Information for healthcare professionals

Coronavirus Disease 2019 Treatment Guidelines – National Institutes of Health (EEUU)

El 21 de abril de 2020, los *National Institutes of Health* (NIH - EEUU) publicaron las *Coronavirus Disease 2019 (COVID-19) Treatment Guidelines*. Incluimos en este apartado los enlaces a estas *Guidelines*. *Enlaces comprobados el 23 de abril de 2020*

Han elaborado estas Guidelines expertos de las siguientes instituciones y sociedades:

- American College of Chest Physicians
- American College of Emergency Physicians
- American Thoracic Society
- · Biomedical Advanced Research and Development Authority
- Centers for Disease Control and Prevention
- Department of Defense
- Department of Veterans Affairs
- Food and Drug Administration
- Infectious Diseases Society of America
- National Institutes of Health
- Pediatric Infectious Diseases Society
- Society of Critical Care Medicine
- Society of Infectious Diseases Pharmacists

Coronavirus Disease 2019 (COVID-19) Treatment Guidelines

https://covid19treatmentguidelines.nih.gov/

• Introduction https://covid19treatmentguidelines.nih.gov/introduction/

• Overview and Spectrum of COVID-19

https://covid19treatmentguidelines.nih.gov/overview/

Summary Recommendations

- The COVID-19 Treatment Guidelines Panel (the Panel) does not recommend the use of any agents for pre-exposure prophylaxis (PrEP) against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) outside of the setting of a clinical trial (AIII).
- The Panel **does not recommend** the use of any agents for post-exposure prophylaxis (PEP) against SARS-CoV-2 infection outside of the setting of a clinical trial **(AIII)**.
- The Panel recommends no additional laboratory testing and no specific treatment for persons with suspected or confirmed asymptomatic or presymptomatic SARS-CoV-2 infection (AIII).
- At present, no drug has been proven to be safe and effective for treating COVID-19. There are insufficient data to recommend either for or against the use of any antiviral or immunomodulatory therapy in patients with COVID-19 who have mild, moderate, severe, or critical illness (AIII).
- Epidemiology
- Clinical Presentation
- Diagnosis of SARS-CoV-2 Infection
- Routes of SARS-CoV-2 Transmission and Standard Means of Prevention
- References
- Prophylaxis. Persons at Risk for Infection with SARS-CoV-2

https://covid19treatmentguidelines.nih.gov/overview/prophylaxis/

Management of Persons with COVID-19

https://covid19treatmentguidelines.nih.gov/overview/management-of-covid-19/

Special Considerations in Pregnancy and Post-Delivery

https://covid19treatmentguidelines.nih.gov/overview/pregnancy-and-post-delivery/

Special Considerations in Children

https://covid19treatmentguidelines.nih.gov/overview/children/

• Care of Critically III Patients with COVID-19

https://covid19treatmentguidelines.nih.gov/critical-care/

Summary Recommendations

Infection Control:

- For health care workers who are performing aerosol-generating procedures on patients with COVID-19, the COVID-19 Treatment Guidelines Panel (the Panel) recommends using fit-tested respirators (N-95 respirators) or powered air-purifying respirators rather than surgical masks, in addition to other personal protective equipment (i.e., gloves, gown, and eye protection such as a face shield or safety goggles) (AIII).
- The Panel recommends that endotracheal intubation for patients with COVID-19 be done by health care providers with extensive airway management experience, if possible (AIII).
- The Panel recommends that intubation be achieved by video laryngoscopy, if possible (CIII).

Hemodynamic Support:

- The Panel recommends norepinephrine as the first-choice vasopressor (AII).
- The Panel recommends using dobutamine in patients who show evidence of persistent hypoperfusion despite adequate fluid loading and the use of vasopressor agents (**BII**).

Ventilatory Support:

- For adults with COVID-19 and acute hypoxemic respiratory failure despite conventional oxygen therapy, the Panel recommends high-flow nasal cannula (HFNC) oxygen over noninvasive positive pressure ventilation (NIPPV) (**BI**).
- In the absence of an indication for endotracheal intubation, the Panel recommends a closely monitored trial of NIPPV for adults with COVID-19 and acute hypoxemic respiratory failure for whom HFNC is not available (**BIII**).
- For adults with COVID-19 who are receiving supplemental oxygen, the Panel recommends close monitoring for worsening of respiratory status and recommends early intubation by an experienced practitioner in a controlled setting (AII).
- For mechanically ventilated adults with COVID-19 and acute respiratory distress syndrome (ARDS), the Panel recommends using low tidal volume (Vt) ventilation (Vt 4–8 mL/kg of predicted body weight) over higher tidal volumes (Vt >8 mL/kg) (AI).
- For mechanically ventilated adults with COVID-19 and refractory hypoxemia despite optimized ventilation, the Panel recommends prone ventilation for 12 to 16 hours per day over no prone ventilation (**BII**).
- For mechanically ventilated adults with COVID-19, severe ARDS, and hypoxemia despite optimized ventilation and other rescue strategies, the Panel recommends a trial of inhaled pulmonary vasodilator as a rescue therapy; if no rapid improvement in oxygenation is observed, the patient should be tapered off treatment (CIII).
- There are insufficient data to recommend either for or against the routine use of extracorporeal membrane oxygenation for patients with COVID-19 and refractory hypoxemia(**BIII**).

Drug Therapy:

- There are insufficient data for the Panel to recommend either for or against any antiviral or immunomodulatory therapy in patients with severe COVID-19 disease (AIII).
- In patients with COVID-19 and severe or critical illness, there are insufficient data to recommend empiric broad-spectrum antimicrobial therapy in the absence of another indication (**BIII**).
- The Panel **recommends against** the routine use of systemic corticosteroids for the treatment of mechanically ventilated patients with COVID-19 without ARDS (**BIII**).
- In mechanically ventilated adults with COVID-19 and ARDS, there are insufficient data to recommend either for or against corticosteroid therapy in the absence of another indication (CI).
- In COVID-19 patients with refractory shock, low-dose corticosteroid therapy is preferred over no corticosteroid therapy (**BII**).

General Considerations

https://covid19treatmentguidelines.nih.gov/critical-care/general-considerations/

Infection Control

https://covid19treatmentguidelines.nih.gov/critical-care/infection-control/

Laboratory Diagnosis

https://covid19treatmentguidelines.nih.gov/critical-care/laboratory-diagnosis/

• Hemodynamics

https://covid19treatmentguidelines.nih.gov/critical-care/hemodynamics/

Oxygenation and Ventilation

https://covid19treatmentguidelines.nih.gov/critical-care/oxygenation-and-ventilation/

Pharmacologic Interventions

https://covid19treatmentguidelines.nih.gov/critical-care/pharmacologic-interventions/

Extracorporeal Membrane Oxygenation

https://covid19treatmentguidelines.nih.gov/critical-care/extracorporeal-membrane-oxygenation/

Therapeutic Options for COVID-19 Currently Under Investigation

https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/

• Potential Antiviral Drugs Under Evaluation for the Treatment of COVID-19

https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/antiviral-therapy/

Potential Antiviral Agents Under Evaluation for Treatment of COVID-19: Clinical Data to Date

https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/antiviral-therapy/table-2a-potential-antiviral-agents-clinical-data/

https://covid19treatmentguidelines.nih.gov/tables/table-2a/

Characteristics of Potential Antiviral Agents Under Evaluation for Treatment of COVID-19

https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/antiviral-therapy/table-2b-characteristics-of-potential-antiviral-agents/

https://covid19treatmentguidelines.nih.gov/tables/table-2b/

Host Modifiers and Immune-Based Therapy Under Evaluation for Treatment of COVID-19

https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/host-modifiers-immunotherapy/

 Host Modifiers and Immune-Based Therapy Under Evaluation for Treatment of COVID-19: Clinical Data to Date

https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/host-modifiers-immunotherapy/table-3a-host-modifiers-clinical-data/

https://covid19treatmentguidelines.nih.gov/tables/table-3a/

 Characteristics of Host Modifiers and Immune-Based Therapy Under Evaluation for Treatment of COVID-19

https://covid19treatmentguidelines.nih.gov/therapeutic-options-under-investigation/host-modifiersimmunotherapy/table-3b-characteristics-of-host-modifiers/ https://covid19treatmentguidelines.nih.gov/tables/table-3b/

• Considerations for Certain Concomitant Medications in Patients with COVID-19

https://covid19treatmentguidelines.nih.gov/concomitant-medications/

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