
A LANCET SYSTEMATIC REVIEW AND META-ANALYSIS OF THE EFFICACY OF INACTIVATED COVID VACCINES FOUND EVIDENCE OF EFFICACY AND EFFECTIVENESS.
https://www.thelancet.com/journals/lanwpc/article/PIIS2666-6065(23)00106-2/fulltext

ANOTHER LANCET STUDY DEMONSTRATED EFFICACY OF THE mRNA VACCINES AGAINSTOMICRON INFECTION AND SEVERE OUTCOMES IN CHILDREN YOUNGER THAN 12 YEARS, AND ALSO FOUND THAT BIVALENT BOOSTERS WERE MORE EFFECTIVE THAN MONOVALENT BOOSTERS.
https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(23)00272-4/fulltext

A JAMA PEDIATRICS STUDY USED NEAR REAL-TIME MONITORING OF OUTCOMES TO DEMONSTRATE THE EFFICACY OF BNT162b2 COVID-19 VACCINATION IN CHILDREN 5-17.
https://jamanetwork.com/journals/jamapediatrics/fullarticle/2805184?guestAccessKey=534dd862-511a-4ff6-bb8-e5b5b4a4e8b0&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamapediatrics&utm_term=mostread&utm_content=olf-widget_06202023

A JAMA INTERNAL MEDICINE SYSTEMATIC REVIEW AND META-ANALYSIS FOUND SEVERAL RISK FACTORS SIGNIFICANTLY ASSOCIATED WITH DEVELOPING LONG COVID AND ALSO THAT TWO DOSES OF mRNA VACCINE WAS ASSOCIATED WITH LOWER LONG COVID RISK.
https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2802877?guestAccessKey=dd19dc9a-44d4-4b3e-8502-018f75f7d2c5&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamainternalmedicine&utm_term=mostread&utm_content=olf-widget_06202023

ANOTHER JAMA STUDY FROM BAVARIA FOUND THAT A DIAGNOSIS OF COVID-19 IN CHILDREN WAS ASSOCIATED WITH AN INCREASED INCIDENCE OF TYPE 1 DIABETES SINCE 2020.
https://jamanetwork.com/journals/jama/fullarticle/2805461?guestAccessKey=37fbc4a0-01b2-4e01-9b1f-d66ebec3094e&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jama&utm_term=etoc&utm_content=olf-widget_062023

ANOTHER JAMA STUDY FOUND 37 SYMPTOMS ACROSS MULTIPLE PATHOPHYSIOLOGICAL DOMAINS IDENTIFIED AS PRESENT MORE OFTEN IN SARS-CoV-2–INFECTED PARTICIPANTS AT 6 MONTHS OR MORE AFTER INFECTION, PROVIDING AN APPROACH TO THE DEFINITION AND DIAGNOSIS OF LONG-COVID.
https://jamanetwork.com/journals/jama/fullarticle/2805540?guestAccessKey=e647e69a-6e4c-4b02-987b-bfd30e56dc65&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jama&utm_term=mostread&utm_content=olf-widget_06152023

CDC’S ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES RECOMMENDED ADMINISTRATION OF RSV VACCINE FOR INDIVIDUALS 60 AND OLDER, ESPECIALLY IN THOSE WITH COMORBIDITIES, IN CONSULTATION WITH THEIR PROVIDERS.
A study in *JAMA Network Open* found no evidence for an increased risk of spontaneous abortion among mRNA booster vaccine recipients who were at 6-19 weeks of gestation.

A study published in *Jama Internal Medicine* provided evidence for the routine use of high-dose prophylactic anticoagulation for patients who have severe hypoxemic COVID-19 pneumonia.


Another *Jama Internal Medicine* study found that discontinuation of admission testing in hospitals in England and Scotland was associated with significant increases in hospital-onset SARS-CoV-2 infections relative to community-onset infections.


A study in *Clinical Infectious Diseases* found that commercial preparations of intravenous immunoglobulin (IVIG) contain significant titers of anti-SARS-CoV-2 antibodies.


A survey of 25 academic hospitals published in *Infection Control and Hospital Epidemiology* found significant deviation from CDC guidance about HCP returning to work after COVID; many have HCPs return to work earlier than recommended.


An FDA Advisory Committee recommended that manufacturers produce a booster dose targeting the XBB.1.5 strain and that this vaccine be used in the fall as a monovalent vaccine.

[https://www.fda.gov/media/169378/download](https://www.fda.gov/media/169378/download)

A fascinating study published in *Lancet Microbe* described a SARS-CoV-2 human challenge study. The results provided evidence for superspreading and implicated the nose as the primary source of expelled virus.