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4 Abstract

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- ⁵ Introduction: SARS (severe acute respiratory syndrome) is the severe stage of COVID-19
- 6 caused by massive alveolar damage and progressive respiratory failure; caused by SARS-CoV-2
- 7 (SARS coronavirus 2). Objective: To show the behavior of the incidence of COVID-19 and
- ⁸ vaccination against SARS-COV-2, between the period between February 17 and September

9 30, 2021. Methodology: This research was carried out under a cross-sectional study, as a source

¹⁰ of information, it was obtained from the national vaccination plan against COVID-19 from the

¹¹ website of the Ministry of Health and Social Protection.Results: An increase in incidence was

¹² evidenced over time, the number of vaccines also increased, until June 2021. From July 2021

¹³ to September 2021, there was a decrease in the incidence of SARS-CoV-2, as well as the

¹⁴ decrease in the application of the number of vaccines. Conclusion:There is a demand for more

¹⁵ studies predestined to evaluate the efficacy of vaccination in reducing the transmission of

¹⁶ SARS-CoV-2 in Colombia, both at the individual level and at the population level, with a

¹⁷ greater longitudinal tracing and in additional populations.

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19 Index terms—incidence, COVID-19, SARS-CoV-2, pandemic, vaccines.

20 1 Introduction

ARS (severe acute respiratory syndrome) is the severe stage of COVID-19 caused by massive alveolar damage and progressive respiratory failure; caused by SARS-CoV-2 (SARS coronavirus 2) 1.

SARS-CoV-2 belongs to the family Coronaviridae, subfamily Orthocoronaviridae. It is a single-stranded RNA virus, whose genome is around 27-32 kb, which encodes non-structural proteins, such as proteases, helicases, and RNA polymerases: and structural proteins 2,3 COVID-19 can be divided into three phases: asymptomatic with or without detectable virus; nonsevere symptomatic with the presence of virus and severe respiratory symptomatic with high viral load 4. An unresolved question is why some develop serious illness and others do not. Aspects based on the immune response are not enough to explain it, but they will help to understand the behavior of

²⁹ this new pathogen 5.

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The rapid obligation of vaccines against COVID-19 has forced the use of proteomics to search for exclusive 33 antigens of the pathogen in protein S. Thanks to bioinformatics, 933 pentapeptides absent in the human 34 proteome have been recognized, of which 107 peptides are located around protein S and of these 66 peptides 35 are more immunogenic and can be used in the production of a vaccine 6. The WHO has up to 52 alternative 36 vaccine candidates between platforms based on proteins, RNA, DNA, non-vectors. replicants, replicating vectors, 37 38 inactivated viruses, attenuated viruses, and virus-like particles. Of all these vaccine inserts, only vaccines made 39 up of RNA and nonreplicating vector have initiated safety studies in humans ??,8. To achieve a continued 40 reduction in infection cases 9 multiple countermeasures are needed, including distancing, testing, and tracing, especially considering the recent emergence of new variants of SARS-CoV-2 10, such as B.1.1.7 and B.1.351, 41 which are reported to have higher transmissibility 11,12 and are likely to cause more severe disease 13 compared 42 to the parent strain. Vaccination alone is not expected to counteract the spread of infection, and a carefully 43 planned vaccination campaign needs to be regulated 14,15 The objective of this research is to show the behavior 44 of the incidence of COVID-19 and vaccination against SARS-COV-2, between the period between February 17 45

46 to September 30, 2021.

47 **2** II.

$_{48}$ 3 Methodology

This research was carried out under a crosssectional study [16][17][18], the information was obtained from the website of the Ministry of Health and Social Protection 19 of the daily reports of contagion by COVID-19, between the period between January 1, 2021, and September 30, 2021, to calculate the incidence, and from February 17

52 to September 30, 2021, for vaccination.

53 **4 III.**

54 5 Results

Table 1 shows the months between January and September 2021, the new cases of infection by SARS-CoV-2, 55 the vaccines, and the population in Colombia. With the information in columns 2 and 3, the incidence rate 56 was calculated in percentage terms for COVID-19. Source: the autor Figure 1 shows the incidence by months 57 for SARS-CoV-2, between the months of January to September 2021 and the vaccination against COVID-19, 58 between the months of February to September 2021. It describes a similarity in the trend of the incidence lines 59 (blue), and vaccination (orange), that is, while the incidence increases over time, the number of vaccines also 60 increases, this trend is maintained until June. From the month of July to September there is a decrease in the 61 incidence of SARS-CoV-2, as well as the decrease in the application of the number of vaccines. IV. 62

63 6 Source: the author

64 7 Conclusions

From the data analyzed, it is concluded that the incidence of COVID-19 is related to vaccination until June 2021 against SARS-COV-2, that is, as vaccination values increase, Incidence cases due to COVID-19 also increase

and a contrary situation from July to September, that is, as vaccination values decrease, incidence cases due to 67 COVID-19 also decrease.

There is a demand for more studies predestined to evaluate the efficacy of vaccination in reducing the transmission of SARS-CoV-2 in Colombia, both at the individual level and at the population level, with greater longitudinal screening and in additional populations 20.

Monitoring the results of vaccinations is essential to understand efficacy, possible decline in immune response

⁷³ over time, and possible adverse effects. Monitoring the effects of these vaccines is possible and much needed. The

⁷⁴ publication of these data, duly verified, is a priority. For this, it would be very important to follow the vaccinated and check if they suffer from COVID-19 infections, and sequence where appropriate. ¹

 $\mathbf{1}$

| Months | New cases | Population | Incidence | Vaccines |
|-----------|-----------|------------|-----------|----------|
| January | 451609 | 51049498 | 0,88 | |
| February | 156856 | 50597889 | 0,31 | 130578 |
| March | 154687 | 50441033 | 0,31 | 2112814 |
| April | 453347 | 50286346 | 0,9 | 2743079 |
| May | 543805 | 49832999 | 1,09 | 5105651 |
| June | 834526 | 49289194 | $1,\!69$ | 8189621 |
| July | 533290 | 48454668 | 1,1 | 9242634 |
| August | 123766 | 47921378 | 0,26 | 8021788 |
| September | 48191 | 47797612 | 0,10 | 5159042 |

Figure 1: Table 1 :

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 $^{^1 \}odot$ 2021 Global Journals Behavior of the Incidence of COVID-19 and Vaccination against SARS-Cov-2 in Colombia

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