

COVID-19 Daily Briefing: July 20th

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1. Summary

TREATMENT

- **DEXAMETHASONE**: The UK based RECOVERY collaborative group has published results showing that treatment with dexamethasone resulted in lower 28-day mortality in COVID-19 patients receiving respiratory support. This finding comes from a randomised controlled trial of over 6,000 patients hospitalised with the disease.
- **RESEARCH**: Throughout the pandemic there has been a significant number of publications reporting the anecdotal success of different treatments, with little regards to confounding factors for apparent treatment success. This report summarises the findings of the RECOVERY trial, where several promising treatments were tested in randomised trials for their usefulness and specific scope of application. Overall, 15% of all patients hospitalised with COVID-19 in the UK were enrolled in the trial. A previous thorough review of small trials during the 2014-2016 Ebola outbreak concluded that randomized, controlled trials are the most reliable way to identify the relative benefits and risks of treatments and that every effort should be made to implement them during epidemics.

GLOBAL RESPONSE

- **GLOBAL HEALTH SECURITY**: Both the [US Senate](#) and the [World Bank](#) have been exploring potential new funds, focused on global health security. However, these moves have been met with concern by some experts and existing global health institutions. Particularly, concerns have been shown with respect to the ethics of new funds focused on emerging pandemics, rather than also focussing on existing disease crises such as AIDS and malaria, and the risk of diverting funding and status from the WHO.
- **FRANCE**: In response to the COVID-19 pandemic, the French Government has set up an independent scientific council, experienced both in the French health system and public health, epidemics, and humanitarian crisis management in low- and middle-income countries, to provide advice. This council combines expertise from a wide array of medical and non-medical fields, and publishes all advice online for public scrutiny. Transparency and independence have protected the authority of scientific advice during this crisis.
- **BRAZIL** has been one of the most badly affected nations during the global COVID-19 crisis. Despite over a million cases and tens of thousands of deaths, the Brazilian government appears not to have prioritised public health during the pandemic. This set of decisions has resulted in the dismissal and resignation of two health ministers with medical experience in quick succession, and they now have an interim minister with no health experience in the role.

3. Quick Summaries

[No more normal](#)

- **ECONOMIC TRANSFORMATION**: *Editorial*. The COVID-19 pandemic has highlighted the fragility of existing socioeconomic systems, and our dependence on certain key workers. Some of the best health systems have averted total collapse only through extreme emergency measures and heroic personal efforts. Food systems, job markets and social support systems have proven flimsy in the

face of the challenges. As the world attempts to recover from this shock it is vital that existing inequalities are not further exacerbated. Wealth redistribution, not growth alone, is essential to improve equality and resilience cannot be achieved without addressing the sustainability for health, society and the planet.

[Can digital contact tracing make up for lost time?](#)

- **CONTACT TRACING:** *Comment article.* Mobile apps show considerable promise as a public health tool for contact tracing infected individuals. Apps' key benefit is to offer much faster contact tracing and isolation than traditional methods and to reduce delays. App-based technologies prove better than conventional contact tracing even with coverage as low as 20% due to their inherent speed. These authors propose that more consideration be given to the integration of apps into conventional contact tracing schemes, combining speed with the benefits of human contact and greater understanding of epidemiological linkages.

[The COVID-19 infodemic](#)

- **MISINFORMATION:** *Editorial.* The COVID-19 pandemic has brought about a sharp rise in the amount of fake news, misinformation, and conspiracy theories spread through social media. Additionally, unprecedented interest in medical and scientific literature has led to misinterpretation by individuals, journalists, and politicians alike; increasing confusion and distrust. These authors point out that misinformation and conspiracy theories are not only damaging but may be actively promoted by social media outlets because they attract large advertising revenues. Immediate collaborative international action is required to maintain the professional integrity and credibility of scientific and medical experts.

4. Longer Reading

[Assessing the impact of coordinated COVID-19 exit strategies across Europe](#)

- **EXIT STRATEGY:** *Peer-reviewed journal article.* Coordinated action across Europe greatly improves the likelihood of eliminating community transmission, with synchronised intermittent lockdowns resulting in half as many total lockdowns. This study, based on mobility and case data, modelled the impacts of well-connected countries ending their lockdowns. Prematurely ending interventions in well-connected countries could lead to resurgence of a continent-wide epidemic.

[The explosion of new coronavirus tests that could help end the pandemic](#)

- **TESTING:** *News feature.* Detecting cases and monitoring the spread of SARS-CoV-2 outbreaks are essential for planning public health interventions. Accurate testing is key to identifying who should be isolated, limiting the spread and determining when measures can be relaxed. However, establishing mass testing has been difficult for many nations, as the "gold standard" testing technique, RT-PCR, requires trained professionals, specific chemical supplies, and expensive instruments. Many research groups around the world are attempting to find faster, cheaper methods to determine infection status, which must go through rigorous validation processes before they can be used for mass screening.