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## **BRIEF19**

*A daily review of covid-19 research and policy*

### **RESEARCH BRIEFING**

#### **Covid-19 pandemic effect on maternal and pregnancy outcomes.**

New data published in [The Lancet Global Health](#) examined the effect of the covid-19 pandemic on maternal and fetal outcomes. Researchers reviewed the body of literature from January 2020 to January 2021 and found approximately 40 studies that point to an increase in stillbirths, maternal death and postpartum depression since the start of the covid-19 pandemic.

While those were the headline results, there were a number of other findings from the research worth noting. The increase in maternal deaths occurred primarily in low- and middle-income countries. Meanwhile, preterm births *decreased* in high income countries (findings on this topic have [varied across](#) multiple studies, as we have covered in the past here at *Brief19*). However, these data did not show a change in pregnancy-related diabetes, high blood pressure in pregnancy, induction of labor or modes of labor (e.g. vaginal deliveries versus instrumental-assisted deliveries or c-section). Additionally, no differences were seen in rates of postpartum hemorrhage and neonatal mortality.

These results are meaningful, yet not without limitations. There is bound to be a significant possibility of publication bias; studies that show significant changes in outcomes are more likely to have been published, while researchers who “found nothing,” might have been less likely to move forward with the peer-review process. Furthermore, the vast majority of the referenced studies came from high-income countries, which is particularly problematic, as the lower proportion of studies from low- and middle-income nations suggests that the worst of the problems may be of greater magnitude than this report suggests.

Nevertheless, these results offer insight into the stark reality that social determinants of health continue to influence outcomes with respect to healthcare disparities both in relation to covid-19 and in general. More research that sheds more light on these disparities as they relate to maternal and fetal outcomes during and after the pandemic are expected.

—Joshua Niforatos, MD MTS

### **POLICY BRIEFING**

#### **US Food and Drug Administration further expands testing availability.**

Since the start of the pandemic, the US Food and Drug Administration (FDA) has been [aggressive](#) in evaluating and expanding both covid-19 testing methodologies and device availability in an attempt to better understand and track the spread of SARS-CoV-2. While some of these efforts have been favorable, others (such as the decision to allow antibody tests that had not been vetted for accuracy) have been setbacks. A new FDA [press release](#) this week announced the green-lighting for multiple over-the-counter and point-of-care SARS-CoV-2 tests, meaning that a prescription will not be needed for these tests. The products covered are the Quidel QuickVue At-Home Over-the-Counter COVID-19 test (for at home screening); three versions of the Abbot BinaxNOW tests, approved for home serial screening (with one version approved for at-home screening with a telehealth proctor’s supervision), and; BD Veritor System (which still required a prescription).

Each of the home tests covered by the new policy had previously been approved by the FDA in one form or another. However, the FDA will now allow these devices to be used for testing of asymptomatic individuals when deployed as part of a serial monitoring program (the

idea being that one test may not be enough, but when multiple tests are done, the data can be reliable enough for users to rely on, a concept discussed in a [previous posting](#) here on *Brief19*).

The goal behind this expansion goes beyond home testing. A major goal behind these new authorizations is to allow schools, community centers, and other high-traffic venues to establish screening protocols at the time of entry. Each of the authorized devices tests for SARS-CoV-2 “antigen” (rather than either the genetic material or the presence of antibodies). Antigen testing is seen as crucial because such tests identify whether the source of the test is likely to be contagious, regardless of symptoms at the time. Collectively, these tests should be available in stores in the coming weeks. Such tests, we believe, should have been made available many months ago, and would likely have decreased spread of covid-19 dramatically, according to a [recent study](#). *The Food and Drug Administration*.

—*Brief19 Policy Team*

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