

Message

From: Orford, Rob (HSS - Primary Care & Health Science) [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=7D38A628177A448789839F37A51FAF75-ORFORD, ROB]
Sent: 24/04/2020 07:57:07
To: HSSG.TAC [/o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9d1f1fd6419f48edbcadfb613027c2c5-HSSG.TAC]
Subject: FW: IN CONFIDENCE: SAGE: Coronavirus update 4
Attachments: FOR INFORMATION: SAGE 9 papers; FOR INFORMATION: SAGE 9 papers

From: Orford, Rob (HSS - Primary Care & Health Science)
Sent: 20 February 2020 12:20
To: Atherton, Frank (HSS - Chief Medical Officer) <Frank.Atherton@gov.wales>
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Subject: IN CONFIDENCE: SAGE: Coronavirus update 4

Hi Frank, an update from SAGE meeting today (not yet official advice – not for wider circulation):

- Local transmission detected through screening patients with pneumonia in Iran and Singapore (not related to travel).
- Chair has asked for firmer advice for NHS planning (e.g. % that require hospital admission, % requiring respiratory support (e.g. oxygen or ventilation), projection of peak epidemic and flattening the peak. (See attached consensus paper)
- Are colleagues from NHS Wales/WG involved in NHS England planning discussions to share best practise??
- Contact tracing to continue until trigger events detected e.g. local transmission not linked to travel. Number likely to be increased. (see attached paper)
- From cruise ship – 30-50% asymptomatic-mild.
- Likely that UK testing has missed 40% of positives, due to delay in testing versus detectability of virus.
- 75-80% likelihood that virus is already in circulation.
- Discussion on plans for sentinel surveillance in GPs (200-300 samples per week), ICU and Respiratory Failure units.
- Discussion about school closures, maximum impact 30-40% peak reduction if closed just before peak. Assumes children have a significant role in transmission. (see attached paper)