

COVID-19 Evidence Bulletin

16th August 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.

Breastfeeding

WHO recommends continuing breastfeeding during COVID-19 infection and after vaccination [World Health Organization]

[The virus that causes COVID-19 has not been detected in breastmilk, according to a limited number of studies to date, indicating that it is safe to carry on breastfeeding, while taking recommended precautions, even if a mother develops COVID-19. Vaccinating a breastfeeding mother to protect her from COVID-19 poses no risk to her infant. Breastfeeding mothers who have received the vaccine have antibodies in their milk, which could help to protect their babies from infection with the virus.]

Available [here](#)

Cardiovascular Care

Influence of angiotensin converting enzyme inhibitors/angiotensin receptor blockers on the risk of all-cause mortality and other clinical outcomes in patients with confirmed COVID-19: A systemic review and meta-analysis [Jia N. *Journal of Clinical Hypertension*]

[Of 28 studies (n=73,465), 22 of them (n=19, 871) reporting incidence of all-cause mortality found no link between using ACEIs/ARBs and risk of mortality (OR 1.02, 95% CI 0.71–1.46, p = 0.90), but they may be associated with a decreased risk of 30-day all-cause mortality. Patients with hypertension may benefit from using ACEIs/ARBs.]

Available [here](#)

Association of calcium channel blocker use with clinical outcome of COVID-19: A meta-analysis

[Alsagaff MY. *Diabetes & Metabolic Syndrome: Clinical Research & Reviews*]

[CCB usage was not associated with the outcome of COVID-19. However, CCB was associated with a decreased mortality rate in hypertensive COVID-19 patients.]

Available [here](#)

Risk of acute myocardial infarction and ischaemic stroke following COVID-19 in Sweden: a self-controlled case series and matched cohort study [Katsoularis I. *The Lancet*]

[Our findings suggest that COVID-19 is a risk factor for acute myocardial infarction and ischaemic stroke. This indicates that acute myocardial infarction and ischaemic stroke represent a part of the clinical picture of COVID-19, and highlights the need for vaccination against COVID-19.]

Available [here](#)

Coexisting Conditions

Management of coexisting conditions in the context of COVID-19 [evidence summary from BMJ Best Practice]

[Guidelines recommend measures to manage acute and chronic conditions during the COVID-19 pandemic: updated.]

Available [here](#). Last updated 11th August

Critical Care

RECOVERY-RS trial finds continuous positive airway pressure (CPAP) reduces need for invasive ventilation in hospitalised COVID-19 patients [National Institute for Health Research]

[Preliminary results of this UK RCT (n=1272) found CPAP reduced the rate of tracheal intubation or 30-day mortality vs standard oxygen therapy (36.3% vs 45.1%) however high flow nasal oxygenation was not superior to standard oxygen for this outcome (44.4% vs 45.1%).]

Available [here](#)

Diagnosis

Early detection of COVID-19 in the UK using self-reported symptoms: a large-scale, prospective, epidemiological surveillance study [Canas LS. *The Lancet Digital Health*]

[Self-reported symptoms during the COVID-19 pandemic have been used to train artificial intelligence models to identify possible infection foci. To date, these models have only considered the culmination or peak of symptoms, which is not suitable for the early detection of infection. Early detection of SARS-CoV-2 infection is feasible with our model. Such early detection is crucial to contain the spread of COVID-19 and efficiently allocate medical resources.]

Available [here](#)

Drug Therapy

Remdesivir for the treatment of COVID-19 [Ansems K. *Cochrane Database of Systematic Reviews*]

[OBJECTIVES: To assess the effects of remdesivir compared to placebo or standard care alone on clinical outcomes in hospitalised patients with SARS-CoV-2 infection, and to maintain the currency of the evidence using a living systematic review approach.]

Available [here](#)

Doxycycline for community treatment of suspected COVID-19 in people at high risk of adverse outcomes in the UK (PRINCIPLE): a randomised, controlled, open-label, adaptive platform trial [Butler CC. *The Lancet Respiratory Medicine*]

[In patients with suspected COVID-19 in the community in the UK, who were at high risk of adverse outcomes, treatment with doxycycline was not associated with clinically meaningful reductions in time to recovery or hospital admissions or deaths related to COVID-19, and should not be used as a routine treatment for COVID-19.]

Available [here](#)

Long COVID

COVID-19: Evaluation and management of adults following acute viral illness [evidence summary from UpToDate]

Available [here](#). Last updated 9th August

Long COVID and mental health [Palmer SJ. *British Journal of Community Nursing*].

[Increasingly, mental health issues such as anxiety and depression, as well as psychosis have been linked to the condition; Neurological consequences linked to long COVID include confusion and dementia symptoms. These may be linked to a cytokine 'storm' from the immune response to the infection, which affects the blood brain barrier; Psychological therapies, self-help strategies for coping and self-care, alongside medication, may help treat the mental health symptoms of long COVID.]

Available [here](#)

Coronavirus and the social impacts of 'long COVID' on people's lives in Great Britain: 7 April to 13 June 2021 [Office for National Statistics]

[Indicators from the Opinions and Lifestyle Survey covering the period 7 April to 13 June 2021 to understand the impact of the coronavirus (COVID-19) pandemic on people by their self-reported long COVID-19.]

Available [here](#)

Persistence of long COVID symptoms in COVID-19 survivors worldwide and its potential pathogenesis - A systematic review and meta-analysis [Fahriani, M. *Narra J*]

[The study sought to determine the prevalence of persistent long COVID symptoms such as anxiety, depression, dizziness, chest pain, sleep difficulty, palpitations, weight loss, and hair loss among coronavirus disease 2019 (COVID-19) survivors worldwide and to discuss the potential pathogenesises.]

Available [here](#)

Mental Health

Mental health interventions for healthcare staff in infectious disease outbreaks [The Mental Elf]

[In her debut blog, Bryony Porter summarises a systematic review exploring interventions to address mental health issues in healthcare workers during infectious disease outbreaks.]

Available [here](#)

Obstetrics and Gynaecology

Rapid Cycle Implementation and Retrospective Evaluation of a SARS-CoV-2 Checklist in Labor and Delivery [Zucco L. *BMC Health Services Research*]

[Preparedness efforts for a COVID-19 outbreak required redesign and implementation of a perioperative workflow for the management of obstetric patients. In this report we describe factors which influenced rapid cycle implementation of a novel comprehensive checklist for the perioperative care of the COVID-19 parturient. Analysis of factors influencing implementation using CFIR revealed domains of process implementation and innovation characteristics as overwhelming facilitators for success.]

Available [here](#)

MBRRACE-UK: Saving Lives, Improving Mothers' Care rapid report: Learning from SARS-CoV-2-related and associated maternal deaths in the UK March-May 2020 [MBRRACE-UK]

[Findings from the new MBRRACE-UK 2021 rapid report suggest that there needs to be wider awareness of how best to treat pregnant and postnatal women with COVID-19.]

Available [here](#)

Paediatrics

COVID-19 rapid guideline: managing COVID-19 [NICE]

[NICE have corrected an error in the practical info section of the recommendations on corticosteroids. The dose of prednisolone for children with a greater than 44-week corrected gestational age is 1 mg/kg.] Available [here](#). Last updated 10th August

Testing

Diagnostic accuracy of rapid antigen tests in asymptomatic and presymptomatic close contacts of individuals with confirmed SARS-CoV-2 infection: cross sectional study [Schuit E. *BMJ*]

[The sensitivities of both rapid antigen tests in asymptomatic and presymptomatic close contacts tested on day 5 onwards after close contact with an index case were more than 60%, increasing to more than 85% after a viral load cut-off was applied as a proxy for infectiousness.] Available [here](#)

Vaccination

JCVI statement, August 2021: COVID-19 vaccination of children and young people aged 12 to 17 years

[Department of Health and Social Care]
[This statement sets out JCVI's latest considerations and advice regarding the potential extension of the COVID-19 vaccination programme to children and young people.] Available [here](#)

JCVI issues updated advice on COVID-19 vaccination of young people aged 16 to 17 [Public Health England]

[The Joint Committee on Vaccination and Immunisation (JCVI) is today advising that all 16 and 17 year olds receive their first dose of the Pfizer-BioNTech vaccine.] Available [here](#)

Ethics of enforcing the vaccine on healthcare staff [Palmer SJ. *British Journal of Healthcare Assistants*]

Available [here](#)

Safety, tolerability, and immunogenicity of an aerosolised adenovirus type-5 vector-based COVID-19 vaccine (Ad5-nCoV) in adults: preliminary report of an open-label and randomised phase 1 clinical trial

[Wu S. *The Lancet Infectious Diseases*]
[Aerosolised Ad5-nCoV is well tolerated, and two doses of aerosolised Ad5-nCoV elicited neutralising antibody responses, similar to one dose of intramuscular injection. An aerosolised booster vaccination at 28 days after first intramuscular injection induced strong IgG and neutralising antibody responses. The efficacy and cost-effectiveness of aerosol vaccination should be evaluated in future studies.] Available [here](#)

Vaccine-induced immune thrombocytopenia and thrombosis (VITT)

COVID-19 rapid guideline: vaccine-induced immune thrombocytopenia and thrombosis (VITT) [NICE]
[Guideline covers vaccine-induced immune thrombocytopenia and thrombosis (VITT), a syndrome which has been reported in rare cases after COVID-19 vaccination. VITT may also be called vaccine-induced prothrombotic immune thrombocytopenia (VIPIT) or thrombotic thrombocytopenic syndrome (TTS). Because VITT is a new condition, there is limited evidence available to inform clinical management, identification and management of the condition is evolving quickly as the case definition becomes clearer.]

Available [here](#)

Cerebral venous thrombosis after vaccination against COVID-19 in the UK: a multicentre cohort study.

[Perry RJ. *The Lancet*]

[A new syndrome of vaccine-induced immune thrombotic thrombocytopenia (VITT) has emerged as a rare side-effect of vaccination against COVID-19. Cerebral venous thrombosis is more severe in the context of VITT. Non-heparin anticoagulants and immunoglobulin treatment might improve outcomes of VITT-associated cerebral venous thrombosis. We propose new diagnostic criteria that are more appropriate.]

Available [here](#)

Clinical Characteristics and Pharmacological Management of COVID-19 Vaccine–Induced Immune Thrombotic Thrombocytopenia With Cerebral Venous Sinus Thrombosis: A Review [Rizk JG. *JAMA Cardiology*]

[This narrative review describes the clinical characteristics and pathophysiology of this disorder, and evaluates the current evidence regarding pharmacological treatment, including anticoagulants, immunoglobulin and steroids.]

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](#).

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