Forty-second SAGE meeting on COVID-19, 18 June 2020.

Held via Video Teleconference.

Summary

1. SAGE congratulated the RECOVERY trialists on the hydroxychloroquine and dexamethasone results, which reaffirm the central importance of randomised trials.

2. SAGE noted the importance of understanding risk to marginalised groups, including migrant workers, and the need to prepare for anticipated outbreaks in areas of high deprivation. The issue will be taken up with Cabinet Office.

3. SAGE agreed that double testing of travellers could enable quarantining terms of less than 14 days.

4. SAGE noted that super-spreading environments and clusters of infections are particularly important.

5. SAGE agreed that the risk of environmental transmission will likely increase in the winter months. Public toilets were identified as of particular concern.

Situation update

6. SAGE approved the latest R estimates for publication: for the UK, R is 0.7 to 0.9 (90% confidence interval). R estimates have not changed significantly from the previous week.

7. SAGE approved growth rate estimates for publication: for the UK, the growth rate is -4% to -2% per day (90% confidence interval). Growth rate estimates are based on different data from R estimates are more statistically stable.

8. Case numbers and fatalities are declining, but the rate of decline is slowing.

9. Hospital acquired infections are declining, with an approximate 30% decrease in cases occurring in hospitals after day 8. CO-CIN data also point to an improving situation.

10. SAGE reiterated its concerns about the risk of discharging patients from hospital while still infectious. Advice from SPI-M and from NERVTAG about pre-discharge testing of patients is being considered by the Senior Clinicians Group, which contains those who have accountability for determining actions to be taken.

11. SAGE noted the importance of fully understanding NHS admissions data to reconcile operational needs with requirements for accurate modelling. This requires more detailed information on patients being admitted.

12. SAGE noted the excellent findings from the RECOVERY trial on dexamethasone, which demonstrated clearly the importance of randomised trials. The UK should aim for even higher numbers enrolled in clinical trials and this work should start now.

13. ONS (supported by DHSC and the Government Actuaries Department) will publish national statistics each month on excess deaths under 4 categories, including analysis of potential causes (publication starting a fortnight from now).