COVID-19 Critical Intelligence Unit

Daily evidence digest

7 April 2020

The daily evidence digest collates recently released reports and evidence – provision of these links does not imply endorsement nor recommendation.

ACE-I/ARB continued use, CVD advice, burns, diabetes

Four journals feature articles on continuing use of ACE-inhibitors and angiotensin receptor blockers (ARBs) for COVID-19, JAMA cardiology <u>click here</u>, BMJ <u>click here</u>, NEJM <u>click here</u>, New Zealand Medical Journal <u>click here</u>

Also on cardiovascular disease:

- the MJA features advice from a group of experts on heightened risks for CVD patients, and recommended responses to the COVID-19 outbreak - such as adopting a high threshold for acute cardiology admissions and cardiac procedures, rapid discharges, and cardiologist- led telehealth <u>click here</u>
- Researchers in Toronto describe the development of a 'protected code stroke' algorithm which includes pre-notification and pre-code screening for COVID-19 infection <u>here</u>, (and Figure 1)

Other guidance just released:

- Consensus guidelines for prevention and management of COVID-19 for neurologists click here
- Burns ward management strategies <u>here</u> and <u>here</u>
- An updated framework for telemedicine in the COVID-19 pandemic click here
- Strategies to optimise the provision of mechanical ventilation in the US including the use of anaesthesia machine ventilators to meet the anticipated high demands <u>click here</u>
- Advice on care of the deceased with suspected or confirmed COVID-19, from Public Health England <u>here</u>
- A guide from the Australian Diabetes Society on the management of diabetes during COVID-19 <u>click here</u> and advice on gestational diabetes testing <u>click here</u>
- A dialysis preparedness checklist from the Australia and New Zealand Society of Nephrology click here
- Royal College of General Practitioners (RCGP in the UK) advice on workload prioritisation during COVID-19 <u>click here</u>

PPE continues to be an important topic and the BMJ has released a useful visual summary <u>click here</u>, there is also an article on electronic PPE <u>here</u>, and guidance from Public Health England <u>here</u>.

The CDC has released recommendations to wear cloth face covering in public settings where social distance measures are difficult to maintain, especially in areas of significant community-based transmission <u>click here</u>, and a report from the Emergency Care Research Institute (ECRI) recommends extended use of N95 masks, rather than reuse <u>click here</u>

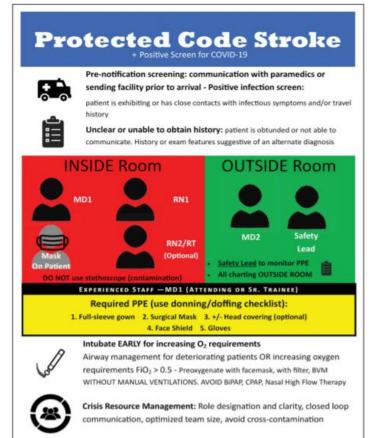
NICE released four new COVID-19 rapid guidelines over the weekend:



- Two were community based guidelines for managing COVID-19 symptoms for patients in the community – one for end of life care <u>click here</u>, and one for pneumonia care planning, assessment and management <u>click here</u>
- The other two provide more specific guidance on rheumatological autoimmune, inflammatory and metabolic bone disorders <u>click here</u> and severe asthma <u>click here</u>

The Australian National COVID-19 Clinical Evidence Taskforce has developed a living guidelines repository <u>click here</u> (CIU will track pertinent information and outputs in the repository)

Figure1: Hyperacute stroke management during the COVID-19 pandemic



Twitter

The key twitter activity over the weekend:

- 1. Remote assessment tool in primary care available in 11 languages <u>https://tinyurl.com/w8bz5jy</u> @trishgreenhalgh
- Organising health workforce and ongoing support- weekly webinar by NHS England and Improvement <u>https://tinyurl.com/tblrq84</u> @helenbevan
- 3. Learnings across the country from large metro, regional and rural health services as they outline how they have prepared for the COVID-19 peak <u>https://tinyurl.com/vfsjd6e</u> @MJA_Editor
- A global public health effort to track health outcomes of intubations among anaethesists and others caring for COVID-19 patients <u>https://tinyurl.com/vj6m3dw</u> @IntubateCovid
- Building on the new evidence that ~25% or more of COVID-19 infections are in asymptomatic carriers who shed surgical facemasks could prevent transmission of human coronaviruses from symptomatic individuals, mounting discussion on the length and use in asymptomatic patients <u>https://tinyurl.com/t2aeeyo</u> @EricTopol @PaulGlasziou and others



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