

# COVID-19 wave response

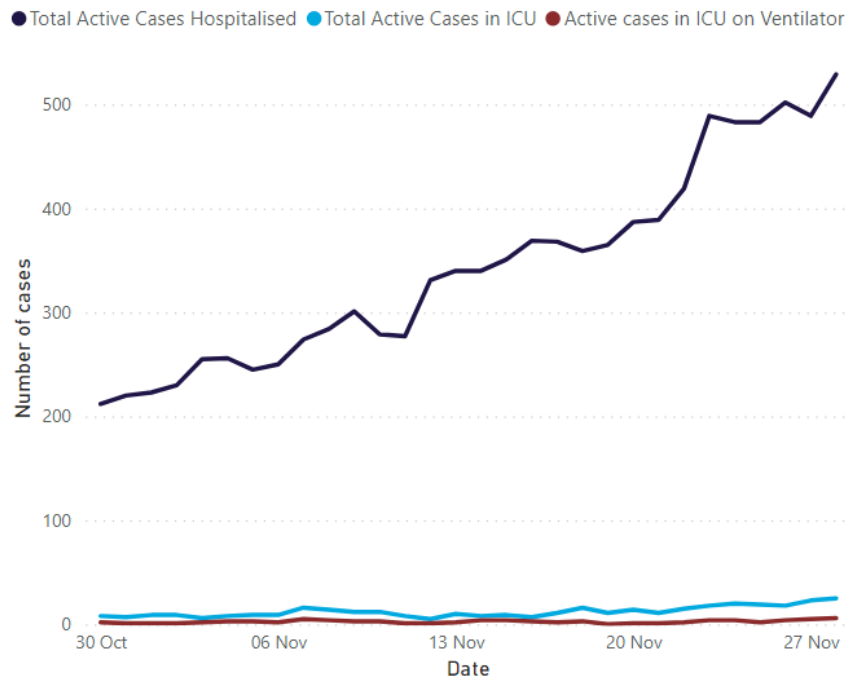
Victorian Department of Health

30 November 2022

# Epi COVID 19 Wave update (as of 28<sup>th</sup> November 2022)

- ✓ Victoria is moving through a new wave. Likely driven by waning population immunity, reduction in community protective behaviours, & emerging immune evasive subvariants.
- ✓ Hospitalisations increased by 22% in week to 23/11. Up from <150 start of October.
- ✓ Reported case numbers have increased this week (8% increase in 7 day average, 3,098)
- ✓ Significant underestimation due to falling case ascertainment (~15%).
- ✓ Deaths reported due to COVID-19 are increasing – 35% increase in week to 23/11

## Victorian hospitalisations



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# Virological surveillance

- Multiple variant sublineages are circulating not just one or two as before
- Almost all are grandchildren of Omicron Variant of Concern (VoC)
- Those of note with recent growth are **XBF**, BA.2.75 sublineage **BN.1** and BA.5 sublineage **BQ.1**
- No evidence to suggest an increase in disease severity with these subvariants, however they do demonstrate **immune evasion**
- No evidence of resistance to antiviral treatment for COVID-19

# Both Paxlovid and Lagevrio significantly reduce the likelihood of dying from COVID-19

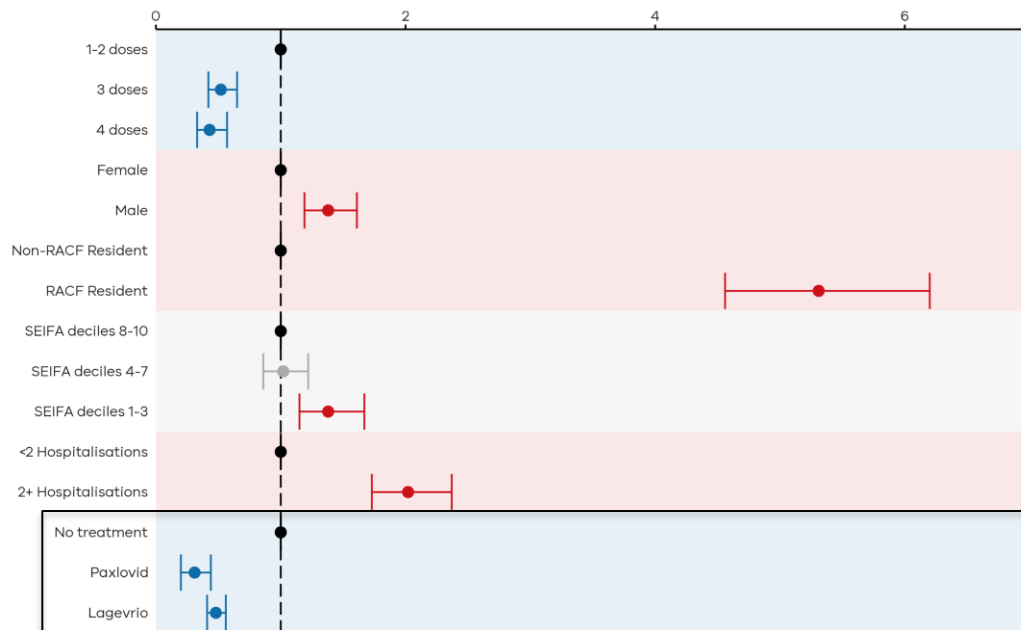
A logistic regression was used to investigate which factors were associated with individuals dying.

**PBS and NMS** linked data was used to identify whether an individual received a COVID-19 treatment.

- **Victorians (70+) who receive Paxlovid or Lagevrio are 69% and 52% less likely to die, respectively, compared to individuals who did not receive a treatment.**
- In clinical trials and real world literature Lagevrio reduced risk of hospitalisation and death by 50-80% while Paxlovid reduced risk of hospitalisation by 90-95% and mortality by 70-95%.
- Paxlovid has many contraindications including many of the medications prescribed to those in the target demographics. Lagevrio is only not recommended in situations surrounding pregnancy. Lagevrio is there for prescribed with much higher frequency than paxlovid.

\* We excluded cases from the previous 42 days to allow for COVID deaths to be reported

**Odds ratio of Death using PBS and NMS treatments**  
70+ individuals diagnosed with COVID-19 from 11 July 2022



Data source: TREV, VAED, VICNISS, PBS, NMS, ABS. Cases diagnosed from 2022-07-11 to 2022-09-08, total n = 31475. Last run: 2022-10-20

# Updated PBS criteria anticipated 1<sup>st</sup> January 2023

1. All anti-CD20 monoclonal antibody treatments will be included for eligibility if they were administered within a 12 month window (currently only rituximab)
2. New eligibility for people who have had a previous hospitalisation with COVID-19 if subsequently re-infected
3. PCR and RAT requirements reworded
4. Administrative note be added to Lageviro™ to note it should only be prescribed where Paxlovid™ is not suitable

For more information see: <https://www.pbs.gov.au/info/industry/listing/elements/pbac-meetings/pbac-outcomes/recommendations-made-by-the-pbac-november-2022>

# Evusheld™ - new eligibility criteria

- **Pre-exposure prophylaxis** (tixagevimab and cilgavimab MABs) remains available until **31 December 2022** – supply after this date uncertain
- Recent **expansion in eligibility criteria** to a much broader definition of **immunosuppression** and includes all **people who cannot be vaccinated** due to severe allergy
- **2<sup>nd</sup> doses available** for patients who received a dose earlier this year
- Recent pre-print laboratory studies have found Evusheld™ may have reduced effectiveness in protecting against some, but not all, circulating Omicron subvariants (BA.2.75.2, BQ.1, BQ.1.1, XBB, BF.7 and BA.4.6). In the absence of an alternative option for pre-exposure prophylaxis and mix of circulating variants, **Evusheld™ continues to be recommended for use.**
- Clinicians should consider this information in making individual patient management decisions.

Patients should be reminded of additional protective behaviours they should take to prevent infection as well as the importance of early testing and their eligibility for antivirals.

Further information: <https://www.health.vic.gov.au/covid-19/vaccines-and-medications-in-patients-with-covid-19>

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# Summary and call to action

- Both vaccination and antivirals reduce the risk of hospitalisation and severe disease
- Antiviral pre-planning for those at highest risk – individuals in community and in residential care
  - $\geq 70$ yo
  - $\geq 50$ yo with 2 risk factors
  - $\geq 30$ yo if Aboriginal/Torres Strait Islander with **1 risk factor**
  - Immunocompromised, disability, Down Syndrome, CP, congenital heart disease
- Consideration of Evusheld™ for those who are eligible
- Prescribing resources, including antiviral treatment plan templates available on [DH website](#)
- Prescribers can also call the PBS prescriber **helpline 03 8290 3801** 7 days 8am-5pm

# Six steps to protect our community

1 Ventilation

Have fresh air when gathering indoors (or go outside!)

2 Masks

Wear a quality mask to protect from COVID and flu

3 Test

Take a RAT if you have symptoms, PCR if high risk

4 Isolate

Stay home if unwell

5 Medication

Consult your doctor immediately if positive and high risk

6 Vaccination

If you're due for your third or fourth dose, get it NOW!

Link to the Chief Health Officer's [video outlining six steps to protect yourself from COVID](#)

Keep up to date on the [key public health advice on COVID-19 \(Post Pandemic Declaration\)](#) and the Victorian [COVID-19 case, contact and outbreak management policy](#)

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# Top infection prevention control challenges in general practice

	Current challenges	Strongly recommend review and reinstate COVIDSafe Plan, including having an IPC lead within your workplace
1	<b>Lack of understanding of principles for good ventilation</b>	<p>Simple steps to ventilate your workplace and prevent COVID-19  <a href="https://www.coronavirus.vic.gov.au/ventilation">https://www.coronavirus.vic.gov.au/ventilation</a>            An AC engineer will be able to test for the minimum of 6-8 air exchanges per hour  <a href="https://www.health.vic.gov.au/covid-19-ventilation-principles-and-strategies-to-reduce-aerosol-transmission-in-community-and">https://www.health.vic.gov.au/covid-19-ventilation-principles-and-strategies-to-reduce-aerosol-transmission-in-community-and</a></p>
2	<b>Cleaning -including :</b> <ul style="list-style-type: none"> <li>• frequency (requesting to decrease)</li> <li>• general - such as carpets, use of linen &amp; material chairs</li> <li>• TGA approved cleaning products- what to use</li> </ul>	<p>Additional cleaning of frequently touched surfaces, as per cleaning guidelines  <a href="https://www.health.vic.gov.au/coronavirus-cleaning-guidelines-for-workplaces-doc">https://www.health.vic.gov.au/coronavirus-cleaning-guidelines-for-workplaces-doc</a>            Cleaning products should be placed in areas for easy access with staff educated on the products use</p>
3	<b>PPE – including:</b> <ul style="list-style-type: none"> <li>• Not being worn correctly by staff</li> <li>• Donning and doffing stations in the same zone</li> <li>• Staff turnover</li> </ul>	<p>Regular staff education and induction training including fit testing</p> <ul style="list-style-type: none"> <li>• Updated guidance Nov 22 <a href="#">Personal Protective Equipment (PPE) specific recommendations for COVID-19</a></li> <li>• Infection prevention control resources - COVID-19 <a href="#">Infection prevention control resources - COVID-19   health.vic.gov.au</a></li> <li>• Primary care guidance and resources <a href="#">Primary care guidance for the response to COVID-19 risks   health.vic.gov.au</a></li> </ul>
4	<b>Understanding of Aerosol Generating Procedure</b> such as non-invasive ventilation (BiPAP), nebuliser therapy and <b>Aerosol Generating Behaviours</b> such as persistent cough, screaming or shouting	<ul style="list-style-type: none"> <li>• Updated guidance Nov 22 <a href="#">Personal Protective Equipment (PPE) specific recommendations for COVID-19</a></li> <li>• Infection prevention control resources - COVID-19 <a href="#">Infection prevention control resources - COVID-19   health.vic.gov.au</a></li> </ul>

# Other support pathways and referral options

## Pathways and referrals

## Features



### Helplines

- Victorians can contact the **National Coronavirus Helpline** (1800 020 080) if they need clinical advice or help to access care and antiviral medicines from a GP, GP Respiratory Clinic or VVED if unable to get a GP appointment
- The **Victorian Coronavirus Hotline (VCH)** (1800 675 398) is available to provide payment or food relief support to Victorians across the state, assistance in reporting a RAT and general public health advice.



### Covid Positive Pathways

- The COVID Positive Pathways program **provides targeted care and support to population** groups who experience systemic barriers to accessing timely care for reasons associated with age, disability, ethnicity, cultural safety, social disadvantage and/ or rural isolation.
- The program provides proactive assessment of patients most at risk and integration with primary and community clinical and social care supports. There will continue to be clinical escalation support via hospitals as required. GPs can utilise the Factsheet For Referrers for local contact details for referrals.
- The program aims to provide high-quality care in the most appropriate setting and reduce pressure, where possible, on the hospital system.





### GP Respiratory Clinics

- Some GP respiratory clinics **to extend their opening hours over times of high demand/need**
- **Paediatric GP RCs** (aged 18 and under) open 6pm to 11pm and on weekends.
- **Free face to face** assessment and care for people **unwell with mild respiratory symptoms**
- provide care for people **with COVID-19**, including by telehealth (can be accessed even if you do not live close by to the clinic) List of GPRCs <https://www.health.vic.gov.au/covid-19/gp-respiratory-clinics-and-hospital-respiratory-clinics-covid-19>

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# Other support pathways and referral options

Pathways and referral	Features
 <p data-bbox="247 390 401 548">Victorian Virtual Emergency Department (VVED)</p>	<ul style="list-style-type: none"><li>• The VVED led by Northern Health <b>provides selected patients, paramedics and clinicians with access to emergency nurses and doctors from their home or work, 24/7.</b></li><li>• The service helps to alleviate demands on Ambulance Victoria, the COVID Positive Pathway program, Residential Aged Care Facilities and emergency departments.</li><li>• <b>Virtual assessments for antiviral medication prescription is available</b> through VVED in partnership with Early Treatment Team for patients who can't access a GP or GPRC.</li><li>• Between July-September, the service cared for 22,000 patients, with 82% of patients not requiring transport to or care at an emergency department.</li><li>• <a href="https://vved.org.au">vved.org.au</a></li></ul>
 <p data-bbox="247 784 417 908">Priority Primary Care Centre (PPCCs)</p>	<ul style="list-style-type: none"><li>• The PPCCs are GP run will open after hours, be partnered with emergency departments and <b>provide care for people with condition that require urgent attention but not an emergency response</b> – for example, mild infections, fractures and burns. They will <b>also offer pathology and imaging services.</b></li><li>• <b>Five PPCCs are open</b> and connected with the Royal Melbourne, Sunshine Hospital, Northern Hospital, Monash Medical Centre and Grampian Health (Ballarat) emergency departments. <b>Additional 20 PPCCs to progressively open.</b></li><li>• <b>Confirmed covid cases not in scope- referred to GP RCs</b></li><li>• <a href="#">Priority Primary Care Centres - Better Health Channel</a></li></ul>

# Further information



COVID Positive Pathways resources, including social content & consumer flyer, see [www.health.vic.gov.au/covid-19-positive-pathways-resources](http://www.health.vic.gov.au/covid-19-positive-pathways-resources).



Information about the COVID Positive Pathways for the general public, available at [www.coronavirus.vic.gov.au/covid-positive-pathways](http://www.coronavirus.vic.gov.au/covid-positive-pathways).



Information for the public on getting the right help and support to match COVID-19 symptoms, available at [www.coronavirus.vic.gov.au/covidcare](http://www.coronavirus.vic.gov.au/covidcare)

- National Coronavirus Helpline: 1800 020 080
- COVID medicines eligibility: [www.coronavirus.vic.gov.au/covid-19-medicines](http://www.coronavirus.vic.gov.au/covid-19-medicines)
- General Practice Respiratory Clinics: [www.health.vic.gov.au/covid-19/gp-respiratory-clinics-and-hospital-respiratory-clinics-covid-19](http://www.health.vic.gov.au/covid-19/gp-respiratory-clinics-and-hospital-respiratory-clinics-covid-19)
- Victorian Virtual Emergency Department: [www.vved.org.au](http://www.vved.org.au)
- Long COVID: [www.coronavirus.vic.gov.au/long-covid](http://www.coronavirus.vic.gov.au/long-covid)

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# Further information

- **Free Infection Prevention Helpline Service** available for general practice, community pharmacists, and Aboriginal Community Controlled Health Organisations. (1800 312 968 9am –5pm weekdays) or <https://www.murrayphn.org.au/ipc/>
- List and map of COVID-19 GP respiratory clinics and hospital respiratory clinics <https://www.health.vic.gov.au/covid-19/gp-respiratory-clinics-and-hospital-respiratory-clinics-covid-19>
- Locations and more information about Priority Primary Care Centre (PPCCs) [Priority Primary Care Centres - Better Health Channel](#)
- Where to get a COVID-19 test <https://www.coronavirus.vic.gov.au/get-a-covid-19-test>
- Information and resources to support GPs <https://www.health.vic.gov.au/covid-19/primary-care-guidance-for-the-response-to-covid-19-risks#minimising-exposure-to-covid-19-in-primary-care-settings>