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Littérature sur les produits inactivants du SARS-COV-2, en particulier l'adjuvant Baby Shampoo 1%

1) Trouvé sur <http://www.neilmed.com/articles/babyshampoo.pdf> de **2008**

Baby shampoo nasal irrigations for the symptomatic post-functional endoscopic sinus surgery patient Alexander G. Chiu, M.D., James N. Palmer, M.D., Bradford A. Woodworth, M.D., Laurel Doghramji, R.N., Michael B. Cohen, B.A., Anthony Prince, B.A., and Noam A. Cohen, M.D., Ph.D.

ABSTRACT

Background: Symptoms of postnasal drainage and thickened mucus are commonly seen in patients with chronic rhinosinusitis (CRS) recalcitrant to sinus surgery and conventional medical therapies. Chemical surfactants can act as a mucolytic by reducing water surface tension and have the potential to serve as an antimicrobial agent. Baby shampoo is an inexpensive, commercially available solution containing multiple chemical surfactants. This is an in vitro study of its antimicrobial effects on Pseudomonas biofilms with translation to a clinical study for use as an adjuvant nasal wash in patients with CRS who remain symptomatic despite adequate sinus surgery and conventional medical therapies.

Methods: In vitro testing was performed to determine the optimal concentration of baby shampoo that disrupted preformed bacterial biofilms and inhibited biofilm formation. This concentration was then used in a prospective study of symptomatic post-functional endoscopic sinus surgery (FESS) patients who irrigated twice a day for 4 weeks. Validated outcome forms and objective smell testing was performed before and after therapy.

Results: One percent baby shampoo in normal saline was the optimal concentration for inhibition of Pseudomonas biofilm formation. Baby shampoo had no effect on the eradication of preformed Pseudomonas biofilms. Eighteen patients with CRS with an average of 2.8 surgeries

were studied after irrigating with 1% baby shampoo solution. Two patients discontinued use because of minor nasal and skin irritations; 46.6% of patients experienced an overall improvement in their subjective symptoms, and 60% of patients noted improvement in specific symptoms of thickened mucus and postnasal drainage.

Conclusion: Baby shampoo nasal irrigation has promise as an inexpensive, tolerable adjuvant to conventional medical therapies for symptomatic patients after FESS. Its greatest benefit may be in improving symptoms of thickened nasal discharge and postnasal drainage.

(Am J Rhinol 22, 34 –37, 2008; doi: 10.2500/ajr.2008.22.3122)

Key words: Adjunctive therapy, biofilm, FESS, irrigation, mucoactive treatment, rhinosinusitis, shampoo, surfactant, topical

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2) Trouvé sur <https://onlinelibrary.wiley.com/doi/10.1002/jmv.26514>

Dans ce papier, on trouve des tables sur la composition des produits analysés et sur leur activité contre le virus.

Journal of medical virology RESEARCH ARTICLE

Free Access

Lowering the transmission and spread of human coronavirus

Craig Meyers PhD Richard Robison PhD Janice Milici BS Samina Alam PhD David Quillen MD David Goldenberg MD, FACS Rena Kass MD

First published: 17 September 2020 <https://doi.org/10.1002/jmv.26514>

Citations: 2

Abstract

The emergence of the severe acute respiratory syndrome coronavirus 2 pandemic has created an unprecedented healthcare, social, and economic disaster. Wearing of masks and social distancing can significantly decrease transmission and spread, however, due to circumstances such as medical or dental intervention and personal choice these practices have not been universally adopted. Additional strategies are required to lessen transmission. Nasal rinses and mouthwashes, which directly impact the major sites of reception and transmission of human coronaviruses (HCoV), may provide an additional level of protection against the virus. Common over-the-counter nasal

rinses and mouthwashes/gargles were tested for their ability to inactivate high concentrations of HCoV using contact times of 30 s, 1 min, and 2 min. Reductions in titers were measured by using the tissue culture infectious dose 50 (TCID₅₀) assay. A 1% baby shampoo nasal rinse solution inactivated HCoV greater than 99.9% with a 2-min contact time. Several over-the-counter mouthwash/gargle products including Listerine and Listerine-like products were highly effective at inactivating infectious virus with greater than 99.9% even with a 30-s contact time. In the current manuscript we have demonstrated that several commonly available healthcare products have significant virucidal properties with respect to HCoV.

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3) Trouvé sur <https://www.sciencedaily.com/releases/2020/10/201019125503.htm>

Science News

Mouthwashes, oral rinses may inactivate human coronaviruses, study finds

Date: **October 19, 2020**

Source: Penn State

Summary:

Certain oral antiseptics and mouthwashes may have the ability to inactivate human coronaviruses, according to a new study. The results indicate that some of these products might be useful for reducing the viral load, or amount of virus, in the mouth after infection and may help to reduce the spread of SARS-CoV-2, the coronavirus that causes COVID-19.

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Journal Reference:

1. Craig Meyers, Richard Robison, Janice Milici, Samina Alam, David Quillen, David Goldenberg, Rena Kass. **Lowering the transmission and spread of human coronavirus.** *Journal of Medical Virology*, 2020; DOI: [10.1002/jmv.26514](https://doi.org/10.1002/jmv.26514)

4) Trouvé sur <https://onlinelibrary.wiley.com/doi/10.1002/jmv.26762>

Journal of medical virology LETTER TO THE EDITOR

Free Access

Rebuttal to overinterpretation of the antiviral results for human coronavirus 229E relative to severe acute respiratory syndrome coronavirus-2 by Rowpar Pharmaceuticals

Craig Meyers Richard Robison Janice Milici Samina Alam David Quillen David Goldenberg Rena Kass

First published: **29 December 2020** <https://doi.org/10.1002/jmv.26762>

To the Editor,

Recently, employees of Rowpar Pharmaceuticals Inc. wrote a commentary entitled, “Overinterpretation of the antiviral results for human coronavirus 229E (HCoV-229E) relative to severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2).” In their commentary, they discussed our recent publication entitled, “Lower the transmission and spread of human coronavirus.” In their commentary, there is a limited discussion of accepted virucidal analysis, confusing virucidal assays with assays to determine mechanisms of infection. Also ignored is the corroboration of our studies by others using SARS-CoV-2, including a clinical trial. We will now address their comments, including providing the corroborative published studies.

First, our published studies measure the efficacy of nasal and oral rinses to inactivate HCoV, representing the beginning stage of identifying a process whereby transmission and spread can be lowered. We also conclude the studies by saying, “While clinical trials will be necessary to confirm the virucidal potential of these products and assess their ability to limit transmission of HCoV within the general population, in the current manuscript we have demonstrated here that several commonly available healthcare products have significant virucidal properties with respect to HCoV.”

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In summary, in our experimental design, we followed standard accepted practices in assaying virucidal activity. Results were not overinterpreted as we clearly stated the possible limitations of our study in the final paragraph of our Discussion. Our findings did not contradict the extant literature or studies that have been published afterward and have been corroborated using SARS-CoV-2. Our work along with the excellent work of others has provided a strong foundation for the continued study of nasal and oral rinses in lowering the SARS-CoV-2 transmission, including clinical trials.

Colombier (VD), le 6 mars 2021