COVID-19 weekly update

4th June 2021

clinical management

**Title:** Laboratory trends, hyperinflammation, and clinical outcomes for patients with a systemic rheumatic disease admitted to hospital for COVID-19: a retrospective, comparative cohort study

The Lancet Rheumatology | 28th May 2021

COVID-19 can induce a hyperinflammatory state, which might lead to poor clinical outcomes. This paper aimed to assess whether patients with a systemic rheumatic disease might be at increased risk for hyperinflammation and respiratory failure from COVID-19.

Patients with a systemic rheumatic disease who were admitted to hospital for COVID-19 had increased risk for hyperinflammation, kidney injury, admission to intensive care, and mechanical ventilation compared with matched comparators. However, among patients who survived, post-discharge outcomes were not significantly different. The cHIS identified patients with hyperinflammation, which was strongly associated with poor COVID-19 outcomes in both patients with a rheumatic disease and comparators. Clinicians should be aware that patients with systemic rheumatic diseases and COVID-19 could be susceptible to hyperinflammation and poor hospital outcomes.

Full document: [Laboratory trends, hyperinflammation, and clinical outcomes for patients with a systemic rheumatic disease admitted to hospital for COVID-19: a retrospective, comparative cohort study](https://www.thelancet.com/action/showPdf?pii=S2665-9913%2821%2900140-5)

**Title:** Management of patients presenting to the Emergency Department/ Acute Medicine with symptoms 5-42 days post Astra Zeneca vaccine

Royal College of Physicians | Royal College of Emergency Medicine | Society for Acute Medicine | updated 24th May 2021

The condition of concern is Covid-19 Vaccine-induced Immune Thrombosis and Thrombocytopenia (VITT). VITT is a rare disorder occurring after COVID-19 vaccination that leads to blood clots in multiple organ sites. If left untreated, the risk of death is over 50%.

Cases usually present with progressive thrombosis, with a high preponderance of cerebral venous sinus thrombosis. Splanchnic vein thrombosis is common and pulmonary embolism and arterial ischaemia are also seen. Bleeding can be significant and unexpected. Symptoms of concern are:

• Persistent or severe headaches, seizures or focal neurology

 • Shortness of breath, persistent chest or abdominal pain

 • Swelling, redness, pallor or cold lower limbs

Full detail: [Management of patients presenting to the Emergency Department/ Acute Medicine with symptoms 5-42 days post Astra Zeneca vaccine](https://www.rcem.ac.uk/docs/Policy/Vaccine%20pathway%20concerns%20-%20RCEM.SAM.RCP%20guidance.pdf)

**Title:** Insufficient data on use of inhaled corticosteroids to treat COVID-19

European Medicines Agency | 27th May 2021

EMA’s COVID-19 taskforce (COVID-ETF) is advising healthcare professionals that there is currently insufficient evidence that inhaled corticosteroids are beneficial for people with COVID-19.

Although the taskforce found no safety risks from studies so far, it could not exclude the possibility of harm from the use of inhaled corticosteroids in patients with COVID-19 who have normal levels of oxygen.

The advice follows a review of current evidence amid growing interest in inhaled corticosteroids (e.g. budesonide, ciclesonide) for treating outpatients with COVID-19.

Inhaled corticosteroids are generally used for treating inflammatory conditions in the lung, such as asthma and chronic obstructive pulmonary disease (COPD). More evidence from clinical trials is necessary to establish the benefits of inhaled corticosteroids in people with COVID-19.

Current evidence from clinical trials does support the use of dexamethasone, a systemic corticosteroid, in patients with COVID-19.

Full detail: [Insufficient data on use of inhaled corticosteroids to treat COVID-19](https://www.ema.europa.eu/en/news/insufficient-data-use-inhaled-corticosteroids-treat-covid-19)

**Title:** Thrombotic Thrombocytopenia after ChAdOx1 nCov-19 Vaccination

New England Journal of Medicine | 3rd June 2021

Several cases of unusual thrombotic events and thrombocytopenia have developed after vaccination with the recombinant adenoviral vector encoding the spike protein antigen of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (ChAdOx1 nCov-19, AstraZeneca). More data were needed on the pathogenesis of this unusual clotting disorder.

This study assessed the clinical and laboratory features of 11 patients in Germany and Austria in whom thrombosis or thrombocytopenia had developed after vaccination with ChAdOx1 nCov-19.

The authors conclude that vaccination with ChAdOx1 nCov-19 can result in the rare development of immune thrombotic thrombocytopenia mediated by platelet-activating antibodies against PF4, which clinically mimics autoimmune heparin-induced thrombocytopenia.

Full paper: [Thrombotic Thrombocytopenia after ChAdOx1 nCov-19 vaccination](https://www.nejm.org/doi/full/10.1056/NEJMoa2104840)

**Title:** Thrombosis and Thrombocytopenia after ChAdOx1 nCoV-19 Vaccination

New England Journal of Medicine | 3rd June 2021

This brief report publishes the findings in five patients who presented with venous thrombosis and thrombocytopenia 7 to 10 days after receiving the first dose of the ChAdOx1 nCoV-19 adenoviral vector vaccine against coronavirus disease 2019 (Covid-19). The patients were health care workers who were 32 to 54 years of age. All the patients had high levels of antibodies to platelet factor 4–polyanion complexes; however, they had had no previous exposure to heparin.

Because the five cases occurred in a population of more than 130,000 vaccinated persons, the authors propose that they represent a rare vaccine-related variant of spontaneous heparin-induced thrombocytopenia that we refer to as vaccine-induced immune thrombotic thrombocytopenia.

Full paper: [Thrombosis and Thrombocytopenia after ChAdOx1 nCoV-19 Vaccination](https://www.nejm.org/doi/full/10.1056/NEJMoa2104882)

**Title:** Co-infections, secondary infections, and antimicrobial use in patients hospitalised with COVID-19 during the first pandemic wave from the ISARIC WHO CCP-UK study: a multicentre, prospective cohort study

The Lancet Microbe | 2nd June 2021

Microbiological characterisation of co-infections and secondary infections in patients with COVID-19 is lacking, and antimicrobial use is high. This paper aimed to describe microbiologically confirmed co-infections and secondary infections, and antimicrobial use, in patients admitted to hospital with COVID-19.

The authors found that in patients admitted to hospital with COVID-19, microbiologically confirmed bacterial infections are rare, and more likely to be secondary infections. Gram-negative organisms and *S aureus* are the predominant pathogens. The frequency and nature of antimicrobial use are concerning, but tractable targets for stewardship interventions exist.

Full paper: [Co-infections, secondary infections, and antimicrobial use in patients hospitalised with COVID-19 during the first pandemic wave from the ISARIC WHO CCP-UK study: a multicentre, prospective cohort study](https://www.thelancet.com/action/showPdf?pii=S2666-5247%2821%2900090-2)

See also: [Antimicrobial use was high during first wave despite bacterial co-infections being rare, study finds](https://www.bmj.com/content/373/bmj.n1427) | BMJ

**Title:** COVID-19 pathophysiology: looking beyond acute disease

The Lancet Respiratory Medicine | June 2021

Severe disease caused by SARS-CoV-2 has clinical and pathophysiological features unlike those of respiratory failure due to other causes, and acute disease remains a priority for research as COVID-19-associated morbidity and mortality continue to pose a huge burden globally.

However, as this editorial discusses, long-term investment and support are now needed for national research studies and international collaborative efforts to unravel the complex pathophysiology of post-acute symptoms, which will inform clinical trials of therapeutic interventions and multidisciplinary pathways of care for the growing number of people in recovery after SARS-CoV-2 infection.

Full detail: [COVID-19 pathophysiology: looking beyond acute disease](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600%2821%2900242-3/fulltext#coronavirus-linkback-header)

**Title:** Repurposing drugs for treatment of COVID-19

The Lancet Respiratory Medicine | 3rd June 2021

Although the COVID-19 vaccine programme continues to be rolled out globally, there is still a need to identify effective treatments, particularly in countries where vaccine uptake is slow, and with the insidious threat of mutations resulting in vaccine escape. With the urgency of the pandemic making the timely discovery of new drugs almost impossible, the idea of repurposing existing drugs to treat COVID-19 is an attractive strategy, especially if they are already approved (for other indications) and have well established safety profiles, as this article discusses.

Full detail: [Repurposing drugs for treatment of COVID-19](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600%2821%2900270-8/fulltext)

**Title:** Care pathway and prioritization of rapid testing for COVID-19 in UK hospitals: a qualitative evaluation

BMC Health Services Research | 31st May 2021

This study sought to understand the care pathways in place in UK NHS hospitals during the first wave (March–July 2020) for identification of patients with COVID-19 and to learn lessons to inform optimal testing strategies.

The study concludes that during the winter months, priority for provision of rapid testing at admission should be given to hospitals with limited access to laboratory services and single room availability. Access to rapid testing is essential for urgent decisions related to emergency surgery, maternity services and organ transplant. The pathway and prioritization of need will inform the economic modelling, clinical evaluations, and implementation of new clinical tests in UK.

Full paper: [Care pathway and prioritization of rapid testing for COVID-19 in UK hospitals: a qualitative evaluation](https://bmchealthservres.biomedcentral.com/track/pdf/10.1186/s12913-021-06460-x.pdf)

**Title:** Effect of Bamlanivimab vs Placebo on Incidence of COVID-19 Among Residents and Staff of Skilled Nursing and Assisted Living Facilities

JAMA | 3rd June 2021

Preventive interventions are needed to protect residents and staff of skilled nursing and assisted living facilities from COVID-19 during outbreaks in their facilities. Bamlanivimab, a neutralizing monoclonal antibody against SARS-CoV-2, may confer rapid protection from SARS-CoV-2 infection and COVID-19.

The objective of this randomized, double-blind, single-dose, phase 3 trial was to determine the effect of bamlanivimab on the incidence of COVID-19 among residents and staff of skilled nursing and assisted living facilities.

The incidence of COVID-19 infection among those treated with bamlanivimab vs placebo was 8.5% vs 15.2%, respectively, a difference that was statistically significant.

The authors conclude thatBamlanivimab monotherapy compared with placebo reduced the risk of COVID-19 in residents and staff of skilled nursing and assisted living facilities.

Full detail: [Effect of Bamlanivimab vs placebo on incidence of Covid-19 among residents and staff of skilled nursing and assisted living facilities](https://jamanetwork.com/journals/jama/fullarticle/2780870)

Related editorial: [Bamlanivimab for Prevention of COVID-19](https://jamanetwork.com/journals/jama/fullarticle/2780873)

recovery

**Title:** Is it safe to lift all restrictions in England from 21 June?

BMJ | 2021; 373: n1399 | 1st June 2021

England is set to remove all legal limits on social contact from 21 June and allow nightclubs to reopen, although masks may still be required in some public spaces and the test and trace system will continue.

However, the emergence of the B.1.617.2 variant, first detected in India, has led to concerns that further easing may need to be delayed. As cases of this variant spread across the country, this article looks at what we know, and asks:

* On what basis will the government decide to lift restrictions?
* What do the data on cases and admissions show?
* What do the latest mortality data show?
* Is surge testing making any difference?
* What about surge vaccinations?
* How effective are the vaccines against the B.1.617.2 variant?
* What do the data on schools show?
* So, should the final stage of restriction easing go ahead on 21 June?

Full detail: [Is it safe to lift all restrictions in England from 21 June?](https://www.bmj.com/content/373/bmj.n1399)

**Title:** Weathering the storm? The pandemic’s impact on young people’s wellbeing

The Health Foundation | 27th May 2021

As the immediate danger of the virus to older people thankfully diminishes, focus is shifting to groups who have had their health suffer in a different way. This article looks how the pandemic has affected young people’s mental health, and what society can do to help.

Full detail: [Weathering the storm? The pandemic’s impact on young people’s wellbeing](https://www.health.org.uk/news-and-comment/blogs/weathering-the-storm-the-pandemics-impact-on-young-peoples-wellbeing?utm_campaign=12409985_May%202021%20newsletter&utm_medium=email&utm_source=The%20Health%20Foundation&dm_i=4Y2,7DZLT,6ZKZT4,TZUUT,1)

**Title:** Mitigating the impacts of COVID-19: where are the mental health trials?

The Lancet Psychiatry | 1st June 2021

COVID-19 will have continuing and long-term effects on mental health, and many unknowns remain. For some problems, the scaling up of existing treatments is a sufficient response. However, many problems will be new and will exacerbate pre-existing health inequalities; these will require new evidence-informed solutions. Some of the impacts of COVID-19 will be on sections of the population for whom innovative (and unevaluated) methods of delivery (such as eHealth) are needed in non-mental health settings, such as schools.

Other impacts are on the NHS workforce, for whom the problems of workplace stress and moral injury require scalable interventions and decisions about when, how, and whether to intervene. Some new problems, such as long COVID, will require increased integration of psychosocial models of care with physical health services.

This comment piece suggests that when evidence is not available to inform mental health practice and policy, then trials should be rapidly designed and delivered at scale to determine which treatment approaches work and discard those that are ineffective. Trials have been fundamental to the global pandemic response, but mental health has not been part of this success story. In short, the mental health research community has been successful at describing the nature of the impact of COVID-19, but less successful at generating solutions and providing clinical trial data to establish what works in mitigating the impacts.

Full detail: [Mitigating the impacts of COVID-19: where are the mental health trials?](https://www.thelancet.com/action/showPdf?pii=S2215-0366%2821%2900204-2)

**Title:** UK Government urged to recognise post-COVID-19 cancer backlog

The Lancet Oncology | 3rd June 2021

The UK Government and NHS leadership is failing to accept the scale and urgency of the crisis facing cancer services as they recover from the impact of the COVID-19 pandemic, a parliamentary report has warned.

After receiving consultation responses from more than 30 cancer organisations and professionals, the All-Party Parliamentary Groups (APPGs) for Radiotherapy and Health published a series of recommendations, including appointing a minister to lead a radical national recovery plan supported by an independent expert advisory group.

The report points to “considerable frustration” in the cancer community that more was not being done to prevent thousands of patients dying and presenting with advanced-stage cancers.

Further detail: UK Government urged to recognise post-COVID-19 cancer backlog

Related report: [Catch Up With Cancer - The Way Forward](https://e8604b0e-5c16-4637-907f-3091e4443249.filesusr.com/ugd/b68571_a18ace5b95fa4c3fa3027456b5928faf.pdf)

Infection control

**Title:** The potential impact of vaccine passports on inclination to accept
COVID-19 vaccinations in the United Kingdom: evidence from a large cross-sectional survey and modelling study

medRxiv | 1st June 2021

The UK Government is considering the introduction of vaccine passports for domestic use and to facilitate international travel for UK residents. Although vaccine incentivisation has been cited as a motivating factor for vaccine passports, it is currently unclear whether vaccine passports are likely to increase inclination to accept a COVID-19 vaccine.

The first study to assess the impact of vaccine passports on vaccination inclination in the UK has been published as a pre-print. .The researchers behind this study surveyed 17 000 members of the UK public to explore attitudes to vaccine passports for domestic and international use.

* The authors find that the introduction of passports for either domestic or international use has a net negative impact on vaccination inclination
* Younger age groups, Black and Black British ethnicities compared to Whites), and non-English speakers are more likely to express a lower inclination to vaccinate if passports were introduced
* Vaccination passports may not only yield damaging health outcomes for already marginalised communities: this may lead to further distrust in the government and public health systems and may have negative downstream consequences for other health-seeking behaviours, for example, routine immunisations

Caution should therefore be exercised in introducing passports as they may result in less positive health-seeking behaviours for the COVID-19 vaccine (as well as other existing or future vaccinations) and may contribute to concentrated areas of low vaccinate uptake, which is an epidemic risk

*This article is a preprint and has not been certified by peer review. It reports new medical research that has yet to be evaluated and so should not be used to guide clinical practice.*

Full paper: [The potential impact of vaccine passports on inclination to accept COVID-19 vaccinations in the United Kingdom: evidence from a large cross-sectional survey and modelling study](https://www.medrxiv.org/content/10.1101/2021.05.31.21258122v1.full.pdf)

**Title:** The potential for vaccination-induced herd immunity against the SARS-CoV-2 B.1.1.7 variant

Eurosurveillance | Volume 26, Issue 20, 20 | May 2021

Initial reports of vaccine effectiveness against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the virus responsible for coronavirus disease (COVID-19), have suggested a substantial reduction of the risk of infection . Nevertheless, with the emergence of more transmissible variants such as B.1.1.7, how large-scale immunisation programmes against SARS-CoV-2 will perform is currently unclear.

This study assesses the potential of COVID-19 vaccination to generate herd immunity and takes into account vaccine effectiveness, naturally-acquired immunity and achievable vaccination coverage (depending on the population age structure), as well as two transmissibility scenarios ((i) with pre-B.1.1.7, and (ii) with exclusively B.1.1.7 variants).

Full detail: [The potential for vaccination-induced herd immunity against the SARS-CoV-2 B.1.1.7 variant](https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2021.26.20.2100428?crawler=true)

**Title:** Restoring Vaccine Diplomacy

JAMA | 28th May 2021

This Viewpoint discusses the importance of equitable international collaboration, innovative manufacturing and supply chain development, and shared governance to provide the billions of COVID-19 vaccine doses to the world’s low-income and low-resource populations that will be necessary to control the coronavirus pandemic.

Full detail: [Restoring vaccine diplomacy](https://jamanetwork.com/journals/jama/fullarticle/2780640)

**Title:** Life-saving vaccination programme to hit more major milestones as new vaccine added to armoury

Department of Health and Social Care | 29th May 2021

The outstanding success of the UK’s rollout of life-saving vaccines in its fight against COVID-19 continues to take significant strides with another new jab authorised and major milestones expected to be hit next week.

On Thursday, G7 Health Ministers will gather ahead of the leader’s summit where the Health Secretary will praise the fantastic efforts of the NHS, volunteers and scientists over the last year in developing and rolling out the vaccine programme at pace.

Next week, it is expected that three quarters of adults will have received their first dose and almost half of all adults will have had their second dose of a vaccine. The UK remains on track to offer the vaccine to all adults by the end of July.

Full detail: [Life-saving vaccination programme to hit more major milestones as new vaccine added to armoury](https://www.gov.uk/government/news/life-saving-vaccination-programme-to-hit-more-major-milestones-as-new-vaccine-added-to-armoury)

**Title:** The Beautiful Game: keeping spectators, players and communities safe

World Health Organization Europe | 28th May 2021

With the summer season approaching, excitement is building among people to once again attend major sporting events, such as tennis tournaments, football matches, horse races and cycling competitions. Declining trends in reported cases and deaths due to COVID-19 in some countries of the WHO European Region are encouraging governments and sports organizers to restart events that bring together large numbers of people.

However, there is no zero risk of infection. Last year’s experience showed us that reopening societies too early and rapidly can result in the resurgence of cases that will also create new socioeconomic problems. WHO’s recently released considerations for countries in the European Region will help them to take decisions with a risk-based approach about if, when and how to allow travel and gatherings of people.

Full detail: [The Beautiful Game: keeping spectators, players and communities safe](https://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-covid-19/news/news/2021/5/the-beautiful-game-keeping-spectators%2C-players-and-communities-safe)

Related publication: [Sporting events during the COVID-19 pandemic. Considerations for public health authorities](https://www.euro.who.int/__data/assets/pdf_file/0005/502853/sporting-event-considerations-COVID-19.pdf)

**Title:** A New Commitment for Vaccine Equity and Defeating the Pandemic

World Health Organization | 31st May 2021

This article explains why the World Health Organization are calling for a new level of international support for – and implementation of – a stepped up coordinated strategy, backed by new financing, to vaccinate the world.

It explains that increasingly, a two-track pandemic is developing, with richer countries having access and poorer ones being left behind. Inequitable vaccine distribution is not only leaving untold millions of people vulnerable to the virus. It is also allowing deadly variants to emerge and ricochet back across the world.

As variants continue to spread, even countries with advanced vaccination programs have been forced to reimpose stricter public health measures, and some have implemented travel restrictions. In turn, the ongoing pandemic is leading to deepening divergence in economic fortunes, with negative consequences for all.

A [recent proposal from International Monetary Fund (IMF) staff](https://www.imf.org/en/Publications/Staff-Discussion-Notes/Issues/2021/05/19/A-Proposal-to-End-the-COVID-19-Pandemic-460263) puts forward a plan with clear targets, pragmatic actions, and at a feasible cost. At an estimated $50 billion, it will bring the pandemic to an end faster in the developing world, reduce infections and loss of lives, accelerate the economic recovery, and generate some $9 trillion in additional global output by 2025.

Full detail: [A new commitment for vaccine equity and defeating the pandemic](https://www.who.int/news-room/commentaries/detail/a-new-commitment-for-vaccine-equity-and-defeating-the-pandemic)

**Title:** Information and guidance specific to COVID-19 Vaccine Janssen

Specialist Pharmacy Service | May 2021

Resources covering pharmaceutical aspects of the vaccination programme specific to COVID-19 Vaccine Janssen

[Janssen Vaccine: Handling in PCNs](https://www.sps.nhs.uk/home/covid-19-vaccines/information-and-guidance-specific-to-covid-19-vaccine-janssen/janssen-vaccine-handling-in-pcns/)

Resources covering Janssen pharmaceutical processes in PCNs, from initial ordering through to administration

[Janssen Vaccine: Handling in Trusts and Vaccination Centres](https://www.sps.nhs.uk/home/covid-19-vaccines/information-and-guidance-specific-to-covid-19-vaccine-janssen/janssen-vaccine-handling-in-trusts-and-vaccination-centres/)

Resources covering Janssen pharmaceutical processes in Trusts and Vaccination Centres, from initial ordering through to administration

[Answers to questions specific to Janssen Vaccine](https://www.sps.nhs.uk/home/covid-19-vaccines/information-and-guidance-specific-to-covid-19-vaccine-janssen/answers-to-questions-specific-to-janssen-vaccine/)

Answers to Medicines Optimisation questions related specifically to Janssen vaccine

Full detail: [Information and guidance specific to COVID-19 Vaccine Janssen](https://www.sps.nhs.uk/home/covid-19-vaccines/information-and-guidance-specific-to-covid-19-vaccine-janssen/)

**Title:** COVID-19 susceptibility in long-term care facilities

The Lancet Healthy Longevity | 3rd June 2021

Disease outbreaks in long-term care facilities (LTCFs) have been a large driver of morbidity and mortality during the COVID-19 pandemic. This susceptibility to outbreaks in LTCFs is likely to be multifactorial, including frailty of residents, structural and environmental characteristics of buildings (eg, shared spaces, ventilation, and outdoor access), staffing policies and models, and the value society places on older people and LTCFs.

Understanding of the true burden of COVID-19 in LTCFs has been limited by gaps in measurement and reporting. The impact of COVID-19 has evolved during subsequent pandemic waves, but estimates suggest that internationally more than 40% of deaths have occurred among residents of LTCFs, with many national and local estimates indicating a much higher death toll. Additionally, LTCF staff have been greatly affected as frontline workers.

As this comment piece highlights, patterns of vulnerability to SARS-CoV-2 infection and transmission within LTCF environments are thus crucial to addressing the pandemic at both clinical and policy levels.

Full detail: [COVID-19 susceptibility in long-term care facilities](https://www.thelancet.com/journals/lanhl/article/PIIS2666-7568%2821%2900119-7/fulltext)

**Title:** The MHRA concludes positive safety profile for Pfizer/BioNTech vaccine in 12- to 15-year-olds

Medicines and Healthcare products Regulatory Agency | 4th June 2021

An extension to the current UK approval of the Pfizer/BioNTech COVID-19 vaccine that allows its use in 12- to 15-year-olds has today been authorised by the Medicines and Healthcare products Regulatory Agency (MHRA). This follows a rigorous review of the safety, quality and effectiveness of the vaccine in this age group by the MHRA and the Government’s independent advisory body, the Commission on Human Medicines (CHM).

Further detail: [The MHRA concludes positive safety profile for Pfizer/BioNTech vaccine in 12- to 15-year-olds](https://www.gov.uk/government/news/the-mhra-concludes-positive-safety-profile-for-pfizerbiontech-vaccine-in-12-to-15-year-olds)

**Title:** Over half of UK adults vaccinated with second dose

Department of Health and Social Care | 3rd June 2021

More than half of all adults in the UK have received a second dose of a COVID-19 vaccine, the latest figures show, as the vaccination programme continues at pace and scale.

Health services across the UK have now administered a total of 66,180,731 vaccines between 8 December and 2 June, including 39,758,428 people with first doses (75.5%) and 26,422,303 people with both doses (50.2%), ensuring they have the strongest possible protection against COVID-19 from a second dose.

A recent study by Public Health England (PHE) shows that two doses of the COVID-19 vaccines are highly effective against the B.1.617.2 (Delta) variant first identified in India. Vaccine effectiveness against symptomatic disease from the B.1.617.2 (Delta) variant is similar after two doses compared to the B.1.1.7 (Alpha) variant dominant in the UK, and we expect to see even higher levels of effectiveness against hospitalisation and death.

Full detail: [Over half of UK adults vaccinated with second dose](https://www.gov.uk/government/news/over-half-of-uk-adults-vaccinated-with-second-dose)

**Title:** When Vaccine Apathy, Not Hesitancy, Drives Vaccine Disinterest

JAMA | 2nd June 2021

This Viewpoint explains how vaccine apathy rather than hesitancy may lead to population undervaccination, and uses marketing principles to explain how public health messaging might differ to persuade apathetic persons to be immunized to achieve more widespread COVID-19 protection.

Full detail: [When vaccine apathy, not hesitancy, drives vaccine disinterest](https://jamanetwork.com/journals/jama/fullarticle/2780792)

workforce wellbeing

**Title:** Psychological distress during the acceleration phase of the COVID-19 pandemic: a survey of doctors practising in emergency medicine, anaesthesia and intensive care medicine in the UK and Ireland

Emergency Medicine Journal | published online 24th May 2021

The objective of this study was to quantify psychological distress experienced by emergency, anaesthetic and intensive care doctors during the acceleration phase of COVID-19 in the UK and Ireland.

5440 responses were obtained from a cross-sectional survey. 81.1% (n=4414) either agreed (31.1%, n=2709) or strongly agreed (31.1%, n=1705) that their personal health was at risk due to their clinical role.

Findings indicate that during the acceleration phase of the COVID-19 pandemic, almost half of frontline doctors working in acute care reported psychological distress as measured by the GHQ-12. Findings from this study should inform strategies to optimise preparedness and explore modifiable factors associated with increased psychological distress in the short and long term.

Full paper: [Psychological distress during the acceleration phase of the COVID-19 pandemic: a survey of doctors practising in emergency medicine, anaesthesia and intensive care medicine in the UK and Ireland](https://emj.bmj.com/content/emermed/38/6/450.full.pdf)

**Title:** Health staff in plea for better protection

BBC News | 3rd June 2021

More than 20 healthcare organisations, including those representing nurses, doctors, surgeons and therapists, are calling for stricter UK guidelines to be introduced on face masks and other personal protective equipment (PPE). In a virtual meeting with officials, they will say existing rules leave them vulnerable to infection through the air, especially by new Covid variants.

It is thought to be the first time health and care organisations have united on a single issue in this way - a sign of the desperation many feel about the need for staff to be kept safe.

The delegation will include representatives of the British Medical Association, the Royal College of Nursing and many other professional organisations and unions.

Further detail: [Health staff in plea for better protection](https://www.bbc.co.uk/news/health-57337165)

**Title:** Holding the frontline: a cross-sectional survey of emergency department staff well-being and psychological distress in the course of the COVID-19 outbreak

BMC Health Services Research | 29th May 2021

The coronavirus disease 2019 (COVID-19) outbreak has been associated with stress and challenges for healthcare professionals, especially for those working in the front-line of treating COVID-19 patients. This study aimed to: 1) assess changes in well-being and perceived stress symptoms of Dutch emergency department (ED) staff in the course of the first COVID-19 wave, and 2) assess and explore stressors experienced by ED staff since the COVID-19 outbreak.

Mean self-perceived stress symptom levels almost doubled during the peak of the first wave. Half of the respondents reported experiencing more moral distress in the ED since the COVID-19 outbreak. High levels of distress were primarily found in situations where the staff was unable to provide or facilitate necessary emotional support to a patient or family.

Analysis of 51 free-texts revealed witnessing suffering, high work pressure, fear of contamination, inability to provide comfort and support, rapidly changing protocols regarding COVID-19 care and personal protection, and shortage of protection equipment as important stressors.

The authors conclude that actions to limit drop-out and illness among staff resulting from psychological distress are vital to secure acute care for (non-)COVID-19 patients during future infection waves.

Full article: [Holding the frontline: a cross-sectional survey of emergency department staff well-being and psychological distress in the course of the COVID-19 outbreak](https://bmchealthservres.biomedcentral.com/track/pdf/10.1186/s12913-021-06555-5.pdf)

Health management

**Title:** Providers deliver: collaborating for better care

NHS Providers | 3rd June 2021

Trusts are forging ahead with ambitious plans to work together to deliver better care for patients.
This report by NHS Providers features 14 innovative cases studies which showcase successful cooperation between providers in the acute, mental health, community and ambulance sectors, working together and with local partners.

The case studies provide a striking insight into how the COVID-19 pandemic accelerated the drive towards collaboration both within and across integrated care systems (ICSs), with providers and wider system partners supporting each other during an incredibly challenging time.

The report sets out factors that can help or hinder that collaboration and outlines the support trust leaders need next from national NHS leaders.

Key ingredients for successful provider collaborations include:

* strong leadership
* a clear shared vision
* time and patience to build relationships and embed new ways of working.

The reportalso offers valuable understanding into the unequal impact of the pandemic on minority groups and communities and the way in which trusts and their partners have adapted and innovated to tackle health inequalities in the wake of COVID-19.

Full report: [Providers deliver: collaborating for better care](https://nhsproviders.org/media/691546/deliver-final.pdf)

See also: [Providers are collaborating to deliver better care for patients](https://nhsproviders.org/news-blogs/news/providers-are-collaborating-to-deliver-better-care-for-patients)

other

**Title:** Happy to help: the welfare effects of a nationwide micro-volunteering programme

London School of Economics and Political Science | 31st May 2021

This report estimates the wellbeing benefits from volunteering for England’s NHS Volunteer Responders programme which was set up in response to the Covid-19 pandemic. It found that active volunteers report significantly higher life satisfaction, feelings of worthwhileness, social connectedness, and belonging to their local communities.

In a survey of over 9,000 active participants on the NHSVR programme, the researchers found that even small acts of volunteering, including talking to at-risk individuals on the phone or helping to deliver groceries boosted participants sense of wellbeing and increased feelings of belonging within the local community. Importantly, the authors found that the positive impacts on wellbeing lasted up to three months after the last task had been completed.

A social welfare analysis shows that the benefits of the programme were at least 140 times greater than its costs.

Full report: [Happy to help: the welfare effects of a nationwide micro-volunteering programme](https://cep.lse.ac.uk/pubs/download/dp1772.pdf)

See also: [Volunteering in the NHS: Covid-19 Volunteer Responders Programme significantly increased volunteers' overall life satisfaction](https://www.lse.ac.uk/News/Latest-news-from-LSE/2021/e-May-21/Volunteering-in-the-NHS-Covid-19-Volunteer-Responders-Programme-significantly-increased-volunteers-overall-life-satisfaction)

**Title:** Depressive symptoms, mental wellbeing, and substance use among adolescents before and during the COVID-19 pandemic in Iceland: a longitudinal, population-based study

The Lancet Psychiatry | 3rd June 2021

Adolescence represents a crucial developmental period in shaping mental health trajectories. In this study, the authors investigated the effect of the COVID-19 pandemic on mental health and substance use during this sensitive developmental stage.

The results of this study suggest that COVID-19 has significantly impaired adolescent mental health. However, the decrease observed in substance use during the pandemic might be an unintended benefit of isolation, and might serve as a protective factor against future substance use disorders and dependence. Population-level prevention efforts, especially for girls, are warranted.

Full paper: [Depressive symptoms, mental wellbeing, and substance use among adolescents before and during the COVID-19 pandemic in Iceland: a longitudinal, population-based study](https://www.thelancet.com/action/showPdf?pii=S2215-0366%2821%2900156-5)

Related Comment piece: [A lost generation? COVID-19 and adolescent mental health](https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366%2821%2900179-6/fulltext)

**Title:** How the world should prepare for the next pandemic

Government Office for Science | 2nd June 2021

In this authored article, Patrick Vallance writes about the aim to have vaccines and therapeutics available at scale within 100 days. This piece was published in the Financial Times.

Full detail: [How the world should prepare for the next pandemic](https://www.gov.uk/government/speeches/how-the-world-should-prepare-for-the-next-pandemic)

**Title:** Coronavirus (COVID-19) roundup

Office for National Statistics | updated 4th June 2021

The latest data and analysis related to the coronavirus (COVID-19) pandemic and its impact on our economy and society. This update includes the latest figures on Deaths registered weekly in England and Wales, provisional: w/e 21 May 2021 and Coronavirus and self-isolation after testing positive in England: 10 to 15 May 2021

The main points include:

* 304 fewer deaths were registered in England and Wales in the week ending 21 May 2021 than the previous week; 3.2% below the five-year average.
* Of those registered deaths in the week ending 21 May 2021, 107 mentioned “novel coronavirus (COVID-19)” accounting for 1.1% of all deaths. This was a decrease compared with the previous week (151).
* The majority (86%) of those required to self-isolate due to COVID-19 reported fully adhering to the requirements throughout their self-isolation period, according to data collected between 10 and 15 May 2021.
* The majority (84%) of those who tested positive for COVID-19 reported having no contact with non-household members while they had any symptoms of illness or during the self-isolation period.
* The percentage of businesses currently trading has increased to 87%, the highest proportion since comparable estimates began in June 2020.
* Accommodation and food service businesses saw the further relaxation, in May 2021, of coronavirus (COVID-19) regulations with the re-opening of indoor dining. This saw trading increase from 61% to 83% .

We

[TRFT Library & Knowledge Service](https://www.trftlibraryknowledge.com/) aim to bring together the latest guidelines, research and news on Covid-19 through our [Covid-19 portal](https://www.trftlibraryknowledge.com/coronavirus.html). For daily updates on Covid-19 visit our '[Latest Health](https://trfthealthweeklydigest.wordpress.com/)' newsfeed, or use the hashtag [#covid19rftlks](https://twitter.com/hashtag/covid19rftlks?src=hashtag_click) to see our latest tweets on Covid-19 research, guidelines and news.

We also produce a range of subject-specific news feeds to ensure our clinical and professional teams stay up to date with developments in their work areas. Please visit our [website](http://www.trftlibraryknowledge.com/) for more information

<https://www.trftlibraryknowledge.com/health-newsfeeds.html>

* The proportion of businesses' workforce on furlough leave has fallen to 8% in mid-May 2021, as a result of coronavirus restrictions continuing to be relaxed across the UK

Full detail: [Coronavirus (COVID-19) roundup](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/coronaviruscovid19roundup/2020-03-26)