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# Seven days in medicine: 17-23 February 2021

#### Covid-19

#### BMA repeats plea for PPE guidance review

A coalition of more than 20 organisations wrote to the UK prime minister, Boris Johnson, to reiterate their call for a review of the current infection prevention and control guidance, which they said "does not accurately depict the airborne risks when sharing health and care settings including working in patients' homes and public buildings." The BMA, the Royal College of Nursing, and others also called for better ventilation in all at-risk settings and for data to be collected and published on healthcare workers who have contracted the virus at work, to help identify settings where staff are most affected.

### Care homes in England will allow named visitors

Care home residents in England will be able to be visited indoors by a single named individual from 8 March as part of the prime minister's "road map" to ease lockdown restrictions. Visitors will be allowed repeated contact with the resident but will have to undergo a lateral flow test for covid-19 beforehand, wear personal protective equipment (PPE) during the visit, and avoid close contact. Close contact care will be restricted to visitors who provide assistance such as help with dressing, eating, or washing. These carers will continue to have regular polymerase chain reaction (PCR) tests and observe the same PPE arrangements as staff.

#### Scotland "failed to learn" from pre-pandemic drill

The health service in Scotland should have been better prepared to respond to some of the challenges posed by the covid-19 pandemic, said the country's auditor general. The review of 2020 praised early action taken in the first wave of the pandemic to prevent hospitals from being overwhelmed, but it criticised the failure to implement measures identified in three pre-pandemic planning exercises. This left patient facing staff unprotected and resulted in 39% of all covid-19 deaths in Scotland taking place in care homes. (Full story doi:10.1136/bmj.n469)

# **Vaccines**

#### A 12 week interval "works better than six"

A three month interval between doses of the Oxford-AstraZeneca vaccine results in higher vaccine efficacy (81%) than only a six week interval (55%), and the first dose offers 76% protection from 22 days onwards, showed the results of post-hoc exploratory analyses from a phase III randomised controlled trial published in the *Lancet*. The study, which was published as a preprint at the start of February, also confirmed vaccine efficacy against symptomatic disease after two doses, with no hospital admissions or deaths among the people vaccinated (8597 participants), compared with 15 instances in the control group (8581).

#### One Pfizer dose "is 85% effective after 15 days"

Early findings from the campaign to vaccinate healthcare workers against SARS-CoV-2 in Israel suggested that the Pfizer-BioNTech vaccine reduced symptomatic infections by 47% from day 1 to day 14 post-vaccination, rising to an 85% reduction from day 15 to day 28.³ The figures from Sheba Medical Centre were published in the *Lancet* and covered 9000 healthcare workers from 19 December 2020 to 24 January 2021. Confirmed covid-19 cases totalled 170 during that period, of which 89 (52%) were in unvaccinated staff, 78 (46%) in people who had been given one dose, and three (2%) in people who had had two doses.

# **Primary care**

# US healthcare subsidiary will run more than 50 English practices

Operose Health—a subsidiary of the US company Centene—acquired AT Medics, which operates 37 general practices in London, mostly under Alternative Provider Medical Services contracts. These will add to the 21 general practices in England that Operose acquired them last year. The expansion will probably make Operose the largest primary care provider in England, providing care to more than 500 000 patients. Jackie Applebee, chair of Doctors in Unite and a GP, said the move was evidence that the NHS was being privatised. (Full story doi:10.1136/bmj.n519)

#### Respiratory services

#### Every hospital "needs respiratory support unit"

Doctors from the British Thoracic Society called for the NHS to officially recognise, roll out, and fund respiratory support units throughout the UK. Arrangements resembling respiratory support units have emerged during the covid-19 pandemic to care for patients outside critical care units, and they are increasingly recognised as a way to deliver enhanced respiratory support to people with severe lung disease. Doctors believe that the units could transform respiratory care and be particularly useful in coping with winter pressures and the ongoing presence of endemic covid-19. (Full story doi:10.1136/bmj.n466)

#### Workforce is in "state of constant crisis"

The British Thoracic Society has warned that UK respiratory services are so understaffed and under-resourced that they cannot deliver routine services and specialist clinics while treating patients with acute covid-19 and running "long covid" clinics. While it said that an increase in the respiratory workforce was ultimately needed, it set out proposals to allow the NHS to make the best use of the existing workforce, such as annual staff scheduling to reflect seasonal demand and service agreements limiting the amount of time staff spend providing general and

emergency medicine services. (Full story doi:10.1136/bmj.n497)

#### **Prescribing**

### GMC updates guidance on remote prescribing

The General Medical Council updated its guidance on standards for good practice when prescribing remotely and face to face, when prescribing unlicensed medicines, and when patient care is shared with another doctor. It makes clear that the same standards remain when prescribing remotely as when seeing patients, such as being satisfied that an adequate assessment has been made, establishing a dialogue, and obtaining consent. New advice says that doctors should not prescribe controlled drugs unless they have access to patient records, except in emergencies.

#### Flu vaccination

#### Lansley reforms caused fall in London's uptake

The centralisation of vaccine coordination that stemmed from the Health and Social Care Act 2012 led by Andrew Lansley disproportionately affected London, said a report from the Royal Society for Public Health. This led to just one person being accountable for flu vaccination across the whole of London, covering 2.2 million eligible patients and 2186 general practices. The gap between overall flu vaccination rates around England and in London grew from 1.8% to 6.2% between 2011 and 2019-20. (Full story doi:10.1136/bmj.n480)

#### Science

#### New agency backs high risk research

The UK government put £800m (€929m; \$1130m) into a new, independent scientific research agency to help fund "high risk research that offers the chance of high rewards" and to help "cement the UK's position as a global science superpower." The Advanced Research & Invention Agency will be based on models that have proved successful in other countries, particularly the influential US Advanced Research Projects Agency model, which helped create transformational technologies such as the internet and GPS. That model was a vital pre-pandemic funder of mRNA vaccines.

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