” perhaps best sums up the current mood among the Salvagene SARS-COV-2 Task Force team.

At the moment, we do not see any breakthrough on the vaccine front. On all four technological platforms which we have already discussed separately as well as in the RNA and vector-based technologies, further vaccine projects, including the “killed” variety, have been put on hold due to inconclusive data and uncertain side-effects. As regards inoculation, we do not see any serious candidates capable of offering an effective and sustainable solution any time this year. Unfortunately, some countries are not being totally transparent about their vaccine projects. China in particular might just land a lucky punch, but for the wider scientific community, the country is like the proverbial “black box”. There are currently four projects underway in China

that are into Phase 3 and, using the information we have, we estimate that more than one million people have already been inoculated with the combined vaccine output from all of these Chinese companies since September. They will have been persons in the state employ, such as members of the armed forces. If the Chinese authorities carry on at this rate, we estimate that between two and three million inoculations will have been performed in China by the end of November. Leading the way is Sinopharm, a project we have been closely monitoring, with CanSino not far behind. Whether a normal licensing procedure will then take place and when and how these vaccines will become available is completely open.

As with the vaccine situation, there is no sign of a breakthrough in complementary medications for protection against the SARS-CoV-2 virus either. The most promising projects are those in the field of antibody isolation. We have already looked at various of these. There are certainly some new developments to be expected here, but in the short term, the projects we are currently monitoring do not appear to be yielding any results.

The same applies to what we consider to be the best defense against a SARS-CoV-2 infection, namely an interferon-based solution, as we have already reported several times recently. And in this area, too, no real breakthrough is likely in the foreseeable future due to the complexity of the interferon system. In the treatment of Covid-19 disease that follows infection with SARS-CoV-2, some emergency approvals have already been issued. There are many new approaches in this area, but even here the outlook for an imminent solution is negative. In fact, the opposite is the case. The products already approved have underperformed in a comprehensive WHO study published in the Lancet a few days ago. Remdesivir in particular has disappointed: it did not cause any side-effects, but the efficacy was deeply unsatisfactory. Dexamethasone was successful, but as is typical for cortisone treatments, it was only possible to use it in the later phase of the disease. Here, too, we are seeing setbacks in the hopes for instant success.

We are working on the assumption that the overall mortality rate – i.e. number of fatalities in relation to number of infections – will continue to fall. There are two reasons for this: firstly, due to better guidelines, especially in the USA, where the focus of Covid-19 treatments is now on thromboses and embolisms (as we have long recommended); and secondly because of minor mutations that lead to the disease taking a less complex course. However, considerably more infections are to be expected, and we assume that overall mortality will rise again and that healthcare systems in many industrialized countries will reach breaking point. Against this background, our recommendations remain valid, namely that people should protect themselves against infection, particularly because the long-term damage, even in the case of asymptomatic infections, is much greater than we had previously realized, but also because rehabilitation is proving to be a much longer process than currently calculated. This will only become apparent when a few years have already passed. If you compare the lungs of a Covid-19 sufferer with those of a long-term heavy smoker, then you will know how severe an attack of SARS-CoV-2 can be. The second thing you can do is to optimize your health in order to minimize the harm caused by any future infection.

This is the nature of our work here at Salvagene. We will continue to report on the steps we are taking in order to further develop our Covid-19 Immunization Program, especially with regard to the functionality of the body's own defense mechanisms such as the interferon system.

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