

# COVID-19 wave preparedness

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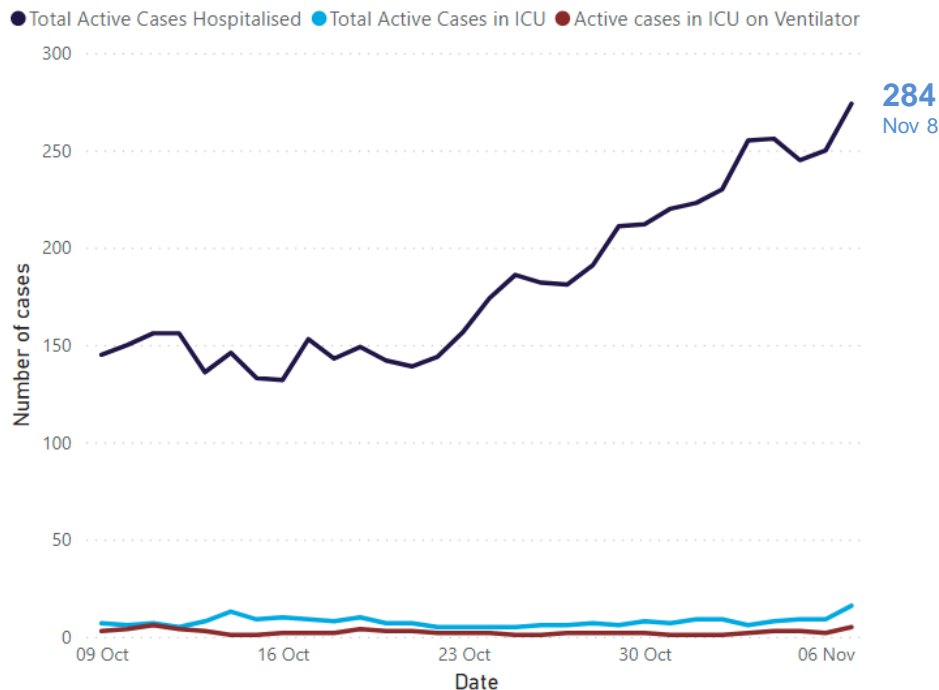
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# Victoria is at the beginning of a new wave.

- ✓ Driven by waning population immunity, reduction in community protective behaviours & emerging immune evasive subvariants
- ✓ Reported case numbers have increased this week (34%)
- ✓ Significant underestimation due to falling case ascertainment (~15%).
- ✓ In last week: Hospitalisations increased by 24%.  
PCR test positivity increased by 24%.  
Antiviral usage increased by 33%.
- ✓ Increased case numbers in all age groups

## Victorian hospitalisations

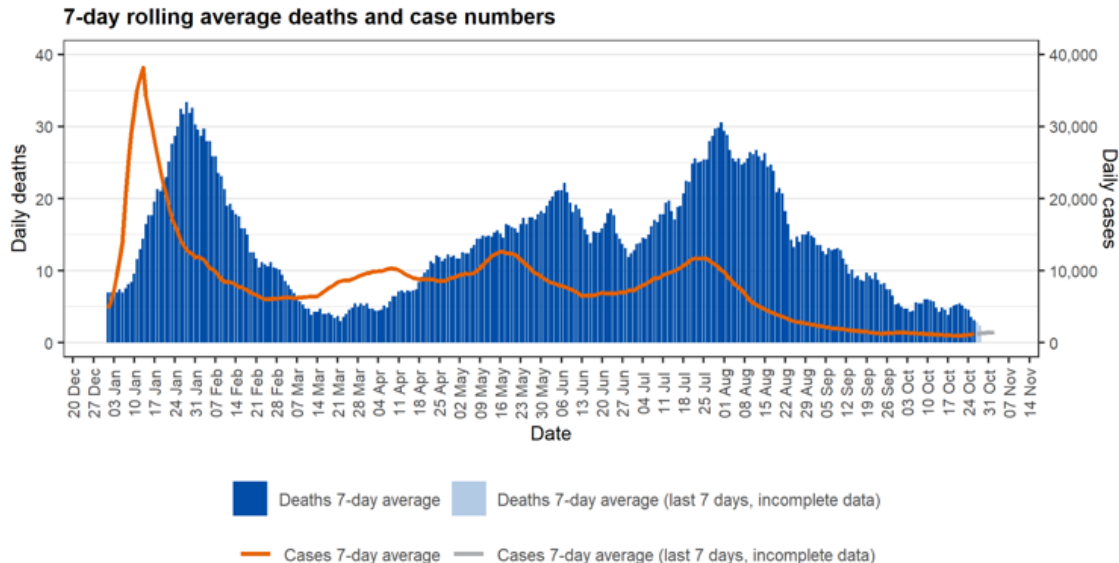


# Mortality

- ✓ YTD deaths 4,247  
Total deaths 5,856

- ✓ Weekly deaths in Victoria plateaued at lowest levels since May 2022
- ✓ 7 day average now 3

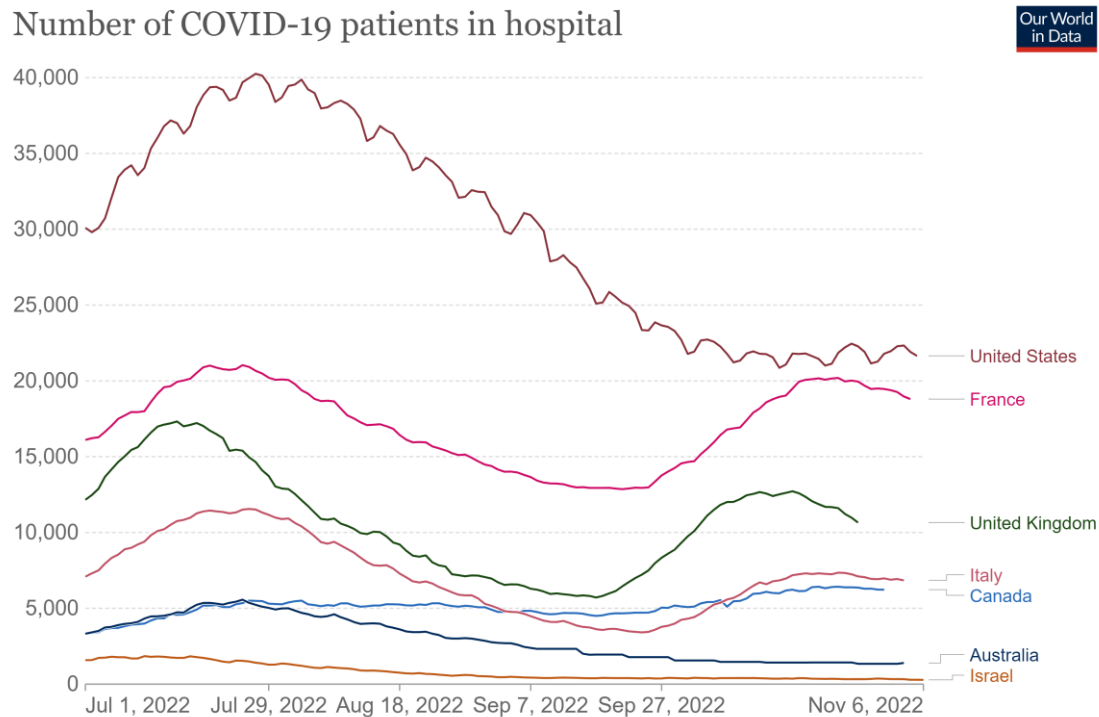
- ✓ Approx 23% of deaths now in aged care
- ✓ 74% metro, 24% rural



Source Surveillance report 03/11/2022

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# International jurisdictions are seeing waves



Source: Official data collated by Our World in Data – Last updated 7 November 2022

OurWorldInData.org/coronavirus • CC BY

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# Virological surveillance

- Continued growth of the BQ.1 and XBB subvariants over the past month
- BQ.1 and XBB subvariants are likely to become dominant in Victoria
- No evidence to suggest an increase in disease severity with these subvariants, however they do demonstrate **immune evasion**

# Vaccinations

In the previous week:

- 86.4% of doses delivered in primary care, 12.2% state funded clinics
- 3rd dose coverage is 74.2% of eligible population
- 4th dose coverage is 39.5% of eligible population
- In children aged 5-11: 1st dose coverage 61.7%, 2nd dose coverage 47.5%
- \*In under 5 year olds: 19 children have been vaccinated

**\*Only severely immunocompromised children under 5 are eligible for COVID-19 vaccination**

# Victorians aged 70+ who receive a treatment were 55% less likely to die

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 a treatment are 55% less likely to die.**

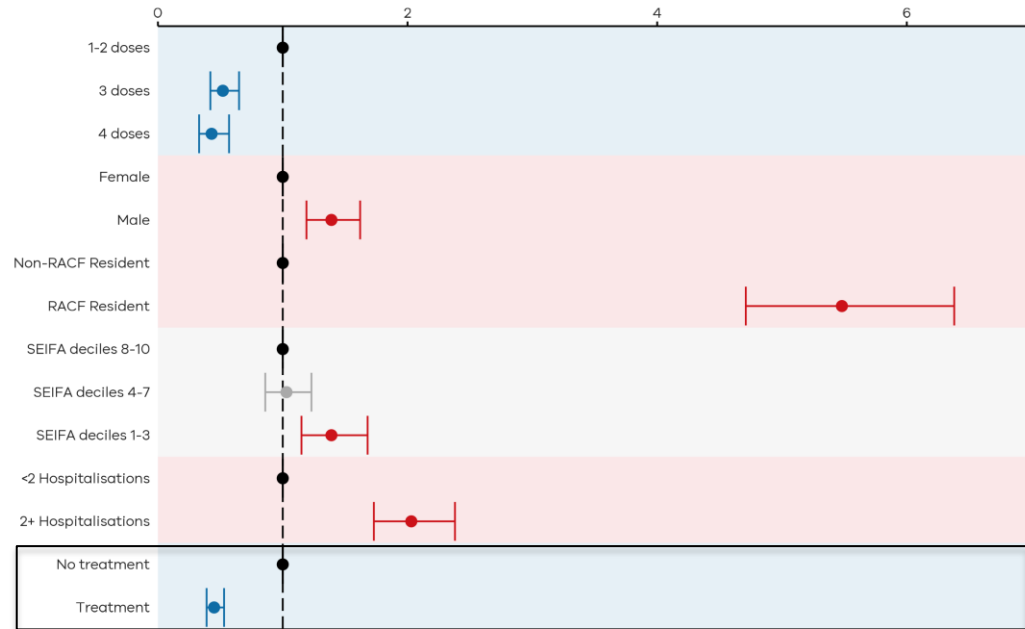
The model controlled the following factors:

- Vaccination for COVID-19<sup>^</sup>
- Sex
- Residence in an aged care facility
- Socioeconomic disadvantage – through residential address
- Previous history of hospitalisation

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

<sup>^</sup> does not account for time since dose

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



Data source: TREV1, VAED, VICNISS, PBS, NMS, ABS. Cases diagnosed from 2022-07-11 to 2022-09-08, total n = 31475. Last run: 2022-10-20

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

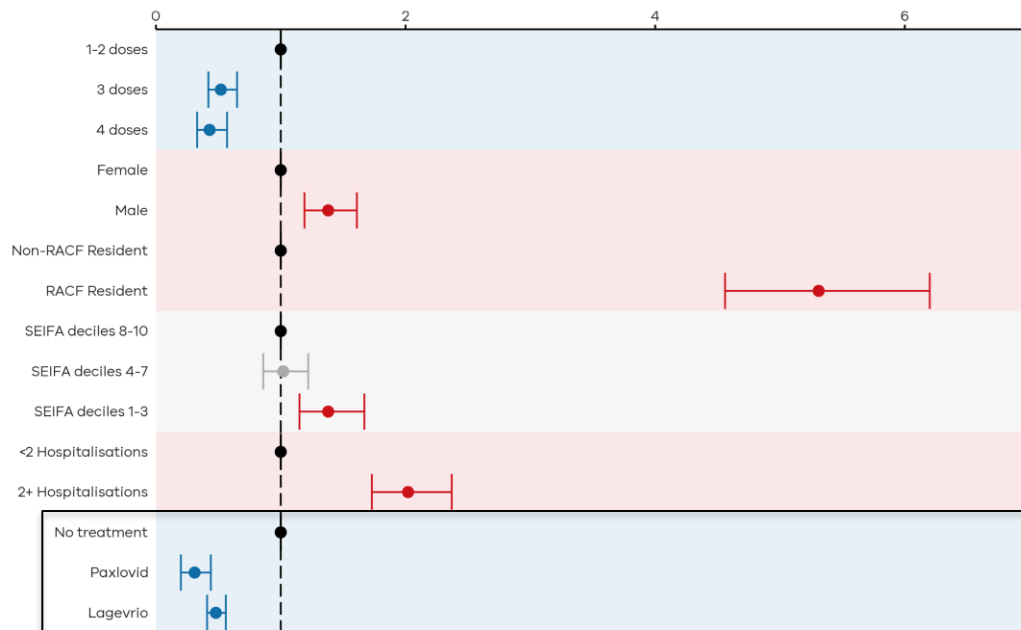
A logistic regression was used to investigate which factors were associated with individuals dying.

**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



# Oral antiviral uptake

Data available for 1135 patients hospitalised in past 8 weeks who were eligible for oral antiviral treatment:

- 16.6% had started treatment prior to hospitalisation
- 64.5% started treatment in hospital

GPs play critical role in ensuring early delivery of AVT to eligible patients

- Conversations with eligible patients and planning for AVT prescription prior to infection
- If still within timeframe - prescription of AVT as soon as a patient reports a positive test (PCR or RAT – GP does not need to sight the RAT)

# Evusheld™ - new eligibility criteria

- **Pre-exposure prophylaxis** (tixagevimab and cilgavimab MABs) remains available
- Recent **expansion in eligibility criteria** to a much broader definition of **immunosuppression** (similar to PBS antiviral immunosuppression criteria) 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 (at approximately 6 months, or earlier at clinician discretion)
- Community prescribing model will continue until **31 December 2022** – supply after this date uncertain

# 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 Masks

Wear a quality mask to protect from COVID and flu

## #2 Ventilation

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

## #3 Isolation

Stay home if unwell

## #4 Testing

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

## #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!

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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 HVAC</b> (heating, ventilation and air conditioning) requirements including air exchange  | Simple steps to ventilate your workplace and prevent COVID-19 <ul style="list-style-type: none"> <li>• <a href="https://www.coronavirus.vic.gov.au/ventilation">https://www.coronavirus.vic.gov.au/ventilation</a></li> </ul> An AC engineer will be able to test for the minimum of 6-8 air exchanges per hour <ul style="list-style-type: none"> <li>• <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></li> </ul> |
| 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> | Cleaning at least twice a day or more if visibly dirty or contact with an infected patient.<br>Carpets and material chairs not recommended<br>Cleaning products should be placed in areas for easy access with staff educated on the products use<br><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>  |
| 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>   | Regular staff education and induction training including fit testing <ul style="list-style-type: none"> <li>• <a href="https://www.health.vic.gov.au/contact-assessment-and-management-guidance-primary-care-community-based-healthcare-and-emergency">https://www.health.vic.gov.au/contact-assessment-and-management-guidance-primary-care-community-based-healthcare-and-emergency</a></li> <li>• <a href="https://www.health.vic.gov.au/creating-coronavirus-zones-acute-care-covid-19-doc">https://www.health.vic.gov.au/creating-coronavirus-zones-acute-care-covid-19-doc</a></li> </ul>   |
| 4 | <b>Spirometry</b> - Aerosol Generating Procedure  | Implementing spirometry into general practice safely and understanding the recommendations including the 12 air exchanges per hour (ACH)<br><a href="https://onlinelibrary.wiley.com/doi/10.1111/resp.14340">https://onlinelibrary.wiley.com/doi/10.1111/resp.14340</a>   |

Actively mention being up to date with COVID-19 vaccinations and antiviral treatment plans in every consultation for all eligible patients and healthcare workers

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# 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 **OFFICIAL**
- <https://www.health.vic.gov.au/covid-19/gp-respiratory-clinics-and-hospital-respiratory-clinics-covid-19>

# Other support pathways and referral options

| Pathways and referral   | Features   |
|---|--|
|  <p data-bbox="247 390 401 548">Victorian<br/>Virtual<br/>Emergency<br/>Department<br/>(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<br/>Primary Care<br/>Centre<br/>(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>