1. COVID-19 Intelligence Report - June 15 (with links)

Updates for the District of Columbia:

- After decreases in community spread in May and early June, recent increases in cases have been reported in the District and in Maryland. It remains to be seen if this trend continues, and whether it will affect DC’s ability to enter Phase 2 (currently scheduled for 19JUNE).
- Following mass demonstrations for racial justice and police reform, the Mayor recommended attendees self-isolate at home and seek testing. Long waits are reported and new sites have opened.
- Disease burden continues to disproportionately affect Black residents (50% of cases, 74% of deaths).

Key updates in prevention of COVID-19:

- Further evidence supports airborne droplet spread as the main modality of SARS-CoV-2 transmission, and suggests that mandated use of face masks in public was associated with significant reductions in transmission in China, Italy, and New York, preventing tens of thousands of new infections.

Key updates in treatment for COVID-19:

- Although previous investigation of lopinavir/ritonavir in hospitalized patients with COVID-19 failed to show a clinical benefit, a new study suggests it may be associated with faster viral clearance in non-severe patients with higher lymphocyte counts.
- Acalabrutinib (inhibitor of Bruton tyrosine kinase which regulates macrophage activation) showed improvement in measures of inflammation and oxygenation in a small group with severe COVID-19.
- The NIH has updated its COVID-19 Treatment Guidelines to recommend against the use of chloroquine or hydroxychloroquine outside of trials, and the FDA has revoked its Emergency Use Authorization.
Updates on obstetric, pediatric, inflammatory, and severe disease complications:

- A systematic review identified 13 papers including 538 pregnancies complicated by COVID-19. The reported rates of maternal critical illness was low (1.4%; no mortalities)
- Evidence on PIMS or MIS-C continues to build, with 58 cases reported from the UK and 156 from France. In one report of 21 patients in Paris, there was a possible association with African ancestry.
- PRE-PRINT: In a study of outcomes in 17 million adult COVID-19 patients in the UK NHS, mortality was higher among Asian and Black patients, and this was not fully explained by pre-existing clinical factors.

Updates on systems of care:

- The Joint Commission published tips on promoting well-being of health care staff during crisis.
- Among ICU and Anesthesiology personnel in Columbia University Hospital, 12% tested positive for antibodies to COVID-19, but it was unclear if this was due to workplace exposure or the NYC subway.
- Two papers in Nature reviewed the impact of large-scale societal restrictions on reducing the spread of COVID-19 across multiple countries and regions. Without policy actions, early infections of COVID-19 grew by ~38% per day, while anti-contagion policies significantly slowed this growth. Across 11 European countries, such interventions were sufficient to drive Rt <1 and achieve epidemic control.

Caution in interpreting preliminary data releases:

- Rapid publication of preliminary findings on COVID-19 has been plagued by errors and misunderstandings, and has not proven to advance development of effective therapeutics.
- This JAMA viewpoint published in April provides further context for the challenge of preserving scientific integrity and public confidence in the face of pressure to approve new treatments.
- This is illustrated by the recent high-profile retractions of the NEJM paper on cardiovascular disease treatment and the Lancet paper on hydroxychloroquine, which were retracted as the Surgisphere database was not made available for independent audit.
- Non-interventional studies can be affected by the pressure to publish as well. One example is a study claiming aerosolized spread of COVID-19 on public transit which has now been retracted. (For context on aerosols, this MGH FLARE report remains relevant as does this Lancet paper.)

GW Covid-19 Intelligence Reports: https://guides.himmelfarb.gwu.edu/SituationReport

2. Light a Candle to Honor Those Affected by COVID-19
The GW Medical Faculty Associates

1. **Blood Drive:** Join Us For The GW Blood Drive at GW’s Marvin Center Main Lobby, 801 21st Street, NW on Wednesday, June 24th and Thursday, June 25th. You must register ahead of time. For more information, please go to [www.gwdocs.com/blood-drive](http://www.gwdocs.com/blood-drive).

GW Hospital

1. **Blood Drive:** Join Us For The GW Blood Drive at GW’s Marvin Center Main Lobby, 801 21st Street, NW on Wednesday, June 24th and Thursday, June 25th. You must register ahead of time. For more information, please go to [www.gwdocs.com/blood-drive](http://www.gwdocs.com/blood-drive).

2. **Masking:** Please ensure you are properly wearing masks in the facility. Masks should cover your mouth and nose at all times. Please see a video about proper masking: [https://app.frame.io/presentations/e16b2494-a849-4f00-b89a-543de2bfd0d8](https://app.frame.io/presentations/e16b2494-a849-4f00-b89a-543de2bfd0d8) (works in Chrome)

The GW SMHS

1. **GW SMHS on Campus:** A web site has been developed as some of the SMHS community comes back to campus over the coming weeks. For guidelines and updates, please visit: [smhs.gwu.edu/smhsoncampus](http://smhs.gwu.edu/smhsoncampus)

2. We have heard from members of our community that they want to support our mission during this time of need. The [GW COVID Response Fund](http://www.gwdocs.com/blood-drive) was established to support the work of our faculty, staff, and students during this crisis.

Staying GWell

[https://smhs.gwu.edu/wellness/resources/covid-19-wellness-resources](https://smhs.gwu.edu/wellness/resources/covid-19-wellness-resources)


2. 7 Fun and Creative Ways to Celebrate Pride Month at Home this Year [https://www.popsugar.com/love/how-to-celebrate-pride-month-at-home-47475795](https://www.popsugar.com/love/how-to-celebrate-pride-month-at-home-47475795)
3. How to Get Sleep In Uneasy Times

https://apple.news/AlhINGrZMTxSiLSD6F7yi6A

This email is intended to serve as a digest of all messaging for our clinical faculty, students, and staff. **Starting on June 1, 2020, we will send this email at the close of business each Monday, Wednesday, and Friday**, as we are managing operations during the COVID-19 pandemic.

This content will also be available at [www.COVID19GWHealth.com](http://www.COVID19GWHealth.com) - please refer to that site often, as we will be posting updates on a regular basis.

If you have feedback, please feel free to send to [SMHSNews@gwu.edu](mailto:SMHSNews@gwu.edu)