



Evidence and information to fight COVID: a demand driven

Viroj Tangcharoensathien, MD. PhD. Policy perspective

International Health Policy Program 20 Years for Health Policies

Users: general public

1. Nature of virus

- Transmissibility (R0), clinical staging: implication on health literacy, interventions and citizens' behaviour
 - Window period, asymptomatic, symptomatic, serious patients, co-morbidity and mortality

2. Effective social interventions

- Prevention of transmission: proper use of face mask, hand hygiene, social and physical distancing,
- Clear message / evidence on benefit from wearing face mask,
- Local context specific recommendations on social distancing, hand washing, avoid crowded venues and large gatherings,
- Reliable self risk assessment tool,
- Guidelines and practice of self-quarantine and communication channel with health system

The COVID-19 advice for the public: Myth busters by WHO is very useful, see https://bit.lv/2ULgazN



Users: policy makers (1)

Daily epidemiological updates: national, sub-national, other countries

- Case, deaths, mortality rates statistics and graphs
- Reproductive number
- Modeling of cases: mild, moderate and severe conditions which requires different level of health resources
- Balance between economic impacts and morbidity/mortality

Evidence on effectiveness interventions

- Social, public health and medical interventions
- Citizens' adherence to interventions
- Timely political decisions and appropriate responses to the dynamic epidemic



Users: policy makers (2)

Management of fake messages

Regular updates on fake news in social media and immediate technical and legal actions

Health systems resources to respond to different epidemiological scenario

- Supplies of PPE, local production capacity VS purchase, stock and flows and daily consumption
- Unoccupied resources and surge capacity: beds, ICU, negative pressure rooms, respirators, cohort wards
- Capacity to mobilize public or private venues for quarantines + health personnel
- Health workforce: generalists, public health, specialists, surge capacity to deploy.
- Shifting NCD patients from hospital venues, home delivery of medicines for NCD, teleconsultations
- Laboratory capacity and surge capacity, PCR machines and reagents, antibody screening
- Medicines for treatment



Users: frontline workers

Effective public health interventions

- Detect high risk cases, diagnose and clinical management by stage of infection and isolation
- Contact tracing, diagnose, and quarantine
- Protocols related to diagnosis, laboratory interpretation and referral

Clinical management

- Median duration of viral shedding in survivors
- Empirical experiences in clinical management
- National guidelines, based on broad consultation and consensus, on rationing criteria for ICU bed, dialysis machines, and respirators when demand surpass limited supplies. This prevents social dissatisfaction

