Knowledge Through Expertise

NHS Hampshire Healthcare Library Service

COVID-19 published articles (Nov 2021)

This bulletin will highlight various articles – some articles are open access, otherwise please contact us to obtain an article. If you would like us to search on a particular topic – COVID-19 related, or otherwise, please do let us know.

Further information and resources are also available on the library website at
http://www.hantshealthcarelibrary.nhs.uk/covid-19-resources.asp

Evidence based summaries, systematic reviews and original research

- General COVID-19 articles
- Cardiovascular systems
- Care Homes & Long Term Care
- COVID therapies
- Critical Care
- Emergency Care
- End of Life Care
- Equality and Diversity
- Infection Prevention & Control
- Mental Health
- Obs & Gynae (incl.midwifery)
- Oncology
- Paeds & Neonates
- Pathology
- PPE
- Public Health
- Rehabilitation
- Respiratory Care
- Statistics
- Vaccines

General COVID-19 articles

Coronavirus: lessons learned to date.
House of Commons and Science and Technology Committee and Health and Social Care Committee; 2021.
https://committees.parliament.uk/committee/81/health-and-social-care-committee/news/157991/coronavirus-lessons-learned-to-date-report-published/
[This report examines six key areas in the initial UK response to the Covid-19 pandemic: the country's preparedness for a pandemic; the use of non-pharmaceutical interventions such as border controls, social distancing and lockdowns to control the pandemic; the use of test, trace and isolate strategies; the impact of the pandemic on social care; the impact of the pandemic on specific communities; and the procurement and rollout of Covid-19 vaccines.] *Freely available online*

Mental disorders and risk of COVID-19-related mortality, hospitalisation, and intensive care unit admission: a systematic review and meta-analysis.
Vai B. *The Lancet Psychiatry* 2021;8(9):797-812.
[Pre-existing mental disorders, in particular psychotic and mood disorders, and exposure to antipsychotics and anxiolytics were associated with COVID-19 mortality in both crude and adjusted models. Although further research is required to determine the underlying mechanisms, our findings highlight the need for targeted approaches to manage and prevent COVID-19 in at-risk patient groups identified in this study.] *Contact the library for a copy of this article*

Assessing the impact of COVID-19 on the clinically extremely vulnerable population.
The Health Foundation; 2021.
https://www.health.org.uk/publications/reports/assessing-the-impact-of-covid-19-on-the-clinically-extremely-vulnerable-population
[This briefing presents analysis from the Networked Data Lab on the impact the pandemic has had on the clinically extremely vulnerable population; assesses the mental health of people identified as clinically extremely vulnerable; examines the data on access to care for clinically extremely vulnerable; assess the limitations to the use of an algorithm-driven approach to identifying the clinically extremely vulnerable population which were exacerbated by poor availability of high-quality data.] *Contact the library for a copy of this article*

Risk prediction of covid-19 related death and hospital admission in adults after covid-19 vaccination: national prospective cohort study.
Hippisley-Cox J. *BMJ* 2021;374:n2244.
[This population based risk algorithm performed well showing high levels of discrimination for identifying those patients at highest risk of covid-19 related death and hospital admission after vaccination.] *Contact the library for a copy of this article*

Cardiovascular Systems

European Society of Cardiology guidance for the diagnosis and management of cardiovascular disease during the COVID-19 pandemic: part 1- epidemiology, pathophysiology, and diagnosis.
European Heart Journal 2021;:ehab696.
[This document is not a formal guideline but rather a summary of current knowledge and guidance to practicing clinicians managing patients with CVD and COVID-19. A narrative literature review of the available evidence has been performed, and the resulting information has been organized into two parts. The first, reported here, focuses on the epidemiology, pathophysiology, and diagnosis of cardiovascular (CV) conditions that may be manifest in patients with COVID-19.] *Freely available online*

ESC guidance for the diagnosis and management of cardiovascular disease during the COVID-19 pandemic: part 2 - care pathways, treatment, and follow-up.
European Heart Journal 2021;:ehab697.
[This document is not a formal guideline but rather a summary of current knowledge and guidance to practicing clinicians managing patients with CVD and COVID-19. A narrative literature review of the available evidence has been performed, and the resulting information has been organized into two parts. This second part addresses the topics of care pathways, treatment, and follow-up of CV conditions in patients with COVID-19.] *Freely available online*

Care Homes and Long Term Care

Non-pharmacological measures implemented in the setting of long-term care facilities to prevent SARS-CoV-2 infections and their consequences: a rapid review.
Stratil JM. *Cochrane Database of Systematic Reviews* 2021;9:CD015085.
[BACKGROUND: Starting in late 2019, COVID-19, caused by the novel coronavirus SARS-CoV-

2, spread around the world. Long-term care facilities are at particularly high risk of outbreaks, and the burden of morbidity and mortality is very high among residents living in these facilities. OBJECTIVES: To assess the effects of non-pharmacological measures implemented in long-term care facilities to prevent or reduce the transmission of SARS-CoV-2 infection among residents, staff, and visitors.] *Contact the library for a copy of this article*

Protecting Nursing Homes and Long-Term Care Facilities From COVID-19: A Rapid Review of International Evidence.
Dykgraaf SH. *Journal of the American Medical Directors Association* 2021;22(10):1969-1988 .
[High-quality evidence of effectiveness in protecting LTCFs from COVID-19 was limited at the time of this study, though it continues to emerge. Despite widespread COVID-19 vaccination programs in many countries, continuing prevention and mitigation measures may be required to protect vulnerable long-term care residents from COVID-19 and other infectious diseases. This rapid review summarizes current evidence regarding strategies that may be effective.] *Freely available online*

The role of viral genomics in understanding COVID-19 outbreaks in long-term care facilities.
Aggarwal D. *The Lancet Microbe* 2021;:doi.org/10.1016/S2666-5247(21)00208-1.
[We reviewed all genomic epidemiology studies on COVID-19 in long-term care facilities (LTCFs) that had been published to date. We found that staff and residents were usually infected with identical, or near identical, SARS-CoV-2 genomes.] *Freely available online*

COVID therapies

Antibiotics for the treatment of COVID-19.
Popp M. *Cochrane Database of Systematic Reviews* 2021;10:CD015025.
[OBJECTIVES: To assess the efficacy and safety of antibiotics compared to each other, no treatment, standard of care alone, placebo, or any other active intervention with proven efficacy for treatment of COVID-19 outpatients and inpatients.] *Contact the library for a copy of this article*

Antibody and cellular therapies for treatment of covid-19: a living systematic review and network meta-analysis.
Siemieniuk RA. *BMJ* 2021;374:n2231.
[In patients with non-severe covid-19, casirivimab-imdevimab probably reduces hospitalisation; bamlanivimab-etesevimab, bamlanivimab, and sotrovimab may reduce hospitalisation. Convalescent plasma, IVIg, and other antibody and cellular interventions may not confer any meaningful benefit.] *Contact the library for a copy of this article*

Colchicine for the treatment of COVID-19.
Mikolajewska A. *Cochrane Database of Systematic Reviews* 2021;10:CD015045.
[BACKGROUND: Colchicine is an anti-inflammatory medicine and is thought to improve disease outcomes in COVID-19 through a wide range of anti-inflammatory mechanisms.
OBJECTIVES: To assess the effectiveness and safety of Colchicine as a treatment option for

COVID-19 in comparison to an active comparator, placebo, or standard care alone in any setting, and to maintain the currency of the evidence, using a living systematic review approach.]

Effect of famotidine on hospitalized patients with COVID-19: A systematic review and meta-analysis.
Chiu L. *PLoS ONE* 2021;:doi.org/10.1371/journal.pone.0259514.
[Based on the existing observational studies, famotidine use is not associated with a reduced risk of mortality or combined outcome of mortality, intubation, and/or intensive care services in hospitalized individuals with COVID-19, though heterogeneity was high, and point estimates suggested a possible protective effect for the composite outcome that may not have been observed due to lack of power.] *Freely available online*

Effects of different corticosteroid therapy on severe COVID-19 patients: a meta-analysis of randomized controlled trials.
Tu J. *Expert Review of Respiratory Medicine* 2021;:DOI: 10.1080/17476348.2021.1983429.
[Corticosteroid treatment did not convincingly improve survival in severe COVID-19 patients. Low-dose dexamethasone could be considered as a drug for the treatment of COVID-19 patients. More high-quality trials are needed to further verify this conclusion.] *Freely available online*

Efficacy and safety of ivermectin for the treatment of COVID-19: a systematic review and meta-analysis.
Deng J. *Quarterly Journal Of Medicine* 2021;:hcab247.
[In review of 3 observational studies and 14 RCTs, the meta-analysis of RCTs found that ivermectin did not reduce time to viral clearance, duration of hospitalisation, incidence of mortality and incidence of mechanical ventilation. Evidence quality was very low to moderate.] *Freely available online*

Efficacy and safety of tocilizumab versus standard care/placebo in patients with COVID-19; a systematic review and meta-analysis of randomized clinical trials.
Vela D. *British Journal of Clinical Pharmacology* 2021;:doi.org/10.1111/bcp.15124.
[In COVID-19 patients with moderate to critical COVID-19, use of tocilizumab reduces all-cause mortality and progression to mechanical ventilation. This efficacy was not associated with higher number of serious adverse events.] *Freely available online*

Pre-admission glucagon-like peptide-1 receptor agonist (GLP-1RA) and mortality from coronavirus disease 2019 (Covid-19): A systematic review, meta-analysis, and meta-regression.
Hariyanto TI. *Diabetes Research and Clinical Practice* 2021;179:109031.
[Meta-analysis (9 studies, n=19,660) found that pre-admission use of GLP-1RA was associated with reduction in mortality rate from Covid-19 in patients with diabetes mellitus (OR 0.53; 95 %CI: 0.43–0.66, p *Freely available online*

Effect of anti-interleukin drugs in patients with COVID-19 and signs of cytokine release syndrome (COV-AID): a factorial, randomised, controlled trial.
Declercq J. *The Lancet Respiratory Medicine* 2021;:https://doi.org/10.1016/S2213-2600(21)00377-5. [Infections with SARS-CoV-2 continue to cause significant morbidity and mortality. Interleukin

(IL)-1 and IL-6 blockade have been proposed as therapeutic strategies in COVID-19, but study outcomes have been conflicting. Drugs targeting IL-1 or IL-6 did not shorten the time to clinical improvement in this sample of patients with COVID-19, hypoxic respiratory failure, low SOFA score, and low baseline mortality risk.] *Available with an NHS OpenAthens password*

Effect of antithrombotic therapy on clinical outcomes in outpatients with clinically stable symptomatic COVID-19: the ACTIV-4B randomized clinical trial.
JAMA 2021;:Online.
[Among symptomatic clinically stable outpatients with COVID-19, treatment with aspirin or apixaban compared with placebo did not reduce the rate of a composite clinical outcome. However, the study was terminated after enrollment of 9% of participants because of an event rate lower than anticipated.] *Freely available online*

Effect of early treatment with fluvoxamine on risk of emergency care and hospitalisation among patients with COVID-19: the TOGETHER randomised, platform clinical trial.
Reis G. *The Lancet Global Health* 2021;:https://doi.org/10.1016/S2214-109X(21)00448-4.
[Recent evidence indicates a potential therapeutic role of fluvoxamine for COVID-19. Treatment with fluvoxamine (100 mg twice daily for 10 days) among high-risk outpatients with early diagnosed COVID-19 reduced the need for hospitalisation defined as retention in a COVID-19 emergency setting or transfer to a tertiary hospital.] *Freely available online*

Efficacy and safety of baricitinib for the treatment of hospitalised adults with COVID-19 (COV-BARRIER): a randomised, double-blind, parallel-group, placebo-controlled phase 3 trial.
Marconi VC. *The Lancet Respiratory Medicine* 2021;:https://doi.org/10.1016/S2213-2600(21)00331-3.
[Although there was no significant reduction in the frequency of disease progression overall, treatment with baricitinib in addition to standard of care (including dexamethasone) had a similar safety profile to that of standard of care alone, and was associated with reduced mortality in hospitalised adults with COVID-19.] *Freely available online*

Remdesivir plus standard of care versus standard of care alone for the treatment of patients admitted to hospital with COVID-19 (DisCoVeRy): a phase 3, randomised, controlled, open-label trial.
Ader F. *The Lancet Infectious Diseases* 2021;:https://doi.org/10.1016/S1473-3099(21)00485-0.
[The antiviral efficacy of remdesivir against SARS-CoV-2 is still controversial. We aimed to evaluate the clinical efficacy of remdesivir plus standard of care compared with standard of care alone in patients admitted to hospital with COVID-19, with indication of oxygen or ventilator support. No clinical benefit was observed from the use of remdesivir in patients who were admitted to hospital for COVID-19, were symptomatic for more than 7 days, and required oxygen support.] *Available with an NHS OpenAthens password*

Critical Care

Effects of early extubation followed by noninvasive ventilation versus standard extubation on the duration of invasive mechanical ventilation in hypoxemic non-hypercapnic patients: a systematic review and individual patient data meta-analysis of randomized controlled trials.

Vaschetto R. *Critical Care* 2021;:doi: 10.1186/s13054-021-03595-5.
[Usefulness of noninvasive ventilation (NIV) in weaning patients with non-hypercapnic hypoxemic acute respiratory failure (hARF) is unclear. The study aims to assess in patients with non-hypercapnic hARF, the efficacy of NIV after early extubation, compared to standard weaning.]
Freely available online

Efficacy and safety of IL-6 inhibitors in patients with COVID-19 pneumonia: a systematic review and meta-analysis of multicentre, randomized trials.
Belletti A. *Annals of Intensive Care* 2021;11:152.
[Review (15 RCTs; n=9320) found IL-6 inhibitors linked to reduced all-cause mortality at longest follow-up (1315/5380 [24.4%] vs. 1080/3814 [28.3%] controls, RR 0.90; 95% CI 0.84-0.96; p = 0.003, with 13 studies included), with no increase in adverse events and secondary infections.]
Freely available online

Emergency Care

Adaptation of ED design layout during the COVID-19 pandemic: a national cross-sectional survey.
Douillet D. *Emergency Medicine Journal* 2021;38(10):789-793.
[All EDs have adapted, but many of the changes recommended for the organisation of ED could not be implemented. ED architecture constrains adaptive capacities in the context of COVID-19.]
Contact the library for a copy of this article

End of Life Care

Experiences of surgical nurses in providing end-of-life care in an acute care setting: a qualitative study.
Limbu T. *British Journal of Nursing* 2021;30(18):1084-1089.
[The number of deaths occurring in hospitals is rising, and many occur in settings other than specialist palliative care, oncology or critical care. Nurses working outside these specialist environments report end-of-life (EoL) care as a source of stress. This research aimed to explore these experiences. This qualitative study, using semi-structured interviews as a research technique, aimed to investigate the experiences of surgical nurses caring for dying patients.]
Available with an NHS OpenAthens password for eligible users

Equality and Diversity

Disparities in COVID-19 Outcomes by Race, Ethnicity, and Socioeconomic Status: A Systematic-Review and Meta-analysis.
JAMA Network Open; 2021.
https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2785980
[In this study, members of racial and ethnic minority groups had higher risks of COVID-19 positivity and disease severity. Furthermore, socioeconomic determinants were strongly associated with COVID-19 outcomes in racial and ethnic minority populations.] *Freely available online*

Lessons about COVID-19 vaccine hesitancy among minority ethnic people in the UK.
Kadambari S. *The Lancet Infectious Diseases* 2021;21(-):-.

[Since the start of the COVID-19 vaccine programme health researchers from the Oxford Vaccine Group have sought to engage with over 200 UK community organisations that provide religious or social support for minority ethnic groups to offer information about available vaccines, answer questions, and encourage dialogue. They met with groups on online meeting platforms during the third national lockdown to answer questions and discuss concerns.] *Freely available online*

Third quarterly report on progress to address COVID-19 health inequalities.
Race Disparity Unit, Government Equalities Office, Equality Hub, and Kemi Badenoch MP; 2021.
https://www.gov.uk/government/publications/third-quarterly-report-on-progress-to-address-covid-19-health-inequalities
[This is the third quarterly report on progress to address disparities in the risks and outcomes of Covid-19 for ethnic minority groups. It summarises how work across government, and with national and local partners, has led to increases in both positive vaccine sentiment and vaccine uptake across all ethnic groups over the past quarter. The report also includes further analysis of how the impacts of Covid-19 changed for ethnic minority groups between the first and second waves of the pandemic.] *Freely available online*

Deaths involving COVID-19 by self-reported disability status during the first two waves of the COVID-19 pandemic in England: a retrospective, population-based cohort study.
Bosworth ML. *The Lancet Public Health* 2021;:https://doi.org/10.1016/S2468-2667(21)00206-1.
[People with learning disabilities are at substantially increased risk of COVID-19 mortality, but evidence on risks of COVID-19 mortality for disabled people more generally is limited. Given the association between disability and mortality involving COVID-19, verification of these findings and consideration of recommendations for protective measures are now required.] *Freely available online*

Infection Prevention and Control

Current Insights Into Respiratory Virus Transmission and Potential Implications for Infection Control Programs: A Narrative Review.
Klompas M. *Annals of Internal Medicine* 2021;:doi.org/10.7326/M21-2780.
[This article reviews recent studies on aerosol transmission of respiratory viruses and considers their implications for infection control policies in health care settings.]
Available with an NHS OpenAthens password for eligible users

Risk of infection and contribution to transmission of SARS-CoV-2 in school staff: a systematic review.
Karki SJ. *BMJ Open* 2021;11(11):e052690.
[While in low incidence settings there is little evidence for school staff to be at high risk of SARS-CoV-2 infection, in high incidence settings there is an increased risk of SARS-CoV-2 infection in school staff teaching face-to-face compared to staff teaching digitally and general population.]
Freely available online

Community transmission and viral load kinetics of the SARS-CoV-2 delta (B.1.617.2) variant in vaccinated and unvaccinated individuals in the UK: a prospective, longitudinal, cohort study.

Singanayagam A. *The Lancet Infectious Diseases* 2021;:https://doi.org/10.1016/S1473-3099(21)00648-4. [Vaccination reduces the risk of delta variant infection and accelerates viral clearance. Nonetheless, fully vaccinated individuals with breakthrough infections have peak viral load similar to unvaccinated cases and can efficiently transmit infection in household settings, including to fully vaccinated contacts. Host–virus interactions early in infection may shape the entire viral trajectory.] *Freely available online*

Mental Health

Viral respiratory infections and psychosis: A review of the literature and the implications of COVID-19.
Kulaga. *Neuroscience and Biobehavioral Reviews* 2021;127:520-530.
[Neuroinvasive and/or systemic infections are thought to increase risk for psychopathology via inflammatory mechanisms, particularly when exposure occurs during critical neurodevelopmental windows. Several human coronaviruses (HCoVs) have been associated with psychotic disorders and increasing reports of the neuropsychiatric manifestations of COVID-19 suggest it has neuroinvasive properties similar to those of other HCoVs.] *Contact the library for a copy of this article*

Global prevalence and burden of depressive and anxiety disorders in 204 countries and territories in 2020 due to the COVID-19 pandemic.
COVID-19 Mental Disorders Collaborators. *The Lancet* 2021;:https://doi.org/10.1016/S0140-6736(21)02143-7.
[This pandemic has created an increased urgency to strengthen mental health systems in most countries. Mitigation strategies could incorporate ways to promote mental wellbeing and target determinants of poor mental health and interventions to treat those with a mental disorder. Taking no action to address the burden of major depressive disorder and anxiety disorders should not be an option.] *Freely available online*

Healthcare workers are at risk of acute or post-traumatic stress and psychological distress during emerging virus outbreaks.
Haghgoshayie E. *Evidence-Based Nursing* 2021;24(4):136.
[Adequate personal protective equipment, clear communication, education and access to psychological support need to be provided in order to improve the well-being of staff during virus outbreaks.
Primary research is required specifically on the impact of COVID-19 pandemic on healthcare professionals' well-being, and which interventions offer the greatest level of support.]
Available with an NHS OpenAthens password

Obstetrics and Gynaecology (including midwifery)

COVID-19 and clinical outcomes of pregnancy: a comparative study.
Smith V. *British Journal of Midwifery* 2021;29(11):642–647.
[A series of changes in maternity care provision were implemented internationally in response to the COVID-19 pandemic. This study aimed to assess the impact of COVID-19 on maternal clinical outcomes, resulting from these changes to care provision. The changes to maternity care because of

the COVID-19 pandemic appear to have affected some maternal clinical outcomes, and thus, potentially, women's overall intrapartum and postnatal health and wellbeing.]
Available with an NHS OpenAthens password for eligible users

Experiences of maternity care during the COVID-19 pandemic in the North of England.
Stacey T. *British Journal of Midwifery* 2021;29(9):516–523.
[During 2020, UK maternity services made changes to service delivery in response to the COVID-19 pandemic. This study aimed to explore service users' and their partners' experiences of maternity services in the North of England during the COVID-19 pandemic. Respondents (n=606) completed a co-produced survey during August 2020. Data were analysed using descriptive statistics and content analysis.] *Available with an NHS OpenAthens password for eligible users*

Oncology

Effect of COVID-19 pandemic lockdowns on planned cancer surgery for 15 tumour types in 61 countries: an international, prospective, cohort study.
COVIDSurg Collaborative. *The Lancet Oncology* 2021;:https://doi.org/10.1016/S1470-2045(21)00493-9.
[Although short-term oncological outcomes were not compromised in those selected for surgery, delays and non-operations might lead to long-term reductions in survival. During current and future periods of societal restriction, the resilience of elective surgery systems requires strengthening, which might include protected elective surgical pathways and long-term investment in surge capacity for acute care during public health emergencies to protect elective staff and services.]
Available with an NHS OpenAthens password

Prevalence and impact of COVID-19 sequelae on treatment and survival of patients with cancer who recovered from SARS-CoV-2 infection: evidence from the OnCovid retrospective, multicentre registry study.
Pinato DJ. *The Lancet Oncology* 2021;:https://doi.org/10.1016/S1470-2045(21)00573-8.
[The medium-term and long-term impact of COVID-19 in patients with cancer is not yet known. Sequelae post-COVID-19 affect up to 15% of patients with cancer and adversely affect survival and oncological outcomes after recovery. Adjustments to systemic anti-cancer therapy can be safely pursued in treatment-eligible patients.] *Available with an NHS OpenAthens password*

Paediatrics and Neonates

Global characteristics and outcomes of SARS-CoV-2 infection in children and adolescents with cancer (GRCCC): a cohort study.
Mukkada S. *The Lancet. Oncology* 2021;:https://doi.org/10.1016/S1470-2045(21)00454-X.
[In this global cohort of children and adolescents with cancer and COVID-19, severe and critical illness occurred in one fifth of patients and deaths occurred in a higher proportion than is reported in the literature in the general paediatric population. These data could inform clinical practice guidelines and raise awareness globally that children and adolescents with cancer are at high-risk of developing severe COVID-19 illness.] *Freely available online*

Impacts of the COVID-19 pandemic on youth mental health among youth with physical health challenges.
Hawke LD. *Early Intervention in Psychiatry* 2021;15(5):1146-1153.
[CONCLUSIONS: Mental health concerns are highly prevalent among youth with physical health concerns, and also appear to be exacerbated by the COVID-19 pandemic. Physical health concerns appear to constitute risk factors for heightened mental health responses to the pandemic situation. System planners striving to adapt mental health services to meet distancing recommendations are urged to consider youth with physical health conditions and ensure that integrated supports are available to them.] *Contact the library for a copy of this article*

Prevalence of thrombotic complications in children with SARS-CoV-2.
Aguilera-Alonso D. *Archives of Disease in Childhood* 2021;106(11):1129-1132.
[In this multicentre national cohort of children with SARS-CoV-2 involving 49 hospitals, 4 patients out of 537 infected children developed a thrombotic complication. Thrombotic complications seem very uncommon in children with SARS-CoV-2. Adolescence and previous thrombotic risk factors may be considered when initiating thromboprophylaxis in children with COVID-19. Further studies are needed to clarify risk factors among children with COVID-19 in order to develop specific recommendations.] *Freely available online*

Pathology

Diagnostic performances of common nucleic acid tests for SARS-CoV-2 in hospitals and clinics: a systematic review and meta-analysis.
Au WY. *The Lancet Microbe* 2021;:https://doi.org/10.1016/S2666-5247(21)00214-7.
[All three nucleic acid tests consistently perform better with pharyngeal swabs using SARS-CoV-2 open reading frame 1ab primer with RNA extraction. Accuracy depends on specific experimental conditions, implying that more efforts should be directed to optimising the experimental setups for the nucleic acid tests. Hence, our results could be a reference for optimising and establishing a standard nucleic acid test protocol that is applicable in laboratories worldwide.] *Freely available online*

Diagnostic yield of bacteriological tests and predictors of severe outcome in adult patients with COVID-19 presenting to the emergency department.
Kaal A. *Emergency Medicine Journal* 2021;38(9):685-691.
[Blood cultures appear to have limited value while procalcitonin and the PSI appear to be promising tools in helping physicians identify patients at risk for severe disease course in COVID-19 at presentation to the ED.] *Contact the library for a copy of this article*

PPE

Face coverings and COVID-19: statement from an expert panel .
UK Health Security Agency (UKHSA); 2021.
https://www.gov.uk/government/publications/face-coverings-and-covid-19-statement-from-an-expert-panel

[An expert panel statement, informed by evidence and expertise, on the role of face coverings in mitigating COVID-19 transmission.] *Freely available online*

Publie Health

Effectiveness of public health measures in reducing the incidence of covid-19, SARS-CoV-2 transmission, and covid-19 mortality: systematic review and meta-analysis.
Talic S. *BMJ* 2021;375:e068302.
[This systematic review and meta-analysis suggests that several personal protective and social measures, including handwashing, mask wearing, and physical distancing are associated with reductions in the incidence covid-19. Public health efforts to implement public health measures should consider community health and sociocultural needs, and future research is needed to better understand the effectiveness of public health measures in the context of covid-19 vaccination.] *Contact the library for a copy of this article*

Effectiveness of public health measures in reducing the incidence of covid-19, SARS-CoV-2 transmission, and covid-19 mortality: systematic review and meta-analysis.
BMJ; 2021.
https://www.bmj.com/content/375/bmj-2021-068302
[This systematic review and meta-analysis suggests that several personal protective and social measures, including handwashing, mask wearing, and physical distancing are associated with reductions in the incidence covid-19. Public health efforts to implement public health measures should consider community health and sociocultural needs.] *Freely available online*

What influences people's responses to public health messages for managing risks and preventing infectious diseases? A rapid systematic review of the evidence and recommendations.
BMJ Open; 2021.
https://bmjopen.bmj.com/content/11/11/e048750
[New research examines what characterises effective public health messages for managing risk and preventing infectious disease and what influences people's responses to messages. A systematic review of 68 papers led to four key recommendations: Engage communities in development of messaging; Address uncertainty immediately with transparency; Focus on unifying messages from sources; Frame messages aimed at increasing understanding, social responsibility and personal control.] *Freely available online*

Evaluating the reliability of mobility metrics from aggregated mobile phone data as proxies for SARS-CoV-2 transmission in the USA: a population-based study.
Kishore N. *The Lancet Digital Health* 2021;:https://doi.org/10.1016/S2589-7500(21)00214-4.
[Our study shows that the integration of mobility metrics into retrospective modelling efforts can be useful in identifying links between these metrics and Rt. Importantly, we highlight potential issues in the data generation process for transmission indicators derived from mobile phone data, representativeness, and equity of access, which must be addressed to improve the interpretability of these data in public health.] *Freely available online*

A public health approach to estimating the need for long COVID services.
Journal of Public Health; 2021.
https://academic.oup.com/jpubhealth/advance-article-abstract/doi/10.1093/pubmed/fdab365/6396796
[This paper illustrates how a public health approach was used to influence and inform the development of post-COVID services across two Integrated Care Systems (ICSs). The findings have been valuable in informing early service developments, engaging with managers and clinicians, and supporting applications for funding at a local level.] *Contact the library for a copy of this article*

Rehabilitation

Rehabilitation to enable recovery from COVID-19: a rapid systematic review.
Goodwin VA. *Physiotherapy* 2021;111:4-22.
[OBJECTIVES: To establish the evidence for rehabilitation interventions tested in populations of patients admitted to ICU and critical care with severe respiratory illness, and consider whether the evidence is generalizable to patients with COVID-19.] *Freely available online*

Effects of a nurse–occupational therapist meeting on function and motivation in hospitalized elderly patients: A pilot randomized control trial.
Kondo K. *British Journal of Occupational Therapy* 2021;84(10):620-627.
[This pilot randomized controlled trial assessed the effectiveness of a nurse–occupational therapist meeting on improving motor and social-cognitive functions, as well as motivation, in a subacute hospital setting.] *Contact the library for a copy of this article*

Respiratory Care

Awake prone positioning for COVID-19 acute hypoxaemic respiratory failure: a randomised, controlled, multinational, open-label meta-trial.
Ehrmann S. *The Lancet Respiratory Medicine* 2021;:https://doi.org/10.1016/S2213-2600(21)00356-8. [Awake prone positioning of patients with hypoxaemic respiratory failure due to COVID-19 reduces the incidence of treatment failure and the need for intubation without any signal of harm. These results support routine awake prone positioning of patients with COVID-19 who require support with high-flow nasal cannula.] *Freely available online*

Extracorporeal membrane oxygenation for COVID-19: evolving outcomes from the international Extracorporeal Life Support Organization Registry.
Barbaro RP. *The Lancet* 2021;:https://doi.org/10.1016/S0140-6736(21)01960-7.
[Over the course of the COVID-19 pandemic, the care of patients with COVID-19 has changed and the use of extracorporeal membrane oxygenation (ECMO) has increased. Mortality after ECMO for patients with COVID-19 worsened during 2020. These findings inform the role of ECMO in COVID-19 for patients, clinicians, and policy makers.] *Available with an NHS OpenAthens password*

Statistics

Coronavirus (COVID-19) Infection Survey, antibody and vaccination data, UK: 1 September 2021.
Office for National Statistics (ONS); 2021.
https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/coronaviruscovid19infectionsurveyantibodyandvaccinationdatafortheuk/1september2021
[In England, it is estimated that 94.1% of adult population would have tested positive for antibodies against SARS-CoV-2 on a blood test in the week beginning 9 August 2021, suggesting they had the infection in the past or have been vaccinated.] *Freely available online*

Coronavirus and vaccine hesitancy, Great Britain: 9 August 2021.
Office for National Statistics (ONS); 2021.
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[These reports summarise the surveillance of influenza, COVID-19 and other seasonal respiratory illnesses. Weekly findings from community, primary care, secondary care and mortality surveillance systems are included in the reports. Due to the COVID-19 pandemic, for the 2021 to 2022 season the weekly reports will be published all year round. This page includes reports published from 15 July 2021 to the present.] *Freely available online*

REACT-1 study of coronavirus transmission: October 2021 final results.
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[Experimental estimates of the percentage of people testing positive for Covid-19 who experience ongoing symptoms for at least 4 weeks after infection ('long Covid') range from 3.0% to 11.7% using three approaches, analysing data up to August 2021.] *Freely available online*

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[(Updated) Data and reports for England on the coverage of vaccinations offered under the national immunisation programmes.] *Freely available online*

Vaccines

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[This statement sets out JCVI's advice on the options for and timing of a booster programme to re-vaccinate adults against COVID-19.] *Freely available online*

JCVI statement, September 2021: COVID-19 vaccination of children aged 12 to 15 years.
Department of Health and Social Care (DHSC); 2021.
https://www.gov.uk/government/publications/jcvi-statement-september-2021-covid-19-vaccination-of-children-aged-12-to-15-years/
[Updated advice from the Joint Committee on Vaccination and Immunisation (JCVI) on vaccination of children aged 12 to 15.] *Freely available online*

Coronavirus: Covid-19 booster vaccines frequently asked questions.
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[This Commons Library briefing addresses commonly asked questions about the roll-out of the Covid-19 booster vaccine.] *Freely available online*

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https://www.gov.uk/government/publications/third-primary-covid-19-vaccine-dose-for-people-who-

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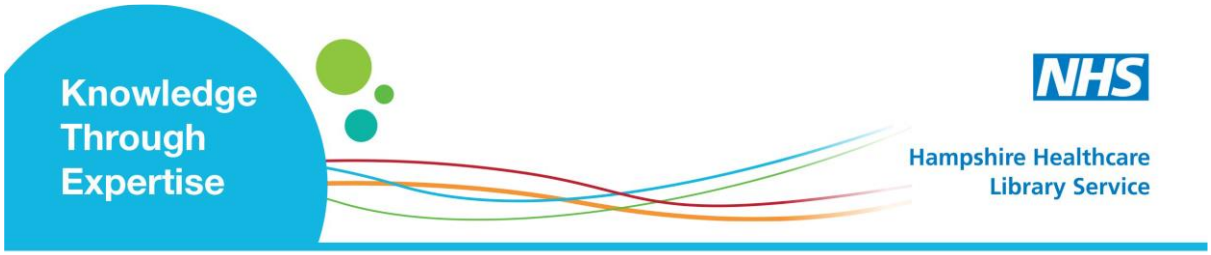
[Statement from the Joint Committee on Vaccination and Immunisation (JCVI) on the benefits of a third primary COVID-19 vaccine dose in individuals aged 12 years and over with severe immunosuppression.] *Freely available online*

Effectiveness of a third dose of the BNT162b2 mRNA COVID-19 vaccine for preventing severe outcomes in Israel: an observational study.
Barda N. *The Lancet* 2021;:https://doi.org/10.1016/S0140-6736(21)02249-2.
[Many countries are experiencing a resurgence of COVID-19, driven predominantly by the delta (B.1.617.2) variant of SARS-CoV-2. Our findings suggest that a third dose of the BNT162b2 mRNA vaccine is effective in protecting individuals against severe COVID-19-related outcomes, compared with receiving only two doses at least 5 months ago.] *Available with an NHS OpenAthens password*

mRNA-1273 COVID-19 vaccination in patients receiving chemotherapy, immunotherapy, or chemoimmunotherapy for solid tumours: a prospective, multicentre, non-inferiority trial.
Oosting SF. *The Lancet Oncology* 2021;:https://doi.org/10.1016/S1470-2045(21)00574-X.
[Most patients with cancer develop, while receiving chemotherapy, immunotherapy, or both for a solid tumour, an adequate antibody response to vaccination with the mRNA-1273 COVID-19 vaccine. The vaccine is also safe in these patients. The minority of patients with an inadequate response after two vaccinations might benefit from a third vaccination.] *Available with an NHS OpenAthens password*

Safety and immunogenicity of an inactivated COVID-19 vaccine, BBIBP-CorV, in people younger than 18 years: a randomised, double-blind, controlled, phase 1/2 trial.
Xia S. *The Lancet Infectious Diseases* 2021;:https://doi.org/10.1016/S1473-3099(21)00462-X.
[The inactivated COVID-19 vaccine BBIBP-CorV is safe and well tolerated at all tested dose levels in participants aged 3–17 years. BBIBP-CorV also elicited robust humoral responses against SARS-CoV-2 infection after two doses. Our findings support the use of a 4 μg dose and two-shot regimen BBIBP-CorV in phase 3 trials in the population younger than 18 years to further ascertain its safety and protection efficacy against COVID-19.] *Available with an NHS OpenAthens password*

The right to respect for family life, consent, minors and Gillick competence.
Griffith R. *British Journal of Nursing* 2021;30(17):1042-1043.
[The author discusses the statement made by the UK vaccines minister that healthy 12–15-year-olds could override their parents' decision on coronavirus vaccination. There has been increasing speculation that the UK chief medical officers will recommend that the Government should offer the coronavirus vaccination to those in the 12-15-year age group. This has prompted the Government's vaccines minister to say that, where competent, vaccination will go in favour of what the minor child decides.] *Available with an NHS OpenAthens password for eligible users*



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