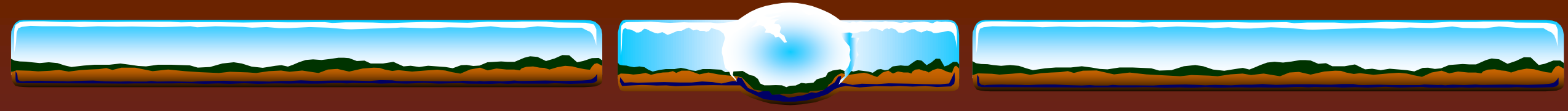




# COVID-19 Clinical Update

Jonathan Vilasier Iralu, MD, FACP

Indian Health Service Chief Clinical Consultant  
for Infectious Diseases



# Disclosures



# COVID-19 Transmission

- ❖ **Pre-symptomatic SARS-CoV-2 Infections and Transmission in a Skilled Nursing Facility** (Arons et al, NEJM 4/24/2020)
  - ❖ Serial 2 point prevalence survey 1 week apart at SNF using RT-PCR
  - ❖ Recorded symptoms preceding 14 days and retested asymptomatic patients
  - ❖ 23 days after the first positive test, 64% of tested residents were positive
  - ❖ 56% of SARS-CoV-2 infected were asymptomatic at the time of testing
- ❖ **Conclusions:** Rapid transmission occurred with likely asymptomatic transmission. **Focus on symptomatic residents is not enough**



# Clinical Presentation Symptom Update

- ❖ CDC updated “**Watch for Symptoms**” 2-14 days after exposure
  - ❖ Fever
  - ❖ Cough
  - ❖ Shortness of breath
  - ❖ **Chills**
  - ❖ **Repeated shaking with chills**
  - ❖ **Muscle pain**
  - ❖ **Headache**
  - ❖ **Sore Throat**
  - ❖ **New loss of taste of smell**



# Clinical Presentation ENT Update

- ❖ **Alterations in Smell or Taste in Mildly Symptomatic Outpatients with SARS-CoV-2 Infection** (Spinato et al, JAMA, 4/22/2020)
  - ❖ 202 of 274 patients were swab positive were interviewed 5-6 days later about sudden alteration in sense of smell or taste 2 weeks before swabbing
  - ❖ Calculated a Sino-Nasal Outcome Test 22 (**SNOT-22**) between 0 and 5
  - ❖ **64% had altered smell or taste** with median SNOT-22 of 4 (severe)
  - ❖ **Smell/Taste alteration was often the first apparent symptom**



# Neurologic Manifestations Update

- ❖ Large Vessel Stroke as a Presenting Feature of COVID-19 in the Young (Oxley et al, NEJM, 4/28/2020) at Mount Sinai, NY, NY
  - ❖ Five patients with COVID-19 all under age 50 with large vessel stroke
  - ❖ NIHSS score was 17 consistent with severe large vessel stroke
  - ❖ 2 had no underlying disease (age 33 and 37)
  - ❖ 2 patients delayed calling the ambulance over concern about COVID-19 exposure at the hospital



## Testing update

- ❖ *Cepheid Xpert*: 45 minute turn around
- ❖ *Abbott ID NOW COVID-19 device in use IHS, CVS, & Walgreen*
  - ❖ Cleveland Clinic on NPR: missed 15% of positives → Abbott notes liquid VTM used and recommended using dry swabs only
- ❖ Similar anecdotal reports @ U of Pittsburgh and Northwestern (**in the lay press**), not at Newton-Wellesley Hospital which found good correlation.
  - >>> *We need published correlation with dry swabs vs PCR and Cepheid*



# Hydroxychlorquine Treatment Update

- ❖ **IDSA:** use in Clinical Trials only

- ❖ **NIH:**

  - ❖ Don't use HCQ + Azithro combination

  - ❖ Insufficient data to support HCQ use

- ❖ **FDA**

  - ❖ Don't use HCQ for outpatients

  - ❖ Warning about QTc prolongation → inpatients only or in a clinical trial





# Remdesivir

- ❖ **Large NIAID RCT** results released by Director Anthony Fauci 4/29
  - ❖ 1090 Patients randomized
  - ❖ Recovery time was 11 days for Remdesivir and 15 days for placebo
  - ❖ Mortality rate was 8% for Remdesivir and 11% for placebo
  
- ❖ Await final analysis but results are encouraging!



# PPE Guideline from IDSA

- ❖ **Either Surgical Mask or N95** recommended as part of PPE: Conventional
- ❖ In Contingency or Crisis use **surgical mask or reprocessed N95** respirator
- ❖ No recommendation re **double gloving** or **shoe covers**
- ❖ Use N95 or PAPR for aerosol generating procedures (AGPs): Conventional
- ❖ Use **Reprocessed N95** for AGPs in Contingency or Crisis
- ❖ Use face shield or surgical mask to cover N95 for **extended use for AGPs**
- ❖ Use face shield or surgical mask to cover N95 to allow for **reuse for AGPs**

[www.idsociety.org/COVID19guidelines/ip](http://www.idsociety.org/COVID19guidelines/ip)



# More COVID-19 Training

- ❖ **CDC:** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/index.html>
- ❖ **ACP Physician Handbook:** <https://www.acponline.org/clinical-information/clinical-resources-products/coronavirus-disease-2019-covid-19-information-for-internists>
- ❖ **UW Protocols:** <https://covid-19.uwmedicine.org/Pages/default.aspx>
- **UW IDEA Program:** <https://covid.idea.medicine.uw.edu/>
- **NIH Guidelines:** <https://covid19treatmentguidelines.nih.gov/>
- ❖ **Brigham and Women's Hospital:** [covidprotocols.org](https://www.bwh.harvard.edu/covidprotocols.org)



# More worthwhile reading from NEJM

- ❖ Rural Matters-Coronavirus and the Navajo Nation (H Kovich, NEJM 4/24/2020)
- ❖ Mild or Moderate COVID-19, (Rajesh T Gandhi et al, NEJM 4.24.2020)

