GUIDELINES AND RESEARCH UPDATES

World Health Organization India

TECHNICAL DOCUMENTS:

D1. WHO mass gathering COVID-19 risk assessment tool: generic events (WHO, 16 June) **[**LINK**]**

- This is a newly published research and evidence from WHO pertaining to areas such improved SARS-CoV-2 diagnostics, vaccines, variants of concern (VoC), ventilation considerations, and risk communication and community engagement and infodemic management (RCCE). The document spells out considerations for the risk evaluation and risk mitigation pertaining to mass gatherings.

D2. Clinical management of COVID-19: Living guideline (WHO, 23 June) **[**LINK**]**

- This is the fourth update in the 'Living guideline' series. This document contains three **new** recommendations regarding hospitalized patients with severe or critical COVID-19: (a) conditional recommendation to use high-flow nasal oxygen (HFNO); (b) continuous positive airway pressure (CPAP); and (c) non-invasive ventilation in hospitalized patients with severe or critical COVID-19 and acute hypoxaemic respiratory failure (AHRF).

D3. Addressing noncommunicable diseases in the COVID-19 response (WHO, 24 June) **[**LINK**]**

- This technical note gives general guidance to people living with NCDs, their caregivers and family members, the public, health programme managers and health-care workers on how to reduce risks of a COVID-19 infection and maintain care for people living with NCDs during the outbreak.

D4. Multi-sectoral impacts of the COVID-19 pandemic on nutrition outcomes: an analytical framework (WHO, 5 July) **[**LINK**]**

- This document describes the process and methodology used to develop the Analytical Framework, explains the different components and provides guidance on how it can be adapted for its application to different contexts for specific nutrition outcomes.

D5. Contact tracing and quarantine in the context of COVID-19: interim guidance, 6 July 2022 (WHO, 6 July) [LINK]

- This updated guidance introduces shorter recommended quarantine periods, including the ability to further shorten quarantine through the use of testing. It advises that National and local health authorities use risk-based approaches to contact tracing and quarantine that include reviewing and adjusting to their local circumstances and disease epidemiology, population immunity, their health system's capacities, and risk tolerance.

D6. Public financial management for effective response to health emergencies (WHO, 8 July) [LINK]

- This rapid review analyses various country public financial management (PFM) experiences and identifies early lessons emerging from the financing of the health response to COVID-19. The assessment is done by stages of the budget cycle: budget allocation, budget execution, and budget oversight.

D7. The gender pay gap in the health and care sector a global analysis in the time of COVID-19 (WHO, 13 July) [LINK]

- This report provides an analysis of the gender pay gap in the health and care sector using representative survey data from wage employees from countries in all geographic regions and income groups across the world.

JOURNAL ARTICLES

J1. Quantifying the effects of the COVID-19 pandemic on gender equality on health, social, and economic indicators: a comprehensive review of data from March, 2020, to September, 2021 (The Lancet, 25 June) [LINK]

- The study explored the indirect effects of COVID-19 on gender disparities globally with regard to social, economic, and health effects. The study indicates that the most significant gender gaps identified pre-existing widespread inequalities between women and men during the COVID-19 pandemic.

J2. Effectiveness of BNT162b2 vaccine against SARS-CoV-2 infection and severe COVID-19 in children aged 5-11 years in Italy: a retrospective analysis of January-April, 2022 (The Lancet, 9 July) [LINK]

- The study assessed vaccine effectiveness against SARS-CoV-2 infection and severe COVID-19. The findings demonstrate that vaccination against COVID-19 in children aged 5–11 years showed a lower effectiveness in preventing SARS-CoV-2 infection and severe COVID-19 than in individuals aged 12 years and older.

J3. Effectiveness of a fourth dose of covid-19 mRNA vaccine against the omicron variant among long term care residents in Ontario, Canada: test negative design study (British Medical Journal, 6 July) [LINK]

- The study estimated the effectiveness of a fourth versus third dose. The findings suggest that compared with a third dose of mRNA covid-19 vaccine, a fourth dose improved protection against infection, symptomatic infection, and severe outcomes among long term care residents during an omicron dominant period. A fourth vaccine dose was associated with strong protection against severe outcomes in vaccinated residents compared with unvaccinated persons.

J4. Long distance airborne transmission of SARS-CoV-2: rapid systematic review (British Medical Journal, 29 June) [LINK]

- This study evaluated the potential for long distance airborne transmission of SARS-CoV-2 in indoor community settings and to investigate factors that might influence transmission. This rapid systematic review found evidence suggesting that long distance airborne transmission of SARS-CoV-2 might occur in indoor settings such as restaurants, workplaces, and venues for choirs, and identified factors such as insufficient air replacement that probably contributed to transmission. These results strengthen the need for mitigation measures in indoor settings, particularly the use of adequate ventilation.

J5. Effects of Previous Infection and Vaccination on Symptomatic Omicron Infections (New England Journal of Medicine, 7 July) [LINK]

- The study evaluated the effectiveness of vaccination with BNT162b2 (Pfizer-BioNTech) or mRNA-1273 (Moderna), natural immunity due to previous infection with variants other than omicron, and hybrid immunity (previous infection and vaccination) against symptomatic omicron infection and against severe, critical, or fatal COVID-19. The study found no discernable differences in protection against symptomatic BA.1 and BA.2 infection. Vaccination enhanced protection among persons who had had a previous infection. Hybrid immunity conferred the strongest protection.

J6. Transmission of SARS-CoV-2 in standardized first few X cases and household transmission investigations: A systematic review and meta-analysis (Wiley, 16 June) [LINK]

- Household secondary infection attack rate of SARS-CoV-2 was investigated as per the protocol aligned with the WHO Unity Studies Household Transmission Investigations (HHTI). The study highlights that FFX and HHTIs remain a critical tool to monitor population immunity to, and transmission dynamics and infection-severity of SARS-CoV-2, including the emergence of new genetic variants. Such findings are crucial to inform the ongoing response in different resource settings and such estimates are key for regional and global modelling and forecasting to

inform optimal application of PHSM and allocate pandemic resources including COVID-19 vaccines.

J7. Compliance with Medication amongst Persons with Diabetes Mellitus (DM) during the COVID-19 Pandemic, Kerala, India: A Cross Sectional Study (Tropical Medicine & Infectious Disease, 14 June) [LINK]

- This study assessed the medication compliance and factors associated with poor compliance in DM persons attending selected primary care government facilities in Kerala during the COVID-19 pandemic. Findings show that about one third DM patients during the pandemic were non-compliant with medication. Key risk factors for non-compliance included being of a younger age and not having their blood glucose levels monitored during the COVID-19.