

Communique

#4/8 May 2020

WEEK IN REVIEW

- We welcomed the following new members to the Taskforce:
 - Australian College of Midwives
- Key new topics of discussion across the panels this week included:
 - Publication of a prominent media release around impending *interim* results of a trial of remdesivir in COVID-19 (noting that to date, no data have been published)
 - Emerging observational data on increased incidence of venous thromboembolism and the use of anticoagulants in moderate, severe and critical COVID-19.
 - Emphasizing that studies that enrol patients to test experimental therapies must be high quality *randomised* trials.
 - Formation of an observational data working group to identify large datasets capable of measuring the uptake and impact of COVID-19 guidelines in Australia and/or providing data to inform recommendations for clinical care.

NEW/UPDATED GUIDANCE THIS WEEK

Australian guidelines for the clinical care of people with COVID-19 (V3.0)

- **The evidence base for recommendations on antivirals and other disease-modifying treatments has been reviewed and a recommendation specific to remdesivir has been added.**
 - Following another week of continuous evidence surveillance there is still no evidence for the effectiveness for ANY treatments for COVID-19. The Taskforce has strengthened its recommendation that all experimental therapies should only be given in the context of ***randomised trials*** with appropriate ethical approval.
- **A new recommendation has been added on the use of prone positioning in people who are not mechanically ventilated.**
- **A new recommendation has been added regarding the use of venous thromboembolism (VTE) prophylaxis in people with moderate COVID-19.**
 - *NB–The Taskforce is currently reviewing the evidence in order to make urgent recommendations on the use of high dose VTE prophylaxis in patients with severe and critical COVID-19. This is in response to emerging observational data indicating a high incidence of VTE among people with COVID-19 (including pulmonary embolism and deep vein thrombosis).*

Clinical Flowcharts

Updates to clinical flowcharts this week include:

- **A dedicated flowchart for respiratory support for patients with severe to critical COVID-19**

EVIDENCE UNDER REVIEW

New clinical questions prioritised this week for evidence review relate to:

- Concomitant use of ACE inhibitors and angiotensin receptor blockers
- The use of neuromuscular blocking agents
- The use of nitric oxide
- The use of corticosteroids
- Timing of mechanical ventilation
- Low versus high PEEP thresholds

NEW QUESTIONS/TOPICS

- We continue to receive a steady stream of suggestions for priority guideline questions via the Taskforce website and broader clinical network. These are reviewed and prioritised each week via a formal process overseen by our evidence team, expert panels and Guidelines Leadership Group.
- A summary of all of the topic areas for which we have received suggested questions is provided below.
- **Questions related to infection prevention and control/ (IPC) and personal protective equipment (PPE).**
 - A large number of questions related to infection prevention and control (IPC) and the use of personal protective equipment (PPE) have been received and are clearly important issues for clinicians.

While IPC-related guidance is beyond the initial scope of the Taskforce (to provide recommendations on clinical care), we have established representation from the Infection Control Expert Group (ICEG) which develops IPC and PPE guidance for the Australian Health Protection Principal Committee (AHPPC).

Current guidance developed by ICEG is available at <https://www.health.gov.au/committees-and-groups/infection-control-expert-group-iceg>

We are currently working to explore ways we can provide support to ICEG to understand and address the priority questions being brought to the Taskforce.

- **Please encourage your clinical colleagues to visit the Taskforce website to provide their valuable feedback and insights www.covid19evidence.net.au**

ADDITIONAL TOPICS AND POPULATIONS FOR CONSIDERATION

As at 1 MAY, 2020

Previously suggested topics that were raised again this week are italicised. Items with a ✓ have been prioritised as part of the existing workplan for either guidelines or flowcharts.

| Newly suggested additional topics: | Previously suggested additional topics: |
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| <ul style="list-style-type: none">- Role of echocardiography- Timing and procedure for tracheostomy | <ul style="list-style-type: none">- Fluid management- Medication management, including over the counter medicines and psychotropics |

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| | <ul style="list-style-type: none"> - Complementary, holistic and integrative medicine, including lifestyle interventions - Ambulance management and transport - Intubation and extubation - <i>Palliative care (specific request this week for inclusion of advanced care planning)</i> - Nutrition care - Assessing recovery and discharge decision-making - <i>Rehabilitation and post-discharge follow-up (specific request this week for frequency of monitoring)</i> ✓ Cardiac arrest protocols ✓ Stroke protocols - Sedation protocols - ICU pandemic triage ✓ GP triage - Remote monitoring of patients at home and criteria for admission - Communication within and between healthcare services (including handover) |
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| Newly suggested additional patient groups: | Previously suggested additional patient groups: |
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| <ul style="list-style-type: none"> - Patients with delirium | <ul style="list-style-type: none"> - Patients receiving dialysis - Aged care/geriatrics (<i>Palliative and Aged Care Panel is currently being convened</i>) ✓ <i>Pregnancy (Pregnancy and Perinatal Care panel is currently being convened)</i> ✓ <i>Paediatric (Care of Children Panel is currently being convened)</i> ✓ Immunosuppressed/cancer ✓ <i>Asthma/COPD</i> ✓ <i>Diabetes</i> ✓ <i>Cardiovascular disease</i> - <i>Psychiatric/mental illness</i> - Physical disability - Intellectual disability - Multiple co-morbidities - People with asymptomatic infection - People with possible infection, separate to those with confirmed infection. |

| New suggestions for topics beyond our current scope | Previous suggestions for topics beyond our current scope |
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| <ul style="list-style-type: none"> - Accuracy of antibody testing - Advice for people who are notified that they have | <ul style="list-style-type: none"> - Assessing community spread - Symptomology of palliative care - Impact of bereavement on family members - Management of surgical patients not known to be infected with COVID19 |

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| <p>been in contact with a case</p> <ul style="list-style-type: none"> - Definition of 'close contact' for aged care facilities - Information for healthcare workers caring for COVID-19 patients on how to protect HCW's family, etc. - Infection control and prevention <ul style="list-style-type: none"> o waiting rooms o home visits o boarding schools | <ul style="list-style-type: none"> - Isolation measures for asymptomatic people cohabiting with a confirmed case - Role of temperature in triaging in GP clinics - Guidance on virus clearance and immunity - Patient information - CT scanning to stratify risk for surgery - Screening for cancer patients attending clinics - Swab collection technique - Mental health care for healthcare workers - Rostering for healthcare workers - Diagnostic testing - Infection control and prevention, particularly PPE for healthcare workers but also <ul style="list-style-type: none"> o environmental cleaning o community-based prevention o special care nurseries - Blood product management - Immunity post-infection |
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