

### 3- In the event of a post-mortem examination or diagnostic finding

in addition to a careful preventive assessment of the risks and advantages associated with this procedure, all the precautions followed during the care of the patient must be taken. Autopsies and checks can only be carried out in those sector rooms that guarantee conditions of maximum safety and infectious disease protection for operators and work environments:

BSL3 rooms, i.e. with an adequate ventilation system, i.e. a system with a minimum of 6 and a maximum of 12 air changes per hour, negative pressure with respect to adjacent areas, and air leaking directly outside the structure itself or through HEPA filters, if the air recirculates. In addition to protective clothing and the use of PPE, the pathologist and all staff present in the autopsy room will wear a double pair of latex gloves, with a pair of cut-resistant gloves in between.

According to Totaro, there would have been great men who would have carried out autopsies "in secret" allowing us to find out what was causing the virus, namely the much-cited thrombosis. The autopsies were carried out and the results were published and reported online by specialized sites, as we can see in an article of 9 April 2020 in the magazine of the

#### Umberto Veronesi Foundation:

In three months of experience, it has become clear that having kidney failure, being dialysed or having a kidney transplant means living with a higher risk of the disease developing into more severe forms. But in reality the Coronavirus seems able to affect even those kidneys that were in good health, until before the infection. "

In the autopsies conducted so far, it has been seen that one third of patients died due to acute kidney failure - says Claudio Cricelli, president of the Italian Society of General Medicine (Simg) -. We know that the infection causes an increase in blood microcoagulation in various organs. Some people may have died because their kidneys became blocked due to this very event.

It is no coincidence that the Italian Medicines Agency has given the green light to the use of enoxaparin, a drug used for some time for the treatment of various vascular diseases that tend to form thrombi and emboli "The narrative of heparin" "Where is the heparin?", The doctor asks again from the stage, but this medicine has been talked about for years for this type of disease as explained in an article, entitled



"COVID-19 and thrombosis: let's clarify", published on 21 April on the Humanitas Group website: Dr. Lodigiani explains: "The correlation between inflammatory diseases, such as pneumonia and thrombosis in general (especially venous), has been known for decades; consider that a patient with any bacterial or viral pneumonia, therefore not necessarily from

SARS-CoV-2, is usually subjected to thromboembolic prophylaxis with low molecular weight heparin, as there is a strong recommendation in all international guidelines, aimed at reducing or eliminating the risk of venous thromboembolism, or deep vein thrombosis.

This is the formation of thrombi in the blood of our veins which in some cases can cause pulmonary embolism, a potentially fatal event. Thromboembolic prophylaxis is generally carried out through the use of low molecular weight heparin and this recommendation is the result of a scientific study published in 1999 ".

### When does the problem arise?

In the article of the Humanitas Group, Professor Maurizio Cecconi (Director of the Anesthesia and Intensive Care Department) explains that "patients with severe infectious or septic diseases present a state of powerful inflammation which, by activating the coagulation system, induces a state of hypercoagulability and therefore exposes you to a high risk of thrombosis ».

In the documents published by AIFA since the beginning of 2020, regarding the drugs that can be used for Covid19 patients, heparin is well present with the following indications: For which patients are they recommended?

The use of low molecular weight heparins in the prophylaxis of thromboembolic events in medical patients with acute respiratory infection in bed or with reduced mobility is recommended by the main guidelines in the absence of contraindications. This applies, in the presence of the aforementioned characteristics, both to hospitalized patients and to patients managed at home or in nursing homes or nursing homes using prophylactic doses.

Hydroxychloroquine Another drug acclaimed from the stage by the protagonists of the event is hydroxychloroquine, considered suitable against Covid19. On stage, and often online, the Mario Negri Institute is mentioned in support of home therapies, but in a section of the institutional website - updated on 19 May 2021

- this drug is literally cut short:



"The data published so far on some medicines subject to trials (lopinavir / ritonavir, chloroquine and hydroxychloroquine) do not document their efficacy, while on the contrary to date there is solid and conclusive scientific evidence only on the efficacy of cortisone treatment in patients who have severe forms of

Covid-19 (for example pneumonia requiring breathing support)

".The narrative of the percentages of "cured" patients Some doctors are promoting the narrative that percentages close to or equal to 100% of their patients have not been hospitalized or died as a result of the disease, numbers that, in reality, almost parallel the official ones at national level.

With regard to hospitalized patients, on the website of the National Agency for Regional Health Services we can consult the percentages of the ratio of hospitalized patients and total positives for each Region (including the Autonomous Provinces) with the national average: 3% of positives.