Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

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Patients who received DD VSTs and those who received DD VSTs followed by TP VSTs were analyzed together as the group of patients with access to DD products. Our primary outcome was whether a patient received a conventional antiviral medication in the first one hundred days post-HSCT. Secondary outcomes included those associated with poor viral control such as GVHD, TA-TMA, renal function as measured by cystatin C, inpatient and ICU days through day 100 post-HSCT, and overall survival at day 100 post-HSCT and one-year post-HSCT.

Results: No statistically significant improvements were seen between those who received DD VSTs (n=89) as compared to those who received only TP VSTs (n=15) [Figures 1 and 2]. This suggests that the shortened persistence of TP VSTs may not be problematic after HSCT due to both the ability to repeat infusions and because of the ongoing recovery of viral immunity from the transplanted graft. There was also no evidence of increased GVHD in the partially matched TP group.

Conclusion: Developing TP VST banks may be advantageous for most centers as they are fiscally and logistically easier to establish than DD patient-specific VSTs and outcomes appear similar. Our study has a few notable caveats including its retrospective nature, heterogenous population, and limited sample sizes. Further investigation including prospectively comparing DD and TP VSTs may provide valuable insight.

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Background: In the United States, a massive national response to accelerate the development, manufacturing, and distribution of an effective and safe vaccine against coronavirus disease 2019 (COVID-19) ultimately led to the availability of Pfizer-BioNTech’s (BNT162b2) and Moderna’s (mRNA-1273) vaccines by early December 2020. Hematopoietic cell transplant (HCT) and chimeric antigen receptor T-cells (CAR T) recipients are at high risk for COVID-19 infections and poor outcomes due to progression to severe disease. Although transplant recipients represent a vulnerable subset of the global population, previous studies highlighted low vaccine uptake in this population.

Methods: We conducted an international, cross-sectional survey study, in partnership with the American Society for Transplantation and Cellular Therapy (ASTCT) and the Transplant Infectious Diseases-Special Interest Group (TID-SIG), among transplant providers to gauge their knowledge of COVID-19 vaccines and their mindset towards vaccinating their HCT and CAR T cell recipients against COVID-19. Beginning on December 23, 2020, a link to the survey was distributed by ASTCT administration to their member mailing list and remained open through February 1, 2021. Reminder e-mails were sent to ASTCT members every two weeks to encourage participation.

Results: We received 216 survey responses from the ASTCT members. The majority of survey participants (95%) indicated that they cared for HCT recipients and were identified primarily as physicians (61%), clinical pharmacists (12%), or advanced practice providers (11%) (Fig. 1). Most participants indicated that they felt very or somewhat confident about their general knowledge of COVID-19 vaccines (84%), understanding different vaccine platforms in development (68%), and ability to counsel patients on COVID-19 vaccines (78%). Prior to the guidelines on the timing of COVID-19 vaccination after HCT became widely available, 28% and 55% of participants indicated that they would vaccinate their patients within six months after allogeneic and autologous HCT, respectively. Ultimately, 88% of participants strongly or somewhat agreed that they would recommend COVID-19 vaccination in their HCT recipients (Fig. 2).

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Transplant Providers’ Perceptions of COVID-19 Vaccination in the Wake of a Global Pandemic

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Conclusions: The responses to our survey indicated that, during the earliest phase of vaccines rollout, most of the ASTCT HCT providers were confident in their knowledge of COVID-19 vaccines, vaccine safety and efficacy, and the importance of timely vaccination in their HCT recipients. A follow-up survey, eight months after vaccine rollout, is currently underway.

Detection of Epstein-Barr Virus Specific Functional T Cells By Flow Cytometry

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The ability to monitor the presence or absence of EBV specific highly functional T cells will be an important tool, along with monitoring viral load, in managing patients post-transplant as their immune system recovers.

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Urine Aspergillus Antigen Detection As an Aid to Diagnose Invasive Aspergillosis

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Background: Novel antibodies that recognize galactofuranose-containing glycan in urine of animals and people with invasive aspergillosis (IA) were developed and integrated into