

## Daily evidence digest

4 June 2021

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

### Co-infections and secondary infections, COVID-19 transmission in group living environments, an osteo-metabolic phenotype of COVID-19

#### Peer reviewed journals featured:

- Observational studies on:
  - Co-infections, secondary infections, and antimicrobial use in hospitalised patients during the first pandemic wave in England [here](#)
  - COVID-19 transmission in group living environments and households in Japan [here](#)
  - Perspectives from general practice registrars and supervisors regarding immunising older Australians [here](#)
  - Association between D-dimer level and chest CT severity score in SARS-CoV-2 pneumonia patients [here](#)
- Modelling studies on:
  - Infection kinetics of COVID-19 [here](#)
  - Predicting disease progression in COVID-19 patients based on CT radiomics [here](#)
- Commentary on
  - a US regional health system's experience with COVID-19 vaccine distribution [here](#)
  - An osteo-metabolic phenotype of COVID-19 [here](#)

#### Letters and correspondence discussed:

- Association of previous COVID-19 infection with adverse events following Pfizer vaccination [here](#)
- Low titres of SARS-CoV-2 neutralising antibodies after first vaccination dose in cancer patients receiving checkpoint inhibitors [here](#)

#### Pre-peer articles featured:

- The impact of three progressively introduced interventions during the second COVID-19 wave in Melbourne [here](#)

#### Guidance and reports

- The World Health Organization published a monitoring and evaluation framework for COVID-19 [here](#)

## News and blogs

- PPE guidance in the UK is upgraded as evidence of airborne transmission grows [here](#)

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### Living Evidence Tables

Living Evidence tables are up-to-date summaries of emerging evidence. Tables are available on [COVID-19 transmission](#), SARS-CoV-2 [vaccines](#), and [variants](#) of concern.