

1.) Antibiotic key messages:

Vulnerability of the pharmacy supply chain regarding antibiotics

- There is significant interest in the early use of antibiotics in patients with suspected COVID-19 infection. The hope is that this might prevent secondary bacterial infection. **The problem is that the number of patients with COVID-19 is potentially huge but the risk of secondary pneumonia in the vast majority is very low.**
- The quantities of oral antibiotics required for this don't exist in the supply chain. The impact of this will be even more significant given the high numbers of patients that genuinely will require oral antibiotics on discharge in the near future.
- There have been local anecdotal reports of increased prescription of antibiotic rescue packs for patients with respiratory conditions and as the pharmacy supply chain is vulnerable we must not see an increased supply *above normal/usual use*.
- Hospitals are increasingly using CAP/HAP antibiotics on discharge so there is stress on supply already there too.

Secondary bacterial pneumonia in covid 19 patients:

- The incidence of bacterial pneumonia following COVID-19 infection is unknown. There is no evidence that COVID-19 people cared for in the community have co-infection. Treatment of co-infection advice is only in the WHO guidance (link below) for patients with severe COVID-19 infection for secondary care.
- The pathogens responsible for bacterial pneumonia in COVID-19 patients are unknown. GPs should follow local antibiotic guidance for Community Acquired Pneumonia (see link below) if they suspect a patient might have a bacterial pneumonia following COVID-19 infection or think that the patient has CAP rather than COVID 19. It is most likely that patients that do have a secondary bacterial pneumonia will be hospitalised and therefore such patients are unlikely to be seen by GPs.

2.) COPD key messages:

See latest BTS guidance (29/3/20): COPD and COVID-19 for Healthcare Professionals <https://www.brit-thoracic.org.uk/document-library/quality-improvement/covid-19/copd-and-covid-19-for-healthcare-professionals/>

1. Is this COVID-19 or an exacerbation?

Typically, exacerbations of COPD (and asthma) are not associated with a high fever. A high fever (>37.8^oC) is one of the main symptoms of COVID-19.

2. Are corticosteroids appropriate to use?

WHO recommends "do not routinely recommend systemic corticosteroids for the treatment of viral pneumonia or acute respiratory distress syndrome unless they are indicated for another reason". Other reasons include "exacerbation of COPD or asthma"

The BTS guidance for "Community respiratory services and COVID-19" state that "People with should continue to be treated with inhaled or oral corticosteroids according to NICE guidance. Note that the standard course recommended for AECOPD is 5 days only. There is no evidence to use or not to use oral or inhaled corticosteroids outside usual guidelines in COPD patients with COVID19."

Recommendation: The use of corticosteroids in patients with COPD **can still be used IF they show clinical need** for this i.e. increased breathlessness (not being relieved with increased doses of salbutamol), increased wheeze or chest tightness, inability to clear normal volume of secretions (indicating narrowed inflamed airways). A risk/benefit analysis should be conducted for individual patients.

3. Should patients with COPD be given rescue packs of steroids and antibiotics?

- a. The BTS guidance for "Community respiratory services and COVID-19" advises HCP's to check that all 'applicable' patients have an in-date rescue pack.
- b. 'Applicable' patients are ONLY those who have already been identified as suitable in their annual review, in-line with NICE guidance. ie patients who fit **all 3** criteria below:
 - have had an exacerbation within the last year, and remain at risk of exacerbations
 - understand and are confident about when and how to take these medicines, and the associated benefits and harms
 - know to tell their healthcare professional when they have used the medicines, and to ask for replacements.

Recommendation: Do not give rescue packs to patients with COPD who do not normally have these.

If patients have a rescue pack, they can use this as normal for an exacerbation of COPD.

If the patient has a high fever (>37.8^oC) and a cough, they should NOT take their rescue pack, & seek advice via NHS 111.

Working together:

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NHS Swindon Clinical Commissioning Group

NHS Wiltshire Clinical Commissioning Group

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Date prepared: 31/3/2020

3.) Asthma guidance

Please see latest covid-19 asthma guidance from the Primary Care Respiratory Society: <https://www.pcrs-uk.org/resource/pragmatic-guidance-crisis-management-asthma-and-copd-during-uk-covid-19-epidemic>

4.) Use of Oxygen in covid-19 patients/palliative key messages:

- There has been no specific information published about the use of oxygen for patients in primary care with suspected covid-19. Therefore current provision of oxygen is as per current arrangements (using a Part A HOOFA on <https://www.airliquidehomehealth.co.uk/hcp/HOOFA>) and criteria for use. BTS guidance should be followed: <https://www.brit-thoracic.org.uk/quality-improvement/guidelines/home-oxygen/>
- The BSW Primary Care model and guide during COVID-19 (Patient aged >12) states that if a patient with suspected covid-19 would not benefit from admission to hospital that the GP can consider Palliative care/ Home Oxygen if available & appropriate. GPs should be mindful of oxygen supplies and that oxygen providers might struggle with demands during this crisis.
- **Only institute a home oxygen prescription for patients who are hypoxic (sats less than or equal to 92%), rather than simply those with breathlessness who are not necessarily hypoxic.**
- All patients should be given appropriate 'just in case' meds (e.g. opiates), which may well control their symptoms better than oxygen, even in hypoxic patients. See covid-19 palliative care guidance: (<https://prescribing.wiltshireccg.nhs.uk/wpdm-package/eol-covid-prescription-support?wpdmdl=6981&refresh=5e870c03c9fbe1585908739>).
- Local COPD guidance found here; p5 for oxygen information: <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=6331>.

Wiltshire Health & Care:

- WH&C staff are only visiting home oxygen patients who are unstable. All stable patients have had their time to the next visit extended.
- WH&C are reviewing all their oxygen patients virtually & removing oxygen from those considered "non-essential" to help preserve supplies.

BaNES CCG:

- GPs should liaise with the BaNES IMPACT team as usual for all oxygen requests.

SFT Respiratory clinic (oxygen):

- No face to face oxygen clinic currently running (no routine patients).
- Telephone advice still available. Patients would be seen if clinically urgent but would need to come into the hospital. Dealt with on a case by case basis.

Swindon CCG:

- Routine reviews are not currently happening. Advice can be sought from the team for acute problems.

Contacts for oxygen referrals:

BaNES – IMPACT team BATHNES.impactservice@virginicare.co.uk 01225 831 808

Swindon – Community COPD team gwh.communitycopdoxygenspecialistservices@nhs.net 01793 646436

South Wiltshire <http://www.mg.salisbury.nhs.uk/media/1719/oxygenservicereferral.doc> to the resp. dept. at SFT
North, East and West Wiltshire – referral forms: <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=653> to Wiltshire Health and Care community respiratory team GWH.WiltsO2@nhs.net 01249 456607

Resources:

- BSW CCG NHS Primary care antibiotic guidance: <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=6041>
- World Health Organisation Clinical management of severe acute respiratory infection (SARI) when COVID-19 disease is suspected. Interim Guidance March 2020: [https://www.who.int/publications-detail/clinical-management-of-severe-acute-respiratory-infection-when-novel-coronavirus-\(ncov\)-infection-is-suspected](https://www.who.int/publications-detail/clinical-management-of-severe-acute-respiratory-infection-when-novel-coronavirus-(ncov)-infection-is-suspected)
- BMJ Best Practice Coronavirus disease 2019 (COVID-19) <https://bestpractice.bmj.com/topics/en-gb/3000168/pdf/3000168/Coronavirus%20disease%202019%20%28COVID-19%29.pdf>
- PHE COVID-19: guidance for health professionals <https://www.gov.uk/government/collections/wuhan-novel-coronavirus>
- British Thoracic Society COVID-19: information for the respiratory community (23/3/20): <https://www.brit-thoracic.org.uk/media/455099/bts-community-service-covid19-v20-23-march-2020-final.pdf>
- Royal College of General Practitioners NOVEL CORONAVIRUS – RCGP GUIDANCE FOR GENERAL PRACTICE (INCLUDING OOH) 13/3/2020 <https://www.rcgp.org.uk/-/media/Files/Policy/A-Z-policy/2020/covid19/RCGP-GP-guidance-march-2020.ashx?la=en>

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