

7 April 2020

BRIEF19

A daily review of covid-19 research and policy.

RESEARCH BRIEFING

What happened to covid-19 patients admitted to the ICU in Italy? A [paper](#) published in *JAMA* on April 6th describes the outcomes of patients with confirmed SARS-CoV-2 infection who were admitted to Intensive Care Units in Lombardy, Italy. Of the 1,591 patients admitted to the ICUs, most were men (82 percent) and the average age was 63 years old. Almost all patients—99 percent—required at least some help with breathing, including 88 percent who required a mechanical ventilation (a breathing machine). At the time of the study, 26 percent of the patients followed in this study had already died, while another 58 percent remain in the ICU. This study is notable for several reasons. First, this study represents the largest group of ICU patient outcomes described since the start of the covid-19 pandemic. Second, the authors shared intricate details in this publication, providing important insights into the needs of covid-19 patients ICUs. Finally, the results provide further evidence that older patients with chronic disease (high blood pressure, lung disease, etc) tend to fare poorly when they become sick with covid-19. While this study may not immediately provide “practice-changing” information for emergency physicians and other hospital providers, it is a stark reminder that older patients with multiple medical problems may require higher levels of medical care.

--Joshua Niforatos, MD, Research Section Editor

From the archives of uninformative clickbait. A letter published in the normally prestigious journal, *The Annals of Internal Medicine* reports results of an attempt to assess whether SARS-CoV-2 patients who coughed into surgical masks or cotton masks were any less likely to deliver viral particles to petri dishes held 20cm (7.9 inches) in front of their faces than patients who wore no mask. *Brief19* will not be reporting the outcome of this study here, as the investigation included no more than four patients. Due to the incredibly small size of this study, no reliable conclusions can be drawn or generalized. However, those interested in the findings may access the study [here](#).

--Jeremy Samuel Faust, MD MS

POLICY BRIEFING

Quarantine requirements across state lines.

Last week, the Centers for Disease Control issued a travel advisory for the tri-state area of New York, New Jersey, and Connecticut. This advisory fell short of an actual restriction on travel that many had sought. It is unclear whether the federal government has the right to lock down interstate travel, even in times of emergency. In response, many states have [taken matters](#) into their own hands. To date, sixteen states have issued varying degrees of quarantine policy for domestic travel. Texas, for example, now requires all travelers from Louisiana to self-quarantine for 14 days. In Maine, all out-of-state travelers must self-quarantine, regardless of a traveler’s state of origin. The penalties associated with these policies can be steep. In Texas, for example, penalties of \$1,000 and up to 180 days in jail may be enforced. *USA Today*.

--Kimi Chernoby, MD JD, Policy Section Editor

Expanded face mask recommendations Citing a growing pool of data that asymptomatic patients infected with SARS-CoV-2 may be able to spread the virus to others, the Centers for Disease Control and Prevention (CDC) has [issued new guidance](#) aimed at combating this. In addition to continuing its recommendation to maintain at least six feet of distance from others one of its social distancing strategies, the CDC now also recommends “simple cloth face coverings” as an additional, voluntary measure. The Surgeon General has also published an instructional video on [YouTube](#) demonstrating how to make a simple mask at home. This recommendation may be voluntary for civilians but it is required at the Department of Defense. A new [mandate](#) requires that anyone on any DOD premises must wear such coverings when they are unable to maintain the recommended six feet of distancing between individuals. Local commanders have been given some latitude to allow for exceptions to this policy, but any such action must be communicated up the chain of command to ensure proper adherence to protocol and awareness of deviation from these practices. *The Centers for Disease Control and Prevention*

--Joshua Lesko, MD

Masks, at last. Last week, 3M and the Trump administration carried out a public feud over the manufacturing and distribution of N95 masks. Highlights of the fracas included the administration’s vocal displeasure over 3M’s plan to fill existing orders for Canadian customers, seemingly in opposition to the administration's invocation of the Defense Production Act, which allows the government to direct aspects of 3M’s manufacturing. Now the administration and the 3M have finally [come to terms](#) in an agreement which may have been in the works dating back to before President Trump’s invoking of the DPA last month. Under the terms, 3M will produce 55 million N95 masks for the U.S, for a total of 166.5 million masks over the next several months. *CNBC.*

--Kimi Chernoby, MD JD, Policy Section Editor

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Brief19 is a daily executive summary of covid-19-related medical research, news, and public policy. It was founded and created by frontline emergency medicine physicians with expertise in medical research critique, health policy, and public policy.