

2 October 2020

BRIEF19

A daily review of covid-19 research and policy

BREAKING NEWS

President Trump and First Lady of the United States have SARS-CoV-2.

Last night, President Trump announced that he and the First Lady, Melania Trump have tested positive for SARS-CoV-2. The President's physician, Sean Conley, released a memorandum for Kayleigh McEnany stating that he had "received confirmation" of the results. Conley stated that both are "well at this time." He also said that he expects the President to continue to carry out his duties without disruption.

There is simply no way for Dr. Conley or anyone to know what will happen, though. While we have not been provided enough information to say whether or not either President or Mrs. Trump have developed symptoms of covid-19, the syndrome caused by the novel coronavirus, everything we have learned in the last 9 months suggest that patients can be absolutely symptom free for many days and then become ill and even critically ill; on the other hand, many never develop symptoms at all. Others have mild symptoms throughout their courses, with some precipitously declining. In this light, one must assume that Dr. Conley's words are aspirational.

This is especially the case for the President, who has several risk factors that increase his odds of developing serious or severe covid-19: his age, his gender, and at least one pre-existing condition (obesity). Each of these features factor into his risk of dying in the next two to four weeks—the percent chance of which could be in the double digits. Alternatively, the President could be among those who never develop a single symptom and recover without incident.

At times the President has downplayed this virus. He may or may not be taking hydroxychloroquine, in a misguided effort to try to stave off infection. But most conspicuously, the President is often seen without a mask. Just earlier this week he derided his opponent former Vice President Joseph Biden for his predilection for wearing a mask in almost all of his public appearances. It is unknown whether Trump was positive for SARS-CoV-2 during Tuesday's debate. However, the President raised his voice many times, which can increase the distance that droplets with the virus can travel.

—*Jeremy Samuel Faust MD MS*

RESEARCH BRIEFING

Covid-19 vaccine tested in older adults.

The accelerated covid-19 vaccine research has led to the release of many recent notable manuscripts and another was published this week in the [New England Journal of Medicine](#) that analyzed an important high risk group: older adults. Conducted at three sites across the United States (Kaiser Permanente research center in Seattle, Emory University and the National Institute of Allergy and Infectious Diseases [NIAID]) this Phase 1 vaccine study was expanded to include forty older adults. The subjects were divided into two groups, 56-70 years old and those 71 and older. Interestingly, participants were not screened for past or current covid-19 infection before enrollment.

The vaccine being tested was developed by the National Institute of Allergy and Infectious Diseases and Moderna, a biotechnology company in Cambridge, MA. It utilizes the S

protein by which the coronavirus enters host cells. Participants received either 25 micrograms or 100 micrograms of the injection. Each person received an injection on day 1 and 29 with the same dose given each time. Follow-up visits were performed on days 7, 14 and 57. Following vaccination, an assessment of antibody and T-cell response was studied. The 100 microgram dose (higher) dose exhibited higher binding- and neutralizing-antibody titers compared to the 25 microgram dose.

Of the 40 patients, one in the 56-70 year lower dose group did not receive the second dose after developing a fingernail infection which required antibiotic treatment. Common side effects such as headache, fever, body aches, chills and injection site pain were reported which were all classified as mild to moderate and were often associated with the second dose.

This small Phase 1 study of older adults shows promise in a vaccine for covid-19 and appears to be effective and well tolerated in older adults. It remains early. The question of long-standing immunity and the ability of these antibodies to prevent infection remains unanswered.

—Christopher Sampson, MD, FACEP

POLICY BRIEFING

Goodwill only goes so far. Reimbursement in the time of covid-19.

Yesterday several major healthcare insurers [announced](#) a change to their reimbursement rates for virtual healthcare visits, effectively limiting the impact of a policy that has proved vital to many Americans during the pandemic. Both UnitedHealthcare and Anthem have announced that they will no longer cover the full cost of virtual visits *unrelated* to covid-19, with Anthem applying cost-sharing measures based on a member's existing plan. When asked for specific estimates on cost to members, UnitedHealthcare cited \$50, while Anthem would not commit to any figures, citing differences between types of plans and individuals.

The problem extends beyond just those patients covered by these insurers; as one company, or two in this case, begins restricting benefits, others tend to follow suit to cut down on expenses. This in turn forces healthcare providers to reconsider the services offered as well as the cost borne by the patient. While the Centers for Medicare and Medicaid Services has [committed](#) to expanded telehealth coverage in 2021 via the annual Physician Fee Schedule (which determines how much physicians are paid for their work in treating Medicare and Medicaid patients), individual companies have been known to make their own adjustments. That these two decided to do so in the middle of the pandemic seems particularly harsh. *Various*.

—Joshua Lesko, MD

*Kimi Chernoby, MD, JD, Policy Section Founder. Joshua Niforatos, MD Research Section Editor
Frederick Milgrim, MD, Kate Taylor, Editors-at-Large. Kane Elfman PhD, Publishing and Design.
Jeremy Samuel Faust MD MS, Editor-in-Chief.*

<http://www.brief19.com/>

Twitter: [@brief_19](#)

submissions@brief19.com

*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 and public policy.*