

Italian university rectors for health and environment: the U4ALL initiative

The Editors,¹ Sarah Withmee and colleagues,² and Robin Stott and colleagues³ have called for safeguarding human health from environmental threats, including climate changes, with the goal of reaching net zero emissions of greenhouse gases in the next decades. We believe that the manifesto proposed by *The Lancet* and its scientific community¹⁻³ for transforming public health into a wide social movement for planetary health, at all levels of the society, cannot be ignored by the academic world.³ The objective is to protect the future of the planet and humans by fostering the application of the Paris Agreement and restricting global temperature rises to below 1.5°C.^{2,3}

To accomplish this goal, urgent actions must be adopted by decision makers, or the last chances to change the future of the world will be lost.³ The Italian Society of Environmental Medicine (SIMA) is responding to the call for action of *The Lancet* and its scientific community¹⁻³ by asking the university rectors who serve in the SIMA scientific committee—and to all the other members of the Conference of Italian University Rectors—for a full commitment in proactively nudging their universities to address the topic of climate change in every course, foster innovation in this field, and involve their academic communities in this effort. By joining the University Rectors for All (U4ALL) initiative promoted by SIMA, rectors ensure that topics highlighted by the *Lancet* Countdown on health and climate change⁴ will inform curricula, postgraduate programmes, and PhD courses at each of the involved universities.⁵ Specific curricula dedicated to social and environmental determinants of health will be activated for medical

students and for students attending biological, biotechnological, chemistry, engineering, and environmental science courses. Studies, publications, and research will be carried out in several disciplines (eg, sustainable architecture, economy, industrial production and agriculture, epidemiology, chemistry, and medicine) to improve the necessary transfer of knowledge from scientists to decision makers. We believe that the academic world should be fully involved in a participatory process aimed at bringing together the entire civil society. Moreover, under the U4ALL initiative, several conferences, seminars, and webinars will be promoted to spread the culture of sustainability. SIMA will regularly organise press conferences with top scientific speakers to involve the public opinion and push decision makers to reach substantial progress towards the fulfilment of the Paris Agreement and the Sustainable Development Goals set by the UN.

AM, AD, and GM are presidents of their affiliations, AFU, EF, FF, VZ, GP, and GM are rectors of their affiliations. RL is rector emeritus. AC is chairholder of UNESCO Chair on health education and sustainable development at Federico II University. PP is European Scientific Coordinator at Euro Mediterranean Scientific Biomedical Institute

Alessandro Miani, *Prisco Piscitelli, Antonio Felice Uricchio, Elio Franzini, Francesco Frati, Renato Lauro, Vincenzo Zara, Gianni Profita, Angelo Deiana, Annamaria Colao, Gaetano Manfredi
priscofreedom@hotmail.com

Italian Society of Environmental Medicine (SIMA), Milan, Italy (AM); Euro Mediterranean Scientific Biomedical Institute, Bruxelles 1040, Belgium (PP); University of Bari Aldo Moro, Bari, Italy (AFU); University of Milan, Milan, Italy (EF); University of Siena, Siena, Italy (FF); Tor Vergata University, Rome, Italy (RL); University of Salento, Lecce, Italy (VZ); UniCamillus International University of Health Sciences, Rome, Italy (GP); Professional Associations Confederation (Confassociazioni), Rome, Italy (AD); UNESCO Chair on Health Education and Sustainable Development, Federico II University, Naples, Italy (AC); Federico II University, Naples, Italy (GM); and Conference of Italian University Rectors (CRUI), Rome, Italy (GM)

1 The Lancet. Net zero by 2050. *Lancet* 2019; 393: 1911.

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Hyaluronan-selected sperm should not be considered an add-on

In HABSelect,¹ David Miller and colleagues compared intracytoplasmic sperm injection (ICSI), the conventional microinjection method to fertilise human oocytes,² with a refinement of this technique called physiological ICSI that is based on the microinjection of sperm selected for their capacity to bind hyaluronan (HA-ICSI).³ Hyaluronan-selected sperm have reduced levels of DNA damage and aneuploidy.³ The use of physiological ICSI has been shown to reduce the proportion of pregnancies that end in miscarriage.⁴ The aim of HABSelect was to investigate the efficacy of physiological ICSI versus standard ICSI for improving livebirth rates among couples undergoing fertility treatment.

The primary endpoint, livebirth rate, was 27.4% in the physiological HA-ICSI group compared with 25.2% in the control group. The proportion of clinical pregnancies was similar in the two groups (35.2% in HA-ICSI and 35.7% in ICSI), but the miscarriage rate was significantly lower in the HA-ICSI group (4.3% vs 7.0%). Indeed, as now confirmed by two large-scale studies^{1,4} and as the authors state, all of the available evidence suggests that hyaluronan-based sperm selection decreases miscarriage rates after ICSI.¹ However, puzzlingly, Miller and colleagues conclude that wider



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