REFERENCES – TOWN HALL 98 – 7-21-2024

AN OPINION PIECE IN *The New England Journal of Medicine* discusses the debate about 'academic freedom' engendered by controversial statements about **COVID** made by a Stanford faculty member in 2020, that were viewed as possibly endangering the public health. The authors of this opinion piece argue that it is reasonable for an institution to speak out publicly when it concludes that a faculty member's opinion could cause public harm.

https://www.nejm.org/doi/10.1056/NEJMp2314430?url ver=Z39.88-2003&rfr id=ori:rid:crossref.org&rfr dat=cr pub%20%200pubmed

A PAPER IN *Lancet's eClinical Medicine* evaluated the effect of digitalizing the contact tracing process. The authors conclude that digitalization improved exposure notification and facilitated the tracing of a greater number of contacts of individuals infected with SARS-CoV-2 in a resource-limited setting.

https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(24)00309-2/fulltext

AN EDITORIAL PUBLISHED IN *Lancet's eBioMedicine* discusses the current state of knowledge about the so-called brain fog and severe fatigue associated with long **COVID**.

https://www.thelancet.com/journals/ebiom/article/PIIS2352-3964(24)00288-3/fulltext

A LETTER TO THE EDITOR IN *LANCET INFECTIOUS DISEASES* DESCRIBES THE VIROLOGICAL CHARACTERISTICS OF THE SARS-COV-2 KP.3, LB.1, AND KP.2.3 VARIANTS.

https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(24)00415-8/fulltext

A LARGE COHORT STUDY PUBLISHED IN JAMA NETWORK OPEN FOUND THAT, AMONG 3568 PATIENTS YOUNGER THAN 18 YEARS HOSPITALIZED WITH ACUTE SARS-CoV-2 OR MIS-C, SEVERE NEUROLOGICAL MANIFESTATIONS, INCLUDING ACUTE ENCEPHALOPATHY, SEIZURES OR STATUS EPILEPTICUS, AND DELIRIUM, WERE COMMON AND WERE ASSOCIATED WITH NEW NEUROCOGNITIVE OR FUNCTIONAL MORBIDITY AT HOSPITAL DISCHARGE.

> https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2819749?utm_source =silverchair&utm_medium=email&utm_campaign=article_alertjamanetworkopen&utm_content=wklyforyou&utm_term=061224&adv=001602730367

A MULTICENTER, CLUSTER-RANDOMIZED, INVESTIGATOR-MASKED, CROSSOVER, NONINFERIORITY TRIAL COMPARED PREOPERATIVE SKIN PREPARATION WITH POVIDONE IODINE IN ALCOHOL WITH CHLORHEXIDINE GLUCONATE IN ALCOHOL. PUBLISHED IN *JAMA* FOUND THAT POVIDONE IODINE IN ALCOHOL AS PREOPERATIVE SKIN ANTISEPSIS WAS NONINFERIOR TO CHLORHEXIDINE GLUCONATE IN ALCOHOL IN PREVENTING **SSI**S AFTER CARDIAC OR ABDOMINAL SURGERY.

https://jamanetwork.com/journals/jama/article-abstract/2820168

RESULTS OF AN ELECTRONIC SURVEY OF STATE AND TERRITORIAL EPIDEMIOLOGISTS ON PUBLIC HEALTH PRACTICES FOR A(H5N1) VIRUS FOUND THAT PUBLIC HEALTH AUTHORITIES IN NEARLY ALL STATES AND TERRITORIES REPORTED THE ABILITY TO MONITOR AND TEST PERSONS EXPOSED TO HPAI A(H5N1) VIRUS. JURISDICTIONS VARIED IN THEIR CAPACITY TO MONITOR EXPOSED PERSONS, IN RECOMMENDATIONS FOR USE OF ANTIVIRALS, AND IN POTENTIAL USE OF H5N1 VACCINES, IF AVAILABLE, AMONG FIRST RESPONDERS.

https://jamanetwork.com/journals/jama/fullarticle/2819159?guestAccessKey=a449cee d-04ba-4709-8df5-

2386d9f26287&utm source=silverchair&utm medium=email&utm campaign=article ale rt-jama&utm content=etoc&utm term=061824&utm adv=001602730367

REFERENCES – TOWN HALL 98 – 7-21-2024 (CONTINUED)

A SERIES OF FIVE PAPERS PUBLISHED IN *INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY* PROVIDES SHEA SOCIETAL POSITION STATEMENTS ON SEVERAL ASPECTS OF PANDEMIC PREPAREDNESS FOR POLICYMAKERS.

https://www.cambridge.org/core/journals/infection-control-and-hospitalepidemiology/article/shea-position-statement-on-pandemic-preparedness-forpolicymakers-introduction-and-overview/90C4E6A81D5398992D6EBA7EE74F72E5

https://www.cambridge.org/core/journals/infection-control-and-hospitalepidemiology/article/shea-position-statement-on-pandemic-preparedness-forpolicymakers-the-role-of-healthcare-epidemiologists-in-communicating-duringinfectious-diseases-outbreaks/E3E5DC0D80217706224A14A334EC139E

https://www.cambridge.org/core/journals/infection-control-and-hospitalepidemiology/article/shea-position-statement-on-pandemic-preparedness-forpolicymakers-pandemic-data-collection-maintenance-andrelease/10EA30B743F0F4A3FB44F423BBACFF5F

https://www.cambridge.org/core/journals/infection-control-and-hospitalepidemiology/article/society-for-healthcare-epidemiology-of-america-positionstatement-on-pandemic-preparedness-for-policymakers-mitigating-supplyshortages/D015E7174B11FA851D575F8BE5484E1B

https://www.cambridge.org/core/journals/infection-control-and-hospitalepidemiology/article/shea-position-statement-on-pandemic-preparedness-forpolicymakers-building-a-strong-and-resilient-healthcareworkforce/BE012F9BE964E3BEFDA075DAD8613343

A PAPER IN *JAMA Pediatrics* evaluating 451,443 infants from 322 NICUs provides estimated incidence rates, clinical characteristics, and attributable mortality of hospital-onset bacteremia among infants in neonatal intensive care unit. The study found that hospital-onset bacteremia conferred a significant absolute increase in attributable mortality.

https://jamanetwork.com/journals/jamapediatrics/fullarticle/2819783?guestAccessKe y=c41319af-4c04-4c03-8998-

<u>5b18402ec1ff&utm source=silverchair&utm medium=email&utm campaign=article ale</u> <u>rt-jamapediatrics&utm content=olf&utm term=062424&adv=001602730367</u>

A STUDY IN *Clinical Infectious Diseases* of patients being treated for infection with multidrugresistant Pseudomonas aeruginosa bacteremia or pneumonia found those treated with ceftazidime-avibactam were more likely to develop resistance than those treated with ceftolozane-tazobactam.

> https://academic.oup.com/cid/advancearticle/doi/10.1093/cid/ciae332/7696822?login=false#

REFERENCES - TOWN HALL 98 - 7-21-2024 (CONTINUED)

A COHORT STUDY OF **311** OLDER ADULTS HOSPITALIZED FOR ACUTE **COVID-19** ILLNESS PUBLISHED IN *JAMA Network Open* found that in-hospital delirium was associated with both functional disability and cognitive impairment over the 6 months after hospital discharge.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2820671?utm_source=sil verchair&utm_medium=email&utm_campaign=article_alertjamanetworkopen&utm_content=wklyforyou&utm_term=070324&adv=001602730367

A STUDY PUBLISHED IN *The Annals of Internal Medicine* reported that short-term systemic side effects of **SARS-CoV-2** mRNA vaccination were associated with greater long-lasting neutralizing antibody responses.

https://www.acpjournals.org/doi/10.7326/M23-2956#:~:text=Conclusion%3A-,Convergent%20self%2Dreport%20and%20objective%20biometric%20findings%20indicat e%20that%20short,a%20barrier%20to%20vaccine%20uptake.

A STUDY OF YOUTH WITH PRESYMPTOMATIC TYPE **1** DIABETES PUBLISHED IN *JAMA* REPORTED **COVID** INFECTION WAS ASSOCIATED WITH ACCELERATED PROGRESSION TO CLINICAL TYPE **1** DISEASE.

https://jamanetwork.com/journals/jama/fullarticle/2821151?guestAccessKey=35dc69aba9cc-44f8-89fc-

f1c899f52c8b&utm source=silverchair&utm medium=email&utm campaign=article alertjama&utm content=olf&utm term=071524&adv=001602730367