

COVID-19

Virtual Press conference

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Speaker key:

CL	Christian Lindmeier
TAG	Dr Tedros Adhanom Ghebreyesus
TR	Translator
SU	Dr Siro Ugarte
MA	Marie
SA	Dr Sylvain Aldighieri
JA	Jamil
AN	Antonio
SM	Smriti
MS	Dr Mariângela Simão
LA	Latika
LU	Laurent
MK	Dr Maria Van Kerkhove

00:00:00

CL Hello and good day to wherever you're listening to us today. It is Friday 30th April 2021. My name is Christian Lindmeier and I'm welcoming you to today's global COVID-19 press conference with a special focus on Brazil and the Americas region. Therefore we have special guests to discuss the impact of COVID-19 in Brazil and the Americas and the actions being taken to respond.

We have the Honourable Dr Marcelo Queiroga, the Minister of Health of Brazil. We have Dr Siro Ugarte, Director for the Health Emergencies at the Pan-American Health Organization and last but not least Dr Soccoro Gross, the WHO PAHO Representative in Brazil. Welcome.

Simultaneous interpretation is provided in the six official UN languages, Arabic, Chinese, French, English, Spanish and Russian and of course today Portuguese and also Hindi. Let me introduce the participants.

Dr Tedros Adhanom Ghebreyesus, WHO Director-General, Dr Maria Van Kerkhove, Technical Lead on COVID-19 and Dr Mariângela Simão, Assistant Director-General, Access to Medicines and Health products; those three are in the room.

We have Dr Mike Ryan, Executive Director, Health Emergencies Programme online and other colleagues as well. We will introduce them as necessary. Let me now hand over to the Director-General for the opening remarks. Dr Tedros, the floor is yours.

00:01:48

TAG Thank you, Christian. Good morning, good afternoon and good evening. In the last couple of weeks much of the world's attention has focused on India and though that country remains in the grip of a severe crisis we're encouraged by the demonstration of international support for India.

At the same time we much remember that many other countries all over the world are still experiencing intense transmission. As you know, Brazil is one of the countries that has been hit hardest by the COVID-19 pandemic. Since the beginning of November Brazil has experienced an acute crisis with increasing cases, hospitalisations and deaths including among younger people.

During April intensive care units have been at almost full capacity across the country. In total Brazil has reported more than 14 million cases of COVID-19 and more than 400,000 deaths. Cases have now declined for more than four weeks in a row and hospitalisations and deaths are also declining.

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This is good news and we hope this trend continues but the pandemic has taught us that no country can ever let down its guard. Brazil has a long and proud history in public health with three decades of investments in strengthening primary healthcare and progress towards universal health coverage.

But the pandemic has hit Brazil's health system hard and threatens to unravel those gains. PAHO and WHO are working closely with the Government of Brazil to respond to urgent needs for medicines and other supplies such as diagnostics, oxygen and masks and we have helped to source tens of millions of dollars' worth of medicines which the Government can now procure.

Other partners including Spain, Portugal and private companies have also provided donations of critical supplies. All countries will have lessons to learn from this pandemic but there are areas where Brazil has done well in early detection, tele-monitoring for patients and the roll-out of vaccines with priority given to health workers, indigenous communities and older people.

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Brazil is scaling up the domestic production of COVID-19 vaccines and has joined the World Trade Organization initiative to increase vaccine production through technology transfer. WHO and PAHO stand in solidarity with Brazil.

Last week I had the honour of meeting virtually with Brazil's Minister of Foreign Affairs, His Excellency Carlos Alberto França and I have also had the honour of speaking with Brazil's new Minister of Health, His Excellency Marcelo Queiroga.

It's now my great honour to welcome Dr Queiroga. Minister, thank you for joining us today, obrigado, and you have the floor.

TR Director-General of the WHO, Dr Tedros Adhanom, Director of the Pan-American Health Organization, Dr Clarissa Etienne, Representative of the Pan-American Health Organization in Brazil, Dr Soccoro Gross, ladies and gentlemen, I would like to extend my greetings from the President of the Republic, Jair Messias Bolsonaro.

This is a privilege for me to speak for the first time to the other member states of the WHO and to the journalists from the international media who are taking part in this press conference.

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I welcome the words stated by the Director-General of the WHO and I extend my greetings particularly to the Brazilians, Dr Mariângela Simão, WHO Director-General for Access to Medicines and Health Products, and Dr Jarbas Barbosa, Deputy Director of PAHO.

I would like to take this opportunity to present the main results from the first month at the head of the Health Ministry in Brazil but before moving on to this part of my presentation I would also like to express my sincere condolences to all the victims of COVID-19 in Brazil and in the world. I would also like to express my solidarity to all the family members for their loss.

I was called upon by the President of the Republic to prioritise actions to tackle the pandemic in Brazil. In order for us to do this our administration has been working on two fronts; first I have committed myself to ensuring there's an acceleration in vaccination across the country and this has been done by increasing the access to doses of vaccines and ensuring that there is better efficacy in distribution of the vaccines.

Second, I have also tried to provide guidance to the Brazilian population, guidance that must be clear and objective on the non-pharmacological measures that need to be followed in the fight against COVID-19 such as using masks, hand hygiene and respecting social distancing.

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As such I have tried to reconcile an adoption of healthcare measures with the need to keep people in work and ensure that they have an income. For all

these actions we have had the fundamental health system, the SUS [?], which is one of the biggest and most complex healthcare systems in the world.

As you know, Brazil is the only country with more than 100 million inhabitants which guarantees full, universal and free healthcare. The Brazilian federal constitution states that health is the right of everybody and that they must ensure that this is protected.

The management of actions of healthcare services in the country is done in a participatory and tripartite manner; in other words between the union, states and municipalities. For this to work we have different bodies such as the National Committee on the Healthcare Secretariats, the CONAS, the National Council for Healthcare Municipalities and the Intermanagerial Tripartite Commission.

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I will be meeting with the CIT later after this meeting. Since the beginning of the pandemic the Federal Government has tried to strengthen this very broad healthcare system so that we can rise to the challenges that we have seen because of this international health emergency.

The Ministry of Health has ensured that there have been 19,000 ICU beds made available at the cost of more than two billion reais. We have also delivered 340,000 pieces of PPE and we have also distributed more than 57 million syringes and needles. This has been done thanks to the President of the Republic, Jair Bolsonaro.

I would also like to say that in addition to the measures that have been adopted the Brazilian Government has also promoted different support policies in the economic sectors so that we can ensure that our population still has work and income.

We have also implemented the largest cash transfers programme in the context of the pandemic with an investment of around \$50 billion and which benefited around 67 million people. This had an indirect impact on 124 million Brazilians.

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Nonetheless we understand that in order to contain the health crisis and for us to ensure full economic and social recovery we must ensure that our vaccination plan against COVID-19 is a success. Therefore we have a diversified strategy which includes partnerships for technology transfer, bilateral contracts with multilateral pharmaceutical companies as well as participating in the innovative COVAX facility mechanism which means that we have more than 500 million doses that have been contracted.

We are very proud to say that we are working with the Villa Cruz Institute and the Butanta Institute, which are age-old public health institutions in Brazil. Both of these institutions are producing all vaccines for the Brazilians to fight against COVID-19.

Therefore we also say that it is essential for us to co-operate with China so that we can produce and export to Brazil everything that we need. We also have bilateral contracts with Jansen and Pfizer and we received the first one million doses yesterday in Sao Paulo.

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This is a result of the responsible and diligent actions of our administrators. We will have all four vaccines against COVID-19 that have already been authorised by the regulatory authority in Brazil used on the territory.

We have also joined the COVAX facility with an initial payment of around \$150 million and we have been working with the general co-ordination programme for national immunisation programmes. This means that we will be able to obtain vaccines to vaccinate around 10% of the population.

The Ministry of Health has created the National Plan to operationalise the fight against COVID-19 and for vaccination and this has been based on the recommendations of the Advisory Group of Specialists in Immunisation, SAGE, the strategic advisory group of experts of the World Health Organization.

The Ministry of Health will offer freely vaccinations against COVID-19 to the entire population and we will give priority to those most vulnerable and to healthcare workers. We have a vast experience because of our national immunisation programme. This is the largest vaccination programme in the world that is a public programme and we have 37,000 centres where we can vaccinate across the country.

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Currently we are distributing more than 60 million doses of vaccines and we have already applied more than 41 million doses. In April we managed to apply more than 1.7 million in one day alone, which was a record. Nonetheless we still have a long way to go because we need to be able to vaccinate 2.4 million people every day.

Despite the difficulties that we are seeing regarding the availability of vaccines the Ministry of Health is following the orders of the President, Jair Bolsonaro, and we are working tirelessly with other ministries, particularly with the Ministry of Foreign Affairs and working with representatives of international organisations as well as working with authorities from other countries so that we can underline the importance of Brazil receiving the doses that it should be receiving through the COVAX facility.

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In the context of the pandemic we need to ensure equitable access to the COVID-19 vaccine. In line with this we would like to call on those countries that have extra doses of vaccines to share them with Brazil as soon as possible so that we can also broaden our vaccination campaign and so that we can contain the pandemic at this critical time and avoid the proliferation of new variants.

In addition to the main axes that I have just underlined in terms of pharmacological measures we are also tirelessly working to provide emergency support to all the Federation so that we can ensure that there is access to medicinal oxygen and access to necessary medicines to intubation which include sedatives, muscle blockers and anaesthetics, which are in high demand in the market.

In line with this I would like to thank PAHO for their assistance, particularly Dr Soccoro Gross, representative of the organisation in Brazil, who is here with us. I would also like to thank the Brazilian private sector for showing solidarity as well as thanking the international community and partner countries that have mobilised to facilitate the access that Brazil has to not only oxygen and medication for intubation but also access to ventilators and PPE.

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I would also like to say that Brazil can also show co-operation and assist countries in their fight against the pandemic because we have already done this in the provision of medicines for the fight against HIV/AIDS as we did in the past.

We have a huge challenge before us and our Government is now investing in the economic and industrial healthcare facility which will be built in Santa Cruz and will cost 3.4 billion reals. We spoke with Dr Tedros on 3rd April and we are planning to ensure technical cooperation.

We would like to not only meet the needs of Brazil but we would also like to meet regional needs for vaccines and biopharmacological projects.

We are looking at the discussions that are currently underway in the WTO on protecting intellectual property. We defend that there should be access to vaccines and that these should be made available immediately because they should be considered a public good.

Brazil understand that the TRIPS agreement does have a number of flexibilities regarding innovation which are included in the Doha declaration on TRIPS and public health and this includes the principle of what is in the public interest to fight health crises.

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With other countries we would like to say that manufacturers should ensure that agreements for licensing and technology transfer are facilitated as well as the facilitation of expertise and know-how.

We need to identify any commercial barrier to producing and distributing the products including anything linked to intellectual property. This proposal that we have made in the WHO aims to reach a consensus and this has always been our attitude, not only in the WHO but in the multilateral context.

We are working with the Ministry of Foreign Affairs and we are trying to actively participate in discussions on global health so that we can better contribute to rising to the current challenges.

We will continue to be committed to the discussions in this organisation so that we can be better prepared to respond to pandemics. We also support the One Health approach. Ladies and gentlemen, I would like to also say a few words regarding the protection of the indigenous populations in the context of the pandemic.

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In Brazil we have indigenous peoples that have a specific healthcare system which meets their geographical, social and cultural needs. Through the special secretariat on Indigenous Health, the SESI secretariat has since January 2020 provided technical documents so that indigenous peoples, administrators and collaborators can adopt the measures to prevent and treat COVID-19.

Given the vulnerability of these peoples to respiratory diseases we have ensured that there was vaccination given as a priority to indigenous people in 2020 and 2021. We are ensuring that we have already distributed enough doses to all indigenous peoples over the age of 18.

More than 75% of these people have received their first dose and 58 their second. More than 500,000 doses have been administered amongst the indigenous population so far.

Ladies and gentlemen, the pandemic of COVID-19 has showed just how much we need to strengthen national healthcare systems, focusing on primary healthcare. We need to ensure that we can maintain essential healthcare services in our national health service.

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As a cardiologist I must also say that we are very concerned about the work that is being done on non-communicable diseases, particularly in the context of the COVID-19 pandemic. We would like to say that we are adhering to the Heart Initiative so that we can improve the strategy for improving the cardiovascular system.

Before concluding I would like to express my gratitude to all the front-line healthcare workers who have been working tirelessly since the beginning of

the pandemic with dedication. Healthcare work and the people who work in the healthcare sector are essential for us to maintain our healthcare systems and services.

I am sure that we need to promote initiatives to give value to, protect and supply a workforce in the healthcare sector so that we can deal with the current healthcare crisis and so that we are better-prepared for future challenges.

Finally I would like to thank Dr Tedros in particular for his co-operation and collaboration with my country in particular. Thank you.

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TAG Obrigado, Minister, and thank you once again. Although headquarters and our regional office for the Americas play an important supporting role the on-the-ground work of WHO and PAHO in Brazil is led by an extremely talented and dedicated country office led by our Country Representative, Dr Soccoro Gross.

Dr Gross, thank you for everything you and your team have done and continue to do. Welcome and you have the floor.

TR Thank you very much, Dr Tedros. I extend my greetings to the Minister of Health, Dr Marcelo Queiroga, and to our Director, Dr Clarissa Etienne. PAHO has a long history of co-operation with Brazil. At national, state and municipal level we have always tried to strengthen the Brazilian national healthcare system, the SUSE.

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We have worked together in the response against COVID-19 and this work started before the first case was detected in the country. We have been working day and night since then to increase our capacity as well as focusing on strengthening analysis, surveillance, laboratories and paying attention to risk communication strategies so that we can all learn from what has happened and this will be to the benefit of everybody.

We've been working with Brazilian institutions to understand the virus and we have been strengthening our genomic sequencing activities as well as supporting research on the impact of the P1 variant.

Currently we are working with the Brazilian Government to meet the urgent needs of equipment and medicines that are needed to accelerate access to vaccination and we are using the revolving fund for vaccine procurement of PAHO, which has served our countries for decades.

We have also been supporting Brazilian municipalities and we have been supporting plans and criteria to adjust public health measures, always taking into consideration the local context and situation.

To facilitate decision-making we are sharing all available evidence with Brazil and because a lot of this evidence is not available in Portuguese we are doing our utmost to translate it as quickly as possible.

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We have also, in partnership with health authorities, ensured there has been face-to-face training, virtual courses and provided up-to-date guidelines. We are also promoting the exchange between Brazil and other countries on their experiences of controlling COVID-19 so that we have strategies that are up-to-date.

We have also ensured that there has been an exchange of knowledge between states in Brazil including by sending missions to states and municipalities so that we can look at protocols and tend to the populations that are most vulnerable.

We are actively participating in a co-ordination effort to respond through our emergency operation centres. We know that we have a lot of challenges ahead of us and that is why we need to work with the same objective in mind; saving lives. Mr Minister. Please know that Brazil can always count on us.

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TAG Thank you so much, Dr Gross. I send my greetings and deep appreciation to all of our WHO PAHO colleagues in the country office in Brazil. We're very proud to call you our colleagues. Obrigado.

Of course Brazil is not the only country in the Americas to have been hit hard by COVID-19. Globally the region of the Americas has been the most affected by the pandemic. It's now my great privilege to welcome Dr Siro Ugarte, the Director of the Department of Health Emergencies in the WHO Region of the Americas and the Pan-American Health Organization.

Siro, thank you for your leadership throughout this incredibly difficult period for your region and welcome and you have the floor.

SU Thank you. Dr Tedros. Good morning, good afternoon, good evening. Dr Queiroga, Dr Gross, colleagues, the COVID-19 pandemic has become more complex not only in Brazil but in all of South America.

Today most of the countries in the southern cone and the Andean region are going through peaks of transmission; countries like Peru, Ecuador, Bolivia, Argentina, Uruguay and Guyana are reporting a dramatic rise in infections and their health systems are overwhelmed.

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Infections in Colombia will soon reach the high levels that they had in January and intensive care units' beds are running out in major metropolitan cities like

Bogotá and Medellín. Since the beginning of 2021 several countries in our region are reporting increases in COVID-19 cases in their younger populations.

These are linked to increased exposure and no vaccination in these groups as most countries have few vaccines and are applying them to vulnerable older groups and healthcare workers.

These surges in cases have also led to an increase in hospitalisations of younger people. PAHO is orienting the countries to plan on coping with sudden increases in the consumption of critical inputs such as oxygen, intubation, drugs and personal protective equipment.

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We are also advising on improving protection of the healthcare workers. Latin America and the Caribbean urgently requires access to more vaccines against COVID-19, as the Minister of Health in Brazil already mentioned.

These vaccines we need more rapidly available through existing multilateral mechanisms such as COVAX and through donation mechanisms. COVAX has delivered 7.33 million doses of vaccines in Latin America and the Caribbean so far but the need for vaccines is much greater.

Many countries cannot afford large bilateral deals with producers and are relying on COVAX for vaccines but the outlook is not optimistic for increased supplies soon. Latin America and the Caribbean also need more funding for strategic goods including PPE, medications for intubation, oxygen and rapid antigen tests to ensure the health services can respond to the new surge.

Last month the United States Government approved 3.5 billion in emergency planing for the Global Fund's effort to fight the COVID-19 pandemic in low and middle-income countries. But not enough of these funds have been directed to the Americas.

We would like to see our 22 eligible countries submit ambitious, fast-track projects to aid in their urgent response to COVID-19. At this stage to the pandemic the panorama is very concerning for Latin America and the Caribbean. Our countries are engaged on multiple battle fronts. They face challenges in getting enough vaccines to immunise large percentages of their populations and the countries also are operating in the context of a huge economic crisis that has increased poverty.

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While their health sector workforce faces huge stress the countries confront a pressing need to continue the health services' response. Thank you, Dr Tedros.

TAG Thank you, Siro, and my thanks and greetings to all of our colleagues in PAHO for your outstanding leadership and support for Brazil and all member states in the Americas. Although cases and deaths are declining it's more

important than ever that together we support health workers and continue to take a comprehensive and co-ordinated approach to drive down transmission and prevent a resurgence and further loss of life.

That means public health measures including surveillance, testing, contact tracing, supported quarantine and compassionate care and it means individual measures including physical distancing, masks, hand hygiene and ventilation.

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If everyone does their part - governments at all levels, WHO, PAHO and our partners, the private sector, faith-based organisations, civil society, communities and every individual Brazilian - we will beat the virus. Christian, back to you.

CL Thank you so much, Dr Tedros. Let me now open the floor to the questions from the media. We will start the round with Brazil-based journalists and I'll call upon Maria Eduardo from Coreo Brasiliense. Maria, please unmute yourself.

TR Good afternoon. I would like to ask the WHO on the 400,000 deaths in Brazil; we reached that mark. The WHO has been saying for a long time, warning about the situation and I would like to know from you whether you think these deaths were avoidable.

I would also like to know from the Minister if you can guarantee that the entire population will be vaccinated by the end of the year. Considering the rate at which we are vaccinating in the country, we are seeing that things are improving in other countries but we are now emerging from our worst moment and we could have bought vaccines beforehand, such as with Pfizer, but we did this very late on, according to specialists.

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Can the Minister guarantee that the entire population will be vaccinated by the end of the year? Thank you.

CL Thank you very much for this question. We'll go to Siro Ugarte, please, from PAHO. Siro, please unmute yourself.

SU Thank you. These are very important questions. Regarding some of the technologic information and some of the questions, I would rather prefer the Minister of Health of Brazil to respond but meanwhile I would like Dr Sylvain Aldighieri, who is the Incident Manager at PAHO, to provide some inputs in that regard. Sylvain, please.

SA Thank you, Siro, and good morning and good afternoon to everyone. The regions of the Americas has reported during the last 15 months more than 62 million cases and more than 1.5 million deaths.

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At this moment most of the countries in South America, the southern cone, the Andes, the Guianese shield are reporting increasing trends. In many of these countries ICUs are overwhelmed with severe patients.

In this context the most important action to help health services to bend the curve is the strict implementation of public health and social measures. This is the most important and unfortunately during the last three to four months with a sequence of holidays triggering big movement of population - Christmas, New Year, carnival, Easter week - we have noticed that in many countries of the Americas there was a suboptimal implementation of these public health measures.

So yes, in all countries of South America and Central America when there was a relaxation of public health measures, yes, there was an increase in cases and deaths that could have been avoided. This is my piece of contribution for the questions but I assume there will be other inputs from other colleagues connected today. Thank you.

CL Thank you very much. This was Dr Sylvain Aldighieri. He's the Incident Manager for COVID-19 in PAHO and WHO and also the Deputy Director for Health Emergencies. Before I hand to the Honourable Minister for part two to come in I'll ask Dr Simão for some input.

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TR Thank you very much, Marie-Eduarda, and good morning to the colleagues in Washington and Brazil. Your question on the number of deaths in Brazil is a cause for great sadness. We have a huge number of deaths and this has an impact on an individual level for the healthcare professionals and family members.

But in addition to that this is something that we are seeing in lots of countries in the world including in developed countries which have very good healthcare systems which were under enormous pressure, remembering that the United Kingdom was in a lock-down until very recently so there were also a large number of deaths because of the disease, the virus.

I think now people are understanding better how to deal in clinical terms with COVID-19 cases, for example using oxygen and we know that there have been difficulties in oxygen supply. Yes, we could have avoided people dying if we had enough oxygen.

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We also know that the use of corticoids and dexamethasone have helped reduce fatalities because of the virus. At the same time, as my colleague has just said, it is extremely important that we take the pressure off the healthcare

systems so that those systems can actually look after the patients that are in hospital.

That is why we need to reduce community transmission through the measures that were also mentioned by the healthcare minister; for example hand hygiene using masks, social distancing, contact tracing, early diagnosis so that we can break the chains of transmission.

So it is extremely sad to see this high number of deaths in Brazil and in other countries and unfortunately we can say that some of these deaths could have been avoided and future deaths could be avoided too if we are able to reduce community transmission. Thank you.

CL Thank you very much, Dr Simão. Let me now turn to the Honourable Dr Queiroga, Minister of Health. Your Excellency.

TR Dr Mariângela has already helped me with her answer. I think it is important that not only the different institutions be involved and committed but the population as well and this is not something we can do through legislation. We need to raise awareness amongst the population so that we can reduce the circulation of the virus and so that we are better able to fight the pandemic.

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Our first priority in Brazil is the vaccination campaign and the President of the Republic has reiterated how important vaccination is and he has done this on television. For this he has also allocated more than three billion reals so that we can buy doses.

We were also taking part in research last year with Oxford University for technology transfer so that vaccines could be produced in the Villa Cruz institute and we have also invested to modernise the facilities of the Butanta institution as well so that we can increase the number of doses administered in the country.

Therefore we are working also in research. We had more than 2,900 researchers working on the Pfizer vaccine as well as researchers from Brazil working on the other vaccine as well. As soon as we had approved the first vaccine we administered them as from January 2021.

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Brazil has some of the most advanced healthcare legislation and the health ministry does not have the power to intervene in this legislation so it is up to the President to say that vaccinations can only be administered once they have been approved by our regulatory authority and visa.

So when we are talking about delays that is not fair to say because we started as soon as the law allowed us to do so. By Monday we will have administered

more than 60 million doses of vaccinations against COVID-19. That is more than countries such as Portugal, Greece and Israel have administered.

This is done through the different states and municipalities so that they can get to our population. We are working in strong partnership with PAHO so that we can have access to the COVAX facility doses as soon and as quickly as possible and we are also going to acquire more vaccine doses through bilateral agreements such as though a new agreement that will be signed with Pfizer for 100 million doses.

Therefore when we speak about vaccination we are talking about hope. We do have enough vaccines on the horizon and we hope that by the end of this year we will have vaccinated the entire population.

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However we need to be aware of the fact that there are variants circulating. The Oswaldo Cruz Foundation in partnership with the Ministry of Health has been working efficiently to detect these variants. We also have undertaken research to see whether these variants are sensitive to the vaccines.

We are also supporting research and technology transfer. We are going to be working in partnership with Oxford University and the Funesp [?] University and the Villa Cruz Institute so that we can check the effectiveness of the AstraZeneca vaccine.

It is important that health authorities transmit the right kind of message to the population. For example there is the AstraZeneca vaccine that exists nonetheless and there is a lot of misinformation and that means that a lot of people do not want to receive the AstraZeneca vaccine.

But we know that it is a good vaccine and it has a high rate of efficacy. We need to work together, together with the media. We need to look forward, we need to bring hope to people, bring hope that we will end this pandemic through mass vaccination. Thank you.

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CL Obrigado, Honourable Minister. The next question goes to Lurival Santana from CNN Brasil. Lurival, please unmute yourself.

TR Good morning. Thank you very much. The Minister has already underlined the independence of the regulatory authority in Brazil and they did not approve the Sputnik vaccination. But it is under pressure to reverse this position, pressure from different parts of Brazil as well as from the private sector.

Even the Federal Government has stated that it would be in favour of it so I would like to know from the Brazilian Minister what is the situation with this dispute. I would also like to know why the WHO does not consider that the

Sputnik vaccine met the basic criteria for it to be approved by the organisation.

We know that there are 60 million vaccines that are going to go from the United States that are extra for AstraZeneca.

CL Thank you very much, Lurival. Let me take the opportunity to remind all journalists please to ask one question only because we have a long list and otherwise we don't get to even three questions. Let me ask the first part to the Honourable Minister and then we'll have Dr Simão take part two. Your Excellency.

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TR That was a very good question. As I said before, we have a state authority; in other words the regulatory authority and visa is made up of technical experts and it can resist these external pressures and internal pressures, pressures which are normal in a democratic state particularly when we are facing a pandemic such as this one.

The Government of Brazil led by Mr Jair Bolsonaro spoke to Mr Vladimir Putin and with China they are nations that we are friendly with. As soon as they are approved we can include them in our immunisation programme.

Bear in mind that the unvisa regulatory authority is much appreciated across the world so we need to wait to hear from unvisa before the Ministry of Health can take decisions. We are a democratic country. We also need to hear from Minister Lamandovsky on this matter.

CL Thank you very much, Your Excellency. Dr Simão, please.

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TR Thank you very much, Lurival, for the questions. I will try and answer both questions. As to ANVISA, I would like to stress what was said by the Minister; this is a regulatory authority that is recognised across the world because of its work and we have different technical experts that are working in partnership with the WHO.

Regarding the Sputnik 5 vaccine produced by the Gamalaya institute, this is still being discussed and studied by the WHO for approval for emergency use as from 9th February but all vaccine candidates that are going to be authorised need to be included in the work done by the WHO.

There are a couple of points that need to be clarified. The Gamalaya Institute is still providing data to the WHO but the WHO has already, together with the EMA, carried out inspections in April to ensure that there are good clinical practices and as from 10th May for three weeks there will be inspections being carried out in four areas where the Sputnik 5 vaccine will be produced.

This will be done in a global partnership and, as I said, this is being done together with the European Medicines Agency.

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Therefore as soon as all this work has been concluded we hope that we can then move on to looking at the whole process in July so this is what we are going to be doing in WHO.

Regarding the 60 million doses for AstraZeneca that the US Government will be donating, we are quite ahead in our conversations amongst GAVI, CEPI, the WHO and UNICEF and the US Government. We are currently negotiating so that these doses can be donated through the COVAX facility so that they can be sent to those countries most in need. Thank you.

CL Obrigado. The next question goes to Jamil Chad from UL Brasil. Jamil, please unmute yourself.

JA Can you hear me, Christian?

CL Yes.

JA Thank you for taking my question. Dr Tedros, especially last year you were very open when countries came and put a lot of pressure on you asking for an inquiry, for a re-examination of how WHO responded to the pandemic, especially in those first months.

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My question to you; do you think the Brazilian Government should also be open to a examination of its role in the pandemic?

TR And a question to the Minister on COVAX; do you think that it was a mistake to only ask to cover 10% of the population through COVAX?

CL Thank you very much, Jamil. I'll hand to Dr Tedros.

TAG Thank you very much. I think for institutions, any government doing assessments is a routine thing, the basics. It helps us to learn from what happened, to understand the success areas and to understand the challenging areas and then to improve in the future.

So this is the basics but it's up to the country also to use its own regulations or laws to do assessments. Thank you.

CL Thank you very much. I'll ask the Honourable Minister because I understand he will possibly have to leave right after this answer. We'll stay possibly for one or two more questions to cover more global questions afterwards. Your Excellency, please.

00:57:44

TR I would like to thank the World Health Organization, particularly Dr Tedros and Dr Mariângela Simão for giving us this opportunity to speak to international media members and also to state what the Brazilian Government's position is.

We are trying to find the best ways forward and to provide the answers that Brazilians and the international community would like us to provide. I hope that we can overcome this pandemic. I agree with what was said by the Director-General, that we need to ensure that there is constant evaluation not only on COVID-19 but other diseases in general.

This is what I need to do as the Minister of Health. We need to strengthen the healthcare system. We are a continental-sized country with more than 290 million inhabitants and we need to take into consideration just how heterogeneous is our society.

We have 246 billion reals which are being put to providing healthcare services for Brazilians. We need to ensure that all of this analysis is being done on a global scale, not only for public healthcare systems but also for other areas in public health so that we can improve our healthcare systems.

00:59:44

I would like to say just how pleased I am to take part in this event. Thank you very much.

CL Thank you very much, Honourable Minister, and thank you for staying with us and being available for further questions. Now the next question goes to Antonio Broto from EFE news agency. Antonio, please unmute yourself.

AN Thank you, Christian. My question is, as we are talking about Latin America this afternoon I would like to have some comments on the evolution of vaccination campaigns in that region. Which countries of the region do you think are in more need of receiving additional doses, by donation for example by COVAX?

Also do you think that in some countries in Latin America like Chile for example the vaccines have created a false sense of security? Thank you.

CL Thank you very much, Antonio. This is a two-question day apparently today. I'll ask our colleague, Dr Siro Ugarte, in PAHO please for that to one. Thank you.

01:00:58

SU Thank you so much for that question. As has been mentioned previously, several of the countries of the Americas have been heavily affected by the COVID-19 pandemic for more than a year already. In that regard the countries that are experiencing a huge increase in the number of cases and deaths are the ones that should be prioritised.

As the Minister of Health of Brazil already mentioned, one of the criteria to save lives is to provide all the services but also the availability of vaccines. In that regard there are countries in Central America and the southern cone and mentioning specific countries would be at this moment a situation that would lead us to identifying one country and reduce the presence of other countries.

But in general the situation is that when we see a sharp increase of cases and this increase of cases is showing in a trend that will increase the number of deaths those are the type of measures that must be taken into consideration when the allocation of vaccines is being provided.

01:02:17

Several of those countries are desperately looking for other mechanisms to get those vaccines but of course the availability of vaccines in the world context and particularly the huge increase in number of cases for example in India is affecting the availability of vaccines worldwide.

Still some of the countries are showing their solidarity already and they are willing to provide as a donation and these regional mechanisms should be the channel to prioritise those countries that will need more vaccines than the others. Thank you.

CL Thank you very much, Dr Ugarte. His name again; this is Dr Siro Ugarte; he's Director, Health Emergencies at PAHO/the World Health Organization in Washington. The next question goes to Smriti Malapaty from Nature. Smriti, please unmute yourself.

SM Hello, thank you. Can you hear me?

CL Yes. Please go ahead.

SM Thank you. Could the WHO please provide an update on whether the Sinopharm vaccine will be approved for emergency use today and how important would emergency use listing of the Chinese vaccines that are currently under review be for the Americas if that happens? Thank you.

01:03:45

CL Thank you very much. I will turn to Dr Mariangela Simão, please.

MS Thank you, Christian. The assessment for the emergency use listing is made by an external advisory group, an expert group at WHO. They're still meeting as we speak. This week they met to assess Sinopharm, to assess Moderna, which was also today and next week it needs to assess Sinovac.

So it's very important that we get vaccines that are proven safe and effective into the global market right now as we are seeing that we have a lot of instability in the supply, we have issues with the supply from India, we have issues with different vaccine manufacturers, with a lack of the drug substances.

01:04:40

So we do need more vaccines to come into the market and these vaccines need to be emergency use listed by WHO in order for them to be used for international procurement. So by the beginning of next week or the end of next week we will have the final assessment of these three vaccines out and there are other vaccines that are under assessment as well. Thank you.

CL Thank you so much. For our final question we'll swap continents again and we'll go to Latika Book from Sydney Morning Herald. Latika, please unmute yourself.

LA Thank you, Christian. My one question to the panel is, Australia is going to make it illegal for citizens of Australia who are currently stuck in India to fly home and this would be fines of \$66,000 and five-year jail terms.

Is that an acceptable measure in the WHO's opinion to stop the spread of coronavirus or is citizenship something that the WHO says should be allowed regardless of the health implications there?

CL Thank you very much, Latika. I don't think we can comment on individual measures by member states and we'll leave it at that so I'll take another last question then. We'll go to Laurent Zero from Swiss news. Laurent, please unmute yourself.

01:06:22

I'm not sure if Laurent got deterred because I announced the last question before. We have him.

LU Can you hear me?

CL Yes, please go ahead.

LU Sorry, there was an issue. Thank you for taking my question. A few regions in Switzerland have now opened vaccination for young people, as young as 16 years old. Does that make sense, the sequence we are in terms of vaccination? Thank you.

CL Thank you very much, Laurent. We'll check if Dr Kate O'Brien is still with us online. I think she's not any more. Then possibly Dr Van Kerkhove.

MK Thanks. Again I'm not going to comment on a specific country's plan but we advocate for those who are most at risk to receive the vaccine first in all countries so these are health workers, people of advanced age, people with underlying conditions because these are individuals who are most at risk for infection and also most at risk for developing severe disease.

01:07:25

What we are advocating through COVAX - and you hear us many, many times speaking about this - is for vaccine equity and to ensure that those who are most at risk receive the vaccine first.

Having said that, countries are taking into account a staged approach of how they implement their vaccines and the vaccines that they have and they're doing this as clearly as they can with age and with occupation and things like that.

So what we do hope is that individuals, when you are able to receive a vaccine you do get vaccinated because we do need more and more people to be vaccinated. We also advocate for countries to share doses of their vaccine through COVAX so that more people around the world, especially those who are most at risk, receive the vaccine first.

We all know how important this is and it needs to go beyond words but I do also want while I have the floor to say, it's not just vaccination. We do have to continue to adhere to all of the measures that keep us safe. You've heard us say many times, it's not vaccines only, it's vaccines and.

The global situation right now is quite fragile. There are a lot of countries right now that are facing really intense transmission. There are a number of countries that could potentially see an upsurge because they don't have access to the vaccines, because public health and social measures are being relaxed in some places, because there may be some big social events or mass gathering events coming up.

01:08:55

We all have to continue to make sure that we keep ourselves safe through distancing, through masks, through hand hygiene, staying home if asked and to be supported through governments. So it is that comprehensive approach that remains absolutely critical while we get through this really fragile time.

CL Thank you very much, Dr Kerkhove. We've reached the end of our briefing today. I want to thank all our participants today especially the Honourable Minister and of course our colleagues in PAHO in Washington and in the country office.

We will be sending the audio file and Dr Tedros' remarks right after the press conference. The full transcript will again be posted tomorrow on the WHO website. Any other follow-up questions, please send an email to mediaenquiries@who.int

Now let me hand to Dr Tedros for the final remarks.

TAG Thank you, Christian. I'd like to thank Minister Queiroga for joining us today and also to our colleagues, to Soccoro and Siro for joining and also to the media members for joining today. See you in our upcoming pressers. Thank you.

01:10:11