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FLUP FACULDADE DE LETRAS
UNIVERSIDADE DO PORTO

2.ºCiclo
Ciências da Comunicação – Cultura e Ciência

Comunicar em tempos de pandemia: Mapeamento de temáticas e elementos de validação científica nos artigos sobre COVID-19

José Carlos Miranda Barbosa

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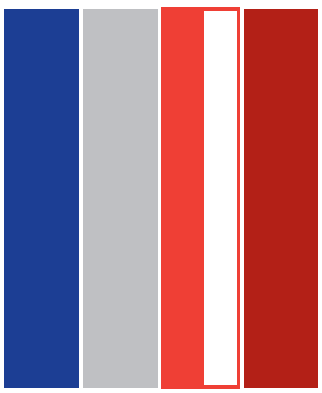
2020



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Dissertação realizada no âmbito do Mestrado em Ciências da Comunicação, orientada pela Professora Doutora Helena Lima

Faculdade de Letras da Universidade do Porto

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Ao meu falecido bisavô que sempre
teve o sonho de me ver "formado"

Sumário

Declaração de honra

Declaro que a presente dissertação é de minha autoria e não foi utilizado previamente noutro curso ou unidade curricular, desta ou de outra instituição. As referências a outros autores (afirmações, ideias, pensamentos) respeitam escrupulosamente as regras da atribuição, e encontram-se devidamente indicadas no texto e nas referências bibliográficas, de acordo com as normas de referenciação. Tenho consciência de que a prática de plágio e auto-plágio constitui um ilícito académico.

[Porto, 19 de outubro de 2020]

[José Carlos Miranda Barbosa]

Agradecimentos

Num processo como este que é realizar uma dissertação, existem tantas pessoas que merecem ter um lugar de destaque, por mais pequeno que seja, nesta página. As pessoas a quem irei agradecer estiveram sempre ao meu lado a incentivar-me, a apoiar-me, a perguntar se precisava de ajuda. Numa situação extraordinária como aquela que vivemos atualmente aprendi a dar ainda mais valor aos que tenho a meu lado.

Em primeiro lugar queria agradecer à minha família, aos meus pais, aos meus avós, aos meus tios, aos meus primos, à minha afilhada, à minha irmã, sem eles nunca teria chegado a esta etapa da minha vida. Um especial obrigado à minha Mãe que, por não ter seguido o seu sonho, quis ver o seu filho a seguir o dele e não há nada que me deixe mais feliz do que a ver orgulhosa de mim.

Aos meus amigos, ao Leonardo, à Manuela, ao Curveira, ao Seixo, à Cátia, a todas as raparigas do meu ano a quem carinhosamente chamo de "as minhas meninas" que estão a meu lado desde o primeiro ano de faculdade, que viveram comigo aventuras e desventuras de uma vida académica e não só. Um especial obrigado à Ivone que, após 16 anos de amizade, continua a meu lado. A ela que me ajudou incansavelmente na Revisão Sistemática, que me ajudou nas dúvidas que tive construção da tabela, na opinião quanto à verificação dos dados, dentro de muitas outras coisas, obrigado, de coração, a esta amiga que será a minha futura contabilista.

Agradeço ao Professor Doutor Vasco Ribeiro, aquele que foi o meu primeiro orientador, que acompanhou todas as mudanças, desde o Estágio que iria fazer e acabou por não se concretizar, na procura de um novo Estágio e na mudança para Dissertação. Obrigado por me ter aconselhado e apoiado em todas as minhas decisões.

Agradeço ainda à Equipa BRIGHT, pessoas que me acolheram no Estágio Curricular, que às 9 horas da manhã estavam com um excelente humor para me ajudar nas minhas dificuldades. Agradeço em especial ao Hernâni Zão Oliveira, Fouder & CEO da BRIGHT, que presencialmente ou à distância sempre acreditou e confiou em mim, uma pessoa que passei a admirar. Devo-lhe a ele a solução arranjada de passar a realizar esta

Dissertação em vez de um Relatório de Estágio que, devido à pandemia, iria condicionar o conteúdo. Agradeço, de coração, por me acolherem e por ter tido a oportunidade de fazer parte desta equipa.

Por último e à pessoa mais importante, a Professora Doutora Helena Lima, minha orientadora. Com todas as complicações que surgiram no meu caminho de mudanças de Estágio e, posteriormente, para dissertação, foi a Professora Helena Lima que me passou a acolher. Em maio, quando pedi à Professora para passar a ser a minha orientadora, sem hesitar, ela aceitou e eu fiquei muito feliz por tê-la a orientar-me neste projeto. A conclusão deste trabalho deve-se a ela, deve-se a todas as dúvidas que me tirou, a todos os caminhos que me ajudou a encontrar, a todas as reuniões realizadas. Agradeço por estar sempre disponível e disposta a ajudar. Agradeço à Professora pelo apoio e peço desculpa por todas as dores de cabeça que lhe dei.

Falta sempre alguém a quem temos de agradecer e só mais tarde nos lembramos, por isso desculpem-me se isso aconteceu. Agradeço a todos que de uma forma ou de outra me ajudaram.

Resumo

O Novo Coronavírus trouxe consigo a necessidade de evolução e, o conhecimento científico, faz parte deste progresso. Com a presente dissertação, pretendemos ser inovadores na comunicação científica, numa área mais voltada para a comunicação em saúde, verificando qual a comunicação existente dentro da comunidade científica.~

Através de uma recolha efetuada de 30 de novembro de 2019 a 2 de abril de 2020, utilizando a palavra-chave "Coronavírus", vai ser realizada uma Revisão Sistemática. Utilizando critérios de inclusão queremos encontrar a quantidade de artigos científicos publicados na base de dados *PubMed* e verificar qual/quais as temáticas mais abordadas. Esta temática, sendo tão atual, tem uma enorme importância, pois nunca fomos tão expostos a uma comunicação em saúde, inteiramente ligada à comunicação científica, como agora.

O principal objetivo será descobrir que avanços os artigos neste período nos podem trazer e se foram usados para a transmissão e disseminação de informação. Estas ilações serão retiradas através dos resultados apresentados pelos gráficos da nossa Revisão Sistemática.

Palavras-chave: Comunicação Científica, Comunicação em Saúde, Revisão Sistemática, COVID-19

Abstract

The new Coronavirus has brought the need for evolution as a consequence of its rapid growth, which scientific progress is also part of. With the present dissertation, we hope to accomplish innovation within the scientific communication, more specifically in the health area, verifying which type of communication is actually being applied. Through the data collected between the 30th of November and the 2nd of April, making use of "Coronavírus" as the key word, a systematic revision of literature will be performed.

By drawing on criteria of inclusion we aim to find a significant quantity of published scientific articles in the *PubMed* database, as well as verifying which thematics are the most approached among the community. This thematic, due to the fact of being recent, holds great importance, has we have never been so exposed to communication in the health department; Nowadays, entirely connected to scientific communication.

The principal objective of this research is to understand which advances have been raised by these articles, besides realizing if they were used in the transmission and dissemination of information. The conclusions hereby presented will be withdrawn through the results of our systematic revision of literature, in the mould of presentation graphics.

Keywords: Scientific Communication, Health Communication, Systematic Revision of Literature, COVID-19

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Lista de abreviaturas e siglas

COVID-19……*Coronavirus disease 2019*

DGS……..Direção Geral de Saúde

EUA……Estados Unidos da América

MBE…… Medicina Baseada em Evidências

MERS-CoV……..*Middle East Respiratory Syndrome*

NIH…….. *National Institutes of Health*

OMS……Organização Mundial de Saúde

SARS-CoV……..*Severe acute respiratory syndrome*

SARS-CoV-2……*Severe acute respiratory syndrome coronavirus 2*

SDRA……Síndrome de Desconforto Respiratório

TI……Tecnologias da Informação

UNESCO……..*United Nations Educational, Scientific and Cultural Organization*

VPN UPorto……*Virtual Private Network* Universidade do Porto

Glossário

Pandemia – “Uma pandemia é a disseminação mundial de uma doença, que se espalhou por diferentes continentes, afetando geralmente um grande número de pessoas, com transmissão sustentada e na comunidade. Na maioria das vezes está associada a uma grande disrupção social e coloca sobre enorme pressão os serviços de saúde a nível global.” (DGS, 2020)

Epidemia – “Uma epidemia corresponde ao aumento considerável do número de casos de determinada doença, em várias regiões ou países, num determinado período de tempo.” (DGS, 2020)

Quarentena – “período de isolamento imposto a pessoas portadoras ou supostas portadoras de doenças contagiosas” (Infopédia, 2020)

Assintomático – “Ausência de sintomas” (DGS, 2020)

Vacina – “Uma vacina é uma preparação de antigénios (partículas estranhas ao organismo), que é administrada a um indivíduo, provocando uma resposta imunitária protetora específica de um ou mais agentes infeciosos. Os antigénios das vacinas podem ser vírus ou bactérias inteiros, mortos ou atenuados, ou fragmentos desses microrganismos. O antigénio escolhido para uma vacina deve ser “imunogénico”, ou seja, deve desencadear uma reação imunitária e não provocar a doença. As vacinas são consideradas medicamentos, mas apresentam várias diferenças assinaláveis relativamente aos medicamentos clássicos.” (SNS, 2020)

Etiqueta respiratória – “A etiqueta respiratória são medidas a aplicar para evitar transmitir gotículas respiratórias: quando tossir ou espirrar, proteja o nariz e a boca com um lenço descartável ou com o antebraço. Após a utilização do lenço descartável, deite-o imediatamente no lixo. De seguida lave de imediato, as mãos. Caso tenha utilizado o braço, lave-o, ou à camisola, assim que possível” (DGS, 2020)

Open acess – “«Acesso Livre» (ou «Acesso Aberto») significa a disponibilização livre na Internet de cópias gratuitas, online, de artigos de revistas científicas revistos por pares (peer-reviewed), comunicações em conferências, bem como relatórios técnicos, teses e documentos de trabalho.” (UMinho, 2020)

Transmissão Zoonótica – “Chamamos de zoonose as infeções transmitidas de um animal para os seres humanos.” (Mdsaude, 2020)

Introdução

A presente investigação irá basear-se na situação de pandemia causada pelo SARS-CoV-2. A pandemia trouxe consigo a necessidade de evoluir e, o conhecimento científico, é parte essencial para este desenvolvimento. Neste trabalho pretendemos ser pioneiros e atingir uma inovação na comunicação científica numa variante da comunicação de saúde.

Através de uma recolha de publicações científicas datadas entre 20 de novembro de 2019 (mês em que existe a possibilidade de já existirem casos do Novo Coronavírus na China) e 2 de abril (momento em que maioria dos países encontravam-se de quarentena) procuramos realizar uma Revisão Sistemática que nos ajudará a filtrar os artigos relevantes. Com este tema pioneiro o objetivo é mostrar quais foram as prioridades científicas na investigação desta área. Esta temática para além de extremamente atual tem uma enorme relevância porque, mais do que nunca, fomos expostos a uma comunicação em saúde como não se tinha visto anteriormente.

A necessidade de estar sempre a par dos novos desenvolvimentos foi e continua a ser imprescindível, mas com tanta informação diária por vezes é difícil estar a par de todas as descobertas e suposições feitas sobre o vírus. Como afirma Cordeiro *et al.* (2007, p. 428) "Nas últimas décadas, o grande volume das informações científicas geradas na área da Saúde aponta para a necessidade de síntese que facilitam o acesso às mesmas, possibilitando conclusões baseadas na combinação dos resultados oriundos de múltiplas fontes" e desta forma, nunca foi tão importante como agora elaborar uma revisão dos artigos de modo a organizar a informação contribuindo assim para o que se possa desenvolver uma base de conhecimento sólida que promove uma atualização por parte dos profissionais de saúde, fazendo com que sejam percecionadas as diferenças entre estudos da mesma questão clínica (Webster & Watson, 2002; Galvão *et al.*, 2004).

A base deste estudo centra-se na recolha de todas as referências encontradas na base de dados *PubMed*, durante um período de 6 meses de publicações. Cada uma das referências foi colocada num gestor de referências bibliográficas (*Mendeley*) e

posteriormente foram transferidas para uma tabela de *Microsoft Excel* onde selecionamos os artigos científicos através de quatro critérios de inclusão que variavam entre a língua, o acesso, a tipologia e o foco do artigo científico. Na sua totalidade foram encontradas 2236 publicações num curto espaço de tempo, algo que se deveu à situação pandémica que todos vivemos e a luta pelas novas descobertas, inteiramente ligada à competitividade que existe na comunidade científica.

Queremos descobrir que avanços os artigos publicados neste período nos podem trazer e de que modo é que estes são ou foram usados para transmitir a informação. Neste sentido existem questões que se prendem ao desenrolar do nosso trabalho. Procuramos saber se na amostra recolhida a língua em que mais publicações existem é o Inglês. A nossa hipótese de resposta é que será expectável encontrarmos um maior número de publicações na língua Inglesa, por ter um caráter internacional. Espera-se ainda encontrar um grande número de artigos em Chinês devido à origem da doença. Verificaremos ainda se existe uma facilidade de acesso às publicações científicas sobre a COVID-19. Pensamos que o acesso deverá ser, numa larga maioria, livre, visto que com a situação pandémica a maioria das revistas decidiram colocar as publicações em *open access*. Pretendemos ainda saber, a nível da temática dos artigos científicos encontrados, qual/quais os temas tem incidido o nosso *corpus*. O Campo da doença deverá ser aquele que se destaca mais. Sendo o vírus desconhecido e existindo uma doença nova é necessário descobrir, em primeiro lugar, a origem, como se manifesta, as suas características, entre outros e, só depois o tratamento e a cura. Por isso, é espectável um destaque na temática da doença. Com estas três questões e hipóteses iremos ter uma noção básica da comunicação científica, mais concretamente na área da saúde, numa situação de pandemia.

Como foi referido anteriormente efetuaremos uma Revisão Sistemática dos artigos através de uma categorização apenas pelo campo de conhecimento, sendo que aquilo que nos interessa são as temáticas e a forma como validam o conhecimento científico. Tencionamos realizar uma amostra em cada um dos campos encontrados após a nossa revisão, analisando o *abstract* perceberemos a incidência do conteúdo,

comprovando a veracidade das nossas hipóteses.

A presente dissertação será dividida em 5 partes diferentes. Começamos por contextualizar aquilo que será desenvolvido, introduzir alguns conceitos e definir objetivos, questões e hipóteses, presentes nesta introdução. Numa fase seguinte daremos a conhecer, através de uma fundamentação teórica, a comunicação científica e a comunicação em saúde. Na terceira parte abordaremos a metodologia escolhida, explicando a forma como é feita uma Revisão Sistemática e também a forma como a adequamos a sua execução, definindo a categorização definida para a recolha bibliográfica efetuada. Na etapa seguinte da investigação procederemos à análise dos dados obtidos de modo a, para finalizar, retirar o que foi descoberto, dar respostas às nossas questões iniciais, confirmar as nossas hipóteses e desenvolver ideias que possam contribuir para o avanço neste campo de conhecimento. Estas informações estarão presentes nas nossa discussão e nas considerações finais.

Capítulo 1 – Processos Comunicacionais e Comunidade Científica

1.1. Comunidade científica como ponto de partida para o conceito de comunicação científica

1.1.1. Comunidade científica

O termo Comunicação Científica, apesar de recente, reporta para processos de troca de conhecimento dentro da comunidade científica, que têm sido estabelecidos ao longo do tempo. O conhecimento científico iniciou o seu processo de divulgação para o público leigo na Europa por volta do século XV (origem da ciência moderna) (Mueller & Caribé, 2010, p. 14). As mesmas autoras referem ainda que o acesso ao conhecimento científico por parte da sociedade é facilmente adquirido nos países democráticos, no entanto teve uma evolução marcada pela repressão e preconceito na área, devido à religião que era vista como a explicação para todos os temas.

Podemos interligar este novo conhecimento da ciência com o Iluminismo e o Enciclopedismo. O Enciclopedismo foi um movimento dado na segunda metade do século XVIII. Trata-se de um movimento cultural e filosófico, este movimento enquadra-se no Iluminismo (movimento intelectual e filosófico, dominando o mundo das ideias), tal como o afirma Boto (1998, p. 109). Segundo este autor, o movimento iniciou-se com d'Alembert e Diderot, enciclopedistas estes que tinham como objetivo catalogar e divulgar todo o conhecimento iluminista com a escrita, publicação e divulgação da enciclopédia. Segundo Sierra (1991, p. 103) a explicação para o sucesso da divulgação de conhecimento científico na Enciclopédia foi o facto de "livrar as pessoas da ignorância". Este intelectualismo (Sierra, 1991, p. 103) é pragmático e utilitário, contraria ao tipo de divulgação científica que se observava anteriormente que era apenas ambiciosa, de contemplação pura e desinteressante.

A comunicação científica tem como objetivo registar as inovações, novas descobertas e avanços alcançados através de diferentes estudos e pesquisas. Freitas & Leite (2019, p. 274), antes mesmo de avançar com o conceito em questão, definem

aquilo que é comunidade científica, pois é o ponto de partida para a noção de comunicação científica. Desta forma a comunidade científica tem interesses e práticas em comum entre todos os seus membros, direcionando os indivíduos no estudo de determinadas problemática, fundamentando teorias que deverão ser aceites pelo grupo de pessoas. A comunidade científica é unicamente formada por especialistas numa determinada área e conhecimento, partilhando, desta forma, um paradigma (Kuhn, 1998, p. 219).

Ao longo da História, verifica-se uma competitividade dentro desta comunidade, originando contínuos processos de aceitação e rejeição de teorias, devido aos interesses múltiplos, regidos por um sistema que envolve interesses individuais por parte dos diferentes investigadores (Freitas & Leite, 2019, p. 274). Entendendo comunidade científica como um sistema social, Storer (1966, p. 29 *apud* Freitas & Leite, 2019, p. 274) define-a como "qualquer associação de elementos dinâmicos, reconhecidamente delimitada, os quais são, de alguma forma, interconectados e independentes."

No que ainda diz respeito à competitividade patente na comunidade científica, podemos verificar também que um dos motivos desta competição é o facto de a ciência se ligar aos interesses comerciais, o que, por sua vez, origina uma competição entre os agentes envolvidos na área de pesquisa (Coelho, 2006, p. 185). Estas situações, segundo Hagstrom (1974, p. 2) induzem os cientistas, por vezes, a uma mudança de especialidade e a serem reservados quanto às suas investigações. Estas reservas relativamente às suas pesquisas tornam-se complicada no caso de pesquisas colaborativas. A ciência sempre foi uma espécie de empreendedorismo competitivo e, apesar do reconhecimento dos benefícios da ciência em equipa, ao haver uma redução dos financiamentos para investigação, foi provocada uma maior competitividade (Fang & Casadevall, 2015, p. 1229). Podemos perceber que existem benefícios nesta competição, pois, desta forma, existe um incentivo para que os cientistas façam descobertas mais rápido. No entanto temos como efeitos adversos a falta de compartilhamento das investigações e, por sua vez, dos resultados, que, por consequência, leva ao atraso de novas descobertas (Fang & Casadevall, 2015, p. 1229).

Se analisarmos esta competição no decorrer da História, compreendemos que esta prejudicou mais do que aquilo que auxiliou, já que as grandes descobertas, as descobertas transformadoras, ocorreram na ausência de uma competição (Fang & Casadevall, 2015, p. 1229). Coelho (2006, p. 185) afirma que esta competição nem sempre tem como base a ética, pois, como referido entrelinhas, existem interesses como a liderança e o sucesso. O primeiro a descobrir algo relevante, será aquele que alcançou a meta imposta de investigação, tendo o seu valor compreendido nas áreas de conhecimento humano. Desta forma é fácil entender o roteiro do primeiro autor que alcançou os objetivos. Ao ser o primeiro a fazer uma descoberta importante, também será o primeiro a publicar um artigo científico e, por sua vez, ficará com a patente sobre essa descoberta. E, por esse motivo, será citado em qualquer publicação científica acerca dessa questão. E tudo isto leva-nos aos interesses da liderança e sucesso acima referidos, bem como, os interesses económico-monetários e de reconhecimento intelectual, tanto por parte do público científico, como pelo público leigo através dos meios de comunicação. Isto leva a que autores como, Fang & Casadevall (2015, p. 1229), reconheçam o papel preponderante da economia na ciência. Contudo, os mesmos refreiam o excesso de competitividade na ciência, pois, dessa forma, a ciência seria arruinada.

Para existir progressão na ciência terá de haver interação dentro da comunidade científica. A base é o conhecimento e a partilha desse património adquirido, sendo importante existir uma constante reconstrução desse mesmo património, de modo a existir avanço, que geram novas linhas de conhecimento. O julgamento feito por toda a comunidade científica e a sua aprovação faz com que exista uma confiabilidade nesses resultados (Mueller, 2003, p. 18) sendo esta forma a principal razão de dependência da existência de um sistema de comunicação que se traduz por haver canais formais e informais utilizados para uma boa comunicação entre cientistas que, por sua vez, leva ao avanço das pesquisas e dos resultados (Mueller, 2003, p. 19). De uma forma breve, os canais informais são aqueles que são realizados entre emissor e recetor de

informação, por exemplo, reuniões, trocas de correspondências e visitas técnicas. Os canais formais caraterizam-se por transmitirem as informações já comprovadas em estudos, por exemplo, documentos institucionais, documentos científicos, livros e revistas científicas (Costa, 2009, p. 76-77). Abordaremos os tipos de canais de uma forma mais completa no seguimento do estudo.

Percebemos, desta forma, que a comunidade científica é reconhecida a nível interno e externo, isto é, tanto dentro do próprio grupo (comunidade científica) como fora dele (sociedade) existe um reconhecimento intrínseco (Fourez, 1995, p. 93). Estas comunidades segundo Le Coadic (2004, p. 31 *apud* Carneiro *et al.*, 2019) são "redes de organizações e relações sociais formais e informais que desempenham várias funções", sendo uma dessas funções a comunicação de ciência produzida. O objetivo principal é existir uma troca de informação relativamente às investigações que vão sendo desenvolvidas e, deste modo, haverá um contacto entre cientistas.

Fourez (1995, p. 102) resume esta comunidade como sendo um grupo social de estrutura bem definida e de reconhecimento interno (entre os seus pares) e a nível externo (pela sociedade) de modo a serem recompensados, valorizados e reconhecidos como especialistas. Porém o autor revela algumas ambiguidades (Fourez, 1995, p. 102) como a falsa imagem de "comunidade", a hierarquização interna e a divisão de trabalho, os interesses que divergem a nível interno, a dependência a nível económico, a burocracia existente e, por fim, a filosofia pouco critica em relação à sociedade que, tendencialmente, tem de lidar com ideias bastante abstratas.

Em suma, a comunidade científica é constituída por um conjunto de pessoas que pensam em determinadas ideias, testam, confirmam, publicam e debatem. Qualquer área científica não poderá existir sem uma opinião dos restantes membros da área. Apenas com o conhecimento da pesquisa conduzida pelos restantes membros da comunidade conseguimos validar o estudo (Ziman, 1968). Como tal, a comunidade científica é o ponto de partida para a noção que pretendemos definir, a de comunicação científica. Surge-nos ainda, antes de passarmos para o tópico seguinte, o conceito de Epistemologia. Segundo Tesser (1994, p. 92) Epistemologia "significa discurso (logos)

sobre a ciência (episteme). (Episteme + logos). Epistemologia: é a ciência da ciência. Filosofia da ciência. É o estudo crítico dos princípios, das hipóteses e dos resultados das diversas ciências. É a teoria do conhecimento.". Simplificando, a Epistemologia baseia-se em explicar o conhecimento científico nas suas diversas formas e nas diversas áreas, sendo este um conhecimento provisório, pois vai mudando com o passar dos anos e com as novas descobertas. Podemos caracterizar a Epistemologia como uma reflexão sobre o universo da ciência, sendo esta reflexão profunda e crítica, que ocupando um lugar de destaque na sociedade contemporânea, visto que a ciência faz parte de diversas atividades humanas (Tesser, 1994, p. 97). O conceito de conhecimento é bastante amplo, maior ainda que o de ciência, visto que esta é uma espécie de conhecimento humano, pois o próprio conhecimento tem como base tudo o que nos envolve, nomeadamente características e objetivos de cada área de interesse (Rabuske, 1987, p. 12).

1.1.2. Comunicação científica

Desde a conceção de uma determinada ideia, inovadora ou não, até serem encontradas conclusões, existe o processo designado por comunicação científica. Desta forma os investigadores divulgam o seu trabalho, permitindo assim que seja estudado, melhorado e, efetivamente, conhecido pelos investigadores interessados pela temática. Segundo Muller (2003, p. 19) "A produção da literatura de uma área científica envolve muitas e diferentes atividades de comunicação entre os pesquisadores, algumas das quais antecedem e outras se seguem a sua publicação.". Nesse sentido, o investigador faz uso do sistema de comunicação em diversos momentos, sendo um dos atores desse mesmo processo, pois produz novo conhecimento através de algo já contruído (Leite & Costa, 2007, p. 93).

Verificamos no tópico anterior que as comunidades científicas são constituídas por inúmeros elementos e processos, onde se destacam os seus atores, funções e atividades, constituindo assim o sistema de comunicação (Freitas & Leite, 2019, p. 273).

Muller (2003, p. 19) valida esta situação afirmando que o trabalho realizado pelos investigadores depende de um sistema de comunicação complexo que compreende canais formais e informais, utilizados para comunicar resultados obtidos e/ou alcançados por diferentes pesquisadores. Nesta área é através da literatura científica que são expostos os diferentes trabalhos por parte dos seus pesquisadores, havendo debate entre os seus pares, de modo a que exista um avanço. Segundo Ziman (1968, p. 18) não existe validação científica se não existir literatura que a suporte, por conseguinte, uma aprovação dos seus pares.

Este campo da comunicação, tal como acontece com outros, não é de fácil definição e autores como Trench e Bucchi (2010, p. 1) abordam esse facto, sendo que o campo da comunicação científica aparece como resposta a necessidades externas. Para uma disciplina ser definida como tal é necessário que existam condições. Trench e Bucchi (2010, p. 1) apontam no seu ensaio sete pontos para que possamos definir uma disciplina:

1. Campo de estudo limitado;
2. Interesses, termos e conceitos compartilhados;
3. Presença significativa no ensino e pesquisa no setor do ensino superior;
4. Alcance internacional;
5. Publicação académica especializada;
6. Comunidades organizadas ou redes de estudiosos;
7. Corpo de trabalho teórico que sustenta o estudo empírico.

Este tipo de comunicação possui um veículo de transmissão do conhecimento científico adquirido que segundo Cortês (2006, p. 35 *apud* Martinelli e Teixeira, 2014, p. 2) é um desafio desde os seus primórdios até à modernidade.

Existe uma ligação intrínseca entre a informação e a comunicação na disciplina, no entanto, segundo Targino (2000, p. 24), não devemos restringir a comunicação a uma simples troca de informação entre os cientistas, pelo facto de a ciência integrar

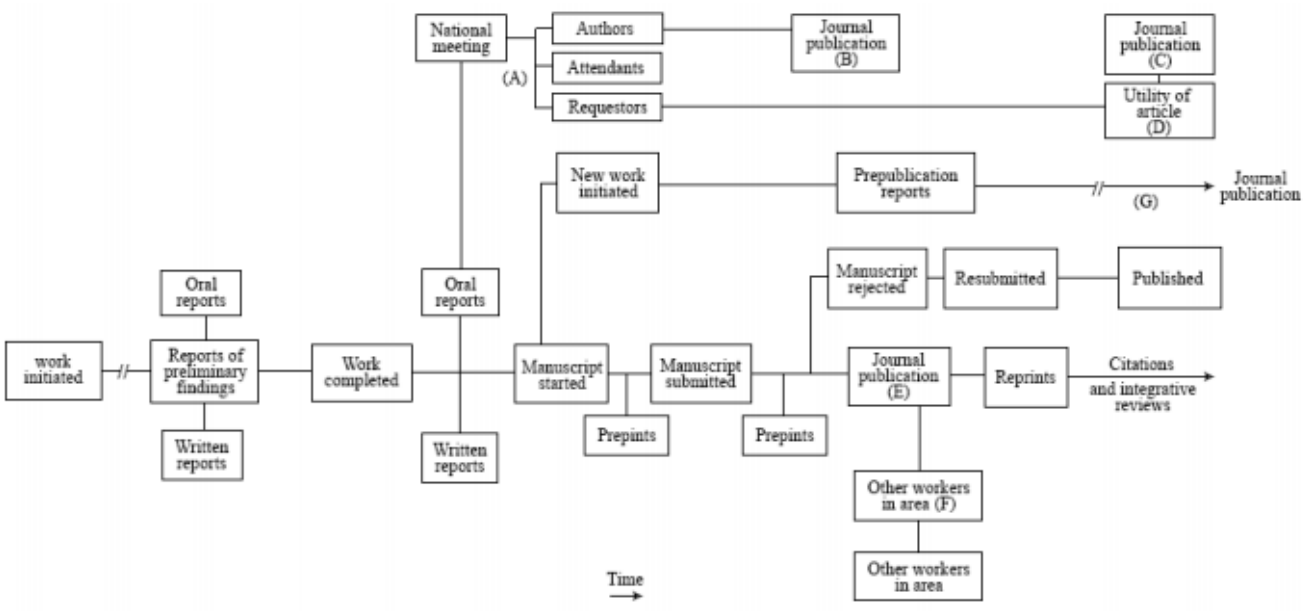
determinados elementos como pesquisadores, cientistas e académicos dentro da sua estrutura. Isto admite que haja uma operacionalização de investigadores (Targuino, 2000, p. 24) que é permitida, pois a ciência integra diversos elementos do sistema social, isto é, desde pesquisadores e cientistas ao fluxo de ideias e teorias. Pensando na comunicação da ciência como um trabalho conjunto em que existe uma aquisição de informação, é através do trabalho individual, que, após estar produzido, dissemina as novas descobertas para os restantes membros desta comunidade (Targino, 2000, p. 24).

Esta área da comunicação não se restringe apenas ao meio científico. Apesar de estar mais destinada para este meio, leigos podem ter acesso aos avanços que vão surgindo, de modo a conhecer o trabalho dos pesquisadores. Em suma, para comunicar ciência, é imprescindível que qualquer estudo seja publicado, pois os resultados de uma determinada experiência científica poderão ser fascinantes (apesar de não estar terminada até os seus resultados serem publicados) (Magalhães, 2015, p. 55). Desta forma cabe-nos procurar os processos de funcionamento do sistema de comunicação científica

1.1.3.A evolução do sistema de comunicação científica

Tal como afirma Vieira (2010, p. 297) "A comunicação científica e seus sistemas de comunicação são um importante elemento constituinte da ciência que se apoia nessa conformação para divulgação de seus resultados de pesquisa e também de colaborações entre os pares." daí ser relevante abordarmos a evolução do sistema de comunicação científico até à atualidade. Garvey & Griffith (1979) foram pioneiros na elaboração e apresentação de um modelo de sistema de comunicação científica, pois denotaram a existência de problemáticas envolventes na investigação e comunicação de qualquer pesquisa.

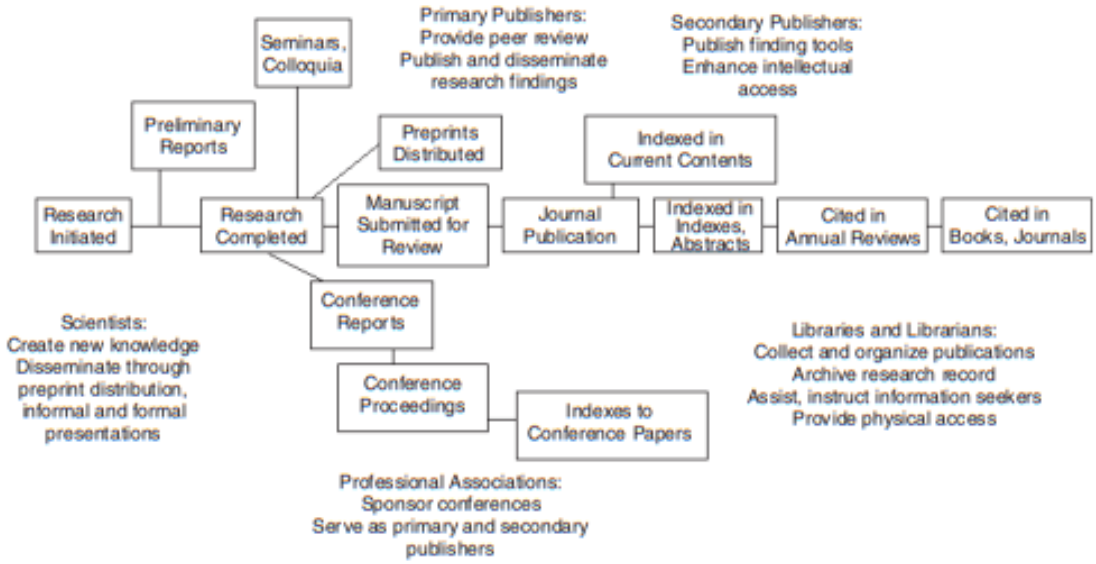
Figura 1 – "Sistema de comunicação científica" – Garvey & Griffith (1979)



Fonte: Gomes (2013, p. 29)

Verificamos no modelo de Garvey & Griffith (1979) todas as etapas existentes, criadas no século passado, para uma boa comunicação científica. Este é um sistema pioneiro que, apesar de ter sofrido adaptações por diversos autores, muitas das etapas não sofreram alterações. Inicia-se o processo com o começo do trabalho ou do estudo, passando por relatórios preliminares e completando o trabalho. Numa fase seguinte passamos para a escrita, submissão e publicação, fazendo com que existam novas impressões e citações. Desta forma, com uma linha temporal delimitada, da esquerda para a direita, existem ramificações dentro das diferentes etapas. Verifica-se ainda que as apresentações orais e publicações se destacam no processo de comunicação científica. Este modelo foi, na década de 70, adaptado desde logo para todas as áreas de conhecimento (Mueller, 2003, p. 25). Autores como Hurd (1996) definem quais são as sequências de passos essenciais do modelo tradicional criado pelos autores acima referidos.

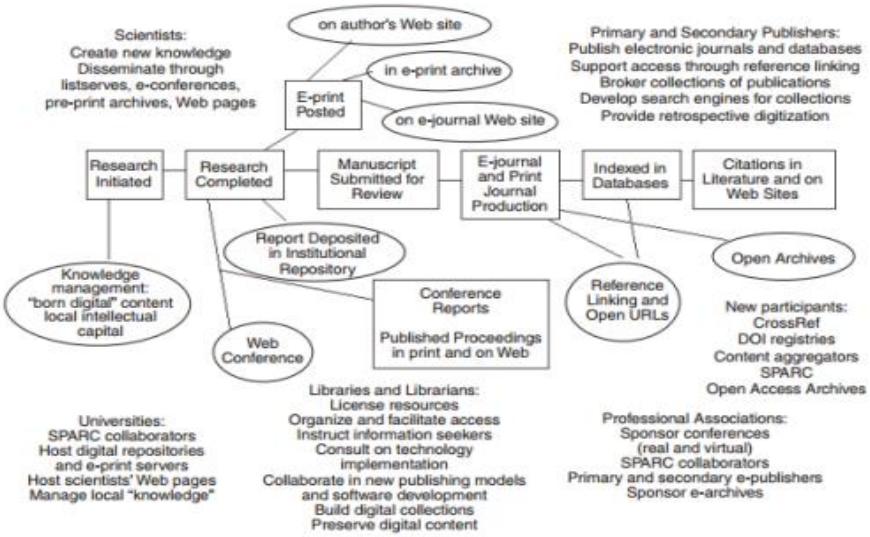
Figura 2 – Modelo tradicional de Garvey & Griffith adaptado por Hurd (1996)



Fonte: Hurd (2004, p. 8)

Relativamente ao modelo de Garvey e Griffith é afirmado por Mueller (2003, p. 27) “Nesse modelo é fácil perceber que a informação flui por muitos canais e que diferentes tipos de documentos são produzidos, cujas características variam conforme o estágio da pesquisa e tipo de público a que se destina e o objetivo de quem a comunica.”. Hurd (2004, p. 9) acrescenta ainda que o modelo descreve a comunicação formal e informal entre indivíduos e grupos. Mais tarde, Hurd (2004, p. 13), propõe ainda um modelo mais complexo tendo por base o anterior

Figura 3 – Modelo Hurd: Comunicação científica no mundo digital



Fonte: Hurd (2004, p. 14)

Neste terceiro modelo proposto por Hurd (2004) temos uma mudança significativa que passa da publicação a nível impresso para uma publicação eletrónica. Esta mudança altera o suporte de comunicação, no entanto é importante ter um sistema de comunicação híbrido e não cingido apenas a um dos meios (Hurd, 2004, p. 11).

Vistos estes três modelos surgem-nos dois termos importantes a serem definidos: os canais de comunicação informais e os canais de comunicação formais. Encontramos em Mueller (2003, p. 27) abordados estes dois canais. Verifica-se que os canais de comunicação formais são os utilizados no início do modelo, isto é, o pesquisador decide todo o tipo de informação que pretende abordar, sendo de acesso limitado pelo facto de destinar-se a um determinado público mais restrito. A título de exemplo temos os relatórios de pesquisa, textos de seminários e textos de reuniões. No caso dos canais de comunicação formais permitem um acesso amplo, sendo a informação adquirida de maneira simplificada, sendo informações estas mais trabalhadas, referindo-se assim a estágios mais avançados do modelo acima apresentado.

Meadows (1974 *apud* Muller, 2003, p. 27) distingue ainda os canais formais que

se distanciam dos informais numa simples etapa em que, no caso dos formais quem escolhe é quem consulta e não o investigador em si. Outra diferença encontrada é o facto de nos canais informais existir uma maior interação com o pesquisador sendo que os formais não englobam isso.

Concluímos desta forma que antes da inserção das Tecnologias da Informação (TI) o modelo apresentado era a referência de funcionamento do processo de comunicação científica (Bjork, 2007, p. 3). Posto isto será interessante verificar como existia a comunicação científica tradicional contrapondo-se à comunicação científica eletrónica.

1.2. Da comunicação científica tradicional à eletrónica

1.2.1. Comunicação científica tradicional

Os jornais periódicos científicos surgiram no século XVII, século este onde existiu uma grande mudança na investigação científica. Deixou-se assim de apenas fazer uma dedução científica e passou a haver uma exigência em evidências através da observação e experiências empíricas, sendo que somente desta forma poderia ser considerado conhecimento científico (Mueller, 2000, p. 73). Assim nasce a modernização da comunicação científica em que a comunicação passou a ser mais rápida, isto é, com uma periodicidade, de modo a existirem avanços significativos. Assim foi feita a transição para a comunicação tradicional.

Castro (2006, pp. 58-59) aborda que a "comunicação científica tradicional reflete o modelo de publicação impressa e pode ser descrito esquematicamente em cinto etapas: redação, revisão, publicação, indexação e disseminação.", ou seja, desde início que temos etapas essenciais para uma investigação segundo o fluxo de comunicação tradicional. Os resultados de cada etapa existente são comunicados através de documentos impressos, desta forma, transportados de uma etapa para outra em formato física.

O fluxo tradicional tem muitas lacunas, restringindo assim o acesso aos documentos publicados, ou seja, não existe um *open access*, tão característico da comunicação eletrónica que veremos no tópico seguinte. Castro (2006, p. 59) destaca algumas limitações indicadas abaixo:

1. Longo tempo de espera (meses a anos) entra cada manuscrito, aprovação, edição, impressão e distribuição;
2. Difícil acesso e custos elevados de distribuição das revistas impressas que se restringem a coleções de bibliotecas;
3. Elevado custo de assinatura das revistas, cobradas pelas editoras, distribuidoras privadas ou pelas sociedades científicas;
4. Necessidade de ampliação de espaços para arquivar as coleções impressas.

Com o surgimento da *Internet* este tipo de problemas começou a ser resolvidos, pois, mesmo com tentativas pioneiras, nunca deu resultado, até chegarmos à era eletrónica que facilitou o fluxo de comunicação científica, tornando-a cada vez mais eletrónica.

1.2.2. Comunicação científica eletrónica

Houve uma alteração significativa no fluxo da comunicação científica e também do modo como é feita ciência, devido à atuação de redes transdisciplinares e heterogêneas entre diferentes instituições, havendo uma integração da comunidade científica em diferentes setores da sociedade (Castro, 2006, p. 59). O recurso aos meios eletrónicos é mais utilizado pelo meio informal no processo de pesquisa, pois envolve troca de ideias entre pesquisadores. Já no meio formal cresce quanto ao número de publicações periódicas, no caso em formato eletrónico (Oliveira & Noronha, 2005, p. 83).

Desta forma Leite (2001, p. 16) afirma que a ciência e a internet não estão, nem estarão estagnadas no tempo, havendo um crescimento e elaboração inerente, fazendo com que exista novo conhecimento e quebras de paradigmas. O impulso para estas evidências devem-se à aproximação das comunidades científicas, onde existe cooperação verificada nos ambientes da rede, ainda em Leite (2001, p. 16). Castro (2006, p. 60) descortina movimento de acesso aberto iniciado em 2001 que "vem garantindo a publicação livre de documentos em meio eletrónico, com a preservação de direitos autorais, desde que citadas as fontes. Nessa linha, vêm-se fortalecendo os repositórios de revistas de acesso livre e dos arquivos abertos institucionais e temáticos".

A *Internet*, cada vez mais, tem sido usada como um canal de comunicação científica, ligada ao sistema informal, visto que os contactos estabelecidos entre a comunidade científica, maioritariamente, são através dos meios digitais, por exemplo, e-mail e grupos de discussão (Silva, 2002, p. 3). Oliveira (1996, p. 82) afirma que com a expansão e popularização do uso de meios eletrónicos, sendo os serviços de telecomunicações mais rápidos e versáteis, possibilitam uma produção de documentos por digitais de forma sofisticada, quase ilimitada e de fácil acesso às publicações científicas. Ressaltam-se ainda as lacunas existentes no fluxo tradicional de comunicação que, com o facilitismo da *Internet*, poderão explicar a comunicação eletrónica como sendo mais eficaz. Casto (2006, p. 59) revela-nos que existem diversas limitações no meio tradicional de comunicação científica. Algumas delas são o tempo que demora a ser preparado um manuscrito, a aprovação e edição, sucedendo-se a impressão e distribuição, fazendo com que cada etapa possa demorar anos, restringindo o acesso, muitas vezes, pelo valor a ser pago e por não serem acessíveis durante muito tempo e a todos os públicos interessados.

Com as limitações do fluxo tradicional, de modo a conseguir-se superar as diversas delimitações e lacunas, na primeira metade do século XX surgiram propostas para eliminar o modelo utilizado de publicação das revistas em fascículos, passando

desta forma a separadas (Castro, 2006, p. 59). A mesma autora fala-nos ainda que, na área da saúde, o *National Institutes of Health* (NIH) , nos Estados Unidos da América (EUA), lançou o *Information Exchange Group*, de modo a superar a falta de contacto entre investigadores, fazendo com que houvesse, desta forma, um contacto direto. Destaca-se a separação dos artigos não publicados pelo sistema formal de comunicação científica. Segundo Silva (2002, p. 3) estes avanços criaram uma linha ténue na fronteira da comunicação formal e informal. Percebemos que, atualmente, existe uma prevalência do sistema informal de comunicação científica, sendo o formal menos usado.

De uma forma sucinta o meio de comunicação eletrónico veio resolver os problemas que envolviam as publicações de revistas de forma tradicional, nomeadamente os custos de produção, impressão, distribuição, irregularidade na publicação e espaço de armazenamento. Como principais vantagens, temos a velocidade de disseminação de informação e os baixos custos de produção e distribuição (Silva, 2002, p. 6). A *Internet* não só alterou a dinâmica de fluxo da comunicação científica, como também a forma de fazer ciência, onde a comunidade científica integrou-se noutros setores da sociedade. Packer (2005, p. 262) refere ainda que "Além da dimensão inovadora que a *Internet* aporta como tecnologia de meio de publicação, surge a dimensão de caráter político que preconiza o conhecimento científico como bem público, indispensável para o desenvolvimento social e econômico, particularmente para contribuir a superar a pobreza"

Existem ainda desafios (Castro, 2006, p. 62) na utilização destes novos meios de comunicação digitais, sendo esse desafio a utilização de todas as potencialidades, possibilidades e aprimoramento dos aspetos positivos e dos padrões de qualidade deste novo fluxo de comunicação. Dentro deste prisma existiram revistas que adotaram a publicação de artigos por meio *online* e que, posteriormente, publicam também de forma impressa, transformando-se esta última forma num subproduto das publicações feitas por meio eletrónico (Castro, 2006, p. 62).

Oliveira & Noronha (2005, p. 83) adaptam as características básicas dos diferentes

tipos de canais de comunicação (que até aqui já foram abordados) a partir de Targino (2000, pp. 70-78), sendo os canais de comunicação formal, informal e eletrónica, conforme se pode observar na Figura 4.

Figura 4 – Características dos canais de comunicação formal, informal e eletrónica adaptado por Oliveira & Noronha (2005) de Targino (2000)

Canais Formais	Canais Informais	Canais Eletrônicos
Público potencialmente grande	Público restrito	Público potencialmente grande
Informação armazenada e recuperável	Informação armazenada e não recuperável	Armazenamento e recuperação complexos
Informação relativamente antiga	Informação recente	Informação recente
Direção do fluxo selecionada pelo usuário	Direção do fluxo selecionado pelo produtor	Direção do fluxo selecionada pelo usuário
Redundância moderada	Redundância, às vezes significativa	Redundância, às vezes significativa
Avaliação prévia	Sem avaliação prévia	Sem avaliação prévia, em geral
Feedback irrisório para o autor	Feedback significativo para o autor	Feedback significativo para o autor

Fonte: Oliveira & Noronha (2005)

1.3. Uma área em desenvolvimento: A abrangência da Comunicação de Saúde

Apesar de recente, a Comunicação em Saúde tem evoluído rapidamente como área multidisciplinar das Ciências Sociais (Rimer, 2006), segundo Ruão *et al.* (2012, p. 5) nos últimos vinte anos por todo o mundo. A outra expressão da Comunicação em Saúde deu-se no anos 80, sendo que se trata de um campo integrado nas Ciências da Comunicação segundo vários autores (Kreps & Thornton, 1984; Sharf, 1984; Northouse & Northouse, 1985), existindo uma preocupação "com a influência da comunicação humana mediada na prestação e promoção de cuidados de saúde às populações" (Lopes *et al* 2011, p. 103). O crescimento desta área deu-se como resposta a interesses políticos e pragmáticos para a literacia em saúde, colmatando numa convergência de oportunidades numa colaboração entre Ciências da Comunicação e Saúde Pública (Lopes *et al* 2011, p. 103), existido uma boa recetividade quanto aos temas da saúde por parte da sociedade contemporânea.

Sabendo que a Comunicação em Saúde é um campo de pesquisa complexo e muito vasto (Ruão *et al.*, 2012, p. 5), incluem-se diferentes dimensões de estudo, sendo intrapessoal, interpessoal, comunicação de grupo e ainda perspetivas organizacionais e sociais (Kreps *et al.*, 1998, p. 11). Nesta dissertação verifica-se como a comunicação em saúde atua a nível social, pois entenderemos a disseminação da informação existente sobre o surto pandémico de COVID-19. Através da verificação de artigos científicos sobre a temática, procurando compreender a construção social da saúde em artigos científicos. O desenvolvimento desta área multidisciplinar tem permitido a existência de uma mediação de recursos que se concretizam no cumprimento de objetivos que estão diretamente associados à literacia em saúde, isto é, à promoção e educação em saúde (Chaiken & Eagly, 1983).

Ainda assim, e apesar da sua natureza aplicada e da associação com a melhoria dos resultados em Saúde (Jackson, 2005), tem sido relatada uma preocupação com a utilização não sustentada da evidência que esta área produz. Autores como Kreps & Bonaguro (2009), e Minkler & Wallerstein (2002), têm apontado um maior foco no processo de conduzir e relatar pesquisas em Comunicação em Saúde, do que a aplicação dos resultados de investigação para práticas e políticas públicas. Esta verdade tem sido também extensível ao trabalho feito em torno da investigação internacional em Jornalismo de Saúde (Nutbeam, 2000).

1.4. A Literacia em Saúde como promoção de uma boa comunicação

Apesar de relativamente recente, este conceito de Literacia em Saúde tem vindo a ganhar um destaque crescente na área da saúde pública e dos cuidados de saúde, sendo um conceito crucial para o papel ativo do cidadão neste campo (Kickbusch & Nutbeam, 2000). Este conceito foi pela primeira vez referido em 1974, no artigo "Health education as social policy" por Scott Simonds, no entanto apenas no final da década de 90 começaram a surgir as primeiras definições, sendo assim um passo dado na literacia em saúde. Verificamos que no artigo de Simonds, segundo Ratzan (2001), esta Literacia

era referida para áreas diversas, nomeadamente Ciência e História, mas onde incluía a Saúde.

O sentido do conceito de Literacia em Saúde foi-se aperfeiçoando e ganhando extrema importância. Numa tentativa de verificar a evolução do conceito e a definição de diversos autores Sorensen *et al.* (2012) realiza uma revisão sistemática onde apresenta 17 definições dadas por diferentes autores. Com esta revisão existe uma caracterização ou, pelo menos, a tentativa de o fazer, no sentido de responder às crescentes exigências que verificamos na área da Saúde, na sociedade contemporânea. Sendo que, como já foi referido, o conceito, a abordar neste tópico, tem evoluído numa definição relacionada com diversas tarefas numa componente social e pessoal, baseando-se muito na capacidade de tomar decisões fundamentais, assumir responsabilidades das decisões e percecionar de forma correta aquilo que é dito.

Posto isto, a Organização Mundial de Saúde (OMS), em 1998, define Literacia em Saúde como o "conjunto de competências cognitivas e sociais e a capacidade dos indivíduos para acederem à compreensão e ao uso da informação de forma a promover e manter uma boa saúde". Um ano após a definição da OMS, um relatório do *Council of Scientific Affairs da American Medical Association* (1999, p. 256) define Literacia em Saúde como "a capacidade de ler e compreender prescrições, folhetos informativos de medicamentos, e outros materiais essenciais relacionados com a saúde requeridos para com sucesso ser possível o funcionamento como doente". Com estas duas definições verificamos que as mesmas se complementam, sendo a primeira um conceito bastante amplo e a segunda com maior enfoque na informação médica a que o paciente tem acesso.

Em 2000 é acrescentada a esta definição "a capacidade de os indivíduos obterem, processarem e entenderem informações básicas de saúde e saber os serviços de que necessitam para fazer escolhas apropriadas em saúde" por Ratzan & Parker (2000). Em 2005 (Ilona Kickbusch *et al.*, 2005 *apud* Pedro *et al.* 2016, p. 261) acrescenta que se trata da "capacidade para tomar decisões fundamentadas, no decurso da vida do dia-a-dia, em casa, na comunidade, no local e trabalho, na utilização de serviços de saúde, no

mercado e no contexto político. É uma estratégia de capacitação para aumentar o controlo das pessoas sobre a sua saúde, a capacidade para procurar informação e para assumir as responsabilidades". No caso destas duas definições vemos na primeira a capacidade de a população utilizar os serviços de saúde e tomar decisões importantes para a caracterização dos níveis de Literacia em Saúde e na segunda temos uma componente social e de vida social.

Postas estas definições, aquela que se revela ser mais completa e abordar os tópicos essenciais para definir Literacia em Saúde é, desde 2005, a de Ilona Kickbusch *el al.*, sendo a que continua a ser mais utilizada na literatura.

1.5. Breve contexto da COVID-19

A família do vírus *Coronaviridae* existe há vários anos, sendo que os Coronavírus podem causar infeções no homem, mamíferos e aves, segundo a DGS. Ainda segundo a entidade as infeções afetam o sistema respiratório, o que se traduz em algo semelhante às constipações ou poderá agravar e evoluir para pneumonia. Betacoronavírus, como o SARS-CoV, em 2002-2003, causou uma epidemia na China e, mais tarde, em 2012-2013, o MERS-CoV na Arábia Saudita (Rodriguez-Morales *et al.*, 2020, p. 2). Os coronavírus são de origem animal, sendo transmitidos ao Homem a partir de um animal hospedeiro do vírus (DGS, 2020).

Existem várias semelhanças e diferenças quanto à epidemiologia e às características de SARS, MERS e COVID (Rodriguez-Morales *et al.*, 2020, p. 2). A SARS-CoV-2 é responsável pela doença COVID-19, podendo causar pneumonia e a síndrome de desconforto respiratório (SDRA), assim como outras infeções pulmonares (Bikdeli *et al.*, 2020, p. 1005). O Novo Coronavírus é um agente zoonótico emergente que foi identificado pela primeira vez, em dezembro de 2019, na China (Rodriguez-Morales *et al.*, 2020, p. 2).

A DGS (2020) define a origem do vírus SARS-CoV-2 como tendo "sido introduzido na espécie humana por transmissão zoonótica, ou seja, a partir de uma espécie animal.

Vírus muito semelhantes foram identificados em morcegos e em pangolins, mas não é ainda claro o envolvimento destes animais na emergência do SARS-CoV-2 na espécie humana. As investigações continuam no sentido de esclarecer este processo para que melhor nos possamos defender de novas introduções.". Com isto vemos que esta é a teoria mais aceite para a origem do Novo Coronavírus, no entanto é algo ainda inconclusivo.

Na maioria dos casos as pessoas infetadas são assintomáticos ou então revelam sintomas ligeiros semelhantes aos da gripe (Nussbaumer-Streit *et al.*, 2020, p. 2) como febre, tosse, cansaço e dores musculares (DGS, 2020). Segundo as mesmas fontes existem ainda pessoas que revelam sintomas mais graves como pneumonia grave, síndrome respiratória aguda grave, septicemia, choque sético e eventual morte. Nussbaumer-Streit *et al.* (2020, p. 3) refere que ainda não existe vacina para a COVID-19, portanto é essencial, através da quarentena ou tratamentos, retardar a sua disseminação. A DGS (2020) apresenta que a COVID-19 se espalha rapidamente através de transmissão direta (contacto com pessoas infetadas) ou transmissão indireta (contacto com superfícies). Posto isto, é essencial para o combate desta pandemia termos as medidas de higiene, etiqueta respiratória, uso de máscara e distanciamento social.

Capítulo 2. – Metodologia

2.1. Breve abordagem sobre Revisão Sistemática

Ao longo deste estudo, de modo a obter os nossos resultados, optamos por utilizar o método de Revisão Sistemática. Através da recolha de artigos datados entre o dia 20 de novembro de 2019 e 2 de abril de 2020, cuja temática baseia-se no Novo Coronavírus, será efetuada uma Revisão Sistemática de publicações encontrados na base de dados *PubMed*. Antes de iniciarmos o estudo parece-nos relevante explicar em que consiste este método, seguindo-se da categorização utilizada para considerar os artigos que se enquadram nos nossos objetivos.

As Revisões Sistemáticas são importantes para estipular se as descobertas científicas são sólidas, de modo a poderem ser generalizadas nas diferentes populações, ambientes e variações num dado tratamento, assim como para percecionar se existe a possibilidade de as descobertas variarem significativamente dentro de subconjuntos específicos (Mulrow, 1994, p. 597). A vitalidade deste tipo de revisões é importante para uma tomada de decisão quanto aos cuidados de saúde, de modo a existir uma avaliação e uma validação da eficácia relativa das intervenções (Clark & Horton, 2001, p. 1928). Estas avaliações permitem que as perguntas sejam respondidas, sendo que somente assim sejam tratadas de forma confiável. É essencial que sejam feitas Revisões Sistemáticas da literatura para que as informações existentes sejam integradas com eficiência, sendo que possam ser fornecidos dados para uma tomada de decisão racional (Mulrow, 1994, p. 597).

Segundo Atallah & Castro (1998, p. 20) "A Revisão Sistemática da literatura constitui um método moderno para a avaliação de um conjunto de dados simultaneamente. Embora possa ser aplicada em várias áreas da Medicina ou Biologia, a Revisão Sistemática é mais frequentemente utilizada para se obter provas científicas de intervenções na saúde.". Tal como outros tipos de revisões, este utiliza como base de fonte de dados a literatura dedicada à temática de interesse de investigação (Sampaio

& Mancini, 2007, p. 84) sendo considerada uma revisão planeada para responder a uma ou várias perguntas específicas, utilizando métodos sistemáticos que consequentemente farão com que, como falado anteriormente, exista uma seleção e avaliação crítica (Rother, 2007, p. 5).

Antes mesmo de continuarmos a desenvolver o conceito de revisão sistemática devemos salientar uma ideia subjacente que é a Medicina Baseada em Evidências (MBE). Galvão *et al.* (2004, p. 550) refere que "O termo evidência tem sido muito usado na área da saúde, principalmente com o surgimento da medicina baseada em evidências; a utilização desse termo implica o uso e aplicação de pesquisas como base para a tomada de decisões sobre a assistência à saúde", sendo que a MBE é uma prática da medicina em que se junta a capacidade de análise e aplicação científica com a experiência clinica, de modo a melhorar a assistência médica (Lopes, 2000, p. 285).

A origem da MBE deriva da associação entre métodos da epidemiologia com as pesquisas clínicas, em que epidemiologistas canadianos na Universidade de McMaster começaram a desenvolver esta ideia e, rapidamente, atraiu norte-americanos e britânicos (Jenicek, 1997, p. 188). Guyatt em 1992 definiu como um processo de encontrar soluções através de uma avaliação sistemática, usando desta forma resultados de pesquisas como base para decisões clínicas (*apud* Jenicek, 1997, p. 188) e, mais tarde, o epidemiologista britânico Archibald Cochrane uniu os conhecimentos das duas áreas, onde o desenvolvimento ocorreu em paralelo com o acesso à informação. Fala-se deste conceito desde o início da década de 1990, sendo desenvolvido pela Colaboração Cochrane em 1992, pelo professor Iain Chalmers em Oxford (Atallah, 2018, p. 43; Galvão *et al.*, 2004, p. 550). A proposta desta nova e, para a altura, pioneira metodologia teve como principal objetivo ser eficaz na tomada de decisão através de evidências, fazendo desta forma com que não existisse desperdício de dinheiro e, mais importante ainda, de vidas (Atallah, 2018, pp. 43-44).

Sem ter como base metodológica as experiências no campo da epidemiologia e prática em observação e pesquisa experimental, nos dias de hoje seria impossível avaliar as evidências neste campo. Até à atualidade, os fundamentos na meta-análise na

medicina, fez com que se expandissem para o campo das Revisões Sistemáticas, em particular na estrutura de colaboração Cochrane, desta forma introduzida na MBE, sendo uma grande influência nas diferentes ciências da saúde, sendo ou não na epidemiologia (Jenicek, 1997, p. 188).

Com a quantidade e complexidade existente na investigação e disseminação de informação na área da saúde o tempo para adquirir o conhecimento é limitado. Desta forma, existe a necessidade do desenvolvimento de processos que façam com que haja caminhos simplificados para obter os resultados das pesquisas, daí a importância do surgimento da Revisão Sistemática. Este é um recurso da prática baseada em evidências, em que os resultados da investigação são recolhidos, categorizados, avaliados e sintetizados (Galvão *et al.,* 2004, p. 550).

Os métodos utilizados nas Revisões Sistemáticas, no caso, os métodos explícitos, fazem com que o viés seja limitado, conseguindo com que a confiabilidade e a precisão seja maior nas suas conclusões (Mulrow, 1994, p. 597). Deste modo, de forma efetiva, o pesquisador consegue distinguir um tratamento eficiente e um não eficiente, que poderá mesmo resolver controvérsias inerentes ao tratamento e terapias a serem implementadas (Atallah & Castro, 1998, p. 21-22). Sampaio & Mancini (2006, p. 84) afirmam que quando se viabiliza um resumo de todos os estudos, sobre um dado tema, de forma clara e explicita, as Revisões Sistemáticas permitem que consigamos resultados relevantes, sem necessitarmos de ler apenas alguns artigos. Ainda têm como vantagens a avaliação dos resultados entre as populações quanto à consistência e generalização, assim como as diferenças entre os protocolos de tratamento.

Como ponto de partida devemos identificar o problema, a intervenção, aquilo que será comparado, a conclusão e o tempo decorrido para avaliar a conclusão (Cordeiro *et al.*, 2007, p. 429) sendo estas revisões estudos observacionais e experimentais. Bereton *et al.* (2007, p. 572) afirma que uma Revisão Sistemática é caracterizada por permitir ao investigador uma avaliação de forma rigorosa e confiável, tendo como base as pesquisas realizadas num tema específico. A revisão serve para que possa ser feito um mapeamento dos estudos publicados sobre a temática de pesquisa,

sendo uma síntese do conhecimento que possa existir sobre o assunto até a um determinado momento como afirma Biolchini *et al.* (2007, p. 136).

Em suma, a Revisão Sistemática tem uma questão específica, o tipo de fonte é abrangente e de procura explícita, os artigos são selecionados em critérios aplicados de forma uniforme, a avaliação é feita através de critérios, trata-se de uma síntese quantitativa e baseada em resultados de pesquisa clínica (Cook *et al.*, 1997 *apud* Rother 2007, p. 3). Sampaio e Mancini (2006, p. 85) sublinham três etapas antes de iniciarmos uma revisão sistemática: definição do objetivo da revisão, identificação da literatura e, por fim, seleção dos estudos a serem incluídos.

2.2. Elaboração de uma Revisão Sistemática

2.2.1. Vantagens e desvantagens

Sendo a Revisão Sistemática uma forma de obter rigor e confiabilidade numa revisão bibliográfica, devemos perceber de que forma deve ser realizada. Deve ser definida *à priori* uma estratégia específica e um método sistemático para, deste modo, realizarmos a pesquisa e obtermos resultados. Nesta elaboração existem algumas vantagens e desvantagens, pois, tal como todos os métodos, existem algumas lacunas que Atallah e Castro (1998, p. 25) descrevem em alguns tópicos que serão apresentados na tabela seguinte.

Tabela 1 – Vantagens e desvantagens de uma revisão sistemática

Revisão Sistemática	
Vantagens	Desvantagens
Utilização de metodologia científica	Elevado número de tempo, pois um revisão sistemática pode levar desde 3 meses a 1 ano

Prevenção na duplicação desnecessária de esforços, visto que feita a revisão não necessita de se repetida	Elevado trabalho intelectual desde a formulação da pergunta, desenvolvimento da estratégia, comparação de trabalhos, interpretação dos dados
Facilidade na atualização rápida com a inclusão de novos estudos publicados	Não melhora a qualidade dos estudos que compõe a revisão, apenas pode assinalar erros promovendo a melhoria na qualidade dos estudos clínicos a serem desenvolvidos
Prevenção de controvérsias na literatura, sendo que aquilo que conta não é o número de estudos favoráveis, mas a soma de todos os casos estudados	Necessidade de existirem pelo menos dois profissionais a realizarem a revisão sistemática de modo a avaliarem os ensaios clínicos, sendo praticamente impossível ser realizada individualmente
Antecipação dos resultados de grandes ensaios clínicos que aguardam estudo devido à falta de orçamento para investigação	Discordância quanto à categorização, divergindo-se nas opiniões
Deteção de tratamentos inadequados em estágios iniciais, salvando assim um elevado número de pacientes de efeitos adversos a tratamentos desnecessários	
Revisão aumenta a precisão dos resultados, estreitando-se o intervalo de confiança	
Definição das áreas mais necessárias para investigação	

Economizar recursos em pesquisas clínicas	
Economizar recursos em assistência médica	
Auxiliar decisões para políticas de saúde	

Fonte: Atallah e Castro (1998, p. 25) - Adaptação

2.2.2. Etapas de uma Revisão Sistemática

Existem algumas etapas importantes, para se realizar a revisão de uma forma completa, propostas por diferentes autores. Atallah e Castro (1998, p. 26) apresentam algumas etapas retiradas do Handbook de Mulrow e Oxman (1994). Estas etapas dividem-se em sete passos que se iniciam com o desenvolvimento do projeto. De modo a facilitar apresentamos de seguida por tópicos os passos sugeridos:

a. Formular a pergunta – Havendo uma formulação incorreta da pergunta poderá não levar a cabo conclusões daquilo que deve ser incluído na revisão, sendo que uma questão bem formulada onde são definidos os pacientes/doenças e a sua intervenção, é o primeiro passo para iniciarmos uma revisão sistemática.

b. Localização e seleção dos estudos – Para identificar os estudos relevantes deveremos utilizar bases de dados eletrónicas, verificar as referências bibliográficas dos estudos relevantes para a temática, descrevendo detalhadamente o método utilizado para recolha.

c. Avaliação crítica dos estudos – Nesta etapa é onde são tidos em conta os critérios para determinar a validade dos estudos selecionados. Com a avaliação crítica verificamos quais os estudos válidos utilizados na revisão e os que não preenchem os critérios de seleção.

d. Coletar dados – Todas as variáveis do estudo devem ser observadas que, por sua vez, permitirão percecionar a forma de comparação dos estudos selecionados.

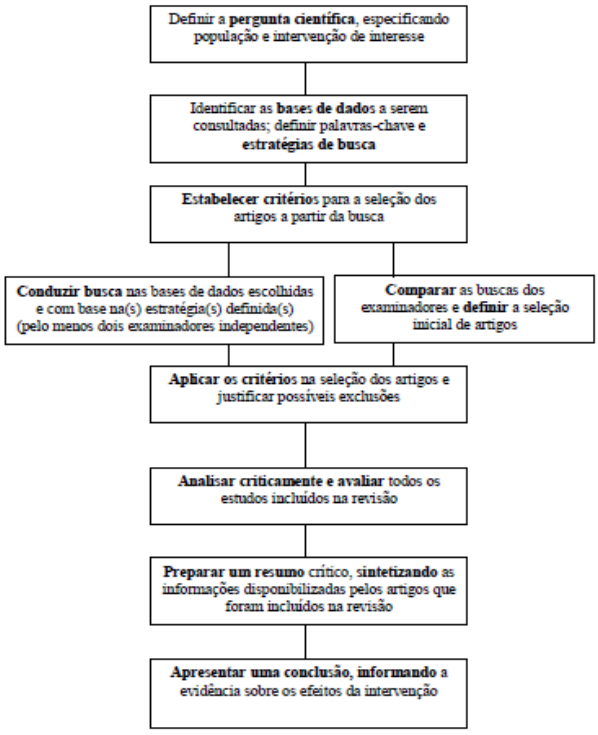
e. Análise e apresentação dos dados – Nesta fase os estudos serão agrupados, pela sua semelhança, para realizar a meta-análise. Cada agrupamento deverá estar preestabelecido no projeto, assim como a apresentação de gráficos e de números, facilitando a leitura.

f. Interpretação dos dados – Verificação daquilo que e mais evidenciado no estudo e a aplicabilidade dos resultados.

g. Melhorar e atualizar a revisão – Feita a publicação a revisão irá ser exposta a críticas e sugestões a ser incorporadas nas edições seguintes, sendo sempre atualizada cada vez que existam novos estudos sobre a temática.

No caso de Sampaio e Mancini (2006, p. 86) definem, através de um quadro, as diferentes etapas, algo que nos ajuda a organizar de uma forma sintetizada e prática as diferentes etapas. No caso destes autores vemos evidenciadas 9 etapas que passam por ser as 7 etapas abordadas anteriormente, no entanto encontram-se subdivididas.

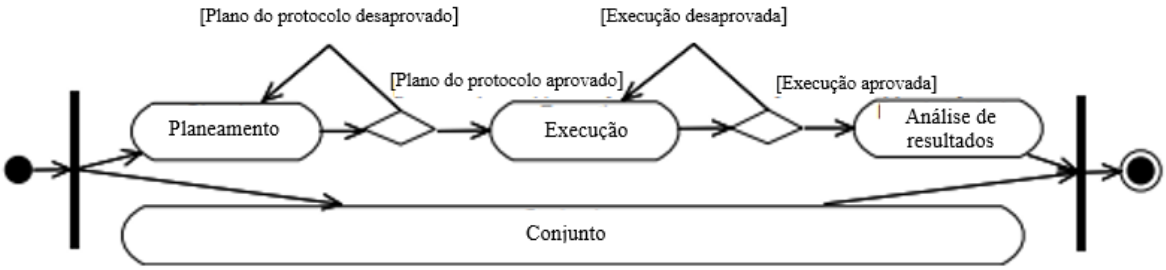
Figura 5 – Descrição geral sobre o processo de revisão sistemática



Fonte: Sapaio e Mancini (2006, p. 86)

Biolchini *et al.* (2007, p. 142) através de um esquema e de uma tabela esquematizam de forma sucinta e completa as ideias abordadas anteriormente, complementando assim a forma como deve ser realizada uma revisão sistemática. Abaixo apresentamos o esquema e a tabela traduzidas. Na primeira figura veremos um esquema das principais fases de realização, na tabela veremos um protocolo de todos os fatores que devem ser tidos em conta ao longo da execução.

Figura 7 – Processo de condução da Revisão Sistemática (Tradução)



Fonte: Biolchini *et al.* (2007, p. 142)

Tabela 2 – Template de Protocolo da Revisão Sistemática (Tradução)

1. Formulação da pergunta 1.1. Foco da pergunta 1.2. Qualidade e amplitude da pergunta - Problema - Pergunta - Palavras-chave e sinónimos - Intervenção - Controlo - Efeito - Resultados - População - Inscrição - Design experimental 2. Seleção de fontes 2.1. Definição dos critérios de seleção de fontes 2.2. Linguagens de estudos 2.3. Identificação de Fontes - Métodos de pesquisa de fontes - Seqüência de pesquisa - Lista de Fontes 2.4. Seleção de fontes após avaliação 2.5. Verificação de Referências 3. Seleção de Estudos 3.1. Definição de Estudos - Definição de critérios de inclusão e exclusão de estudos - Definição de Tipos de Estudos 3.2. Procedimentos para Seleção de Estudos 3.3. Execução de Seleção - Seleção de estudos iniciais - Avaliação da Qualidade dos Estudos - Revisão de Seleção	4. Extração de informações 4.1. Definição de critérios de inclusão e exclusão de informações 4.2. Formulários de extração de dados 4.3. Execução de extração - Extração de resultados objetivos i) Identificação do Estudo ii) Metodologia de Estudo iii) Resultados do estudo iv) Problemas de estudo - Extração de resultados subjetivos i) Informações por meio de autores ii) Impressões e abstrações gerais 4,4. Resolução de divergências entre revisores 5. Resumo dos resultados 5.1. Cálculo Estatístico de Resultados 5.2. Apresentação dos resultados em tabelas 5.3. Análise sensitiva 5.4. Plotagem 5.5. Comentários finais - Número de estudos - Viés de pesquisa, seleção e extração - Viés de publicação - Variação entre revisores. - Aplicação de resultados - Recomendações

Fonte: Biolchini *et al.* (2007, p. 142)

2.3. Descrição da metodologia utilizada: A Revisão Sistemática de publicações científicas sobre a COVID-19

Como base do nosso estudo, como abordado anteriormente, será realizada uma Revisão Sistemática. Este método de investigação terá como propósito percecionar as temáticas dominantes nos artigos sobre a COVID-19. Foi efetuada uma recolha de 2236 artigos no período de 6 meses, mais precisamente, de 20 novembro de 2019 a 2 de abril de 2020. Através do programa de gestão de referências bibliográficas *Mendeley*, foram adicionados todos os trabalhos encontrados na base de dados *PubMed*.

A primeira questão que se prendia na nossa recolha era "Qual/quais as palavras-chave a ser utilizada(s)?" e, de forma rápida e prática, obtivemos a resposta a esta pergunta, pois concluímos que a palavra-chave deveria ser "Coronavírus". Sabendo que este vírus já era conhecido desde meados dos anos 60 poderia ser um viés, no entanto demarcando o final de 2019 como início da nossa recolha, faria sentido que todos os estudos que saíssem nesse momento fossem relativos à futura doença denominada COVID-19. Constatamos na nossa recolha que a nossa proposição se confirmava.

Numa primeira etapa, mesmo antes de iniciarmos a recolha foi imprescindível verificar as questões que se prendiam, questões essas que eram:

a) Quais as temáticas mais abordadas nas publicações científicas relativas ao Novo Coronavírus?

b) De que forma as temáticas podem validar o conhecimento científico?

c) Existem autores com maior relevância?

d) A comunidade científica encontra-se a par dos artigos publicados e utiliza-os para novos estudos?

e) Conseguimos encontrar alguma forma de comunicação a nível global através dos artigos científicos?

Postas estas questões iniciais confirmamos a importância de se fazer uma revisão sistemática que poderá ser benéfica para a pandemia que mundialmente se faz sentir. Sendo um tema pioneiro alicia-nos e, da mesma maneira, dificulta-nos, pois a informação parece-nos estar bastante desorganizada e muitos dos estudos não deverão trazer um avanço científico relevante.

Numa fase seguinte foram definidos os critérios de inclusão. Estes critérios de inclusão farão com que, após uma primeira análise dos dados recolhidos, consigamos organizar apenas o que nos interessa, existindo um filtro inicial. Os critérios de seleção escolhidos foram:

1. Língua
    a. Apenas são aceites artigos em Inglês, Português, Francês, Espanhol e Italiano
2. Acesso do artigo
    a. Apenas podem ser aceites artigos que têm acesso livre
3. Tipo de artigo
    a. Apenas queremos artigos científicos, ou seja, tudo o que forem editoriais, revisões do tema, comentários, caso clínicos, entre outros, não entram no escopo do nosso trabalho
4. Foco do artigo
    a. Verificar a sub temática, isto é, se é sobre a doença, o tratamento, a cura, a mortalidade, dentro de outras.

Vemos desta forma que o critério 1) baseia-se nas línguas dominadas e onde a COVID-19 afetou um maior número de população na europa; o critério 2) é essencial, pois o artigo, caso não seja de acesso livre, não poderá ser analisado, não conseguimos visualizá-lo na totalidade e verificar os critérios definidos; pretendemos trabalhar apenas com artigos científicos, como expomos no critério 3), pois para obtermos

respostas às nossas perguntas é imprescindível que seja artigo e não qualquer outro tipo de trabalho; por fim temos o tópico 4) onde se entendem melhor as temáticas que, pelo menos inicialmente, os cientistas se debruçaram mais.

Tendo as perguntas formalizadas e os critérios definidos passou-se para a recolha das publicações. Foi necessário nesta fase definir uma data e, sendo que o Novo Coronavírus começou a ser abordado em dezembro, decidimos recolher a partir do mês anterior, existindo assim entradas a partir de 20 de novembro de 2019. A data final de recolha foi definida como sendo 6 meses depois, terminando no dia 2 de abril de 2020. Ao efetuarmos a recolha verificamos que, diariamente, as entradas de estudos eram bastante elevadas, assim que na totalidade da bibliografia recolhida para a Revisão Sistemática, na base de dados eletrónica *PubMed*, foi de 2236 referências colocadas no *Mendeley*.

Desta forma a partir desta fase, com a ajuda de todos os critérios abordados, faremos uma Revisão Sistemática detalhada daquilo que se possa observar na nossa análise quantitativa.

Capítulo 3. – Revisão Sistemática

3.1. Descrição da Amostra

Foi efetuada uma recolha na base de dados *PubMed* com a palavra chave "Coronavírus". O nosso objetivo foi recolher todas as entradas existentes sobre o Novo Coronavírus. A doença COVID-19 foi considerada pandemia a 11 de março de 2020. Definiu-se como palavra chave, tal como referido, "Coronavírus" para que todas as publicações científicas fossem encontradas visto que, como já mencionado, a denominação da doença causada pelo vírus SARS-CoV-2, COVID-19, foi só atribuída cerca de 2 meses depois do primeiro caso registado. Definida a data de 20 de novembro de 2019 para início da recolha, pois desta forma conseguiríamos entender se já existiria algum tipo de investigação sobre o Novo Coronavírus, tendo em mente que poderiam ter existido casos mesmo antes de ser comunicado aos media. A data de fim de recolha foi o 2 de abril devido ao elevado número de publicações encontradas, tendo uma amostra significativa.

Todas as referências foram colocadas no gestor de referências bibliográficas *Mendeley,* que ajudou na organização da informação recolhida. Após a recolha das 2236 publicações exportamos e, de seguida, criamos um documento de *Microsoft Excel* para podermos realizar a categorização segundo os critérios de validação já mencionados que são a língua, o acesso, a tipologia e o foco. Fez-se uma triagem de todos os estudos recolhidos na base de dados, pois notou-se que poderiam existir referências bibliográficas em duplicado. Esta situação confirmou-se e, desta forma, passamos assim a nossa recolha para um total de 1836 publicações científicas. Feita a triagem iniciou-se o nosso estudo e, após o término, eliminamos 434 publicações, porque percebemos que se enquadravam na temática da família do Coronavírus, mas não se enquadrava no nosso estudo, a COVID-19.

No próximo tópico verificamos todas as conclusões retiradas das 1402 publicações que se enquadravam na temática do Novo Coronavírus. Em todas as publicações

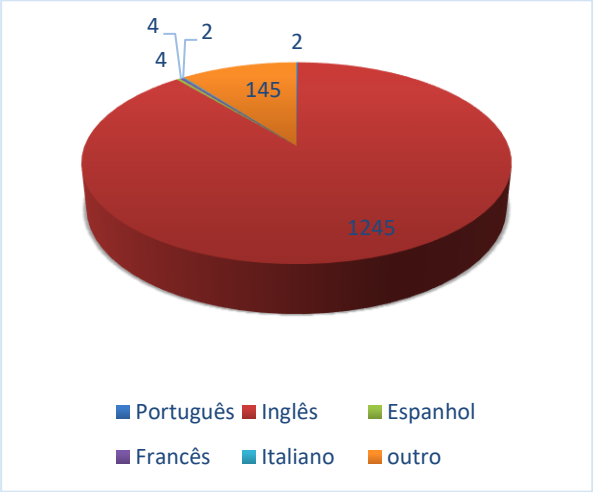
conseguimos verificar a língua e o acesso, ou seja, os dois primeiros tópicos dos nossos critérios contam com todas as referências recolhidas, ao passar para o terceiro tópico apenas as que são nas línguas aceites e têm acesso livre é que são definidos. O último tópico, a temática, só é atribuída a artigos científicos. A nossa amostra demonstra que existiu um grande esforço no avanço científico da pandemia que vivemos atualmente, existindo um equilíbrio entre as diferentes tipologias de publicações encontradas.

3.2. Análise dos dados

Nesta abordagem é importante analisar os gráficos criados através da nossa análise do *Corpus*. No primeiro critério temos a língua em que a publicação está escrita, sendo, desta forma, o ponto de partida para e o primeiro nível de análise para verificar se se enquadra no nosso estudo.

Gráfico 1 – Gráfico das línguas encontradas nas publicações científicas

Língua	
Português	2
Inglês	1245
Espanhol	4
Francês	4
Italiano	2
Outro	145
Total de Publicações	**1402**

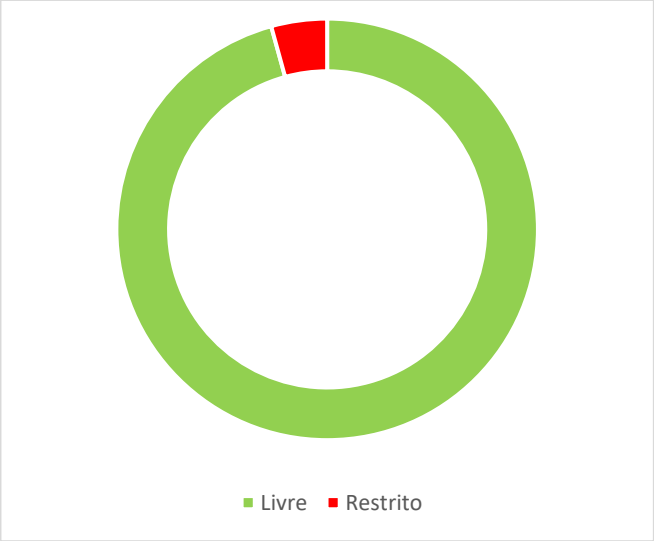


Analisando este gráfico temos 1245 publicações científicas em Inglês, algo espectável. De modo a qualquer estudo chegar à maioria dos cientistas e/ou leigos, é importante ser numa língua dominada pela maior parte da população, assim como para ser publicado em revistas científicas internacionais, havendo uma maioria significativa de publicações nesta língua. Encontramos ainda 2 publicações em Português, 2 em Italiano, 4 em Espanhol e 4 em Francês. Todas as 1257 publicações nas línguas pretendidas passarão aos próximos níveis de análise. Existem ainda 145 publicações em línguas que não são aceites pelos nossos critérios de validação. Na totalidade do ponto "outro" contamos com 145 entradas. Temos 134 em Chinês, 5 em Alemão, 2 em Norueguês, 2 em Croata, 1 em Islandês e 1 em Hebraico.

Passando para o segundo nível de análise, o acesso, como opção temos a possibilidade de a publicação ser de livre acesso ou restrita, aceitando caso seja de acesso livre/aberto. Consideramos como acesso livre todas as publicações disponibilizadas *online* em que não existam restrições no seu acesso, isto é, qualquer utilizador poderá aceder ao conteúdo da literatura, conseguindo ler *online* ou realizar o seu *download*, sem ter qualquer custo monetário. Os artigos de acesso restrito são todos aqueles que disponibilizam apenas uma parte ou nenhuma do conteúdo presente na literatura, impossibilitando assim o acesso do texto na integra, salvo pagamento do volume ou assinatura da revista.

Gráfico 2 – Gráfico do tipo de acesso às publicações científicas

Acesso	
Livre	1342
Restrito	60
Total de Artigos	**1402**



De modo a termos acesso ao maior número de investigações com acesso livre procedemos à instalação do *VPN UPorto* que nos dá acesso a redes privadas disponibilizadas pela Universidade do Porto. Neste segundo tópico dos nossos critérios de aceitação ainda conseguimos incluir as 1402 publicações, pois ambos os primeiros níveis de análise são facilmente observáveis. Desta forma a sua maioria, num total de 1342 publicações, são de acesso livre, sendo apenas 60 de acesso restrito. Com estes dados (Gráfico 1 e Gráfico 2) verificamos que não existe um grande número de exclusão de publicações nos dois primeiros níveis de análise, traduzindo-se assim como existindo dados suficientes para o nível 3 e 4 desta revisão.

No nosso terceiro nível de análise, a tipologia da publicação, agrupamos em diferentes tópicos os tipos de publicações científicas pretendidas, sendo que aceitaremos apenas artigos científicos para o nosso quarto e último critério de

validação. De modo a conhecermos e definirmos cada um apresentamos abaixo a lista de opções[1]:

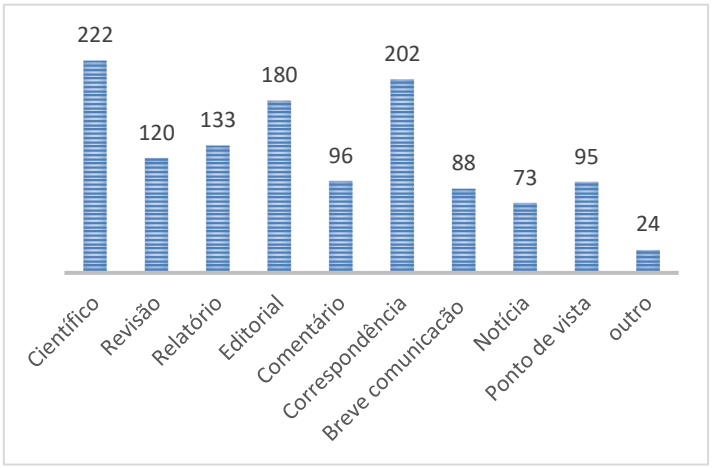
1. Artigo científico – O artigo científico é o único que fará parte do quarto nível de análise, ou seja, apenas nos interessa a temática das publicações que sejam desta tipologia. Classificamos como artigo científico todos os trabalhos originais com abordagens teórico-práticas que apresentem conclusões. Estes são encontrados com o nome de artigos originais e artigos de pesquisa, sendo que tem uma estrutura mais ou menos definida com Introdução, metodologia, resultados e discussão. O objetivo é que os resultados sejam significativos para uma determinada área.
2. Revisão – Uma revisão, denominada também por artigo de revisão, avalia criticamente um determinado tema, através de diversos artigos científico, tendo uma visão comparativa entre eles, percecionando o tema. Relata o conhecimento disponível sobre o assunto em questão, apresentando, sumariamente, os resultados das diferentes pesquisas, sendo uma revisão da literatura que analisa e discute informações publicadas. Este tipo de publicação é muito consultada por ser uma importante fonte de informação de Estado da Arte.
3. Relatório – Um relatório ou relatório de caso (clínico) tem como objetivo divulgar o conhecimento relativo a aspetos clínicos sobre um dado tema, mostrando ainda novas técnicas, terapias, diagnóstico, entre outras.
4. Editorial – Os editoriais podem ser redigidos tanto pelo próprio editor, como por algum membro do conselho editorial. Este tipo de publicações são uma apresentação sumária do conteúdo de um artigo.

[1] Todas as definições encontradas foram recolhidas na página *web* https://feup.libguides.com/publicacao-cientifica/tipos e em CURTY, Marlene Gonçalves; BOCCATO, Vera Regina Casari - O artigo científico como forma de comunicação do conhecimento na área de Ciência da Informação. *Perspectivas em ciência da informação*, 2005, 10.1.

5. Comentário – Consideramos comentário alguma publicação que é um conjunto de observações sobre um dado assunto em que pode ser proposta uma resposta ou apenas gerar um conjunto de pareceres.
6. Correspondência – Como correspondência temos as cartas ao editor e as cartas de pesquisa, sendo textos de opinião referentes a um artigo publicado numa revista ou sobre um determinado tema de discussão dentro da própria comunidade científica. O conteúdo presente nas correspondências refletem a posição do autor sobre um tema, não apresentando quaisquer tipo de resultados. Qualquer pessoa pode submeter uma carta e o editor pode ou não publicar.
7. Breve comunicação – Uma breve comunicação ou simplesmente a própria comunicação retrata resultados conclusivos ou parciais de algum trabalho que explora mais o tema. Definem-se como um meio de divulgação resumida de uma pesquisa a ser desenvolvida, em que a divulgação dos resultados é de caráter urgente. A estrutura em si é um texto simples em que a finalidade é possibilitar a existência de futuras investigações, podendo ser a base de um artigo científico. Verificam-se estas publicações em áreas que a informação deve ser rapidamente divulgada ou corre o risco de ser ultrapassada.
8. Notícia – Uma notícia, por ser algo que estamos expostos diariamente, sabemos *à priori* que se trata de um acontecimento novo e recente, divulgando uma novidade da atualidade. Define-se como um texto informativo de interesse público que narra algum acontecimento tendo por base algum tema.
9. Ponto de Vista – O ponto de vista ou opinião é o modo de ver do autor sobre o assunto em questão. Nestas publicações existe uma avaliação ou parecer de alguém especializado na área que, através do seu espírito crítico, dá a sua opinião sobre a temática de estudo.

Gráfico 3 – Gráfico dos tipos de publicações científicas

Tipologia	
Científico	222
Revisão	120
Relatório	133
Editorial	180
Comentário	96
Correspondência	202
Breve comunicação	88
Notícia	73
Ponto de vista	95
Outro	24
Total de Publicações	**1233**



Neste terceiro nível de análise contamos com 1233 publicações, pois foram excluídas todas as que são de outras línguas não aceites e as que são de acesso restrito. Verificamos assim a existência de 222 artigos científicos, os únicos que aceitaremos para o último nível de análise. Verificamos ainda a existência de 120 revisões, um total de 133 relatórios, 180 editoriais, 96 comentários, num número também considerável correspondência com 202 entradas, 88 breves comunicações, 73 notícias, 95 pontos de vista e ainda 24 outros tipos de publicações como 1 debate, 1 anúncio, 3 entrevistas, 4 erratas, 2 infografias, 2 imagens clínicas, 1 jornal completo, 1 pré-prova de jornal, 1 pré-

publicação e 8 protocolos. Com estes dados verificamos algo que já era expectável, isto é, uma distribuição equilibrada dos diferentes tipos de publicações, tendo em mente a existência de um número reduzido de artigos científicos na data de recolha do nosso *corpus*. Esta situação pode ser explicada por a recolha ter sido feita numa fase inicial da doença, em que poucas informações existiam e havia uma dificuldade a nível de investigação.

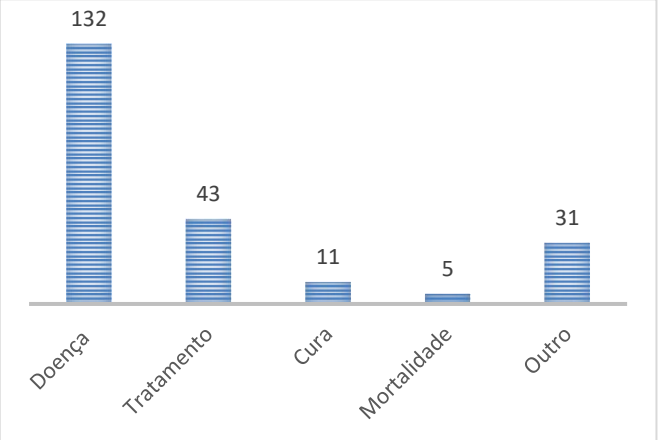
Passamos desta forma para o último nível de análise e o mais complexo. Neste quarto critério foi essencial agrupar todos os 222 artigos científicos encontrados em grandes temas. Esta tarefa revelou-se exigente por se tratar de temas de interesse distintos, contando assim com subtemas dentro dos temas definidos que, para facilitar, foram distribuídos nos grandes temas. Os primeiros temas que surgiram foram 4 designados como: doença, tratamento, mortalidade, cura e outros. Dentro dos outros temas também tentamos juntar as temáticas mais idênticas de modo a facilitar a distribuição. Abaixo demonstramos em cada tema o que podemos encontrar:

1. Doença – Incluímos todos os artigos científicos que falem sobre a origem, o comportamento, a manifestação, o contágio, o desenvolvimento, as características, os principais órgãos afetados e o conhecimento das causas.
2. Tratamento – Consideramos que se enquadram nesta temática os artigos científicos que abordam recursos terapêuticos, medicação, terapêutica, intervenção e métodos que ajudem na melhoria da doença.
3. Mortalidade – Enquadram-se nesta temática os artigos científicos que se refiram à mortalidade, isto é, perceção de número de mortos, estudos do registo de mortos numa determinada população e averiguação de causas e taxas de mortalidade.
4. Cura – Decidimos incluir na cura todos os artigos científicos que abordem uma cura eficaz, na sua maioria o uso de vacinas, investigações de componentes que devem conter, ou seja, enquadram-se neste tema todas

as pesquisas que abordem o desenvolvimento de uma solução eficaz de cura.

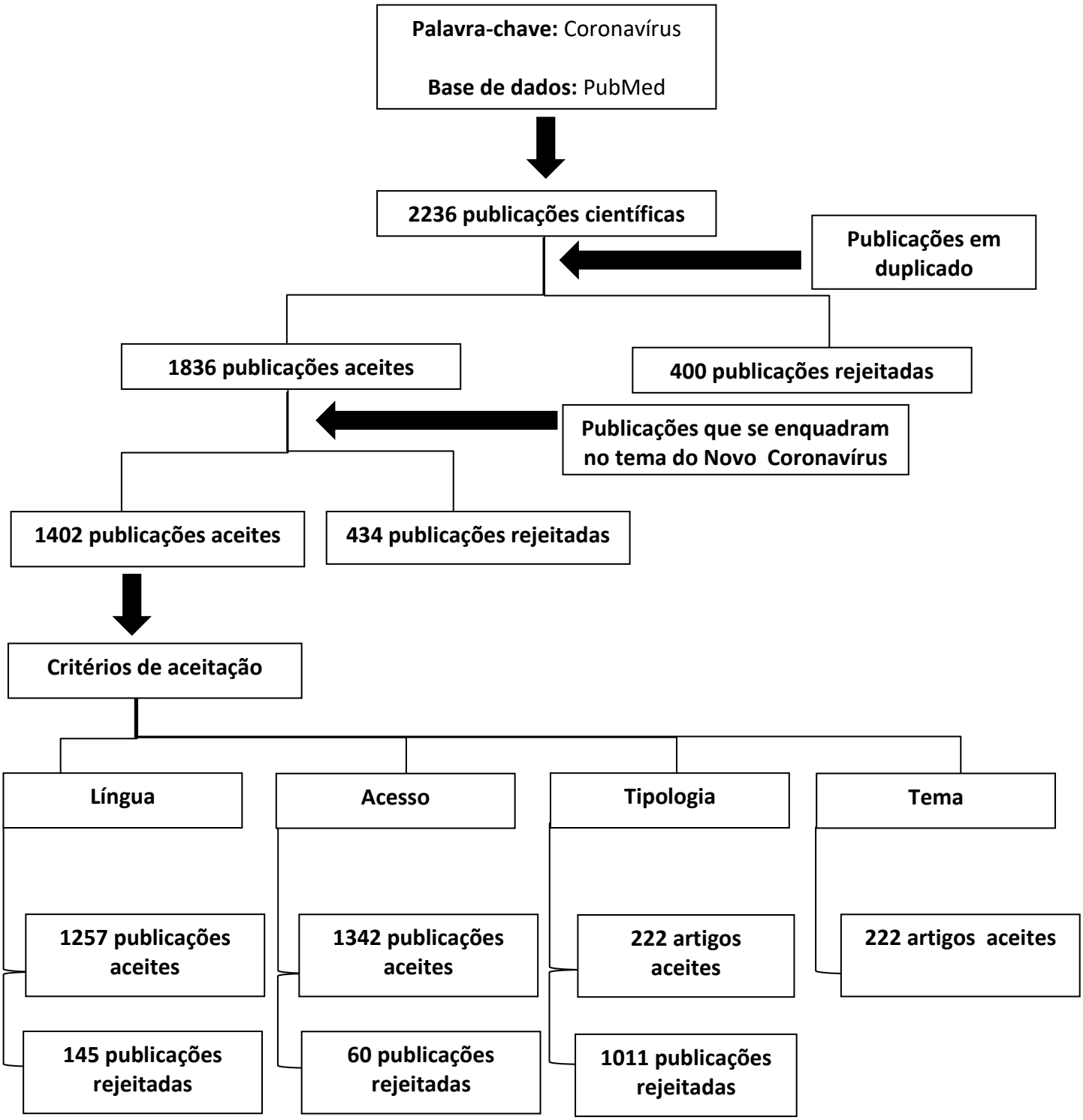
Gráfico 4 – Gráfico das temáticas dos artigos científicos

Assunto	
Doença	132
Tratamento	43
Cura	11
Mortalidade	5
Outro	31
Total de Publicações	**222**



Com estes resultados verificamos no total de 222 artigos científicos em análise que, na sua grande maioria, 132 estão incluídos no tema doença, já 43 outros referem-se a tratamento e, em menor número temos 11 referentes à cura, 5 à mortalidade e ainda 31 de outros temas. Segmentando os "outros" e incluindo em 4 outras grandes temáticas temos 5 artigos científicos referentes à saúde mental, 19 sobre técnicas/estratégias hospitalares, 6 referentes ao coronavírus em animais e 1 ligado ao tema das exportações.

Diagrama 1 – Síntese da Revisão Sistemática por passos



3.3. Discussão

Quanto à língua percebemos que que nas publicações científicas existe uma atenção internacional para a temática do Novo Coronavírus, tal como era espectável. Na distribuição por línguas vemos este forte caráter internacional, pois o Inglês prevalece comparativamente aos restantes idiomas, havendo um total de 1245 publicações. Esta análise indica-nos a transversalidade da pertinência do tema e o seu debate dentro da comunidade científica.

Retiramos ainda mais uma ilação quanto a este tópico em que existe um número significativo de publicações Chinesas. As publicações nesta língua foram incluídas no campo "outro" devido a não se enquadrarem nos idiomas que nos interessavam para os níveis de análise, não existindo um domínio linguístico das mesmas. Foram encontradas 134 publicações na língua Chinesa, o que nos faz perceber que se deve à origem do surto em Taiwan, na China.

No campo do acesso, como constatado, há acesso livre à maioria dos artigos, sendo apenas 60 de acesso restrito. O *open access* potencia a democratização do conhecimento, criando assim um maior diálogo entre os cientistas, um ponto essencial, visto que se trata de uma nova doença desconhecida pela comunidade científica. O acesso à informação nesta fase é fundamental, porque, tratando-se de um vírus novo e desconhecido, o seu escrutínio e utilização futura é fundamental. É de reter que normalmente o acesso aos artigos é restrito e apenas é feito mediante pagamento.

A UNESCO, de modo a garantir um acesso universal à informação, criou várias iniciativas para solucionar o combate à COVID-19. A 30 de março de 2020 a UNESCO organizou uma reunião online em que juntou 122 países de modo a existir um diálogo e troca de opiniões sobre a cooperação científica a nível internacional. Foi pedido por Audrey Azourlay, Diretora Geral da UNESCO, que os governos de cada pais reforçassem a cooperação científica e tornassem a ciência aberta nas suas bases de dados.

Neste sentido, em face à pandemia, o *open access*, revela ser indispensável. O livre acesso à informação científica facilita a pesquisa, pois existirá uma troca de informação

entre a comunidade científica, assim como qualquer membro da sociedade poderá consultar as novas descobertas feitas. A UNESCO afirme mesmo que a ciência aberta é fundamental para a luta contra a COVID-19.

Existindo esta democratização da informação em tempos de pandemia torna-se uma alavanca para inovações científicas no combate à doença. Ao unirem-se três importantes pilares, sendo eles a comunicação científica, a pesquisa e os dados, cria-se conhecimento na área da ciência que ajuda a lidar com a gestão de informação a nível internacional. Este acesso a dados verificados pelos membros da comunidade será um ponto chave para ser encontrada a cura para a crise que passamos a nível global. Além da ajuda na comunidade científica temos ainda o combate à desinformação, visto que qualquer membro da sociedade pode ter acesso ao que é publicado[2].

No ponto da tipologia, concluímos, que os artigos científicos, caracterizados por trazerem descobertas para a comunidade científica, não se destacam comparativamente às restantes publicações. Com a existência de 222 artigos no nosso *corpus*, mesmo sendo um número considerável, de facto, somando as correspondências, editoriais, comentários, entre outros, obtemos praticamente mais de metade das publicações, estando desta forma em maioria. Definimos esta situação como sendo expectável por se tratar de publicações mais rápidas, sendo fruto da emergência que vivemos atualmente.

É interessante pensarmos também no diálogo entre os cientistas sendo que, tal como referido, as correspondências, editoriais e pequenos comentários são quase o dobro dos artigos científicos, traduzindo-nos desta forma a existência da comunicação dentro da comunidade. Os artigos serviram de base para a discussão entre a comunidade científica e aqui verificamos de uma maneira simples esta situação, existindo 18% de artigos científicos e 38% de correspondências, editoriais e comentários, que são as publicações que se baseiam nas pesquisas.

[2] Baseado na publicação da página *web* da UNESCO https://en.unesco.org/covid19/communicationinformationresponse/opensolutions

Na comunidade científica isto traduz-se como um apoio à vivacidade e à necessidade de se poder escrever sobre o tema e aprender com os pares. Existindo uma comunicação das pequenas descobertas podem ser feitos grandes avanços em função disso. Apesar de dentro desta comunidade haver uma característica de competição inerente, no que toca a este tema, existem bastantes cientistas debruçados no assunto, fazendo com que através de publicações rápidas na *Internet* a informação chegue a qualquer investigador do mundo.

No que diz respeito ao critério assunto, encontramos mais de metade dos artigos científicos a abordar a doença. Esta situação era espectável, fruto do desconhecimento do próprio vírus e daquilo que a doença provoca nos seres humanos e noutros animais. Existe uma ânsia sobre a descoberta deste novo vírus, desta nova doença, querendo saber o que provoca, que efeitos tem, qual a origem, dentro de outras perguntas às quais ainda não existem respostas. O fator novidade faz com que os artigos científicos se cinjam mais a esta temática do que propriamente às outras, pois para compreendermos uma doença e, desta forma, arranjar tratamentos e cura, é necessário saber como ela se comporta nos diferentes ambientes. É de salientar que a pandemia foi evoluindo ao longo do tempo, isto é, este estudo faz uma caracterização do início da pandemia, tendo como base um vírus desconhecido.

Existem algumas falhas e pontos essenciais para futuro desenvolvimento desta dissertação. A amostra de tempo de recolha é pequena, pois são apenas 6 meses de publicações que constam na nossa amostra sendo que, neste momento, já existe uma quantidade maior de produção científica. Apesar de tudo a amostra é significativa, sendo que num curto período foram produzidos muitos artigos científicos. A realização desta recolha foi feita quase em tempo real, no início da pandemia. Ainda assim constata-se que a pesquisa é limitada no tempo.

Outra das limitações é a recolha feita em apenas uma base de dados. Caso tivéssemos verificado noutras bases haveria a possibilidade de aumentarmos a nossa amostra. Ainda assim a *PubMed* é a base de dados onde são publicados maior parte dos

artigos científicos, principalmente de natureza científica, de biologia, de microbiologia, entre outros, sendo uma das principais plataforma de recolha de publicações médica e científica.

Para trabalhos futuros será fundamental pensar em recolher uma amostra num espaço de tempo mais alargado, considerando que neste momento já nos encontramos numa fase de investigação nova. Os dados recolhidos baseiam-se apenas numa observação limitada da amostra, isto é, foi realizada apenas uma caracterização superficial do *corpus*. Será necessário entrar na análise do conteúdo que poderia vir a responder a questões muito interessantes.

Inicialmente foram colocadas hipóteses para análise do conteúdo dos artigos científicos, no entanto, com a limitação temporal não foi possível obter essas respostas. Uma Revisão Sistemática é um trabalho muito minucioso e demoroso e, sendo que foram encontradas uma quantidade significativa de publicações, tornou um dos nossos objetivos iniciais impossível de ser concretizado.

As questões que temos para um desenvolvimento futuro desta investigação é se a amostra recolhida tem contribuído para o debate na área da comunicação científica. A nossa hipótese de resposta a esta questão é que, neste período, não existiu tempo suficiente para que existisse uma boa comunicação entre cientistas. Apesar de termos constatado que o acesso às publicações, durante a pandemia, tornou-se aberto existe muita informação a sair diariamente, havendo correspondências, editoriais e pequenos comentários, seria difícil fazer uma leitura e triagem daquilo que é essencial em tempo real.

A nível de temática seria interessante colocar como questão quais são as que tem incidido mais a amostra. Esta pergunta, apesar de já ter sido respondida, deveria ser aprofundada para certificar que dentro de cada grande tema conseguimos interpretar a tendência para que se voltam os subtemas. Pensamos que tradicionalmente as áreas abordadas baseiam-se mais a nível médico ou biológico. Ponderamos que o campo epidemiológico também poderá ter bastante destaque. Existe dentro deste tópico uma

análise de conteúdo minuciosa que poderá ser realizada.

Temos ainda mais uma questão que nos parece essencial, sendo esta, de que modo é que efetivamente os diferentes investigadores se baseiam no trabalho de outros cientistas. Pensamos que por se tratar de um período em que existe incerteza quanto ao Novo Coronavírus a informação publicada não é consultada da maneira certa. Com isto queremos dizer que poderá existir pouca fiabilidade naquilo que foi publicado e a competitividade na comunidade científica poderá influenciar cada investigador a cingir-se apenas às suas descobertas, tentando ser o primeiro.

Estas são algumas questões e hipóteses que propomos para um desenvolvimento mais aprofundado deste estudo. Com o rápido avanço da ciência existem diversas informações por descortinar e deveriam ser acrescentadas a esta recolha mais referências da mesma base de dados e, talvez, de outras.

Considerações finais

Esta dissertação debruçou-se na comunicação científica na atual situação de pandemia provocada pela COVID-19. Através da realização de uma Revisão Sistemática procuramos perceber quais eram as línguas com maior destaque na nossa amostra, o tipo de acesso, o tipo de publicação e as temáticas que encontrávamos com maior frequência nos artigos científicos. Concluímos assim que o Inglês, como era expectável, por ter caráter internacional, encontra-se com o maior número de entradas, quase na sua totalidade. O Chinês também tem um número total significativo, devendo-se à origem do surto, em Taiwan, na China. O acesso a praticamente todas as publicações é aberto, percecionando-se que esta situação se deve à abertura de praticamente todas as bases de dados durante a situação de pandemia, com o objetivo de existir um fácil acesso pela comunidade científica e/ou sociedade. Este ponto demonstra-se bastante relevante, pois indica-nos a vontade de haver uma forte comunicação entre cientistas, algo essencial, não só nesta área, como em outras. Consideramos este um excelente passo na comunicação científica. No que diz respeito à temática destacamos a doença. Tratando-se de uma doença e de um vírus desconhecido, é essencial recolher informações, para ao conhecer-se bem a doença, verificar quais os melhores tratamentos e a possibilidade de cura.

Existiram inúmeras dificuldades na realização deste trabalho e, algumas delas, revelara-se uma vantagem. A pandemia mudou a incidência da dissertação, dando-me também uma nova temática. Por ser um tema pioneiro tornou-se desafiante, no entanto era essencial existir mais tempo para o desenvolvimento de outros pontos abordados na discussão. Em apenas 5 meses foi feita a mudança de tema, a recolha, a revisão e a escrita. Em tempo real acompanhou-se a evolução da pandemia e também deste trabalho, sendo que todos os dias surgiam informações diferentes e interessantes. Realizar uma Revisão Sistemática em 5 meses foi trabalhoso, no entanto, apesar de concluída, existem lacunas que deveriam ser resolvidas.

Este estudo poderá integrar-se com um conceito, o de Comunicação em Saúde Baseado na Evidência, propondo-se o desenvolvimento de uma estratégia inteligente de procura de validação de informação assente na utilização de medias digitais. A ideia poderá ser a de desenvolver, tendo como base este estudo, uma plataforma a partir de processos de cocriação entre os participantes, que seria utilizada em contextos heterogéneos de comunicação. Com isto propõe-se a caracterização e análise de ciência produzida em resposta à pandemia COVID-19 e ao desenvolvimento de um programa colaborativo entre jornalistas e fontes de informação. Esta ideia surge com base no melhoramento da comunicação científica, que se revelou ser muito importante.

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https://www.mdsaude.com/doencas-infecciosas/zoonoses/ consultado dia 17 de outubro de 2020 pelas 23:17

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Anexos

Anexo 1

Tabela de Revisão Sistemática de publicações científicas

Critérios de inclusão					Foco do Artigo	
Número	Artigo	Língua	Acesso	Tipologia	Assunto	Inf. Adicional / complementar
1	Carlos Kennedy Tavares Lima, Poliana Moreira de Medeiros	Inglês	Livre	Científico	Outro	saúde mental
2	Nirmal Kandel, Stella Chungong, Abbas Omaar, & Jim Xing	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
3	Qiong Wang, Ye Qiu, Jin-Yan Li, Zhi-Jian Zhou, Ce-Heng Liao, &	Inglês	Livre	Relatório		
4	Monica B. Pagano, John R. Hess, Hamilton C. Tsang	Inglês	Livre	Relatório		
5	Suxin Wan, Yi Xiang, Wei Fang, Yu Zheng, Bogun Li, Yanjun Hu,	Inglês	Livre	Científico	Tratamento	
6	A Montero Feijoo, E Maseda, R Adalia Bartolomé, G Aguilar, R	Espanhol	Livre	Revisão		
7	Eunha Shim, Amna Tariq, Wongyeong Choi, Yiseul Lee, &	Inglês	Livre	Científico	Doença	
8	Nan-Yao Lee, Chia-Wen Li, Huey-Pin Tsai, Po-Lin Chen,	Inglês	Livre	Relatório		
9	Ryan C Ungaro, Timothy Sullivan, Jean-Frederic Colombel,	Inglês	Livre	Comentário		
10	Alan S. Kliger, & Jeffrey Silberzweig (2020). Mitigating	Inglês	Livre	Ponto de vista		
11	A Mahajan, & J A Hirsch (2020). Novel Coronavirus: What	Inglês	Livre	Editorial		
12	Shaun S Tan, Benedict Yan, Sharon Saw, Chun Kiat Lee, Ai	Inglês	Livre	Relatório		
13	Brian Hanley, Sebastian B Lucas, Esther Youd, Benjamin Swift, &	Inglês	Livre	Editorial		
14	Matthew Hackbart, Xufang Deng, & Susan C Baker (2020).	Inglês	Livre	Científico	Tratamento	
15	Lili Guan, Luqian Zhou, Jinnong Zhang, Wei Peng, & Rongchang	Inglês	Livre	Relatório		
16	Jinyang Xu, Yijun Chen, Hao Chen, & Bin Cao (2020). 2019	Inglês	Livre	Comentário		
17	Hui-Jun Wang, Si-Hao Du, Yue Xia, & Chen Chuan-Xiang (Year	Outro	Livre			Chinês
18	Ting Yang, Yung-Chih Wang, Ching-Fen Shen, & Chao-Min	Inglês	Livre	Editorial		
19	Masumi Ueda, Renato Martins, Paul C Hendrie, Terry	Inglês	Livre	Relatório		
20	Tao Zhang, Qunfu Wu, & Zhigang Zhang (2020). Probable	Inglês	Livre	Relatório		
21	Min Jin, & Qiaoxia Tong (2020). Rhabdomyolysis as Potential Late	Inglês	Livre	Relatório		
22	Sonja J Olsen, Meng-Yu Chen, Yu-Lun Liu, Mark Witschi,	Inglês	Livre	Relatório		
23	Anthony C Smith, Emma Thomas, Centaine L Snoswell,	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
24	Authors are required! (Year is required!). COVID-19	Inglês	Restrito			
25	Miyu Moriyama, Walter J Hugentobler, & Akiko Iwasaki,	Inglês	Livre	Revisão		
26	Michael J Loeffelholz, & Yi-Wei Tang (2020). Laboratory	Inglês	Livre	Revisão		
27	Lennox McNeary, Susan Maltser, & Monica Verduzco-Gutierrez,	Inglês	Livre	Relatório		
28	Xiang Dong, Yi-yuan Cao, Xiao-xia Lu, Jin-jin Zhang, Hui Du,	Inglês	Livre	Científico	Tratamento	
29	Dunjin Chen, Huixia Yang, Yun Cao, Weiwei Cheng, Tao Duan,	Inglês	Livre	Ponto de vista		
30	Akosua Adom Agyeman, Amos Laar, & Richard Ofori-Asenso	Inglês	Livre	Comentário		

30	Akosua Adom Agyeman, Amos Laar, & Richard Ofori-Asenso	Inglês	Livre	Comentário		
31	Lorenzo D'Antiga (2020). Coronaviruses and	Inglês	Livre	Relatório		
32	Qiang Ding, Panpan Lu, Yuhui Fan, Yuria Xia, & Mei Liu	Inglês	Livre	Científico	Doença	
33	Ling Lin, Lianfeng Lu, Wei Cao, & Taisheng Li (2020).	Inglês	Livre	Revisão		
34	Zhang HF, Bo LL, Lin Y, Li FX, Sun SJ, Lin HB, Xu SY, Bian JJ.	Inglês	Restrito			
35	Kharasch ED, & Jiang Y. (2020). Novel Coronavirus 2019	Inglês	Restrito			
36	Bowdle A, & Munoz-Price LS (2020). Preventing Infection of	Inglês	Restrito			
37	Esler M, & Esler D (2020). Can angiotensin receptor-blocking	Inglês	Livre	Relatório		
38	Lu T, & Pu H. (2020). Computed Tomography Manifestations of 5	Inglês	Livre	Relatório		
39	Zhu W, Wang Y, Xiao K, Zhang H, Tian Y, Clifford SP, Xu J, &	Inglês	Restrito			
40	Chen X, Liu Y, Gong Y, Guo X, Zuo M, Li J, Shi W, Li H, Mi W,	Inglês	Livre	Relatório		
41	Greenland JR, Michelow MD, Wang L, & London MJ. (2020).	Inglês	Livre	Relatório		
42	Weilong Shang, Yi Yang, Yifan Rao, & Xiancai Rao (2020). The	Inglês	Livre	Comentário		
43	Mohamed E El Zowalaty, & Josef D Järhult (2020). From	Inglês	Livre	Relatório		
44	Yu Wai Chen, Chin-Pang Bennu Yiu, & Kwok-Yin Wong (2020).	Inglês	Livre	Relatório		
45	Yadi Zhou, Yuan Hou, Jiayu Shen, Yin Huang, William	Inglês	Livre	Científico	Tratamento	
46	Han Xiao, Yan Zhang, Desheng Kong, Shiyue Li, & Ningxi Yang	Inglês	Livre	Científico	Outro	Saúde mental
47	Ji Young Park, Mi Seon Han, Kyoung Un Park, Ji Young Kim,	Inglês	Livre	Breve comunicação		
48	Young June Choe, & Eun Hwa Choi (2020). Are We Ready for	Inglês	Livre	Ponto de vista		
48	Young June Choe, & Eun Hwa Choi (2020). Are We Ready for	Inglês	Livre	Ponto de vista		
49	Zahra Sahraei, Minoosh Shabani, Shervin Shokouhi, & Ali Saffaei	Inglês	Livre	Correspondência		
50	Peng Li, Ji-Bo Fu, Ke-Feng Li, Yan Chen, Hong-Ling Wang, Lei-	Inglês	Livre	Breve comunicação		
51	Michael Chung, Adam Bernheim, Xueyan Mei, Ning Zhang,	Inglês	Livre	Relatório		
52	Zheng Ye, Yun Zhang, Yi Wang, Zixiang Huang, & Bin Song	Inglês	Livre	Revisão		
53	Dan Sun, Hui Li, Xiao-Xia Lu, Han Xiao, Jie Ren, Fu-Rong	Inglês	Livre	Relatório		
54	Kai Liu (2020). How I faced my coronavirus anxietyScience. 367.	Inglês	Livre	Ponto de vista		
55	Kai-Cai Liu, Ping Xu, Wei-Fu Lv, Xiao-Hui Qiu, Jin-Long Yao,	Inglês	Livre	Relatório		
56	Giuseppe Lippi, & Brandon Michael Henry (2020). Active	Inglês	Livre	Correspondência		
57	Alderman C. (2020). Pharmacy Services and the Novel	Inglês	Livre	Correspondência		
58	Rachael Pung, Calvin J Chiew, Barnaby E Young, Sarah Chin,	Inglês	Livre	Científico	Doença	
59	Haifa Xia, Shuai Zhao, Zhouyang Wu, Huilin Luo, Cheng Zhou, &	Inglês	Livre	Correspondência		
60	Qiang Wang, & Chaoran Yu (Year is required!). Letter to	Inglês	Livre	Correspondência		
61	Milad Abdi (Year is required!). Coronavirus disease 2019	Inglês	Livre	Correspondência		
62	Domenico Cucinotta, & Maurizio Vanelli (2020). WHO Declares	Inglês	Livre	outro		Debate
63	Baglivo M, Baronio M, Natalini G, Beccari T, Chiurazzi P.	Inglês	Livre	Científico	Doença	
64	Harunor Rashid, Elizabeth Haworth, Shuia Shafi, Ziad A	Inglês	Livre	Ponto de vista		
65	Yixiang Ng, Zongbin Li, Yi Xian Chua, Wei Liang Chaw, Zheng	Inglês	Livre	Relatório		
66	Wen A N D Tao Zhaowu A N D Tan Weijun A N D Hu Yi Yuan	Inglês	Livre	Científico	Mortalidade	

67	Marcel Salathé, Christian L Althaus, Richard Neher, Silvia	Inglês	Livre	Comentário		
68	Magdalena Wujtewicz, Anna Dylczyk-Sommer, Aleksander	Inglês	Livre	Revisão		
69	Jiang ZF, & Di JB (2020). Ten hot issues on diagnosis and	outro	Livre			Chinês
70	[Explanation of expert	outro	Livre			Chinês
71	Hu XH, Niu WB, Zhang JF, Li BK, Yu B, Zhang ZY, Zhou CX,	outro	Livre			Chinês
72	Marinda V Oriel (2020). COVID-19, Australia: Epidemiology	Inglês	Livre	Relatório		
73	Giuseppe Lippi, & Mario Plebani (2020). The critical role of	Inglês	Livre	Ponto de vista		
74	Lin Li, Lian Lian, Zeguo Xu, Youbing Yin, Xin Wang, Bin	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
75	John P.A. Ioannidis (2020). Coronavirus disease 2019: the	Inglês	Livre	Editorial		
76	Kristi Koenig, Christian Bey, & Eric McDonald (2020). 2019-	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
77	Zhanwei Du, Xiaoke Xu, Ye Wu, Lin Wang, Benjamin J Cowling,	Inglês	Livre	Correspondência		
78	Jiang, Shiqi Tao, Zhiming Zhen,	Inglês	Livre	Correspondência		
79	Kenji Mizumoto, & Gerardo Chowell (2020). Transmission	Inglês	Livre	Científico	Doença	
80	Shuibiao Lu, Jinsong Lin, Zhiqiao Zhang, Liping Xiao,	Inglês	Livre	Breve comunicacão		
81	Maria Giovanetti, Silvia Angeletti, Domenico Benvenuto, &	Inglês	Livre	Breve comunicacão		
82	Stuart Weston, & Matthew B. Frieman (2020). COVID-19:	Inglês	Livre	Comentário		
83	Xufang Deng, Yazmin Cruz-Rei-hoof Wil Lon, Yanni Tan,	Inglês	Livre	Científico	Doença	
84	Juvel Taculod, Billy Gorospe,	Inglês	Livre	Correspondência		
85	Xingli Liu, & Liang Lyu (2020).	Inglês	Livre	Relatório		
86	Tools for Coronavirus Outbreak:	Inglês	Livre	Científico	Doença	
87	Dickmann, D Ouart, A Kortgen,	outro	Restrito			Alemão
88	There may be virus in	Inglês	Livre	Comentário		
89	Yee Fung, Chi-Ping Chan, &	Inglês	Livre	Breve comunicacão		
90	Wang X, Hu ZW, Li N, Deng XR,	outro	Livre			Chinês
91	Ekkehard Schuler, Lothar H	Inglês	Livre	Breve comunicacão		
92	Dandan Zheng, Jiazheng Wang,	Inglês	Livre	Científico	Doença	
93	(2020). One Health approach	Inglês	Livre	Correspondência		
94	Christopher T Lee (2020).	Inglês	Livre	Ponto de vista		
95	Ruchi Tiwari, Maryam Dadar,	Inglês	Livre	Revisão		
96	(2020). On the possibility of	Inglês	Livre	Editorial		
97	Du, Jingjing Zhang, Yuan Y. Li,	Inglês	Livre	Correspondência		
98	Zhu, G B Wang, X P Chen,	outro	Livre			Chinês
99	& Fu WG (2020).	outro	Livre			Chinês
100	Cao, LiFeng Li, & YanJun Guo	Inglês	Livre	Relatório		
101	Biasi, Giovanni Guaraldi,	Inglês	Livre	Ponto de vista		
102	of the Cure or Am I Part of the	Inglês	Livre	Ponto de vista		
103	New Challenges From	outro	Livre			Chinês
104	(2020). Coronavirus: the spread	Inglês	Livre	Comentário		

105	Janice Hopkins Tanne, Erika Hayasaki, Mark Zastrow,	Inglês	Livre	Relatório		
106	Anna M Mielech, Matthew	Inglês	Livre	Científico	Doença	
107	D Thomas-Rüddel, J Winning, F Dickmann, D Ouart, A Kortgen,	outro	Livre	Científico	Doença	Alemão
108	Yoshikawa, & Joseph G	Inglês	Livre	Editorial		
109	Huang, L Ren, L Liu, & Y W	outro	Livre			Chinês
110	Cong Lu, Xiao-Hui Tan, Dong-Ri	outro	Restrito			Chinês
111	Watts, Leandro Abade, Moritz U	Inglês	Livre	Breve comunicacão		
112	Alfredo Vallone (2020). Could	Inglês	Livre	Correspondência		
113	COVID-19 so mild in	Inglês	Livre	Editorial		
114	Kevin Hershberger, & David	Inglês	Livre	Comentário		
115	Loong Tat Wong, Theodore Gar	Inglês	Livre	Revisão		
116	Ruijie Chang, Huwen Wang,	Inglês	Livre	Comentário		
117	Xiang, Shijian Li, Dahai Zhao,	Inglês	Livre	Comentário		
118	Chuanming Li, Zheng Fang,	Inglês	Livre	Científico	Doença	Diagnóstico
119	Biddinger (2020). Novel	Inglês	Livre	Ponto de vista		
120	Wai Mui, & Ling Tim Wong	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
121	Luisa Serrano, Flor Helene	Inglês	Livre	Científico	Doença	Transmissão
122	Luisa Serrano, Flor Helene	Inglês	Livre	Científico	Tratamento	
123	Sumiko Mekaru, Kara Sewalk,	Inglês	Livre	Editorial		
124	Awais Ihsan, & Qingyou Liu	Inglês	Livre	Científico	Doença	
125	Yuan-Yuan Fang, Jin Shang,	Inglês	Livre	Científico	Cura	recuperação
126	Rong Peng, Stéphane Isnard,	Inglês	Livre	Ponto de vista		
127	(2020). Advances in the	Inglês	Livre	Correspondência		
128	Park (2020). How Should	Inglês	Livre	Editorial		
129	Chatham (2020). The	Inglês	Livre	Revisão		
130	Salisbury: Coronavirus	Inglês	Livre	Comentário		
131	Wang, Cheng Long, & Xinmiao	Inglês	Livre	Correspondência		
132	Wang, & Xiancang Ma (2020).	Inglês	Livre	Correspondência		
133	and viral diseases. Preliminary	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
134	D'Abramo, Giovanni Faggioni,	Inglês	Livre	Breve comunicacão		
135	Kuivanen, Pamela Österlund,	Inglês	Livre	Breve comunicacão		
136	Fang, Wen-Bin Liu, & Zheng	Inglês	Livre	Científico	Doença	
137	Noszticzius, & László Rosivall	Inglês	Livre	Editorial		
138	Madjid, & Scott D. Solomon	Inglês	Livre	Ponto de vista		
139	Epstein, & Daniel Batlle (2020).	Inglês	Livre	Revisão		
140	Yu, Zhaohua Zhang, Pengfei	Inglês	Livre	Científico	Doença	
141	Chengcheng Yu (2020). CT	Inglês	Livre	Relatório		
142	Zhenlin Li, Weixia Chen, Lihong	Inglês	Livre	Científico	Doença	medidas de prevenção

143	Filippo Patrucco, Pierfrancesco Gavelli, Rui Shi, Nello De Vita, [illegible] (2020). Clinical	Inglês	Livre	Editorial		
144	Wenhong Zhang (2020). Clinical	Inglês	Livre	Comentário		
145	Lawrence O Gostin, & James G Hodge Jr (2020). US Emergency	Inglês	Livre	Breve comunicacão		
146	David L Swerdlow, & Lyn Finelli (2020). Preparation for Possible	Inglês	Livre	Breve comunicacão		
147	Allan R Tunis (2020). An Ounce of Prevention:	Inglês	Livre	Editorial		
148	Alexandra [illegible] (2020). Coronavirus Pandemic	Inglês	Livre	Notícia		
149	Stephen K Burley (2020). How to Help the Free Market Fight	Inglês	Livre	Notícia		
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154	J Jeffery Reeves, Rannian M Hollandsworth, Francesca J	Inglês	Livre	Breve comunicacão		
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161	Wu, Chenyan Zhao, Huan Hao,	Inglês	Livre	Científico	Cura	
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176	Lun Hou, Ching-Hsiung Lin, Mu-	Inglês	Livre	Correspondência		
177	Neeta Kesu Belani, Yeong Yin	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
178	Wensman, Simon Larsson,	Inglês	Livre	Científico	Outro	Corona Vírus em animais
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180	Haibo Xu (2020). Don't overlook	Inglês	Livre	Correspondência		

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187	Shuo Yan, Yan Ni Du, Hui	Inglês	Livre	Científico	Doença	
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192	Zheng Chen, Li-Zhong DU, Jun-Fen Fu, Qiang Shu, Zhi-Min	outro	Livre			Chinês
193	Guo-Xun Zhang, Ai-Min Zhang, Li Huang, Lian-Ying Cheng, Zhi-	outro	Livre			Chinês
194	Yun Zhou, Gen-Dong Yang, Kai Feng, Hua Huang, Yong-Xing	outro	Livre			Chinês
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204	Kollengode Ramanathan, David Antognini, Alain Combes,	Inglês	Livre	Revisão		
205	Brian McCloskey, Alimuddin Zumla, Giuseppe Ippolito, Lucille	Inglês	Livre	Comentário		
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228	Xianhui Kang, Rong Zhang, Huiliang He, Yongxing Yao,	outro	Restrito			Chinês
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259	V. Peyronnet, J. Sibiude, P. Deruelle, C. Huissoud, X.	Francês	Livre	Ponto de vista		
260	Ye Qiu, Yuan-Bo Zhao, Qiong Wang, Jin-Yan Li, Zhi-Jian Zhou,	Inglês	Livre	Breve comunicação		
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264	Hao Hong, Yuan Wang, Hung-Tao Chung, & Chih-Jung Chen	Inglês	Livre	outro		pré-prova de jornal
265	Charles H. Hennekens, Safiya George, Terry A. Adirim	Inglês	Livre	Comentário		
266	Shajeea Arshad Ali, Mariam Baloch, Naseem Ahmed	Inglês	Livre	Relatório		
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281	David S. Fedson, Steven M. Opal, & Ole Martin Rordam	Inglês	Livre	Comentário		
282	Zackary D Berger, Nicholas G Evans, Alexandra L Phelan, &	Inglês	Livre	Editorial		
283	M Ceccarelli, M Berretta, E Venanzi Rullo, G Nunnari, & B	Inglês	Livre	Editorial		
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303	Kensaku Kakimoto, Hajime Kamiya, Takuya Yamagishi,	Inglês	Livre	Relatório	
304	Matt Arentz, Eric Yim, Lindy Klaff, Sharukh Lokhandwala,	Inglês	Livre	Correspondência	
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378	Zhangrong Xu, & Jianwen Gu	Inglês	Livre	Ponto de vista		
379	Jean Christophe Lagier, Philippe Colson, Hervé Tissot Dupont,	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
380	Alfonso J. Rodriguez-Morales, Jaime A. Cardona-Ospina,	Inglês	Livre	Revisão		
381	Arés Sandro Repici, Roberta Maselli, Matteo Colombo,	Inglês	Livre	Ponto de vista		
382	Kerry LaPlante, & Stefan	Inglês	Livre	Editorial		
383	Giuseppe Lippi, Mario Plebani, & Brandon Michael Henry (2020).	Inglês	Livre	Científico	Doença	
384	Chu-Wen Yang, & Mei-Fang Chen (2020). Composition of	Inglês	Livre	Científico	Doença	
385	Shuai Zhao, Ken Ling, Hong Yan, Liang Zhong, Xiaobong	Inglês	Livre	Ponto de vista		
386	Isaac Ghinai, Tristan D McPherson, Jennifer C Hunter	Inglês	Livre	Científico	Doença	
387	Jean-Louis Vincent, & Arthur S. Slutsky (2020). Coronavirus: just	Inglês	Livre	Editorial		
388	Anne Catherine Cunningham, Hui Poh Goh, & David Koh	Inglês	Livre	Editorial		
389	Naveen Vankadari, & Jacqueline A. Wilce (2020). Emerging	Inglês	Livre	Correspondência		
390	Yufei Yang (2020). Challenges	Inglês	Livre	Correspondência		
391	Dyrdak, Valentin Druelle, Emma	Inglês	Livre	Científico	Doença	
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393	(2020). Is novel coronavirus	Inglês	Livre	Correspondência		
394	Wei, & Yuan Fang (2020).	Inglês	Livre	Breve comunicação		
395	Bogoch, Ryan Sherbo,	Inglês	Livre	Relatório		
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397	Mazin Barry, Maha Al Amri, & Ziad A. Memish (2020). COVID-	Inglês	Restrito	Revisão		
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404	Rongli Guo, Baochao Fan, Ximian Chang, Jinzhu Zhou	Inglês	Livre	Científico	Doença	
405	Jing-Wen Ai, Yi Zhang, Hao-Cheng Zhang, Teng Xu, & Wen-	Inglês	Livre	Correspondência		
406	Sana Salehi, Aidin Abedi, Sudheer Balakrishnan, & Ali	Inglês	Livre	Revisão		
407	Zenghui Cheng, Yong Lu, Qiqi Cao, Le Qin, Zilai Pan, Fuhua	Inglês	Livre	Científico	Doença	
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409	Jin-Hong You (2020). Will the Third Wave of Coronavirus	Inglês	Livre	Ponto de vista		
410	Huang, & Chaochao Tan (2020).	Inglês	Livre	Relatório		
411	Xie, Jingjing Li, & Xiangzhong	Inglês	Livre	Correspondência		

411	Qiuhan Sun, Anjian Xu, Yicheng Xie, Jingjing Li, & Xiangzhong	Inglês	Livre	Correspondência		
412	Dasheng Li, Daniel Wang, Jianping Dong, Nana Wang, He	Inglês	Livre	Relatório		
413	Pingzheng Mo, Yuanyuan Xing, Yu Xiao, Liping Deng, Qiu Zhao,	Inglês	Livre	Científico	Tratamento	
414	Hang Liu, Aifang Xu, Yan Zhang, Weiling Xuan, Tingbo	Inglês	Livre	Científico	Tratamento	
415	Y Wang, C Chen, G X Luo, & W	outro	Restrito			Chinês
416	M Liu, R E Peng, Q Li, H K Zhang, & Y G Wang (2020).	outro	Restrito			Chinês
417	Jing Yang, Ya Zheng, Xi Gou, Ke Pu, Zhaofeng Chen,	Inglês	Livre	Revisão		
418	Aina Rashayan, Alfis Putau, & Emily Chia-Yu Su (2020).	Inglês	Livre	Breve comunicacão		
419	Zhipeng Zhang, Kangpeng Xiao, Xu Zhang, Ayan Roy, & Yongyi	Inglês	Livre	Correspondência		
420	Xin Liu, & Xu-Jie Wang (2020). Potential inhibitors against 2019-	Inglês	Livre	Correspondência		
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424	Andrea Conteglani, Giulia Ingoglia, Mariachiara Ippolito,	Inglês	Livre	Revisão		
425	Débora N. Matte, Jamie J. Kopper, & Macarena G. Sanz	Inglês	Livre	Científico	Outro	Corona Vírus em animais
426	Shi-Tee Fung, Kit-San Yuen, Ze-Wei Ye, Chi-Ping Chan, & Dong-	Inglês	Livre	Revisão		
427	Hyun Jeong Kim, Jusun Sangwook Ko, & Tae-Yop Kim (2020).	Inglês	Livre	Editorial		
428	X H Tao, T T Li, Z C He, Y P Ping, H W Liu, S C Yu, H M	outro	Restrito			Chinês
429	Claudio Rinoi, Milagro Reis, & Silvia De Rosa (2020).	Inglês	Livre	Editorial		
430	Giuseppe Lippi, Ana-Maria Simundic, & Mario Plebani	Inglês	Livre	Ponto de vista		
431	Brandon Michael Henry, Giuseppe Lippi, & Mario Plebani	Inglês	Livre	Correspondência		
432	Huan Han, Lan Tang, Rui Liu, Fang Liu, Kai-lang Wu, Jie Li,	Inglês	Livre	Científico	Doença	
433	Di Wu, Tianlai Wu, Qun Liu, & Zhicong Yang (2020). The SARS-	Inglês	Livre	Revisão		
434	Qianying Lin, Peihua Cao, Yijun	Inglês	Livre	Breve comunicacão		
435	Biao Tang, Fan Xia, Sanyi Tang, Nicola Luigi Bragazzi, Qian Li,	Inglês	Livre	outro		errata
436	Lisi Deng, Chunhui Li, Qi Zeng, Xi Liu, Xinghua Li, Haitang	Inglês	Livre	Científico	Tratamento	
437	Jun Chen, Tangkai Qi, Li Liu, Yun Ling, Zhiping Qian, Tao Li,	Inglês	Livre	Científico	Doença	
438	Guangming Ye, Zhenyu Pan, Yunbao Pan, Qiaoling Deng,	Inglês	Livre	Científico	Doença	
439	Kai Liu, Ting Chen, Ruzheng Lin, & Kunyuan Han (2020).	Inglês	Livre	Revisão		
440	Christian A. Devaux, Jean-Marc Rolain, Philippe Colson, & Didier	Inglês	Livre	Científico	Tratamento	
441	Mohammad Ahmad Ud Din, & Leela Krishna Teja Boppana	Inglês	Livre	Relatório		
442	Dirk M Elston (2020). Journal Pre-proof Letter from the Editor:	Inglês	Livre	Correspondência		
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445	David Peña-Otero, David Díaz-Pérez, David de-la-Rosa-Carrillo,	Inglês	Livre	Editorial		
446	Yanyi Qiu, Nianan Mao, Yuan Wang, Mengdi Zhou, Jingxuan	Inglês	Livre	Correspondência		
447	Ruang Dong, Xu Sanpeng, Yu Yu, Liu Cong, Duan Yaqi, &	outro	Restrito			Chinês

448	F Conti, G Rodolfi, A Casana, C Gallenga, R Ross, I Frydas, & S	Inglês	Livre	Editorial		
449	Cheng Jia, Wang Mengwen, Liu	outro	Restrito			Chinês
450	W W Sun, F Ling, J K Fan, J Cai, Z P Miao, S L Liu, W	outro	Restrito			Chinês
451	Fei Zhou, Ting Yu, Ronghui Du, Guohui Fan, Ying Liu, Zhibo Liu,	Inglês	Livre	Científico	Doença	
452	the medium is the messageThe	Inglês	Livre	Ponto de vista		
453	Fengxue Zhu, Zhaolong Cao,	Inglês	Livre	Correspondência		
454	Russell, Charlie Diamond, Yang	Inglês	Livre	Científico	Doença	
455	(2020). Coronavirus Disease	Inglês	Livre	Revisão		
456	Dongliang Yang, & Xin Zheng	Inglês	Livre	Revisão		
457	Chen, Bo Cheng, Ping Diao,	Inglês	Livre	Breve comunicação		
458	Chandini R. MacIntyre (2020).	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
459	Peiyi Han, Jie Hao, & Zeguang	Inglês	Livre	Científico	Doença	
460	Jianping Zhao, & Dao Wen	Inglês	Livre	Relatório		
461	Seyed M. Moghadas, Abhishek	Inglês	Livre	Científico	Outro	Exportações
462	Ebrahim, Leon Geffen, & Martin	Inglês	Livre	Editorial		
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464	Alexandra Farrow (2020). A	Inglês	Livre	Comentário		
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466	Abdelmalek, Mohammed E.	Inglês	Livre	Científico	Tratamento	
467	Fabian Sanchis-Gomar (2020).	Inglês	Livre	Correspondência		
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469	Hashemi, Laura Maria De Plano,	Inglês	Livre	Revisão		
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472	Lucy Telfar Barnard, & Michael	Inglês	Livre	Correspondência		
473	Liang Wan, & Heshui Shi (2020).	Inglês	Livre	Correspondência		
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477	Khaleeq, Usman Ali, & Hira	Inglês	Livre	Ponto de vista		
478	A. Rasmussen (2020). What	Inglês	Livre	Ponto de vista		
479	Yanping Cai, Jia'an Xia, Xing	Inglês	Livre	Científico	Doença	
480	Pablo (Year is required!). Impact	Inglês	Livre	Notícia		
481	COVID-19: Not a Simple Public	Inglês	Livre	Editorial		
482	Coronavirus, Responsabilité Et	Inglês	Livre	Editorial		
483	De Coronavirus Et Polémique	Francês	Livre	Ponto de vista		
484	Xu, Shusheng Zhou, & Shiyuan	Inglês	Livre	Científico	Doença	

485	Changtai Wang, Zhongping Liu, Zixiang Chen, Xin Huang,	Inglês	Livre	Científico	Doença	
486	Jinlu Lüfg, Yu-Shih Lin, Yao-Hsu Yang, Yu-Lun Chou,	Inglês	Livre	Científico	Tratamento	
487	Yan Cárdenas-Conejo, Andrómeda Liñan-Rico, Daniel	Inglês	Livre	Breve comunicacão		
488	Daniel Baille, Jan Wysocki, & Karla Satchell (2020). Soluble	Inglês	Livre	Correspondência		
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490	Tanu Singhal (2020). A Review of Coronavirus Disease-2019	Inglês	Livre	Revisão		
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492	Shi Haozhe, Ma Ping, Gao Fengying, Chen Gonglie, Yu	outro	Restrito			Chinês
493	Panghua Gong, Yong Xiong, Jian Xiao, Li Lin, Xiaodong Liu,	Inglês	Livre	Comentário		
494	Pharmaceutical care	Inglês	Livre	Ponto de vista		
495	Stefan Kluge, Uwe Janssens, Tobias Welte, Steffen Weber-	outro	Livre			Alemão
496	Jonathan Schwartz, Chwan-Chuen King, & Muh-Yong Yen	Inglês	Livre	Relatório		
497	Chloe Brylski-Cann, Jeffrey Duchin, Vanessa A Makarewicz,	Inglês	Livre	Relatório		
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502	Stefania Leopardi, Calogero Terregino, & De Benedictis	Inglês	Livre	Correspondência		
503	Authors are required! (2020). RCVS may relax guidance due to	Inglês	Livre	Relatório		
504	Ranjit Sah, Alfonso J. Rodriguez-Morales, Runa Jha, Daniel K. W.	Inglês	Livre	Editorial		
505	Trisha Greenhalgh, Joe Wherton, Sara Shaw, & Clare Morrison	Inglês	Livre	Editorial		
506	Shahul H. Ebrahim, & Ziad A. Memish (2020). COVID-19 – the	Inglês	Livre	Breve comunicacão		
507	R. Tahiri Joutei Hassani, & O. Sandali (2020). Le nouveau	Inglês	Livre	Correspondência		
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509	Zhenjian He (2020). What further should be done to control	Inglês	Livre	Ponto de vista		
510	Kam Wa Chan, Vivian Taam Wong, & Sydney Chi Wai Tang	Inglês	Livre	Revisão		
511	Sunhwa Choi Choi, & Moran Ki (2020). Estimating the	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
512	Paulo Bettencourt, Pedro Rodrigues, Helena Moreira,	Inglês	Restrito			
513	Liu Youning (**Year is required!**). Pharmacotherapeutic	outro	Restrito			Chinês
514	Zhou Ling, & Liu Huiguo (**Year is required!**). Early detection	outro	Restrito			Chinês
515	B Du, H B Qiu, X Zhan, Y S Wang, H Y J Kang, X Y Li, F	outro	Restrito			Chinês
516	J P Zhao, Y Hu, R H Du, Z S Chen, Y Jin, M Zhou, J Zhang, J	outro	Restrito			Chinês
517	Chaolin Huang, Yeming Wang, Xingwang Li, Lili Ren, Jianping	Inglês	Livre	Científico	Doença	
518	Yuan Xin, Mu Jinsong, Mo Guoxin, Hu Xingshuo, Yan Peng,	outro	Restrito			Chinês
519	Zhan Qingyuan (2018). National Key Research and Development	Inglês	Livre	Notícia		
520	Chinese Society of Extracorporeal Life Support	outro	Restrito			Chinês
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522	M Liu, P He, H G Liu, X J Wang, F J Li, S Chen, J Lin, P	outro	Restrito			Chinês
523	Flora Alfano, Giovanna Fusco, Viviana Mari, Leonardo	Inglês	Livre	Científico	Outro	Corona Vírus em animais
524	Qingye Zhuang, Shuo Liu, Xiaochun Zhang, Wenming	Inglês	Livre	Relatório		
525	Marijo Parčina, Uffe Vest Schneider, Benoit Visseaux,	Inglês	Livre	Científico	Doença	
526	Shi Zhao, Peihua Cao, Daozhou Gao, Zian Zhuang, Yongli Cai,	Inglês	Livre	Correspondência		
527	Jing Cai, Wenjie Sun, Jianping Huang, Michelle Gamber, Jing	Inglês	Livre	Correspondência		
528	L. Meng, F. Hua, & Z. Bian (2020). Coronavirus Disease	Inglês	Livre	Revisão		
529	Long-quan Li, Tian Huang, Yong-qing Wang, Zheng-ping	Inglês	Livre	Revisão		
530	Francesco Di Pierro, Alexander Bertuccioli, & Ilaria Cavecchia	Inglês	Livre	Científico	Tratamento	
531	Qing Chen, Bin Quan, Xiaoning Li, Guangjian Gao, Wenqiang	Inglês	Livre	Breve comunicação		
532	Antoine Garnier-Crussard, Emmanuel Forestier, Thomas	Inglês	Livre	Correspondência		
533	Elisa M. Maffioli (2020). How Is the World Responding to the	Inglês	Livre	Ponto de vista		
534	Zachary T. Bloomgarden (2020). Diabetes and COVID-19*Journal*	Inglês	Livre	Comentário		
535	Anh-Tien Ton, Francesco Gentile, Michael Hsing, Fuqiang	Inglês	Livre	Científico	Tratamento	
536	Hiba Siddig Ibrahim, & Shamsoun Khamis Kafi (2020).	Inglês	Livre	outro		protocolo
537	Jolin Wong, Qing Yuan Goh, Zihui Tan, Sui An Lie, Yoong	Inglês	Livre	Revisão		
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539	Wei Li, Huaqian Cui, Kunwei Li, Yifie Fang, & Shaolin Li (2020).	Inglês	Livre	Científico	Doença	
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541	Shaoshuai Wang, Lili Guo, Ling Chen, Weiyong Liu, Yong Cao,	Inglês	Livre	Relatório		
542	Chuan Qin, Luoqi Zhou, Ziwei Hu, Shuoqi Zhang, Sheng Yang,	Inglês	Livre	Científico	Doença	
543	Chang-Ju Kim (2020). New Year and coronavirus*Journal of*	Inglês	Livre	Editorial		
544	Hannah Stower (2020). Lack of maternal–fetal SARS-CoV-2	Inglês	Livre	Breve comunicação		
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546	Giuliana Viglione (2020). Coronavirus crisis hits ice-locked	Inglês	Livre	Notícia		
547	Kyoung-Jin Jang, Seonghwan Jeong, Dong Young Kang, Ninin	Inglês	Livre	Relatório		
548	Scott P. Layne, James M. Hyman, David M. Morens, &	Inglês	Livre	Editorial		
549	Suliman Khan, Rabeea Siddique, Muhammad Adnan Shereen,	Inglês	Livre	Revisão		
550	Lisa M. Koonin (2020). Novel Coronavirus Disease (COVID-	Inglês	Restrito			
551	Maged N. Kamel Boulos, & Estella M. Geraghty (2020).	Inglês	Livre	Editorial		
552	Iman S. Naga, Gamal Eldin Elsawaf, Mahmoud Elzalabany,	Inglês	Restrito			
553	Pan Chun, Zhang Wei, Du Bin3, . qin Haibo, & Huang	outro	Restrito			Chinês
554	Eric J. Rubin, Lindsey R. Baden, & Stephen Morrissey (2020).	Inglês	Livre	Editorial		
555	Roya Mohammadpour, Mohsen Chamour, Fateh Tutela, &	Inglês	Livre	Revisão		
556	Liona C. Poon, Huixia Yang, Jill C. S. Lee, Joshua A. Copel, Tak	Inglês	Livre	outro		protocolo
557	Michael Klompas (2020). Coronavirus Disease 2019	Inglês	Livre	Ponto de vista		
558	Vineet Chopra, Eric Toner, Richard Waldhorn, & Laraine	Inglês	Livre	Ponto de vista		

559	Jennifer Harcourt, Azaibi Tamin, Xiaoyan Lu, Shifao Kamili	Inglês	Livre	Científico	Doença	
560	Xiaojing Wu, Ying Cai, Xu Huang, Xin Yu, Li Zhao, Fan	Inglês	Livre	Correspondência		
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564	Mahmoud Kandeel, Abdelazim Ibrahim, Mahmoud Fayez, &	Inglês	Livre	Científico	Doença	
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566	Xinguang Chen, & Bin Yu (2020). First two months of the	Inglês	Livre	Científico	Doença	
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572	Qingyu Chen, Alexis Allot, & Zhiyong Lu (2020). Keep up with	Inglês	Livre	Correspondência		
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574	Tommaso Lupia, Silvia Scabini, Simone Mornese Pinna, Giovanni	Inglês	Livre	Revisão		
575	Rui Liu, Huan Han, Fang Liu, Zhihua Lv, Kailang Wu, Yinzie	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
576	Helen C Johnson, Céline M Gossner, Edoardo Colzani, John	Inglês	Livre	Breve comunicação		
577	Authors are required! (2020). Updated rapid risk assessment	Inglês	Restrito			
578	Regina Konrad, Ute Eberle, Alexandra Dangel, Bianca Treis,	Inglês	Livre	Breve comunicação		
579	Susanne Pfefferle, Svenja Reucher, Dominic Nörz, & Marc	Inglês	Livre	Breve comunicação		
580	Gianfranco Spiteri, James Fielding, Michaela Diercke,	Inglês	Livre	Breve comunicação		
581	Tracy Tsang (2020). COVID-19, Australia: Epidemiology Report	Inglês	Livre	Relatório		
582	Weiguo Li, Qi Zhou, Yuyi Tang, Lno Ren, Xuan Yu, Qin Li,	Inglês	Livre	outro		protocolo
583	Joungha Won, Solji Lee, Myunesun Park, Tai Young Kim,	Inglês	Livre	outro		protocolo
584	Ruth Barral-Arca, Alberto Gómez-Carballa, Miriam Cebey-	Inglês	Livre	Científico	Cura	
585	Cuiyan Wang, Riyu Pan, Xiaoyang Wan, Yilin Tan,	Inglês	Livre	Científico	Outro	Saúde mental
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587	Yifei Xu (2020). Unveiling the Origin and Transmission of 2019-	Inglês	Livre	Ponto de vista		
588	Joseph R. Hageman (2020). The Coronavirus Disease 2019	Inglês	Livre	Editorial		
589	Monica Malta, Anne W. Rimoin, & Steffanie A. Strathdee (2020).	Inglês	Livre	Comentário		
590	Camilla Mattiuzzi, & Giuseppe Lippi (2020). Which lessons shall	Inglês	Livre	Editorial		
591	Laishuan Wang, Yuan Shi, Tiantian Xiao, Jianhua Fu, Xing	Inglês	Livre	Revisão		
592	Shiyu Hu, Zi Li, Yungang Lan, Jiyu Guan, Kui Zhao, Dianfeng	Inglês	Livre	Científico	Doença	
593	C. Raina MacIntyre (2020). On a knife's edge of a COVID-19	Inglês	Livre	Editorial		
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595	Chronic obstructive pulmonary disease group of Chinese	outro	Restrito			Chinês

596	Tian Xinhun, Peng Min, Wang Hanning, Cai Baigiang, Xu	outro	Restrito		Chinês
597	Ewen Callaway (2020). Labs rush to study coronavirus in	Inglês	Livre	Notícia	
598	Amy Maxmen (2020). The race to unravel the biggest coronavirus	Inglês	Livre	Notícia	
599	Emma Stoye (2020). Coronavirus close-up, faded star and	Inglês	Livre	Notícia	
600	Authors are required! (2020). Coronavirus latest: pandemic	Inglês	Livre	Notícia	
601	Joana Gonçalves-Sá (2020). In the fight against the new	Inglês	Livre	Ponto de vista	
602	Miguel Angel Martinez (2020). Compounds with therapeutic	Inglês	Livre	Revisão	
603	Wendy Glauser (2020). Proposed protocol to keep COVID-19 out	Inglês	Livre	Notícia	
604	Michele Carbone, Joshua B. Green, Enrico M. Bucci, & John	Inglês	Livre	Editorial	
605	Andrea Lombardi, Giorgio Bozzi, Davide Mangioni, Antonio	Inglês	Livre	Comentário	
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607	Huijun Chen, Juanjuan Guo, Chen Wang, Fan Luo, Xuechen	Inglês	Livre	Científico	Doença
608	Jie Qiao (2020). What are the risks of COVID-19 infection in	Inglês	Livre	Comentário	
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612	Daniele De Luca (2020). Managing neonates with	Inglês	Livre	Correspondência	
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617	Joshua M. Sharfstein, Scott J. Becker, & Michelle M. Mello	Inglês	Livre	Ponto de vista	
618	Xueting Yao, Fei Ye, Miao Zhang, Cheng Cui, Baoying	Inglês	Livre	Científico	Tratamento
619	Jian Shang, Yushun Wan, Chang Liu, Boyd Yount, Kendra Gully	Inglês	Livre	Científico	Doença
620	Nisreen M.A. Okba, Ivy Widjaja, Wentao Li, Corine H.	Inglês	Livre	Correspondência	
621	An Tang, Zhen-dong Tong, Hong-ling Wang, Ya-xin Dai, Ke-feng	Inglês	Livre	Correspondência	
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625	Hua-Hao Fan, Li-Qin Wang, Wen-Li Liu, Xiao-Ping An, Zhen-	Inglês	Livre	Científico	Tratamento
626	Si-Hui Luo, Wei Liu, Zhen-Jun Liu, Xue-Ying Zheng, Chang-	Inglês	Livre	Relatório	
627	Eskild Petersen, Ziad A. Memish, Alimuddin Zumla, & Amal Al	Inglês	Livre	Revisão	
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634	Donald Kwok Tung Li (2020). Challenges and responsibilities of	Inglês	Livre	Editorial	
635	Kenza Hattoufi, Houssain Tligui, Maidouline Obtel, Sobha El	Inglês	Livre	Científico	Tratamento
636	Pei Hao, Wu Zhong, Shiyang Song, Shiyong Fan, & Xuan Li	Inglês	Livre	Comentário	
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650	Edward H. Kaplan (2020). Containing 2019-nCoV (Wuhan)	Inglês	Livre	Comentário	
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652	Rossella Porcheddu, Caterina Serra, David Kelvin, Nikki	Inglês	Livre	Científico	Doença
653	Poliana Moreira de Medeiros Carvalho, Marcial Moreno	Inglês	Livre	Correspondência	
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659	Qianying Lin, Shi Zhao, Daozhou Gao, Yijun Lou, Shu Yang,	Inglês	Livre	Científico	Doença
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665	Guanghai Wang, Yunting Zhang, Jin Zhao, Jun Zhang, & Fan Jiang	Inglês	Livre	Correspondência	
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671	Yongshi Yang, Fujun Peng, Runsheng Wang, Kai Guan,	Inglês	Livre	Revisão		
672	Changyu Fan, Linping Liu, Wei Gao, Anno Yang, Chenchen Ye,	Inglês	Livre	Relatório		
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679	I-K. Lee, C-C. Wang, M-C. Lin, C-T. Kung, K-C. Lan, & C-T.	Inglês	Livre	Correspondência		
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687	A Perrella, N Carannante, M Berretta, M Rinaldi, N Maturo,	Inglês	Livre	Editorial		
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726	Alfredo Ponce-de-León, Arturo Galindo-Fraga, Guillermo Ruiz-	Inglês	Livre	Ponto de vista		
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728	Han Xiao, Yan Zhang, Desheng Kong, Shiyue Li, & Ningxi Yang,	Inglês	Livre	Relatório		
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733	Fang Li, Zhi Chun Feng, & Yuan Shi (2020). Proposal for	Inglês	Livre	Correspondência		
734	MengYuan Diao, Sheng Zhang, Dechang Chen, & Wei Hu	Inglês	Livre	Correspondência		
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736	Pengcheng Zhou, Zebing Huang, Yunzong Xiao, Xun Huang, &	Inglês	Livre	Correspondência		
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743	Zijie Shen, Yan Xiao, Lu Kang, Wentai Ma, Leicheng Shi, Li	Inglês	Livre	Científico	Doença	
744	Sean Wei Xiang Ong, Yian Kim Tan, Po Ying Chia, Tau Hong	Inglês	Livre	Correspondência		
745	Wei-cai Dai, Han-wen Zhang, Juan Yu, Hua-jian Xu, Huan	Inglês	Livre	Relatório		

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757	Pilailuk Okada, Rome Buathong, Siripaporn Phuryem, Thanutsapa	Inglês	Livre	Breve comunicacão		
758	Licia Bordi, Emanuele Nicastri, Laura Scorzolini, Antonino Di	Inglês	Livre	Breve comunicacão		
759	Philippe Colson, Bernard La Scola, Vera Esteves-Vieira,	Inglês	Livre	Correspondência		
760	Mahmoud Kandeel, Mizuki Yamamoto, Abdulla Al-Taher,	Inglês	Livre	Científico	Tratamento	
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769	Z Zhao, H Bai, J C Duan, & J Wang (2020). [Individualized	outro	Livre		Chinês	
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771	J Wu, C L Feng, X Y Xian, J Qiang, J Zhang, Q X Mao, S F	outro	Livre		Chinês	
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775	Tengyue Zhang, Yudi He, Wenshuai Xu, Aiping Ma, Yanli	Inglês	Livre	Ponto de vista		
776	Tracy H. T. Lai, Emily W. H. Tang, Sandy K. Y. Chau, Kitty	Inglês	Livre	Relatório		
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789	Emanuele Amodio, Francesco Vitale, Livia Cimino, Alessandra	Inglês	Livre	Editorial		
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806	Min Li, Si-Chao Gu, Xiao-Jing Wu, Jin-Gen Xia, Yi Zhang, &	Inglês	Livre	Ponto de vista		
807	Jian-Wei Wang, Bin Cao, & Chen Wang (2020). Science in	Inglês	Livre	Editorial		
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809	Yun Ling, Shui-Bao Xu, Yi-Xiao Lin, Di Tian, Zhao-Qin Zhu, Fa-	Inglês	Livre	Científico	Tratamento	
810	Takeshi Arashiro, Keiichi Furukawa, & Akira Nakamura	Inglês	Livre	Correspondência		
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815	Arinjay Banerjee, Michelle L. Baker, Kirsten Kulcsar, Vikram	Inglês	Livre	Revisão		
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818	Philip W.H. Peng, Pak-Leung Ho, & Susy S. Hota (2020).	Inglês	Livre	Editorial		
819	Jong-Myon Bae (2020). A Chinese Case of COVID-19 Did	Inglês	Livre	Ponto de vista		
820	Chunbao Xie, Lingxi Jiang, Guo Huang, Hong Pu, Bo Gong, He	Inglês	Livre	Breve comunicação		
821	S. Chen, B. Huang, D. J. Luo, X. Li, F. Yang, Y. Zhao, X. Nie, & B. X.	outro	Livre			Chinês

822	Wang Ningli, Jie Ying, & Tao Fanshiao (Year is required!)	outro	Livre			Chinês
823	Sufang Tian, Weidong Hu, Li Niu, Huan Liu, Haibo Xu, & Shu-	Inglês	Livre	Relatório		
824	Jaffar A. Al-Tawfiq (2020). Asymptomatic coronavirus	Inglês	Livre	Correspondência		
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827	Han-Wen Zhang, Juan Yu, Hua-Jian Xu, Yi Lei, Zu-Hui Pu, Wei-	Inglês	Livre	Breve comunicacão		
828	Deng-hai Zhang, Kun-lun Wu, Xue Zhang, Sheng-qiong Deng,	Inglês	Livre	Científico	Tratamento	
829	Shao-Chung Cheng, Yuan-Chia Chang, Yu-Long Fan Chiang, Yu-	Inglês	Livre	Relatório		
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831	P. Pansri, J. Katholm, K.M. Kroeh, A.K. Aagaard, L.M.B.	Inglês	Livre	Científico	Doença	testagem
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833	Peter Moss, Gavin Barlow, Nicholas Easom, Patrick Lillie, &	Inglês	Livre	Correspondência		
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839	Fabrizio Albarello, Elisa Pianura, Federica Di Stefano, Massimo	Inglês	Livre	Científico	Doença	
840	Xinmiao Fu, Qi Ying, Tieyong Zeng, Tao Long, & Yan Wang	Inglês	Livre	Correspondência		
841	Sijia Tian, Nan Hu, Jing Lou, Kun Chen, Xinqin Kang, Zhenjun	Inglês	Livre	Científico	Doença	
842	Wenjie Yang, Qiqi Cao, Le Qin, Xiaoyang Wang, Zenghui Cheng,	Inglês	Livre	Científico	Doença	
843	Viviana Gallego, Hiroshi Nishiura, Ranjit Sah, & Alfonso	Inglês	Livre	Editorial		
844	Tauseef Ahmad, Muhammad Khan, Haroon, Taha Hussein	Inglês	Livre	Correspondência		
845	Samantha K Brooks, Rebecca K Webster, Louise E Smith, Lisa	Inglês	Livre	Revisão		
846	Khalid Al-Ahmadi, Mohammed Alahmadi, & Ali Al-Zahrani	Inglês	Livre	Científico	Doença	
847	Y Zhang, & J M Xu (2020). [Medical diagnosis and treatment	outro	Livre			Chinês
848	Xiao-Lu Ma, Zheng Chen, Jia-Jun Zhu, Xiao-Xia Shen, Ming-	Inglês	Livre	Revisão		
849	Kai-qian Kam, Chee Fu Yung, Lin Cui, Raymond Tzer Pin Lin,	Inglês	Livre	Relatório		
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854	A. Lee (2020). Wuhan novel coronavirus (COVID-19): why	Inglês	Livre	Editorial		
855	Tian-Mu Chen, Jia Rui, Qin-Peng Wang, Ze-Yu Zhao, Jing-An Cui,	Inglês	Livre	Científico	Doença	taxa de transmissão
856	Junxiong Pang, Min Xian Wang, Ian Yi Han Ang, Sharon Hui	Inglês	Livre	Revisão		
857	X Y Li, B Du, Y S Wang, H Y J Kang, F Wang, B Sun, H B Qiu,	outro	Restrito			Chinês

858	S Y Ma, Z Q Yuan, Y Z Peng, Q Z Luo, H P Song, F Xiang, J L	outro	Livre			Chinês
859	K. Roosa, Y. Lee, R. Luo, A. Kirpich, R. Rothenberg, J.M.	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
860	Qingmei Han, Qingqing Lin, Shenbe Jin, & Lianshun You	Inglês	Livre	Revisão		
861	Yu-Huan Xu, Jing-Hui Dong, Wei-Min An, Xiao-Yan Lv, Xiao-	Inglês	Livre	Relatório		
862	Yunpeng Ji, Zhongren Ma, Maikel P Peppelenbosch, &	Inglês	Livre	Correspondência		
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867	Anthony S. Fauci, H. Clifford Lane, & Robert R. Redfield	Inglês	Livre	Editorial		
868	Sara Cleemput, Wim Dumon, Vagner Fonseca, Wasim Abdool	Inglês	Livre	Revisão		
869	Melina Hosseiny, Soheil Kooraki, Ali Gholamrezanezhad, Sravanthi	Inglês	Livre	Revisão		
870	Manojit Bhattacharya, Ashish R. Sharma, Prasanta Patra, Pratik	Inglês	Livre	Científico	Cura	
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879	Shao-Lun Zhai, Wen-Kang Wei, Dian-Hong Lv, Zhi-Hong Xu,	Inglês	Livre	Notícia		
880	Xi Xu, Chengcheng Yu, Jing Qu, Lieguang Zhang, Songfeng Jiang,	Inglês	Livre	Científico	Doença	
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884	Iryna V. Goraichuk, James F. Davis, Arun B. Kulkarni, Claudio	Inglês	Livre	Editorial		
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886	Xiao-Wei Xu, Xiao-Xin Wu, Xian-Gao Jiang, Kai-Jin Xu, Ling-	Inglês	Livre	Científico	Doença	
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890	Henk-Willem Veltkamp, Fernanda Akegawa Monteiro	Inglês	Livre	Científico	Doença	
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894	Xiaobo Yang, Yuan Yu, Jiqian Xu, Huaqing Shu, Jia'an Xia	Inglês	Livre	Científico	Mortalidade	
895	Tedros Adhanom Ghebreyesus, & Soumya Swaminathan (2020).	Inglês	Livre	Comentário		
896	Simiao Chen, Juntao Yang, Weizhong Yang, Chen Wang, &	Inglês	Livre	Comentário		
897	Shan-Meng Lin, Shih-Chao Lin, Jia-Ning Hsu, Chung-ke Chang	Inglês	Livre	Científico	Tratamento	
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904	Xingguang Li, Junjie Zai, Qiang Zhao, Qing Nie, Yi Li, Brian T.	Inglês	Livre	Científico	Doença	origem
905	Tian-Tian Yao, Jian-Dan Qian, Wen-Yan Zhu, Yan Wang, &	Inglês	Livre	Revisão		
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910	Weicheng Liang, Zhijie Feng, Shitao Rao, Cuicui Xiao,	Inglês	Livre	Correspondência		
911	Poramed Winichakoon, Romanee Chaiwarith, Chalerm	Inglês	Livre	Correspondência		
912	Wen-Ming Zhao, Shu-Hui Song, Mei-Li Chen, Dong Zou, Li-Na	outro	Livre			Chinês
913	Mingzhang Zuo, Yuguang Huang, Wuhua Ma, Zhangzang	Inglês	Livre	Breve comunicacão		
914	Weilie Chen, Yun Lan, Xiaozhen Yuan, Xilong Deng, Yueping Li,	Inglês	Livre	Correspondência		
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916	Asami Anzai, Tetsuro Kobayashi, Natalie M. Linton,	Inglês	Livre	Científico	Doença	probabilidade de epidemia
917	Eric J. Rubin, Lindsey R. Baden, & Stephen Morrissey (2020).	Inglês	Livre	Editorial		
918	J H Cai, X S Wang, Y L Ge, A M Xia, H L Chang, H Tian, Y X	outro	Livre			Chinês
919	David M. Morens, Peter Daszak, & Jeffery K. Taubenberger	Inglês	Livre	Ponto de vista		
920	Tao Ai, Zhenlu Yang, Hongyan Hou, Chenao Zhan, Chong Chen	Inglês	Livre	Editorial		
921	Youngseop Lee, Byoung-Hoon Kang, Minhee Kang, Doo Ryeon	Inglês	Livre	Ponto de vista		
922	Zhixin Liu, Xiao Xiao, Xiuli Wei, Jian Li, Jing Yang, Huabing Tan,	Inglês	Livre	Científico	Doença	origem
923	B L Liu, F Ma, J N Wang, Y Fan, H N Mo, & B H Xu (2020).	outro	Livre			Chinês
924	Jianhua Xia, Jianping Tong, Mengyun Liu, Ye Shen, &	Inglês	Livre	Científico	Doença	testagem
925	Najmul Haider, Alexei Yavlinsky, David Simons, Abdinasir Yusuf	Inglês	Livre	Científico	Doença	
926	Jiangping Wei, Huaxiang Xu, Jinglang Xiong, Qinglin Shen,	Inglês	Livre	Relatório		
927	Soon Ho Yoon, Kyung Hee Lee, Jin Yong Kim, Young Kyung	Inglês	Livre	Relatório		
928	Biao Tang, Nicola Luigi Bragazzi, Qian Li, Sanyi Tang,	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
929	Weimo Zhu (2020). Should, and how can, exercise be done during	Inglês	Livre	outro		entrevista
930	Peijie Chen, Lijuan Mao, George P. Nassis, Peter Harmer, Barbara	Inglês	Livre	Ponto de vista		
931	Emma Stoye (2020). 'No one is allowed to go out': your stories	Inglês	Livre	Notícia		

932	Hongbo Duan, Shouyang Wang, & Cuihong Yang (2020).	Inglês	Livre	Correspondência		
933	Jiabao Xu, Shizhe Zhao, Tieshan Teng, Abualzasim Elzaili	Inglês	Livre	Breve comunicacão		
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935	Balamurugan Shanmugaraj, Ashwini Malla, & Waranyoo	Inglês	Livre	Revisão		
936	Kimberlyn Roosa, Yiseul Lee, Ruiyan Luo, Alexander Kirpich,	Inglês	Livre	Científico	Doença	
937	Gang Ye, Xiaowei Wang, Xiaohan Tong, Yuejun Shi, Zhen	Inglês	Livre	Científico	Tratamento	
938	Tetsuro Kobayashi, Sung-mok Jung, Natalie M. Linton, Ryo	Inglês	Livre	Editorial		
939	Junyang Li, Meicen Liu, Jin Gao, Yu Jiang, Limin Wu, Yuan-Ki	Inglês	Livre	Científico	Tratamento	
940	Sheng Zhang, MengYuan Diao, Wenbo Yu, Lei Pei, Zhaofen Lin,	Inglês	Livre	Breve comunicacão		
941	Vijay Harypursat, & Yao-Kai Chen (2020). Six weeks into the	Inglês	Livre	Ponto de vista		
942	Jin-Gen Xia, Jian-Ping Zhao, Zhen-Shun Cheng, Yi Hu, Jun	Inglês	Livre	Ponto de vista		
943	Qin Yan Gao, Ying Xuan Chen, & Jing Yuan Fang (2020). 2019	Inglês	Livre	Editorial		
944	Pengfei Sun, Xiaosheng Lu, Chao Xu, Wenjuan Sun, & Bo	Inglês	Livre	Revisão		
945	Alessia Lai, Annalisa Bergna, Carla Acciarri, Massimo Galli, &	Inglês	Livre	Breve comunicacão		
946	Kaijin Xu, Honglin Cai, Yihong Shen, Qin Ni, Yu Chen, Shaohua	outro	Livre			Chinês
947	Jincheng Wang, Jinpeng Liu, Yuanyuan Wang, Wei Liu,	outro	Restrito			Chinês
948	Yuncheng Zhu, Liangliang Chen, Haifeng Ji, Maomao Xi, Yiru	Inglês	Livre	Correspondência		
949	Michael Letko, Andrea Marzi, & Vincent Munster (2020).	Inglês	Livre	Científico	Doença	
950	Hao Xu, Liang Zhong, Jiaxin Deng, Jiakuan Peng, Hongxia	Inglês	Livre	Científico	Doença	
951	Calvin J Gordon, Egor P Tchesnokov, Joy Y Feng,	Inglês	Livre	Científico	Tratamento	
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958	Gerard Kian-Meng Goh, A. Keith Dunker, James A. Foster, &	Inglês	Livre	Editorial		
959	Peipei Song, & Takashi Karako (2020). COVID-19: Real-time	Inglês	Livre	Editorial		
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961	Tung Phan (2020). Genetic diversity and evolution of SARS-	Inglês	Livre	Breve comunicacão		
962	Rui Li, Songlin Qiao, & Gaiping Zhang (2020). Analysis of	Inglês	Livre	Correspondência		
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964	Wendong Hao, & Manxiang Li (2020). Clinical features of	Inglês	Livre	Correspondência		
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966	Soheil Kooraki, Melina Hosseiny, Lee Myers, & Ali	Inglês	Livre	Relatório		
967	Katelyn Gostic, Ana CR Gomez, Riley O Mummah, Adam J	Inglês	Livre	Científico	Doença	
968	Zhen-Dong Tong, An Tang, Ke-Feng Li, Peng Li, Hong-Ling	Inglês	Livre	Correspondência		
969	Jiyu Zhang, Yuru Han, Hongyan Shi, Jianfei Chen, Xin Zhang,	Inglês	Livre	Científico	Doença	
970	Yue-Lin Yang, Fandan Meng, Pan Qin, Georg Herrler, Yao-	Inglês	Livre	Científico	Cura	

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973	Gregory A Poland (2020). Another coronavirus, another	Inglês	Livre	Editorial		
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975	Jing Li, & Wenjun Liu (2020). Puzzle of highly pathogenic	Inglês	Livre	Comentário		
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977	David J Kelvin, & Salvatore Rubino (2020). Fear of the novel	Inglês	Livre	Editorial		
978	Katri Jalava (2020). First respiratory transmitted food	Inglês	Livre	Editorial		
979	Shi Zhao, Qianyin Lin, Jinjun Ran, Salihu S Musa, Guangpu	Inglês	Livre	Correspondência		
980	Hom Nath Dhungana (2020). Comments on "Preliminary	Inglês	Livre	Comentário		
981	Xingchen Pan, David M Ojcius, Tianyue Gao, Zhongsheng Li,	Inglês	Livre	Editorial		
982	Marius Gilbert, Giulia Pullano, Francesco Pinotti, Eugenio	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
983	The Lancet (2020). COVID-19: fighting panic with	Inglês	Livre	Editorial		
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988	Yi Zhang, Jinyang Xu, Hui Li, & Bin Cao (2020). A Novel	Inglês	Livre	Editorial		
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990	Charles Calisher, Dennis Carroll, Rita Colwell, Ronald B Corley,	Inglês	Livre	Correspondência		
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993	X Qu, & X D Zhou (2020). Psychological Intervention in	outro	Livre			Chinês
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995	Ji-Peng Olivia Li, Dennis Shun Chiu Lam, Youxin Chen, &	Inglês	Livre	Editorial		
996	Yuan Yang, Wen Li, Qinge Zhang, Ling Zhang, Teris	Inglês	Livre	Correspondência		
997	Andrian Liem, Cheng Wang, Yosa Warivanti, Carl A Latkin,	Inglês	Livre	Correspondência		
998	Shuai Liu, Lulu Yang, Chenxi Zhang, Yu-Tao Xiang,	Inglês	Livre	Correspondência		
999	Li Duan, & Gang Zhu (2020). Psychological interventions for	Inglês	Livre	Comentário		
1000	Qiongni Chen, Mining Liang, Yamin Li, Jincai Guo, Dongxue	Inglês	Livre	Correspondência		
1001	Stephanie N. Langel, Qiuhong Wang, Anastasia N. Vlasova, &	Inglês	Livre	Revisão		
1002	Zi Yue Zu, Meng Di Jiang, Peng Peng Xu, Wen Chen, Qian Qian	Inglês	Livre	Revisão		
1003	Giuseppe Lippi, & Mario Plebani (2020). The novel coronavirus	Inglês	Livre	Revisão		
1004	H Catton (2020). Global challenges in health and health	Inglês	Livre	Ponto de vista		
1005	Yan Bai, Lingsheng Yao, Tao Wei, Fei Tian, Dong-Yan Jin,	Inglês	Livre	Correspondência		
1006	Boris Kriebel, Sven Falke, Rolf Hilgenfeld, Lars Redecke, &	Inglês	Livre	Científico	Doença	
1007	J X Hu, G H He, T Liu, J P Xiao, Z H Rong, L C Gao, W L Zeng	outro	Livre			Chinês
1008	Silvia Angeletti, Domenico Benvenuto, Martina Bianchi,	Inglês	Livre	Científico	Doença	

1002	Zi Yue Zu, Meng Di Jiang, Peng Peng Xu, Wen Chen, Qian Qian	Inglês	Livre	Revisão		
1003	Giuseppe Lippi, & Mario Plebani (2020). The novel coronavirus	Inglês	Livre	Revisão		
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1005	Yan Bai, Lingsheng Yao, Tao Wei, Fei Tian, Dong-Yan Jin,	Inglês	Livre	Correspondência		
1006	Boris Krichel, Sven Falke, Rolf Hilgenfeld, Lars Redecke, &	Inglês	Livre	Científico	Doença	
1007	J X Hu, G H He, T Liu, J P Xiao, Z H Rong, L C Gao, W L Zeng	outro	Livre			Chinês
1008	Silvia Angeletti, Domenico Benvenuto, Martina Bianchi,	Inglês	Livre	Científico	Doença	
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1027	Authors are required! (2020). The Novel Coronavirus	Inglês	Livre	Ponto de vista		
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1045	Daniel Wrapp, Nianshuang Wang, Kizzmekia S. Corbett,	Inglês	Livre	Relatório		
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1092	Wei Zhang, Rong-Hui Du, Bei Li, Xiao-Shuang Zheng, Xing-	Inglês	Livre	Científico	Tratamento	

1093	Luciana V. Sarmento, Korakrit Poonsak, Liying Tian, Juan C.	Inglês	Livre	Breve comunicacão		
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1107	Mark F. McCarty, & James J. DiNicolantonio (2020).	Inglês	Livre	Comentário		
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1113	Munyaradzi Makoni (2020). Africa prepares for	Inglês	Livre	Relatório		
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1127	Hong Zhang (2020). Early lessons from the frontline of the	Inglês	Livre	Correspondência		
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1129	Min Wei, Jingping Yuan, Yu Liu, Tao Fu, Xue Yu, & Zhi-Jiang	Inglês	Livre	Correspondência		

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1188	Yingxia Liu, Yang Yang, Cong Zhang, Fengming Huang,	Inglês	Livre	Científico	Tratamento
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1225	Michael K. Lo, Jessica R. Spengler, Lauren R.H Krumme,	Inglês	Livre	Revisão	
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1228	Z F Jiang, & J B Li (2020). Ten Hot Issues of Breast Cancer	outro	Livre		Chinês
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1243	Aiping Wu, Yousong Peng, Baoying Huang, Xiao Ding,	Inglês	Livre	Comentário	

1244	Alimuddin Zumla, David S Hui, Esam I Azhar, Ziad A Memish.	Inglês	Livre	Correspondência		
1245	Jun Shigemura, Robert J. Ursano, Joshua C. Morganstein, Mie	Inglês	Livre	Correspondência		
1246	Kunling Shen, Yonghong Yang, Tianyou Wang, Dongchi Zhao,	Inglês	Livre	Revisão		
1247	Heather Mowbray (2020). In Beijing, coronavirus 2019-nCoV	Inglês	Livre	Breve comunicação		
1248	Muthukumar Gunasekaran, Sandhya Bansal, Ranjithkumar	Inglês	Livre	Científico	Tratamento	
1249	Authors are required! (2020). Expert Consensus for	outro	Livre			Chinês
1250	L. Lin, & T. S. Li (2020). Interpretation of "Guidelines for	outro	Livre			Chinês
1251	Hiroshi Nishiura, Tetsuro Kobayashi, Yichi Yang, Katsuma	Inglês	Livre	Editorial		
1252	Jieliang Chen (2020). Pathogenicity and transmissibility	Inglês	Livre	Breve comunicação		
1253	S. Khan, A. Ali, R. Siddique, & G. Nabi (2020). Novel	Inglês	Livre	Comentário		
1254	Yu-Tao Xiang, Yuan Yang, Wen Li, Ling Zhang, Qinge Zhang,	Inglês	Livre	Comentário		
1255	Peter Richardson, Ivan Griffin, Catherine Tucker, Dan Smith,	Inglês	Livre	Correspondência		
1256	Heshui Shi, Xiaoyu Han, & Chuansheng Zheng (2020).	Inglês	Livre	Relatório		
1257	Y. M. Dennis Lo, & Rossa W. K. Chiu (2020). Racing Towards the	Inglês	Livre	Editorial		
1258	Daniel K. W. Chu, Yang Pan, Samuel M. S. Cheng, Kenrie P. Y.	Inglês	Livre	Editorial		
1259	Dawei Wang, Bo Hu, Chang Hu, Fangfang Zhu, Xing Liu, Jing	Inglês	Livre	Científico	Doença	
1260	De Chang, Minggui Lin, Lai Wei, Lixin Xie, Guangfa Zhu, Charles	Inglês	Livre	Correspondência		
1261	Yicheng Fang, Huangqi Zhang, Yunyu Xu, Jicheng Xie, Peipei	Inglês	Livre	Correspondência		
1262	Shu-Yuan Xiao, Yingjie Wu, & Huan Liu (2020). Evolving status	Inglês	Livre	Comentário		
1263	Manuel Battegay, Richard Kuehl, Sarah Tschudin-Sutter, Hans H.	Inglês	Livre	Ponto de vista		
1264	Jin-Hong Yoo, & Sung-Tae Hong (2020). The Outbreak	Inglês	Livre	Editorial		
1265	Jin Yong Kim, Pyoeng Gyun Choe, Yooniu Oh, Kyung Joong	Inglês	Livre	Relatório		
1266	Ivan Seah, Xinyi Su, & Gopal Lingam (2020). Revisiting the	Inglês	Livre	Editorial		
1267	Authors are required! (2020). China bans sale of wildlife	Inglês	Livre	Comentário		
1268	Elisabeth Mahase (2020). Coronavirus: doctor who faced	Inglês	Livre	Notícia		
1269	Ying-Hui Jin, Lin Cai, Zhen-Shun Cheng, Hong Cheng, Tong Deng,	Inglês	Livre	Ponto de vista		
1270	Authors are required! (2020). Fighting the novel coronavirus:	Inglês	Livre	Notícia		
1271	Talha Khan Burki (2020). Coronavirus in China*The Lancet*	Inglês	Livre	Notícia		
1272	Liz J Walker (2020). 2019-nCoV acute respiratory disease.	Inglês	Livre	Relatório		
1273	Imran Satia, Ruth Cusack, Justina M. Greene, Paul M.	Inglês	Livre	Relatório		
1274	Anita Patel, Daniel B. Jernigan, Fatuma Abdirizak, Glen Abedi	Inglês	Livre	Editorial		
1275	Fengxiang Song, Nannan Shi, Fei Shan, Zhiyong Zhang, Jie Shen,	Inglês	Livre	Relatório		
1276	Carmine Ceraolo, & Federico M. Giorgi (2020). Genomic variance	Inglês	Livre	Breve comunicação		
1277	Xingguang Li, Wei Wang, Xiaofang Zhao, Junjie Zai, Qiang	Inglês	Livre	Científico	Doença	
1278	Authors are required! (2020). Urgent Research Agenda for the	outro	Livre			Chinês
1279	L. Chen, H. G. Liu, W. Liu, J. Liu, K. Liu, J. Shang, Y. Deng, & S. Wei	outro	Livre			Chinês
1280	Zhi-Min Chen, Jun-Fen Fu, Qiang Shu, Yong-Hui Chen, Chun-	Inglês	Livre	Revisão		
1281	Kun-Ling Shen, & Yong-Hong Yang (2020). Diagnosis and	Inglês	Livre	Editorial		

1282	Vera Kemp, Andrea Laconi, Giulio Cocciolo, Alinda J.	Inglês	Livre	Científico	Doença	
1283	Xuelian Liao, Bo Wang, & Yan Kang (2020). Novel coronavirus	Inglês	Livre	Breve comunicacão		
1284	Shibo Jiang, Shuai Xia, Tianlei Ying, & Lu Lu (2020). A novel	Inglês	Livre	Comentário		
1285	Elisabeth Mahase (2020). Novel coronavirus: Australian GPs raise	Inglês	Livre	Notícia		
1286	Elisabeth Mahase (2020). China coronavirus should be on	Inglês	Livre	Notícia		
1287	Shi Zhao, Salihu S. Musa, Qianying Lin, Jinjun Ran,	Inglês	Livre	Relatório		
1288	Sukhyun Ryu, & Byung Chul Chun (2020). An interim review	Inglês	Livre	Breve comunicacão		
1289	F Yang, N Liu, J Y Wu, L L Hu, G S Su, & N S Zheng (2020).	outro	Livre			Chinês
1290	H Li, Y M Wang, J Y Xu, & B Cao (2020). Potential Antiviral	outro	Livre			Chinês
1291	Z C Gao (2020). Efficient Management of Novel	outro	Livre			Chinês
1292	Authors are required! (2020). Prevention and Control Program	outro	Livre			Chinês
1293	Authors are required! (2020). Diagnosis and Clinical	outro	Livre			Chinês
1294	K Xu, X Q Lai, & Z Lin (2020). Suggestions for Prevention of	outro	Livre			Chinês
1295	F Fang, & X P Luo (2020). Facing the Pandemic of 2019	outro	Livre			Chinês
1296	Raquel Duarte, Isabel Furtado, Luís Sousa, & Carlos Filipe	Inglês	Livre	Editorial		
1297	Ashleigh R. Tuite, & David N. Fisman (2020). Reporting	Inglês	Livre	Correspondência		
1298	Carlos del Rio, & Preeti N. Malani (2020). 2019 Novel	Inglês	Livre	Ponto de vista		
1299	Stéphany Gardier, & Christiane Petiemat (2020). Coronavirus :	Francês	Livre	outro		entrevista
1300	Jared S. Morse, Tyler Lalonde, Shiqing Xu, & Wenshe Ray Liu	Inglês	Livre	Ponto de vista		
1301	Vargab Baruah, & Sujoy Bose (2020). Immunoinformatics-aided	Inglês	Livre	Científico	Cura	
1302	Marta Giovanetti, Domenico Benvenuto, Silvia Angeletti, &	Inglês	Livre	Breve comunicacão		
1303	Parham Habibzadeh, & Emily K. Stoneman (2020). The Novel	Inglês	Livre	Revisão		
1304	Liangjun Chen, Weiyong Liu, Qi Zhang, Ke Xu, Guangming Ye,	Inglês	Livre	Relatório		
1305	Justin B. Long, & Jesse M. Ehrenfeld (2020). The Role of	Inglês	Livre	Editorial		
1306	Authors are required! (2020). Calling all coronavirus	Inglês	Livre	Editorial		
1307	Ewen Callaway (2020). China coronavirus: labs worldwide	Inglês	Livre	Notícia		
1308	Dyani Lewis (2020). Coronavirus outbreak: what's next?*Nature*,	Inglês	Livre	Notícia		
1309	Manli Wang, Ruiyuan Cao, Leike Zhang, Xinglou Yang, Jia Liu,	Inglês	Livre	Correspondência		
1310	Jane Parry (2020). China coronavirus: Hong Kong health	Inglês	Livre	Notícia		
1311	Julien Riou, & Christian L. Althaus (2020). Pattern of early	Inglês	Livre	Breve comunicacão		
1312	Giulia Pullano, Francesco Pinotti, Eugenio Valdano, Pierre-Yves	Inglês	Livre	Breve comunicacão		
1313	Authors are required! (2020). Note from the editors: World	Inglês	Livre	Editorial		
1314	Brian McCloskey, & David L. Heymann (2020). SARS to novel	Inglês	Livre	Editorial		
1315	Fei Yu, Lanying Du, David M. Ojcius, Chungen Pan, & Shibo	Inglês	Livre	Revisão		
1316	Jeffrey P. Kanne (2020). Chest CT Findings in 2019 Novel	Inglês	Livre	Editorial		
1317	Jian Wang, Yangyang Li, Shouyu Wang, & Fei Liu (2020).	Inglês	Livre	Editorial		
1318	Foster Kofi Ayittey, Christian Dzuvor, Matthew Kormla	Inglês	Livre	Comentário		

1319	Johannes R. Bogner (2020). Coronavirus: Stehen wir am	outro	Livre		Alemão	
1320	Authors are required! (2020). Communication, collaboration	Inglês	Livre	Editorial		
1321	Fan Wu, Su Zhao, Bin Yu, Yan-Mei Chen, Wen Wang, Zhi-Gang	Inglês	Livre	Relatório		
1322	Peng Zhou, Xing-Lou Yang, Xian-Guang Wang, Ben Hu, Lei	Inglês	Livre	Científico	Doença	
1323	Avinash Premraj, Abi George Alevas, Binita Nautival, & Thaha	Inglês	Livre	Científico	Tratamento	
1324	Joseph T Wu, Kathy Leung, & Gabriel M Leung (2020).	Inglês	Livre	Relatório		
1325	Peng Liu, & Xian-zheng Tan (2020). 2019 Novel Coronavirus	Inglês	Livre	Relatório		
1326	S K. Kritas, G Ronconi, Al Caraffa, C E Gallenga, R Ross, &	Inglês	Livre	Editorial		
1327	Liangsheng Zhang, Fu-ming Shen, Fei Chen, & Zhenzuo Lin	Inglês	Livre	Correspondência		
1328	Hayne Cho Park, Sang-Ho Lee, Juhee Kim, Do Hyoung Kim,	Inglês	Livre	Relatório		
1329	Cara E Brook, Mike Boots, Kartik Chandran, Andrew P	Inglês	Livre	Científico	Doença	
1330	Mary E Wilson, & Lin H Chen (2020). Travellers give wings to	Inglês	Livre	Editorial		
1331	Xintian Xu, Ping Chen, Jingfang Wang, Jiannan Feng, Hui Zhou	Inglês	Livre	Correspondência		
1332	Shi Zhao, Qianyin Lin, Jinjun Ran, Salihu S. Musa, Guangzu	Inglês	Livre	Científico	Doença	indice de surto
1333	Tung Phan (2020). Novel coronavirus: From discovery to	Inglês	Livre	Ponto de vista		
1334	D. Katterine Bonilla-Aldana, Keidenis Quintero-Rada, Juan	Inglês	Livre	Correspondência		
1335	Ruichen Wang, Xu Zhang, David M Irwin, & Yongyi Shen (2020).	Inglês	Livre	Correspondência		
1336	Roujian Lu, Xiang Zhao, Juan Li, Peihua Niu, Bo Yang, Honglong	Inglês	Livre	Científico	Doença	origem
1337	Nanshan Chen, Min Zhou, Xuan Dong, Jieming Qu, Fengyun	Inglês	Livre	Científico	Doença	origem
1338	Cristian Biscayart, Patricia Angeleri, Susana Lloveras, Tânia	Inglês	Livre	Editorial		
1339	Shi Zhao, Zian Zhuang, Jinjun Ran, Jiaer Lin, Guangzu Yang,	Inglês	Livre	Correspondência		
1340	Yifei Xu (2020). Genetic diversity and potential	Inglês	Livre	Correspondência		
1341	Thanigaimalai Pillaiyar, Sangeetha Meenakshisundaram,	Inglês	Livre	Revisão		
1342	Elisabeth Mahase (2020). China coronavirus: WHO declares	Inglês	Livre	Notícia		
1343	Ilona Kickbusch, & Gabriel Leung (2020). Response to the	Inglês	Livre	Editorial		
1344	Mark Flear, Anniek de Ruijter, & Martin McKee (2020).	Inglês	Livre	Ponto de vista		
1345	Afnan A. Degnah, Sawsan S. Al-amri, Ahmed M. Hassan,	Inglês	Livre	Editorial		
1345	Afnan A. Degnah, Sawsan S. Al-amri, Ahmed M. Hassan,	Inglês	Livre	Editorial		
1346	Brenda Huneycutt, Nicole Lurie, Sara Rotenberg, Richard Wilder,	Inglês	Livre	Revisão		
1347	Shibo Jiang, Lanying Du, & Zhengli Shi (2020). An emerging	Inglês	Livre	Comentário		
1348	D. Paraskevis, E.G. Kostaki, G. Magiorkinis, G.	Inglês	Livre	Breve comunicação		
1349	Hamzah Z. Farooq, Emma Davies, Shazaad Ahmad,	Inglês	Livre	Científico	Doença	
1350	Michelle L. Holshue, Chas DeBolt, Scott Lindquist, Kathy	Inglês	Livre	Relatório		
1351	Li-Li Ren, Ye-Ming Wang, Zhi-Qiang Wu, Zi-Chun Xiang, Li	Inglês	Livre	Científico	Doença	
1352	W. Graham Carlos, Charles S. Dela Cruz, Bin Cao, Susan	Inglês	Livre	Breve comunicação		
1353	Junqiang Lei, Junfeng Li, Xun Li, & Xiaolong Qi (2020). CT	Inglês	Livre	Relatório		
1354	Camilla Rothe, Mirjam Schunk, Peter Sothmann, Gisela Bretzel,	Inglês	Livre	Relatório		

1355	Matteo Bassetti, Antonio Vena, & Daniele Roberto Giacobbe	Inglês	Livre	Editorial		
1356	Jon Cohen (2020). New coronavirus threat galvanizes	Inglês	Livre	Notícia		
1357	Julian W. Tang, Paul A. Tambyah, & David S.C. Hui	Inglês	Livre	Correspondência		
1358	Alexandra L. Phelan, Rebecca Katz, & Lawrence O. Gostin	Inglês	Livre	Ponto de vista		
1359	Jin-Hong Yoo (2020). The Fight against the 2019-nCoV Outbreak:	Inglês	Livre	Editorial		
1360	Xingguang Li, Junjie Zai, Xiaomei Wang, & Yi Li (2020).	Inglês	Livre	Científico	Doença	origem
1361	Hongzhou Lu (2020). Drug treatment options for the 2019-	Inglês	Livre	Breve comunicação		
1362	Yushun Wan, Jian Shang, Rachel Graham, Ralph S. Baric, & Fang	Inglês	Livre	Científico	Doença	
1363	Jane Parry (2020). China coronavirus: partial border	Inglês	Livre	Notícia		
1364	Yanqun Wang, Xin Li, Wenkuan Liu, Mian Gan, Lu Zhang, Jin	Inglês	Livre	Científico	Doença	
1365	Qun Li, Xuhua Guan, Peng Wu, Xiaoye Wang, Lei Zhou, Yeqing	Inglês	Livre	Revisão		
1366	Weier Wang, Jianming Tang, & Fangniang Wei (2020). Updated	Inglês	Livre	Científico	Mortalidade	
1367	Domenico Benvenuto, Marta Giovanetti, Alessandra Ciccozzi,	Inglês	Livre	Comentário		
1368	David Cyranoski (2020). This scientist hopes to test coronavirus	Inglês	Livre	Notícia		
1369	Ewen Callaway, & David Cyranoski (2020). China	Inglês	Livre	Notícia		
1370	Elisabeth Mahase (2020). China coronavirus: mild but infectious	Inglês	Livre	Notícia		
1371	Tom Moberly (2020). Chinese premier rallies medics in	Inglês	Livre	Notícia		
1372	Catherine Dunlop, Amanda Howe, Donald Li, & Luke N	Inglês	Livre	Breve comunicação		
1373	Peng Wu, Xinxin Hao, Eric H Y Lau, Jessica Y Wong, Kathy S M	Inglês	Livre	Breve comunicação		
1374	Victor M Corman, Olfert Landt, Marco Kaiser, Richard	Inglês	Livre	Científico	Outro	Técnicas/Estratégias Hospitalares
1375	Hiroshi Nishiura, Sung-mok Jung, Natalie M. Linton, Ryo	Inglês	Livre	Editorial		
1376	Lisa E. Gralinski, & Vineet D. Menachery (2020). Return of the	Inglês	Livre	Comentário		
1377	Lan T. Phan, Thuong V. Nguyen, Quang C. Luong, Thinh	Inglês	Livre	Relatório		
1378	Andrea Du Toit (2020). Outbreak of a novel	Inglês	Livre	Notícia		
1379	John Nkengasong (2020). China's response to a novel	Inglês	Livre	Comentário		
1380	Jasper Fuk-Woo Chan, Kin-Hang Kok, Zheng Zhu, Hin Chu	Inglês	Livre	Revisão		
1381	Jasper Fuk-Woo Chan, Shuofeng Yuan, Kin-Hang Kok, Kelvin Kai-	Inglês	Livre	Científico	Doença	
1382	The Lancet (2020). Emerging understandings of 2019-	Inglês	Livre	Editorial		
1383	David L Heymann (2020). Data sharing and outbreaks: best	Inglês	Livre	Comentário		
1384	Chen Wang, Peter W Horby, Frederick G Hayden, & George F	Inglês	Livre	Comentário		
1385	Eric J. Rubin, Lindsey R. Baden, Stephen Morrissey, & Edward	Inglês	Livre	Editorial		
1386	Isaac I Bogoch, Alexander Watts, Andrea Thomas-Bachli, Carmen	Inglês	Livre	Breve comunicação		
1387	Mahmut Ok, Ramazan Yildiz, Fatih Hatipoglu, Nuri Basoinar	Inglês	Restrito			
1388	Yan Wang, Xuejiao Cui, Xu Chen, Shixing Yang, Yu Ling,	Inglês	Livre	Relatório		
1389	Hao Li, Jianan Li, Yaru Zhai, Lan Zhang, Penefei Cui, Lan	Inglês	Livre	Científico	Tratamento	
1390	Geng Li, Yaohua Fan, Yanni Lai, Tiantian Han, Zongbin Li,	Inglês	Livre	Revisão		
1391	Elisabeth Mahase (2020). China coronavirus: what do we know so	Inglês	Livre	Notícia		
1392	Shan-Lu Liu, & Linda Saif (2020). Emerging Viruses	Inglês	Livre	Editorial		

1393	Na Zhu, Dingyu Zhang, Wenling Wang, Xingwang Li, Bo Yang,	Inglês	Livre	Relatório		
1394	Stanley Perlman (2020). Another Decade, Another	Inglês	Livre	Editorial		
1395	Vincent J. Munster, Marion Koopmans, Neeltje van	Inglês	Livre	Ponto de vista		
1396	Catharine I. Paules, Hilary D. Marston, & Anthony S. Fauci	Inglês	Livre	Ponto de vista		
1397	Authors are required! (2020). Rapid outbreak response requires	Inglês	Livre	Editorial		
1398	Susanna K. P. Lau, Kenneth S. M. Li, Hayes K. H. Luk, Zirong	Inglês	Livre	Relatório		
1399	Elisabeth Mahase (2020). Coronavirus: UK screens direct	Inglês	Livre	Notícia		
1400	Wei Ji, Wei Wang, Xiaofang Zhao, Junjie Zai, & Xingguang Li	Inglês	Livre	Científico	Doença	origem
1401	Yu Chen, Qianyun Liu, & Deyin Guo (2020). Emerging	Inglês	Livre	Revisão		
1402	David S. Hui, Esam I Azhar, Tariq A. Madani, Francine	Inglês	Livre	Editorial		

Anexo 2

Lista de referências bibliográficas recolhidas de 20 de novembro de 2019 a 2 de abril de 2020 (excluindo as que estavam em duplicado)

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