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

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

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 MULTIPY-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=YjdIMmFmMmEtN2QzMS00OTFkLTlhYmItZWQyNDk3OTY5MzM5~
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.


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=93f528f cre-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


https://www.astrazeneca.com/media-centre/press-releases/2024/supernova-trial-met-covid-19-prevention-endpoint.html#xd_co_f=N2MxMGQ5MWMtMWUxNS00OWU0LTg5MzItYmRIOTcyYmMyMDMy~

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 SPONGE SAMPLING AND qPCR DETECTION PERFORMED BEST.


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.

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.


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

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

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.


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