COVID-19 weekly update

25th June 2021

clinical management

**Title:** Ivermectin to be investigated in adults aged 18+ as a possible treatment for COVID-19 in the PRINCIPLE trial

University of Oxford | 23rd June 2021

Ivermectin is being investigated in the UK as part of the Platform Randomised Trial of Treatments in the Community for Epidemic and Pandemic Illnesses (PRINCIPLE), the world’s largest clinical trial of possible COVID-19 treatments for recovery at home and in other non-hospital settings.

Ivermectin is a safe, broad spectrum antiparasitic drug which is in wide use globally to treat parasitic infections. With known antiviral properties, ivermectin has been shown to reduce SARS-CoV-2 replication in laboratory studies. Small pilot studies show that early administration with ivermectin can reduce viral load and the duration of symptoms in some patients with mild COVID-19.

Even though ivermectin is used routinely in some countries to treat COVID-19, there is little evidence from large-scale randomised controlled trials to demonstrate that it can speed up recovery from the illness or reduce hospital admission.

Full detail: [Ivermectin to be investigated in adults aged 18+ as a possible treatment for COVID-19 in the PRINCIPLE trial](https://www.principletrial.org/news/ivermectin-to-be-investigated-as-a-possible-treatment-for-covid-19-in-oxford2019s-principle-trial)

See also: [Ivermectin to be studied as possible treatment in UK](https://www.bbc.co.uk/news/health-57570377) | BBC News

**Title:** Oxygen issues during the COVID-19 pandemic

Healthcare Safety Investigation Branch | 24th June 2021

HSIB have now completed a national investigation into the provision of piped oxygen gas supplies to hospitals. There has been an increased demand for oxygen gas in hospital wards during the COVID-19 pandemic. COVID-19 can cause severe inflammation of the lungs affecting a patient’s ability to breathe. As a result, an increased number of patients have required oxygen therapy within hospitals. Insufficient oxygen supply to seriously ill patients can have very severe consequences, including death.

As part of the final investigation report, HSIB have made four safety recommendations to the appropriate national bodies in order to improve patient safety.

Full report: [Oxygen issues during the COVID-19 pandemic](https://www.hsib.org.uk/documents/333/HSIB_Oxygen_issues_during_the_COVID-19_pandemic_Report_V11.pdf)

Report summary: [Oxygen issues during the COVID-19 pandemic](https://www.hsib.org.uk/documents/332/HSIB_Oxygen_issues_during_the_COVID-19_pandemic_Summary_v02.pdf)

See also: [Outdated hospital oxygen systems a ‘risk to patients’, review warns](https://www.bbc.co.uk/news/uk-57583734) | BBC News

**Title:** Mortality and critical care unit admission associated with the SARS-CoV-2 lineage B.1.1.7 in England: an observational cohort study

The Lancet Infectious Diseases | 22nd June 2021

A more transmissible variant of SARS-CoV-2, the variant of concern 202012/01 or lineage B.1.1.7, has emerged in the UK. This study aimed to estimate the risk of critical care admission, mortality in patients who are critically ill, and overall mortality associated with lineage B.1.1.7 compared with non-B.1.1.7. The authors also compared clinical outcomes between these two groups.

Patients with lineage B.1.1.7 were at increased risk of CCU admission and 28-day mortality compared with patients with non-B.1.1.7 SARS-CoV-2. For patients receiving critical care, mortality appeared to be independent of virus strain. These findings emphasise the importance of measures to control exposure to and infection with COVID-19.

Full paper: [Mortality and critical care unit admission associated with the SARS-CoV-2 lineage B.1.1.7 in England: an observational cohort study](https://www.thelancet.com/action/showPdf?pii=S1473-3099%2821%2900318-2)

**Title:** How can we manage covid fatigue?

BMJ | 2021; 373: n1610 | 24th June 2021

Up to 376 000 people in the UK have reported ongoing symptoms more than 12 months after contracting the virus, with persistent mental and physical fatigue a troubling reality for many. Most people make a good recovery, but the wide range of covid related illness and organ damage weave a complex prognostic picture. This presents clinicians with a range of challenges.

This article asks what’s the long term outlook after covid? and what’s the prognosis for health systems and staff struggling with covid pressures, waiting lists, and stretched resources?

Full detail: [How can we manage covid fatigue?](https://www.bmj.com/content/373/bmj.n1610)

**Title:** Chronic fatigue syndrome and long covid: moving beyond the controversy

BMJ | 2021; 373: n1559 | 24th June 2021

Many patients with “long” covid are experiencing extreme fatigue, a situation that has re-polarised approaches to treatment and rehabilitation, as this BMJ Feature reports.

Full detail: [Chronic fatigue syndrome and long covid: moving beyond the controversy](https://www.bmj.com/content/373/bmj.n1559)

**Title:** Interpreting a lateral flow SARS-CoV-2 antigen test

BMJ | 2021; 373: n1411 | 22nd June 2021

Lateral flow devices (LFDs) are being used to test asymptomatic people for covid-19 as part of the approach in the UK and elsewhere to control the spread of the disease and to enable society to reopen. However, as this article discusses, the risks and benefits of using LFDs for widespread testing of asymptomatic people are the subject of ongoing uncertainty and debate.

Key messages:

* The positive predictive value of a positive lateral flow device (LFD) test depends on the underlying likelihood of disease
* When the disease incidence is low, a positive result should be validated by a polymerase chain reaction (PCR) test. However, if your clinical opinion is that covid-19 is likely, then a positive test is likely to be reliable
* LFD testing is not recommended when the person has symptoms of covid-19, as a negative LFD is not sufficient to rule out covid-19
* If a symptomatic patient informs you that they have had a negative covid-19 test, check what type of test was done
* If covid-19 is clinically suspected, a PCR test is recommended, even if the patient has received a negative result from a recent LFD test

Full detail: [Interpreting a lateral flow SARS-CoV-2 antigen test](https://www.bmj.com/content/373/bmj.n1411)

**Title:** Validation of the 4C Deterioration Model for COVID-19 in a UK teaching hospital during Wave 2

medRxiv | 24th June 2021

The 4C Deterioration model was developed and validated on data collected in UK hospitals until August 26, 2020, but has not yet been validated in the presence of SARS-CoV-2 variants and novel treatment regimens that have emerged subsequently.

In this first validation study of the 4C Deterioration model on patients admitted between August 27, 2020 and April 16, 2021 we found, despite a slightly overestimation of risk, that the discrimination and calibration of the model remained consistent with the development study, strengthening the evidence for adopting this model into clinical practice.

*Note: 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 detail: [Validation of the 4C Deterioration Model for COVID-19 in a UK teaching hospital during Wave 2](https://www.medrxiv.org/content/10.1101/2021.06.22.21259331v1.full.pdf)

**Title:** Effectiveness of Tocilizumab, Sarilumab, and Anakinra for critically ill patients with COVID-19

medRxiv | 22nd June 2021

The interleukin-6 receptor antagonist tocilizumab improves outcomes in critically ill patients with coronavirus disease 2019 (COVID-19). However, the effectiveness of other immune modulating agents is unclear.

This study evaluated four immunomodulatory agents in an ongoing international, multifactorial, adaptive platform trial. Adult participants with COVID-19 were randomized to receive tocilizumab, sarilumab, anakinra, or standard care (control).

In patients with severe COVID-19 receiving organ support, tocilizumab and sarilumab are similarly effective at improving survival and reducing duration of organ support. Anakinra is not effective in this population.

*Note: 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: [Effectiveness of Tocilizumab, Sarilumab, and Anakinra for critically ill patients with COVID-19 The REMAP-CAP COVID-19 Immune Modulation Therapy Domain Randomized Clinical Trial](https://www.medrxiv.org/content/10.1101/2021.06.18.21259133v1.full.pdf)

**Title:** Role of physiotherapy team in critically ill COVID-19 patients pronation: can a multidisciplinary management reduce the complications rate?

medRxiv | 21st June 2021

During the pandemic, critically ill COVID-19 patients' management presented an increased workload for Intensive Care Unit (ICU) nursing staff, particularly during pronation maneuvers, with high risk of complications. In this scenario, a support during pronation by the ICU Physiotherapy Team was introduced.

The authors conclude that a specific pronation team determined a low rate of major complications in critically ill COVID19 patients. The high rate of minor complications appeared to be related to disease severity, rather than from pronation.

*Note: 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 detail: [Role of physiotherapy team in critically ill COVID-19 patients pronation: can a multidisciplinary management reduce the complications rate?](https://www.medrxiv.org/content/10.1101/2021.06.20.21258949v1.full.pdf)

**Title:** Association of Vitamin D Deficiency with COVID-19 Infection Severity: Systematic Review and Meta-analysis

Clinical Endocrinology | 23rd June 2021

The authors of this review sought to evaluate the association between vitamin D deficiency and severity of COVID-19 infection. They conclude that Vitamin D deficiency is associated with greater severity of COVID-19 infection, and suggest further studies are warranted to determine if vitamin D supplementation can decrease severity of COVID-19.

Full paper: [Association of Vitamin D Deficiency with COVID-19 Infection Severity: Systematic Review and Meta-analysis](https://onlinelibrary.wiley.com/doi/epdf/10.1111/cen.14540)

recovery

**Title:** Persistent pulmonary disease after acute covid-19

BMJ | 2021; 373: n1565 | 21st June 2021

Our understanding of the complications after hospital treatment for covid-19 is improving. This editorial explains that studies to date show that persisting respiratory complications do occur and that the severity of infection and prior health status are probably the main determinants of radiological and functional impairment longer term. Interstitial abnormalities do not seem to progress (although evidence is sparse) and improve over time.

Importantly, many studies highlight the extent of non-respiratory physical and psychological symptoms after acute covid-19, and follow-up studies report all-cause mortality exceeding 10% in the six months after discharge. Thus, while persisting lung damage may be substantial for some, for many, morbidity and mortality after covid-19 are influenced most by pre-existing conditions, infection severity, and the extra-pulmonary complications of SARS-CoV-2.

Full detail: [Persistent pulmonary disease after acute covid-19](https://www.bmj.com/content/373/bmj.n1565)

**Title**: New research shows 2 million people may have had long COVID

Department of Health & Social Care | Imperial College London | 24th June 2021

Over 2 million people in England are thought to have had one or more COVID-19 symptoms lasting at least 12 weeks according to one of the largest studies of the virus.

The study is based on self-reported data from 508,707 adults aged 18 and above who took part in REACT-2 rounds 3 to 5 carried out between September 2020 and February 2021.

Around a fifth of those surveyed reported having had a COVID-19 symptom previously, with over a third reporting persistent symptoms lasting at least 12 weeks. Around a tenth of those with symptoms said they lasted at least 12 weeks and were severe.

The findings suggest prevalence of persistent symptoms, or long COVID, increases with age, with a 3.5% increase in likelihood in each decade of life. It shows long COVID is higher among women, people who are overweight or obese, who smoke, live in deprived areas, or had been admitted to hospital. Persistent COVID-19 symptoms were lower in people of Asian ethnicity.

Further detail: [New research shows 2 million people may have had long COVID](https://www.gov.uk/government/news/new-research-shows-2-million-people-may-have-had-long-covid)

Full report: [Persistent symptoms following SARS-CoV-2 infection in a random community sample of 508,707 people](https://spiral.imperial.ac.uk/bitstream/10044/1/89844/2/REACT_long_covid_paper_FINAL.pdf)

See also:

[Third of people infected have long term symptoms](https://www.bmj.com/content/373/bmj.n1626) | BMJ

[Up to one in three people who have had COVID-19 report long COVID symptoms](https://www.nihr.ac.uk/news/up-to-one-in-three-people-who-have-had-covid-19-report-long-covid-symptoms/27979) | NIHR

[Long Covid: More than two million in England may have suffered, study suggests](https://www.bbc.co.uk/news/health-57584295) | BBC   
News

**Title:** Enhanced service specification: Long COVID 2021/22

NHS England | 21st June 2021

General practice plays a key role in supporting patients, both adults and children, with long term symptoms of COVID-19. This includes assessing, diagnosing, referring where necessary and providing longer term holistic support of patients. This enhanced service specification aims to support general practice in managing Long COVID.

Full detail: [Enhanced service specification: Long COVID 2021/22](https://www.england.nhs.uk/wp-content/uploads/2021/06/C1313-ess-long-covid-21-22.pdf)

**Title:** Up to one in six people with COVID-19 report long COVID symptoms

Kings College London | 24th June 2021

The CONVALESCENCE study, led by researchers at UCL and King’s College London, analysed anonymised data from 1.2 million primary health records across the UK, together with data from 45,096 participants in 10 population-based cohort studies.

The study found that one in six (17%) middle-aged people who reported having had COVID-19 also reported long COVID symptoms, with this figure falling to one in 13 (7.8%) among younger adults. Using a stricter definition of long COVID as symptoms impacting routine daily activities, the researchers found that it affected 1.2% of 20-year-olds who had COVID-19, but 4.8% of people in middle age.

The preliminary findings also found that women were 50% more likely to report long COVID than men. In addition, the risk of long COVID was linked to poorer pre-pandemic mental and physical health and was associated with a previous diagnosis of asthma.

Non-white ethnic minority groups had lower odds of reporting long COVID (about 70% less likely).

Further detail: [Up to one in six people with COVID-19 report long COVID symptoms](https://www.kcl.ac.uk/news/up-to-one-in-six-people-covid-19-long-covid-symptoms)

**Title:** Funding boost for young people’s mental health services

NHS England | 22nd June 2021

Children and young people will benefit from a cash injection to mental health services which includes addressing the increasing demand for the treatment of eating disorders. An extra £40 million has been allocated to address the COVID impact on children and young people’s mental health and enhance services across the country.

Full detail: [Funding boost for young people’s mental health services](https://www.england.nhs.uk/2021/06/funding-boost-for-young-peoples-mental-health-services/)

**Title:** More than half fear lockdown ending as pandemic's impact on mental health laid bare

Mind | 18th June 2021

The majority of people are worried about seeing and being near others once lockdown restrictions are fully relaxed, research carried out by the mental health charity Mind has found.

The study, which nearly 10,000 people in England took part in, revealed 55 per cent of adults and young people had this concern, with 46 per cent of those who have already been vaccinated saying they are still worried they will catch coronavirus.

A total of 1 in 4 adults and more than 1 in 6 young people experienced mental distress for the first time during the pandemic, according to Mind’s research. The latest NHS figures also show the number of people in contact with mental health services is the highest since the first lockdown (1.27million) and the number of urgent referrals to crisis care.

Full detail: [More than half fear lockdown ending as pandemic's impact on mental health laid bare](https://www.mind.org.uk/news-campaigns/news/more-than-half-fear-lockdown-ending-as-pandemics-impact-on-mental-health-laid-bare/)

Infection control

**Title:** SARS-CoV-2 Variants and Vaccines

New England Journal of Medicine | 23rd June 2021

The emergence of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) viral variants of concern arouses concern regarding possible escape from vaccine-elicited immunity. Global strategies involving integration of clinical rollout with systematic investigation are presented in this special report.

Full detail: [SARS-CoV-2 variants and vaccines](https://www.nejm.org/doi/pdf/10.1056/NEJMsr2105280?articleTools=true)

**Title:** Vaccine effectiveness of the first dose of ChAdOx1 nCoV-19 and BNT162b2 against SARS-CoV-2 infection in residents of long-term care facilities in England (VIVALDI): a prospective cohort study

The Lancet Infectious Diseases | 23rd June 2021

The effectiveness of SARS-CoV-2 vaccines in older adults living in long-term care facilities is uncertain. This study investigated the protective effect of the first dose of the Oxford-AstraZeneca non-replicating viral-vectored vaccine (ChAdOx1 nCoV-19; AZD1222) and the Pfizer-BioNTech mRNA-based vaccine (BNT162b2) in residents of long-term care facilities in terms of PCR-confirmed SARS-CoV-2 infection over time since vaccination.

The authors found that single-dose vaccination with BNT162b2 and ChAdOx1 vaccines provides substantial protection against infection in older adults from 4–7 weeks after vaccination and might reduce SARS-CoV-2 transmission. However, the risk of infection is not eliminated, highlighting the ongoing need for non-pharmaceutical interventions to prevent transmission in long-term care facilities.

Full paper: [Vaccine effectiveness of the first dose of ChAdOx1 nCoV-19 and BNT162b2 against SARS-CoV-2 infection in residents of long-term care facilities in England (VIVALDI): a prospective cohort study](https://www.thelancet.com/action/showPdf?pii=S1473-3099%2821%2900289-9)

**Title:** Effectiveness of BNT162b2 and ChAdOx1 nCoV-19 COVID-19 vaccination at preventing hospitalisations in people aged at least 80 years: a test-negative, case-control study

The Lancet Infectious Diseases | 23rd June 2021

On Dec 8, 2020, deployment of the first SARS-CoV-2 vaccination authorised for UK use (BNT162b2 mRNA vaccine) began, followed by an adenoviral vector vaccine ChAdOx1 nCoV-19 on Jan 4, 2021. Care home residents and staff, frontline health-care workers, and adults aged 80 years and older were vaccinated first. However, few data exist regarding the effectiveness of these vaccines in older people with many comorbidities. In this post-implementation evaluation of two COVID-19 vaccines, the authors aimed to determine the effectiveness of one dose in reducing COVID-19-related admissions to hospital in people of advanced age.

The study found that one dose of either BNT162b2 or ChAdOx1 nCoV-19 resulted in substantial risk reductions of COVID-19-related hospitalisation in people aged at least 80 years.

Full paper: [Effectiveness of BNT162b2 and ChAdOx1 nCoV-19 COVID-19 vaccination at preventing hospitalisations in people aged at least 80 years: a test-negative, case-control study](https://www.thelancet.com/action/showPdf?pii=S1473-3099%2821%2900330-3)

**Title:** Risk of hospitalisation associated with infection with SARS-CoV-2 lineage B.1.1.7 in Denmark: an observational cohort study

The Lancet Infectious Diseases | 22nd June 2021

The more infectious SARS-CoV-2 lineage B.1.1.7 rapidly spread in Europe after December, 2020, and a concern that B.1.1.7 could cause more severe disease has been raised. Taking advantage of Denmark's high RT-PCR testing and whole genome sequencing capacities, the authors of this paper used national health register data to assess the risk of COVID-19 hospitalisation in individuals infected with B.1.1.7 compared with those with other SARS-CoV-2 lineages.

The study found that infection with SARS-CoV-2 lineage B.1.1.7 was associated with an increased risk of hospitalisation compared with that of other lineages in an analysis adjusted for covariates. The overall effect on hospitalisations in Denmark was lessened due to a strict lockdown, but the findings of this paper could support hospital preparedness and modelling of the projected impact of the epidemic in countries with uncontrolled spread of B.1.1.7.

Full paper: [Risk of hospitalisation associated with infection with SARS-CoV-2 lineage B.1.1.7 in Denmark: an observational cohort study](https://www.thelancet.com/action/showPdf?pii=S1473-3099%2821%2900290-5)

**Title:** Future of covid-19 vaccine pricing: lessons from influenza

BMJ | 2021; 373: n1467 | 22nd June 2021

This BMJ analysis reports that routine use of covid-19 vaccines could strain health budgets if pricing follows the pattern seen with influenza vaccines.

Evidence is emerging that the novel coronavirus will continue to evolve and that immunity from vaccines is likely to be time limited, requiring use of booster doses or modified vaccines. Bilateral bulk purchasing agreements between individual countries and manufacturers have allowed vaccines to be procured at lower prices and dispensed to patients without charges. After the pandemic, however, the future pricing landscape of covid-19 vaccines remains unclear.

Multiple parallels exist between covid-19 and influenza vaccines with respect to their development history, market, and administration. If the pattern observed with influenza vaccines is repeated, higher prices for covid-19 vaccines set by companies in the future would have important implications for health spending, public health programme budgets, and insurance premiums.

Full detail: [Future of covid-19 vaccine pricing: lessons from influenza](https://www.bmj.com/content/373/bmj.n1467)

**Title:** Global covid-19 vaccine rollout and safety surveillance—how to keep pace

BMJ | 2021; 373: n1416 | 18th June 2021

This BMJ analysis argues that an agile internationally harmonised surveillance system is essential to maintain safety and trust in vaccines.

Key messages:

* The development of rare, serious adverse events after covid-19 vaccination highlights the critical importance of robust vaccine safety surveillance systems
* The widespread rollout of covid-19 vaccines creates an opportunity for international harmonisation of pharmacoepidemiological designs, data, and safety endpoints
* Enhanced active vaccine safety surveillance systems could overcome existing barriers in ascertaining vaccine exposure and adverse events at a population level
* National regulatory authorities should establish formal collaborations across regions to promote sharing of safety data

Full detail: [Global covid-19 vaccine rollout and safety surveillance—how to keep pace](https://www.bmj.com/content/373/bmj.n1416)

**Title:** The Search for a Single Vaccine Against Coronaviruses Yet to Come

JAMA | 23rd June 2021

This Medical News Feature discusses the feasibility of a pancoronavirus vaccine to prevent future pandemics.

Full detail: [The search for a single vaccine against coronaviruses yet to come](https://jamanetwork.com/journals/jama/fullarticle/2781521)

**Title:** Should we be worried about reports of myocarditis and pericarditis after mRNA vaccines?

BMJ | 2021; 373: n1635 | 24th June 2021

On 23rd June the US Centers for Disease Control and Prevention’s safety committee said there was a “likely association” between the Pfizer-BioNTech and Moderna covid-19 vaccines and myocarditis and pericarditis in some young adults. The CDC’s Advisory Committee on Immunization Practices said there was a higher than expected number of reports of heart inflammation in people aged 16-24 who had received the mRNA vaccines but that the benefits of vaccination still clearly outweighed the risks.

This article looks at the data released by UK and US regulatory agencies this week.

Full detail: [Should we be worried about reports of myocarditis and pericarditis after mRNA vaccines?](https://www.bmj.com/content/373/bmj.n1635)

**Title:** Test and trace in England – progress update

National Audit Office | 25th June 2021

This is the second report from the National Audit Office on government’s approach to test and trace services in England and it focuses on the period from the beginning of November 2020.

This second report provides an update, focusing on the period from November 2020 to April 2021. It is factual and does not present a full value‑for‑money assessment. This reflects the time period covered and the changing and ongoing response to the pandemic. The report covers:

* major developments in the test, trace and isolate programme from November 2020 (Part One);
* funding and spending for the programme in 2020-21, including its use of contracts, consultants and its utilisation rates (Part Two);
* the performance and effectiveness of test and trace services up to the end of April 2021 (Part Three); and
* current plans for the future delivery of test and trace services, including transition arrangements to the new UKHSA, and securing a longer-term benefit from the investment into test and trace services (Part Four).

The report warns effectiveness of the service is still being undermined by low levels of public compliance, both in terms of coming forward for testing and adhering to isolating. It also pointed out that just 14% of the 691 million rapid tests sent out to the public had been registered as used.

Full report: [Test and trace in England – progress update](https://www.nao.org.uk/wp-content/uploads/2021/06/Test-and-trace-in-England-progress-update.pdf)

Press release: [Test and trace in England – progress update](https://www.nao.org.uk/press-release/test-and-trace-in-england-progress-update/)

See also:

[NHS Test and Trace: lack of progress is “deeply disappointing”](https://www.bmj.com/content/373/bmj.n1636) |BMJ

[Test and Trace costs remain a concern as performance falls seriously short](https://www.nuffieldtrust.org.uk/news-item/nuffield-trust-test-and-trace-costs-remain-a-concern-as-performance-falls-seriously-short) | Nuffield Trust

[NHS Test and Trace weaknesses remain, says watchdog](https://www.bbc.co.uk/news/health-57601097) | BBC

workforce wellbeing

**Title:** Healthy workplace toolkit

Royal College of Nursing | 21st June 2021

The Royal College of Nursing has launched an updated Healthy Workplaces resource to highlight the need for nursing staff to take their at-work breaks and remain hydrated during their shifts. The toolkit provides organisations with a framework to use to improve working environments and includes pandemic-specific advice.

Developed with input from RCN members, it aims to improve their working environment and conditions, and the subsequent impact these have on their health and wellbeing.

Full detail: [Healthy workplace toolkit](https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/publications/2021/june/009-734.pdf?la=en)

See also: [Updated RCN resources highlight the importance of breaks for nursing staff](https://www.rcn.org.uk/news-and-events/news/uk-updated-rcn-resources-highlight-the-importance-of-breaks-for-nursing-staff-210621)

**Title:** The mental health of NHS staff during the COVID-19 pandemic: a two-wave cohort study

medRxiv | 23rd June 2021

Health and social care workers(HSCWs) are at risk of experiencing adverse mental health (MH) outcomes (e.g., higher levels of anxiety and depression) as a result of the COVID-19 pandemic. This can have a detrimental impact on quality of care, the national response to the pandemic and its aftermath.

This longitudinal study design provided follow-up evidence on the MH (changes in the prevalence of disease over time) of NHS staff working in a remote health board in Scotland during the COVID-19 pandemic and investigated the determinants of MH outcomes over time.

HSCWs working in a remote area with low COVID-19 prevalence reported similar levels of substantial anxiety and depression as those working in areas of the UK with high rates of COVID-19 infections.

Efforts to support HSCW MH must remain a priority and should minimize the adverse effects of working with, and the disruption caused by the COVID-19 pandemic.

*Note: 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 mental health of NHS staff during the COVID-19 pandemic: a two-wave cohort study](https://www.medrxiv.org/content/10.1101/2021.06.17.21259076v1.full.pdf)

**Title:** Parliamentary report on workforce burnout and resilience

BMJ | 2021; 373: n1603 | 25th June 2021

This BMJ editorial discusses the recent report by the Health and Social Care Committee on workforce burnout and resilience in the NHS and social care. The editorial suggests effective workforce planning and purposeful culture change will require sustained political leadership as well as long term investment at a level commensurate with the urgent need for improvement.

Full editorial: [Parliamentary report on workforce burnout and resilience](https://www.bmj.com/content/373/bmj.n1603)

Related report: [Workforce burnout and resilience in the NHS and social care](https://publications.parliament.uk/pa/cm5802/cmselect/cmhealth/22/2202.htm)

Health management

**Title:** NHS Providers survey on operational pressures: COVID-19, winter and recovery plans

NHS Providers | 23rd June 2021

A survey by NHS Providers sets out in stark detail how NHS leaders are grappling with challenges on multiple fronts as they seek to meet rising demand for health services alongside a rapidly growing waiting list and a worrying surge of COVID-19.

The survey reveals widespread concerns amongst trust leaders that winter pressures and further surges of COVID-19 will derail plans to deal with the backlog of care and undermine hard-won progress.

The survey responses reveal:

* A large majority of leaders (88%) said it was likely that another surge in COVID-19 cases would place additional pressures on their services.
* 89% said they were worried these additional pressures would come during the challenging winter months.
* Almost three quarters (73%) of respondents raised concerns that plans to clear the backlog of care over winter risked being disrupted because of the need to prioritise demand for urgent and emergency care.
* Almost half (48%) of respondents said they have seen evidence of staff leaving their organisation due to early retirement, COVID-19 burnout, or other effects from working in the pandemic. Respondents are concerned that juggling winter, flu, COVID-19 and ambitious recovery plans will once again put pressure on the workforce.

Full detail: [NHS Providers survey on operational pressures: COVID-19, winter and recovery plans](https://nhsproviders.org/media/691644/nhs-providers-survey-on-operational-pressures-covid-19-winter-and-recovery-plans.pdf)

Press release: [Trusts grappling with challenges on 'multiple fronts' as survey reveals fears over waiting lists, COVID-19 and winter pressures](https://nhsproviders.org/news-blogs/news/trusts-grappling-with-challenges-on-multiple-fronts-as-survey-reveals-fears-over-waiting-lists-covid-19-and-winter-pressures)

other

**Title:** Guidance issued after health checks at vaccination centres help to reduce stroke risk

Getting it Right First Time | 27th May 2021

Offering older people a simple heart rhythm check when they get their COVID-19 jab is helping to reduce health risks associated with stroke.

Initial pilot projects have demonstrated the benefit of giving people aged over 65 attending vaccination centres the option of an additional check to establish if they have atrial fibrillation (AF), an irregular heart rhythm that is a major cause of stroke.

Now the Oxford Academic Health Science Network (AHSN), in collaboration with the clinical leads for stroke at the Getting It Right First Time (GIRFT) programme, are sharing guidance on delivering checks in vaccination centres, to help systems that wish to follow suit.

Full guidance: [Targeted AF detection in COVID-19 vaccination clinics](https://www.oxfordahsn.org/wp-content/uploads/2021/05/COVID-vax-clinic-guidelines-FINAL.pdf)

See also: [Guidance issued after health checks at vaccination centres help to reduce stroke risk](https://www.gettingitrightfirsttime.co.uk/guidance-issued-after-health-checks-at-vaccination-centres-help-to-reduce-stroke-risk/)

**Title:** A perfect storm: the impact of COVID-19 on the mental health of young people

The Pharmaceutical Journal | 23rd June 2021

Mental health services for children and young people were struggling before the COVID-19 pandemic, but data suggest they are now reaching crisis point. Data obtained exclusively by The Pharmaceutical Journal suggest increasing numbers of young people were prescribed antidepressants during the pandemic, while facing ever longer waits for psychological support.

NHS figures, analysed by the Royal College of Psychiatrists and published in April 2021, show that 80,226 more children and young people were referred to mental health services between April 2020 and December 2020, up by 28% on 2019​​.

In addition, the analysis revealed that the number of children and young people needing urgent or emergency crisis care — including assessments to see if someone needs to be sectioned because they or others are at risk of harm — had increased by 18% compared with 2019. The authors suggest however, that this is ‘the tip of the iceberg’, in terms of need.

Full detail: [A perfect storm: the impact of COVID-19 on the mental health of young people](https://pharmaceutical-journal.com/article/feature/a-perfect-storm-the-impact-of-covid-19-on-the-mental-health-of-young-people)

**Title:** Young people's mental health during the COVID-19 pandemic

The Lancet Child & Adolescent Health | 24th June 2021

There has understandably been widespread concern about the impact of the COVID-19 pandemic and associated restrictions on the mental health of children and young people, with evidence of recent increases in the prevalence of mental health problems.

Yet there has been relatively little evaluation of how mental health has changed over the pandemic and varied for children and young people living in a range of circumstances. This Comment piece discusses the UK based Co-SPACE study, which through the collection of monthly data from a population with diverse social and demographic backgrounds provides a unique opportunity to examine how things have changed over time throughout the pandemic, and, crucially, for whom.

Full detail: [Young people's mental health during the COVID-19 pandemic](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(21)00177-2/fulltext)

Related: [Children’s mental health: One year in the pandemic](https://cospaceoxford.org/findings/report-10-changes-in-childrens-mental-health-throughout-one-year-of-the-covid-19-pandemic/) | Co-SPACE study

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