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Procedura valutativa per la copertura di n. 2 posti di Professore Universitario di seconda fascia per il Settore concorsuale 06/G1 – Settore scientifico disciplinare MED/38 presso il Dipartimento Materno Infantile e Scienze Urologiche – Facoltà di Medicina e Odontoiatria

CODICE CONCORSO 2020PAR045

Decreto Rettore Università di Roma “La Sapienza” n 139/2021 del 18.01.2021

[REDACTED]
Curriculum Vitae

Place: Rome

Date: Jan 29th 2021

Part I – General Information

Full Name	[REDACTED]
Date of Birth	[REDACTED]
Place of Birth	[REDACTED]
Citizenship	[REDACTED]
Permanent Address	[REDACTED]
	[REDACTED]
	[REDACTED]
Mobile Phone Number	[REDACTED]
E-mail	paola.papoff@uniroma1.it
Spoken Languages	Italian (mother tongue); English (very good)

Part II – Education

Type	Year	Institution	Notes (Degree, Experience,...)
University graduation	1990	Sapienza University of Rome	Medical School; Degree in Medicine and Surgery
Licensure (Italy)	1991	Sapienza University of Rome	Licensure to practice Medicine and Surgery
Specialty	1994	Sapienza University of Rome	Residency in Pediatrics and Neonatology
Subspecialty	1998	Sapienza University of Rome	Specialization Course in Neonatal Intensive Care
PhD	1999	Sapienza University of Rome	Doctorate degree in Pediatric Sciences
Subspecialty	2000	Sapienza University of Rome	Specialization Course in Pediatric Emergencies

Subspecialty	2003	Sacro Cuore University of Rome	Specialization Course in Neonatal Cerebral Ultrasound
Educational Courses			
	2003	Sapienza University of Rome	Neonatal Advanced Life Support
	2003	Sapienza University of Rome	Pediatric Advanced Life Support
Specialty	2014	Sapienza University of Rome	Residency in Anesthesiology Resuscitation and Intensive Care

Part III – Appointments

IIIA – Academic Appointments

Start	End	Institution	Position
2008	Present	Sapienza University of Rome	Researcher (MED/38)
2017		MIUR	“Abilitazione Scientifica Nazionale” per la seconda fascia, Settore Concorsuale 06/G1, SSD MED/38
2016	present	Sapienza University of Rome	Direttore Master II livello Terapia Intensiva dell’età Pediatrica (0-18 anni)

IIIB – Academic Appointments at International Institutions

Start	End	Institution	Position
1996	1997	University of Florida	Visiting Professor

IIIC – Clinical Appointments at National Institutions

Start	End	Institution	Position
1999	2000	Policlinico Umberto I, Rome	Medical Doctor at Neonatal Emergency Transport Service
2000	2005	Policlinico Umberto I, Rome	Medical Assistant at Neonatal Intensive Care Unit
2005	2016	Policlinico Umberto I, Rome	Coordinator, Pediatric Intensive Care Unit
2016	Present	Policlinico Umberto I, Rome	Supervisor, Pediatric Intensive Care Unit

Part IV – Teaching experience

Year	Institution	Lecture/Course
2010-present	Corso di Laurea Scienze infermieristiche ed ostetriche (Corso di laurea B) Lazio sud (Farmacia e Medicina e Medicina e Odontoiatria) Sapienza University	“PROCESSI ASSISTENZIALI E MODELLI ORGANIZZATIVI IN SCIENZE INFERMIERISTICHE OSTETRICHE E PEDIATRICHE”
2019-present	Infermieristica (abilitante alla professione sanitaria di Infermiere) - Corso di laurea D - Roma Azienda Policlinico Umberto I/Aeronautica Militare Sapienza University	“INFERMIERISTICA PEDIATRICA”
2008 present	Master II livello in Neonatal and Pediatric Intensive Care, Sapienza University of Roma	- Modulo: Assistenza ventilatoria nel bambino con insufficienza respiratoria – Modulo: Sedazione procedurale – Modulo: Trattamento dello shock settico -
2009 present	Master II livello in Pediatric Emergencies, Sapienza University of Roma	- Interpretazione dell'emogasanalisi
2008 present	Residency in Pediatrics, Sapienza University	- Interpretazione dell'emogasanalisi- Valutazione e trattamento dell'insufficienza respiratoria nel bambino

Part V - Society memberships, Awards and Honors

Year	Title
2012	Socio fondatore dell'Accademia Medica e Infermieristica di Emergenza e Terapia Intensiva Pediatrica (AMIETIP)
2012 - 2015	Consigliere dell'Accademia Medica e Infermieristica di Emergenza e Terapia Intensiva Pediatrica (AMIETIP)
2016	Rilascio di Brevetto per Invenzione n. 102016000089365 "Sistema di spirometria neonatale" BI5036R/REPA/trr

Part VI - Funding Information [grants as PI-principal investigator or I-investigator]

Year	Title	Program	Grant value
2019	Principal investigator Validazione di una cappetta per ossigenoterapia come interfaccia per monitorare la funzione respiratoria nei bambini sottoposti ad ossigenoterapia ad	Progetto di Ateneo, Sapienza Università di Roma	3.000 euro

	alti flussi (HFNC)		
2018	Investigator Bacterial/viral interactions in infection and immunity: application of the flow cytometry technology in different clinical settings	Progetto di Ateneo, Sapienza Università di Roma	63.000 euro
2016	Principal Investigator Impostazione dell'HFNC nei bambini con insufficienza respiratoria acuta: un confronto tra il metodo clinico e il metodo fisiologico basato sulla meccanica respiratoria	Progetti di Ateneo, Sapienza Università di Roma	4.000 euro
2014	Principal Investigator Valutazione comparativa della ossigenoterapia ad alto flusso e della ventilazione non invasiva sugli indici del lavoro respiratorio nei bambini con insufficienza respiratoria acuta ricoverati in terapia intensiva pediatrica	Progetti di Ateneo, Sapienza Università di Roma	9.000 euro
2010	Principal Investigator “Effects of obstructive sleep apnea on heart rate variability and sleep quality in infants and children”	Nando Peretti Foundation	50.000 euro

Part VII – Research Activities

Keywords	Brief Description
Neonatal Intensive Care	My research activities started during my residency in Pediatrics, when I attended the Neonatal Intensive Care Unit (NICU) at Sapienza University, under the supervision of Prof. G. Bucci. My first assigned research project was the study of inflammation in the pathogenesis of chronic lung disease (CLD) of prematurity. To this task, I believed it important to implement a bronchoalveolar lavage technique suitable to sample the bronchoalveolar lining fluid of preterm infants at risk for CLD. Hence, in collaboration with two bronchoscopists of the Pediatric Dept., Prof. F. Midulla and Prof. C. Moretti, we realized a blind BAL technique that later allowed us to highlight the role of neutrophils and IL-8 in inducing the lung injury that precedes CLD. The next step of this work was to investigate the
Pathogenesis of Chronic lung disease	
Bronchoalveolar lavage	
Inflammation, cytokines	

Ureaplasma urealyticum	<p>role of maternal pathogens in the pulmonary inflammatory reaction. In collaboration with Prof. L. Pacifico, a researcher expert in pregnancy-related pathogens (i.e., Ureaplasma urealyticum) and their effects on preterm infants, we investigated the role of U. urealyticum in the development of lung inflammation in preterm infants. We demonstrated for the first time that preterm infants in whom prenatal infection causes an intense pulmonary inflammatory reaction are more prone to develop CLD. To extend the topic, during my doctorate, I decided to continue this project at University of Florida, in the NICU directed by Prof. R.D. Christensen, an expert of hematopoietic growth factors, who allowed me to</p>
granulocyte colony-stimulating factors	<p>study granulocyte colony-stimulating factors, G-CSF and GM-CSF, in the lungs of preterm infants. We found that G-CSF and GM-CSF were present in neonatal BAL, and contributed significantly to the accumulation of alveolar neutrophils in preterm infants at risk for CLD. Because ventilation and inflammation seemed to play a key role in the development of CLD, back in Italy and together with my supervisor Prof. C. Moretti, we investigated whether using a new non invasive</p>
Prevention of CLD non invasive ventilation	<p>ventilatory device that triggered respiratory acts synchronous with the infants' breathing (SNIPPV) could mitigate the ventilator lung injury and prevent CLD. We first tested the physiologic effects of this ventilatory technique in preterm infants and then we compared the effects of this technique with those of traditional CPAP. We found that SNIPPV could produce more tidal volume with less effort and could shorten the time of mechanical ventilation by preventing extubation failure.</p>
Treatment of CLD	<p>Subsequently, when I began my studies in anesthesiology and I moved to PICU, my research interests went in new directions. Because our ICU population changed radically, I abandoned the studies on preterm infants and I found my interest in the former premature infants who had already CLD and were still dependent on the ventilator. My main interest was to find a way to wean them from the ventilator. Together with Prof. Cozzi, a pediatric surgeon expert in the neonatal field, we demonstrated that early performed tracheostomy in difficult to wean infants could be beneficial to maintain blood gases and avoid prolonged intubation.</p>
Hypothermia and neonatal asphyxia	<p>In PICU, we also assisted asphyxiated neonates who underwent hypothermia therapy for prevention of neurological adverse outcome. I was interested in early markers that could predict the long-term outcome. Together with a pediatric neurologist at our Dept., Prof. A. Spalice, and the pediatric radiologists we found that early MRI and EEG could predict the developmental outcome; in fact, a depressed EEG activity during the first 72 h of life and a diffused alteration of basal ganglia at MRI were correlated with a poor neurodevelopmental outcome at 18 months of follow-up, whereas normal MRI in early post-cooling phases was strongly associated with a favorable developmental outcome.</p>
Treatment of respiratory distress in Pierre Robin sequence	<p>A considerable population of surgical neonates admitted to our PICU had Pierre Robin sequence with severe respiratory distress. Together with Prof. Cozzi and Prof. Cascone, a maxillo-facial surgeon, we developed a clinical protocol to relieve respiratory distress in Pierre Robin patients based on mandibular distraction osteogenesis (MDO) and compared the effects of this technique with the classical surgical approach of tongue-lip adhesion (TLA). We found that MDO was superior to TLA in improving breathing activity and weight gain, even though MDO presented more adverse effects concerning mandible growth. Using</p>

Part VIII – Summary of Scientific Achievements

Product type	Number	Data Base	Start	End
Papers in International Peer-Reviewed Journals	85	SCOPUS / PUBMED	1995	2020
Papers in national Peer-Reviewed Journals	10	SCOPUS	1997	2013
Chapters in Italian Scientific Books	4	ISBN	2002	2012
Chapters in International Scientific Books	8	ISBN	2000	2018
Chapters in Teaching Books	2	ISBN/ISSN	2013	2020

Total Impact factor	278.249 (ISI Web of Knowledge)
Impact factor (last 5 years)	89.427 (ISI Web of Knowledge)
Mean Impact factor per publication	3.274 (ISI Web of Knowledge)
Total Citations	1369 (SCOPUS)
Average Citations per Product	16.106 (SCOPUS)
Total Hirsch (H) index	22 (SCOPUS)
Normalized H index	16 (SCOPUS)
Normalized H index*	0.73 (SCOPUS)
Last 5-year Hirsch (H) index	9 (SCOPUS)
Last 10-year Hirsch (H) index	19 (SCOPUS)
Total indexed published papers in the last 5 years	26
First author position	18 times
Last author position	7 times
Corresponding author	26 times

*H index divided by the academic seniority.

Part IX– Selected Publications

List of the publications selected for the evaluation. For each publication report title, authors, reference data,

journal IF (if applicable), citations, press/media release (if any).

1) A 12-Week Maintenance Therapy with a New Prepared Viscous Budesonide in Pediatric Eosinophilic Esophagitis.

Oliva S, Rossetti D, **Papoff P**, Tiberti A, Mallardo S, Volpe D, Ruggiero C, Russo G, Vezzoli D, Isoldi S, Cucchiara S.

Dig Dis Sci. **2019** Jun;64(6):1571-1578. doi: 10.1007/s10620-018-5449-x.

IF 2.792 Citations 3

2) A flow-leak correction algorithm for pneumotachographic work-of-breathing measurement during high-flow nasal cannula oxygen therapy.

Montecchia F, Midulla F, **Papoff P**.

Med Eng Phys. **2018** Apr;54:32-43. doi: 10.1016/j.medengphy.2018.02.004. PMID: 29487038

IF 2.107 Citations 1

3) Intentional tracheoesophageal fistula cannulation for gastric decompression in type C esophageal atresia. **Papoff P**, Cicchetti R, Montecchia F, Midulla F, Ceccanti S, Cozzi D.

Paediatr Anaesth. **2018** Apr;28(4):367-369. doi: 10.1111/pan.13351. PMID: 29484765

IF 2.358 Citations 1

4) Synchronized Nasal Intermittent Positive Pressure Ventilation of the Newborn: Technical Issues and Clinical Results.

Moretti C, Gizzi C, Montecchia F, Barbàra CS, Midulla F, Sanchez-Luna M, **Papoff P**.

Neonatology. **2016**;109(4):359-65. doi: 10.1159/000444898. PMID: 27251453

IF 2.798 Citations 10

5) Recurrent wheezing 36 months after bronchiolitis is associated with rhinovirus infections and blood eosinophilia.

Midulla F, Nicolai A, Ferrara M, Gentile F, Pierangeli A, Bonci E, Scagnolari C, Moretti C, Antonelli G, **Papoff P**.

Acta Paediatr. **2014** Oct;103(10):1094-9. doi: 10.1111/apa.12720 PMID: 24948158

IF 2.439 Citations 28

6) Fast and early mandibular osteodistraction (FEMOD) in severe Pierre Robin Sequence.

Cascone P, Papoff P, Arangio P, Vellone V, Calafati V, Silvestri A.

J Craniomaxillofac Surg. **2014** Oct;42(7):1364-70. doi: 10.1016/j.jcms.2014.03.027. PMID: 24787079

IF 2.169 Citations 14

7) Outcomes after tongue-lip adhesion or mandibular distraction osteogenesis in infants with Pierre Robin sequence and severe airway obstruction.

Papoff P, Guelfi G, Cicchetti R, Caresta E, Cozzi DA, Moretti C, Midulla F, Miano S, Cerasaro C, Cascone P.

Int J Oral Maxillofac Surg. **2013** Nov;42(11):1418-23. doi: 10.1016/j.ijom.2013.07.747. PMID: 23978696

IF 2.392 Citations 35

8) Detection of respiratory viruses in the 2009 winter season in Rome: 2009 influenza A (H1N1) complications in children and concomitant type 1 diabetes onset.

Nenna R, **Papoff P**, Moretti C, Pierangeli A, Sabatino G, Costantino F, Soscia F, Cangiano G, Ferro V, Mennini M, Salvadei S, Scagnolari C, Antonelli G, Midulla F.

Int J Immunopathol Pharmacol. **2011** Jul-Sep;24(3):651-9. doi: 10.1177/039463201102400311. PMID: 21978697

IF 2.385 Citations 27

9) Incidence and predisposing factors for severe disease in previously healthy term infants experiencing their first episode of bronchiolitis.

Papoff P, Moretti C, Cangiano G, Bonci E, Roggini M, Pierangeli A, Scagnolari C, Antonelli G, Midulla F.

Acta Paediatr. **2011** Jul;100(7):e17-23. doi: 10.1111/j.1651-2227.2011.02181.x. PMID: 21284715

IF 2.439 Citations 36

10) The role of terlipressin in pediatric septic shock: a review of the literature and personal experience.

Papoff P, Mancuso M, Barbara CS, Moretti C.

Int J Immunopathol Pharmacol. **2007** Apr-Jun;20(2):213-21. doi: 10.1177/039463200702000201. PMID: 17624234

IF 2.385 Citations 19

11) Infection, neutrophils, and hematopoietic growth factors in the pathogenesis of neonatal chronic lung disease.

Papoff P.

Clin Perinatol. **2000** Sep;27(3):717-31, viii. doi: 10.1016/s0095-5108(05)70047-6. PMID: 10986637

IF 3.555 Citations 11

12) Comparing the effects of nasal synchronized intermittent positive pressure ventilation (nSIPPV) and nasal continuous positive airway pressure (nCPAP) after extubation in very low birth weight infants.

Moretti C, Gizzi C, **Papoff P**, Lampariello S, Capoferri M, Calcagnini G, Bucci G.

Early Hum Dev. **1999** Dec;56(2-3):167-77. doi: 10.1016/s0378-3782(99)00046-8. PMID: 10636595

IF 2.464 Citations 105

Roma, January 30, 2021

