Public Health England

Position statement regarding COVID-19 tests evaluated by Public Health England (PHE)
PHE has undertaken rapid evaluations of selected commercial diagnostic kits for their suitability for COVID-19 testing and serological assays for their suitability for detecting the production of COVID-19 antibodies. Two tests for covid-19 antibodies developed by the drug companies Roche and Abbott are “highly specific” but were both found to have lower sensitivity than was previously reported by the companies.
Roche and Abbott had reported that their assays had a sensitivity of 100% (the true positive rate) 14 days after symptom onset. However, PHE found that they had a sensitivity of 87% and 93.9% at 14 days, respectively.
Evaluation of Roche Elecsys Anti- SARS-CoV-2 serology assay for the detection of anti-SARS-CoV-2 antibodies
Evaluation of the Abbott SARS-CoV-2 IgG for the detection of anti-SARS-CoV-2 antibodies

No health without mental health: why this matters now more than ever
PHE are leading the work to support the population’s mental health through COVID-19. This blog sets out PHE’s local and national approach to dealing with the impact of COVID-19 on mental health and wellbeing
Details

Duncan Selbie’s Friday Message
This week’s message focuses on the recruitment of 24,000 contact tracers, expanding PHE’s local health protection teams, the new African Union COVID-19 Response Fund, and Mental Health Awareness Week.

Reopening Schools
This week two reports have been published – one from SAGE and another from the unofficial “Independent Sage” group – consider whether and how it might be safe to reopen schools in England.
Neither analysis claims to offer the final word.
Government Office for Science: Coronavirus (COVID-19): scientific evidence supporting the UK government response
The list of evidence provided to SAGE has been updated with a batch of reports on children and schools.
SPI-M & SPI-B: Modelling and behavioural science responses to scenarios for relaxing school closures
Interdisciplinary Task and Finish Group on the Role of Children in Transmission: Modelling and behavioural science responses to scenarios for relaxing school closures
Independent SAGE
Independent Sage report says 1 June is too soon and that delaying a school reopening by two weeks “approximately halves the risk to children” – though the risk to children is extremely low overall
Details

Caveat: Content of these briefings has not been critically appraised! Apply your appraisal skills to articles referenced!
Channel 4 Factcheck looks at both reports
Details

BMJ news: Covid-19: Delaying school reopening by two weeks would halve risks to children, says iSAGE
Details

Department of Health and Social Care
Government announces that everyone in UK with symptoms now eligible for coronavirus tests
Anyone experiencing a new, continuous cough; high temperature; and now also a loss of or change in normal sense of smell or taste can book a test by visiting www.nhs.uk/coronavirus, ahead of the rollout of the test and trace service.
Details

Government to offer antibody tests to health and social care staff and patients in England
Antibody tests will be rolled out to staff, patients and residents in health and care settings in England, as part of a new national antibody testing programme. It is not yet clear if antibodies indicate immunity; this is being investigated in the SIREN study.
The Government has published guidance on the testing programme, setting out what antibody testing is, what the test will tell you, and who is eligible. An infographic showing the difference between coronavirus tests is also available.
Guidance
Infographic

Trial of rapid coronavirus test launched in Hampshire
The Health Secretary has announced that a coronavirus swab test that gives results in 20 minutes, without needing to be sent to a laboratory, is being trialled in A&E departments, GP testing hubs and care homes in Hampshire. It will run for 6 weeks and involve up to 4000 people.
Details

£300 million additional funding for local authorities to support new test and trace service
Local authorities will be central to supporting the new test and trace service in England, with the government providing a new funding package of £300 million.
Details

NHS England
Type 1 and Type 2 diabetes and COVID-19 related mortality in England
Population cohort study (263,830 & 2,864,670 people with type 1 & 2 diabetes respectively) found crude mortality rates for COVID-19 in people with diabetes of 138.3 and 260.6 per 100,000 persons for type 1 & 2 respectively, with general population rate being 38.8/100,000.
Also, people with type 1 and type 2 diabetes had 2.86 and 1.81 times the odds respectively of dying in hospital with COVID-19 compared to those without diabetes, when also adjusted for previous hospital admissions with coronary heart disease, cerebrovascular disease or heart failure.
Details
NHS expands offer of help to people with diabetes during coronavirus outbreak
NHS England has called on people with diabetes to access help available to them, including a new dedicated helpline, together with Diabetes UK, Novo Nordisk and Insulet, to advise those who need help with insulin, as well as online tools to help manage condition during outbreak.
Details

Research and analysis from academic journals – non-coronavirus-related
The Lancet: Variations between women and men in risk factors, treatments, cardiovascular disease incidence, and death in 27 high-income, middle-income, and low-income countries (PURE): a prospective cohort study
Study (n=202,072) found in women, CVD risk factor burden is lower, primary prevention strategies (PS) used more frequently (accompanied by lower CVD & mortality incidence) and secondary PS, cardiac investigations/interventions less frequently but not linked to more adverse outcomes
Full text

NEJM: Emerging and Re-emerging Sexually Transmitted Infections
Review discusses epidemiologic features of these infections (e.g. shigella, hepatitis A, Neisseria meningitidis, Zika), including insights provided by genomic technologies, diagnostic approaches, and practical issues relating to treatment and control.
Login needed

BMJ Open: Cardiovascular risk profiles and the uptake of the NHS Healthcheck programme in male prisoners in six UK prisons: an observational cross-sectional survey
Cardiovascular risk was comparable with community rates and in some prisons, much higher. Rates of anxiety and depression were high. The national policy for selecting prisoners for Healthchecks may leave many high-risk prisoners without appropriate cardiovascular preventative assessments.
Full text

Research and analysis from academic journals – coronavirus-related
The Lancet Infectious Diseases: Risk factors for SARS-CoV-2 among patients in the Oxford Royal College of General Practitioners Research and Surveillance Centre primary care network: a cross-sectional study
Study (3802 SARS-CoV-2 test results, 587 positive) reported an association with increasing age, male sex, population density, more deprived areas, and black ethnicity, and increased risk of a positive test. Current smokers had lower odds of a positive test. These findings suggest that risk factors for SARS-CoV-2 infection in this primary care study are similar to those associated with more severe COVID-19 disease. However, further research is needed into the effect of chronic conditions on the risk of infection and disease severity, ethnicity variations, and the risk to smokers.
Full text
The Lancet Infectious Diseases: Individual quarantine versus active monitoring of contacts for the mitigation of COVID-19: a modelling study

Assuming mean serial interval of 4.8 days, incremental benefit of individual quarantine over active monitoring was substantial as a result of shorter time from infection to onward transmission and more presymptomatic transmission, but similarly effective when based on 7.5 days.

Full text


International modelling study (UK not included) suggests that an alternating cycle of 50 days of lockdown followed by 30 days of easing could be an effective strategy for reducing deaths and intensive care admissions from covid-19. However, this would need to be accompanied by efficient testing, case isolation, contact tracing, and shielding of vulnerable people.

Full text

BMJ: Features of 20 133 UK patients in hospital with covid-19 using the ISARIC WHO Clinical Characterisation Protocol: prospective observational cohort study

Further results from this ongoing study show that 41% were discharged alive, 26% died and 34% were continuing to receive care. Of the 17% requiring admission to high dependency/intensive care units, corresponding figures were 28%, 32% and 41%. This large prospective study of patients in hospital with Covid-19 continues to enrol patients. The commonest co-morbidities in these patients included chronic cardiac disease (31%), uncomplicated diabetes (21%), non-asthmatic chronic pulmonary disease (18%), and chronic kidney disease (16%). Aside from chronic co-morbidities, factors associated with higher in-hospital mortality included increasing age, male sex and obesity. The authors note that the observed mortality is higher than that seen in almost all other studies, and that this could be due to the older age of the cohort (median 73 years), health system differences, and practices for advanced care planning.

Full text

A linked editorial notes that better information is needed on care before, during and beyond the hospital, and that physicians need guidance about prevention, transmission, monitoring, home care, integration with primary care, risk factors for clinical worsening and criteria for escalating patients to emergency care.

Editorial

BMJ: Use of all-cause mortality to quantify the consequences of covid-19 in Nembro, Lombardy: descriptive study

Analysis (11,505 residents) noted monthly all-cause mortality between Jan and Feb 2020 peaked at 21.5/1000 person years; increased to 154.4/1000 in March, driven by number of deaths among older people (≥65 years), especially men, and decreased to 23/1000 in first 11 days in April

Details

Annals of Oncology: Collateral damage: the impact on outcomes from cancer surgery of the COVID-19 pandemic

English modelling study found that for cancer resection surgery, average life years gained are 18.1 under standard conditions and 17.1 or15.9 with a delay of 3 or 6 months, respectively(corresponding to average loss of 0.97 or 2.19 life years per patient owing to delayed surgery)
Authors highlight that modest delays in surgery for cancer incur significant impact on survival, and that to avoid a downstream public health crisis, diagnostic and surgical pathways must be maintained at normal throughput, with rapid attention to any backlog already accrued.

**Details**

**JAMA: Olfactory Dysfunction in COVID-19: Diagnosis and Management**
Viewpoint notes link with COVID-19 in many patients and advises this symptom should prompt self-isolation and testing for SARS-CoV-2 when possible. Active, collaborative research is required to delineate natural history and appropriate management of chemosensory impairment.
[Full text](#)

**JECH: A first estimation of the impact of public health actions against COVID-19 in Veneto (Italy)**
Containment strategies seem to have positively impacted the progression of the COVID-19 epidemic outbreak in Veneto.
[Full text](#)

**The Lancet Diabetes & Endocrinology: Vitamin-D and COVID-19: do deficient risk a poorer outcome?**
In Focus article notes growing body of circumstantial evidence linking outcomes of COVID-19 and vitamin D status. It discusses 2 potential roles for vitamin D in response to COVID-19 infection, and recommendation for population to take vitamin D supplements during pandemic.
[Full text](#)

**JAMA: Planning for a COVID-19 Vaccination Program**
Viewpoint advises that groundwork for public acceptance of a COVID-19 vaccine must be carefully started before a vaccine becomes available. It suggests a number of approaches to promote future COVID-19 vaccine uptake.

“Vaccine hesitancy is a major barrier to vaccine uptake and the achievement of herd immunity, which is required to protect the most vulnerable populations. Depending on varying biological, environmental, and socio-behavioural factors, the threshold for COVID-19 herd immunity may be between 55% and 82% of the population.

Given that certain individuals will be ineligible for COVID-19 vaccination due to age, immunocompromise, and other pre-existing medical conditions, a vaccine refusal rate greater than 10% could significantly impede attainment of this goal.”
[Full text](#)

**BMJ analysis: Covid-19: Doctors sound alarm over hospital transmissions**
With the pandemic continuing, the risk of hospital acquired infection is worrying doctors. Doctors have told The BMJ they are deeply concerned at the number of patients becoming infected with covid-19 in NHS hospitals in England and have called for more stringent infection control measures to combat its spread.

They cite limited capacity for testing and retesting as a barrier to keeping COVID and non-COVID patients separated in so called “green” and “red” zones. There also have concerns about the availability of side rooms and cubicles to keep patients separate and believe that poor ventilation in areas other than intensive care units may be contributing to nosocomial infections.
[Full text](#)
The Lancet: Epidemiology, clinical course, and outcomes of critically ill adults with COVID-19 in New York City: a prospective cohort study
Study (n=257) found older age & cardiopulmonary comorbidities linked to increased mortality as in Italy & China. Novel findings include links between biomarkers for inflammation/thrombosis and mortality, as well as high incidence of critical illness among racial/ethnic minorities.
According to a commentary, this study confirms that COVID-19 is characterised by a high incidence of multiple organ dysfunction. It add that the study conveys important messages; in particular, it shows that the disease is characterised by a high mortality (101 [39%] after a minimum follow-up of 28 days) and prolonged clinical course, as shown by the high percentage of patients still in the hospital (94 [37%]) at the end of follow-up.
Full text

The Lancet: Steam inhalation and paediatric burns during the COVID-19 pandemic
This comment discusses common misconception that steam inhalation is beneficial in preventing and treating respiratory tract symptoms. It warns that it is a hazard to children, and resulting scalds can ultimately lead to hospital admission, surgery, and life-long disfigurement. Burns Unit at Birmingham Children’s Hospital has seen a 30-fold increase in number of such scalds.
Full text

BMJ news: Covid-19: MPs call on Public Health England to publish evidence for decision to drop community testing
A cross party group of MPs has said that PHE’s failure to publish the evidence behind its decision to discontinue community testing at the start of the covid-19 outbreak is “unacceptable.”
In a 19 page letter to the prime minister, the Science and Technology Committee called for publication of the evidence base and rationale informing Public Health England’s decision to concentrate testing for covid-19 in a limited number of its own laboratories and to expand testing capacity gradually, rather than surging capacity through a large number of available laboratories in research institutes, universities, and the public and private sectors.
Full text

BMJ Editorial: Covid-19: A wake-up call
Fiona Godlee summarises the BMJ Covid publications this week
Full text

BMJ Editorial: Public inquiry into UK’s response to covid-19
This editorial notes that a comprehensive public enquiry into the UK’s response to Covid-19 will be essential but will take years, and that the UK needs answers within months before a second wave develops. The main areas requiring scrutiny are discussed.
Full text

BMJ opinion: Staying apart, together—optimising wellbeing in older people in the time of covid-19
Suggesting strategies which are useful for supporting older people who are at highest risk from covid-19 in isolation both as a measure against infection and also to support their mental and physical wellbeing
Full text
BMJ opinion: Is self-isolation for seven days enough to stop the spread of covid-19?
Government advice that individuals only need to continue to self-isolate if they still have a high temperature regardless of the continuation of other symptoms, with no recommended fever-free period at the end is at odds with guidance from other countries.
Full text

BMJ feature: How the erosion of our public health system hobbled England’s covid-19 response
This feature suggests that tensions with government, challenges in collaborating with the NHS, and the legacy of savage cuts have all hampered the important role of public health in the pandemic.
Full text

The Lancet Offline: Health in the unhappy time of COVID-19
Richard Horton writes the latest Offline on the first-ever virtual World Health Assembly, held during the worst acute global health crisis since WHO’s creation in 1948
Full text

BBC Health News
Review finds children half as likely to catch coronavirus as adults
According to a systematic review of 6,332 studies (18 with useful data), led by UCL and the London School of Hygiene and Tropical Medicine, those aged under 18-20 years were 56% less likely than an adult (aged over 20 years) to catch Covid-19 when exposed to an infected person.
NB: The findings are awaiting peer review and formal publication.
Details

University of Oxford Covid-19 vaccine trial to include children and older adults
The first phase of the trial involved healthy adults aged 55 years and under. The age range of participants in the second phase, which will include over 10,200 people, will be expanded to include those aged 56-69 years, over 70 years, and children aged 5-12 years.
Details

Biospace Inc
AstraZeneca aims for 30 million doses of COVID-19 Vaccine for U.K. by September 2020
AstraZeneca has partnered up with the University of Oxford on the development and distribution of Oxford’s COVID-19 vaccine. The company reported expectation of the manufacture of 100 million doses by the end of the year, if vaccine proves to be safe and effective.
Details

National Audit Office
Overview of the UK government’s response to the COVID-19 pandemic
This report presents a factual summary of the background; government activity and costs; and approach to examining the UK government’s response. It does not assess the value for money of the measures adopted by government or the effectiveness of its response.
It finds that between 31 January and 4 May, the government made more than 500 announcements. The report sets out £124.3 billion of programmes, initiatives and spending commitments in response to the
pandemic. It concludes that the costs of the government’s response are large and uncertain, and will depend on the continuing health and economic impacts of the pandemic.

Details

**Digital transformation in the NHS**

This report describes the current state of digital services in the NHS and examines the readiness of the NHS to deliver digital transformation. It focuses on strategy and implementation plans, including lessons from past strategies and progress made to date. It also considers the governance of digital transformation, financial and human resources and technical challenges.

Details

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**Office for National Statistics**

**Coronavirus (COVID-19) Infection Survey pilot: England, 21 May 2020**

The ONS has published the second regular weekly release analysing results from the COVID-19 Infection Survey.

Within this bulletin, we refer to the number of coronavirus (COVID-19) infections within the community population; community in this instance refers to private households, and it excludes those in hospitals, care homes or other institutional settings.

Main points:
- At any given time between 4 May and 17 May 2020, it is estimated that an average of 0.25% of the community population had COVID-19 (95% confidence interval: 0.16% to 0.38%)
- This equates to an average of 137,000 people in England (95% confidence interval: 85,000 to 208,000); a similar level to the previous estimate, indicating that the number of people with COVID-19 is relatively stable.

An estimated average of 61,000 people in English households were being newly infected with the coronavirus (COVID-19) per week – an incidence rate of 0.11 new infections per 100 people.

The estimated number of people in England that had COVID-19 at any point in time during the two weeks from 4 May to 17 May is slightly less than the estimate we reported in our publication on Thursday 14 May, which covered the period 27 April to 10 May. This change is relatively small and should be interpreted as showing that the number of people in England that have COVID-19 has stayed relatively stable.

Details

**Coronavirus and the social impacts on Great Britain: 22 May 2020**

Findings from the weekly Opinions and Lifestyles Survey (OPN) relate to the period 14-17 May 2020. This is the first period since the Prime Minister’s launch of the coronavirus (COVID-19) recovery plan.

- Lack of freedom and independence is the most common impact on adults, with 65% citing it as their main concern. Other concerns mentioned include not being able to plan (54%) and the effect on well-being (43%).
- Visiting a park or public green space was an activity enjoyed by 39% of adults in GB in the previous seven days. Of these, 17% had met up with friends or family from a different household. Around 1 in 7 (14%) adults had not left their home over the past seven days; rising to 33% of people with an underlying health condition.

Details
Delivering insight on the COVID-19 pandemic: How the ONS has informed the response so far
The mission of the ONS is to ensure public understanding and decision-making is informed by timely and high-quality analysis and statistics. During the course of the COVID-19 pandemic, the ONS has responded to the need for rapid information that has been used by decision-makers. Deputy National Statistician Iain Bell reflects on how the ONS has informed the response to the pandemic so far.

Centre for Mental Health
Covid-19 and the nation’s mental health: Forecasting needs and risks in the UK
This briefing, based on data from previous epidemics and the aftermath of the 2008 banking crisis, suggests that around half a million more people in the UK will experience a mental health difficulty over the next year as a result of the pandemic. If a second wave of covid-19 occurs and the economy is damaged further the effects on mental health will be even greater and will last longer.

Social Market Foundation
Recreating parks: securing the future of our urban green spaces
In this briefing paper, the cross-party thinktank states that parks and green spaces should be seen as a tool of health care in the same way as medicines and therapies. Giving the NHS a role in supporting parks and green spaces would allow doctors to make more use of social prescribing techniques where patients are told to take exercise and spend time outdoors to boost physical and mental health.

King’s Fund and Organisation for Economic Co-operation and Development (OECD)
Improvements in life expectancy in many high-income countries (e.g. Europe including the United Kingdom (UK), Australia, Canada, the United States (US)), have slowed markedly in recent years. The King’s Fund and the Organisation for Economic Co-operation and Development (the OECD) have been working to understand what’s driving this slowdown, in order to inform efforts by governments to tackle the causes.

Is cardiovascular disease slowing improvements in life expectancy?
Evidence that cardiovascular disease is contributing to the slowdown in improvements in life expectancy in some OECD countries prompted the OECD and The King’s Fund to convene an international workshop to examine this issue. Invitees included members of the OECD’s Health Care Quality and Outcomes Working Party and five international experts. This publication describes the workshop proceedings and conclusions about the evidence on trends in cardiovascular disease mortality, their drivers and the policy implications.

Caveat: Content of these briefings has not been critically appraised! Apply your appraisal skills to articles referenced!
Health Evidence Matters provides clinical and public health evidence reviews and training in evidence-based practice skills.

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Care Quality Commission
Sharing insight, asking questions, encouraging collaboration: CQC publishes first insight document on COVID-19 pressures
This is the first in what will be a regular series of documents intended to highlight COVID-19 related pressures on the sectors that CQC regulates. It focuses on adult social care, reviewing data on outbreaks, and highlighting the impact of COVID-19 on staff wellbeing.
Details

NHS Providers
Spotlight on recent NHS discharges into care homes
This briefing sets out how national guidance around NHS discharges into care homes developed in March and April 2020, how trusts sought to support care homes during this period and why trusts refute the suggestion that they 'systematically' and 'knowingly' transferred known Covid-19 patients into care homes.
Details

All Party Parliamentary Group
Social connection in the Covid-19 crisis
This report presents the findings of the All Party Parliamentary Group on Social Integration inquiry into social connection during the Covid-19 crisis. It finds that the lockdown has reinforced the importance of digital inclusion in this era, and has also demonstrated the importance of the 'old-fashioned' ways of communicating – through letters, the telephone and knocking on the door to ensure that no one is excluded.
Details

Local Government Association
Loneliness, social isolation and COVID-19: practical advice
The LGA and ADPH have jointly produced this practical advice for Directors of Public Health and others leading the response to the loneliness and social isolation issues arising from COVID-19.
Details

NHS Digital
Summary information published on high-risk patients on the Shielded Patient List
Anonymous summary data have been published for the first time on people who have been identified as being on the coronavirus (COVID-19) Shielded Patient List. It will be updated frequently to inform the public and support the health and social care system with planning.
Details

Universities UK
Stepchange: mentally healthy universities
This refreshed strategic framework sets out a 'whole university' approach to mental health and wellbeing at universities. It calls on universities to see mental health as foundational to all aspects of university life, for all students and all staff.
Details