

# COVID-19 Evidence Bulletin

# 22<sup>nd</sup> March 2021

Details of new guidance and evidence relating to the response to COVID-19. Please check SaTH, NHS and Government guidance in conjunction with these resources where necessary.

## Cardiovascular Care

**COVID-19 and its cardiovascular effects: a systematic review of prevalence studies** [Pellicori P. *Cochrane Database of Systematic Reviews*]

[OBJECTIVES: To assess the prevalence of pre-existing cardiovascular comorbidities associated with suspected or confirmed cases of COVID-19 in a variety of settings, including the community, care homes and hospitals. We also assessed the nature and rate of subsequent cardiovascular complications and clinical events in people with suspected or confirmed COVID-19.]

Available [here](#)

## Diagnosis

**Thoracic imaging tests for the diagnosis of COVID-19** [Islam N. *Cochrane Database of Systematic Reviews*]

[The 2020 edition of this review showed thoracic (chest) imaging to be sensitive and moderately specific in the diagnosis of coronavirus disease 2019 (COVID-19). In this update, we include new relevant studies, and have removed studies with case-control designs, and those not intended to be diagnostic test accuracy studies]

Available [here](#)

## Drug Therapy

**Beyond dexamethasone, emerging immuno-thrombotic therapies for COVID-19** [Jensen MP. *British Journal of Clinical Pharmacology*]

[Understanding mechanisms underpinning hyperinflammation & coagulopathy is essential to formulating rationale therapeutic approaches beyond use of dexamethasone. Article reviews pathophysiology thought to underlie COVID-19 with clinical correlates and therapies being investigated.]

Available [here](#)

**Sarilumab in patients admitted to hospital with severe or critical COVID-19: a randomised, double-blind, placebo-controlled, phase 3 trial** [Lescure FX. *The Lancet Respiratory Medicine*]

[This trial did not show efficacy of sarilumab in patients admitted to hospital with COVID-19 and receiving supplemental oxygen. Adequately powered trials of targeted immunomodulatory therapies assessing survival as a primary endpoint are suggested in patients with critical COVID-19.]

Available [here](#)

**Tocilizumab plus standard care versus standard care in patients in India with moderate to severe COVID-19-associated cytokine release syndrome (COVINTOC): an open-label, multicentre, randomised, controlled, phase 3 trial** [Soin AS. *The Lancet Respiratory Medicine*]

[Routine use of tocilizumab in patients admitted to hospital with moderate to severe COVID-19 is not supported. However, post-hoc evidence from this study suggests tocilizumab might still be effective in patients with severe COVID-19 and so should be investigated further in future studies.]

Available [here](#)

**Azithromycin for community treatment of suspected COVID-19 in people at increased risk of an adverse clinical course in the UK (PRINCIPLE): a randomised, controlled, open-label, adaptive platform trial** [PRINCIPLE Trial Collaborative Group. *The Lancet*]

[Our findings do not justify the routine use of azithromycin for reducing time to recovery or risk of hospitalisation for people with suspected COVID-19 in the community. These findings have important antibiotic stewardship implications during this pandemic, as inappropriate use of antibiotics leads to increased antimicrobial resistance, and there is evidence that azithromycin use increased during the pandemic in the UK.]

Available [here](#)

## Gastroenterology

**Predicting endoscopic activity recovery in England after COVID-19: a national analysis** [Ho KMA. *The Lancet Gastroenterology & Hepatology*]

[Our work highlights the impact of the pandemic on endoscopy services nationally. Even with mitigation measures, it could take much longer than a year to eliminate the pandemic-related backlog. Urgent action is required by key stakeholders (ie, individual NHS trusts, Clinical Commissioning Groups, British Society of Gastroenterology, and NHS England) to tackle the backlog and prevent delays to patient management.]

Available [here](#)

**COVID-19: Issues related to gastrointestinal disease in adults** [evidence summary from UpToDate]

Available [here](#). Last updated 10<sup>th</sup> March

**COVID-19: Issues related to liver disease in adults** [evidence summary from UpToDate]

Available [here](#). Last updated 19<sup>th</sup> March

## Immunity

**Antibody Response After SARS-CoV-2 Infection and Implications for Immunity: A Rapid Living Review** [Arkhipova-Jenkins I. *Annals of Internal Medicine*]

[Review (66 observational studies;n =16 525) found most adults with SARS-CoV-2 infection confirmed by RT-PCR develop detectable levels of IgM and IgG antibodies after infection with SARS-CoV-2 and IgG levels peak ~25 days after symptom onset and may remain detectable for ≥120 days.]

Available [here](#)

## Infection Control

**RCN Independent review of guidelines for the prevention and control of Covid-19 in health care settings in the United Kingdom: evaluation and messages for future infection-related emergency planning** [Royal College of Nursing]

[An independent review of guidelines for the prevention and control of COVID-19 in health care settings in the UK, and an evaluation and messages for future infection-related emergency planning.]

Available [here](#)

## Intensive and Critical Care

**COVID-19: Critical care and airway management issues** [evidence summary from UpToDate]

Available [here](#). Last updated 11<sup>th</sup> March

## Long COVID

**Guidance for healthcare professionals on return to work for patients with long-COVID** [Faculty of Occupational Medicine]

[This guidance is aimed at managers and employers to assist them in facilitating the return to work of employees who may find this difficult because of long-COVID.]

Available [here](#)

**Long Covid Minister needed to respond to growing crisis** [Patient Safety Learning]

[Patient Safety Learning and patient group Long Covid Support are calling for the creation of a dedicated minister for Long COVID.]

Available [here](#)

**Attributes and predictors of long COVID** [Sudre, CH et al. *Nature Medicine*]

[Describes a model that could be used to identify individuals at risk of long COVID for trials of prevention or treatment and to plan education and rehabilitation services]

Available [here](#)

**COVID-19: Long-Term Effects of COVID-19 – a rapid review** [Norwegian Institute of Public Health]

[This rapid review is a first look at possible long-term effects of COVID-19 (>28 days), including long COVID]

Available [here](#)

**Prevalence of potential respiratory symptoms in survivors of hospital admission after coronavirus disease 2019 (COVID-19): A systematic review and meta-analysis** [Cares-Marambio, K. *Chronic Respiratory Disease*]

[Fatigue, dyspnoea, chest pain, and cough were the most prevalent respiratory symptoms found in 52%, 37%, 16% and 14% of patients between 3 weeks and 3 months, after discharge in survivors of hospital admission by COVID-19, respectively]

Available [here](#)

## Paediatrics

### **Factors linked to severe outcomes in multisystem inflammatory syndrome in children (MIS-C) in the USA: a retrospective surveillance study** [Abrams JY. *The Lancet Child & Adolescent Health*]

[Multisystem inflammatory syndrome in children (MIS-C) is a newly identified and serious health condition associated with SARS-CoV-2 infection. Clinical manifestations vary widely among patients with MIS-C, and the aim of this study was to investigate factors associated with severe outcomes.

Identification of important demographic and clinical characteristics could aid in early recognition and prompt management of severe outcomes for patients with MIS-C.]

Available [here](#)

## Renal Care

### **COVID-19: Issues related to acute kidney injury, glomerular disease, and hypertension** [evidence summary from UpToDate]

Available [here](#). Last updated 12<sup>th</sup> March

### **COVID-19: Issues related to end-stage kidney disease** [evidence summary from UpToDate]

Available [here](#). Last updated 12<sup>th</sup> March

## Staff Wellbeing and Engagement

### **Staff experience: adapting and innovating during COVID-19** [NHS Employers]

[This resource showcases some of the NHS trusts that have adapted and innovated during the pandemic, to provide examples that may serve to strengthen local approaches and inform future practice in supporting staff experience.]

Available [here](#)

## Surgery

### **COVID-19: British Association of Dermatologists Position Statement on the Risk of Cancer from Viral Particles in Surgical Plume** [British Association of Dermatologists]

[Risk of surgical plume to patients, assistants and surgeons can be reduced if the plume is removed by means of a smoke extractor used during surgery. These are relatively low-cost portable devices that can be used when surgeons consider that there may be risk.]

Available [here](#)

## Vaccination

### **Early effectiveness of COVID-19 vaccination with BNT162b2 mRNA vaccine and ChAdOx1 adenovirus vector vaccine on symptomatic disease, hospitalisations and mortality in older adults in England**

[MedRxiv]

[A pre-print of a Public Health England study shows both Pfizer-BioNTech and Oxford-AstraZeneca vaccines significantly reduce severe COVID-19 in older adults. Since January, protection against symptomatic COVID, four weeks after the first dose, ranged between 57% and 61% for one dose of Pfizer and between 60% and 73% for the Oxford-AstraZeneca vaccine.]

Available [here](#). This article is a pre-print, and has not been peer-reviewed

**Safety and immunogenicity of an inactivated SARS-CoV-2 vaccine, BBV152 [Covaxin]: interim results from a double-blind, randomised, multicentre, phase 2 trial, and 3-month follow-up of a double-blind, randomised phase 1 trial** [Ella R. *The Lancet Infectious Diseases*]

[In the phase 1 trial, BBV152 induced high neutralising antibody responses that remained elevated in all participants at 3 months after the second vaccination. In the phase 2 trial, BBV152 showed better reactogenicity and safety outcomes, and enhanced humoral and cell-mediated immune responses compared with the phase 1 trial. The 6 µg with Algel-IMDG formulation has been selected for the phase 3 efficacy trial.]

Available [here](#)

### KnowledgeShare Evidence Alerts

KnowledgeShare contains many updates on COVID-19 that can be accessed from the KnowledgeShare website without a password. If you'd like to receive these by email (along with updates on any other topics of interest) please complete the [form](#).

### About this bulletin

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