Dr. Pankaj Kumar Pandey,IAS Secretary



Department of Medical, Health and Family Welfare Room No. 1, VishwakarmaBhawan, 4 -Subhash Road, Secretariat, Dehradun, Uttarakhand

Letter No. 363 | PS | Secy | 2021 Dated: 22 | 04 | 2021

Madam/Sir,

As you are aware that a state level expert committee was constituted to provide technical inputs regarding COVID 19 case management. The recommendations of this expert committee is being attached for necessary action.

Yours Sincerely,

Encl: As above

(Dr. Pankaj Kumar Pandey)

- 1. District Magistrates, All districts of Uttarakhand
- 2. Chief Medical Officers, All districts of Uttarakhand

Cc:

- 1) Chief Secretary, Uttarakhand Secretariat, Dehradun.
- 2) Secretary, Medical Health and F.W., Uttarakhand
- 3) Director General, Medical Education, Uttarakhand
- 4) Director General, Medical Health and F.W. Uttarakhand
- 5) Vice Chancellor, HNB Medical University
- 6) P.S. to Hon'ble CM

Recommendations of Committee constituted vide Letter No. 426/SEC-MH/2020 dated 26.25.2020 and Letter No. 430/SEC-MH/2020 dated 28.05.2020 regarding technical inputs and decision support

(Date 18th April 2021)

A committee has been constituted vide Letter No. 426/SEC-MH/2020 dated 26.25.2020 and Letter No. 430/SEC-MH/2020 dated 28.05.2020 regarding technical inputs and decision support for informed policy making for Covid-19 in Uttarakhand State. A meeting was held on 18.04.2021 at 01 pm in the presence of the Prof. (Dr.) Hem chandra, Vice Chancellor, Hemwati Nandan Bahuguna Uttarakhand Medical Education University, and Prof. (Dr.) Ashutosh Sayana, Principal, Govt. Doon Medical College & Coordinator of committee through video conferencing with following expert representatives from different hospital/organisation of State of Uttarakhand.

- 1. Dr. Tripti Bahuguna, DG Health & Family Welfare Uttarakhand, Dehradun
- 2. Prof. (Dr.) C.P.Bhaisora, Principal Govt. Haldwani Medical College, Haldwani.
- 3. Prof. (Dr.) R.G. Nautiyal, Principal Govt. Medical College, Almora.
- 4. Dr. S.K.Gupta, Director, Health & Family Welfare Uttarakhand, Dehradun
- 5. Dr. Panda, Representative of AIIMS, Rishikesh.
- Prof. (Dr.) Arun Joshi, Prof & Head, Medicine Department, Govt. Medical College Haldwani.
- Prof. (Dr.) Shekhar Pal, Prof & Head, Microbiology Department, Govt. Doon Medical College Dehradun.
- Prof. (Dr.) Chitra Joshi, Prof & Head, Obst. & Gyane Department, Govt. Doon Medical College Dehradun.
- Prof. (Dr.) Narayan Jeet Singh, Prof & Head, Medicine Department Govt. Doon Medical College Dehradun.
- Prof. (Dr.) Ajay Vikram Singh. Anaesthesia Department, Govt. Medical College Srinagar Garhwal.
- Prof. (Dr.) Anurag Agarwal, Nodal officer Covid-19, Govt. Doon Medical College Dehradun.
- 12. Dr. K. P. Singh, Medical supdtt. Govt. Medical College Srinagar Garhwal.
- 13. Dr. Urmila Palariya, Associate Professor, Anaesthesia Department, Govt Medical College Haldwani.

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- Dr. Nidhi Uniyal, Associate Professor, Medicine Department, Govt. Doon Medical College Dehradun.
- Dr. Neeraj Kumar, Associate Professor, Forensic Medicine Department, Govt.
 Doon Medical College Dehradun.
- 16. Dr. Atul Singh, Associate Professor, Govt. Doon Medical College Dehradun.
- 17. Dr. Sanjay Upreti, Representative, I.M.A, Uttarakhand.
- 18. Representative from SGRR Medical College, Dehradun.
- 19. Dr. Ankit Khanduri, Representative from MAX Dehradun.
- 20. Dr. Prateek Gupta, Representative from MAX Dehradun.

Prof. (Dr) Hem Chandra and Prof. (Dr) Ashutosh Sayana welcomed all members and apprised all that the spread of corona virus in state of Uttarakhand is increasing with great speed. The committee discussed the matter of exponential growth of positive cases and rapidly increasing mortality of Covid pneumonia patients in the state of Uttarakhand in second wave of Covid-19.

Based on the observations of last few days health statistics and medical audit, the committee had drawn the following reasons for increase in mortality of Covid-19 patients.

- Peak in covid is because of sudden burst of cluster cases, which is also responsible for increase in mortality
- 2. Delay in diagnosis and treatment.
- Delay in the transportation of patients from DCHC to DCH.
- Co-morbidity also contributed major role in mortality.
- 5. Mortality in younger age group (less than 50 years), which constituted approximately 1/3 of total cases in an unique variation from the first wave. This may be due to more infectivity and virulence of virus and also due to change in Genome sequencing of virus in second wave.

Recommendations :-

Followings are the recommendations for prophylaxis against and treatment of Covid – 19 disease (second wave).

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1. Prophylaxis

- As recommended earlier.

2. Treatment :-

(a) At home Isolation

(b) At CCC

(c) At DCHC

(d) At DCH

- As recommended earlier.

- As recommended earlier

- As recommended earlier.

- As recommended earlier.

Additions/ Changes in treatment-

Ivermectin – Tab Ivermectin 12 mg BD x 3 days (instead of 12 mg OD x 3 days as earlier) to be given in all types of isolation/admission therapy.

Doses of Ivermectin now recommended for the treatment of covid-19 infection is 12 mg twice daily for three days and the drug is recommended for all stages of disease presentation. It is not to be given in children less than 2 Yrs of age, Pregnant and lactating females and in patient of liver disease.

2. Remdesivir - Due to indiscriminate use and panic situation created about COVID 19, there is extreme shortage of Inj. Remdesivir. It has been proved that there are limited indications of use of Inj Remdesivir and its use does not reduce the mortality. It is emphasized that Remdesivir should not be used in every covid patient.

Injection Remdesivir is indicated only in moderate Covid illness with SPO2 less than equal to 94% and duration of illness of 9 to 10 days from disease onset as per the earlier treatment protocol. Doses to be given are 200 mg IV on day 1 followed by 100 mg IV on day2 to day 5. There is no need to extend the treatment duration beyond 5 days with Remdesivir. Recommendation is based on the observation made in a number of studies which have presented the limited role of Remdesivir in preventing the disease progression from moderate to severe and no benefit in decreasing the mortality.

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Tab Zinconia once daily x 10 days (before food) Tab Paracetamol 650 as and when required Lactobacillus sachet or capsule 60 million units twice daily x 5 days Cholicalciferol 60000 IU with milk once in a week for 6 week

Recommendation for public measures

- a) Masks compulsory in public places.
- b) Crowd restrictions up to 50 persons.
- c) Early Diagnosis, early Treatment and early referral to DCH, if required
- d) Treatment at FLU OPD must be initiated at first instance if presentation is favouring the Covid diagnosis eg. Fever with or without diarrhoea, Flu like symptoms.
- e) Increase the Covid testing
- f) Treatment to be started in symptomatic patients without waiting for RTPCR report.
- g) Treatment to be started in symptomatic patients whose RTPCR report is negative but other investigations are suggestive of Covid.
- h) Increase the vaccination drive.
- i) Curfew timings recommended: from 6 PM TO 6 AM as major public movement is at this time

Other recommendations

1.Death audit of covid-19 patients to be carried out regularly

2. Regular training of intensive care specialist and Medical Officers involved in Covid management to be carried out.

Prof. (Dr.) Ashutosh Sayana

Principal

Govt.Doon Medical College &

Coordinator- Recommendation Committee

Prof (Dr.) Hem Chandra

Vice- Chancellor

HNBU Medical Education University