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Newsletter Scientifica COVID 19 & MEDICAL HUMANITIES

"Ogni parola ha conseguenze, ogni silenzio anche."

J.P. Sartre



Giuseppe Capogrossi - "Superficie" - 1969

Questa newsletter redatta dal Servizio Formazione e Sviluppo Risorse Umane della ASL BI in collaborazione con la Biblioteca Biomedica 3Bi, si rivolge ai professionisti sanitari impegnati nella fase di emergenza Covid-19. Fedeli alla filosofia che ha animato l'agire del nostro Servizio, la newsletter Covid 19 & Medical Humanities affianca alle risorse bibliografiche e agli articoli tratti dalle principali fonti istituzionali e scientifiche alcuni contributi che fanno riferimento alle discipline umanistiche. Crediamo nel valore generato dall'integrazione dei saperi e ci auguriamo che la pubblicazione incontri il vostro gradimento. Buona lettura!

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Newsletter



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Dott. NICOLO' ERRICA - Medico ASL BI e Consigliere Ordine dei Medici di Biella



Per ricercare la letteratura internazionale

La Biblioteca Virtuale per la Salute - Piemonte è uno strumento di supporto all'attività degli Operatori della sanità piemontese. La BVS-P offre periodici elettronici e banche dati agli operatori della sanità piemontese per consentire loro di ricercare progressi e significati nella letteratura scientifica, sui temi della salute e dell'ambiente. Inoltre si propone di promuovere la medicina basata sulle evidenze, e di contribuire alla formazione nel campo della ricerca bibliografica e della valutazione critica della letteratura scientifica.

Questa settimana Vi segnaliamo che nella sezione RISORSE - LIBRI del portale della BVS-P è presente la COLLEZIONE "ACCESS MEDICINE".



Collezione di e-books dell'editore McGraw-Hill Medical. Tra i titoli a disposizione troviamo Harrisons's Principles of Internal Medicine 19e, Cardiovascular Physiology 8e, Clinical Neurology, Family Medicine, Critical Care, etc.

Per accedere registrarsi a www.bvspiemonte.it

JAMA Netw Open. 2021 May 3;4(5):e2110071. doi: 10.1001/jamanetworkopen.2021.10071.

Estimation of Transmission of COVID-19 in Simulated Nursing Homes With Frequent Testing and Immunity-Based Staffing

Inga Holmdahl, Rebecca Kahn, James A Hay, Caroline O Buckee, Michael J Mina PMID: 33988707 DOI: 10.1001/jamanetworkopen.2021.10071

Abstract

Importance: Nursing homes and other long-term care facilities have been disproportionately impacted by the COVID-19 pandemic. Strategies are urgently needed to reduce transmission in these high-risk populations.

Objective: To evaluate COVID-19 transmission in nursing homes associated with contact-targeted interventions and testing.

Design, setting, and participants: This decision analytical modeling study developed an agent-based susceptible-exposed-infectious (asymptomatic/symptomatic)-recovered model between July and September 2020 to examine SARS-CoV-2 transmission in nursing homes. Residents and staff of a simulated nursing home with 100 residents and 100 staff split among 3 shifts were modeled individually; residents were split into 2 cohorts based on COVID-19 diagnosis. Data were analyzed from September to October 2020.

Exposures: In the resident cohorting intervention, residents who had recovered from COVID-19 were moved back from the COVID-19 (ie, infected with SARS-CoV-2) cohort to the non-COVID-19 (ie, susceptible and uninfected with SARS-CoV-2) cohort. In the immunity-based staffing intervention, staff who had recovered from COVID-19 were assumed to have protective immunity and were assigned to work in the non-COVID-19 cohort, while susceptible staff worked in the COVID-19 cohort and were assumed to have high levels of protection from personal protective equipment. These interventions aimed to reduce the fraction of people's contacts that were presumed susceptible (and therefore potentially infected) and replaced them with recovered (immune) contacts. A secondary aim of was to evaluate cumulative incidence of SARS-CoV-2 infections associated with 2 types of screening tests (ie, rapid antigen testing and polymerase chain reaction [PCR] testing) conducted with varying frequency.

Main outcomes and measures: Estimated cumulative incidence proportion of SARS-CoV-2 infection after 3 months.

Results: Among the simulated cohort of 100 residents and 100 staff members, frequency and type of testing were associated with smaller outbreaks than the cohorting and staffing interventions. The testing strategy associated with the greatest estimated reduction in infections was daily antigen testing, which reduced the mean cumulative incidence proportion by 49% in absence of contact-targeted interventions. Under all screening testing strategies, the resident cohorting intervention and the immunity-based staffing intervention were associated with reducing the final estimated size of the outbreak among residents, with the immunity-based staffing intervention reducing it more (eg, by 19% in the absence of testing) than the resident cohorting intervention (eg, by 8% in the absence of testing). The estimated reduction in transmission associated with these interventions among staff varied by testing strategy and community prevalence.

Conclusions and relevance: These findings suggest that increasing the frequency of screening testing of all residents and staff, or even staff alone, in nursing homes may reduce outbreaks in this high-risk setting. Immunity-based staffing may further reduce spread at little or no additional cost and becomes particularly important when daily testing is not feasible.

Soc Sci Med. 2021 May 11;279:114025. doi: 10.1016/j.socscimed.2021.114025. Online ahead of print.

Understanding at-the-moment stress for parents during COVID-19 stay-at-home restrictions

Bridget Freisthler, Paul J Gruenewald, Erin Tebben, Karla Shockley McCarthy, Jennifer Price Wolf

PMID: 34004571 DOI: 10.1016/j.socscimed.2021.114025

Abstract

Rationale: In spring 2020, many states in the United States enacted stay-at-home orders to limit the spread of COVID-19 and lessen effects on hospitals and health care workers. This required parents to act in new roles without much support. Although studies have asked parents about stress before and during the pandemic, none have examined how stress may have fluctuated throughout the day and the characteristics related to those daily changes.

Objective: Our study assesses how time-varying (e.g., presence of a focal child) and day-varying (e.g., weekend vs. weekday) factors were related to parents' level of stress.

Methods: We use Ecological Momentary Assessment to examine stress three times a day (10 a.m., 3 p.m., and 9 p.m.) for 14 days. We include two different dates hypothesized to be related to parents' stress levels: when Ohio announced schools would go virtual for the rest of the academic year and when most retail businesses were allowed to re-open. Our sample of 332 individuals, recruited via Facebook, Craigslist, and word of mouth, completed 13,360 of these brief surveys during April-May 2020. Data were analyzed using generalized ordered logit models.

Results: Parents report lower levels of stress when completing the 9 p.m. survey, but higher levels when they were at work, during weekdays (compared to weekends) or when they were with the focal child. COVID-19 milestone dates were not related to stress levels.

Conclusions: Parents need some form of respite (e.g. child care, child-only activities) to reduce stress, especially during the week when parents are juggling their outside employment and their child(ren)'s schooling. Providing parents with skills and tools to identify and reduce stress, such as apps monitoring heart rate or providing deep breathing techniques, may be one way of helping parents cope with extremely stressful situations.

Keywords: COVID-19; Ecological momentary assessment; Generalized ordered logit models; Parents; Stress.

Bollettino SIFO 2021;67(1):16-20. DOI 10.1704/3604.35834

Il ruolo del farmacista ospedaliero durante la campagna vaccinale contro il Covid-19

Denise Fiorentino, Irene Colasanto, Alessandra Varese, Sara Traina, Susanna Marzia Adele Giordano, Cecilia Bertiond, Marco Poggiu, Diana Iarina Toma, Francesco Cattel

S.C. Farmacia Ospedaliera, A.O.U. Città della Salute e della Scienza di Torino

La pandemia causata dalla diffusione del virus SARS-CoV-2 ha rappresentato e continua a rappresentare una sfida importante per il Servizio Sanitario, per l'economia e per la società a livello mondiale. Tale evento ha coinvolto diverse figure professionali, in particolare il personale sanitario impegnato in prima linea nella gestione dell'emergenza sanitaria, con ricadute sullo svolgimento delle attività lavorative di routine.

Nelle diverse realtà ospedaliere internazionali, il farmacista ospedaliero ha collaborato con il personale medico ed infermieristico al fine di garantire ai pazienti affetti da Covid-19 un adeguato accesso alle cure. In particolare, nei reparti destinati alla gestione di pazienti infettati dal virus SARS-CoV-2, il farmacista ospedaliero ha organizzato e gestito il corretto approvvigionamento delle scorte di medicinali, ha supportato il medico nella scelta di nuove terapie o di impieghi terapeutici alternativi rispetto a quelli autorizzati (off-label, uso terapeutico e arruolamento dei pazienti in protocolli sperimentali), monitorando la manifestazione di sospette reazioni avverse e l'identificazione di interazioni farmacologiche e infine ha fornito un servizio di counseling al momento del ricovero e alla dimissione del paziente.



Lancet Public Health. 2021 May 12;S2468-2667(21)00096-7. doi: 10.1016/S2468-2667(21)00096-7. Online ahead of print.

Effects of different types of written vaccination information on COVID-19 vaccine hesitancy in the UK (OCEANS-III): a single-blind, parallel-group, randomised controlled trial

Daniel Freeman, Bao Sheng Loe, Ly-Mee Yu, Jason Freeman, Andrew Chadwick, Cristian Vaccari, Milensu Shanyinde, Victoria Harris, Felicity Waite, Laina Rosebrock, Ariane Petit, Samantha Vanderslott, Stephan Lewandowsky, Michael Larkin, Stefania Innocenti, Andrew J Pollard, Helen McShane, Sinéad Lambe.

PMID: 33991482 PMCID: PMC8116130 DOI: 10.1016/S2468-2667(21)00096-7

Abstract

Background: The effectiveness of the COVID-19 vaccination programme depends on mass participation: the greater the number of people vaccinated, the less risk to the population.

Concise, persuasive messaging is crucial, particularly given substantial levels of vaccine hesitancy in the UK.

Our aim was to test which types of written information about COVID-19 vaccination, in addition to a statement of efficacy and safety, might increase vaccine acceptance.

Methods: For this single-blind, parallel-group, randomised controlled trial, we aimed to recruit 15 000 adults in the UK, who were quota sampled to be representative. Participants were randomly assigned equally across ten information conditions stratified by level of vaccine acceptance (willing, doubtful, or strongly hesitant). The control information condition comprised the safety and effectiveness statement taken from the UK National Health Service website; the remaining conditions addressed collective benefit, personal benefit, seriousness of the pandemic, and safety concerns. After online provision of vaccination information, participants completed the Oxford COVID-19 Vaccine Hesitancy Scale (outcome measure; score range 7-35) and the Oxford Vaccine Confidence and Complacency Scale (mediation measure). The primary outcome was willingness to be vaccinated.

Participants were analysed in the groups they were allocated. p values were adjusted for multiple comparisons. The study was registered with ISRCTN, ISRCTN37254291.

Findings: From Jan 19 to Feb 5, 2021, 15 014 adults were recruited. Vaccine hesitancy had reduced from 26.9% the previous year to 16.9%, so recruitment was extended to Feb 18 to recruit 3841 additional vaccine-hesitant adults. 12 463 (66.1%) participants were classified as willing, 2932 (15.6%) as doubtful, and 3460 (18.4%) as strongly hesitant (ie, report that they will avoid being vaccinated for as long as possible or will never get vaccinated). Information conditions did not alter COVID-19 vaccine hesitancy in those willing or doubtful (adjusted p values >0.70).

In those strongly hesitant, COVID-19 vaccine hesitancy was reduced, in comparison to the control condition, by personal benefit information (mean difference -1·49, 95% CI -2·16 to -0·82; adjusted p=0·0015), directly addressing safety concerns about speed of development (-0·91, -1·58 to -0·23; adjusted p=0·0261), and a combination of all information (-0·86, -1·53 to -0·18; adjusted p=0·0313). In those strongly hesitant, provision of personal benefit information reduced hesitancy to a greater extent than provision of information on the collective benefit of not personally getting ill (-0·97, 95% CI -1·64 to -0·30; adjusted p=0·0165) or the collective benefit of not transmitting the virus (-1·01, -1·68 to -0·35; adjusted p=0·0150). Ethnicity and gender were found to moderate information condition outcomes.

Interpretation: In the approximately 10% of the population who are strongly hesitant about COVID-19 vaccines, provision of information on personal benefit reduces hesitancy to a greater extent than information on collective benefits.

Where perception of risk from vaccines is most salient, decision making becomes centred on the personal.

As such, messaging that stresses the counterbalancing personal benefits is likely to prove most effective. The messaging from this study could be used in public health communications.

Going forwards, the study highlights the need for future health campaigns to engage with the public on the terrain that is most salient to them.

Funding: National Institute for Health Research (NIHR) Oxford Biomedical Research Centre and NIHR Oxford Health Biomedical Research Centre.



Nature. 2021 May 19. doi: 10.1038/s41586-021-03631-y. Online ahead of print.

Diverse Functional Autoantibodies in Patients with COVID-19

Eric Y Wang, Tianyang Mao, Jon Klein, Yile Dai, John D Huck, Jillian R Jaycox, Feimei Liu, Ting Zhou, Benjamin Israelow, Patrick Wong, Andreas Coppi, Carolina Lucas, Julio Silva, Ji Eun Oh, Eric Song, Emily S Perotti, Neil S Zheng, Suzanne Fischer, Melissa Campbell, John B Fournier, Anne L Wyllie, Chantal B F Vogels, Isabel M Ott, Chaney C Kalinich, Mary E Petrone, Anne E Watkins, Yale IMPACT Team; Charles Dela Cruz, Shelli F Farhadian, Wade L Schulz, Shuangge Ma, Nathan D Grubaugh, Albert I Ko, Akiko Iwasaki, Aaron M Ring

PMID: 34010947 DOI: 10.1038/s41586-021-03631-y

Abstract: COVID-19 manifests with a wide spectrum of clinical phenotypes that are characterized by exaggerated and misdirected host immune responses. While pathological innate immune activation is well documented in severe disease, the impact of autoantibodies on disease progression is less defined. Here, we used a high-throughput autoantibody (AAb) discovery technique called Rapid Extracellular Antigen Profiling (REAP) to screen a cohort of 194 SARS-CoV-2 infected COVID-19 patients and healthcare workers for autoantibodies against 2,770 extracellular and secreted proteins (the "exoproteome"). We found that COVID-19 patients exhibit dramatic increases in autoantibody reactivities compared to uninfected controls, with a high prevalence of autoantibodies against immunomodulatory proteins including cytokines, chemokines, complement components, and cell surface proteins. We established that these autoantibodies perturb immune function and impair virological control by inhibiting immunoreceptor signaling and by altering peripheral immune cell composition, and found that murine surrogates of these autoantibodies exacerbate disease severity in a mouse model of SARS-CoV-2 infection. Analysis of autoantibodies against tissue-associated antigens revealed associations with specific clinical characteristics and disease severity. In summary, these findings implicate a pathological role for exoproteome-

N Engl J Med. 2021 Apr 21. doi: 10.1056/NEJMoa2105000. Online ahead of print.

Vaccine Breakthrough Infections with SARS-CoV-2 Variants.

Ezgi Hacisuleyman, Caryn Hale, Yuhki Saito, Nathalie E Blachere, Marissa Bergh, Erin G Conlon, Dennis J Schaefer-Babajew, Justin DaSilva, Frauke Muecksch, Christian Gaebler, Richard Lifton, Michel C Nussenzweig, Theodora Hatziioannou, Paul D Bieniasz, Robert B Darnell.

PMID: 33882219 PMCID: PMC8117968 DOI: 10.1056/NEJMoa2105000

Abstract: Emerging variants of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) are of clinical concern. In a cohort of 417 persons who had received the second dose of BNT162b2 (Pfizer-BioNTech) or mRNA-1273 (Moderna) vaccine at least 2 weeks previously, we identified 2 women with vaccine breakthrough infection.

Despite evidence of vaccine efficacy in both women, symptoms of coronavirus disease 2019 developed, and they tested positive for SARS-CoV-2 by polymerase-chain-reaction testing.

Viral sequencing revealed variants of likely clinical importance, including E484K in 1 woman and three mutations (T95I, del142-144, and D614G) in both.

These observations indicate a potential risk of illness after successful vaccination and subsequent infection with variant virus, and they provide support for continued efforts to prevent and diagnose infection and to characterize variants in vaccinated persons.

(Funded by the National Institutes of Health and others).



E ti vengo a cercare



E ti vengo a cercare anche solo per vederti o parlare perché ho bisogno della tua presenza per capire meglio la mia essenza. Questo sentimento popolare nasce da meccaniche divine un rapimento mistico e sensuale mi imprigiona a te. Dovrei cambiare l'oggetto dei miei desideri non accontentarmi di piccole gioie quotidiane fare come un eremita che rinuncia a sé. E ti vengo a cercare con la scusa di doverti parlare perché mi piace ciò che pensi e che dici perché in te vedo le mie radici. Questo secolo ormai alla fine saturo di parassiti senza dignità mi spinge solo ad essere migliore con più volontà.

Emanciparmi dall'incubo delle passioni cercare l'Uno al di sopra del Bene e del Male essere un'immagine divina di questa realtà. E ti vengo a cercare perché sto bene con te perché ho bisogno della tua presenza.

Franco Battiato - Fisiognomica - EMI, 1988







Il racconto di un'avventura straordinaria, un'occasione unica per apprendere la saggezza di una cultura antica e raccoglierne l'irresistibile messaggio

Sonzogno

Tratto da "... E venne chiamata due cuori"

(...) "Stavo cominciando a capire che noi diamo sempre qualcosa a tutte le persone che incontriamo, ma che scegliamo che cosa dare. Ogni nostra parola, ogni nostra azione, è diretta ad allestire la scena per la vita che aspiriamo a condurre."

La straordinaria esperienza di una donna alla scoperta di sé, una professionista affermata che vive in Australia e parte, su invito di una tribù di aborigeni, convinta di partecipare a una cerimonia in suo onore. Si ritrova invece nel cuore di una foresta vasta e minacciosa, dove le viene chiesto di seguire la Vera Gente, come la tribù si definisce, in un viaggio di quattro mesi nell'Outback australiano, a piedi nudi, a volte senz'acqua, cibandosi di quanto offre la terra. Ma tra le privazioni e i sacrifici, impara a vivere in completa armonia con la natura e con se stessa, in un percorso di conoscenza e cambiamento, e scopre, nei tanti giorni in cui la sua fragile vita è minacciata, il vero significato della parola esistere.



Marlo Morgan (*Iowa, 29 settembre 1937*) è una scrittrice statunitense.



Cosa non possiamo dimenticare. A lezione dal Covid19

https://www.youtube.com/watch?v=DyS1vn7e6cE

Massimo Recalcati (Milano, 28 novembre 1959) è uno psicoanalista, saggista e accademico italiano.