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| Netherlands | 5.1.2e | |
| Spain | | 5.1.2e |
| Italy | 5.1.2e | |
| Germany | | |

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| Observers: | | 5.1.2e |
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Agenda

1. An update from each country
2. Psychological consequences, especially on children
3. Border restrictions and plans for reopening
4. Vaccines
5. AOB

Actions

- UK to share the paper on electronic depression health records. [attached]
- UK to share roadmap for exiting lockdown. [attached]
- Belgium to resend the request for a scientific meeting to discuss the advice for reopening with neighbouring countries.
- Belgium to share mental health survey. [Shared by SvG, attached]
- Spain to share the document published which provides a traffic light rating based on numerical situations of different regions.
- Germany to share the *Control Covid* dashboard. [shared by LW, attached]
- Germany to share prognostic paper on vaccination over the next 6 months.
- All countries to identify the relevant lead to join a specialist discussion with counterparts on the psychological effects of C-19 lockdowns on adolescents.

Agenda items 1, 3, 4: An update from each country, Border restrictions and plans for reopening, Vaccines

France: AF noted that new restrictions have been imposed in France. It is too early to see the impact of the new restrictions, save for 16 of the 100 regions where similar measures were implemented several weeks ago. The effect is expected to be seen in a fortnight, but it will take time to achieve low prevalence. Among the main concerns is hospital saturation. In a few regions, ICUs are over full capacity with extra beds being sourced from elsewhere. Compounding this is the difficulty in training new staff and retaining the existing workforce. Residents (i.e. young medical staff) are able to choose their posting every 6 month, and comparatively few have chosen ICUs this year. BL discussed the rate of genomic sequencing which is increasing considerably. B117 accounts for 80-85% of viruses sequenced, with B1351 accounting for 5%. BL noted that B117 increases at the expense of B1351 when both are present suggesting that it is competitively dominant. The few cases among vaccinated individuals in nursing homes, are mostly mild cases which do not lead to hospitalisation.

Germany: LW outlined the latest data showing a decrease in cases, which may be due lower reporting over the school and easter holidays. This makes judging prevalence difficult. Notwithstanding, Germans have remained individually vigilant over the holiday period. B117 accounts for over 85% of sequenced cases, with no other variant accounting for more than 1%. There is strong public support for a lockdown even within industry. The most reliable metric, hospitalisation numbers, are rising constantly while the average age of those admitted is decreasing. Vaccine rollout currently covers 10-12% of the population with the AZ vaccine restricted to over 60s only. The government has published a standing committee recommendation paper on vaccination which prognosticates on the rollout over the next six months. Germany has seen 30 cases of thrombosis in women who have received the AZ vaccine. LW noted that Germany have a dashboard entitled '*control covid*' detailing numerical thresholds and indicators for strengthening and loosening measures for over 70 settings.

Belgium: SvG reflected a similar situation, with rising prevalence and the holiday period making accurate evaluation difficult. In the last week numbers have decreased which may be due to underreporting. However hospitalisations are also decreasing which may confirm lower case numbers. ICU occupancy is at 900 and increasing rapidly with 25% of hospitalisations requiring ICU compared to 10% 2 months ago. Extra beds are being procured but personnel are experiencing fatigue. National restrictions are focused mainly on hospitality, and the school Easter holidays have been extended from 2 to 3 weeks. However children can still practice hobbies such as sport and youth camps. Testing has been extended, with LFD tests now available in pharmacies. Upon a positive LFD result, individuals are encouraged to contact their GP for a confirmatory PCR test, which if positive will initiate contact tracing. Companies can test employees for free using LFDs twice per week if they cannot work from home. SvG raised that an email request had been circulated on behalf of the Minister for Health to coordinate between neighbouring countries a call to discuss relaxations, particularly around hospitality.

Switzerland: RS described that after a period of lower prevalence, R is now around 1 with cases slowly rising. In contrast to Germany, there is low appetite among the public for a lockdown. NPIs are not expected to change considerably, and restaurants may reopen. Schools remain open and mass testing is progressing slowly. As of today, students and staff can access 5 free LFD tests. There is no mandatory reporting of results, but positive individuals are advised to undergo a confirmatory PCR test. B117, B1351, and P1 account for 85%, 2.5%, and 1.7% of sequenced cases respectively.

Spain: FS emphasised the considerable impact of vaccination which has resulted in lower incidence and case fatality among vaccinated groups. The positive effect in nursing homes is especially pronounced. Among over 80s, 80% and 45% of people have received a first and second dose respectively. Among the general population, the numbers are 15% and 7%. All cases among vaccinated individuals have been mild or asymptomatic. FS emphasised the collective desire to reach EU targets for vaccination. Notwithstanding vaccination, FS described a low increase in prevalence among the general population, with the last 3 weeks showing an increase of 0.5-0.8% a day. FS emphasised the importance of controlling movement between regions which has the dual effect of lower prevalence regions being insulated and higher prevalence regions seeing more compliance. ICU occupancy is seeing a slow increase. The prevalence of B117 is lower than surrounding countries but rising.

Italy: SB noted that within Italy, B117 is more than 87% prevalent, while P.1 is 4% but concentrated in some regions, with general spread very limited. Current measures will remain in place until at least the end of April.

UK: PV explained that the UK set out a roadmap with 4 qualitative tests to be met at each stage. CMO noted the UK is in a reasonably good place but this may change as NPI easing continues. The January lockdown was stronger than it otherwise would have been in order to get B117 under control. Current modelling implies that with current vaccination levels step 2 of the lockdown April 12 will not lead to a surge in cases although they may cease to fall. CMO cautioned that the slated step 3 of unlocking in May could lead to a surge even with the current vaccination rate. PV explained that the recent reopening of schools in the UK caused an increase in R of 0.1-0.2. There are cases of B1351 and P1 from international arrivals but little within the community. Systematic twice weekly LDF testing (Throat and Nasal swap) is in place for secondary school pupils, staff, and families, while in primary schools only staff are tested.

Agenda item 2: Psychological consequences, especially on children

France: AC outlined the impact of C-19 and lockdowns on mental health based on French data and stressed the need for more reliable data. Groups at risk are children, adolescents, and the elderly who are presenting symptoms of PTSD, anxiety and depression. Economic insecurity and social isolation are risk factors. Around 20% of survey respondents reported depression, anxiety, sleeping trouble, and suicidal thoughts. Moreover patients with history of psychiatric disorders and addiction have seen their conditions worsen. Data from 2020 showed fewer suicides but with a greater severity in methods used. Since September, clinicians have alerted authorities to increased demand for child psychiatric treatment. In the Paris population, impact on young people and those over 65 seen most, in terms of increase for psychiatric disorder treatments and hospitalisations. Calls to the national intra-family violence helpline have increased by 63% compared to previous year.

UK: Both GCSA and CMO remarked that the UK is seeing similar. PV committed to share the paper on electronic health records of mental illness on patients with covid which was published yesterday.

Germany: LW remarked that Germany is seeing a similar picture, albeit with limited survey data which suffers from a selection bias.

Switzerland: DdQ highlighted the increased prevalence among the young, with 14-24 age group having double the prevalence of the 30+ aged. A C-19 study on stress with 30k participants showed that the regions most heavily affected in second wave have the highest prevalence of depression. DdQ noted that this geographical difference was not seen in the first wave.

JFD suggested the discussion be continued after call. PV agreed that countries should link up offline for a discussion among specialists in this topic.

Thanks,

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Engagement and Transparency, COVID Response

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