

REFERENCES – TOWN HALL 91 – 10-22-2023

A PAPER IN *NATURE* DEMONSTRATED THE UTILITY OF NASAL SWABS FOR ASSESSING MUCOSAL IMMUNE RESPONSES TO SARS-CoV-2.

<https://www.nature.com/articles/s41598-023-44989-5>

A RANDOMIZED CONTROLLED TRIAL PUBLISHED IN *THE NEW ENGLAND JOURNAL OF MEDICINE* SHOWED THAT TREATMENT WITH INHALED FLUTICASONE FUROATE FOR 14 DAYS DID NOT RESULT IN A SHORTER TIME TO RECOVERY THAN PLACEBO AMONG OUTPATIENTS WITH COVID-19.

https://www.nejm.org/doi/full/10.1056/NEJMoa2209421?query=featured_coronavirus

A *JAMA NETWORK OPEN* STUDY DEMONSTRATED THAT HIGH-FLOW NASAL OXYGEN AND NONINVASIVE VENTILATION APPEAR NOT TO BE AEROSOL-GENERATING PROCEDURES.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2810485?guestAccessKey=7c3b5876-0b0d-4e3c-9934-3dc5e8d276f9&utm_source=silverchair&utm_medium=email&utm_campaign=jama_network&utm_content=covid_weekly_highlights&adv=001602730367

A LARGE *JAMA NETWORK OPEN* RETROSPECTIVE COHORT STUDY FOUND THAT COVID-19 WAS ASSOCIATED WITH A SUBSTANTIAL RISK FOR AUTOIMMUNE AND AUTOINFLAMMATORY CONNECTIVE TISSUE DISORDERS.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2810259?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=100623?adv=001602730367

A *JAMA INTERNAL MEDICINE* STUDY OF US VETERANS FOUND THAT COVID-19 SURVIVORS HAD NO CLINICALLY SIGNIFICANT EXCESS HAZARD OF DEATH GREATER THAN COMPARATORS AMONG THOSE WHO SURVIVED AT LEAST 6 MONTHS AFTER INFECTION.

https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2808237?guestAccessKey=f00cad8-f47b-4832-9a0e-4b110f8fb089&utm_source=silverchair&utm_medium=email&utm_campaign=jama_network&utm_content=covid_weekly_highlights&adv=001602730367

A *JAMA* STUDY FOUND THAT THAT LONG-TERM SUPPORT FOR FAMILY MEMBERS OF ICU PATIENTS WITH COVID-19 ARDS SHOULD BE THE SAME AS FOR RELATIVES OF PATIENTS WITH OTHER CAUSES OF ARDS.

<https://jamanetwork.com/journals/jama/fullarticle/2809191>

A *LANCET PUBLIC HEALTH* PAPER PROVIDED A RETROSPECTIVE ASSESSMENT OF COVID SURVEILLANCE SYSTEMS USED IN ENGLAND DURING THE PANDEMIC, CONCLUDING THAT DEPLOYING A SUITE OF MONITORING SYSTEMS IS OPTIMAL.

[https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(23\)00219-0/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(23)00219-0/fulltext)

ANOTHER *LANCET* PAPER REPORTED ON THE COMPARATIVE EFFECTIVENESS OF NIRMATRELVIR/RITONAVIR VERSUS SOTROVIMAB FOR PREVENTING SEVERE COVID-19 OUTCOMES IN NON-HOSPITALIZED HIGH-RISK PATIENTS DURING OMICRON WAVES, FINDING APPROXIMATELY EQUIVALENT OUTCOMES FOR BOTH.

[https://www.thelancet.com/journals/lanepi/article/PIIS2666-7762\(23\)00160-6/fulltext](https://www.thelancet.com/journals/lanepi/article/PIIS2666-7762(23)00160-6/fulltext)

AN OPINION PIECE IN *THE JOURNAL OF INFECTIOUS DISEASES* PRESENTS EVIDENCE THAT SO-CALLED 'HYBRID IMMUNITY' (I.E., VACCINATION PLUS INFECTION) PRODUCES MORE ROBUST IMMUNITY THAN EITHER ALONE.

<https://academic.oup.com/jid/advance-article/doi/10.1093/infdis/jiad353/7245175?searchresult=1>

REFERENCES – TOWN HALL 91 – 10-22-2023 (CONTINUED)

A PAPER IN *CLINICAL INFECTIOUS DISEASES* FOUND THAT, IN A HIGHLY IMMUNE ADULT POPULATION, MEDIAN SARS-CoV-2 VIRAL LOADS PEAKED AROUND THE FOURTH DAY OF SYMPTOMS AND THAT INFLUENZA A VIRAL LOADS PEAKED SOON AFTER SYMPTOM ONSET.

<https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciad582/7285011?searchresult=1>

A SHORT *CLINICAL INFECTIOUS DISEASES* OPINION PIECE WRITTEN BY A FELLOW IN INFECTIOUS DISEASES DESCRIBES HIS GRIEVING PROCESS DURING THE PANDEMIC IN PART STIMULATED BY HIS STRUGGLES WITH CLOSE FAMILY MEMBERS WHO ROUTINELY REPORTED THEIR ANTI-SCIENCE AND CONSPIRACY THEORIES ABOUT COVID.

<https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciad578/7295834>

A PAPER IN *INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY* FOUND THAT AN IMMEDIATE, SUBSTANTIAL, AND SUSTAINED INCREASE OF HEALTHCARE-ASSOCIATED RESPIRATORY VIRAL INFECTIONS OCCURRED AFTER THE INSTITUTION DISCONTINUED UNIVERSAL MASKING.

<https://www.cambridge.org/core/journals/infection-control-and-hospital-epidemiology/article/healthcareassociated-respiratory-viral-infections-after-discontinuing-universal-masking/E3B1E21AFB9D9BA4C535F7BB810A3D1C>

THE *U.S. FOOD AND DRUG ADMINISTRATION* AMENDED THE EMERGENCY USE AUTHORIZATION (EUA) FOR THE NOVAVAX COVID-19 VACCINE, ADJUVANTED TO INCLUDE THE 2023-2024 FORMULA FOR ANYONE 12 YEARS OF AGE AND OLDER.

<https://www.fda.gov/vaccines-blood-biologics/coronavirus-covid-19-cber-regulated-biologics/novavax-covid-19-vaccine-adjuvanted>

THE *NIAID* IS BEGINNING A CLINICAL TRIAL OF A “UNIVERSAL” INFLUENZA VACCINE.

<https://www.nih.gov/news-events/news-releases/nih-clinical-trial-universal-flu-vaccine-candidate-begins>