

**Forty-eighth SAGE meeting on Covid-19, 23rd July 2020**  
**Held via Zoom**

**Summary**

1. A significant and growing proportion of the epidemic in much of England (newly reported cases) is now among South Asian populations, despite these groups making up only 8% of the whole population. The epidemic among white populations continues to decline but it may well be flat among South Asian populations.
2. SAGE noted the risk that lessons from Leicester and PHE data on other outbreaks could be misinterpreted and lead to increased stigma. Public messaging around these should be well contextualised.
3. Communication which is culturally appropriate and relevant may promote health protective behaviours, which can reduce the risk of Covid-19 in BAME communities. Local authorities should build partnerships with key community members to help address this ahead of winter. These issues need active consideration by policy leads across HMG.
4. SAGE advised that segmentation by age is not without considerable risk and is unlikely to be successful.
5. SAGE endorsed the EMG paper on airborne transmission, noting its findings around the limitations of face shields/visors and on the importance of good ventilation.

**Situation update**

6. SAGE agreed it is for PHE experts to determine whether an in vivo animal study into co-infection of SARS-CoV-2 and influenza would give meaningful results; SAGE is supportive if a strong case is developed and the study can be conducted ahead of the winter season.
7. SAGE endorsed the EMG paper on airborne transmission, noting its findings around the limitations of face shields/visors in preventing transmission (as used, for example, by hairdressers) and on the importance of good ventilation (especially in higher-risk settings such as dental and GP surgeries).
8. SAGE approved R and growth estimates. The latest estimate of R for the UK is 0.7 to 0.9, while the daily growth rate estimate is -4% to -1%. In England, R is estimated at 0.8 to 1.0, with a daily growth rate of -4% to 0%. As previously, SPI-M does not have confidence that most regional R estimates are sufficiently robust to inform decisions, since they are based on low case numbers and/or are dominated by clustered outbreaks.
9. It was noted that models which use case data and emergency call data (both contemporary indicators) currently give higher estimates for R and growth rates compared to those using deaths data (a lagging indicator) – and that the former may offer early warning of changes in transmission.
10. SPI-M is continuing to investigate the impact of test accuracy on modelling outputs.
11. CO-CIN data indicate that people with HIV are requiring greater levels of intensive care and are at increased risk of dying from Covid-19. This is consistent with the evidence previously considered at SAGE.
12. Recovery of viable virus from individuals in days 7 to 10 after symptom onset is informing thinking by the Senior Clinicians Group about changes to advice around self-isolation for individuals with swab-proven Covid-19, and to advice around testing and release of contacts.
13. There has been one confirmed case of a cat in the UK with Covid-19. Advice with regards to risk of transmission from pets is unchanged.

**ACTION:** PHE to decide whether to take forward in vivo animal study into co-infection of SARS-CoV-2 and influenza