

Welcome back! Sorry for the “lack” of “news” here – not to suggest there has been nothing happening!!

We, and I, have been pre-occupied with the effects of the Covid-19 pandemic, especially affecting, for me, the following:

- 1) outpatient procedures and bookings at RVH in Barrie
- 2) Virtual care in the office, with office staff working from home
- 3) New and unusual GI, liver, and even pancreatic consequences of Covid-19
- 4) Effect of Covid-19 on functioning of private endoscopy clinics, and expert guidelines, from groups such as [Cancer Care Ontario](#).
- 5) Concerns related to patients on immunosuppression, or with IBD, and potential risks
- 6) Concerns related to children going back to school
- 7) Concerns from different countries about handling of Covid-19, 1st and 2nd waves, and different phases of shut down.
- 8) Statistics, ie numbers and deaths. I am tired (bombed), and often confused by the “highest numbers so far”, and we know that the biggest numbers usually come from the biggest countries, but I think there is more to be learnt from the ([mortality](#)) rates of disease and deaths “per 1 million, (or 100,000) of population” and case-fatality ratios – [very handy chart](#).

For example, do we “care” as much that US has the biggest number of Covid-19 deaths in the world, or perhaps more important that Belgium had the second highest deaths per 100,000, while US is 10th, and Canada is at 23rd, in this list of 169 countries (and 2 cruise ships) -

<https://coronavirus.jhu.edu/data/mortality>

It was apparently Joseph Stalin (but there is internet discussion) who said “the death of one person is a tragedy; the death of one million is a statistic”. (He might have also said some version of “It's not the people who vote that count, it's the people who count the votes.”)

It is even more complex to look at whether the mortality is deaths per 100 confirmed Covid-19 cases (this is the case-fatality ratio), or deaths per head of population (which includes Covid-19 cases, died or recovered, and uninfected cases). For example Canada's case-fatality ratio is minimally different from New York State, and both numbers are only half of Belgium's, which (Belgium) is even higher than Mexico. Here is the original [Johns Hopkins Map/Site](#).

Nevertheless, it is time to update the website, and for this reason, I present the following list of “issues”, (in no particular order) each with a link to the appropriate webpage, or paper. Hopefully you will find something here of interest:

1) ongoing Covid-19 conspiracies/conspiracy theories, and the link between the Covid-19 conspiracy people and the “anti-vaccine” movement - <https://www.macleans.ca/society/health/how-anti-vaxxers-could-disrupt-the-cure-for-the-covid-19-pandemic/>

2) real concerns about patients on Biologics and other immunosuppressants, with IBD or liver disease, and their potential exposure to Covid-19, especially if children, or grandchildren, start attending school

<https://www.liver.ca/canadian-liver-foundation-covid-19-action-plan/> (has a 1-800 number for concerned patients)

<https://crohnsandcolitis.ca/About-Crohn-s-Colitis/COVID-19-and-IBD>

3) interesting effects of Covid-19 on the GI tract and liver disease. Fortunately, these are not currently relevant to the practice of gastroenterology at RVH, because Simcoe-Muskoka currently has an extremely low rate of Covid-19.

Papers from [American Journal of Gastroenterology](#), [United European Journal of Gastroenterology](#), and [Gastroenterology](#), on aspects of Covid-19.

4) ongoing concerns regarding climate change, especially somehow linked to Covid-19

<https://www.bbc.com/news/science-environment-52485712>

<https://www.hsph.harvard.edu/c-change/subtopics/coronavirus-and-climate-change/>

5) exciting news on the American political front, if you share my enthusiasm for Joe Biden’s choice in running mate – go Kamala Harris!

6) excitement with an upcoming New Zealand election, if you share most people’s enthusiasm for the New Zealand prime minister – except that they too are being affected, again, by Covid-19... election postponed August 17th...

https://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=12356939

7) recent publications on the effects of [diet for maintenance of remission](#), and [diet](#) in general, and [complementary and alternative therapies](#) on IBD. This is an ongoing interest for me and for my IBD patients, and I will add some of these papers to the list of resources under “IBD” under “health information”. I would quibble with the title of the paper by Chande et al, colleagues from London Ontario, , because I do not think that any of the 4 topics reviewed really reflect “complementary and alternative” treatments, but reflect areas of ongoing research. My bias is that “complementary and alternative” treatments are generally those that have been proven not to work (eg turmeric?, acupuncture?), or those that have not been proven to work, but appeared to have little if any scientific basis (eg homeopathy, iridology etc).

8) general information relating to “[doing your own research](#)” on the Internet, and the real meaning of science and research.

9) an excellent book I read recently called “The Death of Expertise”, by Tom Nichols. Reviewed in [NY Times March 2017](#), available through Amazon, and Kobo.

10) an important and comprehensive [document on obesity](#), which is written by a world expert, out of Edmonton, Alberta, and which changes our perspectives on this disease. News reports interpreted that BMI no longer matters, which is not exactly true.

11) a recent a relatively short article on [irritable bowel syndrome](#), published in the CMAJ.

12) a complex scientific publication on the [importance of vitamin D in IBD](#), showing some of the background of why you should know that your vitamin D level is in the normal range, if you have IBD, and why you may have been contacted already by my office if you had a low level.

13) several of these topics come from my regular perusal of one of my favorite websites – [science-based medicine](#), and if you are interested there are essays there on raw milk, probiotics, and many Covid-19 topics. I also enjoy a different website by one of the founders of SBM, Dr [Steven Novella](#), and there, you will find interesting and provocative essays on diverse topics like: space and solar, climate change, COVID-19 (of course), infection control in hospitals, psychology and neurology (he is a neurologist after all), [world population growth](#), raw milk, [meat](#), and specific [nutritional issues](#) possibly relevant to gastroenterology.

14) an article on [deprescribing PPI's](#) - relevant to my paper on GERD (acid reflux) in “helpful documents”

14) and finally, a very helpful [page on inserting French characters](#), by typing (alt xyza....)– after all Jolene is so different from Jolène...