

Chairman Wiggam, Vice Chairman John, Ranking Member Kelly, and members of the State and Local Government Reform Committee,

I am testifying today in favor of HB 90 as a Realtor, a BSN nurse, a FNP student and an Ohio resident who's deeply concerned about courses of action being taken under the current emergency powers and the dire effects it is having on all of us. This testimony is based on all of my professional and personal insights.

An emergency should not grant irrevocable powers to a single person. Doing so only gives cause to call states of emergencies for any reason- we've already been in this one for a year, and World Bank published dates until March 2025

<http://documents1.worldbank.org/curated/en/993371585947965984/pdf/World-COVID-19-Strategic-Preparedness-and-Response-Project.pdf>.

So, for 5 years (or more) we will not have balance of power? This bill restores the balance of power to between the three, COEQUAL branches of government of Ohio during a declared emergency. It also allows for transparency input from others in the scientific community other than those chosen by the executive branch and state health Department. Our governor has refused to disclose to us who is advising him during this emergency. How are we certain if he, or anyone else, is allegiant to our constitution and not a foreign power?

### **Real estate.**

Real estate agents educate, provide information, and advise the public when buying or selling a home. We have a fiduciary duty to our clients meaning we are entrusted with acting on behalf of another individual by making decisions in their best interest, and by reporting information in an open and honest manner. Real estate agents and sellers are also required to disclose of conflicts of interests, and known defects of a property. Ohio law states that failure to disclose is a crime of concealment, and failure to exercise due care towards others, or what a reasonable or prudent person would do under the same circumstances, is a crime of negligence.

In Ohio, the concept of caveat emptor -or buyer beware- applies to the transaction. Ohio real estate law is that, if you are buying real estate, you need to inspect it and you need to rely on your own inspection of the property. We advise purchasers to protect themselves and perform due diligence. Due diligence by definition is to act to protect oneself from misinformation or inadequate information before purchasing by asking questions or performing inspections. If a buyer decides not to have a home inspection, we inform/educate them about that potentially dangerous decision, verify understanding, and allow them to make their own informed choice.

### **Nursing.**

I also choose to work as an ICU nurse and take care of the sick knowing my risks of exposure to getting sick, and knowing how to protect myself. We are supposed to provide informed consent, educate, and allow the patient to make AN INFORMED DECISION also. If a patient refuses a medication or treatment, we inform/educate them

about that potentially dangerous decision, verify understanding, and allow them to make their own informed decisions, if able.

When covid started, we were first told to reuse our N-95 masks in the ICU. Then it turned into putting them in a bin after wearing them be 'recycled' or sterilized/UV lighted, so they could be passed out again, to be reused, again. NEW masks only were actually certified for safety. I asked my employer for a safety certification with this new sanitization technique, and I was told there was not. I was 'expected' to not question the safety or efficacy of this, I was told it was our only choice, and I was expected to blindly do what I was told to do. Choosing to continue working in these conditions at that point is my own fault/liability and choice, not my employer's. Asking questions about is my duty. In the past, my employer was also never liable if I caught the flu, covid, or even for an allergic reaction to the mandatory flu vaccination.

The American Heart Association ABCs of life support, now CAB, is chest compressions, **airway and breathing**. In an ICU, maintaining an airway is of critical primary importance. Lungs are also an excretory organ; the respiratory system brings oxygen to cells in your body, but it also removes the waste product carbon dioxide during exhalation. Blocked airways causes accumulation of waste, or carbon dioxide, in your body that results in severe health consequence. What happens if you block your urine, or feces?

Masks block airways and can cause inadequate ventilation, harming people! Surgical masks contain plastic. CDC now recommends two masks, or two pieces of plastic to obstruct our airways. And, we are supposed to blindly follow directions without safety studies or certification. We are also supposed blindly do what we are told and promote an EXPERIMENTAL VACCINE. This is wrong, unethical, and negligent. DO NO HARM, is a part of my nursing ethics, and the hippocratic oath for physicians. I refuse to harm others, and government should refuse to harm the ones they represent, as well.

In July 2020 I emailed research-based-evidence to our current lawmakers regarding the mask mandates. This evidence should have provided reasonable doubt of mask and lockdown mandates, but not one of them called me; I doubt anybody read the research articles I included. One would think that researching pertinent, material information handed or disclosed to them in lawmaking would be duty for representing the best interest of their citizens. To advocate for the People of Ohio, instead of blindly following the governor and his secret advisors (emailed research attached). All research should be considered in legislative decisions, with medical opinions from those actually working in the medical field, and the people you represent. To this day, I have not heard that Dewine or ODH has disclosed their agenda advisors. Why is it secret?

It is proven science that children's brains require oxygen to grow and lack of adequate oxygen cause developmental delays, learning disorders, affecting IQ. (look into other low oxygen issues like anemia, athsma) Adults are affected significantly, also. Furthermore, children learn socially through social, responsive, back-and-forth interactions with other people including by peer relations, attachment, communication

(verbal and nonverbal), prosocial skills

<https://eclkc.ohs.acf.hhs.gov/publication/learning-get-along-young-childrens-social-emotional-development>. Facial expressions communicate happiness, sadness, anger, surprise, fear, and disgust. Masks block nonverbal communication.

ALL of these basic needs are now restricted (if not impossible) with what has been allowed to happen. This science has been discarded or picked, directly opposite of the current agenda's call for "science", unity, togetherness, and a better future. Why wasn't all "science" considered?

*See Erikson's Eight Stages of Development- successful completion of each stage results in a healthy personality and the acquisition of basic virtues*  
<https://childdevelopmentinfo.com/child-development/erickson/#gs.tpl8ej>

1. Learning Basic Trust Versus Basic Mistrust (Hope)
2. Learning Autonomy Versus Shame (Will)
3. Learning Initiative Versus Guilt (Purpose)
4. Industry Versus Inferiority (Competence)
5. Learning Identity Versus Identity Diffusion (Fidelity)
6. Learning Intimacy Versus Isolation (Love)
7. Learning Generativity Versus Self-Absorption (Care)
8. Integrity Versus Despair (Wisdom)

"A growing body of scientific evidence tells us that emotional development begins early in life, that it is a critical aspect of the development of overall brain architecture, and that it has enormous consequences over the course of a lifetime. These findings have far-reaching implications for policymakers and parents, and, therefore, demand our attention."- *Children's Emotional Development Is Built into the Architecture of Their Brains, National Scientific Council on the Developing Child, 2011*

"poor social skills were associated with poor mental and physical health through elevated stress and increased loneliness. The findings reveal that social skills deficits are associated with physical as well as mental health problems." *Chris Segrin (2019) Indirect Effects of Social Skills on Health Through Stress and Loneliness, Health Communication, 34:1, 118-124, DOI: [10.1080/10410236.2017.1384434](https://doi.org/10.1080/10410236.2017.1384434)*

Science does not agree on the social distancing, either. WHO states to maintain a 3-foot distance for DROPLETS (1930s TB study, William Wells); CDC states to maintain a 6-foot distance; based on an NEJM assumption from a study of only 100 people WITHOUT MASKS ON AN AIRPLANE?! Nothing states to social distance and wear a mask, sit in plastic cubes, or support safety of wearing masks endlessly. Places that have not upheld this unconstitutional and inhumane policies have been doing great.  
<https://qz.com/1831100/where-does-the-six-foot-social-distancing-guideline-come-from/>

Research also shows children are also not spreading covid. Feb 2021, a study published after 9 weeks in a population of 90,000 adults and children that there were only 773 community acquired cases of Covid, and 32 infections were supposedly “acquired within school (to other children)” and **“No instances of child-to-adult transmission of SARS-CoV-2 were reported within schools.”** Zimmerman KO, Akinboyo IC, Brookhart A, et al. Incidence and secondary transmission of SARS-CoV-2 infections in schools. Pediatrics. 2021; doi: 10.1542/peds.2020- 048090 Stop abusing the children.

Our governor should be required to apologize to all of the children and families in our state for telling children and families that seeing grandma could kill her. (July 2020)

This is why ONE PERSON should NEVER call the shots. Do no harm.

### **Personally.**

This is how this ill-advised, anti-science, deceitful, fear-mongering pandemic without a co-equal government and control affected me personally.

First, I chose to homeschool my 16-year-old son who was terrified of masks after a surgery he had as a child. I also withheld my 5-year-old from starting kindergarten this year because masks negatively affect her, also. This ‘made-up social distancing requirement’, along with a ‘mandatory face covering’, is child abuse. Forcing my son to wear a face covering that is terrifying and traumatic to him would normally be considered abuse. Inhibiting normal growth and development with forced isolation, and denying my children of breathing, or adequate ventilation, would normally have also been considered abuse. The children now still sit in plastic cubes, still wear a mask nearly all day (shouldn’t the cubes eradicate that?), socially distance at recess and at lunchtime. In other words, they have been ISOLATED by these mandates.

### **What Isolation Causes.**

My 18-year-old son had a covid high-school graduation last year- isolated from peers. He also started college and stayed on-campus. On Thanksgiving Day 2020, my son was found with wounds, a broken arm, and a broken neck (C2), after attempting suicide. It’s a miracle he is not paralyzed or dead after jumping approx. 35 feet off a crane onto pavement. In the hospital they decided to unnecessarily covid test our asymptomatic son, and we waited 12 hours for the test to come back NEGATIVE, to see our ALIVE son (If positive, would not be allowed to see him at all. If he had died, we would have been able to see him). I pleaded with nurse and the resident physician via phone, demanded they advocate for our son, allow our son a support person, and was told NO because it was POLICY, even when if results showed preliminarily negative. I even asked the resident about his Hippocratic Oath; how denying our son who nearly died a visitor/support person, for a unfounded test is considered DOING NO HARM?

My son was finally allowed ONE visitor, his father only was able to see him for 24 hours, when the children’s hospital closed visitation to all patients. My son was denied any visitor for nearly 2 weeks while he stayed there, yet he had a sitter in the room,

ironically. He'd have panic attacks; he'd call us on the phone sometimes not to talk, even for hours at a time, just so he didn't feel alone. We were not able hold his hand; to give him a hug; to calm him. He also was given a tetanus vaccine without consent on day 1, that if it caused encephalopathy or seizures like the CDC states could happen, nobody would have been able to identify if it was from the fall or the vaccine. Do no harm, right...

We also found out our son was found by campus police A FEW DAYS PRIOR acting strange enough to warrant an evaluation for suicide, sent him for one, and NEVER NOTIFIED US; We were his emergency contacts. How does that happen? These policies and mandates required our son had to have a solitary dorm 'due to covid'. Classes and learning was online, 'due to covid'. In other words, he was isolated by policies implemented 'due to covid'. This could have been prevented. Our son is an intelligent young man, did not do drugs, and has never before attempted to harm himself or others.

We still fear we can still lose our son because today of these "policies" mandated by Governor Dewine and the Department of Health! They are setting our son up for failure. They have denied him of what he needed most before and after this happened, which is his family and a support system.

Taking him to a follow up appointment after discharge for his broken neck, I was told I couldn't go up to the appointment with him, and I'd have to stay outside. I refused, and I was threatened with being removed by security. Luckily I wasn't removed. Other appointments now are now impersonal and lacking being over the computer using zoom. Most group meetings or peer events have been cancelled due to covid or extremely limited. How will my son feel like he's not alone when this is unreasonably continuing.

We are not "In this together" when we are in ISOLATION.

My son's mental health is the result of the governor and public health's actions. They want to take over mental health, but they should never be in control of remedying the damage they cause- it's not a balance of power, it's a conflict of interest. They all knew that suicide and mental health problems would increase due to the isolation they mandate, conveniently before trying for red flag laws. They must NEVER be allowed to unilaterally have the authority to harm or impose psychological distress on the public. They should never deny a person or child their own family, and this must be stop NOW.

For myself, I was denied medical care for a doctor appointment because my 5-year-old daughter wouldn't wear a mask. I was not going to force her, either. She was not sick. I had symptoms of an ectopic pregnancy -which is emergent- and the physician's office was aware of that before denying me care. Even brought a security guard over to make me comply, or leave. This is what these mandates have done.

In closing, real estate and medicine are very similar in the principles of informed consent, disclosure, personal responsibility, due diligence, ethics, and informed decision-making. Now, it is implied that these overstepping mandates are to protect all businesses and employers from liability they never actually had in the first place, to protect the citizens. This emergency *implies* that someone is liable for our health other than ourselves, and the governor and ODH could make better decisions than the citizens regarding their health. Despite many citizens who are very well educated themselves. Yet, they have willingly ignored 'all science' by *choosing* which science they adhere to, without argument or repercussion.

A grocery store should not be responsible for controlling a disease. Should the grocery store be responsible to wash my food before I eat it, too, or am I still responsible to know better? Is the individual not required to perform their own due diligence anymore? Would that carry into real estate? This is how absurd the implied liabilities sound when taken out of context and aside from personal responsibility. Every other aspect of law involves informed consent and right to choose -emergency pandemic or not-. I chose to come here today, I took 'the risk' to walk outside, to drive in my car, and I chose to take the risk of catching whatever virus I'm exposed to. That is my right, my personal responsibility, and you are not liable for that. I also know how to wash my hands.

Ohio businesses, our economy, our social and emotional well-being, and our children's future is on the line. Our state cannot operate under negligence and continued oppressive and unopposed orders of an over-reaching Governor. If the World Bank is correct and this lasts until 2025, is the general assembly's job even an essential anymore? Voting no to HB 90 would be negligent, since I've just gone on record sharing my story and the attached research to you. DO NOT blindly do what you was told to do. Advocate. DO NO HARM. VOTE YES on HB 90.

Copy of email sent July 7, 2020 to some elected officials:



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## NO MANDATORY MASKING

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Tue, Jul 7, 2020 at 6:12 PM

To:

For your review,

It is your official duty to Protect individual's rights, and their ability to make their own health decisions. The science behind masking shows more negative effects than positive.

Attached you will find actual SCIENCE PROVING HARM of mandating masks for anyone. Masks OBSTRUCT AIRWAYS AND BREATHING. Masks cause HYPOXIA, harm the neuro, mental health, respiratory and cardiac systems, and here's the proof:

### PROVEN HEALTH RISKS & MASK WEARING (OBSTRUCTING AIRWAY, CHRONIC OBSTRUCTIVE BREATHING/PULMONARY)

"The use of masks in athletes causes hypoxic and hypercapnic breathing, being more evident in effort. The use of masks during a short exercise...decreases O2 by 3.7% and increases the CO2 concentration by 20%."

- <https://www.sciencedirect.com/science/article/pii/S2666506920300250>

### HYPOXIA CAUSES DEPRESSION AND SUCIDE

"so mild hypoxia would decrease serotonin synthesis. Low brain serotonin is known to be associated with suicide. Thus, the commentary proposes and discusses the hypothesis that decreased brain serotonin synthesis associated with hypoxia is a mechanism that may contribute to suicide in conditions causing hypoxia."

- Young, S. N. (2013). Elevated incidence of suicide in people living at altitude, smokers and patients with chronic obstructive pulmonary disease and asthma: possible role of hypoxia causing decreased serotonin synthesis. *Journal of Psychiatry & Neuroscience : JPN*, 38(6), 423–426.

"major depression among subjects with MILD HYPOXEMIA." copd

- Silva Júnior, J. L. R., Conde, M. B., de Sousa Corrêa, K., da Silva, C., da Silva Prestes, L., & Rabahi, M. F. (2014). COPD Assessment Test (CAT) score as a predictor of major depression among subjects with chronic obstructive pulmonary disease and mild hypoxemia: a case-control study. *BMC Pulmonary Medicine*, 14, 186.

## CHANGES IN COGNITION AND BRAIN

“Long term change in metabolic brain network...Hypoxia and cerebral ischemia (HI) events are capable of triggering important changes in brain metabolism, including glucose metabolism abnormalities”

- Azevedo, P. N., Zanirati, G., Venturin, G. T., Schu, G. G., Durán-Carabali, L. E., Odorczyk, F. K., Soares, A. V., de Oliveira Laguna, G., Netto, C. A., Zimmer, E. R., da Costa, J. C., & Greggio, S. (2020). Long-term changes in metabolic brain network drive memory impairments in rats following neonatal hypoxia-ischemia. *Neurobiology of Learning and Memory*, 171.

“cognitive function including knowledge, attention, memory and Oxygen supply to the brain tissue may be decreased under **hypoxia**.”

- Mohammed Aljaafari, S., & Khaled Salwy, A. (2018). Effect of Chronic Hypoxia in Cognition on Childhood: Review Article. *Egyptian Journal of Hospital Medicine*, 70(12), 2127–2129.

Intermittent hypoxia infants & children: impaired learning abilities and structural cerebral changes

- Poets, C. F. (2020). Intermittent hypoxia and long-term neurological outcome: How are they related? *Seminars in Fetal and Neonatal Medicine*, 25(2).

## HEARING LOSS

Hypoxia causes long-term decline in hearing thresholds, deterioration of DPOAE results, and prolongation of I–V interpeak latency in auditory brainstem response”

- Sonbay Yılmaz, N. D., Saka, C., Oktay Arslan, B., Aygener Yeşilyurt, N., Saka, D., Ardiç, S., & Akın, İ. (2019). The effect of hypoxia on hearing function. *Turkish Journal of Medical Sciences*, 49(5), 1450–1454.

## CARDIAC/ BLOOD CLOTTING/BLEEDING That causes MI, Stroke, DVT & more!

"tissue hypoxia, causes a uniform spectrum of changes in the blood gas composition and hemocoagulation system“hypercoagulation” & “hypocoagulation”

- Anna A. Bulanova, Artem E. Aksenenko, Anna S. Bobrovnikova, Galina V. Dudko, Dmitriy S. Slizevich, Ekaterina B. Bukreeva, Michail N. Shpisman, & Ivan I. Tyutrin. (2017). Reaction of the hemocoagulation system



to tissue hypoxia in patients with chronic obstructive pulmonary disease. *Bülleten' Sibirskoj Mediciny*, 16(2), 87–95.

"the CIMT and atherosclerosis risk increased in COPD patients. Systemic inflammation causes a higher carotid intima-media thickness in COPD patients. This finding was used as an early risk factor for cardiovascular disease....Systemic inflammation continuing during a stable period causes increased carotid artery intima-media thickness. This entity plays a role in atherosclerosis etiology."

- Taş, N., Arslan, S., Koşucu, G., & Çetin, G. (2019). The relationship between hypoxia, inflammation, and airway obstruction with carotid intima-media thickness in Chronic Obstructive Pulmonary Disease (COPD). *Cumhuriyet Medical Journal*, 42(2), 363–371.

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"Oxygen therapy improves cerebral oxygen delivery and neurovascular function ...improvement in cerebral oxygen delivery and neurovascular function might provide a physiological link between oxygen therapy and a reduced risk of cerebrovascular disease (e.g. stroke, mild cognitive impairment and dementia)"

- Hoiland, R. L., Mladinov, S., Barak, O. F., Willie, C. K., Mijacika, T., Stembridge, M., Dujic, Z., & Ainslie, P. N. (2018). Oxygen therapy improves cerebral oxygen delivery and neurovascular function in hypoxaemic chronic obstructive pulmonary disease patients. *Experimental Physiology*, 103(8), 1170–1177.

"The development of COPD can lead to pulmonary vascular remodeling and pulmonary hypertension, further causing the occurrence of pulmonary heart disease."

- Luo, L., Liu, Y., Chen, D., Chen, F., Lan, H. B., & Xie, C. (2018). CD30 Is Highly Expressed in Chronic Obstructive Pulmonary Disease and Induces the Pulmonary Vascular Remodeling. *BioMed Research International*, 2018, 3261436.

## INCREASED INFECTIONS

COVID 19 CHRONIC AIRWAY OBSTRUCTION Hypoxia-inducible factor and bacterial infections in "chronic obstructive pulmonary disease" 2019.

- Shukla, S. D., Walters, E. H., Simpson, J. L., Keely, S., Wark, P. A. B., O'Toole, R. F., & Hansbro, P. M. (2020). Hypoxia-inducible factor and bacterial infections in chronic obstructive pulmonary disease. *Respirology*, 25(1), 53–63.

## CAUSES CELL DEATH

"The role of hypoxia-inducible factor 1 alpha(HIF-1 $\alpha$ ) in the development and progression of chronic obstructive pulmonary disease (COPD)... showed reduced proliferation (CELL LIFE) and increased apoptosis (CELL DEATH)... can affect apoptosis of inflammatory fibroblasts... may also affect the HIF-1 $\alpha$ -dependent lung structure maintenance program."

- Lin, L., Sun, J., Wu, D., Lin, D., Sun, D., Li, Q., Chen, J., Niu, H., He, P., & Ding, Y. (2019). MicroRNA-186 is associated with hypoxia-inducible factor-1 $\alpha$  expression in chronic obstructive pulmonary disease. *Molecular Genetics & Genomic Medicine*, 7(3), e531.

"HIF-1 $\alpha$  was overexpressed in COPD, which upregulated expressions of inflammatory factors via activating the EGFR/PI3K/AKT pathway...induced by pulmonary inflammation further...inhibited proliferation but induced apoptosis of NCI-H1563 cells."

- Zhang, H.-X., Yang, J.-J., Zhang, S.-A., Zhang, S.-M., Wang, J.-X., Xu, Z.-Y., & Lin, R.-Y. (2018). HIF-1 $\alpha$  promotes inflammatory response of chronic obstructive pulmonary disease by activating EGFR/PI3K/AKT pathway. *European Review for Medical and Pharmacological Sciences*, 22(18), 6077–6084.

## NOT A NEW VIRUS, FECAL-ORAL MORE LIKELY (MASKS IRRELEVANT):

If scientist are testing SEWAGE WATER to discover the virus was in Italy by Dec 18, 2019, what does that tell you about how it's being transmitted? Would you wear a mask to prevent polio, rotavirus, hepatitis A, or thypoid? Or would you run a massive campaign about washing hands with warm water and soap for 30 seconds?

- <https://www.bbc.com/news/world-europe-53106444>

"A study led by the University of Barcelona (UB) has detected the presence of SARS-CoV-2 in wastewater samples from Barcelona on March 12, 2019."

- <https://www.catalannews.com/society-science/item/sars-cov-2-detected-in-barcelona-water-study-from-march-2019>

FECAL-ORAL spread more likely- Good luck with your mask if this is how it spread through nursing homes!

- <https://www.sciencedaily.com/releases/2020/05/200514131710.htm>

## Treatments AVAILABLE make MASKING IRRELEVANT:

Identify high risk patients. Treat early. Zinc + low dose Hydroxychloroquine + Azithromycin.

I saw 5x less death when patients were prescribed these drugs."

- <https://www.preprints.org/manuscript/202007.0025/v1>

inhaled steroid budesonide. suppressing the inflammation and then targeting with zinc at the same time. Reminder-- steroids + vitamin C is the same treatment a doctor came up to save people from sepsis after influenza. Target the inflammation at the source, then getting the medicine in. This is a one-two punch. The doctor is not doing steroid alone.

- <https://youtu.be/eDSDdwN2Xcg>

Therefore, each individual citizen needs to determine what is best for themselves and family.  
Do not mandate masking.  
Thank you,

Joanna Overholt, BSN, RN

## Role of facial expressions in social interactions

Chris Frith\*

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This article has been [cited by](#) other articles in PMC.

### ABSTRACT

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The expressions we see in the faces of others engage a number of different cognitive processes. Emotional expressions elicit rapid responses, which often imitate the emotion in the observed face. These effects can even occur for faces presented in such a way that the observer is not aware of them. We are also very good at explicitly recognizing and describing the emotion being expressed. A recent study, contrasting human and humanoid robot facial expressions, suggests that people can recognize the expressions made by the robot explicitly, but may not show the automatic, implicit response. The emotional expressions presented by faces are not simply reflexive, but also have a communicative component. For example, empathic expressions of pain are not simply a reflexive response to the sight of pain in another, since they are exaggerated when the empathizer knows he or she is being observed. It seems that we want people to know that we are empathic. Of especial importance among facial expressions are ostensive gestures such as the eyebrow flash, which indicate the intention to communicate. These gestures indicate, first, that the sender is to be trusted and, second, that any following signals are of importance to the receiver.

**Keywords:** emotion, face, awareness, communication

## Lack of oxygen, not blood flow, delays brain maturation in preterm infants

Date: November 2, 2017

Source: Oregon Health & Science University

Summary: Previously, it was believed that lack of blood flow was causing preterm brain cells to die. Instead, these critically important cells simply fail to develop normally, report investigators. This finding creates an opportunity to determine ways to restore oxygen loss and potentially reduce life-long impacts of preterm survivors.

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### RELATED TOPICS

#### Health & Medicine

- > Infant's Health
- > Brain Tumor
- > Birth Defects
- > Nervous System

#### Mind & Brain

### FULL STORY

Premature infants are at risk for a broad spectrum of life-long cognitive and learning disabilities. Historically, these conditions were believed to be the result of lack of blood flow to the brain. However, a new study published in the *Journal of Neuroscience*, finds that while limited blood flow may contribute, major disturbances are actually caused by low oxygen.

# PEDIATRICS<sup>®</sup>

OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

Review Article

## The Effect of Chronic or Intermittent Hypoxia on Cognition in Childhood: A Review of the Evidence

Joel L. Bass, Michael Corwin, David Gozal, Carol Moore, Hiroshi Nishida, Steven Parker, Alison Schonwald, Richard E. Wilker, Sabine Stehle and T. Bernard Kinane  
Pediatrics September 2004, 114 (3) 805-816; DOI: <https://doi.org/10.1542/peds.2004-0227>

**Conclusions.** Adverse impacts of chronic or intermittent hypoxia on development, behavior, and academic achievement have been reported in many well-designed and controlled studies in children with CHD and SDB as well as in a variety of experimental studies in adults. This should be taken into account in any situation that may expose children to hypoxia. Because adverse effects have been noted at even mild levels of oxygen desaturation, future research should include precisely defined data on exposure to all levels of desaturation. doi: 10.1080/13803395.2017.1288802. Epub 2017 Mar 21.

# Is asthma associated with cognitive impairments? A meta-analytic review

[Farzin Irani](#)<sup>1</sup>, [Jordan Mark Barbone](#)<sup>1</sup>, [Janet Beausoleil](#)<sup>2</sup>, [Lynn Gerald](#)<sup>3,4</sup>

Affiliations expand PMID: 28325118

Abstract

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**Results:** There was no evidence of publication bias. A random-effects model examining differences in task performance between 2017 individuals with asthma and 2131 healthy controls showed significant effects in the small to medium range. Cognitive deficits associated with asthma were global, with strongest effects on broader measures involving academic achievement and executive functioning, but with additional impact on processing speed, global intellect, attention, visuospatial functioning, language, learning, and memory. Severity of asthma was a key moderator, with greatest cognitive deficits associated with severe asthma. Cognitive burden was also greatest in asthma patients who were younger, males, from low socioeconomic backgrounds, and from racial/ethnic minorities. Effects were independent of type of population (child versus adult), type of study (norm-referenced versus control-referenced), or reported use of oral or inhaled corticosteroid medications.

**Conclusions:** There is cognitive burden associated with asthma, particularly among vulnerable groups with severe asthma. This could be due to increased risk of intermittent cerebral hypoxia in severe asthma. The clinical need to assess cognition in individuals with asthma is underscored.

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WHO, 2015: [https://www.euro.who.int/\\_\\_data/assets/pdf\\_file/0010/74728/E86575.pdf](https://www.euro.who.int/__data/assets/pdf_file/0010/74728/E86575.pdf)  
“CHILDREN AS A SPECIFIC RISK GROUP Air pollution poses a major environment-related threat to health” ... “Children breathe more air per unit of body weight than adults, and thus receive proportionately higher doses of pollutants”... “They are also more active than adults when outdoors, and so have significantly higher oxygen demand and respiration rates” ...”  
NORMAL GROWTH OF LUNG FUNCTION Normal lung development and growth are necessary for optimal gas exchange. Alterations in lung structure during the life course can adversely affect lung function and result in an increased occurrence of respiratory-related morbidity and mortality.” ...”Chronic effects (putative) Impaired functional lung growth Earlier onset and increased rate of decline in lung function with age Increased lifetime risk for chronic respiratory diseases including chronic obstructive pulmonary disease, asthma and lung cancer Altered lung structure, including metaplasia of the respiratory epithelium in respiratory bronchioles, mononuclear peribronchiolar inflammation, localized deposition and alteration in collagen, and remodelling of the peribronchiolar airspace “ ...

# Associations between social isolation, pro-social behaviour and emotional development in preschool aged children: a population based survey of kindergarten staff

[Louise Marryat](#), [Lucy Thompson](#), [Helen Minnis](#) & [Phil Wilson](#)

*BMC Psychology* volume 2, Article number: 44 (2014) [Published: 15 October 2014](#)  
Abstract

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## Results

There were substantial overlaps between problem scores. Regression models found all social isolation variables to be significantly correlated with social and emotional functioning. Different types of social isolation appeared to relate to different psychological domains, with unpopularity having a stronger relationship with poor pro-social skills, whereas being solitary was more strongly linked to poorer emotional functioning.

## Conclusions

Social isolation does have a significant association with reported child social and emotional difficulties, independent of demographic characteristics. The analysis highlights the complexity of measuring social isolation in young children. Different types of social isolation were found to have relationships with specific areas of social and emotional functioning.

# Cases and Deaths: Biased Counts



- Jan 2020 – CDC defines “COVID19” as the disease caused by the SARS-CoV-2 virus.
- March 2020 – CDC Announces shift of case definition to “presence of virus = COVID19”.




## **Birx says government is classifying all deaths of patients with coronavirus as 'COVID-19' deaths, regardless of cause**

By Louis Casiano

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## **Viral RNA load as determined by cell culture as a manager for discharge of SARS-CoV-2 patients from infectious disease wards**



Bernard La Scola<sup>1,2</sup>  · Marion Le Bideau<sup>1,2</sup> · Julien Andreani<sup>1,2</sup> · Van Thuan Hoang<sup>1,3,4</sup> · Clio Grimaldier<sup>1,2</sup> · Philippe Colson<sup>1,2</sup> · Philippe Gautret<sup>1,3</sup> · Didier Raoult<sup>1,2</sup>

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### **Abstract**

In a preliminary clinical study, we observed that the combination of hydroxychloroquine and azithromycin was effective against SARS-CoV-2 by shortening the duration of viral load in Covid-19 patients. It is of paramount importance to define when a treated patient can be considered as no longer contagious. Correlation between successful isolation of virus in cell culture and Ct value of quantitative RT-PCR targeting E gene suggests that patients with Ct above 33–34 using our RT-PCR system are not contagious and thus can be discharged from hospital care or strict confinement for non-hospitalized patients.

**Keywords** SARS-CoV2 · Covid-19 · RT-PCR · Co-culture · Viral load · Correlation