## **BRIEF19**

A daily review of covid-19 research and policy.

## RESEARCH BRIEFING

Universal testing in obstetrics reveals a high asymptomatic carrier rate for SARS-CoV-2. A new research letter in The New England Journal of Medicine described the use of universal SARS-CoV-2 testing carried out in two hospital obstetrics wards. Pregnant women represent a population that likely to have increased exposure to SARS-CoV-2 because of repeated interactions with the healthcare system, especially during delivery and the postpartum period. New York Presbyterian Allen Hospital and Columbia University Irving Medical Center conducted a study from March 22 to April 4, 2020 of the 215 women who delivered at the facilities. Out of these women, 1.9 percent (four women) had covid-19-like symptoms at the time of admission to the delivery ward. All four women tested positive for SARS-CoV-2. In addition, almost all (99.5 percent) of the women with no signs or symptoms of the virus were tested with nasopharyngeal swabs. Twenty-nine were positive for SARS-CoV-2. Stated another way, 87.9 percent of women who were positive for SARS-CoV-2 at hospital admission had no symptoms at all. Of these, ten percent developed a fever after delivery. Two of the three women who tested positive initially received antibiotics (to treat what doctors presumed were infections and inflammation of the lining of the uterus), while one woman received only supportive care for presumed covid-19. One patient with a negative viral test result at the time of admission developed symptoms after delivery. A repeat test (three days after the initial test) was positive.

Analysis: More than one in eight asymptomatic women who were admitted to the hospital for delivery tested positive for SARS-CoV-2. However, these results may not be applicable everywhere. Currently, New York City has a higher covid-19 prevalence than other parts of the country. Still, this study suggests that the prevalence of covid-19 in symptom-free obstetrical patients is likely to be substantially higher than previously expected. Furthermore, false negative testing (i.e., a negative test result one a patient who truly does have the virus) can underestimate the true prevalence of infection. Though there is no widely accepted evidence of transmission of coronavirus from mother to fetus (nor a proven way to lower whatever that risk may be), the benefits of universal testing protocols remain evident; the more cases that are detected, the better patients and hospitals can adjust their behavior to decrease further spread.

-- Annie Gensel, M.S.

## **POLICY BRIEFING**

**Federal government sends healthcare disbursement.** One of the provisions of the latest stimulus package passed by the US Congress was the allocation of one hundred billion dollars to hospitals and medical practices to compensate for lost income due to the covid-19 pandemic. On Friday, the Department of Health and Human Services (HHS) <u>announced</u> the disbursement of thirty billion dollars from this fund in recognition of healthcare-related financial hardships. To ensure a fair distribution, HHS divided the money based on Medicare fee-for-service (FFS) charges submitted in 2019. These funds are described as direct payment, not loans that need to be repaid. After this initial wave, additional support will focus on rural providers, those with

lower FFS reimbursement, and those hit most heavily by the outbreak. The Department of Health and Human Services

--Joshua Lesko, MD

Plans to lift stay-at-home orders. Several US governors announced that they will be forming working groups to devise plans on when and how states will begin to reopen businesses. Stay-at-home orders enacted on a state-by-state basis have kept many Americans inside these past few weeks. The governors said that their decisions would be guided by experts and data that suggest a safe environment for lifting restrictions. Governors from California, Oregon, and Washington announced the formation of the Western States Pact that will work on a strategic plan to reopen economies on the West Coast. Meanwhile, Governor Andrew M. Cuomo of New York echoed the importance of complementary plans between states, announcing that he would be working with neighboring states as well. If plans to reopen vary too widely from state-to-state, there could be disastrous consequences leading to a second wave of infections. These announcements come in response to President Trump's claim that decisions to lift restrictions are under the president's authority, and not the states. New York Times.

--Rebekah Roll. BS

The Newest Shortage. A food processing plant that produces five percent of the US supply of pork is shutting down indefinitely due to a large outbreak of covid-19. The Sioux Falls, SD plant owned by Smithfield Foods has 238 employees who have tested positive for SARS-CoV-2, accounting for over half of all infections in South Dakota. The plant had initially planned to close temporarily so that it could be thoroughly cleaned, however officials announced that they were not planning to reopen until they received further guidance from state, local, and federal authorities. Smithfield will continue to pay workers during the closure. Shuttering of processing plants and warehouses threaten the US food supply at a time when demand is at a high due to panic buying and stockpiling. However, industry experts note that there will continue to be enough food to support adequate nutrition, but consumers may not have the number of choices to which they are accustomed. The shortages are likely to be most severe for meat as a number of plants around the country have been hit by virus outbreaks. New York Times & Reuters.

--Jordan Warchol, MD, MPH

Joshua Niforatos, MD, Policy Section Editor. Kimi Chernoby, MD JD, Policy Section Editor. 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 policy, and public policy.