References – Town Hall 100 – 9-15-2024

A study of host immunophenotypes published in *eBioMedicine* found that the Casirivimab + Imdevimab monoclonal antibody preparation (prior to the prior to the emergence of Delta and Omicron) induced anti-inflammatory effect, without an evident impairment of cellular antiviral immunity.

https://www.thelancet.com/journals/ebiom/article/PIIS2352-3964(24)00370-0/fulltext

Another study published in *eBioMedicine* assessed the immunologic responses to vaccination and SARS-CoV-2 infection of patients who have inflammatory bowel disease and arthritis who were receiving tumor necrosis factor inhibitors. Following three vaccine doses these patients had T cell responses comparable to healthy controls, despite attenuated humoral responses. Repeated vaccination and breakthrough infection increased the quality of T cell responses.

https://www.thelancet.com/journals/ebiom/article/PIIS2352-3964(24)00353-0/fulltext

Results of a randomized, controlled trial published in *The Lancet Infectious Diseases* found that patients treated with Molnupiravir, felt better, experienced fewer and less severe COVID-19 associated symptoms, accessed health care less often, and took less time off work at 6 months than patients receiving standard care without Molnupiravir.

https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(24)00431-6/fulltext

A *Science Advances* paper describes efficacy of a new class of antiviral agents, SARS-CoV-2 papain-like protease inhibitors, that demonstrated efficacy in a murine model of COVID.

https://www.science.org/doi/10.1126/sciadv.ado4288

A paper from *The Annals of Internal Medicine* evaluated whether hospital type, classified by capabilities and resources, influenced COVID-19 volume–outcome relationships during Delta wave surges and found that comparably detrimental relationships between COVID-19 caseload and survival were seen across all hospital types.

https://www.acpjournals.org/doi/10.7326/M24-0869

Another paper in *The Annals of Internal Medicine* found no evidence that any of 25 routine laboratory studies could serve as a clinically useful biomarker for postacute sequelae of SARS-CoV-2 infection.

https://www.acpjournals.org/doi/10.7326/M24-0737

A study from CDC published in *Clinical Infectious Diseases* found that breakthrough cases of measles cases tended to have milder disease with fewer complications. A small proportion of breakthrough infections were due to primary vaccine failure.

https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciae470/7756619?searchresult=1

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A PAPER AND AN EDITORIAL PUBLISHED IN *CLINICAL INFECTIOUS DISEASE* RAISE THE POSSIBILITY THAT METFORMIN MAY HAVE BENEFIT IN THE TREATMENT OF SARS-COV-2 INFECTION. BOTH PAPERS FALL SHORT OF PROVIDING DEFINITIVE EVIDENCE OF EFFICACY; HOWEVER, ANOTHER LARGER PROSPECTIVE TRIAL IS UNDERWAY.

https://academic.oup.com/cid/article/79/2/354/7660393

https://academic.oup.com/cid/article/79/2/292/7659664

A CDC *HEALTH ALERT NETWORK* POSTING FROM AUGUST 13 WARNED OF A DRAMATIC INCREASE IN HUMAN PARVOVIRUS B19 ACTIVITY IN THE UNITED STATES

https://emergency.cdc.gov/han/2024/han00514.asp

A SECOND CDC *HEALTH ALERT NETWORK* POSTING FROM AUGUST 16 WARNED OF AN INCREASE IN OROPOUCHE ACTIVITY IN SOUTH AND CENTRAL AMERICA, AS WELL AS IN CUBA

https://emergency.cdc.gov/han/2024/han00515.asp

A CDC *NEWSROOM RELEASE* POSTING FROM AUGUST 16 CONFIRMED AN H5N1 INFLUENZA INFECTION IN A MISSOURI RESIDENT WHO HAD NO IMMEDIATE KNOWN ANIMAL EXPOSURE.

https://www.cdc.gov/media/releases/2024/s0906-birdflu-case-missouri.html

A STUDY PUBLISHED IN *JAMA NETWORK OPEN* AND AN ACCOMPANYING EDITORIAL FOUND THAT STATE COVID-19 VACCINE MANDATES WERE ASSOCIATED WITH INCREASED VACCINE UPTAKE AMONG HCWS IN 2021.

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2822221?utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jamanetworkopen&utm_content=wklyforyou&utm_term=081424&adv=001602730367

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A PAPER PUBLISHED IN *JAMA* AND AN ACCOMPANYING EDITORIAL CHARACTERIZED LONG COVID IN CHILDREN AND ADOLESCENTS.

https://jamanetwork.com/journals/jama/fullarticle/2822770?guestAccessKey=7a4f6b29-ef83-475b-ad0b-729adf0eb75c&utm_source=silverchair&utm_campaign=jama_network&utm_content=ped_weekly_highlights&utm_medium=email&adv=001602730367

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A PAPER DESCRIBING FRENCH NATIONAL HEALTH SYSTEM DATA PUBLISHED IN *JAMA* EVALUATED ALL INDIVIDUALS AGED 12 TO 49 HOSPITALIZED FOR MYOCARDITIS BETWEEN DECEMBER 27, 2020, AND JUNE 30, 2022 AND FOUND THAT PATIENTS WITH POST–COVID-19 MRNA VACCINATION MYOCARDITIS, BUT NOT THOSE WHO HAD POST–COVID-19 MYOCARDITIS, SHOWED A LOWER FREQUENCY OF CARDIOVASCULAR COMPLICATIONS THAN THOSE WITH CONVENTIONAL MYOCARDITIS AT 18 MONTHS.

https://jamanetwork.com/journals/jama/article-abstract/2822933?guestAccessKey=1d06e736-f755-4b4d-82e2-f419da453857&utm_source=silverchair&utm_medium=email&utm_campaign=article_alert-jama&utm_content=olf&utm_term=082624&adv=001602730367

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AN FDA NEWS RELEASE ANNOUNCED THE APPROVAL AND AUTHORIZATION OF UPDATED MRNA COVID-19 VACCINES DESIGNED TO BETTER PROTECT AGAINST CONTEMPORANEOUS VARIANTS.

https://www.fda.gov/news-events/press-announcements/fda-approves-and-authorizes-updated-mrna-covid-19-vaccines-better-protect-against-currently

A *JAMA NETWORK OPEN PAPER* FOUND THAT AUTOIMMUNE SEQUELAE AFTER DELTA OR OMICRON SARS-COV-2 INFECTION SUGGESTED THAT BOOSTER VACCINATION MITIGATES THE RISK OF LONG-TERM AUTOIMMUNE SEQUELAE AFTER OMICRON VARIANT INFECTION.

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A REVIEW PUBLISHED IN JAMA PROVIDES DETAILED INFORMATION ABOUT THE PATHOPHYSIOLOGY, CLINICAL PRESENTATION, ASSESSMENT, DIAGNOSIS, TREATMENT, AND PROGNOSIS OF SCABIES, BEDBUG AND BODY LICE INFESTATIONS.

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