COVID-19 weekly update

6th November 2020

**clinical management**

**Title**: Remdesivir — An Important First Step

New England Journal of Medicine | 5th November 2020

This editorial looks at two recent studies which examined the effects of remdesivir on Covid-19 outcomes. The findings, this editorial states, shows that remdesivir provides moderate clinical benefit in the treatment of patients with Covid-19. These findings are a step forward on the road to developing effective therapy for SARS-CoV-2 infections and, as such, are an important advance.

Full detail: [Remdesivir — An Important First Step](https://www.nejm.org/doi/full/10.1056/NEJMe2018715?query=recirc_curatedRelated_article)

Related research:

* [Remdesivir for the Treatment of Covid-19](https://www.nejm.org/doi/pdf/10.1056/NEJMoa2007764?articleTools=true) - Final Report | NEJM
* [Remdesivir for 5 or 10 Days in Patients with Severe Covid-19](https://www.nejm.org/doi/pdf/10.1056/NEJMoa2015301?articleTools=true) | NEJM

**Title**: Age-specific mortality and immunity patterns of SARS-CoV-2

Nature | 2nd November 2020

A team of international researchers, among them experts from the University of Cambridge’s Department of Genetics, have analysed age-specifc COVID-19 death data from 45 countries and the results of 22 seroprevalence studies to investigate the consistency of infection and fatality patterns across multiple countries.

The scientists find that the age distribution of deaths in younger age groups (less than 65 years) is very consistent across different settings and demonstrate how this data can provide robust estimates of the share of the population that has been infected.

Full article: [Age-specific mortality and immunity patterns of SARS-CoV-2](https://www.nature.com/articles/s41586-020-2918-0_reference.pdf)

**Title**: RCGP paper on Virtual Wards, Silent Hypoxia and improving COVID outcomes

Royal College of General Practitioners | October 2020

NHS England is currently piloting a virtual ward concept aimed at encouraging COVID-19 positive patients to monitor their own oxygen saturations using loaned oximeters and to report it to a central monitoring service. Similarly, individual practices or health systems have been undertaking this for themselves to benefit patients.

This paper sets out the known evidence for this concept and the role of GPs in delivering and supporting this.

Full document: [RCGP paper on Virtual Wards, Silent Hypoxia and improving COVID outcomes](https://elearning.rcgp.org.uk/pluginfile.php/149506/mod_page/content/88/Virtual%20wards%2C%20silent%20hypoxia%20and%20improving%20COVID%20outcomes_formatted_28.10.20.pdf)

**Title**: Effect of pre-exposure use of hydroxychloroquine on COVID-19 mortality: a population-based cohort study in patients with rheumatoid arthritis or systemic lupus erythematosus using the OpenSAFELY platform

The Lancet Rheumatology | 5th November 2020

Hydroxychloroquine has been shown to inhibit entry of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) into epithelial cells in vitro, but clinical studies found no evidence of reduced mortality when treating patients with COVID-19. This study aimed to evaluate the effectiveness of hydroxychloroquine for prevention of COVID-19 mortality, as opposed to treatment for the disease.

The authors found no evidence of a difference in COVID-19 mortality among people who received hydroxychloroquine for treatment of rheumatological disease before the COVID-19 outbreak in England. Therefore, completion of randomised trials investigating pre-exposure prophylactic use of hydroxychloroquine for prevention of severe outcomes from COVID-19 are warranted.

Full article: [Effect of pre-exposure use of hydroxychloroquine on COVID-19 mortality: a population-based cohort study in patients with rheumatoid arthritis or systemic lupus erythematosus using the OpenSAFELY platform](https://www.thelancet.com/action/showPdf?pii=S2665-9913%2820%2930378-7)

Related comment: [Hydroxychloroquine in the prevention of COVID-19 mortality](https://www.thelancet.com/journals/lanrhe/article/PIIS2665-9913(20)30390-8/fulltext)

**Title**: Tocilizumab for treating COVID-19: a systemic review and meta-analysis of retrospective studies

European Journal of Clinical Pharmacology | 13th October 2020

This study explores the effectiveness and safety of tocilizumab recently used for treating COVID-19.

A comprehensive search was conducted (up to September 27, 2020), and 19 eligible records were identified according to the inclusion and exclusion criteria. The data of the studies were extracted by 2 independent reviewers and were analyzed to evaluate the safety and availability of tocilizumab for treating COVID-19.

The authors conclude that Tocilizumab may have potential effectiveness to treat COVID-19 according to the results of this study. However, more large-scale studies are needed for more accurate conclusions.

Full paper: [Tocilizumab for treating COVID-19: a systemic review and meta-analysis of retrospective studies](https://link.springer.com/content/pdf/10.1007/s00228-020-03017-5.pdf" \t "_blank)

**Title:** COPD assessment test for the evaluation of COVID-19 symptoms

Thorax | published Online 4th November 2020

There is evidence to demonstrate the ongoing symptoms of COVID-19; however, there are currently no agreed outcomes to assess these symptoms. This study examined the use of the chronic obstructive pulmonary disease (COPD) assessment test (CAT) for patients recovering from COVID-19.

131 patients who were admitted with COVID-19 were followed up over the phone to assess symptoms. The median (IQR) CAT score was 10 (5–16). Cough, phlegm and chest tightness domains were within range for healthy people, but there was evidence of significant breathlessness, loss of energy, and activity and sleep disturbance. The CAT is a useful tool to assess symptoms of COVID-19 recovery.

Full detail: [COPD assessment test for the evaluation of COVID-19 symptoms](https://thorax.bmj.com/content/thoraxjnl/early/2020/11/04/thoraxjnl-2020-215916.full.pdf)

**recovery**

**Title**: POST COVID SYNDROME

Royal College of General Practitioners | [updated 5th November 2020]

Information and resources for GPs supporting patients through recovery from COVID-19.

Full detail:  [Post Covid Syndrome](https://elearning.rcgp.org.uk/mod/page/view.php?id=11512)

**Title**: Harms of public health interventions against covid-19 must not be ignored

BMJ | 2020; 371: m4074 | 2nd November 2020

The SARS-CoV-2 pandemic has posed an unprecedented challenge for governments. Questions regarding the most effective interventions to reduce the spread of the virus—for example, more testing, requirements to wear face masks, and stricter and longer lockdowns—become widely discussed in the popular and scientific press, informed largely by models that aimed to predict the health benefits of proposed interventions. Central to all these studies is recognition that inaction, or delayed action, will put millions of people unnecessarily at risk of serious illness or death.

However, interventions to limit the spread of the coronavirus also carry negative health effects, which have yet to be considered systematically. Despite increasing evidence on the unintended, adverse effects of public health interventions such as social distancing and lockdown measures, there are few signs that policy decisions are being informed by a serious assessment and weighing of their harms on health.

The harmful consequences of public health choices should be explicitly considered and transparently reported to limit their damage, says this BMJ analysis.

Full detail: [Harms of public health interventions against covid-19 must not be ignored](https://www.bmj.com/content/371/bmj.m4074)

**Title:** The concept of “fatigue” in tackling covid-19

BMJ | 2020; 371: m4171 | 2nd November 2020

The concept of fatigue is currently being used in the media to encapsulate a weariness at following COVID-19 guidance and rules. Now the authors of The concept of “fatigue” in tackling covid-19, published in the BMJ, put forward their view that instead of explaining lack of adherence in this way, it might be more fruitful to address people’s capability, opportunity and motivation.

To this end the authors examine the evidence on this in the UK and question whether the concept of fatigue accurately captures what is happening.

Full detail: [The concept of “fatigue” in tackling covid-19](https://www.bmj.com/content/bmj/371/bmj.m4171.full.pdf)

**TITLE:** NEW GUIDANCE TO SUPPORT SAFE CARE HOME VISITS DURING LOCKDOWN

Department of Health and Social Care | 4th November 2020

Care homes will be encouraged and supported to provide safe visiting opportunities as new national restrictions come into effect.

The guidance will enable care home providers, families and local professionals to work together to find the right balance between the benefits of visiting on wellbeing and quality of life, and the risk of transmission of COVID-19 to social care staff and vulnerable residents.

It will set out clear principles for how visits are conducted – with arrangements to be adapted from home to home, based on the needs of their residents and taking into consideration factors such as layout and facilities - and reiterates the importance of ensuring social distancing and proper PPE use is observed.

Full guidance: [Visiting arrangements in care homes for the period of national restrictions](https://www.gov.uk/government/publications/visiting-care-homes-during-coronavirus)

Press release: [New guidance to support safe care home visits during lockdown](https://www.gov.uk/government/news/new-guidance-to-support-safe-care-home-visits-during-lockdown?utm_source=235e072d-286f-4d4f-b9b1-4ec29dcf35b4&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate)

**Title**: Management of the long term effects of COVID-19. The RCGP response and top tips for caring for our patients

Royal College of General Practitioners | 30th October 2020

This document provides top tips on caring for patients, whilst awaiting the new NICE/SIGN/RCGP guidance. It will be updated once the national guideline has been produced by NICE/SIGN and the RCGP in December 2020.

Full document: [Management of the long term effects of COVID-19. The RCGP response and top tips for caring for our patients](https://elearning.rcgp.org.uk/pluginfile.php/149508/mod_page/content/71/V2GA%20for%20publication%20updated%20Management%20of%20the%20long%20term%20effects%20of%20COVID-19_formatted_29.10.20.pdf)

**Title**: Using research to prepare for a post-pandemic world

The Health Foundation | 29th October 2020

This year has been dominated by COVID-19 and its impact on all aspects of our daily lives. This article looks at how the role of research – often only of interest to academics and funders – has been thrust into the limelight, as people begin to understand the magnitude of the pandemic and our need to mobilise research and innovation to respond to the challenges it poses.

Full detail: [Using research to prepare for a post-pandemic world](https://www.health.org.uk/news-and-comment/blogs/using-research-to-prepare-for-a-post-pandemic-world)

**TITLE:** MATERNAL PSYCHOLOGICAL DISTRESS & MENTAL HEALTH SERVICE USE DURING THE COVID-19 PANDEMIC

Journal of Affective Disorders | Volume 276, 1 November 2020, p765-774

Mental health problems are increasingly recognized as a significant and concerning secondary effect of the COVID-19 pandemic. Research on previous epidemics/pandemics suggest that families, particularly mothers, may be at increased risk, but this population has yet to be examined. The current study:

(1) described prevalence rates of maternal depressive and anxiety symptoms from an online convenience sample during the COVID-19 pandemic

(2) identified risk and protective factors for elevated symptoms, and

(3) described current mental health service use and barriers.

The study concludes that maternal depression and anxiety appear to be elevated in the context of COVID-19 compared to previously reported population norms.

Full article: [Maternal psychological distress & mental health service use during the COVID-19 pandemic](https://reader.elsevier.com/reader/sd/pii/S016503272032526X?token=4F2B1A750F4F9A73D61D643A8AD05D5881883FBEFFEF79A91C50E94E8C95DA6DD3EC078D4740E8528548106EEED761ED)

**Title:** Growing up in the shadow of COVID-19

The Lancet Child & Adolescent Health | 5th November 2020

This editorial suggests that 8 months into the pandemic, the UK Government's inadequate consideration of young people in the COVID-19 response is causing lasting harm to a whole generation. Although children and adolescents are generally less clinically vulnerable to COVID-19 than are adults, this editorial looks at how the wider effects of COVID-19 policies have disproportionately and negatively affected the young.

Full editorial: [Growing up in the shadow of COVID-19](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30349-7/fulltext#coronavirus-linkback-header)

Related: [An intergenerational audit for the UK](https://www.resolutionfoundation.org/app/uploads/2020/10/Intergenerational-audit-2020.pdf) | Resolution Foundation | October 2020

**Title**: How has Covid-19 and the associated lockdown measures affected mental health and wellbeing in the UK?

What Works Centre for Wellbeing | 5th November 2020

This briefing provides insights into how mental health conditions have changed and what the risk factors are that need to be recognised when supporting people’s mental health.

Full briefing: [How has Covid-19 and the associated lockdown measures affected mental health and wellbeing in the UK?](https://whatworkswellbeing.org/wp-content/uploads/2020/11/Covid-Mental-health-briefing-Nov-2020.pdf)

See also: [Mental health and Covid-19](https://whatworkswellbeing.org/blog/mental-health-and-covid-19/) | What Works Wellbeing blog post

**Infection control**

**Title**: The Ongoing Problem of UK Hospital Acquired Infections

Centre for Evidence-Based Medicine | 30th October

Probable Hospital Acquired infections in England remain persistently high: currently, 17.6% of COVID-19 infections fit the NHS England definition of probable healthcare-associated infections (HCAIs). These rates have been as high as 25% in the North West and continue to climb in the North East and Yorkshire. NHS England’s definition of HCAIs is those acquired 7+ days after being admitted to hospital

Full detail: [The ongoing problem of UK Hospital Acquired Infections](https://www.cebm.net/covid-19/the-ongoing-problem-of-hospital-acquired-infections-across-the-uk/)

**Title**: Liverpool to be regularly tested for coronavirus in first whole city testing pilot

Department of Health and Social Care | 3rd November 2020

The city of Liverpool is to be the first to trial the whole city testing approach. From Friday (6 November) everyone living or working in Liverpool will now be offered COVID-19 testing, whether they have symptoms or not. This comes as Liverpool has the highest number of deaths from SARS-CoV-2

* new whole city testing approach to launch in Liverpool from Friday with hundreds of thousands of new, rapid turnaround tests deployed
* all residents and workers will be offered repeat COVID-19 testing, even if asymptomatic, to find more positive cases and break chains of transmission
* tests to be provided through a partnership between Liverpool City Council, NHS Test and Trace and Ministry of Defence, with logistical support from Armed Forces personnel

Full detail: [Liverpool to be regularly tested for coronavirus in first whole city testing pilot](https://www.gov.uk/government/news/liverpool-to-be-regularly-tested-for-coronavirus-in-first-whole-city-testing-pilot)

See also: [Mass population testing is rolled out in Liverpool](https://www.bmj.com/content/371/bmj.m4268) | BMJ

**Title**: Robust SARS-CoV-2-specific T-cell immunity is maintained at 6 months following primary infection

UK Coronavirus Immunology Consortium and Public Health England |via bioRxiv | 2nd November 2020

The immune response to SARS-CoV-2 is critical in both controlling primary infection and preventing re-infection. However, there is concern that immune responses following natural infection may not be sustained and that this may predispose to recurrent infection. This study analysed the magnitude and phenotype of the SARS-CoV-2 cellular immune response in 100 donors at six months following primary infection and related this to the profile of antibody level against spike, nucleoprotein and RBD over the previous six months.

The data showed robust cellular immunity persists for at least for six months after even mild or asymptomatic SARS-CoV-2 infection.

The study from the UK Coronavirus Immunology Consortium and Public Health England, which is published as a preprint and has not yet been peer reviewed, is believed to be the first in the world to show that a robust cellular memory against the virus persists for at least for six months.

Full paper: [Robust SARS-CoV-2-specific T-cell immunity is maintained at 6 months following primary infection](https://www.biorxiv.org/content/10.1101/2020.11.01.362319v1.full.pdf)

See also: [T cell response lasts for at least six months after infection, study shows](https://www.bmj.com/content/371/bmj.m4257?utm_source=twitter&utm_medium=social&utm_term=hootsuite&utm_content=sme&utm_campaign=usage) | BMJ

**Title**: Guidance on shielding and protecting people who are clinically extremely vulnerable from covid-19.

Department of Health & Social Care | 4th November 2020

People in England who are clinically extremely vulnerable will receive a letter this week urging them to stay at home as much as possible, including not going to work if they cannot work at home, and only to leave the house to exercise outdoors or to attend health appointments.

The new guidance from the government says that people at highest risk of becoming severely ill from covid-19 should not go to shops or pharmacies because of the increase in cases across the country. Children who were originally asked to shield, however, do not need to do so this time because the evidence has shown there is a low risk of children becoming unwell from covid-19, it says.

Full guidance: [Guidance on shielding and protecting people who are clinically extremely vulnerable from covid-19](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19)

See also: [Clinically extremely vulnerable adults should not leave home for work, says new advice](https://www.bmj.com/content/371/bmj.m4292) | BMJ

**Title**: GPs are told to be ready to deliver vaccine from next month

BMJ | 2020; 371: m4291 | 4th November 2020

The NHS is preparing to deliver a covid-19 vaccine from as early as next month, the chief executive of NHS England has said. Simon Stevens said that the NHS had reached an agreement with general practice leaders to mobilise now and be ready to start delivering a vaccine to patients in December. While it was most likely that a vaccine would be available in early 2021, he said, NHS England was writing to general practices this week to ensure that they are ready.

He explained that the NHS’s current system for delivering flu vaccinations through GPs and pharmacists would be mobilised to deliver the new vaccine, with initial priority given to older people, health workers, and care home staff. Details of a new directed enhanced service, which will fund GPs and primary care networks to deliver Covid vaccines, are expected to be announced shortly.

Full detail: [GPs are told to be ready to deliver vaccine from next month](https://www.bmj.com/content/371/bmj.m4291)

**Title**: Study findings strongly support use of pooled testing, say researchers

BMJ | 2020; 371: m4267 | 2nd November 2020

Pooled testing could be an efficient and effective way of processing large numbers of covid-19 tests, a preprint study has reported.

Pooling has been proposed as a strategy to reduce costs and increase throughput of tests. The process—which involves mixing several samples together, testing the pooled sample, and testing people in the group individually if the result comes back positive—has already been deployed at some UK universities to help stop outbreaks and keep campuses open.

To assess the efficiency and sensitivity of pooled testing, researchers tested 133 816 swab samples collected between April and September 2020. Samples from symptomatic and hospitalised patients were tested individually for SARS-CoV-2, while samples from screened asymptomatic individuals, such as hospital staff and nursing homes residents, were pooled.

Their findings, published on medRxiv, show that 32 466 reverse transcription polymerase chain reaction (RT-PCR) tests were used, meaning the pooled approach saved 101 350 (76%) RT-PCR reactions compared with individual testing. The team reported a clinically insignificant sensitivity loss of three cycle thresholds, and a false positive rate between 3.9% and 5.3%.

Full detail: [Study findings strongly support use of pooled testing, say researchers](https://www.bmj.com/content/371/bmj.m4267)

Related research: [Lessons from applied large-scale pooling of 133 816 SARS-CoV-2 RT-PCR tests](https://www.medrxiv.org/content/10.1101/2020.10.16.20213405v1.full.pdf)

**Title:** Experts debate merits of lockdowns versus “focused protection”

BMJ | 2020; 371: m4263 | 3rd November 2020

Three experts with widely differing viewpoints regarding appropriate public health measures to control the spread of covid-19 weighed in on lockdowns during a debate sponsored by Johns Hopkins University.

The experts represented viewpoints ranging from advocacy for “focused protection” as described in the Great Barrington Declaration to recommendations for population-wide mandates as described in the John Snow Memorandum.

Full detail: [Experts debate merits of lockdowns versus “focused protection”](https://www.bmj.com/content/371/bmj.m4263)

**Title**: SARS-CoV-2 seroprevalence and transmission risk factors among high-risk close contacts: a retrospective cohort study

The Lancet Infectious Diseases | 2nd November 2020

The proportion of asymptomatic carriers and transmission risk factors of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) among household and non-household contacts remains unclear. In Singapore, extensive contact tracing by the Ministry of Health for every diagnosed COVID-19 case, and legally enforced quarantine and intensive health surveillance of close contacts provided a rare opportunity to determine asymptomatic attack rates and SARS-CoV-2 transmission risk factors among community close contacts of patients with COVID-19.

The findings of this study suggest that targeted community measures should include physical distancing and minimising verbal interactions. Testing of all household contacts, including asymptomatic individuals, is warranted.

Full paper: [SARS-CoV-2 seroprevalence and transmission risk factors among high-risk close contacts: a retrospective cohort study](https://www.thelancet.com/action/showPdf?pii=S1473-3099%2820%2930833-1)

**Title**: New National Restrictions from 5 November

Cabinet Office | 31st October 2020

Information on the new national restrictions, including what they mean for working from home and business closures, why they are being introduced and the financial support available.

Full detail: [New national restrictions from 5 November](https://www.gov.uk/guidance/new-national-restrictions-from-5-november)

**TITLE:** PREPARING FOR THE 2020-2021 INFLUENZA SEASON

JAMA | published online 2nd November 2020

This JAMA Insights Clinical Update discusses the importance of established influenza prevention and control measures, including influenza vaccination and antiviral treatment, as the Global North enters its first influenza season in the COVID-19 pandemic.

Further detail: [Preparing for the 2020-2021 Influenza season](https://jamanetwork.com/journals/jama/article-abstract/2772691)

**workforce wellbeing**

**Title:** Interventions to support the resilience and mental health of frontline health and social care professionals during and after a disease outbreak, epidemic or pandemic

Cochrane Database of Systematic Reviews | 5th November 2020

Evidence from disease epidemics shows that healthcare workers are at risk of developing short‐ and long‐term mental health problems. The World Health Organization (WHO) has warned about the potential negative impact of the COVID‐19 crisis on the mental well‐being of health and social care professionals. Symptoms of mental health problems commonly include depression, anxiety, stress, and additional cognitive and social problems; these can impact on function in the workplace.

The mental health and resilience (ability to cope with the negative effects of stress) of frontline health and social care professionals ('frontline workers' in this review) could be supported during disease epidemics by workplace interventions, interventions to support basic daily needs, psychological support interventions, pharmacological interventions, or a combination of any or all of these.

This review found a lack of research evidence relating to the effectiveness of interventions to support the resilience and mental health of frontline workers during disease epidemics or pandemics. Given the ongoing COVID‐19 pandemic and the recognised negative impact on frontline workers, research to determine the effectiveness of interventions to support the resilience and mental health of frontline health and social care workers during disease epidemics or pandemics is a high priority.

Full detail: [Interventions to support the resilience and mental health of frontline health and social care professionals during and after a disease outbreak, epidemic or pandemic](https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD013779/full#CD013779-abs-0002)

**Title:** Medical leaders call for 'breathing space'

Royal College of General Practitioners | 4th November 2020

The Royal Colleges of Surgeons, General Practitioners and Physicians have come together to voice their concerns about the increasing demands on critical care beds and the huge pressures being laid on frontline health and social care staff.

The medical leaders call for 'breathing space' as hospitals struggle under increasing strain because of rising COVID-19 cases. The medical Royal Colleges are urging the public to work in partnership with health care professionals to help get through this difficult winter together.

Full detail: [Medical leaders call for breathing space](https://www.rcgp.org.uk/about-us/news/2020/november/medical-leaders-call-for-breathing-space.aspx)

**Title:** Paramedics in pandemics: protecting the mental wellness of those behind enemy lines

The British Journal of Psychiatry | 23rd October 2020

Besides a global health crisis, the COVID-19 pandemic has potential to have a severe and long-lasting psychological impact on frontline healthcare workers such as paramedics. It is imperative to shed light on these mental health issues and employ interventions to protect the mental wellness of this vulnerable group of healthcare workers.

Full document: [Paramedics in pandemics: protecting the mental wellness of those behind enemy lines](https://www.cambridge.org/core/services/aop-cambridge-core/content/view/C0B1C08CF27CF1AD95EAC18B43D35E21/S0007125020001932a.pdf/paramedics_in_pandemics_protecting_the_mental_wellness_of_those_behind_enemy_lines.pdf)

**Title**: COVID-19 and younger healthcare professionals: Insights report

Philips Healthcare

This report offers perspectives from 500 doctors under the age of 40 in five countries: the United States of America, China, Singapore, France and Germany. The findings reveal how the COVID-19 pandemic has affected the attitudes and experiences of younger doctors, and how they believe the healthcare industry should change in response.  This report supplements the [Future Health Index 2020 global report, The Age of Opportunity](https://www.philips.com/a-w/about/news/future-health-index/reports/2020/the-age-of-opportunity.html).

Full detail: [COVID-19 and younger healthcare professionals: Insights report](https://www.philips.com/a-w/about/news/future-health-index/reports/2020/covid-19-and-younger-healthcare-professionals.html)

**Health management**

**TITLE:** NHS IS PLACED ON HIGHEST ALERT LEVEL AS INTENSIVE CARE BEDS FILL UP

BMJ | 2020; 371: m4296 | 5th November 2020

The NHS has been placed on the highest alert level amid warnings that some hospitals are now seeing more patients with covid-19 than they did at the height of the pandemic in April.

Intensive care beds in England are filling up because of the rising number of patients being admitted with covid-19, health service leaders warned.

The move back to level 4 means that NHS England will once again have overall coordination of the NHS’s response to the pandemic and can move staff or patients to other regions if local services are stretched because of covid.

Full detail: [NHS is placed on highest alert level as intensive care beds fill up](https://www.bmj.com/content/371/bmj.m4296)

See also: [Covid-19: NHS in England moves to highest alert level](https://www.bbc.co.uk/news/health-54802090) |BBC News

**Title:** How can we learn from changes in practice under COVID-19? A guide for health and care teams to learn from innovations during the pandemic

Analytical Collaboration for Covid-19 | The Strategy Unit

This guide has been developed to help health and social care teams and their leaders learn from service changes put in place or accelerated during the COVID-19 response. Includes useful tools and resources such as learning frameworks, knowledge mobilisation, sharing learning, evaluation.

Produced as part of the Analytical Collaboration for COVID-19 which brings together: the Health Foundation; King’s Fund; Nuffield Trust, Imperial College Health Partners and the Strategy Unit.

Full detail: [How can we learn from changes in practice under COVID-19? A guide for health and care teams to learn from innovations during the pandemic](https://www.strategyunitwm.nhs.uk/sites/default/files/2020-10/Covid19%20Learning%20Guide%20-%20SU%20Covid%20Analytical%20Collaboration_0.pdf)

**other**

**TITLE:** ASSOCIATION BETWEEN LIVING WITH CHILDREN AND OUTCOMES FROM COVID-19: AN OPENSAFELY COHORT STUDY OF 12 MILLION ADULTS IN ENGLAND

medRxiv | 2nd November 2020

Close contact with children may provide cross-reactive immunity to SARs-CoV-2 due to more frequent prior coryzal infections from seasonal coronaviruses. Alternatively, close contact with children may increase risk of SARs-CoV-2 infection. This study investigated whether risk of infection with SARs-CoV-2 and severe outcomes differed between adults living with and without children.

Working on behalf of NHS England, the authors conducted a population-based cohort study using primary care data and pseudonymously-linked hospital and intensive care admissions, and death records, from patients registered in general practices representing 40% of England.

The study found that for adults living with children there is no evidence of an increased risk of severe COVID-19 outcomes. These findings have implications for determining the benefit-harm balance of children attending school in the COVID-19 pandemic.

*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 article: [Association between living with children and outcomes from COVID-19: an OpenSAFELY cohort study of 12 million adults in England](https://www.medrxiv.org/content/10.1101/2020.11.01.20222315v1.full.pdf)

See also: [Coronavirus: Living with children 'no increased risk'](https://www.bbc.co.uk/news/health-54794904) | BBC News

**Title**: The BMJ interview: Chris Whitty, England’s chief medical officer, on covid-19

BMJ | 2020; 371: m4235 | 4th November 2020

Never has the role of chief medical officer (CMO) been under such scrutiny. In a rare interview, England’s CMO speaks to The BMJ’s editor in chief about the pandemic and what it’s like to be a physician in Whitehall

Full interview: [Chris Whitty on the challenge of winter, lockdown, and following the science](https://www.bmj.com/content/371/bmj.m4235)

**Title:** Performance Tracker 2020. How public services have coped with coronavirus

Institute for Government | November 2020

This report analyses the disruptions Covid-19 has caused to hospitals, general practice, adult social care, schools and criminal courts, and the changes made in response. It finds that coronavirus has resulted in backlogs across public services and calls for reviews of the impact of remote general practice and hospital appointments.

Full document: [Performance Tracker 2020. How public services have coped with coronavirus](https://www.instituteforgovernment.org.uk/sites/default/files/publications/performance-tracker-2020.pdf)

A [summary](https://www.instituteforgovernment.org.uk/publication/performance-tracker-2020/summary) is also available.

**TITLE:** COVID-19 AND DISRUPTIONS TO THE HEALTH AND SOCIAL CARE OF OLDER PEOPLE IN ENGLAND

Institute for Fiscal Studies | 6th November 2020

This briefing looks at the changes to the delivery of routine health care in England due to the Covid-19 pandemic. To prioritise access to hospital beds, staff and ventilators for Covid-19 patients, and to minimise the risk of infection for other patients, much routine health care was postponed or replaced with online or phone consultations. In addition, many would-be patients declined to seek care in the first place.

This briefing aims to quantify these disruptions to care among older people in England in the early stages of the pandemic, and to examine who was most affected.

Full document: [COVID-19 and disruptions to the health and social care of older people in England](https://ifs.org.uk/uploads/BN309-COVID-19-and-disruptions-to-the-health-and-social-care-of-older-people-in-England-1.pdf)

See also: [IFS briefing note](https://www.ifs.org.uk/publications/15160)

**Title:** How many cases of Covid-19 are there?

Nuffield Trust | 4th November 2020

As England begins a new month-long lockdown, Sarah Scobie answers important questions on the numbers of Covid-19 cases. She analyses how the numbers in the second wave so far compare with the first wave from earlier this year, and what the impact on health services might be.

Full detail: [How many cases of Covid-19 are there? A Q&A](https://www.nuffieldtrust.org.uk/news-item/how-many-cases-of-covid-19-are-there-a-q-a)

**Title:** The Health Foundation COVID-19 Survey - second poll

Ipsos MORI | The Health Foundation | October 2020

This report presents the findings of a survey commissioned by the Health Foundation and conducted by Ipsos MORI between 17 and 29 July 2020.

The results highlight a significant change in the public’s perceptions towards the Government’s handling of COVID-19 and the measures it has taken to tackle the outbreak so far. The public are more critical of the Government’s handling of the Coronavirus outbreak. A majority (56%) now believe that the Government has not handled it well, significantly more than in May (39%).

Full report: [The Health Foundation COVID-19 Survey - second poll. A report of survey findings](https://www.health.org.uk/sites/default/files/upload/publications/2020/20201004-THF-Ipsos-MORI-polling-report-COVID-19-V4_0.pdf)

See also: [Public perceptions of health and social care in light of COVID-19](https://www.health.org.uk/publications/reports/public-perceptions-of-health-and-social-care-in-light-of-covid-19-july-2020) | The Health Foundation

**Title:** Drinking to cope with the pandemic: The unique associations of COVID-19-related perceived threat and psychological distress to drinking behaviors in American men and women

Addictive Behaviors | Volume 110, November 2020

The 2019 Coronavirus pandemic has brought about significant and unprecedented changes to the modern world, including stay-at-home orders, high rates of unemployment, and more than a hundred thousand deaths across the United States.

Derived from the self-medication hypothesis, this research explored how perceived threat and psychological distress related to the COVID-19 pandemic are associated with drinking behavior among an American sample of adults. The authors also evaluated whether links between COVID-19-related perceived threat and psychological distress with drinking behavior are different for men and women.

The study found that COVID-19 psychological distress was consistently related to alcohol use indices.

Further detail: [Drinking to cope with the pandemic: The unique associations of COVID-19-related perceived threat and psychological distress to drinking behaviors in American men and women](https://www.sciencedirect.com/science/article/abs/pii/S0306460320306626)

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>