COVID-19 Critical Intelligence Unit

Daily evidence digest

16 April 2020

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

Emerging from lockdown, testing, treatments, and nosocomial infection

The use of random testing has been proposed by researchers in Switzerland as a way to guide a safe exit from COVID-19 lockdown <u>here</u>

A paper in the NEJM describes a population screening study in Iceland that estimated incidence and spread <u>here</u>

Two articles focus on nosocomial infection from China:

- a case study describes the application and impact of a fever screening system in a designated COVID-19 hospital <u>here</u>
- descriptive data based on 918 cases from a single centre in Wuhan here.

Also from China, a study based on 315 patients found single RT-PCR tests have a relatively high false negative rate and additional diagnostic criteria and tools are required <u>here</u>

Two publications focus on health service responses:

- the urgent response strategy at one tertiary hospital in China here
- a comparison of approaches and early outcomes in two Italian regions here

The Centre for Evidence-Based Medicine (CEBM) released rapid reviews about:

- practical tips for clinicians helping patients with COVID-related anxiety and distress here
- containing pandemic spread in care homes <u>here</u>
- imaging and biomarkers within the current testing strategy for the diagnosis here
- potential treatments, including hydroxychloroquine <u>here</u>, N-acetylcysteine <u>here</u>, lopinavir/ritonavir <u>here</u>; as well as a protocol to assess in a systematic review, the benefits and harms of chloroquine or hydroxychloroquine for COVID-19.

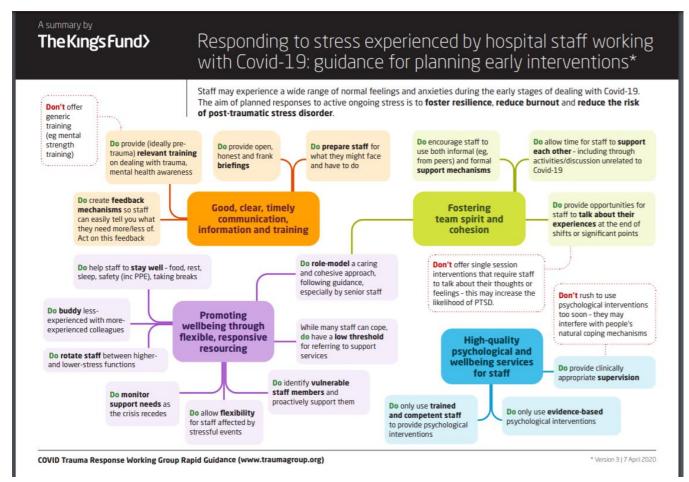
The National Institutes of Health in the US announced a study that will collect and analyse blood samples from up to 10,000 volunteers to provide critical data for epidemiological models <u>here</u>

The British Columbia Centre for Disease Control released guidance on public health management of cases and contacts associated with COVID19 in the community <u>here.</u>

NHS Scotland released updated guidance for primary care which includes general medical practice, dentistry, optometry and pharmacy <u>here.</u>



Figure 1: Infographic from The King's Fund



Twitter

There has been increased Twitter activity on strengthening health system responses to COVID-19 and including the needs of staff on the frontline.

- @bmj_latest featured how UK clinicians are reconfiguring their hospital operations and wards to manage surge <u>here</u>
- @ISQua released a webinar recording on safety culture for coping with an emergency situation including human factors <u>here</u>
- @WHO launched new tools to assist health planners on activating surge capacity here
- @TheKingsFund released an infographic illustrating early interventions in responding to stress for hospital staff (Figure 1) <u>here</u>



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