Prevalence of COVID-19 Infection Among Staffs in an Urban District Specialist Hospital: 1-Year COVID-19 Experience

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ABSTRACT

Introduction: Hospital staff are at risk for community acquisition as well as potential hospital-acquired infection. Characterizing COVID-19 infection among hospital staff, despite their role as front liners or non-front liners, is important for achieving optimal control of the pandemic. **Methods:** This was a retrospective, single-centred, cross-sectional study. Using data collected from 1st March 2020 until 31st March 2021, we reported the prevalence of COVID-19 infection among staff in Hospital Shah Alam Selangor (HSAS), Malaysia and describe their demography, clinical characteristics, and outcomes. **Results:** There were 57 staff in HSAS who tested positive for COVID-19 during the study period. The mean age was 33.2 years old (SD: 7.552) and the majority were females (36 (63.2%)). Only 5 staff members (8.8%) were directly involved in managing COVID-19 patients. Most (46 members - 80.7%) were reported to be infected from the community. Thirteen staff (22.8%) were asymptomatic throughout, whereas 44 staff (77.2%) had at least one symptom on presentation. All infected staff we reported to be stable with no ICU admission or mortalities. Eighteen staff (31.6%) required hospital admission, while 16 (28.1%) were isolated in Quarantine Centre. The other 23 staff (40.4%) were given Home Isolation Order. **Conclusion:** Hospital-acquired infection is generally controllable as long as the staff strictly complies with the SOP. However, their attitude outside the job scope needs to be changed as it was shown from this study that most infections were from the community and if it was labelled as hospital-acquired, it was less likely to have occurred to those who directly managed COVID-19 patients.

Clinical characteristics of Upper Gastrointestinal Tract Bleeding and Outcomes in COVID-19 patients- A single centre retrospective descriptive study

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ABSTRACT

Introduction: Anticoagulants and corticosteroids have been incorporated as treatment for COVID-9, thus increasing the incidence of Upper Gastrointestinal tract Bleeding (UGIB) in these patients. The aim of this study is to investigate the incidence and characteristics of UGIB among COVID –19 patients in Hospital Sungai Buloh, Malaysia to determine the best management approach. **Methods:** Demographics, endoscopic findings, intervention and outcomes of UGIB among COVID-19 patients was retrospectively evaluated for patient admitted from March 2020 to March 2021. **Results:** We observed a higher incidence of UGIB in patients with covid category 4 and above, who were ill in ICU requiring high oxygen support and had at least 1 comorbidity. They were started on anticoagulant (89%) or steroid therapy (70.8%). Average onset of UGIB which required endoscopic intervention was 15 days into admission and the commonest presentation was unexplained reduction of Hb (51.4%). Gastric ulcer (45%) was the commonest finding and 30% of the patients have normal endoscopy finding. Mean Hb of less than 7.3 (p=0.014), mean platelet level of less than 180 (p=0.011) and creatinine level of more than 365 (p=0.039) were found to be statistically significant in impacting the need for significant endoscopic intervention. The need for unplanned rescope were significant impacted by the requirement of endoscopic intervention (p=0.001) but mortality was found to be not statistically impacted by endoscopic intervention done. **Conclusion:** Peptic ulcer disease was the most common finding in UGIB cases among COVID-19 patient. However interventional endoscopy intervention was only needed in 15% of cases, therefore conservative management would be an acceptable option in management UGIB in COVID-19 patients.