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11-11-2020

### Covid-19 Clinical Update 11/19/2020

George Washington University

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<https://hsrc.himmelfarb.gwu.edu/infectiousdiseaseupdates/23>

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School of Medicine  
& Health Sciences

THE GEORGE WASHINGTON UNIVERSITY

# Medicine Grand Rounds

November 19, 2020

## Critical Care Air Transport

Karolyn Teufel, MD

# Claiming CME Credit

**TEXT the Unique Activity Code**

**PEXHOQ**

**to**

**202-902-9966**

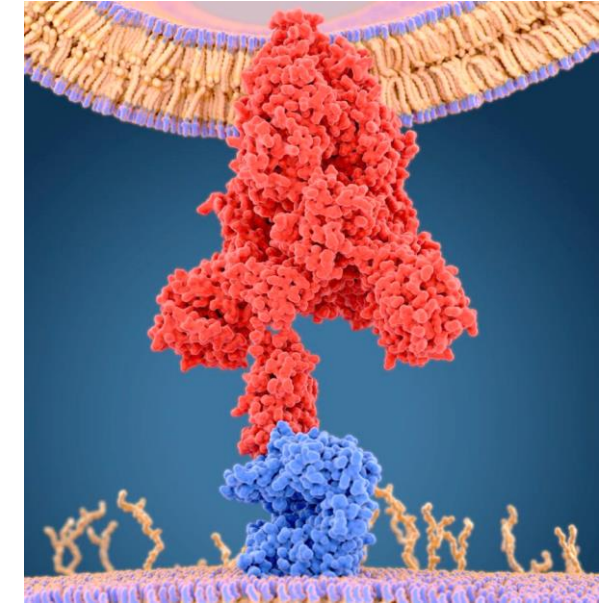
# Questions

**For questions regarding CME credits:**

Contact the CEHP Office

Email: [cehp@gwu.edu](mailto:cehp@gwu.edu)

Ph: 202-994-4285



# COVID-19 UPDATE

HANA AKSELROD, MD, MPH

GW DIVISION OF INFECTIOUS DISEASES

11/19/2020

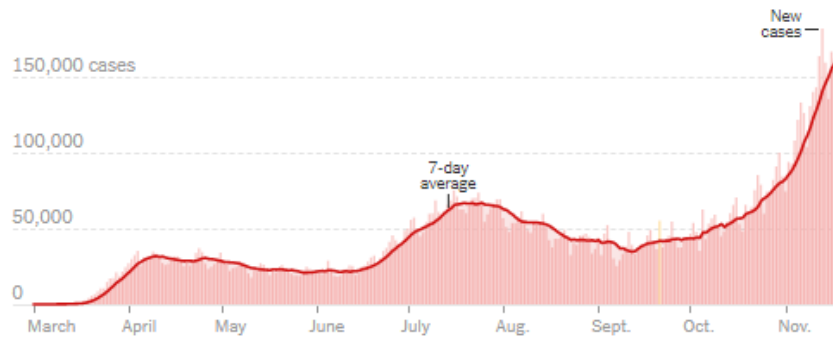
1. EPIDEMIOLOGY

2. VACCINE

3. ANTIBODIES

4. GW UPDATES

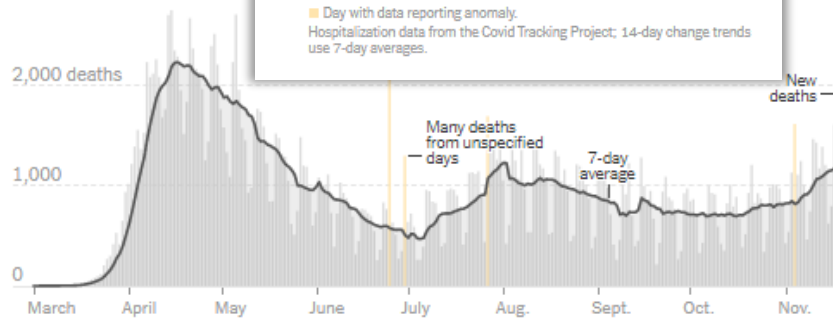
## New reported cases by day in the United States



These are days with a data reporting anomaly.

Note: The seven-day average is shown in red.

## New reported deaths by day in the United States

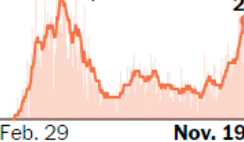


	TOTAL REPORTED	ON NOV. 18	14-DAY CHANGE
Cases	11.6 million+	172,391	+77% ↗
Deaths	250,409	1,923	+52% ↗
Hospitalized		79,410	+49% ↗

Day with data reporting anomaly.  
Hospitalization data from the Covid Tracking Project; 14-day change trends use 7-day averages.

## District of Columbia

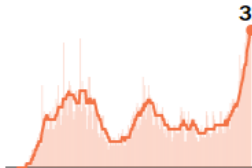
+31%  
rise in new cases  
in past week



2,844 reported  
per 100k

## Maryland

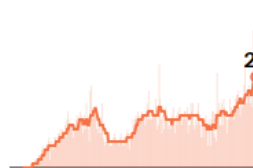
+35%



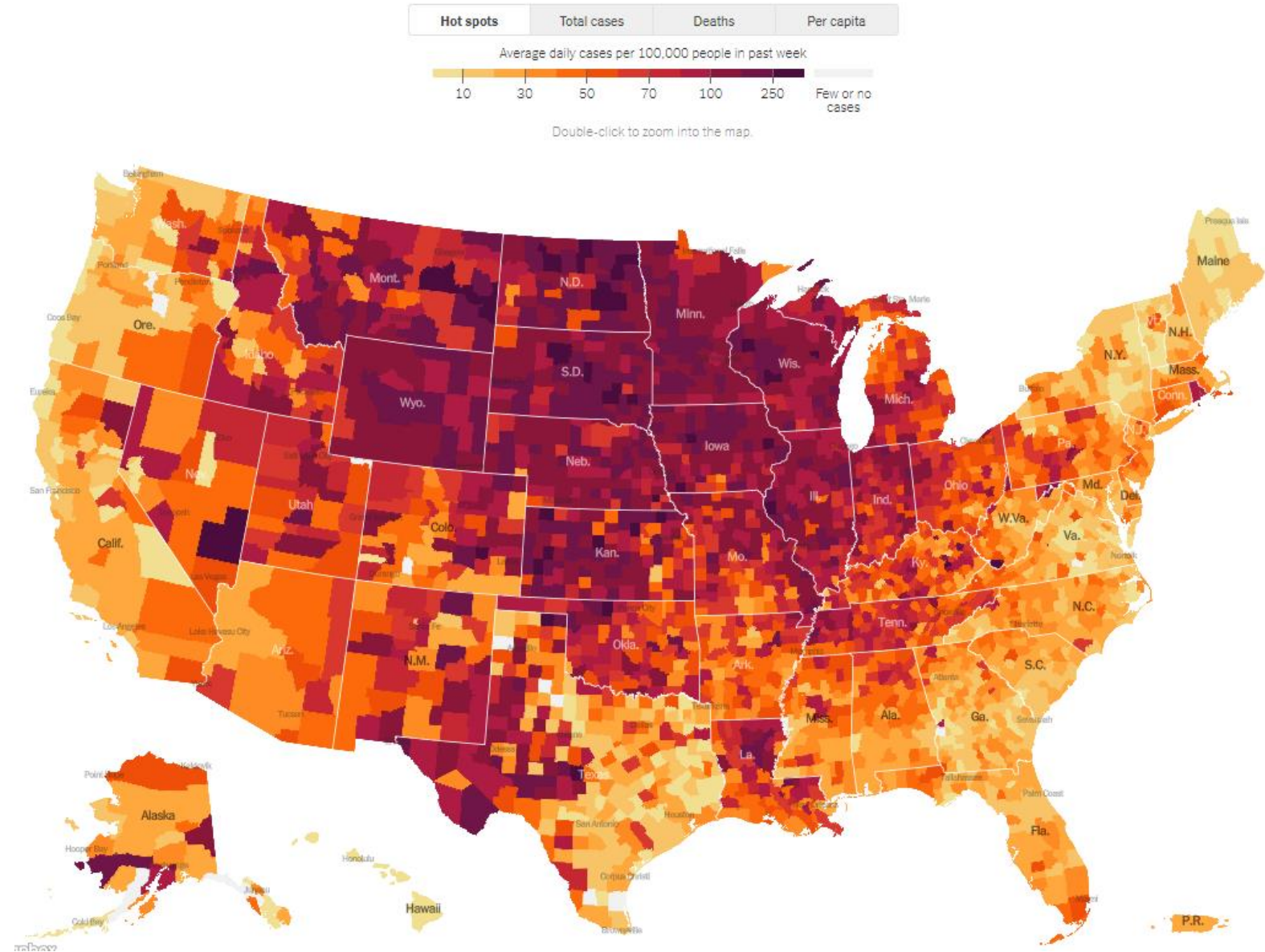
2,862 reported  
per 100k

## Virginia

+14%



2,482 reported  
per 100k





# Vaccine News

## NEWS RELEASES

Monday, November 16, 2020

### Promising Interim Results from Clinical Trial of NIH-Moderna COVID-19 Vaccine

Institute/Center

National Institute of Allergy and Infectious Diseases (NIAID)

Contact

## “PFIZER-BIONTECH VACCINE” BNT162B2

- 43,661 volunteers across 150 sites worldwide
- 170 cases of COVID-19
- 162 in placebo vs. 8 in vaccine group = 95% efficacy
- 10 cases of severe COVID-19, of which 9 (90%) occurred in placebo group
- 30% of US volunteers POC, 45% aged 56-85
- “Efficacy was consistent across . . . demographics; efficacy in adults over 65 years of age was over 94%”
- SAEs: HA (2% after dose #2), fatigue (4% after #2)
- Very cold (-80°C) storage and delivery chain required

## “MODERNA-NIH VACCINE” MRNA-1273

- 30,000 volunteers across 100 US sites (25 CoVPN sites)
- 95 cases of symptomatic COVID-19
- 90 in placebo group vs. 5 in vaccine group = 94.5% efficacy
- 11 (12%) cases of severe COVID-19, all (100%) of which occurred in the placebo group
- 15 cases in older adults (ages 65+)
- ~37% of participants and 20 of the cases identified as people of color (12 Hispanic/LatinX, 4 Black or African Americans, 3 Asian American, 1 multiracial)
- SAEs: 2% after dose #1, 3% after dose #2 (myalgias, fatigue)
- More stable under standard cold chain conditions

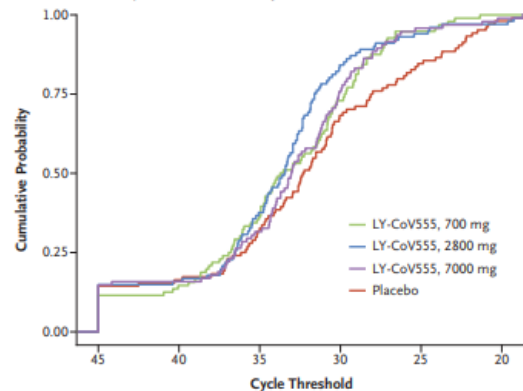
# Antibody News

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

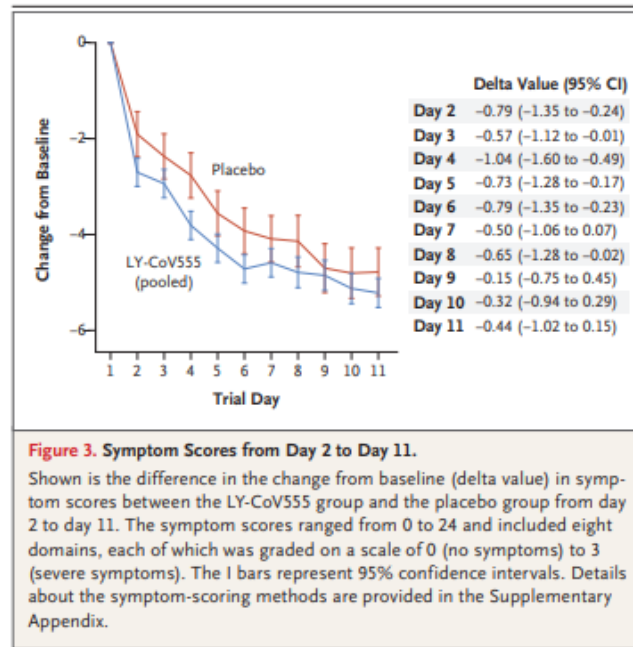
## SARS-CoV-2 Neutralizing Antibody LY-CoV555 in Outpatients with Covid-19

B Viral Load on Day 7 in Each Trial Group



Hospitalization: 1.6% in LY-CoV555  
vs. 6.3% in placebo (NNT = 22)

AE: GI mainly  
SAE: < 1%



FDA NEWS RELEASE

## Coronavirus (COVID-19) Update: FDA Authorizes Monoclonal Antibody for Treatment of COVID-19

NIH COVID-19 Treatment Guidelines

Search

## Coronavirus Disease 2019 (COVID-19) Treatment Guidelines

VIEW GUIDELINES

November 18, 2020

[The COVID-19 Treatment Guidelines Panel's Statement on the Emergency Use Authorization of Bamlanivimab for the Treatment of COVID-19](#)

On November 9, 2020, the Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) for bamlanivimab (LY-CoV555) for the treatment of nonhospitalized patients who are at high risk of progressing to severe COVID-19 and/or hospitalization. Based on the available data, the Panel has determined the following:

- At this time, the available data are **“insufficient data to recommend either for or against”** the treatment of COVID-19 with bamlanivimab.
- Bamlanivimab **“should not be considered the standard of care”** for the treatment of COVID-19.
- More data are needed to assess the impact of bamlanivimab on the disease course of COVID-19 and to identify those people who are most likely to benefit from the drug. Health care providers are encouraged to discuss participation in bamlanivimab clinical trials with their patients.
- Patients who are hospitalized for COVID-19 should not receive bamlanivimab outside of a clinical trial.
- Given the possibility of a limited supply of bamlanivimab, as well as challenges distributing and administering the drug, patients at highest risk for COVID-19 progression should be prioritized for use of the drug through the EUA. In addition, efforts should be made to ensure that communities most affected by COVID-19 have equitable access to bamlanivimab.
- The Panel will continue to evaluate emerging clinical data on the use of bamlanivimab for the treatment of outpatients with mild to moderate COVID-19 and anticipates updating these recommendations as more information becomes available.



# GW Updates



THROMBOSIS  
RESEARCH

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LETTER TO THE EDITORS-IN-CHIEF | VOLUME 197, P65-68, JANUARY 01, 2021

PDF [545 KB] Figures

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The effect of anticoagulation on clinical outcomes in novel Coronavirus (COVID-19) pneumonia in a U.S. cohort

Lei Lynn • Juan A. Reyes • Katrina Hawkins • ... Sneha Shah • Shant Ayanian • Karolyn Teufel

Show all authors

Published: November 05, 2020 • DOI: <https://doi.org/10.1016/j.thromres.2020.10.031> • Check for updates

Highlights

Abstract

CRedit authorship contribution statement

Declaration of competing interest

References

Article Info

Highlights

- Anticoagulation strategies for patients with COVID-19 infections remain unclear.
- Outcomes of prophylactic versus therapeutic anticoagulation were compared.
- In our cohort, therapeutic anticoagulation provided no mortality benefit over thromboprophylaxis.
- Therapeutic anticoagulation was associated with increased adverse events.

MFA

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Primary Care

COVID-19 Recovery Clinic

Cuentos

Resident Clinic

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COVID-19 Recovery Clinic

MULTI-DISCIPLINARY CLINIC OFFERING SPECIALIZED TREATMENT FOR PATIENTS RECOVERING FROM COVID-19

Our physicians at The GW Medical Faculty Associates have been caring for patients with COVID-19 since the early days of the pandemic in our region, and our researchers have been at the forefront of efforts to understand its pathogenesis, immunology, and treatment. As the COVID-19 pandemic continues, some patients who survive the disease experience long-lasting symptoms and negative effects on their health. These can include long-lasting effects on the heart, lung, immune system, mental health, and overall quality of life. Such persistent "long-haul" complications have been reported by our patients and described in the medical literature.

We are offering a new **COVID-19 Recovery Clinic** to support patients who struggle with long-term symptoms after COVID-19. The new clinic is co-directed by [Dr. Monica Lypton](#) and [Dr. Aileen Chang](#) from the Division of General Internal Medicine and [Dr. Hana Akselrod](#) from the Division of Infectious Diseases, with additional support from:

- Pulmonology
- Geriatrics & Palliative Medicine
- Memory Clinic

- Cardiology
- Psychiatry
- Rehabilitation Medicine

[https://smhs.gwu.edu/sites/default/files/Employee%20workflows%20protocol%20102220%20FINAL%20\(1\).pdf](https://smhs.gwu.edu/sites/default/files/Employee%20workflows%20protocol%20102220%20FINAL%20(1).pdf)

<https://www.gwdocs.com/specialties/primary-care/covid-19-recovery-clinic/>