

The Medical Journal of Australia • MJA

MEDIA RELEASE

COVID-19: CARDIAC ARREST, DIABETES, AND ACUTE RESPIRATORY DISTRESS MANAGEMENT GUIDELINES

FOR IMMEDIATE RELEASE

THREE new COVID-19 articles have been published online today by the Medical Journal of Australia. All are open access and available now.

1. *Management of adult cardiac arrest in the COVID-19 era. Interim guidelines from the Australasian College for Emergency Medicine*

“The global pandemic of coronavirus disease 2019 (COVID-19) is creating significant and widespread disruptions in healthcare organisations and societies across the world. Resuscitation poses a risk to healthcare workers, and modifications to our traditional approach needs to change. These guidelines for adult cardiac arrest have been produced by the Australasian College for Emergency Medicine (ACEM), and align with national and international recommendations.”

<https://www.mja.com.au/journal/2020/management-adult-cardiac-arrest-covid-19-era-interim-guidelines-australasian-college>

2. *Challenges of diabetes management during the COVID-19 pandemic*

“The COVID-19 pandemic has changed the way that chronic health care is delivered. The need for social distancing to minimise viral spread has necessitated the rapid uptake of telehealth modalities to deliver health care. Individuals with diabetes may be more susceptible to COVID-19 or its more serious consequences. Glycaemic control and smoking status will likely modulate such risk. It is imperative that these individuals maintain regular contact with their health providers to facilitate tight glycaemic control and to enable education regarding sick day management in the event of illness.”

<https://www.mja.com.au/journal/2020/challenges-diabetes-management-during-covid-19-pandemic>

3. COVID-19 ARDS: clinical features and differences to “usual” pre-COVID ARDS

“Severe coronavirus disease 2019 (COVID-19) represents viral pneumonia from SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) infection leading to acute respiratory distress syndrome (ARDS). The pathological changes include diffuse alveolar damage due to viral infection and immunological injury, as well as multi-organ dysfunction and extensive microthrombus formation. Maintenance of oxygenation is the key treatment strategy. Recommendations for COVID-19 ARDS are to use oxygen to achieve SpO₂>92%, to use high flow oxygen only in appropriate locations, to avoid NIV, to use prone ventilation, and consider ECMO for rescue. Research is needed to identify additional specific therapies for COVID-19 ARDS.”

<https://www.mja.com.au/journal/2020/covid-19-ards-clinical-features-and-differences-usual-pre-covid-ards>

All MJA COVID-19 articles are available at <https://www.mja.com.au/journal/covid-19>.

All MJA press releases are available at <https://www.mja.com.au/journal/media>.

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