

REFERENCES – TOWN HALL 97 – 6-9-2024

A CAREFULLY CONTROLLED STUDY PUBLISHED ONLINE IN *E-BIOMEDICINE* EVALUATING CLOTH AND SURGICAL MASKS, KN95 MASKS AND RESPIRATORS FOR SOURCE CONTROL OF EXHALED VIRAL BURDENS AMONG VOLUNTEERS PATIENTS WITH COVID-19 INFECTIONS SHOWED THAT ALL MASKS AND RESPIRATORS SIGNIFICANTLY REDUCED EXHALED VIRAL LOAD, WITHOUT FIT TESTS OR TRAINING, BUT N95 RESPIRATORS OUTPERFORMED ALL OTHERS SIGNIFICANTLY.

[https://www.thelancet.com/pdfs/journals/ebiom/PIIS2352-3964\(24\)00192-0.pdf](https://www.thelancet.com/pdfs/journals/ebiom/PIIS2352-3964(24)00192-0.pdf)

A PAPER IN *NATURE COMMUNICATIONS* EVALUATED THE SAFETY, IMMUNOGENICITY AND EFFICACY OF THE SELF-AMPLIFYING mRNA ARCT-154 COVID-19 VACCINE: IN POOLED PHASE 1, 2, 3A AND 3B RANDOMIZED, CONTROLLED TRIALS, FINDING THE EFFICACY TO BE 56.6% AGAINST SARS-CoV-2 INFECTION AND 95.3% AGAINST SEVERE COVID-19.

<https://www.nature.com/articles/s41467-024-47905-1>

A STUDY PUBLISHED IN *NATURE* DESCRIBES A NEW ANTIBIOTIC (LOLAMICIN) THAT HAS ACTIVITY AGAINST A PANEL OF MORE THAN 130 MULTIDRUG-RESISTANT GRAM-NEGATIVE CLINICAL ISOLATES, WHILE SPARING THE NORMAL GUT FLORA.

<https://www.nature.com/articles/s41586-024-07502-0>

A PAPER IN *THE LANCET MICROBE* FOUND THAT PATIENTS ADMITTED TO HOSPITAL WITH LESS FAVORABLE 5-DAY BIOMARKER TRAJECTORIES (I.E., LOW ANTI-NUCLEOCAPSID ANTIBODY, HIGH PLASMA NUCLEOCAPSID ANTIGEN, AND HIGH INFLAMMATORY MARKERS OVER THE FIRST 5 DAYS) HAD WORSE PROGNOSSES, IDENTIFYING PATIENTS THAT MIGHT BENEFIT FROM ESCALATION OF ANTIVIRAL OR ANTI-INFLAMMATORY TREATMENT.

[https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247\(24\)00015-6/fulltext](https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247(24)00015-6/fulltext)

A STUDY OF 35 CALIFORNIA HOSPITALS AND NURSING HOME PUBLISHED IN *JAMA*, FOUND THAT CHLORHEXIDINE BATHING AND NASAL DECOLONIZATION WERE ASSOCIATED WITH SIGNIFICANTLY LOWER PREVALENCE OF MULTIPLY-DRUG-RESISTANT ORGANISMS AND INCIDENT POSITIVE MDRO CLINICAL CULTURES. INFECTION-RELATED HOSPITALIZATIONS, ASSOCIATED COSTS, AND DEATHS AMONG NURSING HOME RESIDENTS ALSO DECREASED.

https://jamanetwork.com/journals/jama/article-abstract/2817010?guestAccessKey=1ab8a4e5-5318-46b5-b5f9-f546b8955de2&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jama&utm_content=etoc&utm_term=051424&utm_adv=001602730367

A STUDY PUBLISHED IN *PEDIATRICS* FOUND THAT, AMONG 3,082,626 COVID-19 DIAGNOSES IN 2,949,118 CHILDREN BETWEEN MARCH 7, 2020, AND DECEMBER 31, 2022. HYDROXYCHLOROQUINE (HCQ) AND IVERMECTIN WERE PRESCRIBED IN 0.03% AND 0.14% OF COVID-19 CASES 22%.

https://publications.aap.org/pediatrics/article/153/6/e2023065003/197250/Prescribing-Patterns-of-Nonrecommended-Medications?autologincheck=redirected#xd_co_f=YjdlMmFhMmEtN2QzMS00TFkLTlhYmItZWQyNDk3OTY5MzM5~

REFERENCES – TOWN HALL 97 – 6-9-2024 (CONTINUED)

A STUDY FROM HONG KONG, PUBLISHED IN *THE LANCET INFECTIOUS DISEASES* FOUND THE ADMINISTRATION OF NIRMATRELVIR/RITONAVIR TO BE ASSOCIATED WITH SIGNIFICANT REDUCTIONS IN RISKS FOR POST-ACUTE MORTALITY AND THE OCCURRENCE OF 13 POST-ACUTE SEQUELAE AMONG PATIENTS WITH COVID ADMITTED TO HOSPITALS IN HONG KONG.

<https://www.sciencedirect.com/science/article/pii/S1473309924002172?via%3Dihub>

A STUDY IN THE *JAMA* OF US VETERANS' ADMINISTRATION PATIENTS FOUND THAT IN FALL-WINTER 2023-2024, THE RISK OF DEATH IN PATIENTS HOSPITALIZED FOR COVID-19 WAS GREATER THAN THE RISK OF DEATH IN PATIENTS HOSPITALIZED FOR SEASONAL INFLUENZA. IN 2022-23 THE DEATH RATE AT 30 DAYS WAS 5.97% FOR COVID AND 3.75% FOR INFLUENZA; IN 2023-24 THE DEATH RATE FOR COVID WAS 5.70% AND 4.24% FOR INFLUENZA.

https://jamanetwork.com/journals/jama/fullarticle/2818660?guestAccessKey=93f528fc-1bca-4689-9674-6e24a9298d41&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jama&utm_content=olf&utm_term=051524&adv=001602730367

A STUDY OF COVID-VACCINE-RELATED POSTINGS ON X (PREVIOUSLY TWITTER) PUBLISHED IN *JAMA* RECOMMENDED THAT HEALTHCARE PROFESSIONALS ADD 'COMMUNITY NOTES' TO POSTS THAT PROVIDE MISINFORMATION ABOUT ADVERSE EVENTS AND CONSPIRACY.

https://jamanetwork.com/journals/jama/fullarticle/2818054?guestAccessKey=456341b2-558a-4dcd-993f-801cb2e0f6d8&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jama&utm_content=etoc&utm_term=052124&utm_adv=001602730367

ASTRAZENECA ISSUED A PRESS RELEASE NOTING THAT ITS INVESTIGATIONAL LONG-ACTING MONOCLONAL, SIPAVIBART, MET ITS PRIMARY ENDPOINT IN THE SUPERNOVA TRIAL (I.E., PREVENTING COVID-19 IN IMMUNOCOMPROMISED PATIENTS).

https://www.astrazeneca.com/media-centre/press-releases/2024/supernova-trial-met-covid-19-prevention-endpoint.html#xd_co_f=N2MxMGQ5MWMtMWUxNS00OWU0LTg5MzltYmRlOTcyYmMyMDMy~

A STUDY PUBLISHED IN *INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY* PROVIDED A COMPARATIVE ANALYSIS OF SAMPLING AND DETECTION METHODS FOR FUNGAL CONTAMINATION ON COMMON HEALTHCARE ENVIRONMENT SURFACE MATERIALS FINDING THAT THAT SPONGE SAMPLING AND QPCR DETECTION PERFORMED BEST.

<https://www.cambridge.org/core/journals/infection-control-and-hospital-epidemiology/article/comparative-analysis-of-sampling-and-detection-methods-for-fungal-contamination-on-common-healthcare-environment-surface-materials/AB5EA34C6446570D19D6AE61163A98A0>

A STUDY PUBLISHED IN *JAMA PEDIATRICS* ASKED IF THE COVID-19 PANDEMIC WAS ASSOCIATED WITH CHANGES IN CHILDREN'S DEVELOPMENTAL MILESTONE ATTAINMENT AND FOUND VERY MODEST DECREASES; THE AUTHORS CONCLUDE THE RESULTS PROVIDE SUPPORT FOR CAUTIOUS OPTIMISM .

https://jamanetwork.com/journals/jamapediatrics/fullarticle/2817955?guestAccessKey=4bbbfbff-af5e-4b56-b0a3-a73daf32f358&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamapediatrics&utm_content=etoc&utm_term=060424&utm_adv=001602730367

REFERENCES – TOWN HALL 97 – 6-9-2024 (CONTINUED)

AN INTERNET-BASED SURVEY STUDY PUBLISHED IN *BMC INFECTIOUS DISEASES* FOUND THAT EARLY UPTAKE OF COVID-19 VACCINES WAS ASSOCIATED WITH OLDER AGE, GREATER NUMERACY SKILLS, HIGHER COVID-19 RISK PERCEPTIONS, AND POSITIVE ATTITUDES TOWARDS COVID-19 VACCINES, WHILE LATER VACCINE UPTAKE WAS CHARACTERIZED BY OLDER AGE, POSITIVE ATTITUDES TOWARDS COVID-19 VACCINES. YOUNGER AGE, NEGATIVE ATTITUDES TOWARDS COVID-19 VACCINES, LOW TRUST IN HEALTHCARE, AND MEDICAL MINIMIZING, WERE PREDICTORS OF BEING UNVACCINATED AND NOT RECEIVING A COVID-19 VACCINE.

https://bmcinfectdis.biomedcentral.com/articles/10.1186/s12879-024-09148-9#xd_co_f=YjdlMmFhMmEtN2QzMS000TFkLTlhYmItZWQyNDk3OTY5MzM5~

A PAPER PUBLISHED IN *JAMA NETWORK OPEN* DESCRIBES A CROSS-SECTIONAL STUDY THAT CONCLUDES THAT COVID-19 SURGES WERE ASSOCIATED WITH DECLINES IN HOSPITAL QUALITY, HIGHLIGHTING THE IMPORTANCE OF IDENTIFYING AND IMPLEMENTING STRATEGIES TO MAINTAIN CARE QUALITY DURING PERIODS OF HIGH HOSPITAL USE.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2819251?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=052424&adv=001602730367

A PAPER PUBLISHED IN *JAMA INTERNAL MEDICINE* DESCRIBES A STUDY THAT EVALUATED THE FREQUENCY AND SEVERITY OF ACUTE CARDIAC EVENTS AMONG ADULTS 50 YEARS AND OLDER ADMITTED WITH LABORATORY CONFIRMED RSV INFECTION – THE STUDY FOUND THAT ACUTE CARDIAC EVENTS ARE COMMON AND ARE ASSOCIATED WITH SEVERE CLINICAL OUTCOMES.

https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2817609?guestAccessKey=285ee8bf-6c87-45ff-9cac-6c3019c30221&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamainternalmedicine&utm_content=etoc&utm_term=06042024&utm_adv=001602730367

AN EDITORIAL ACCOMPANYING THIS PAPER IN *JAMA INTERNAL MEDICINE* EMPHASIZES THAT THE ‘JUICE’ OF RSV VACCINATION OF OLDER ADULTS IS TRULY ‘WORTH THE SQUEEZE’.

<https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2817612>

A STUDY PUBLISHED IN *INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY* EVALUATED THE CHARACTERISTICS OF HEALTHCARE PERSONNEL WHO ACQUIRED SARS-CoV-2 INFECTION AT 10 EMERGING INFECTIONS PROGRAM SITES IN THE UNITED STATES RECOMMENDED THAT INTERVENTIONS BE SPECIFIC TO HCP ROLES AND EDUCATIONAL BACKGROUNDS.

<https://www.cambridge.org/core/services/aop-cambridge-core/content/view/6AA96DB1287C963FDD6F3E418B2A338F/S0899823X24000710a.pdf/characteristics-of-healthcare-personnel-with-sars-cov-2-infection-10-emerging-infections-program-sites-in-the-united-states-april-2020-december-2021.pdf>

THE VACCINES AND RELATED BIOLOGICS PRODUCTS ADVISORY COMMITTEE (VRBPAC) OF THE FDA RECOMMENDED BASING THE FALL COVID-19 VACCINE ON THE JN.1 COVID-19 STRAIN.

<https://www.fda.gov/media/169378/download>