

REFERENCES – TOWN HALL 99 – 8-11-2024

RESULTS OF A PLACEBO-CONTROLLED CLINICAL TRIAL PUBLISHED IN *THE NEW ENGLAND JOURNAL OF MEDICINE* FOUND THAT ORAL NIRMATRELVIR–RITONAVIR (PAXLOVID) WAS INEFFECTIVE WHEN ADMINISTERED AS POSTEXPOSURE PROPHYLAXIS FOR COVID-19.

https://www.nejm.org/doi/10.1056/NEJMoa2309002?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20%20pubmed

A SYSTEMATIC REVIEW AND META-ANALYSIS PUBLISHED IN *JAMA NETWORK OPEN* FOUND THAT 18.3% OF PHYSICIANS REPORTED SYMPTOMS CONSISTENT WITH PTSD DURING THE COVID-19 PANDEMIC, WITH A HIGHER RISK IN FEMALE PHYSICIANS, OLDER PHYSICIANS, AND TRAINEES, AND WITH VARIATION BY SPECIALTY.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2821460?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=072424&adv=001602730367

ANOTHER STUDY PUBLISHED IN THE SAME ISSUE OF *JAMA NETWORK OPEN* FOUND NO ASSOCIATION OF SARS-CoV-2 INFECTION WITH THE SUBSEQUENT APPEARANCE OF MYALGIC ENCEPHALOMYELITIS/CHRONIC FATIGUE SYNDROME.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2821459?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=072424&adv=001602730367

A *NEW ENGLAND JOURNAL OF MEDICINE* STUDY DESCRIBES THE OCCURRENCE OF POST-ACUTE SEQUELAE (PARTICULARLY FOCUSING ON LONG-COVID) OF SARS-CoV-2 INFECTION AMONG VETERANS' ADMINISTRATION PATIENTS IN THE PRE-DELTA, DELTA, AND OMICRON ERAS AND FOUND THAT THE CUMULATIVE INCIDENCE OF POST-ACUTE SEQUELAE DURING THE FIRST YEAR AFTER SARS-CoV-2 INFECTION DECREASED OVER THE COURSE OF THE PANDEMIC.

<https://www.nejm.org/doi/full/10.1056/NEJMoa2403211>

A RETROSPECTIVE STUDY PUBLISHED IN *SCIENCE TRANSLATIONAL MEDICINE* FOUND THAT IMMUNITY FROM PRIOR SARS-CoV-2 INFECTION BUT NOT COVID-19 VACCINATION WAS ASSOCIATED WITH LOWER ENDEMIC CORONAVIRUS INCIDENCE.

https://www.science.org/doi/10.1126/scitranslmed.ado7588?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20%20pubmed

A PAPER IN *JAMA HEALTH FORUM* EVALUATED THE EFFECT OF STATE RESTRICTIONS DURING THE PANDEMIC ON DEATHS FROM COVID, FINDING THAT STRINGENT COVID-19 RESTRICTIONS WERE ASSOCIATED WITH SUBSTANTIAL DECREASES IN EXCESS DEATHS DURING THE PANDEMIC.

https://jamanetwork.com/journals/jama-health-forum/fullarticle/2821581?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=072624&adv=001602730367

A PAPER IN *CLINICAL INFECTIOUS DISEASES* FOUND THAT FOR COVID-19 PATIENTS REQUIRING OXYGEN SUPPORT REMDESIVIR PLUS STANDARD OF CARE TREATMENT WAS ASSOCIATED WITH A 54% LOWER MORTALITY RISK AND SHORTER HOSPITAL STAYS COMPARED WITH STANDARD OF CARE TREATMENT ALONE.

https://academic.oup.com/cid/advance-article-abstract/doi/10.1093/cid/ciae336/7699414?redirectedFrom=fulltext&login=false#xd_cof=YzUxMWFjM2EtZTNkNS00YWVhLTkxNTYtNGU3Y2M2ZjhmNGI3~

REFERENCES – TOWN HALL 99 – 8-11-2024 (CONTINUED)

A PAPER PUBLISHED IN THE *NEW ENGLAND JOURNAL OF MEDICINE* DESCRIBED THE RESULTS OF A COMPARATIVE STUDY IN SOUTH AFRICA AND UGANDA THAT DEMONSTRATED THAT THE NEW, LONG-ACTING ANTI-RETROVIRAL AGENT, LENACAPAVIR, WAS FAR SUPERIOR TO BOTH DAILY ADMINISTERED ORAL EMTRICITABINE–TENOFIVIR ALAFENAMIDE AND DAILY ADMINISTERED EMTRICITABINE–TENOFIVIR DISOPROXIL FUMARATE. IN FACT, NO INFECTIONS WERE DETECTED IN THE LENACAPAVIR ARM OF THE STUDY.

<https://www.nejm.org/doi/10.1056/NEJMoa2407001>

RESULTS OF A FIFTY-STATE (PLUS THE DISTRICT OF COLUMBIA) SURVEY OF 443,455 SURVEY RESPONDENTS PUBLISHED IN *JAMA NETWORK OPEN* FOUND THAT TRUST IN PHYSICIANS AMONG RESPONDENTS DECREASED SUBSTANTIALLY FROM 2020 TO 2024. LOWER LEVELS OF TRUST WERE ASSOCIATED WITH LESSER LIKELIHOOD OF PURSUING VACCINATION.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2821693?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=073124&adv=001602730367

A PAPER IN *JAMA NETWORK OPEN* EVALUATED MASKING POLICIES AT NATIONAL CANCER INSTITUTE–DESIGNATED CANCER CENTERS DURING THE WINTER 2023 TO 2024 COVID-19 SURGE AND FOUND THAT UNIVERSAL MASKING PRECAUTIONS WERE COMMON AT NCI-DESIGNATED CANCER CENTERS DURING THE 2023 -2024 SURGE, ESPECIALLY AT MORE ESTABLISHED, BETTER-FUNDED, AND HIGHER-RANKED CENTERS.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2821699?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=073124&adv=001602730367

A STUDY PUBLISHED IN *JAMA INTERNAL MEDICINE* FOUND THAT THE UPDATED, BNT162B2.XBB VACCINE PROVIDED STATISTICALLY SIGNIFICANT ADDITIONAL PROTECTION AGAINST A RANGE OF COVID-19 OUTCOMES DURING THE EARLY PART OF THE 2023 TO 2024 VIRAL RESPIRATORY SEASON. OLDER VERSIONS OF COVID-19 VACCINES OFFERED LITTLE, IF ANY, ADDITIONAL PROTECTION.

https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2820268?guestAccessKey=a1fe760b-6ef1-444c-bf23-4b66ca04c840&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamainternalmedicine&utm_content=etoc&utm_term=080624&utm_adv=001602730367

RESULTS OF A MULTISITE COHORT STUDY PUBLISHED IN *JAMA PEDIATRICS* FOUND THAT AMONG, AMONG LIVE-BORN INFANTS, FIRST-TRIMESTER mRNA COVID-19 VACCINE EXPOSURE WAS NOT ASSOCIATED WITH AN INCREASED RISK FOR SELECTED MAJOR STRUCTURAL BIRTH DEFECTS.

https://jamanetwork.com/journals/jamapediatrics/fullarticle/2820610?guestAccessKey=e07066e1-2c60-4b1a-b09a-da54e99081e1&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamapediatrics&utm_content=etoc&utm_term=080624&utm_adv=001602730367

A PAPER PUBLISHED IN *NATURE AGING* REPORTED THAT PRIMARY VACCINATION WITH AN ADENOVIRUS-BASED VACCINE WITH AN mRNA VACCINE PROMOTES SUSTAINED IMMUNOLOGICAL MEMORY IN OLDER ADULTS AND POTENTIALLY CONFERS OPTIMAL PROTECTION AGAINST CORONAVIRUS DISEASE 2019.

<https://pubmed.ncbi.nlm.nih.gov/38918602/>

A ‘PERSPECTIVES PIECE’ PUBLISHED IN *THE NEW ENGLAND JOURNAL OF MEDICINE* SUGGESTS THAT WE HAVE NOT LEARNED FROM THE COVID PANDEMIC, FURTHER SUGGESTING THAT THAT THE GOVERNMENT’S INITIAL RESPONSE TO THE LOOMING SPECTER OF H5N1 INFLUENZA SUGGESTS THAT OFFICIALS AND KEY DECISION MAKERS MAY BE RELYING ON “A DANGEROUS TYPE OF REVISIONISM,” SHOULD H5N1 CAUSE A PANDEMIC.

<https://www.nejm.org/doi/full/10.1056/NEJMp2406427>

REFERENCES – TOWN HALL 99 – 8-11-2024 (CONTINUED)

A PAPER PUBLISHED IN *OPEN FORUM INFECTIOUS DISEASES* FOUND THAT PATIENTS WITH HEMATOLOGIC MALIGNANCIES HAD PERSISTENTLY ELEVATED SARS-CoV-2 VIRAL TIERS COMPARED WITH IMMUNOSUPPRESSED PATIENTS WHO HAVE SOLID TUMORS.

https://academic.oup.com/ofid/article/11/7/ofae367/7701491?login=false#xd_co_f=ZjZj0DYxMmUtMmRiZS00YmUwLThkZDMtYWJmMjhiZGM3MmU0~

A PAPER PUBLISHED THURSDAY IN *SCIENCE* DEMONSTRATED THE EFFICACY OF DEFECTIVE VIRUSES (SO-CALLED THERAPEUTIC INTERFERING PARTICLES [TIPs]) IN SUPPRESSING HIV REPLICATION IN DONATED HIV-INFECTED HUMAN CELLS, IN HUMANIZED MICE, AND IN NONHUMAN PRIMATES INFECTED WITH HIV, WITH TIP PERSISTENCE IN THE PRIMATES FOR AT LEAST 30 WEEKS – OPENING THE DOOR TO A NEW APPROACH TO HIV THERAPY.

<https://www.science.org/doi/10.1126/science.adn5866>

A PAPER PUBLISHED THIS WEEK IN *JAMA* FROM THE NATIONAL CENTER FOR HEALTH STATISTICS (DISCUSSED EARLIER IN THE OVERVIEW) DEMONSTRATED THAT WHILE COVID-19 WAS THE THIRD LEADING CAUSE OF DEATH IN THE US IN 2020-2021, BY 2023, COVID-19 HAD FALLEN TO NUMBER TEN ON THE LIST OF LEADING CAUSES OF DEATH.

https://jamanetwork.com/journals/jama/fullarticle/2822207?guestAccessKey=0741c218-d03f-4de3-b2ac-f1a385b90c5d&utm_source=silverchair&utm_medium=email&utm_campaign=content_max-jama-health-forum&utm_content=olf&utm_term=080924&utm_adv=001602730367