CELEBRATES SCIENCE

JANUARY 2020

KNOWLEDGE AND INFORMATION MANAGEMENT SERVICES
Article:
DOI: 10.1016/S0140-6736(19)32624-8
Impact Factor: 59.102

Summary:
In a World Report, 54gene (a start-up genomics company) was featured as the first pan-African biobank that plans to collect 40,000 biospecimens from ten hospitals in Nigeria by the end of 2019. The World Report has subsequently been reproduced in the media. In a world where media reports are dominated by fake news, clarification of African biobank initiatives is imperative. These initiatives have been active for years and have delivered tangible interventions that affect Africans who donate biospecimens for research and empower the researchers who are resident in Africa.
Article:

DOI: 10.1136/bmj.l6985
Impact Factor: 27.604

Summary:
More comprehensive understanding of gender inequality is required, particularly the broader structural drivers that underpin the political economy of gender power relations, say Asha George and colleagues.
Article:
DOI: 10.1161/circresaha.119.316201
Impact Factor: 15.862

Summary:
Despite higher rates of obesity, insulin resistance, and type 2 diabetes mellitus, women of African descent, irrespective of geographic location, have consistently been shown to have lower fasting triglyceride concentrations than their European counterparts.
Article:
Impact Factor: 14.753

Summary:
Background: Standard-dose, seasonal, trivalent, inactivated influenza vaccine induces moderate-to-low haemagglutination-inhibition antibody responses in people living with HIV. This study assessed the immunogenicity and safety of different dosing schedules of inactivated influenza vaccine in pregnant women living with HIV in South Africa.

Methods: In this double-blind, randomised, controlled trial, we recruited pregnant women with HIV from seven antenatal clinics in Soweto, South Africa. Pregnant women were eligible if they were aged 18-38 years, infected with HIV, and had an estimated gestational age of 12-36 weeks. Women were randomly assigned (1:1:1), using a computer-generated randomisation list, to receive inactivated influenza vaccine containing 15 μg of each of the three seasonal influenza strains for that year, as a single dose, a double dose, or two single doses 1 month apart. Participants and study personnel were masked to group allocation. Haemagglutination-inhibition antibody responses were measured for all groups in the mothers at enrolment and at 1 month after each vaccine dose, and in the single-dose and double-dose groups within 7 days of birth in the neonates. Immunogenicity analyses only included women with visits 28-35 days apart and infants who were born at least 28 days after maternal immunisation. The primary was seroconversion rate to each of the vaccine strains in the mothers 1 month after completion of the dosing schedule, and the primary safety outcomes were frequency of local and systemic reactions. Safety was assessed in mothers and infants until 24 weeks post partum and analysed in all participants who received at least one dose of vaccine. This study is registered with ClinicalTrials.gov, NCT01527825, and is closed to accrual.

Findings: Between Feb 11, and June 6, 2013, 800 pregnant women living with HIV were enrolled and randomly assigned to the single-dose (n=266), double-dose (n=265), or two-single-doses (n=269) group. In the analysable population, seroconversion rates in mothers 1 month after the final vaccine dose were significantly higher in the double-dose group (n=230; ranging from 29% to 65% for the three vaccine strains) than in the single-dose group (n=230; ranging from 18% to 49%; p≤0.019 for the three vaccine strains), but were similar between the two-single-doses group (n=220; ranging from 23% to 52%) and the single-dose group (p≥0.20 for the three vaccine strains). Safety outcomes were similar in the three groups, except for more injection-site reactions in recipients in the double-dose group.
**Interpretation:** A regimen of double-dose inactivated influenza vaccine gave slightly greater immunogenicity than did a single-dose regimen in pregnant women living with HIV. However, immunogenicity in the double-dose group was still lower than historical data from the same setting in pregnant women without HIV. More immunogenic vaccines are needed for pregnant women living with HIV to enhance transplacental transfer of vaccine-induced protective antibodies to their newborn infants.
**Summary:**
An update of the chapter on Mental, Behavioral and Neurodevelopmental Disorders in the International Classification of Diseases and Related Health Problems (ICD) is of great interest around the world. The recent approval of the 11th Revision of the ICD (ICD-11) by the World Health Organization (WHO) raises broad questions about the status of nosology of mental disorders as a whole as well as more focused questions regarding changes to the diagnostic guidelines for specific conditions and the implications of these changes for practice and research. This Forum brings together a broad range of experts to reflect on key changes and controversies in the ICD-11 classification of mental disorders. Taken together, there is consensus that the WHO's focus on global applicability and clinical utility in developing the diagnostic guidelines for this chapter will maximize the likelihood that it will be adopted by mental health professionals and administrators. This focus is also expected to enhance the application of the guidelines in non-specialist settings and their usefulness for scaling up evidence-based interventions. The new mental disorders classification in ICD-11 and its accompanying diagnostic guidelines therefore represent an important, albeit iterative, advance for the field.
1. **INTRAMURAL RESEARCH UNITS**

**Alcohol, Tobacco and Other Drug**


**Impact Factor:** 2.024


**Impact Factor:** 11.600

**Biomedical Research and Innovation Platform**


**Impact Factor:** 3.078


DOI: 10.1177/2048004019900748

**Impact Factor:** None

**Centre for Tuberculosis**


DOI: 10.3389/fvets.2019.00475

**Impact Factor:** 2.029


DOI: 10.1111/tbed.13471

**Impact Factor:** 3.554


DOI: 10.1638/2018-0084

**Impact Factor:** 0.524
**Impact Factor: 1.871**

**Impact Factor: 2.468**

**Impact Factor: 0.948**

**Impact Factor: 2.790**

**Environment and Health**

**Impact Factor: 2.376**

**Impact Factor: 2.468**

**Impact Factor: 2.468**

**Gender and Health**

**Impact Factor: 1.592**
   DOI: 10.1080/16549716.2019.1711336
   **Impact Factor:** 1.817

**Health Systems**

   DOI: 10.5588/ijtld.19.0100
   **Impact Factor:** 2.024

   DOI: 10.1371/journal.pone.0218682
   **Impact Factor:** 2.776

   DOI: 10.1097/qai.0000000000002256
   **Impact Factor:** 3.863

   DOI: 10.1007/s10865-020-00135-4
   **Impact Factor:** 2.868

   DOI: 10.1186/s12889-019-8035-z
   **Impact Factor:** 2.567

   **Impact Factor:** 2.509

   DOI: 10.1186/s13063-019-3960-9
   **Impact Factor:** 1.975
Impact Factor: 1.316

HIV Prevention
Impact Factor: 2.908

Impact Factor: 9.117

Non-Communicable Disease

Impact Factor: 4.447


Impact Factor: 2.776

Office of Tuberculosis Research


Impact Factor: 3.342
### Primate
   **Impact Factor: 0.598**

### South African Cochrane Centre
   **Impact Factor: 7.755**

   **Impact Factor: None**

   **Impact Factor: 43.070**

   **Impact Factor: 1.664**

   **Impact Factor: 3.730**

### Violence, Injury and Peace
   **Impact Factor: None**

   **Impact Factor: 0.824**
2. **EXTRAMURAL RESEARCH UNITS**

**Antiviral Gene Therapy**

   DOI: 10.1093/hmg/ddz317
   **Impact Factor: 4.544**

**Bioinformatics Capacity Development**

   DOI: 10.3390/jcm9010283
   **Impact Factor: 5.688**

   DOI: 10.1093/idpl/ipz024
   **Impact Factor: None**

   DOI: 10.1016/S0140-6736(19)32624-8
   **Impact Factor: 59.102**

**Child and Adolescent Lung Health**

   DOI: 10.1183/13993003.01831-2019
   **Impact Factor: 11.807**

   DOI: 10.1097/qai.0000000000002314
   **Impact Factor: 3.863**

**Developmental Pathways for Health**

   DOI: 10.1123/jpah.2019-0139
   **Impact Factor: 2.079**

   DOI: 10.1186/s13063-019-3924-0
   **Impact Factor: 1.975**

**Impact Factor: 6.120**


**Impact Factor: 1.316**


**Impact Factor: 2.079**


**Impact Factor: 2.079**


**Impact Factor: 2.340**

**Drug Discovery and Development**


**Impact Factor: 6.054**


**Impact Factor: 3.926**

**Gynaecological Cancer**


**Impact Factor: 15.873**
**Health Services to Systems**

   
   DOI: 10.1186/s12961-019-0508-0
   
   **Impact Factor: 2.218**

   
   DOI: 10.1136/bmj.l6985
   
   **Impact Factor: 27.604**

**Herbal Drugs**

   
   DOI: 10.1016/j.phytochem.2019.112249
   
   **Impact Factor: 2.905**

**HIV/TB Pathogenesis and Treatment**

   
   DOI: 10.1016/j.arbres.2019.11.015
   
   **Impact Factor: 4.214**

   
   DOI: 10.5588/ijtld.19.0025
   
   **Impact Factor: 2.024**

**Hypertension and Cardiovascular Disease**

   
   DOI: 10.1111/jch.13775
   
   **Impact Factor: 2.444**

   
   DOI: 10.1093/ajcn/nqaa008
   
   **Impact Factor: 6.568**

**Immunology of Infectious Disease**

   
   DOI: 10.3389/fcimb.2019.00479
   
   **Impact Factor: 3.518**
Respiratory and Meningeal Pathogens

   **Impact Factor:** 2.776

   **Impact Factor:** 2.022

   **Impact Factor:** 14.753

Risk and Resilience in Mental Disorders

   **Impact Factor:** 8.285

   **Impact Factor:** 1.410

   **Impact Factor:** 1.338

   **Impact Factor:** 1.821
Impact Factor: 5.182

Impact Factor: 1.986

Impact Factor: 4.468

Impact Factor: 1.978

Impact Factor: 3.239

Impact Factor: 41.063

Rural Public Health and Health Transition
DOI: 10.1186/s12937-019-0517-4
Impact Factor: 3.592

**Impact Factor: 2.088**


**Impact Factor: 5.192**
3. **GRANT FUNDED RESEARCH**

**Impact Factor:** 3.782

**Impact Factor:** 2.025

3. Olaniyan T, Dalvie MA, Röösli M, Naidoo RN, Künzli N, de Hoogh K, Berman D, Parker B, Leaner J, **Jeebhay MF**. Short term seasonal effects of airborne fungal spores on lung function in a panel study of schoolchildren residing in informal settlements of the Western Cape of South Africa. Environmental Pollution. 2020 Jan 27. DOI: 10.1016/j.envpol.2020.114023  
**Impact Factor:** 5.714

**Impact Factor:** None

**Impact Factor:** 2.025

**Impact Factor:** 4.167

**Impact Factor:** 1.052

**Impact Factor:** 0.831
Impact Factor: 5.496

Impact Factor: 2.921

Impact Factor: None

Impact Factor: 2.908

Impact Factor: 2.750

Impact Factor: 3.471

Impact Factor: 2.776

Impact Factor: 3.305

Impact Factor: 4.011
**Impact Factor:** 9.924

**Impact Factor:** 1.947

**Impact Factor:** 3.567

**Impact Factor:** 4.034

**Impact Factor:** 4.034

**Impact Factor:** None

**Impact Factor:** 3.405

**Impact Factor:** 4.760
   DOI: 10.1166/jbn.2020.2880
   Impact Factor: 5.068

   DOI: 10.1038/s41467-019-14009-0
   Impact Factor: 11.878

4. RESEARCH CENTRES

4.1 Advancing Care and Treatment (ACT) For TB/HIV
   DOI: 10.1002/jia2.25438
   Impact Factor: 5.192

4.2 Centre for Basic and Translational Human TB Research
   DOI: 10.1038/s41467-019-14132-y
   Impact Factor: 11.878

4.3 Centre for Optimising Antimalarial Therapy in South Africa
   DOI: 10.1128/aac.01896-19
   Impact Factor: 4.715

4.4 Soweto Matlosana SAMRC Collaborating Centre for HIV/AIDS and TB
   DOI: 10.1016/j.meegid.2020.104216
   Impact Factor: 2.611

5. CLOSED RESEARCH UNITS

5.1 Diarrhoeal Pathogens
   DOI: 10.1016/j.parepi.2020.e00140
   Impact Factor: None
6. RESEARCH UNITS WITH NO QUALIFYING PUBLICATIONS

Intramural
- Biostatistics
- Burden of Disease
- Office of Malaria

Extramural
- Antibody Immunity Research Unit
- Cardiometabolic Health Research Unit
- Centre for Antimicrobial Resistance
- Centre for Health Economics and Decision Science
- Common Epithelial Cancer
- Genomics of Brain Disorders Research Unit
- Maternal and Infant Health Care Strategies
- Microbial Water Quality Monitoring
- Molecular Mycobacteriology
- Precision and Genomic Medicine
- Precision Prevention and Novel Drug Targets for HIV-Associated Cancers
- Prospective Gastrointestinal Cancer
- Stem Cell Research and Therapy
- Wound and Keloid Scarring Translational Research Unit

Research Centre
- Centre for Multi-disciplinary Research on Malaria
- Centre for Sustainable Malaria Control
- Centre for Tuberculosis Biomarker-Targeted Intervention
- Clinical and Community HIV-Tuberculosis Research Collaborating Centre
- TB Free through Research and Innovation
- Tuberculosis Collaborating Centre for Child Health (TB-CHILD)
- Tygerberg SAMRC Collaborating centre for HIV Laboratory Research
- Wits Clinical HIV/TB Research Unit, WITS Health Consortium
- Wits RHI Collaborating Centre for HIV/AIDS
### 7. GRANTS AWARDED

#### SAMRC LIST OF NEW CONTRACTS FOR JANUARY 2020

<table>
<thead>
<tr>
<th>SAMRC Unit</th>
<th>Funder</th>
<th>Main Funder</th>
<th>Project Title/Description</th>
<th>Contract Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSRU</td>
<td>University of Washington</td>
<td>National Institutes of Health (NIH)</td>
<td>African Regional Research Partnerships for Scaling up Child Mental Health EBPs (SMART Africa)</td>
<td>256,530 Rand, $17,280 Foreign Currency</td>
</tr>
<tr>
<td>MALARIA</td>
<td>E8 Secretariat</td>
<td>E8 Secretariat</td>
<td>Evaluating the Impact of Malaria Health Posts on Resident and Mobile and Migrant Populations in E8 Border Districts</td>
<td>973,401 Rand, $65,568.75 Foreign Currency</td>
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