Public Health England
COVID-19: infection prevention and control (IPC) (updated 12th April)
COVID-19: putting on (donning) coveralls (10th April)
COVID-19: taking off (doffing) coveralls (10th April)

Guidance for stepdown of infection control precautions and discharging COVID-19 patients (9th April – first published)
This guidance provides advice on appropriate infection prevention and control (IPC) precautions for patients recovering or recovered from COVID-19 and remaining in hospital, or being discharged to their own home or residential care.

NICE: Rapid Guidelines
Covid-19 rapid guideline: cystic fibrosis (NG170) 9th April – first published
Covid-19 rapid guideline: dermatological conditions treated with drugs affecting the immune response (NG169) 9th April – first published
Covid-19 rapid guideline: community-based care of patients with chronic obstructive pulmonary disease (COPD) (NG168) 9th April – first published
Covid-19 rapid guideline: critical care in adults (NG159) 9th April - updated
Covid-19 rapid guideline: delivery of systemic anticancer treatments (NG161) (9th April - updated

NHS England
Specialty Guides:
Clinical guide for extra corporeal membrane oxygenation (ECMO) for respiratory failure in adults during the coronavirus pandemic (10th April)
Clinical guide for the optimal use of oxygen therapy during the coronavirus pandemic (9th April)
Management of surge during the coronavirus pandemic: rapid learning (14th April)
Reference guide for emergency medicine (10th April)
Clinical guide to surgical prioritisation during the coronavirus pandemic (11th April)
Urgent and emergency musculoskeletal conditions in children (under 16) requiring onward referral (14th April)
Clinical guide for the temporary reorganisation of intrapartum maternity care during the coronavirus pandemic (9th April)

Testing of NHS staff and household members (letter) 12 April
Approval by Health and Safety Executive for use of coveralls as an alternative option for non-surgical gowns – 10 April

Department of Health and Social Care
COVID-19: evaluation of commercially available diagnostic products
Information on how the Department of Health and Social Care is evaluating the various commercially available COVID-19 diagnostics products.
COVID-19: personal protective equipment (PPE) plan
Cross-government UK-wide plan to ensure that critical personal protective equipment (PPE) is delivered to those on the frontline responding to coronavirus (COVID-19).

Standing Committee on Emerging Infectious Diseases

Rapid Expert Consultation on SARS-CoV-2 Survival in Relation to Temperature and Humidity and Potential for Seasonality for the COVID-19 Pandemic (April 7, 2020)
Rapid Expert Consultation on the Effectiveness of Fabric Masks for the COVID-19 Pandemic (April 8, 2020)
Rapid Expert Consultation on SARS-CoV-2 Laboratory Testing for the COVID-19 Pandemic (April 8, 2020)
Rapid Expert Consultation on SARS-CoV-2 Viral Shedding and Antibody Response for the COVID-19 Pandemic (April 8, 2020)

Centre for Evidence Based Medicine

“When will it be over?”: An introduction to viral reproduction numbers, R0 and Re.
The UK Government is regularly reviewing the current lockdown measures, as it is required to do every 3 weeks, by law. With the peak of the pandemic yet to arrive in the UK, it seems certain that the current measures will continue. So when will the UK lockdown end? On 30 March 2020, Sir Patrick Vallance, the Government’s Chief Scientific Officer, gave an indication of how this decision may be guided, saying that Britain’s lockdown was having a “very big effect” on the R0, bringing it down “below one”. The figure to which he was referring is the basic reproduction number (or reproductive ratio) of a virus, called R0 (R nought or R zero). And it is important to know how to interpret it.

N-acetylcysteine: A rapid review of the evidence for effectiveness in treating COVID-19
- N-acetylcysteine (NAC) has been proposed for use in the therapy and/or prevention of several respiratory diseases and of diseases involving an oxidative stress including COVID-19.
- A search on 3rd April 2020 did not reveal any COVID-specific evidence for NAC, so we have fallen back on evidence in other acute respiratory disorders.
- Clinical trial evidence for the use of NAC as an antioxidant in influenza and other acute viral respiratory tract infections is very limited and therefore difficult to draw any concrete conclusions without further trial evidence.

Lopinavir/ritonavir: A rapid review of effectiveness in COVID-19
There is currently no strong evidence of efficacy of Lopinavir/ritonavir in the treatment of COVID-19. The limited studies identified, which overall are subject to methodological flaws. Several ongoing trials of Lopinavir/ritonavir are currently recruiting.

Cochrane Library

Coronavirus (COVID-19): evidence relevant to critical care (Updated 14th April)

Evidence Summary:
Evidence Summary of Paediatric Covid-19 Literature (10th April)

Health Service Journal
Three day window for expanded staff coronavirus tests
Health Service Journal 13th April
Testing available for NHS staff outside acute settings and their household
But those tested must be in first three days of the onset of symptoms
The test is still effective at five days

**British Society for Haematology**

**BSH guidance on B12 supplements during COVID pandemic.**
[For non-diet related deficiency, BSH suggest omitting injections until the COVID19 outbreak surge has passed, as liver stores last for a year. In diet related deficiency they advise suspending supplementation, or taking oral B12 50 mcg daily between meals if needed.]

**British Cardiovascular Society**

**BSH Letter to members: Retention of Essential Heart Failure Services during COVID-19 Pandemic (10th April)**

**Diabetes UK**

**Concise Advice on Inpatient Diabetes (updated 9th April)**

**Intensive Care Society**

**Guidance for prone positioning of the conscious COVID-19 patient 2020**
Intensive Care Society; 2020.
The COVID-19 pandemic has seen the critical care community treating increasing numbers of patients with ARDS over recent weeks, with one Chinese study reporting the prevalence of hypoxic respiratory failure in these patients at around 19%. Approximately 5% of all COVID-19 patients will require mechanical ventilation on an intensive care unit, with a further 14% requiring oxygen therapy. Published 13th April 2020

**Medicines and Healthcare Products Regulatory Agency (MHRA)**

COVID-19: All haemofiltration systems including machines and accessories – serious risks if users don't follow manufacturer instructions for set-up (MDA/2020/013)
Medicines and Healthcare Products Regulatory Agency (MHRA); 2020.
All manufacturers – there have been reports of off-label modifications to haemofiltration systems when treating Covid-19 patients leading to serious injury and death.

Anaesthetic machines: off-label use during the COVID-19 pandemic (MDA/2020/012)
Medicines and Healthcare Products Regulatory Agency (MHRA); 2020.
All anaesthesia machines with ventilators - using the anaesthesia device in treatment of critical illness, outside its intended use is considered off-label use but may be essential due to ventilator availability.

**Royal College of Obstetrics and Gynaecology**

Coronavirus (COVID-19) infection and pregnancy
Midwives, Royal College of Paediatrics and Child Health, Public Health England and Public Health Scotland.

**Royal College of Ophthalmologists**

UPDATED RCOphth PPE for ophthalmology 090420  
UPDATED RCOphth PPE Principles for ophthalmic staff protection 090420  
NEW PPE and staff protection requirements for ROP screening and treatment 090420  
Eye Care in ITU (adapted from UH Southampton) 090420  
London optometry referral triage guidance 090420

**Specialist Pharmacy Service updated 9th April**

Mixing critical care injectable medicines together in a syringe during COVID-19  
Summary of COVID-19 medicines guidance: Critical care  
Morphine sulfate: syringe compatibility information for use during COVID-19  
Alfentanil hydrochloride: syringe compatibility information for use during COVID-19  
Fentanyl citrate: syringe compatibility information for use during COVID-19  
Midazolam hydrochloride: syringe compatibility information for use during COVID-19  
Propofol: syringe compatibility information for use during COVID-19

**Research Papers**

Clinical characteristics of Coronavirus Disease 2019 in China  
Data from 1099 patients with confirmed Covid-19 in China are reported. The median age of the patients was 47 years. 5.0% were admitted to the ICU, 2.3% underwent invasive mechanical ventilation, and 1.4% died. The most common symptoms were fever (43.8% on admission and 88.7% during hospitalization) and cough (67.8%). The median incubation period was 4 days (IQ range 2 to 7). On admission ground-glass opacity was the most common radiologic CT finding (56.4%) and 83.2% had lymphocytopenia.

Epidemiology of Covid-19 in a long-term care facility in King County, Washington  
A confirmed case of Covid-19 in a skilled nursing facility led to a full investigation. A total of 167 cases affecting 101 residents (7 asymptomatic), 50 healthcare staff, and 16 visitors were found. Hospitalization rates for residents, visitors, and staff were 54.5%, 50.0%, and 6.0%/ Proactive steps by long-term care facilities to identify infected staff and visitors, actively monitor patients, and implement infection prevention and control measures are needed.

Prediction models for diagnosis and prognosis of covid-19 infection: systematic review and critical appraisal.  
Wynants L. BMJ 2020;369:m1328.  
Prediction models for covid-19 are quickly entering the academic literature. This review indicates that proposed models are poorly reported, at high risk of bias, and their reported performance is probably optimistic. Immediate sharing of well documented individual participant data from covid-19 studies is needed. Predictors identified in included studies could be considered as candidate predictors for new models. Methodological guidance should be followed.

Renin–Angiotensin–Aldosterone System Inhibitors in Patients with Covid-19  
The interaction between the SARS viruses and ACE2 has been proposed as a factor in their infectivity and there are concerns about the use of RAAS inhibitors.
ACE inhibitors and ARBs in patients with Covid-19 is needed. We highlight that the data in humans are too limited to reach conclusions. We discuss the uncertain effects of RAAS blockers on ACE2 levels in humans and suggest that withdrawal may be harmful in some high-risk patients with known or suspected Covid-19.

Stability of SARS-CoV-2 in different environmental conditions
The Lancet 2020;:Online first.
We previously reported the detection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in different clinical samples.1 This virus can be detected on different surfaces in a contaminated site.2 Here, we report the stability of SARS-CoV-2 in different environmental conditions.

Staying ahead of the wave
Doctors from Long island describes how their hospital has adapted to the Coronavirus, by creating a 16 bed triage unit off site to establish a split-flow process and later moving to a field ED tent catering for 100 patients a shift. They established a hospital-wide registry of persons under investigation for Covid-19 which allowed for proactive planning. To minimize direct contact patients were given iPads. They have found a safe and effective way to sterilize used N95 respirators.

Coagulopathy and antiphospholipid antibodies in patients with Covid-19
Describes a patient with Covid-19 and clinically significant coagulopathy, antiphospholipid antibodies, and multiple infarcts. The patient had evidence of ischemia in the lower limbs and two digits. CT imaging of the brain showed bilateral cerebral infarcts in multiple vascular territories. Antiphospholipid antibodies can arise transiently in critically ill patients and their presence may lead to thrombotic events that are difficult to differentiate from other causes of multifocal thrombosis.

Neonatal

A Contingency Plan for the Management of the 2019 Novel Coronavirus Outbreak in Neonatal Intensive Care Units

Management of Infants Born to Mothers with COVID-19
American Academy of Pediatrics (AAP); 2020.
Limited data are available for pregnant women and newborns with COVID-19. ... Pediatric data demonstrate that children of all ages are susceptible to SARS-CoV-2, and that infants under 1 year of age are at risk for severe disease although this still is a relatively rare outcome. Based on current limited evidence as of 3/30/2020, this report provides interim guidance for the management of infants born to mothers with confirmed and suspected COVID-19

An Uncomplicated Delivery in a Patient with Covid-19 in the United States
NEJM 2020

Universal Screening for SARS-CoV-2 in Women Admitted for Delivery
NEJM 2020

Palliative Care

Palliative care and the COVID-19 pandemic.
Pharmacology

A Trial of Lopinavir–Ritonavir in adults hospitalized with severe Covid-19
199 hospitalized adult patients with confirmed severe Covid-19 infection were randomly assigned to receive either lopinavir–ritonavir (L-R) plus standard care (StC) or StC alone. L-R was not associated with a difference from StC in the time to clinical improvement (HR 1.24; 95% CI 0.90 to 1.72). Mortality at 28 days was similar in the L-R group and the StC group ( difference −5.8 % points; 95% CI, −17.3 to 5.7). In patients with severe Covid-19 no benefit was observed with L-R treatment.

Compassionate use of Remdesivir for patients with Severe Covid-19
A 10-day course of Remdesivir was given to patients with confirmed SARS-CoV-2 infection who had an O2 sats of 94% or less while breathing air or receiving oxygen support. At baseline, 30 patients (57%) were receiving mechanical ventilation and 4 (8%) were receiving extracorporeal membrane oxygenation. 36 patients (68%) had an improvement in oxygen-support class. 25 patients (47%) were discharged, and 7 (13%) died. Randomized, placebo-controlled trials of remdesivir therapy are required.

For a comprehensive and searchable database of Covid-19 research papers see LitCovid from Pubmed.

If you require an evidence search on a particular aspect of Covid-19 or with regards to a particular patient group please get in touch:

Colchester Hospital Library: library.services@esneft.nhs.uk

Ipswich Hospital Library: hospital.library@esneft.nhs.uk

Please email rather than telephone

14th April 2020