

# COVID-19

## Health Evidence Summary No.97

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12 October 2020

*This weekly COVID-19 health evidence summary (HES) is based on 3.5 hours of desk-based research. The summary is not intended to be a comprehensive summary of available evidence on COVID-19 but aims to make original documents easily accessible to decision makers which, if relevant to them, they should go to before making decisions.*

### Infection Prevention and Control

Publication date	Title/URL	Journal/Article type	Summary	Keywords
07.10.2020	Lockdown measures in response to COVID-19 in nine sub-Saharan African countries	BMJ Global Health   Analysis	<ul style="list-style-type: none"> <li>The term 'lockdown' is not well-defined. Here the authors propose a two-by-two matrix definition of lockdown that categorises different communicable disease measures based on where they are compulsory or voluntary and whether they are targeted at identifiable individuals and facilities, or applied indiscriminately to a general population</li> <li>The design, timing and implementation of lockdown in 9 SSA countries is described</li> <li>The paper highlights the need for intersectoral and transdisciplinary research capable of providing a rigorous and holistic assessment of the harms and benefits of lockdown</li> </ul>	Lockdown, intersectoral, holistic assessment

07.10.2020	The effect of temperate on persistence of SARS-CoV-2 on common surfaces	Virology Journal   Article	<ul style="list-style-type: none"> <li>Knowing environmental stability of SARS-CoV-2 is required to determine the risks of fomite transmission from contaminated surfaces</li> <li>This study measured the survival rate of infectious SARS-CoV-2 on several common surface types at different temperatures.</li> <li>Note all done in the dark to negate any effects of UV light and this study did not use fresh human mucus as a vehicle to spread the virus – a hostile environment for viruses</li> <li>Viable virus was isolated for up to 28 days at 20oC from common surface such as glass, stainless teel and both paper and plastic banknotes. Viable virus survived less that 24h at 40oC on some surfaces.</li> <li>Findings demonstrate SARS-CoV-2 can remain infectious for significantly longer time periods than generally considered possible with consequences for risk mitigating procedures to prevent fomite spread of C19</li> </ul>	Environmental stability
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## Testing

Publication date	Title/URL	Journal/Article type	Summary	Keywords
08.10.2020	Clinical impact of molecular point-of-care testing for suspected COVID-19 in	The Lancet Respiratory Medicine   Article	<ul style="list-style-type: none"> <li>Rapid, accurate tests are urgently needed to improve patient flow and reduce nosocomial transmission</li> <li>A prospective, interventional, non-randomised, controlled study of molecular point-of-care (POC) testing in patients 18 years or older presenting</li> </ul>	POC diagnostic

	hospital (COV-19POC); a prospective, interventional, non-randomised controlled study		<p>with suspected C19 to a hospital in the UK</p> <ul style="list-style-type: none"> <li>• POC testing is associated with large reductions in time to test results and could lead to improvements in infection controls measures and patient flow compared with centralised laboratory PCR testing</li> </ul>	
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## Therapeutics

Publication date	Title/URL	Journal/Article type	Summary	Keywords
12.10.2020	Convalescent plasma or hyperimmune immunoglobulin for people with COVID-19: a living systematic review	Cochrane Systematic Review	<ul style="list-style-type: none"> <li>• Assessing whether convalescent plasma or hyperimmune immunoglobulin transfusion is effective and safe in treatment of people with COVID-19 as more evidence becomes available</li> <li>• This is the second living update of the review</li> <li>• 19 studies with 36,081 who received convalescent plasma were included</li> <li>• No completed studies evaluating hyperimmune immunoglobulin were identified</li> <li>• Authors conclude that it remains uncertain whether plasma from people who have recovered from C19 is an effective treatment for people hospitalised with C19 and whether convalescent plasma affects the number of serious unwanted effects</li> </ul>	Convalescent plasma, hyperimmune immunoglobulin

05.10.2020	Remdesivir for adults with COVID-19: A living systematic review for an American College of Physicians Practice Points	Annals of Internal Medicine   Review	<ul style="list-style-type: none"> <li>• This review evaluates the effectiveness and harms of remdesivir for C19</li> <li>• Four randomised trials were included</li> <li>• Low certainty evidence with few published trials. Trials excluded pregnant women and adults with severe kidney or liver disease</li> <li>• In hospitalised adults with C19, remdesivir probably improves recovery and reduces serious adverse events and may reduce mortality and time to clinical improvement</li> <li>• For adults not receiving mechanical ventilation or extracorporeal membrane oxygenation, a 5-day course of remdesivir may provide similar benefits to and fewer harms than a 10-day course</li> </ul>	remdesivir
05.10.2020	Lopinavir-ritonavir in patients admitted to hospital with COVID-19 (RECOVERY): a randomised, controlled, open-label, platform trial	The Lancet   Article	<ul style="list-style-type: none"> <li>• Results of a randomised trial to assess whether lopinavir-ritonavir improves outcomes in patients admitted to hospital with COVID-19</li> <li>• In patients admitted to hospital with C19, lopinavir-ritonavir was not associated with reductions in 28-day mortality, duration of hospital stay, or risk of progressing to invasive mechanical ventilation or death</li> </ul>	Lopinavir-ritonavir

			<ul style="list-style-type: none"> <li>• These findings do not support the use of lopinavir-ritonavir for treatment of patients admitted to hospital with C19</li> <li>• Guidelines where lopinavir-ritonavir is recommended for treatment of patients admitted to hospital with C19 should be updated</li> </ul>	
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## Indirect impact of COVID-19

Publication date	Title/URL	Journal/Article type	Summary	Keywords
10.2020	A Neglected Tragedy: The global burden of stillbirths	Report	<ul style="list-style-type: none"> <li>• Despite progress being made since 2000, stillbirths have not declined as rapidly as maternal and new born mortality</li> <li>• If the current trends continue, an additional 19 million stillbirths will take place before 2030</li> <li>• More than 200,000 additional stillbirths could also occur over the next 12 months in 117 LMICs due to severe C19-related disruptions in health care services</li> </ul>	stillbirths

## Social Science

Publication date	Title/URL	Journal/Article type	Summary	Keywords
Oct 2020	The COVID-19 Gender Gap: How women's experience and expertise will drive	Chatham House   Report	<ul style="list-style-type: none"> <li>• A gender-inclusive action plan to enable states, the private sector and civil society to implement a faster, fairer and more sustainable economic recovery from the COVID-19 pandemic</li> <li>• Developed from a series of 5 virtual roundtables and a three-day virtual workshop</li> </ul>	Gender-inclusive, action plan

	economic recovery		
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## Health systems

Publication date	Title/URL	Journal/Article type	Summary	Keywords
07.10.2020	Protecting essential health services in low-income and middle-income countries and humanitarian settings while responding to the COVID-19 pandemic	BMJ Global Health   Practice	<ul style="list-style-type: none"> <li>• This paper makes the case for a rational approach to public sector health spending and decision making during and in the early recovery phase of the COVID-19 pandemic</li> <li>• Based on ethics and equity principles, it is crucial to ensure that patients not infected by COVID-19 continue to get access to healthcare and that the services they need continue to be resourced</li> <li>• A list of 120 essential non-COVID-19 health interventions is provided, based on the Disease Control Priorities-3 highest priority package (HPP)</li> <li>• Adjustments of HPP was made based on level of urgency of interventions and contextual factors</li> </ul>	Essential health services
Oct 2020	Strengthening Somalia's health systems: emerging stronger from COVID-19	ODI   Briefing paper	<ul style="list-style-type: none"> <li>• Highlights key recommendations from a roundtable to discuss how Somalia can strengthen its health system sustainably in the long-term</li> <li>• Also refer to the <a href="#">Roundtable learning note</a></li> </ul>	Somalia, health systems strengthening

## Comments, Editorials, Opinions, Blogs, News

Publication date	Title/URL	Journal   Article type
12.10.2020	'Drastic rise' in Malawi's suicide rate linked to Covid economic downturn	The Guardian Global Development   News
05.10.2020	What are monoclonal antibodies – and can they treat Covid-19?	Wellcome   Explainer
09.10.2020	When numbers don't speak for themselves: COVID-19 and thoughts on how to measure a country's performance	CGD   Blog
08.10.2020	Near-patient SARS-CoV-2 molecular platforms: new-old tools for new-old problems	The Lancet Respiratory Medicine   Comment
10.10.2020	Mental health: time to invest in quality	The Lancet   Editorial
08.10.2020	The intersection of COVID-19 and mental health	The Lancet Infectious Diseases   Editorial
07.10.2020	Scientists keep an open line of communication with the public	Nature Medicine   Editorial
06.10.2020	Mortality data   COVID-19 and beyond: the bedrock of Global Health Security	CGD   Blog

## Dashboards & Trackers

Cases & deaths: Global	Cases & deaths: Regional	Cases & deaths: Country	Living evidence & policy maps	Current research including trials	Diagnostics	Treatments	Vaccines
WHO sitreps	WHO Africa	Ghana	COVID-NMA	WHO	FIND SARS-CoV-2 Test Tracker	Global COVID-19 Clinical Trial Tracker	CEPI
WHO dashboard	African Arguments	Indonesia	EPPI Centre	WHO International Clinical Trials Registry Platform (ICTRP)	FIND SARS-CoV-2 Diagnostics: performance data	US NIH registered clinical trials	Vaccine Centre LSHTM
Johns Hopkins University	European CDC	Nigeria CDC	Norwegian Institute of Public Health	Cytel	Serology-based tests for COVID-19	Solidarity trial	<a href="#">COVID-19 Oxford Vaccine Trial</a>
WEF		Sierra Leone	Oxford C19 Government Response Tracker (OxCGRT)	US NIH	Our World in Data: C19 Testing	COVID-19 Therapeutics Accelerator	<a href="#">COVID-19 Vaccine Tracker</a>

Our World in Data		Singapore	Our World in Data: C19 Policy responses	COVID-evidence			
Global 5050		UK	IFPRI COVID-19 Policy Response Portal	Cochrane			
CEBM, University of Oxford		US	COVID-19 Primer	Clinicaltrials.gov			
Humanitarian Data Exchange			NIH LitCovid	UKCDR			
Information is Beautiful			WHO COVID-19 Database				
LSHTM							
HealthMap (cases)							
The Commons Project							
SeroTracker							

## C19 Resource Hubs

Global	Regional & Country	Academic journals & Publishers	Institutes/Centres/ Funders/Other	Health Topics	Social Sciences
WHO COVID-19 pandemic	Africa CDC	Annals of Internal Medicine	LSTM	Stop TB Partnership	SSHAP
WHO risk communication	African Union	BMJ	LSHTM		IDA
WHO Q&A	Nigeria CDC	Bulletin of the WHO	ICL MRC Centre for Global Infectious Disease Analysis	Global Menstrual Collective	Disability and Inclusion
WHO Global research	GeoPoll: SSA	Cambridge University Press	ODI	SLH: Handwashing in low resource settings	Coregroup IDDC
COVID-19 Solidarity Response Fund	Global Health Network Africa	Cell Press	Johns Hopkins University	RBM Partnership	Ethics, health systems & COVID-19
UN	African Academy of Sciences	Cochrane	Center for Global Development	Epidemic Preparedness Innovations	Social Development Direct C19 blog series
UN Women	Africa Evidence Network	Elsevier	CMMID Repository		

UNOCHA	OCHA Southern and Eastern Africa COVID-19 Digest	Health Policy and Planning	Norwegian Institute of Public Health		
UNHCR	South African Government	JAMA Network	Oxford Centre for Evidence-based Medicine		
UNICEF		The Lancet	HEART		
UNESCO		medRxiv and bioRxiv (Preprints)	UKRI		
UN WFP		NEJM	Evidence Aid		
GOARN		Oxford University Press	NIH		
EPI-WIN		PLoS	IFPRI Resources and Analyses of C19 Impact		
World Bank		SAGE journals	Prevent Epidemics		
Our World in Data		Science			
COVID-19 Narratives by David Nabarro		Springer Nature			
Reliefweb		SSRN (Preprints)			

Humanitarian OpenStreetMap Team		Wiley			
Global Partnership for Sustainable Development Data					
WorldPop					
Flowminder					
COVID-END					
Premise COVID-19 Global Impact Study					
GISAID					

## Online learning & events

Date	Title/URL	Online learning/event	Duration	Lead
16.10.2020	Financing a Global Public Health Response	Online event	1h30	CGD
02.10.2020	Understanding and Improving COVID-19 Vaccine Portfolio	Online event	1h30	CGD
21.09.2020	Mitigating the Economic and Health	Online event	1h30	CGD, GF, AU

	Impact of COVID-19 across Africa			
June 2020	OpenWHO, the free, open-access learning platform for health emergencies, now offers 10 online courses related to COVID19.	Online courses	Varies	WHO
Available now	Standard precautions: Environmental cleaning and disinfection	Online course	1 hour	WHO
Available now	COVID-19: Effective Nursing in Times of Crisis	Online course	2 weeks – 2 hours per week	Johns Hopkins School of Nursing
Available now	WHO Academy and WHO Info mobile applications	Mobile app		WHO
Available now	COVID-19: Pandemics, Modelling and Policy	Online learning	2 weeks   2 hours weekly study	FutureLearn UNESCO UNITWIN Complex Systems Digital Campus/Open University
11.5.2020	COVID-19 Contact Tracing course	Online learning	5 hours	Johns Hopkins Bloomberg School of Health
7-28 May 2020	Virtual Evidence Weeks	5 sessions	1h 30	International Initiative for Impact Evaluation (3ie)
Tuesdays at 1700 CEST (Geneva time) & Thursdays 0830 CEST	COVID-19 Open online brief with Dr David Nabarro	Event	1h	4SD

(Geneva time)				
Available now	Emerging respiratory viruses, including COVID-19: methods for detection, prevention, response and control	Online learning	3 hours	WHO
Available now	Responding to COVID-19: Real-time training for the coronavirus disease outbreak	Online learning	Multiple self-paced course	WHO
25 May 2020	COVID-19: Tackling the Novel Coronavirus	Online learning	3 weeks   4 hours weekly study	FutureLearn LSHTM/UK PHRST
Available online now without mentors. Updated version will commence early June 2020	COVID-19 Diagnostics and Testing	Online learning	3 weeks   3 hours weekly study	FutureLearn FIND/LSHTM/ASLM
6 April 2020	COVID-19 Critical Care: Understanding and Application	Online learning	5 weeks   1 hour weekly study	FutureLearn University of Edinburgh & Royal College of Physicians of Edinburgh
Available now	COVID-19 supporting online courses	Online learning	Multiple self-paced course	BMJ Learning

## Suggested citation

Millington, K.A. and Reddin, S. (2020). *COVID-19 Health Evidence Summary No.97*. K4D Evidence Summary. Brighton, UK: Institute of Development Studies.

## Rapid review methodology

The rapid weekly search for peer-reviewed literature is carried out through a PubMed search with the following keywords (“COVID-19” OR “severe acute respiratory syndrome coronavirus 2” OR “2019-nCoV” OR “SARS-CoV-2” OR “2019nCoV” OR “coronavirus” ) AND (“Africa” OR “South Asia” OR “Developing” OR “low-income” OR “low income” OR “lower-middle income” OR “low and middle income” OR “LMIC” OR “LIC” OR “global south”) OR (“poverty”) OR (“equity” OR “equities”), restricted to articles published in the previous 2 to 3 days, in English. This is complemented by a search of the homepage of the following high-impact global health journals: The Lancet journals, New England Journal of Medicine, Nature, JAMA, Annals of Internal Medicine, Cochrane Reviews, BMJ Global Health, the PLoS journals and a Twitter search of their Twitter pages. A search also of preprints from bioRxiv and medRxiv. Please note that papers that have not been peer-reviewed are highlighted in red. All primary research papers that relate to the primary and secondary impacts of the COVID-19 response in LMICs, and disease control and health system responses are included. Articles related to tackling the secondary impacts on other sectors are not included. Additional commentaries, opinions, and commissioned pieces are selected based on relevance.

The search for dashboards, guidelines, tools, editorials, comments, blogs, opinions and news is through the academic journals listed above, C19 resource hubs and following lead academics and professionals on Twitter.

## About this report

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