

ICNARC report on COVID-19 in critical care: England, Wales and Northern Ireland

22 January 2021

This report presents analyses of data on patients critically ill with confirmed COVID-19, reported to ICNARC up to 23:59 on 21 January 2021, from critical care units participating in the Case Mix Programme (the national clinical audit covering all NHS adult, general intensive care and combined intensive care/high dependency units in England, Wales and Northern Ireland, plus some additional specialist and non-NHS critical care units) and increasing numbers of surge/other areas providing critical care.

Data are reported separately for patients critically ill with confirmed COVID-19 either at or after the start of critical care:

- admitted from 1 September 2020 to date; and
- admitted up to 31 August 2020.

Please note that adult critical care units in Scotland, paediatric intensive care units and neonatal intensive care units do not participate in the Case Mix Programme.

Reporting process

Critical care units/areas participating in the Case Mix Programme are asked to:

- log a case with ICNARC by submitting a record, with minimal data, as soon as they have an admission with confirmed COVID-19;
- resubmit data, including first 24-hour physiology, as soon as possible after the end of the first 24 hours in critical care;
- resubmit data for the whole critical care stay, including critical care outcome and organ support, when the patient leaves critical care; and
- submit final data when the patient leaves acute hospital.

Contents

Reporting process	1
Admissions to critical care – COVID-19	6
Admissions to critical care – COVID-19 and non-COVID-19	20
Admissions to critical care – pneumonia (not COVID-19)	24
Patient characteristics	26
Patient characteristics – invasively ventilated first 24 hours	34
Patient characteristics – advanced respiratory support	37
Patient characteristics – basic respiratory support only	40
Patient characteristics – renal support	43
Inter-hospital critical care transfers	46
Outcomes, duration of critical care and organ support	54
Outcomes, duration of critical care and organ support – invasively ventilated first 24 hours	57
Outcomes, duration of critical care and organ support – advanced respiratory support	59
Outcomes, duration of critical care and organ support – basic respiratory support only	61
Outcomes, duration of critical care and organ support – renal support	63
Exploring the new variant	65
Pregnancy	74
28-day in-hospital outcome - overall	78
28-day in-hospital outcome - by patient characteristics	79
28-day in-hospital outcome - by patient characteristics and invasive ventilation first 24 hours	83
90-day in-hospital outcome	87
Monthly trends – COVID-19	88
Additional analyses for patients admitted up to 31 August 2020	98
Definitions	99
Publications	101
Acknowledgement	101

List of Figures

1	Numbers of patients with data included in this report and outstanding *	6
2	Geographical distribution	7
3	Geographical distribution – past 14 days	7
4	Number of new patients by start of critical care	8
5	Number of new patients admitted from 1 September 2020 by date of start of critical care	9
6	Number of new patients from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date *	10
7	Number of new patients from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date by region *	11
8	Number of new patients admitted to critical care compared with hospital admissions	12
9	Cumulative number of patients	13
10	Cumulative number of patients from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date *	14
11	Cumulative number of patients per 100,000 adult population by region	15
12	Number of patients in critical care *	16
13	Number of patients in critical care * from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date	17
14	Number of patients in critical care * from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date by region	18
15	Number of patients in critical care compared with number in hospital	19
16	Average daily number of patients in critical care by month, 2016-2020 *	20
17	Number of admissions with acute myocardial infarction by month, 2016-2020 *	21
18	Number of admissions with stroke by month, 2016-2020 *	22
19	Number of admissions with trauma by month, 2016-2020 *	22
20	Number of admissions with self-harm (drugs or other substances) by month, 2016-2020 *	23
21	Number of admissions with pneumonia (not COVID-19) by month, 2016-2020 *, compared with confirmed COVID-19 during 2020	24
22	Number of admissions with viral pneumonia (influenza) by month, 2016-2020 *	25
23	Age and sex distribution	29
24	Ethnicity distribution compared with the local population	30
25	Index of Multiple Deprivation * distribution compared with the general population	31
26	Urban/rural * distribution compared with the age-matched general population	32
27	Body mass index * distribution compared with the age- and sex-matched general population	33
28	Inter-hospital critical care transfers	46
29	Inter-hospital critical care transfers for comparable critical care by region	47
30	Timing of inter-hospital critical care transfers for comparable critical care	48
31	Inter-hospital critical care transfers for comparable critical care within and outside transfer group *	49
32	Inter-hospital critical care transfers for comparable critical care outside transfer group * by month	50
33	Critical care and acute hospital outcomes	54
34	Cumulative outcomes *	55
35	Numbers currently and recently pregnant	74
36	Percentages currently and recently pregnant	75
37	In-hospital survival to 28 days following admission to critical care	78

38	28-day in-hospital mortality by patient characteristics (demographics)	79
39	28-day in-hospital mortality by patient characteristics (demographics continued) . .	80
40	28-day in-hospital mortality by patient characteristics (demographics and medical history)	81
41	28-day in-hospital mortality by patient characteristics (indicators of acute severity *)	82
42	28-day in-hospital mortality by patient characteristics and invasive ventilation (demographics)	83
43	28-day in-hospital mortality by patient characteristics and invasive ventilation (demographics continued)	84
44	28-day in-hospital mortality by patient characteristics and invasive ventilation (acute severity)	85
45	Percentage of patients and 28-day in-hospital mortality by invasive ventilation and prior hospital length of stay	86
46	In-hospital survival to 90 days following admission to critical care	87
47	Monthly trend in patient characteristics (demographics)	88
48	Monthly trend in patient characteristics (medical history)	89
49	Monthly trend in patient characteristics (indicators of acute severity)	90
50	Monthly trend in patient characteristics (demographics) – distributions	91
51	Monthly trend in patient characteristics (medical history) – distributions	92
52	Monthly trend in patient characteristics (indicators of acute severity) – distributions	93
53	Number of admissions and 28-day in-hospital mortality by month	94
54	PaO ₂ /FiO ₂ and 28-day in-hospital mortality by month	95
55	Invasive ventilation first 24 hours and 28-day in-hospital mortality by month	96
56	Prior hospital length of stay and 28-day in-hospital mortality by month	97
57	Critical care and acute hospital outcomes for patients admitted up to 31 August 2020	98

List of Tables

1	Patient characteristics: demographics	26
2	Patient characteristics: medical history	27
3	Patient characteristics: indicators of acute severity	28
4	Patient characteristics: demographics (invasively ventilated first 24 hours)	34
5	Patient characteristics: medical history (invasively ventilated first 24 hours)	35
6	Patient characteristics: indicators of acute severity (invasively ventilated first 24 hours)	36
7	Patient characteristics: demographics (any advanced respiratory support)	37
8	Patient characteristics: medical history (any advanced respiratory support)	38
9	Patient characteristics: indicators of acute severity (any advanced respiratory support)	39
10	Patient characteristics: demographics (basic respiratory support only)	40
11	Patient characteristics: medical history (basic respiratory support only)	41
12	Patient characteristics: indicators of acute severity (basic respiratory support only) .	42
13	Patient characteristics: demographics (any renal support)	43
14	Patient characteristics: medical history (any renal support)	44
15	Patient characteristics: indicators of acute severity (any renal support)	45
16	Patient characteristics: demographics (any transfer for comparable critical care) . . .	51
17	Patient characteristics: medical history (any transfer for comparable critical care) . .	52
18	Patient characteristics: indicators of acute severity (any transfer for comparable crit- ical care)	53
19	Critical care outcome, duration of critical care and organ support	56
20	Critical care outcome, duration of critical care and organ support (invasively venti- lated first 24 hours)	58
21	Critical care outcome, duration of critical care and organ support (any advanced res- piratory support)	60
22	Critical care outcome, duration of critical care and organ support (basic respiratory support only)	62
23	Critical care outcome, duration of critical care and organ support (any renal support)	64
24	Patient characteristics: demographics (September to November versus December to date)	65
25	Patient characteristics: medical history (September to November versus December to date)	66
26	Patient characteristics: indicators of acute severity (September to November versus December to date)	67
27	Patient characteristics: demographics (London, South East and East of England) . . .	68
28	Patient characteristics: medical history (London, South East and East of England) . .	69
29	Patient characteristics: indicators of acute severity (London, South East and East of England)	70
30	Patient characteristics: demographics (all other regions)	71
31	Patient characteristics: medical history (all other regions)	72
32	Patient characteristics: indicators of acute severity (all other regions)	73
33	Characteristics of females aged 16-49 admitted from 1 September by pregnancy status	76
34	Characteristics of females aged 16-49 admitted up to 31 August by pregnancy status	77

* Please see individual notes for Tables/Figures.

Admissions to critical care – COVID-19

ICNARC have logged data for 19,905 admissions of 17,015 patients critically ill with confirmed COVID-19, either at or after the start of critical care, admitted from 1 September 2020 to date in England, Wales and Northern Ireland. Of these, data covering the first 24 hours of critical care have been submitted to ICNARC for 15,861 patients (Figure 1). Of the 17,015 total patients, 12,703 have outcomes reported and 4312 patients were last reported as still receiving critical care. These patients are compared with a cohort of 10,938 patients with confirmed COVID-19 admitted up to 31 August 2020.

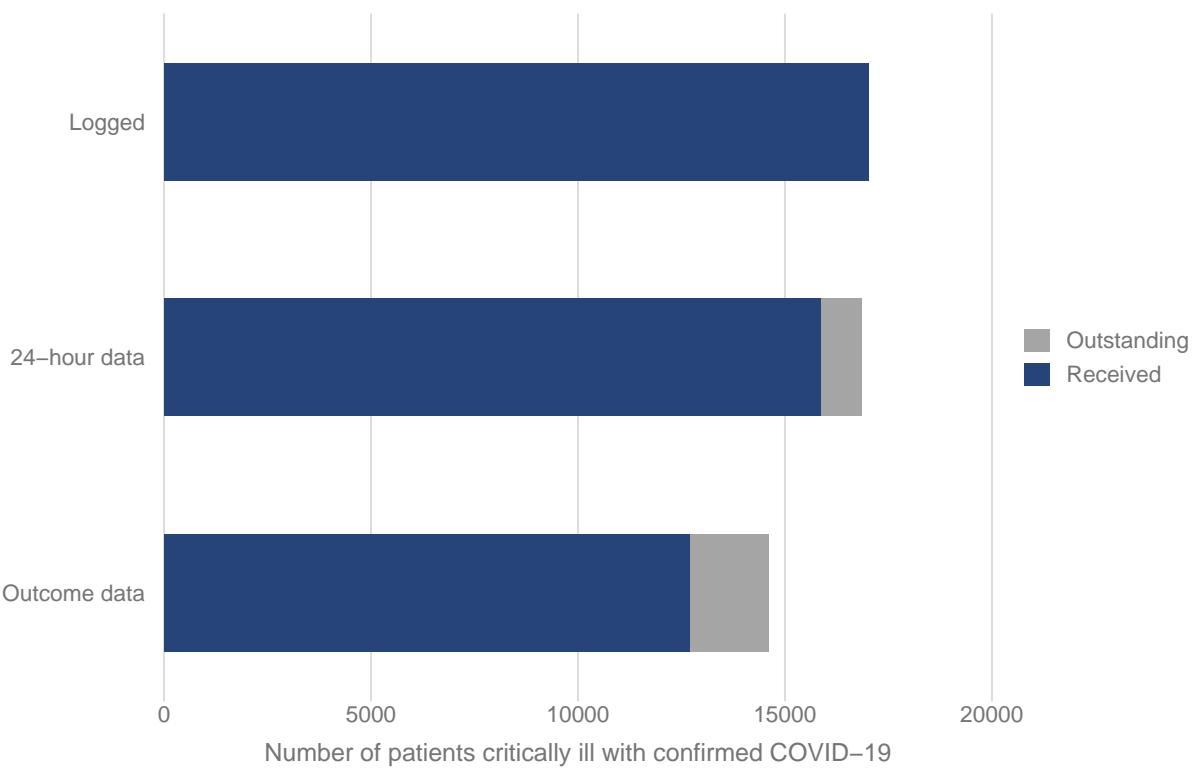


Figure 1. Numbers of patients with data included in this report and outstanding *

Numbers of critically ill patients with confirmed COVID-19 admitted from 1 September 2020 to date with data included in this report and outstanding.

* Please note that 24-hour data are considered outstanding when a case was logged at least 48 hours previously and outcome data are considered outstanding when 24-hour data have been received and at least 10 days have elapsed since the start of critical care.

Of the 17,015 patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date, the largest numbers were admitted in the London, Midlands, North West, and North East And Yorkshire regions (Figure 2). Of the patients included in this week's report, 3886 patients were admitted to critical care within the past 14 days (8 January 2021 to 21 January 2021). The geographical spread of these patients is shown in Figure 3.

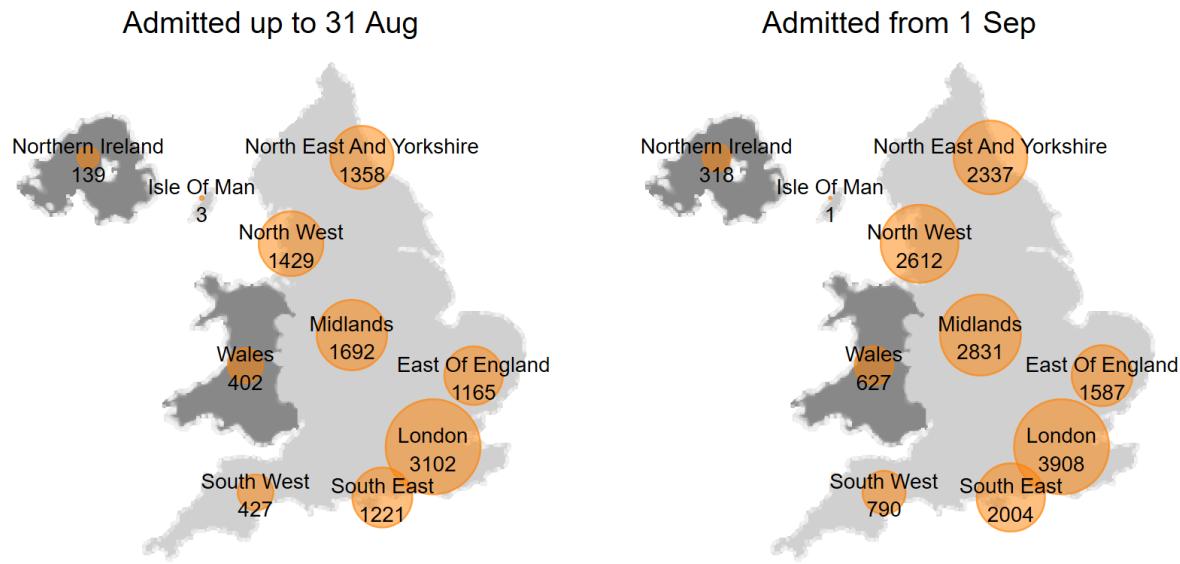


Figure 2. Geographical distribution

Geographical distribution of patients critically ill with confirmed COVID-19 by NHS region.

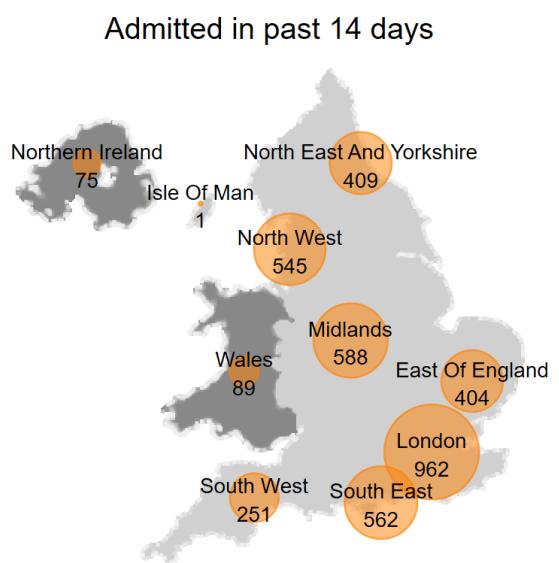


Figure 3. Geographical distribution – past 14 days

Geographical distribution of patients critically ill with confirmed COVID-19 admitted during the past 14 days by NHS region.

The numbers of new patients, cumulative numbers of patients and numbers of patients in critical care by date are shown in Figures 4-15. Please note that these figures are affected by a variable lag time for submission of data.

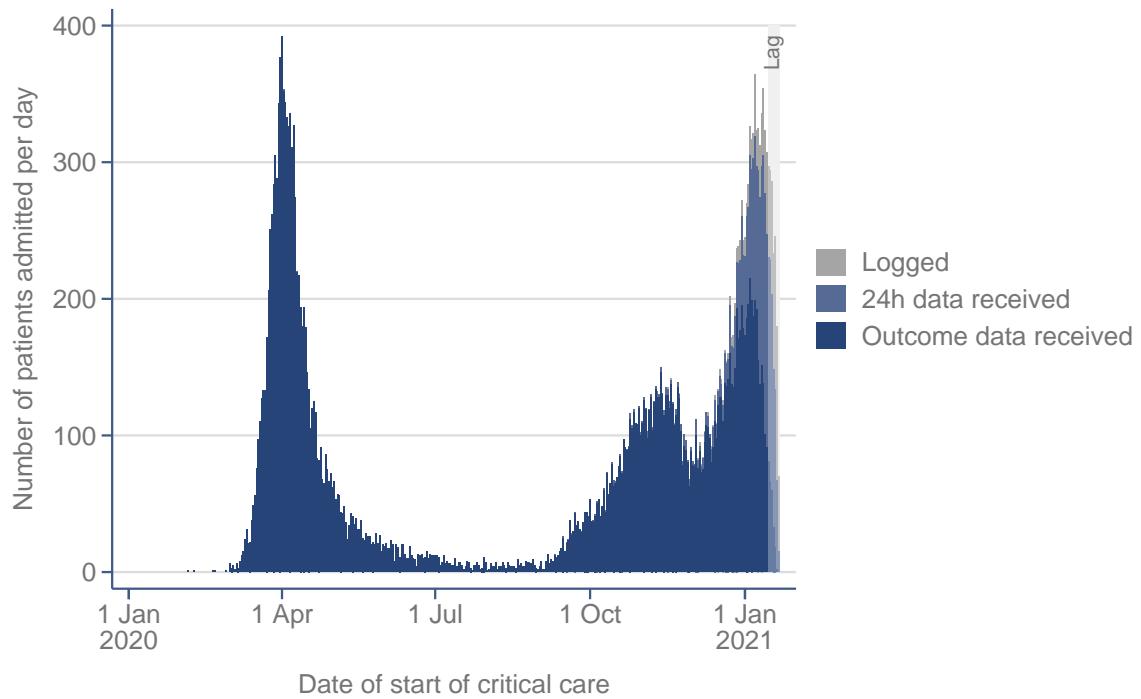
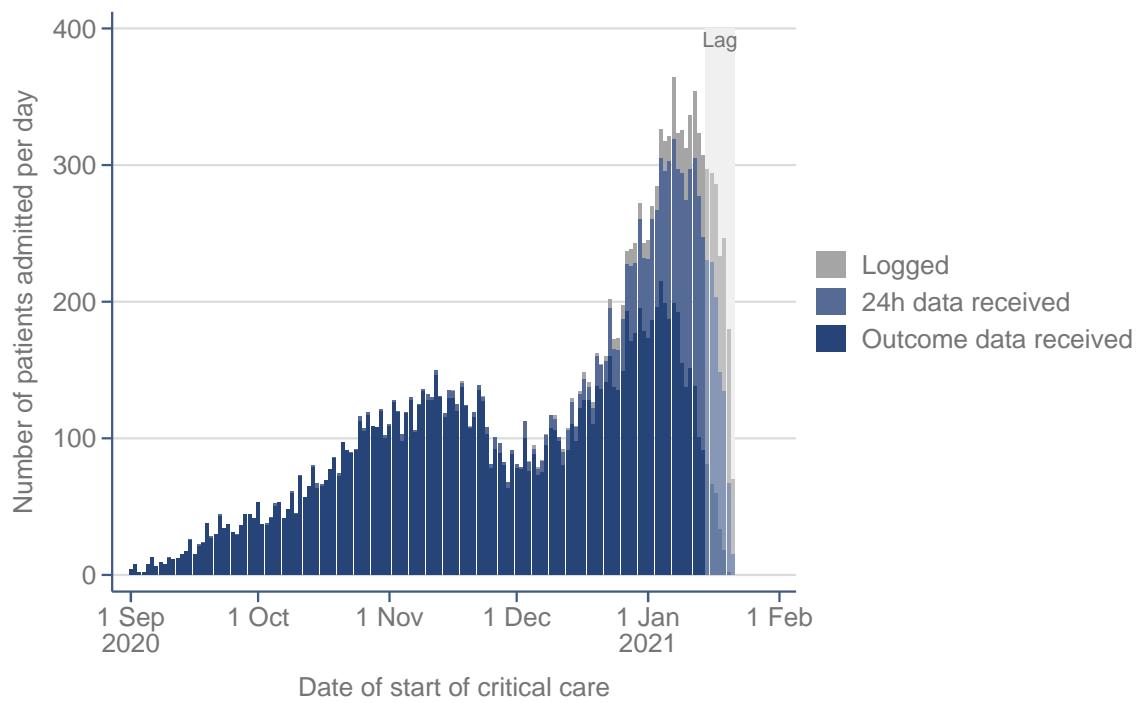


Figure 4. Number of new patients by start of critical care

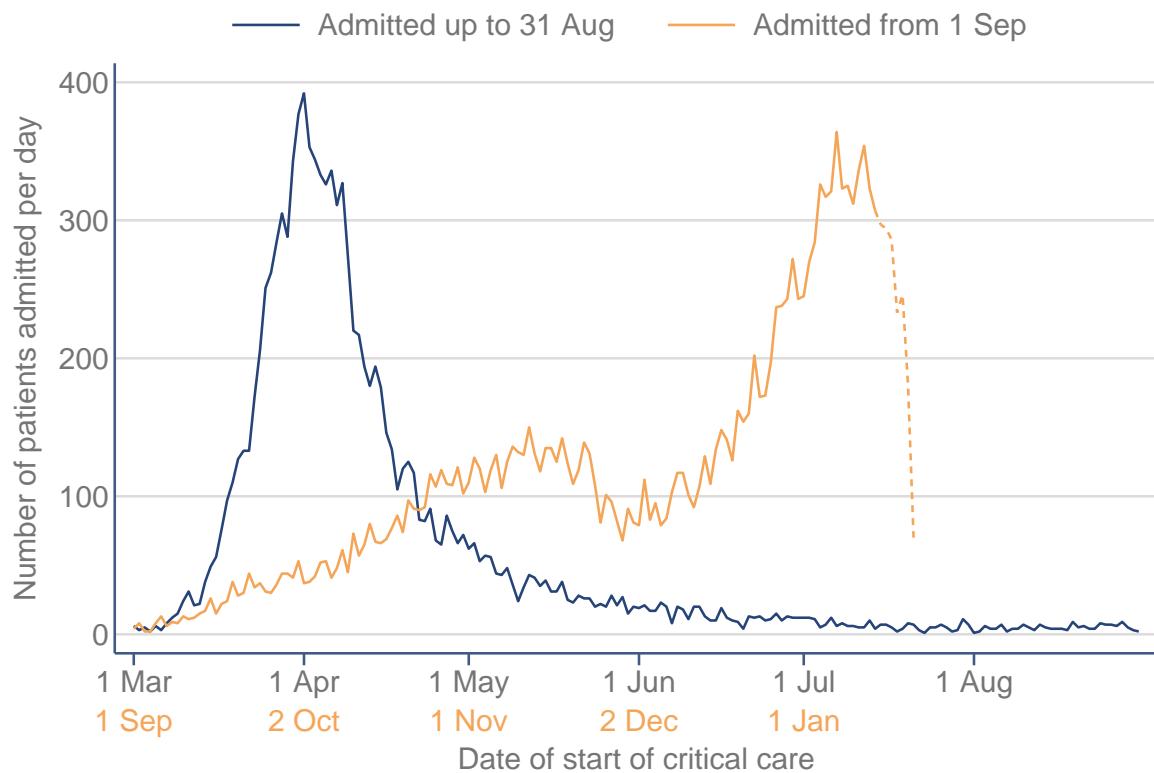
Number of new patients critically ill with confirmed COVID-19 by date of start of critical care over the entire epidemic.



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Figure 5. Number of new patients admitted from 1 September 2020 by date of start of critical care

Number of new patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date by date of start of critical care.

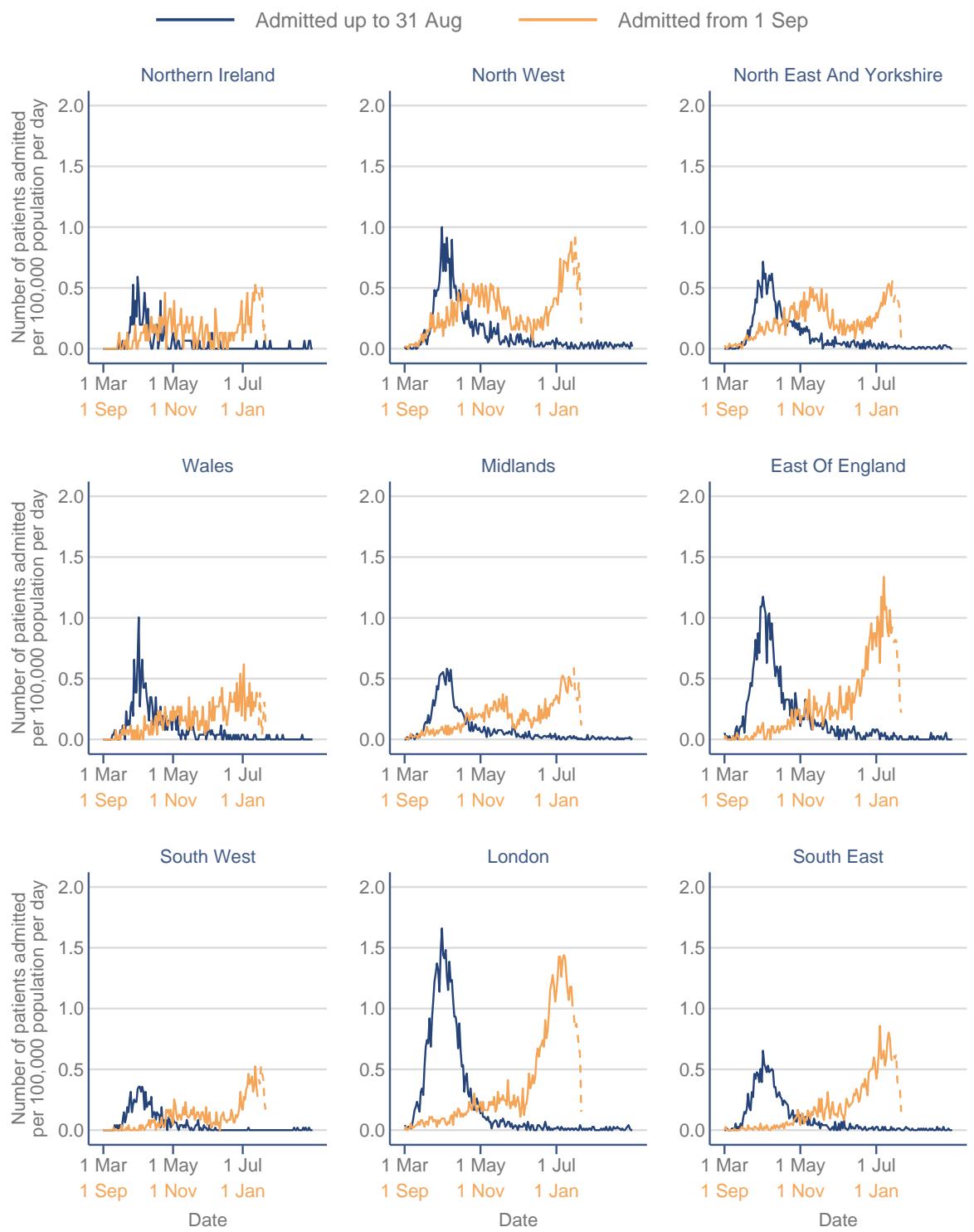


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Figure 6. Number of new patients from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date *

Comparison of the number of new patients critically ill with confirmed COVID-19 by date of start of critical care from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date.

* Dashed line indicates lag in data submission.



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Figure 7. Number of new patients from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date by region *

Number of new patients critically ill with confirmed COVID-19 by date of start of critical care from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date by region.

* Dashed line indicates lag in data submission.

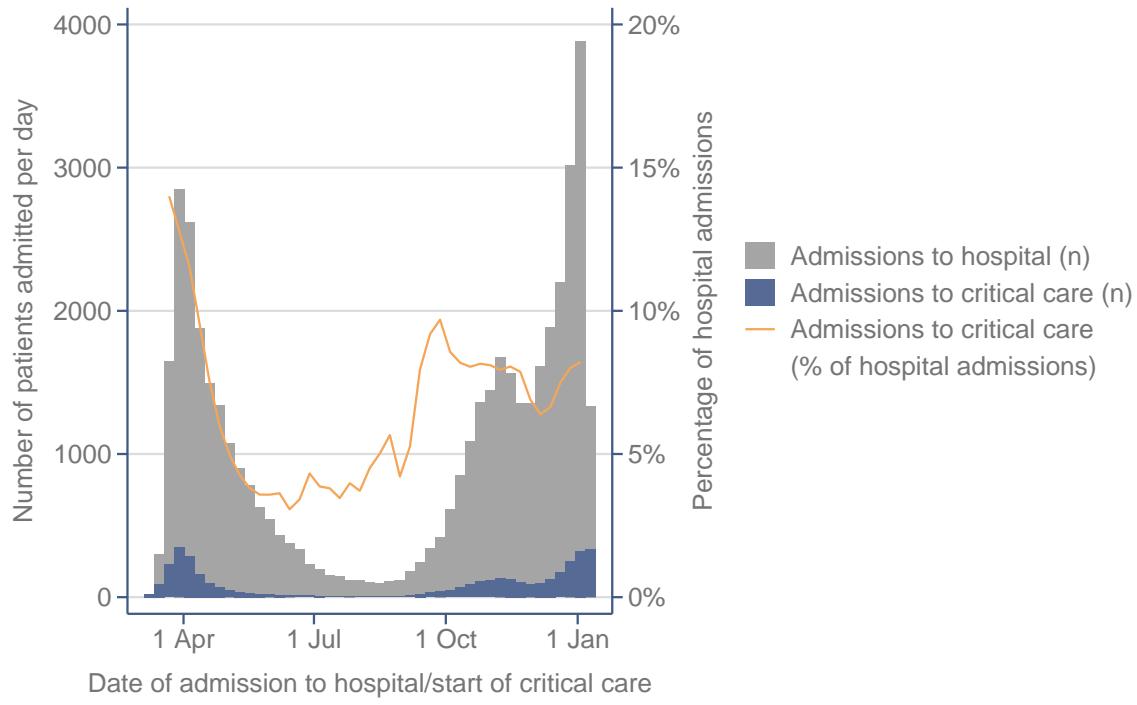
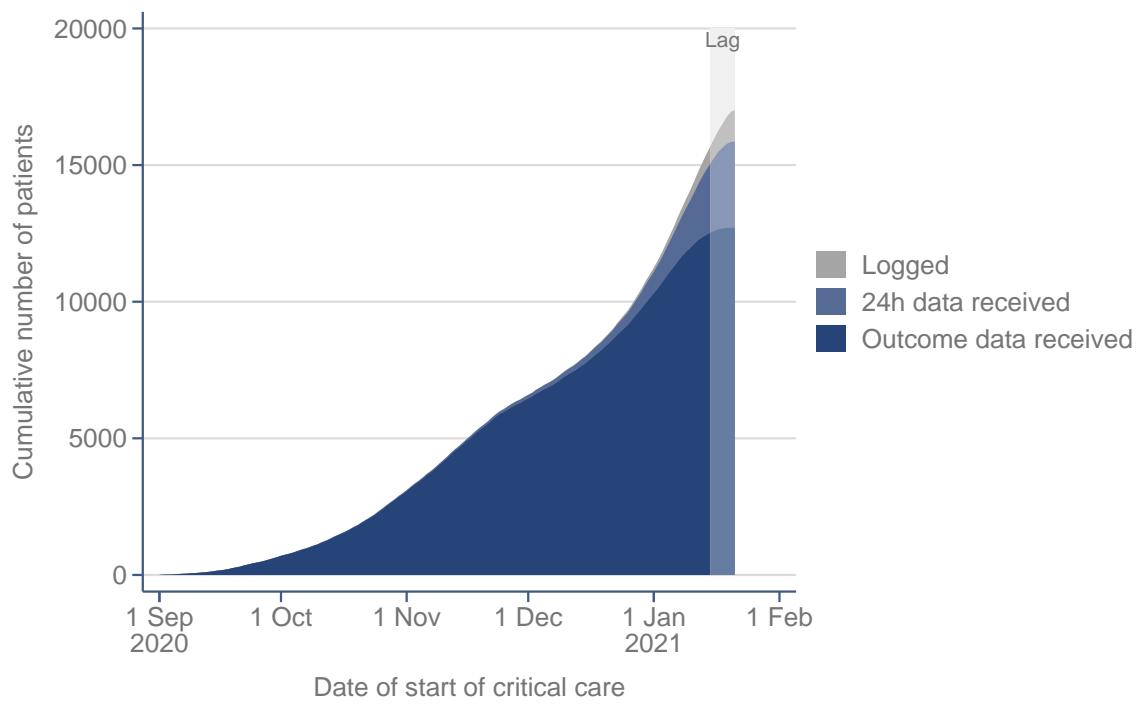


Figure 8. Number of new patients admitted to critical care compared with hospital admissions

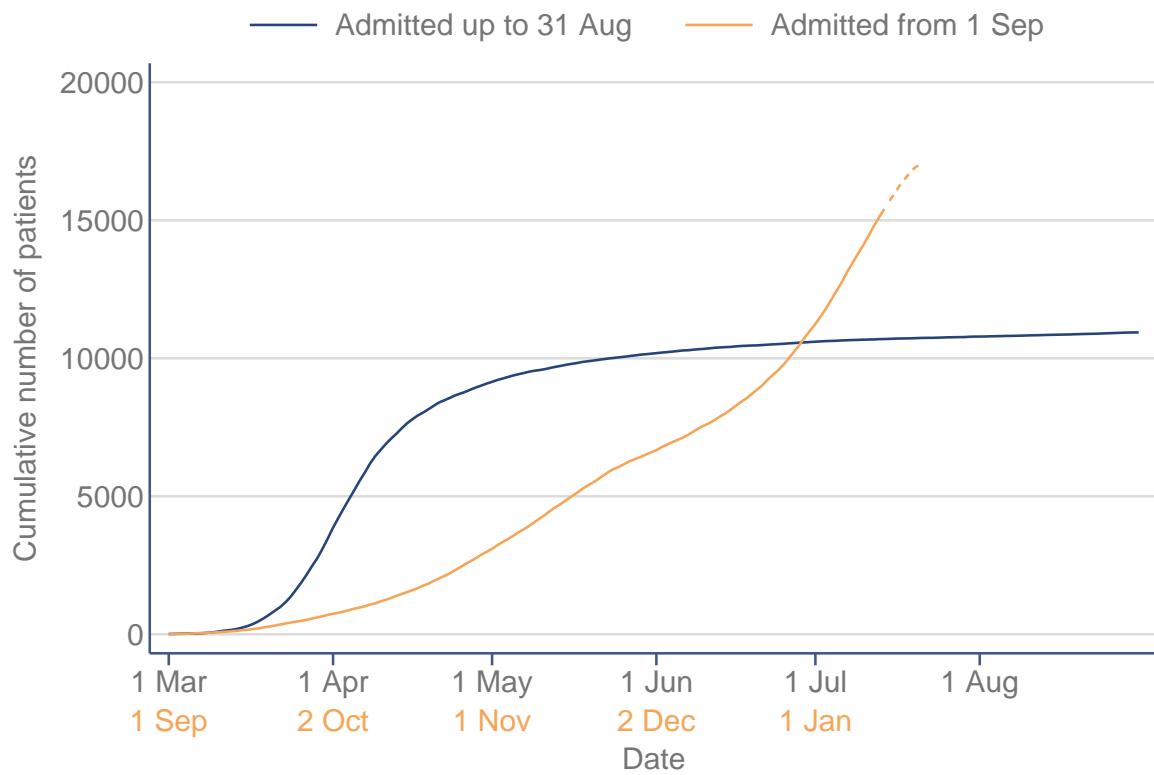
Comparison of the number of new patients critically ill with confirmed COVID-19 by date of start of critical care versus the total number of hospital admissions (source: <https://coronavirus.data.gov.uk/details/healthcare>).



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Figure 9. Cumulative number of patients

Cumulative number of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 by date of start of critical care.

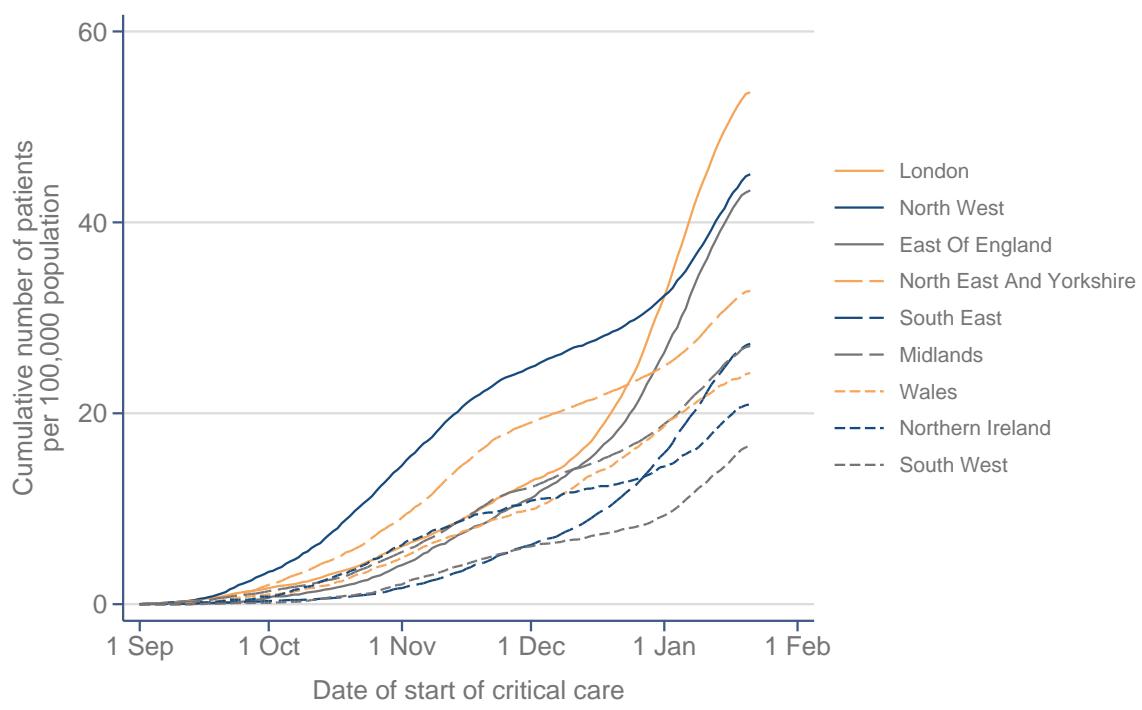


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Figure 10. Cumulative number of patients from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date *

Comparison of the cumulative number of patients critically ill with confirmed COVID-19 by date of start of critical care from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date.

* Dashed line indicates lag in data submission.



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Figure 11. Cumulative number of patients per 100,000 adult population by region

Cumulative number of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 per 100,000 adult population by region.

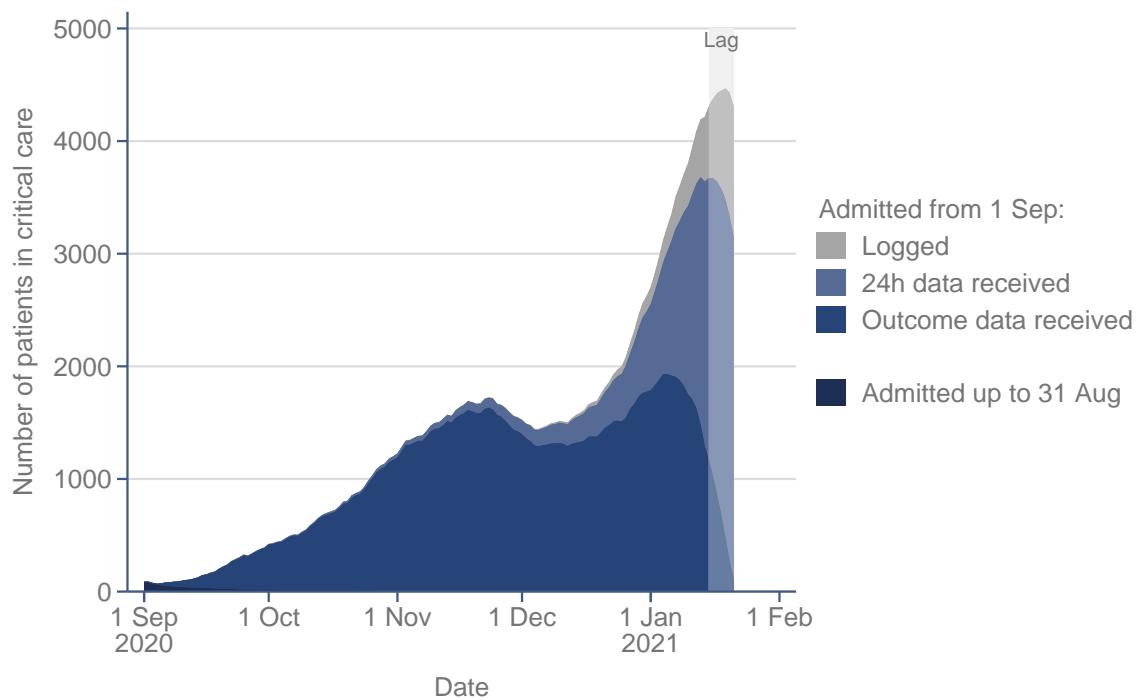
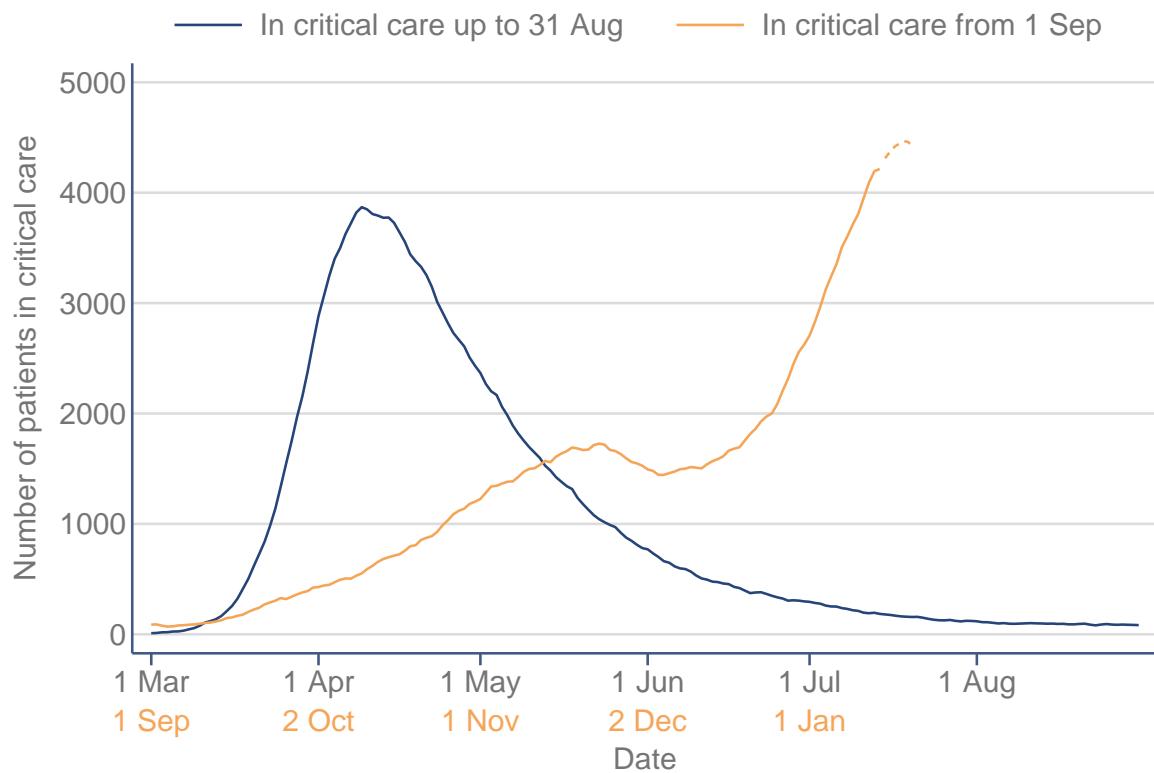


Figure 12. Number of patients in critical care *

Number of patients with confirmed COVID-19 in critical care from 1 September 2020 by date.

* Please note patients whose outcome data have not been received are assumed to remain in critical care as of 21 January 2021.

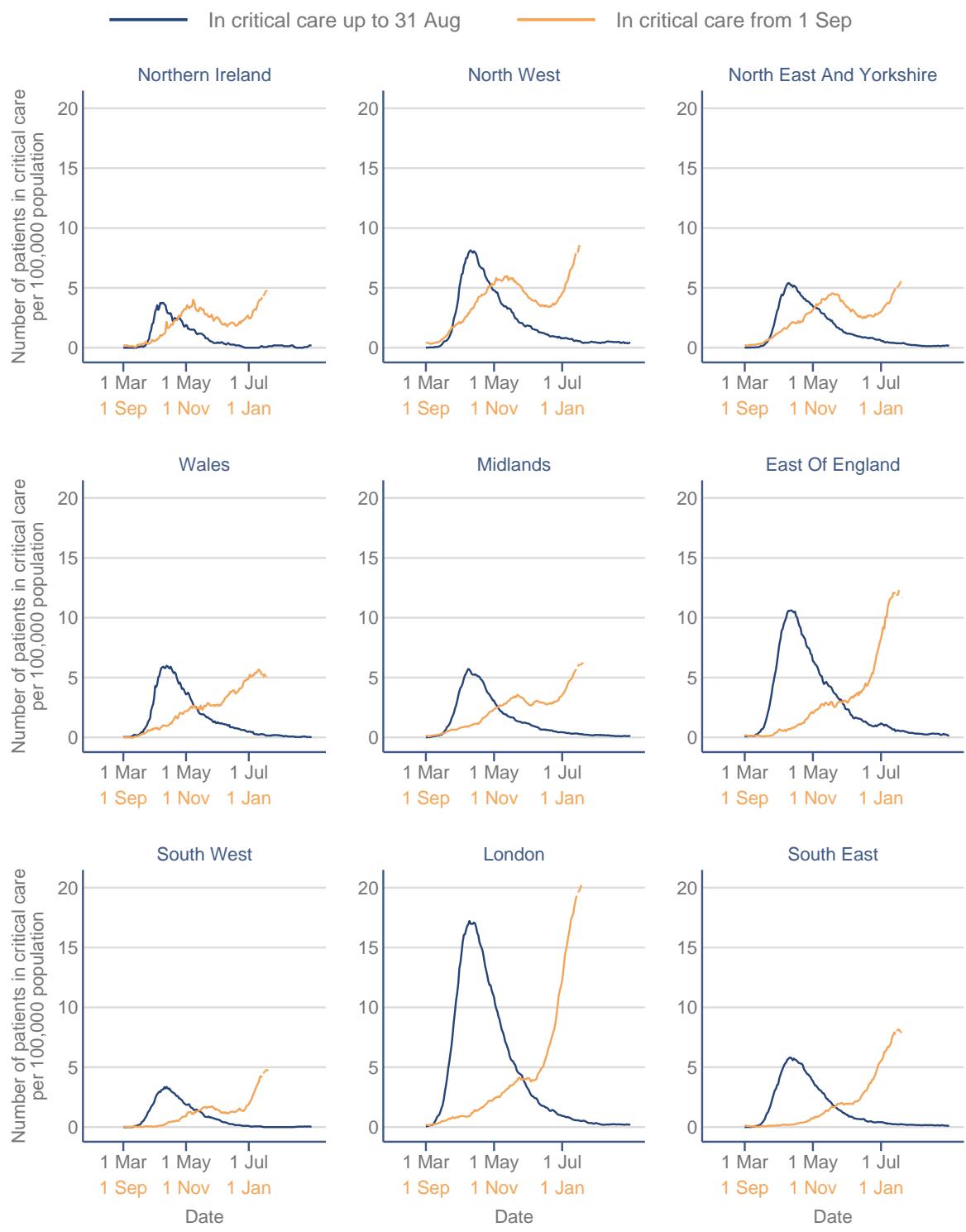


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Figure 13. Number of patients in critical care * from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date

Number of patients with confirmed COVID-19 in critical care by date * from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date.

* Please note patients whose outcome data have not been received are assumed to remain in critical care as of 21 January 2021. Dashed line indicates lag in data submission.

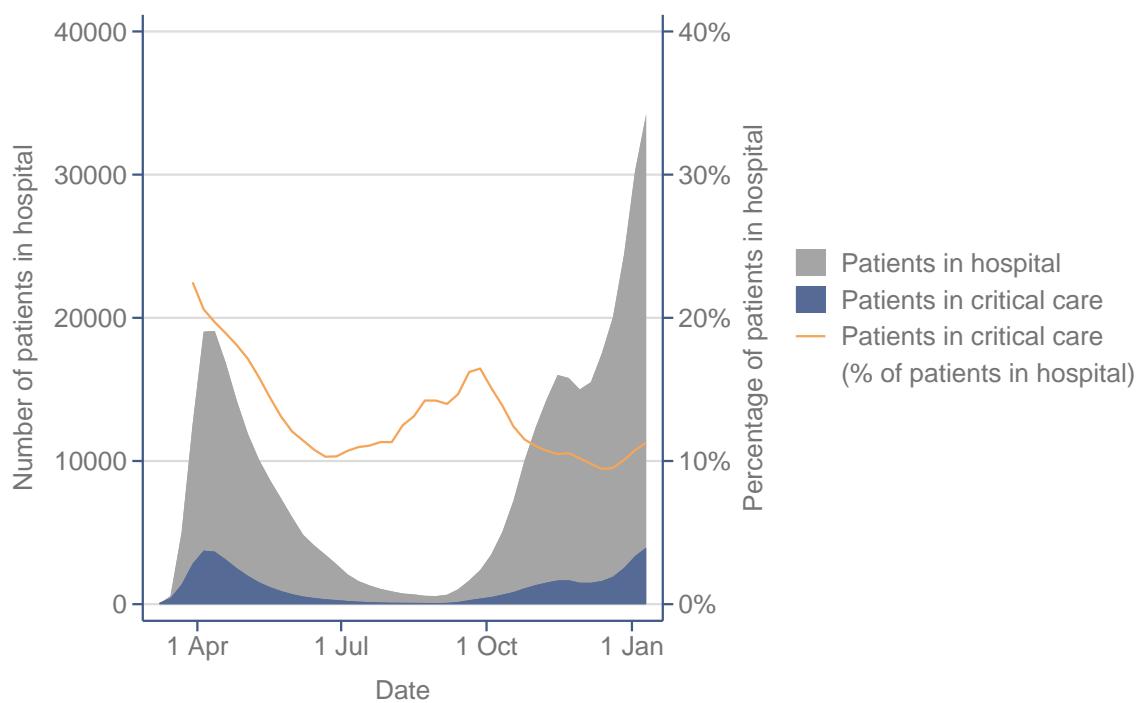


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Figure 14. Number of patients in critical care * from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date by region

Number of patients with confirmed COVID-19 in critical care by date * from 1 March 2020 to 31 August 2020 versus 1 September 2020 to date by region.

* Please note patients whose outcome data have not been received are assumed to remain in critical care as of 21 January 2021. Dashed line indicates lag in data submission.



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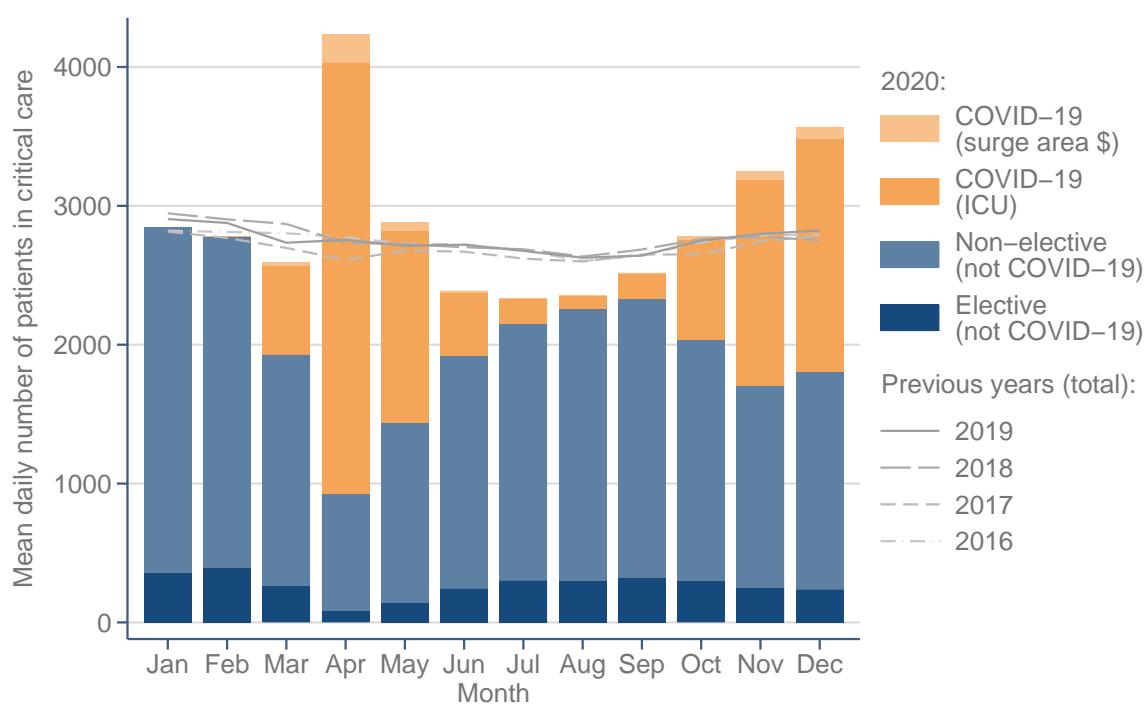
Figure 15. Number of patients in critical care compared with number in hospital

Comparison of the number of patients with confirmed COVID-19 in critical care by date * versus the total number in hospital (source: <https://coronavirus.data.gov.uk/details/healthcare>).

* Please note patients whose outcome data have not been received are assumed to remain in critical care as of 21 January 2021.

Admissions to critical care – COVID-19 and non-COVID-19

Figure 16 shows the average daily number of patients in critical care for each month over the past five years. For 2020, this is broken down into the numbers of: elective admissions (not COVID-19) – those admitted directly following elective or scheduled surgery or for a planned medical procedure; non-elective admissions (not COVID-19); confirmed COVID-19 admitted to an ICU; and confirmed COVID-19 managed in a surge area outside of ICU.



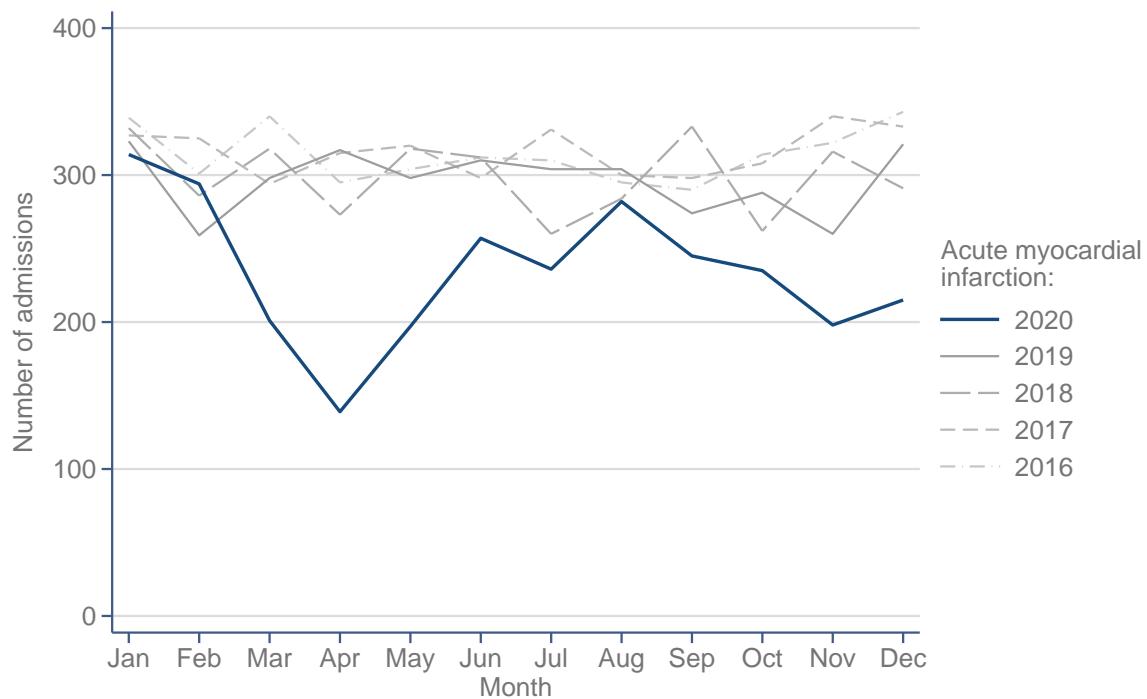
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Figure 16. Average daily number of patients in critical care by month, 2016-2020 *

* Please note that data for patients without COVID-19 are submitted by participating critical care units either monthly or quarterly. Values have been adjusted for coverage.

§ Not all surge patients are identifiable from ICU data and not all surge areas are covered.

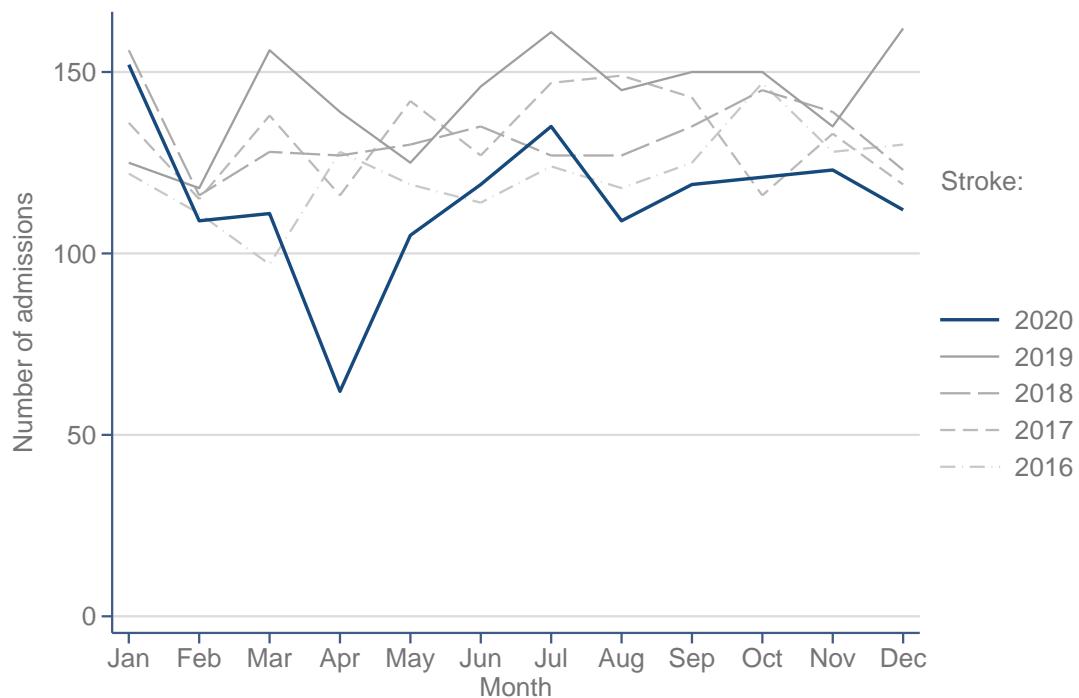
The numbers of admissions with acute myocardial infarction, stroke, trauma and self-harm (with drugs or other substances) recorded as primary or secondary reason for admission to critical care (with or without recording of COVID-19 as the other reason for admission) are shown in Figures 17 to 20.



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Figure 17. Number of admissions with acute myocardial infarction by month, 2016-2020 *

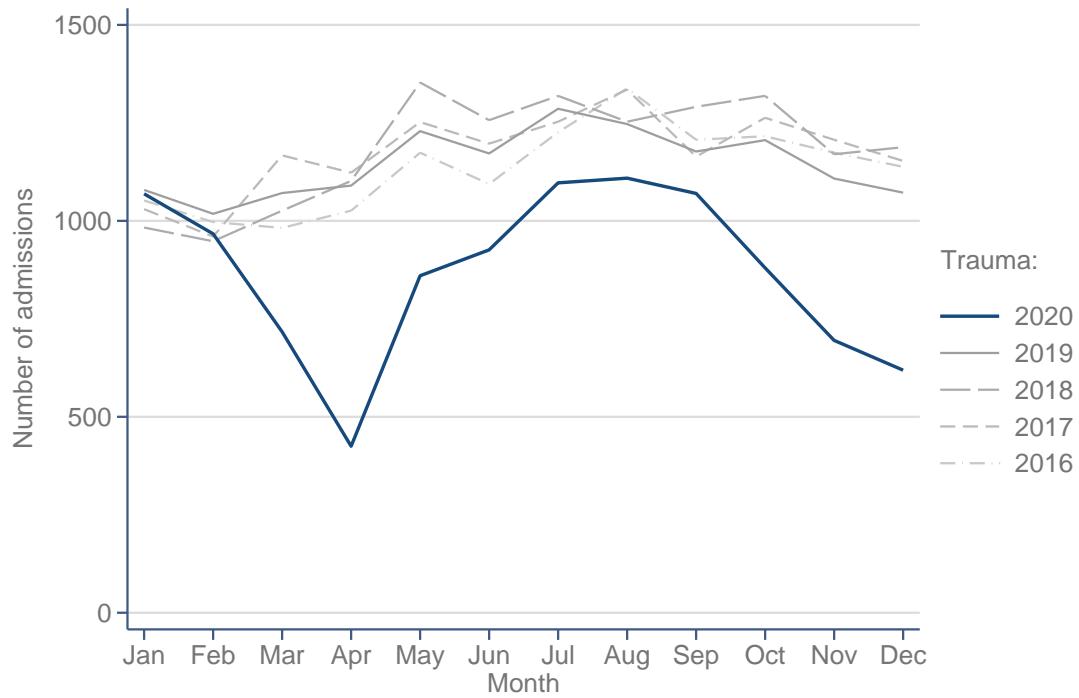
* Please note that data for patients without COVID-19 are submitted by participating critical care units either monthly or quarterly. Values have been adjusted for coverage.



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Figure 18. Number of admissions with stroke by month, 2016-2020 *

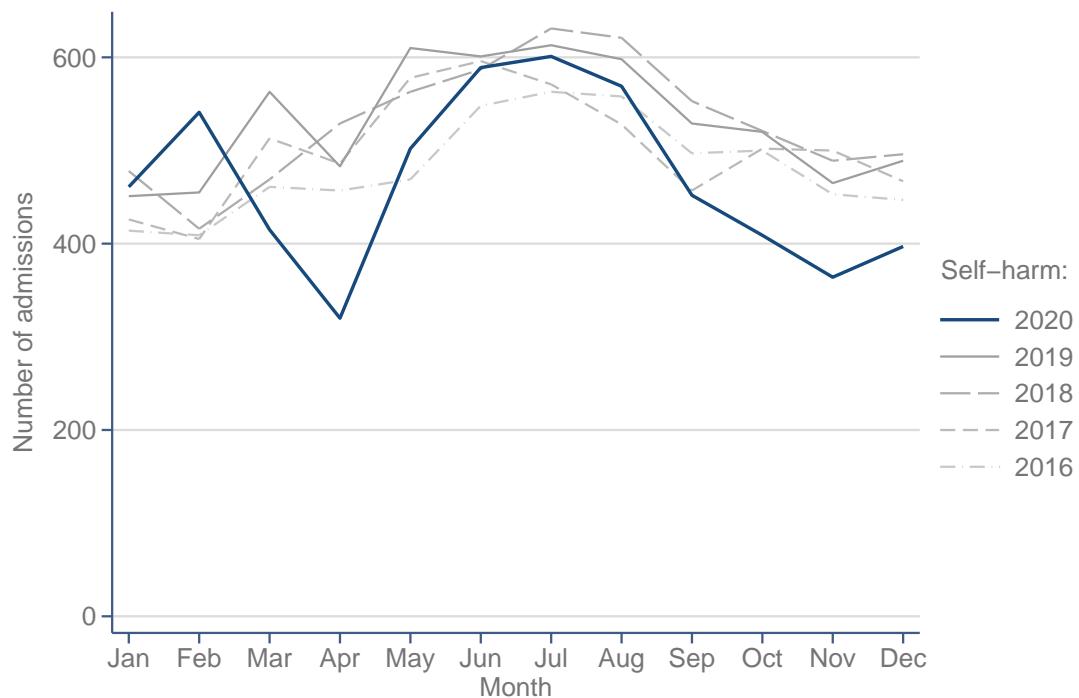
* Please note that data for patients without COVID-19 are submitted by participating critical care units either monthly or quarterly. Values have been adjusted for coverage.



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Figure 19. Number of admissions with trauma by month, 2016-2020 *

* Please note that data for patients without COVID-19 are submitted by participating critical care units either monthly or quarterly. Values have been adjusted for coverage.



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Figure 20. Number of admissions with self-harm (drugs or other substances) by month, 2016-2020 *

* Please note that data for patients without COVID-19 are submitted by participating critical care units either monthly or quarterly. Values have been adjusted for coverage.

Admissions to critical care – pneumonia (not COVID-19)

Figure 21 shows the total numbers of admissions to critical care over the past five years by month of admission reported as due to pneumonia (not COVID-19), compared with the numbers with confirmed COVID-19. Figure 22 shows the number of these pneumonia admissions that were specifically coded as due to influenza. Note that not all admissions due to influenza will be coded as viral pneumonia (influenza) as if the organism has not yet been identified, then these will likely be coded under pneumonia (no organism isolated).

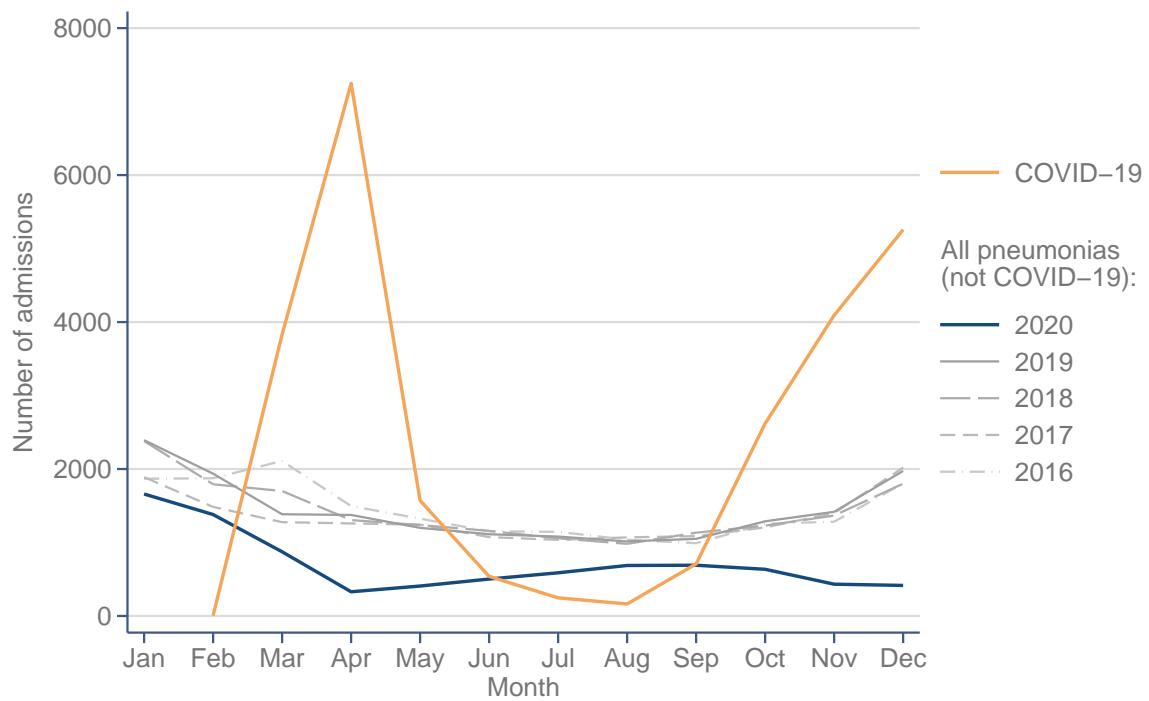
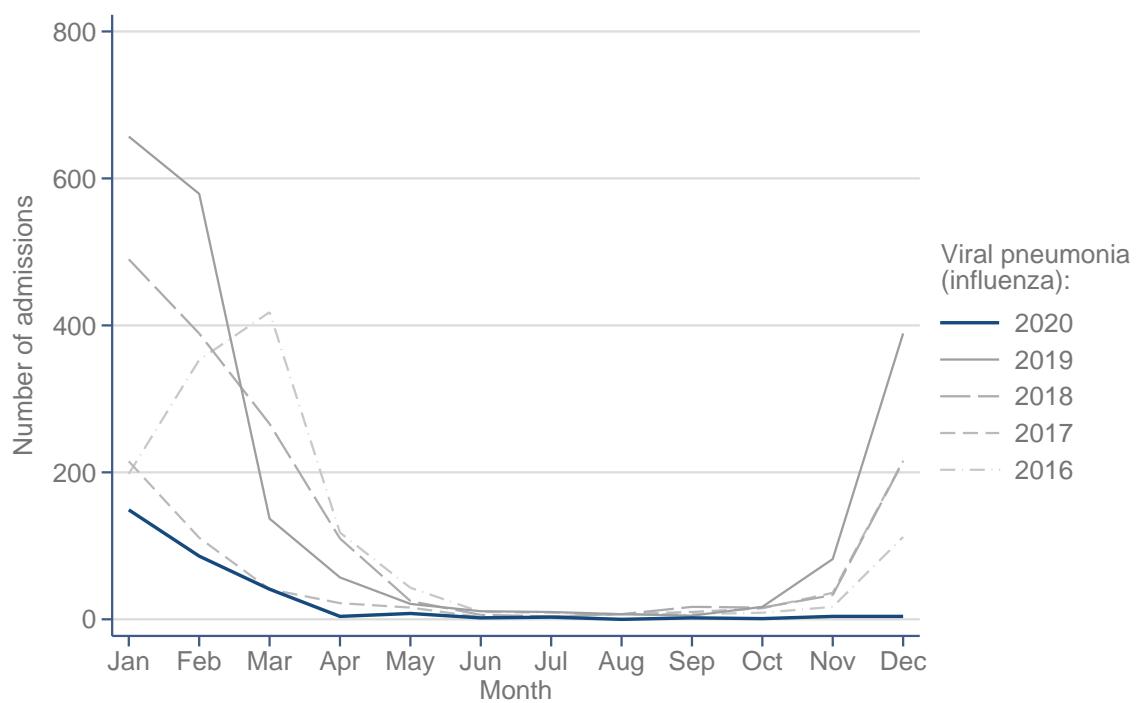


Figure 21. Number of admissions with pneumonia (not COVID-19) by month, 2016-2020 *, compared with confirmed COVID-19 during 2020

* Please note that data for patients without COVID-19 are submitted by participating critical care units either monthly or quarterly. Values have been adjusted for coverage.



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Figure 22. Number of admissions with viral pneumonia (influenza) by month, 2016-2020 *

* Please note that data for patients without COVID-19 are submitted by participating critical care units either monthly or quarterly. Values have been adjusted for coverage.

Patient characteristics

Characteristics of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date are summarised in Tables 1-3 and compared with those admitted up to 31 August 2020.

Table 1. Patient characteristics: demographics

Demographics	Patients with confirmed COVID-19	
	Admitted from 1 Sep (N=17,015)	Admitted up to 31 Aug (N=10,938)
Age at admission (years) [N=17006]		
Mean (SD)	59.8 (13.4)	58.8 (12.7)
Median (IQR)	61 (52, 70)	60 (51, 68)
Sex, n (%) [N=16999]		
Female	5756 (33.9)	3276 (30.0)
Male	11243 (66.1)	7656 (70.0)
Ethnicity, n (%) [N=15657]		
White	11243 (71.8)	6949 (66.0)
Mixed	232 (1.5)	191 (1.8)
Asian	2563 (16.4)	1679 (15.9)
Black	834 (5.3)	1007 (9.6)
Other	785 (5.0)	702 (6.7)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=16676]		
1 (least deprived)	2124 (12.7)	1545 (14.3)
2	2525 (15.1)	1738 (16.1)
3	3073 (18.4)	2084 (19.3)
4	4039 (24.2)	2614 (24.2)
5 (most deprived)	4915 (29.5)	2808 (26.0)
Urban/rural classification *, n (%) [N=16445]		
Major conurbation	7419 (45.1)	5224 (48.8)
Minor conurbation	624 (3.8)	337 (3.1)
City and town	6620 (40.3)	3992 (37.3)
Rural	1778 (10.8)	1153 (10.8)

* Please see Definitions on page 99.

Table 2. Patient characteristics: medical history

Medical history	Patients with confirmed COVID-19	
	Admitted from 1 Sep (N=17,015)	Admitted up to 31 Aug (N=10,938)
Dependency prior to admission to acute hospital, n (%) [N=15261]		
Able to live without assistance in daily activities	13485 (88.4)	9683 (89.3)
Some assistance with daily activities	1727 (11.3)	1115 (10.3)
Total assistance with all daily activities	49 (0.3)	40 (0.4)
Very severe comorbidities *, n (%) [N=15654]		
Cardiovascular	122 (0.8)	69 (0.6)
Respiratory	170 (1.1)	123 (1.1)
Renal	271 (1.7)	187 (1.7)
Liver	94 (0.6)	52 (0.5)
Metastatic disease	103 (0.7)	59 (0.5)
Haematological malignancy	241 (1.5)	215 (2.0)
Immunocompromised	531 (3.4)	387 (3.6)
Body mass index *, n (%) [N=14628]		
<18.5	104 (0.7)	79 (0.8)
18.5-<25	2923 (20.0)	2645 (25.4)
25-<30	4600 (31.4)	3572 (34.4)
30-<40	5331 (36.4)	3269 (31.4)
≥40	1670 (11.4)	832 (8.0)
CPR within previous 24h, n (%) [N=16003]		
In the community	108 (0.7)	50 (0.5)
In hospital	152 (0.9)	76 (0.7)
Prior hospital length of stay [N=16760]		
Mean (SD)	3.2 (12.0)	2.5 (6.2)
Median (IQR)	1 (0, 3)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49) [N=1398]		
Currently pregnant	92 (6.6)	29 (3.7)
Recently pregnant (within 6 weeks)	82 (5.9)	41 (5.2)
Not known to be pregnant	1224 (87.6)	720 (91.1)

* Please see Definitions on page 99.

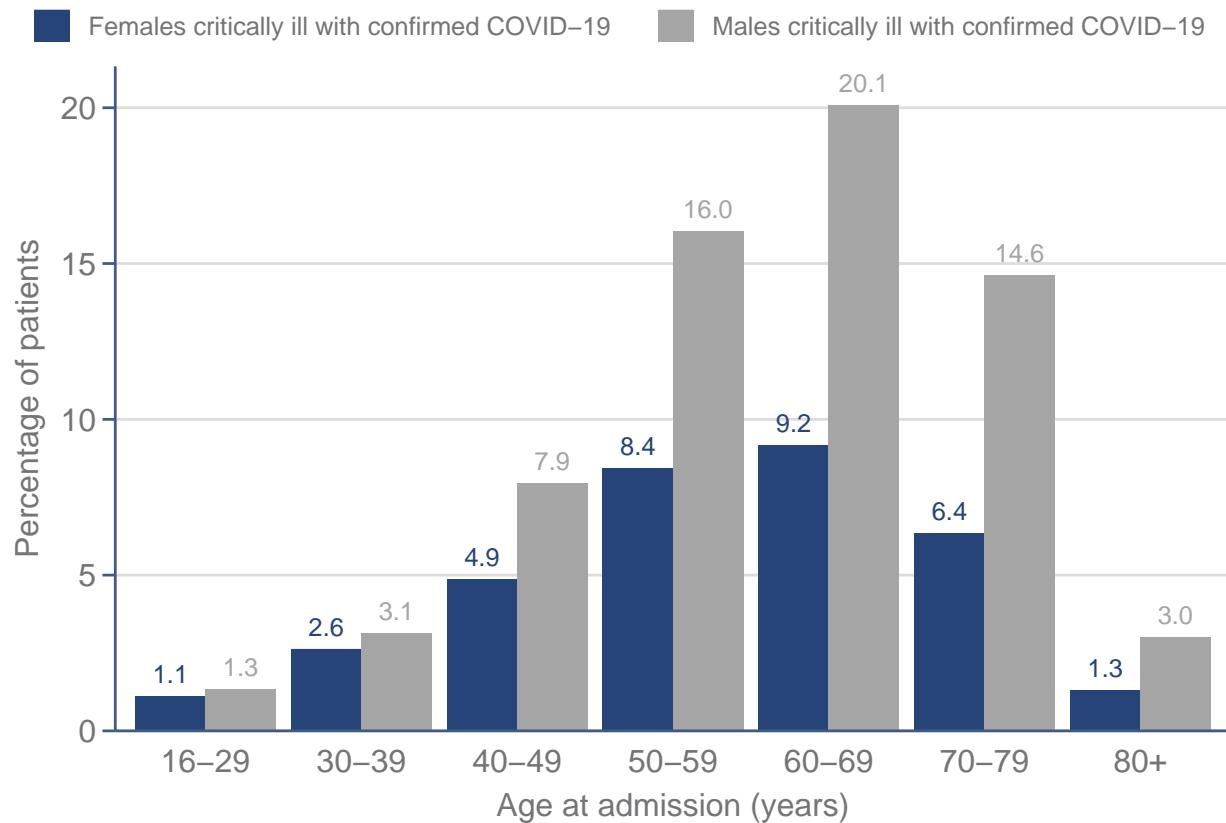
Table 3. Patient characteristics: indicators of acute severity

Indicators of acute severity	Patients with confirmed COVID-19 and 24h data received	
	Admitted from 1 Sep (N=15,861)	Admitted up to 31 Aug (N=10,938)
Invasively ventilated within first 24h *, n (%) [N=14560]	4012 (27.6)	5868 (54.3)
APACHE II Score [N=14936]		
Mean (SD)	14.5 (5.3)	15.1 (5.3)
Median (IQR)	14 (11, 17)	15 (11, 18)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=13803]	13.2 (9.8, 18.4)	15.8 (11.3, 22.0)
PaO ₂ /FiO ₂ ratio †, n (%) [N=13803]		
< 13.3 kPa (< 100 mmHg)	7010 (50.8)	3810 (37.0)
13.3-26.6 kPa (100-200 mmHg)	5344 (38.7)	4936 (47.9)
≥ 26.7 kPa (≥ 200 mmHg)	1449 (10.5)	1560 (15.1)
FiO ₂ †, median (IQR) [N=13803]	0.60 (0.45, 0.80)	0.50 (0.40, 0.70)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

The distribution of age and sex is presented in Figure 23.

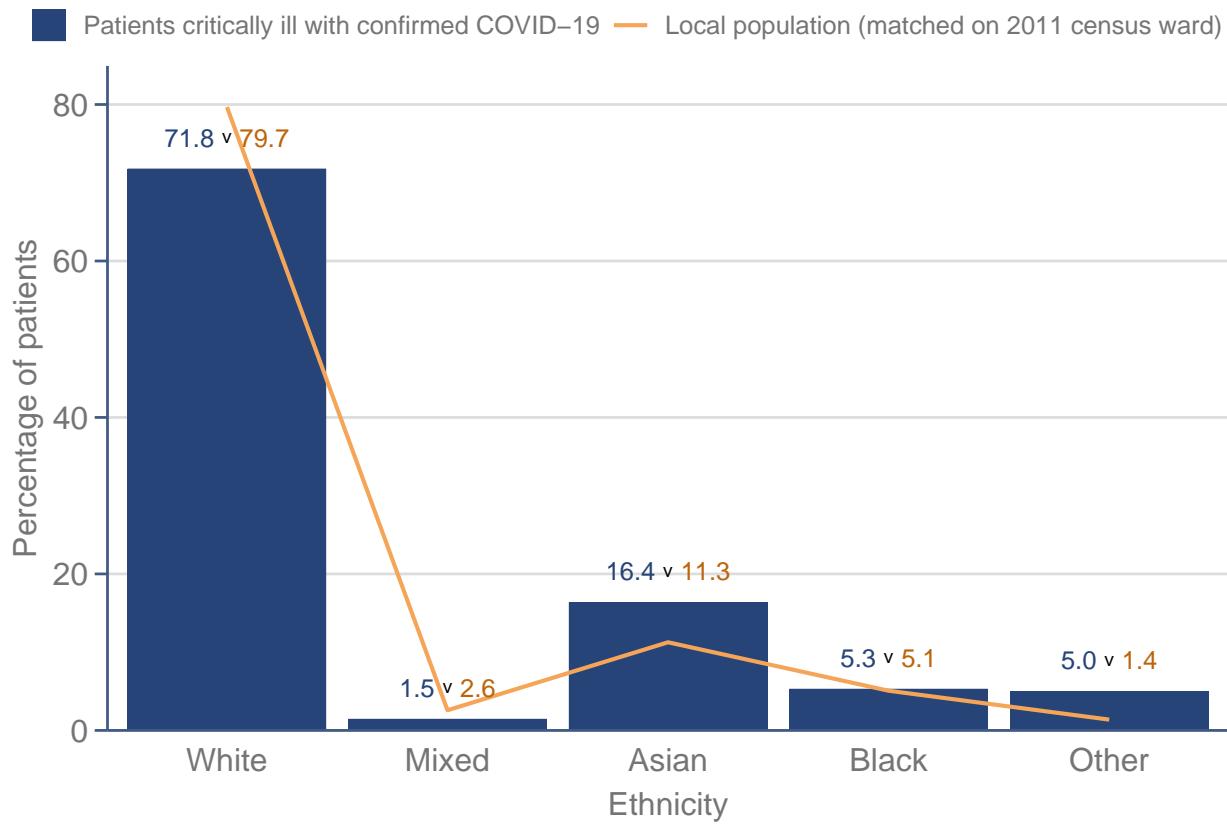


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Figure 23. Age and sex distribution

Age and sex distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date.

The distribution of ethnicity, matched on 2011 census ward for location of patients critically ill with COVID-19, is presented in Figure 24.

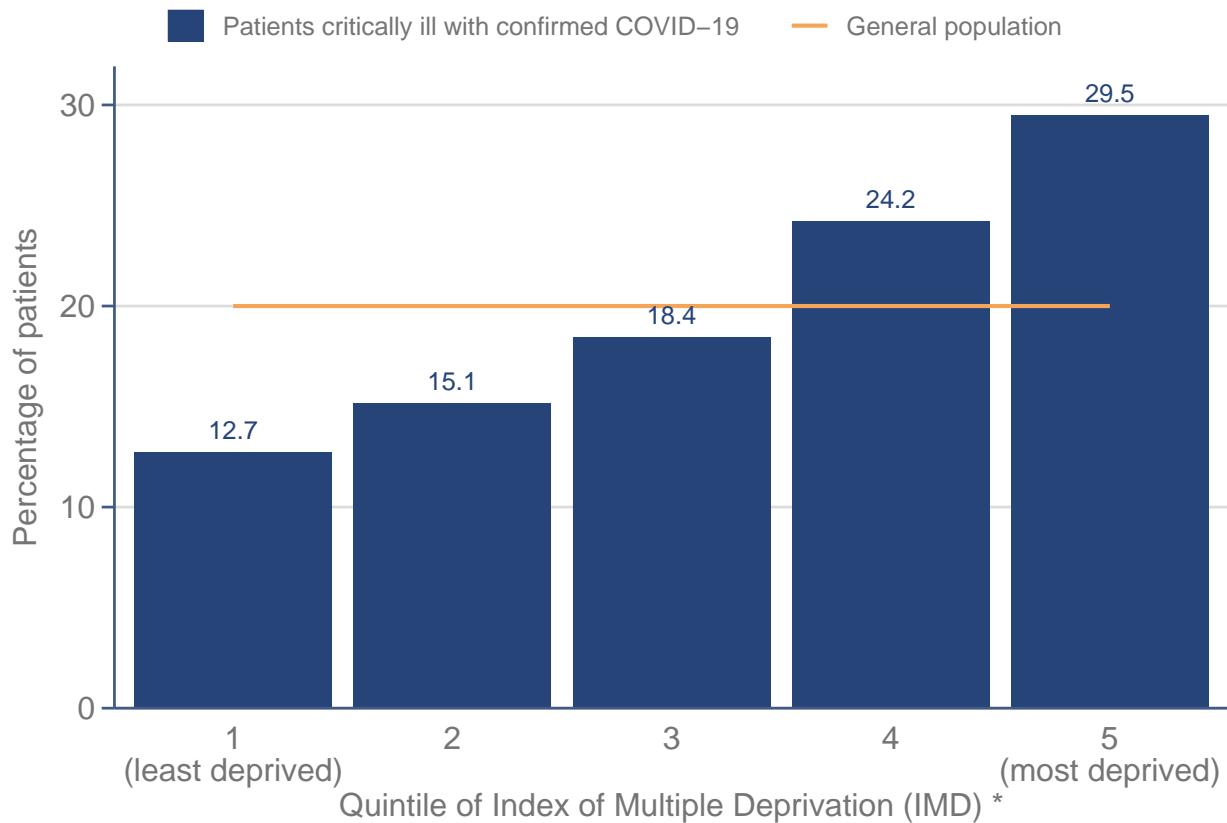


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Figure 24. Ethnicity distribution compared with the local population

Ethnicity distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date compared with the local population (linked to 2011 census ward).

The distribution of Index of Multiple Deprivation (IMD) is presented in Figure 25.



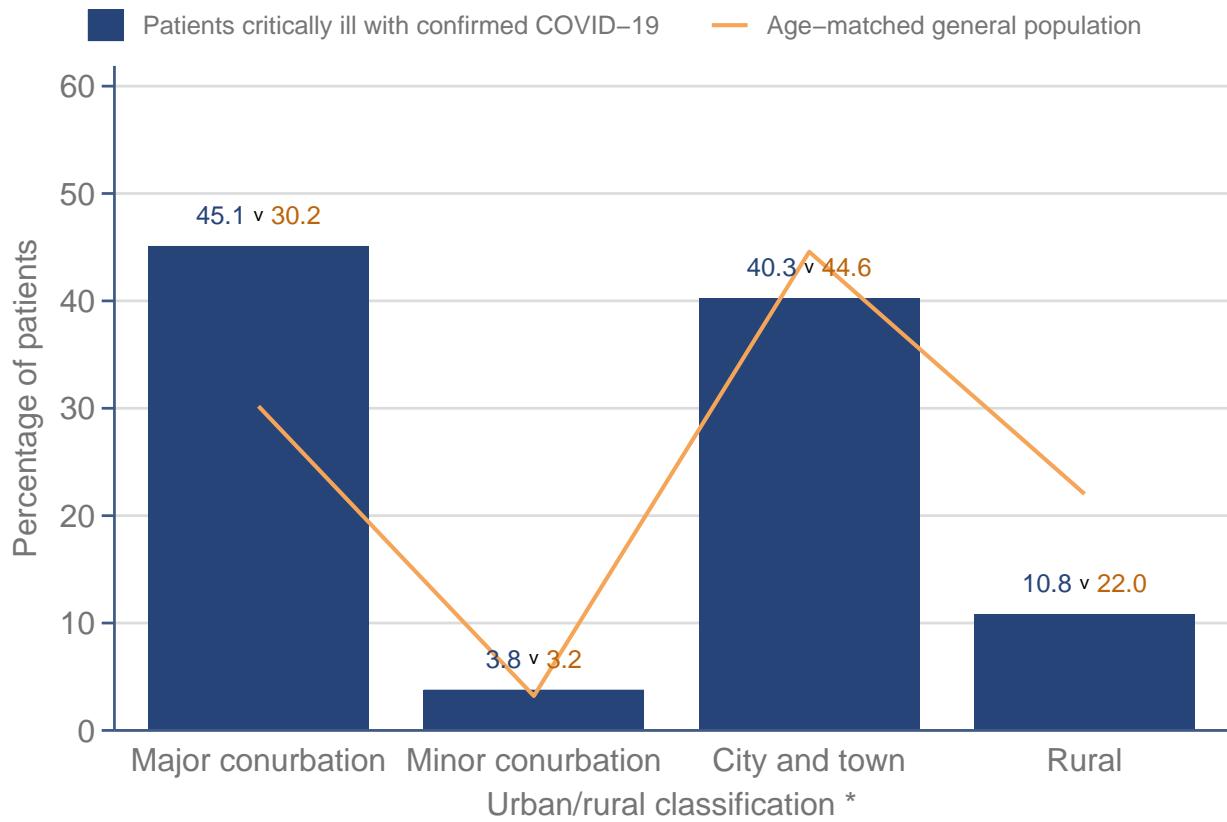
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Figure 25. Index of Multiple Deprivation * distribution compared with the general population

Index of Multiple Deprivation (IMD) * distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date compared with the general population.

* Please see Definitions on page 99.

The distribution of patients by the urban/rural classification of their usual residence, compared with the age-matched general population (Office for National Statistics 2020), is presented in Figure 26.



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Figure 26. Urban/rural * distribution compared with the age-matched general population

Urban/rural * distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date compared with the age-matched general population.

* Please see Definitions on page 99.

The distribution of body mass index (BMI), compared with an age- and sex-matched population (from the Health Survey for England 2018), is presented in Figure 27.

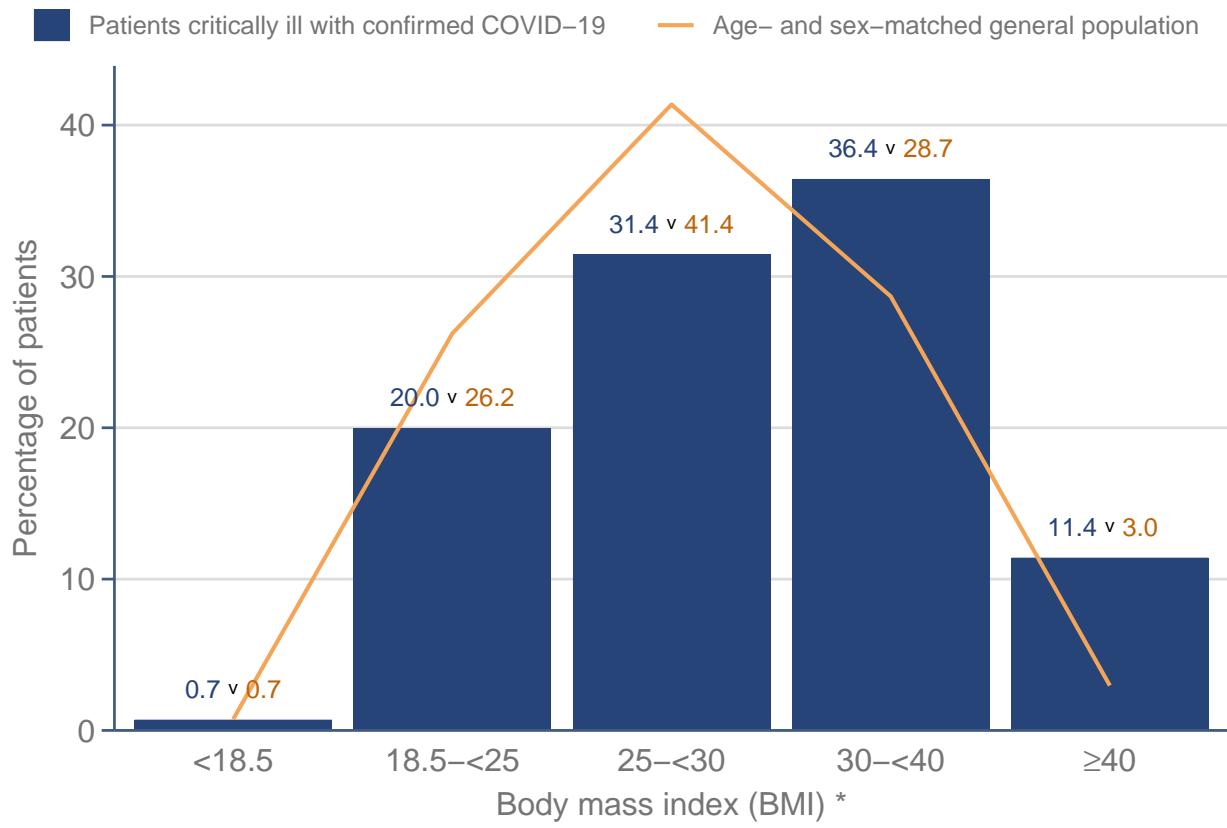


Figure 27. Body mass index * distribution compared with the age- and sex-matched general population

Body mass index (BMI) * distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 compared with the age- and sex-matched general population (Health Survey for England 2018).

* Please see Definitions on page 99.

Patient characteristics – invasively ventilated first 24 hours

Characteristics of patients critically ill with confirmed COVID-19 and receiving invasive ventilation during the first 24 hours in critical care admitted from 1 September 2020 to date are summarised in Tables 4-6 and compared with those admitted up to 31 August 2020.

Table 4. Patient characteristics: demographics (invasively ventilated first 24 hours)

Demographics	Patients with confirmed COVID-19 invasively ventilated first 24 hours *	
	Admitted from 1 Sep (N=4012)	Admitted up to 31 Aug (N=5868)
Age at admission (years) [N=4010]		
Mean (SD)	59.2 (13.2)	58.5 (12.1)
Median (IQR)	61 (52, 69)	59 (51, 67)
Sex, n (%) [N=4009]		
Female	1377 (34.3)	1608 (27.4)
Male	2632 (65.7)	4255 (72.6)
Ethnicity, n (%) [N=3751]		
White	2535 (67.6)	3468 (61.5)
Mixed	58 (1.5)	115 (2.0)
Asian	711 (19.0)	964 (17.1)
Black	229 (6.1)	651 (11.5)
Other	218 (5.8)	443 (7.9)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=3953]		
1 (least deprived)	480 (12.1)	786 (13.6)
2	573 (14.5)	925 (16.0)
3	727 (18.4)	1152 (19.9)
4	1001 (25.3)	1488 (25.7)
5 (most deprived)	1172 (29.6)	1448 (25.0)
Urban/rural classification *, n (%) [N=3824]		
Major conurbation	2020 (52.8)	3130 (54.6)
Minor conurbation	87 (2.3)	119 (2.1)
City and town	1369 (35.8)	1910 (33.3)
Rural	347 (9.1)	567 (9.9)

* Please see Definitions on page 99.

Table 5. Patient characteristics: medical history (invasively ventilated first 24 hours)

Patients with confirmed COVID-19 invasively ventilated first 24 hours *		
Medical history	Admitted from 1 Sep (N=4012)	Admitted up to 31 Aug (N=5868)
Dependency prior to admission to acute hospital, n (%) [N=3892]		
Able to live without assistance in daily activities	3449 (88.6)	5363 (92.3)
Some assistance with daily activities	434 (11.2)	440 (7.6)
Total assistance with all daily activities	9 (0.2)	10 (0.2)
Very severe comorbidities *, n (%) [N=3909]		
Cardiovascular	35 (0.9)	20 (0.3)
Respiratory	33 (0.8)	33 (0.6)
Renal	52 (1.3)	79 (1.4)
Liver	36 (0.9)	23 (0.4)
Metastatic disease	12 (0.3)	20 (0.3)
Haematological malignancy	47 (1.2)	76 (1.3)
Immunocompromised	128 (3.3)	162 (2.8)
Body mass index *, n (%) [N=3786]		
<18.5	30 (0.8)	30 (0.5)
18.5-<25	771 (20.4)	1415 (24.8)
25-<30	1205 (31.8)	1981 (34.7)
30-<40	1337 (35.3)	1853 (32.5)
≥40	443 (11.7)	424 (7.4)
CPR within previous 24h, n (%) [N=3960]		
In the community	74 (1.9)	39 (0.7)
In hospital	109 (2.8)	58 (1.0)
Prior hospital length of stay [N=4002]		
Mean (SD)	3.8 (14.5)	2.2 (5.3)
Median (IQR)	1 (0, 4)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49) [N=359]		
Currently pregnant	20 (5.6)	9 (2.4)
Recently pregnant (within 6 weeks)	27 (7.5)	22 (5.9)
Not known to be pregnant	312 (86.9)	344 (91.7)

* Please see Definitions on page 99.

Table 6. Patient characteristics: indicators of acute severity (invasively ventilated first 24 hours)

Indicators of acute severity	Patients with confirmed COVID-19 invasively ventilated first 24 hours *	
	Admitted from 1 Sep (N=4012)	Admitted up to 31 Aug (N=5868)
APACHE II Score [N=4010]		
Mean (SD)	16.5 (5.4)	15.6 (5.2)
Median (IQR)	16 (13, 19)	15 (12, 19)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=4001]	12.6 (8.7, 19.0)	15.5 (10.8, 21.6)
PaO ₂ /FiO ₂ ratio †, n (%) [N=4001]		
< 13.3 kPa (< 100 mmHg)	2135 (53.4)	2280 (39.0)
13.3-26.6 kPa (100-200 mmHg)	1375 (34.4)	2784 (47.6)
≥ 26.7 kPa (≥ 200 mmHg)	491 (12.3)	783 (13.4)
FiO ₂ †, median (IQR) [N=4001]	0.65 (0.45, 0.90)	0.55 (0.40, 0.75)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Patient characteristics – advanced respiratory support

Characteristics of patients critically ill with confirmed COVID-19 that received advanced respiratory support at any time during their critical care stay admitted from 1 September 2020 to date are summarised in Tables 7-9 and compared with those admitted up to 31 August 2020.

Table 7. Patient characteristics: demographics (any advanced respiratory support)

Demographics	Patients with confirmed COVID-19 and advanced respiratory support *	
	Admitted from 1 Sep (N=5651)	Admitted up to 31 Aug (N=7877)
Age at admission (years) [N=5647]		
Mean (SD)	60.7 (12.7)	58.6 (11.9)
Median (IQR)	62 (53, 70)	60 (51, 67)
Sex, n (%) [N=5647]		
Female	1803 (31.9)	2203 (28.0)
Male	3844 (68.1)	5669 (72.0)
Ethnicity, n (%) [N=5370]		
White	3836 (71.4)	4751 (62.6)
Mixed	77 (1.4)	148 (2.0)
Asian	984 (18.3)	1296 (17.1)
Black	236 (4.4)	824 (10.9)
Other	237 (4.4)	565 (7.4)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=5582]		
1 (least deprived)	669 (12.0)	1063 (13.7)
2	830 (14.9)	1229 (15.8)
3	985 (17.6)	1552 (19.9)
4	1334 (23.9)	1942 (24.9)
5 (most deprived)	1764 (31.6)	1998 (25.7)
Urban/rural classification *, n (%) [N=5451]		
Major conurbation	2530 (46.4)	4021 (52.2)
Minor conurbation	204 (3.7)	205 (2.7)
City and town	2124 (39.0)	2675 (34.7)
Rural	592 (10.9)	802 (10.4)

* Please see Definitions on page 99.

Table 8. Patient characteristics: medical history (any advanced respiratory support)

Medical history	Patients with confirmed COVID-19 and advanced respiratory support *	
	Admitted from 1 Sep (N=5651)	Admitted up to 31 Aug (N=7877)
Dependency prior to admission to acute hospital, n (%) [N=5443]		
Able to live without assistance in daily activities	4829 (88.7)	7180 (92.0)
Some assistance with daily activities	601 (11.0)	613 (7.9)
Total assistance with all daily activities	13 (0.2)	11 (0.1)
Very severe comorbidities *, n (%) [N=5484]		
Cardiovascular	40 (0.7)	26 (0.3)
Respiratory	55 (1.0)	48 (0.6)
Renal	95 (1.7)	94 (1.2)
Liver	50 (0.9)	31 (0.4)
Metastatic disease	25 (0.5)	24 (0.3)
Haematological malignancy	101 (1.8)	129 (1.7)
Immunocompromised	210 (3.8)	234 (3.0)
Body mass index *, n (%) [N=5280]		
<18.5	29 (0.5)	41 (0.5)
18.5-<25	1073 (20.3)	1886 (24.8)
25-<30	1712 (32.4)	2635 (34.7)
30-<40	1898 (35.9)	2469 (32.5)
≥40	568 (10.8)	567 (7.5)
CPR within previous 24h, n (%) [N=5576]		
In the community	84 (1.5)	45 (0.6)
In hospital	120 (2.2)	70 (0.9)
Prior hospital length of stay [N=5631]		
Mean (SD)	3.5 (11.7)	2.2 (5.3)
Median (IQR)	1 (0, 4)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49) [N=426]		
Currently pregnant	22 (5.2)	15 (2.9)
Recently pregnant (within 6 weeks)	27 (6.3)	27 (5.2)
Not known to be pregnant	377 (88.5)	481 (92.0)

* Please see Definitions on page 99.

Table 9. Patient characteristics: indicators of acute severity (any advanced respiratory support)

Indicators of acute severity	Patients with confirmed COVID-19 and advanced respiratory support *	
	Admitted from 1 Sep (N=5651)	Admitted up to 31 Aug (N=7877)
APACHE II Score [N=5409]		
Mean (SD)	15.9 (5.4)	15.4 (5.1)
Median (IQR)	15 (12, 19)	15 (12, 18)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=5242]	12.2 (8.9, 17.2)	15.0 (10.8, 21.0)
PaO ₂ /FiO ₂ ratio †, n (%) [N=5242]		
< 13.3 kPa (< 100 mmHg)	3046 (58.1)	3100 (40.3)
13.3-26.6 kPa (100-200 mmHg)	1676 (32.0)	3626 (47.2)
≥ 26.7 kPa (≥ 200 mmHg)	520 (9.9)	964 (12.5)
FiO ₂ †, median (IQR) [N=5242]	0.65 (0.50, 0.85)	0.55 (0.40, 0.70)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Patient characteristics – basic respiratory support only

Characteristics of patients critically ill with confirmed COVID-19 that received basic respiratory support only during their critical care stay admitted from 1 September 2020 to date are summarised in Tables 10-12 and compared with those admitted up to 31 August 2020.

Table 10. Patient characteristics: demographics (basic respiratory support only)

Demographics	Patients with confirmed COVID-19 and basic respiratory support only *	
	Admitted from 1 Sep (N=6348)	Admitted up to 31 Aug (N=2793)
Age at admission (years) [N=6346]		
Mean (SD)	59.7 (14.5)	59.4 (14.3)
Median (IQR)	61 (50, 71)	60 (50, 70)
Sex, n (%) [N=6345]		
Female	2215 (34.9)	960 (34.4)
Male	4130 (65.1)	1832 (65.6)
Ethnicity, n (%) [N=6007]		
White	4552 (75.8)	2019 (74.9)
Mixed	89 (1.5)	41 (1.5)
Asian	840 (14.0)	351 (13.0)
Black	278 (4.6)	164 (6.1)
Other	248 (4.1)	120 (4.5)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=6261]		
1 (least deprived)	835 (13.3)	441 (16.1)
2	979 (15.6)	465 (16.9)
3	1139 (18.2)	489 (17.8)
4	1463 (23.4)	602 (21.9)
5 (most deprived)	1845 (29.5)	749 (27.3)
Urban/rural classification *, n (%) [N=6248]		
Major conurbation	2489 (39.8)	1049 (38.2)
Minor conurbation	309 (4.9)	128 (4.7)
City and town	2734 (43.8)	1242 (45.2)
Rural	714 (11.4)	325 (11.8)

* Please see Definitions on page 99.

Table 11. Patient characteristics: medical history (basic respiratory support only)

Patients with confirmed COVID-19 and basic respiratory support only *		
Medical history	Admitted from 1 Sep (N=6348)	Admitted up to 31 Aug (N=2793)
Dependency prior to admission to acute hospital, n (%) [N=6104]		
Able to live without assistance in daily activities	5268 (86.3)	2297 (83.0)
Some assistance with daily activities	809 (13.3)	447 (16.1)
Total assistance with all daily activities	27 (0.4)	24 (0.9)
Very severe comorbidities *, n (%) [N=6176]		
Cardiovascular	58 (0.9)	39 (1.4)
Respiratory	86 (1.4)	72 (2.6)
Renal	110 (1.8)	76 (2.7)
Liver	21 (0.3)	18 (0.7)
Metastatic disease	56 (0.9)	26 (0.9)
Haematological malignancy	95 (1.5)	78 (2.8)
Immunocompromised	214 (3.5)	137 (4.9)
Body mass index *, n (%) [N=5794]		
<18.5	46 (0.8)	28 (1.1)
18.5-<25	1069 (18.5)	668 (26.3)
25-<30	1832 (31.6)	857 (33.8)
30-<40	2138 (36.9)	736 (29.0)
≥40	709 (12.2)	250 (9.8)
CPR within previous 24h, n (%) [N=6241]		
In the community	11 (0.2)	5 (0.2)
In hospital	6 (0.1)	3 (0.1)
Prior hospital length of stay [N=6307]		
Mean (SD)	2.8 (9.0)	3.0 (7.3)
Median (IQR)	1 (0, 3)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49) [N=578]		
Currently pregnant	38 (6.6)	11 (4.6)
Recently pregnant (within 6 weeks)	28 (4.8)	11 (4.6)
Not known to be pregnant	512 (88.6)	217 (90.8)

* Please see Definitions on page 99.

Table 12. Patient characteristics: indicators of acute severity (basic respiratory support only)

Indicators of acute severity	Patients with confirmed COVID-19 and basic respiratory support only *	
	Admitted from 1 Sep (N=6348)	Admitted up to 31 Aug (N=2793)
APACHE II Score [N=6150]		
Mean (SD)	13.5 (5.1)	14.2 (5.5)
Median (IQR)	13 (10, 16)	14 (10, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=5552]	14.2 (10.9, 19.3)	17.5 (12.5, 24.0)
PaO ₂ /FiO ₂ ratio †, n (%) [N=5552]		
< 13.3 kPa (< 100 mmHg)	2403 (43.3)	703 (29.1)
13.3-26.6 kPa (100-200 mmHg)	2630 (47.4)	1273 (52.7)
≥ 26.7 kPa (≥ 200 mmHg)	519 (9.3)	438 (18.1)
FiO ₂ †, median (IQR) [N=5552]	0.60 (0.40, 0.70)	0.50 (0.35, 0.60)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Patient characteristics – renal support

Characteristics of patients critically ill with confirmed COVID-19 that received renal support at any time during their critical care stay admitted from 1 September 2020 to date are summarised in Tables 13-15 and compared with those admitted up to 31 August 2020.

Table 13. Patient characteristics: demographics (any renal support)

Demographics	Patients with confirmed COVID-19 and renal support *	
	Admitted from 1 Sep (N=1733)	Admitted up to 31 Aug (N=2928)
Age at admission (years) [N=1733]		
Mean (SD)	61.9 (11.9)	59.1 (11.0)
Median (IQR)	63 (55, 71)	60 (52, 67)
Sex, n (%) [N=1732]		
Female	471 (27.2)	671 (22.9)
Male	1261 (72.8)	2255 (77.1)
Ethnicity, n (%) [N=1644]		
White	1105 (67.2)	1663 (59.0)
Mixed	20 (1.2)	49 (1.7)
Asian	338 (20.6)	482 (17.1)
Black	102 (6.2)	419 (14.9)
Other	79 (4.8)	206 (7.3)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=1713]		
1 (least deprived)	194 (11.3)	368 (12.7)
2	255 (14.9)	442 (15.3)
3	315 (18.4)	609 (21.0)
4	454 (26.5)	732 (25.3)
5 (most deprived)	495 (28.9)	747 (25.8)
Urban/rural classification *, n (%) [N=1675]		
Major conurbation	827 (49.4)	1575 (55.0)
Minor conurbation	50 (3.0)	61 (2.1)
City and town	624 (37.3)	955 (33.3)
Rural	174 (10.4)	274 (9.6)

* Please see Definitions on page 99.

Table 14. Patient characteristics: medical history (any renal support)

Medical history	Patients with confirmed COVID-19 and renal support *	
	Admitted from 1 Sep (N=1733)	Admitted up to 31 Aug (N=2928)
Dependency prior to admission to acute hospital, n (%) [N=1684]		
Able to live without assistance in daily activities	1430 (84.9)	2669 (91.7)
Some assistance with daily activities	251 (14.9)	236 (8.1)
Total assistance with all daily activities	3 (0.2)	6 (0.2)
Very severe comorbidities *, n (%) [N=1693]		
Cardiovascular	19 (1.1)	15 (0.5)
Respiratory	17 (1.0)	17 (0.6)
Renal	191 (11.3)	150 (5.2)
Liver	17 (1.0)	6 (0.2)
Metastatic disease	15 (0.9)	13 (0.4)
Haematological malignancy	38 (2.2)	52 (1.8)
Immunocompromised	83 (4.9)	93 (3.2)
Body mass index *, n (%) [N=1630]		
<18.5	7 (0.4)	16 (0.6)
18.5-<25	351 (21.5)	653 (23.0)
25-<30	568 (34.8)	969 (34.1)
30-<40	559 (34.3)	985 (34.6)
≥40	145 (8.9)	222 (7.8)
CPR within previous 24h, n (%) [N=1721]		
In the community	18 (1.0)	10 (0.3)
In hospital	36 (2.1)	18 (0.6)
Prior hospital length of stay [N=1731]		
Mean (SD)	4.1 (11.2)	2.3 (5.3)
Median (IQR)	1 (0, 5)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49) [N=91]		
Currently pregnant	1 (1.1)	3 (1.9)
Recently pregnant (within 6 weeks)	3 (3.3)	4 (2.5)
Not known to be pregnant	87 (95.6)	152 (95.6)

* Please see Definitions on page 99.

Table 15. Patient characteristics: indicators of acute severity (any renal support)

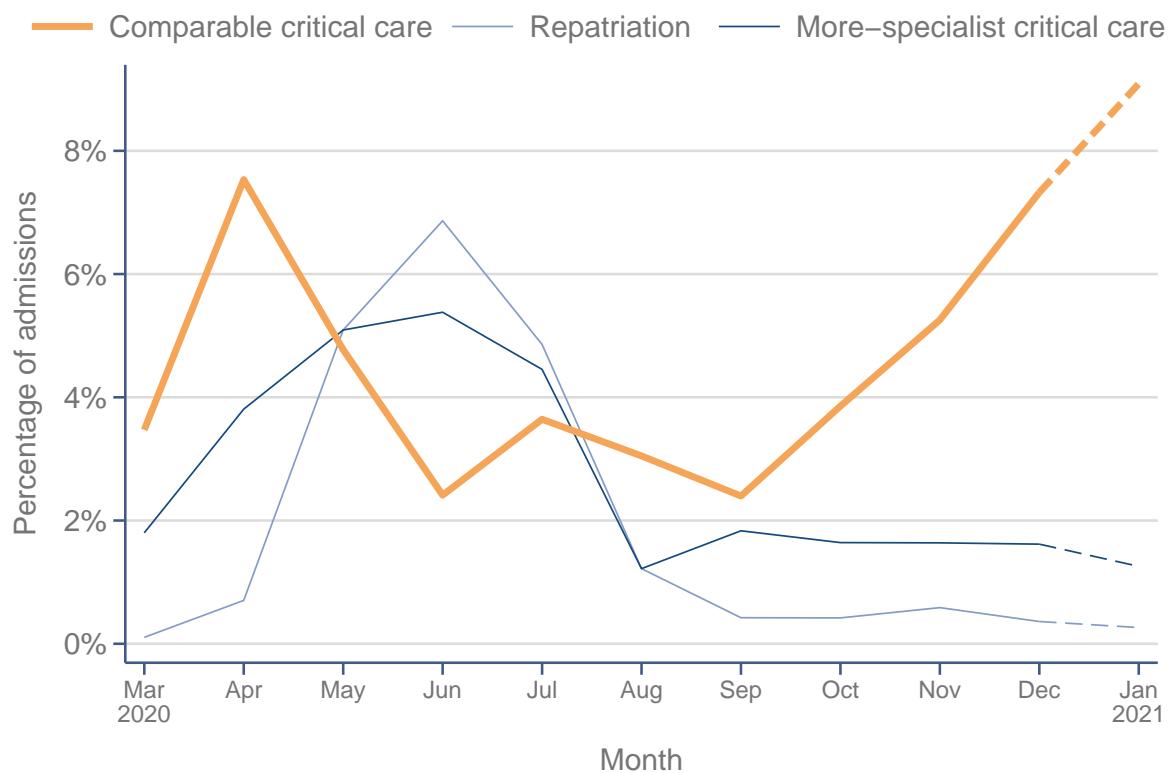
Indicators of acute severity	Patients with confirmed COVID-19 and renal support *	
	Admitted from 1 Sep (N=1733)	Admitted up to 31 Aug (N=2928)
Invasively ventilated within first 24h *, n (%) [N=1668]	733 (43.9)	2121 (73.0)
APACHE II Score [N=1682]		
Mean (SD)	18.3 (6.0)	17.0 (5.6)
Median (IQR)	18 (14, 22)	16 (13, 20)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=1601]	12.4 (9.1, 18.1)	14.4 (10.5, 20.0)
PaO ₂ /FiO ₂ ratio †, n (%) [N=1601]		
< 13.3 kPa (< 100 mmHg)	887 (55.4)	1251 (43.9)
13.3-26.6 kPa (100-200 mmHg)	534 (33.4)	1291 (45.3)
≥ 26.7 kPa (≥ 200 mmHg)	180 (11.2)	308 (10.8)
FiO ₂ †, median (IQR) [N=1601]	0.60 (0.45, 0.80)	0.60 (0.44, 0.75)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Inter-hospital critical care transfers

From 1 September to date, there have been 1745 inter-hospital critical care transfers of 1607 patients with confirmed COVID-19, of which 1372 transfers of 1314 patients were classified as being for comparable critical care. The percentage of transfers by month is shown in Figure 28, and the transfers for comparable critical care by region are shown in Figure 29.



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Figure 28. Inter-hospital critical care transfers

Percentage of critical care admissions with confirmed COVID-19 that were transfers between critical care units in different hospitals by month of admission and reason for transfer *.

* Please see Definitions on page 99. Dashed line indicates incomplete month.

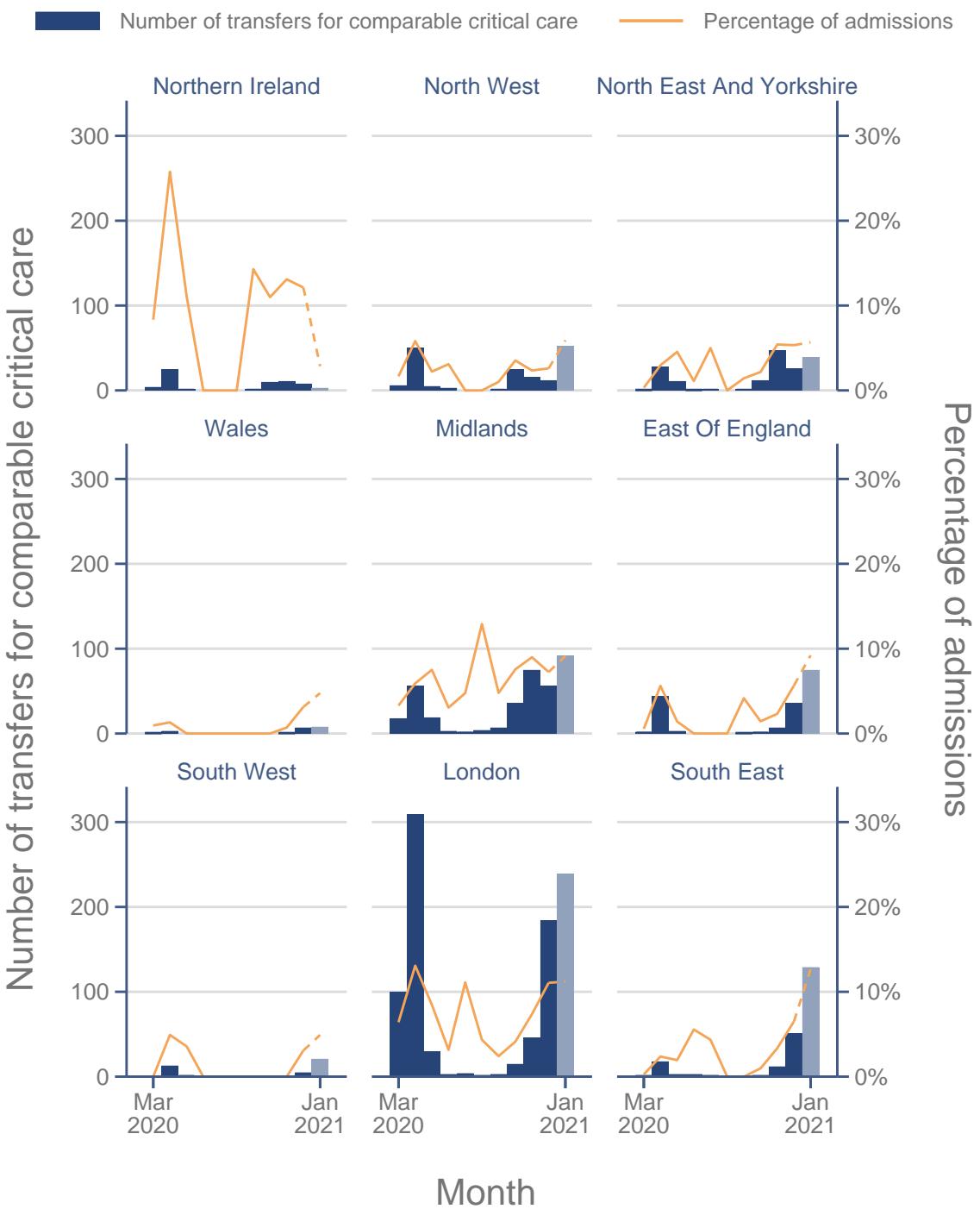
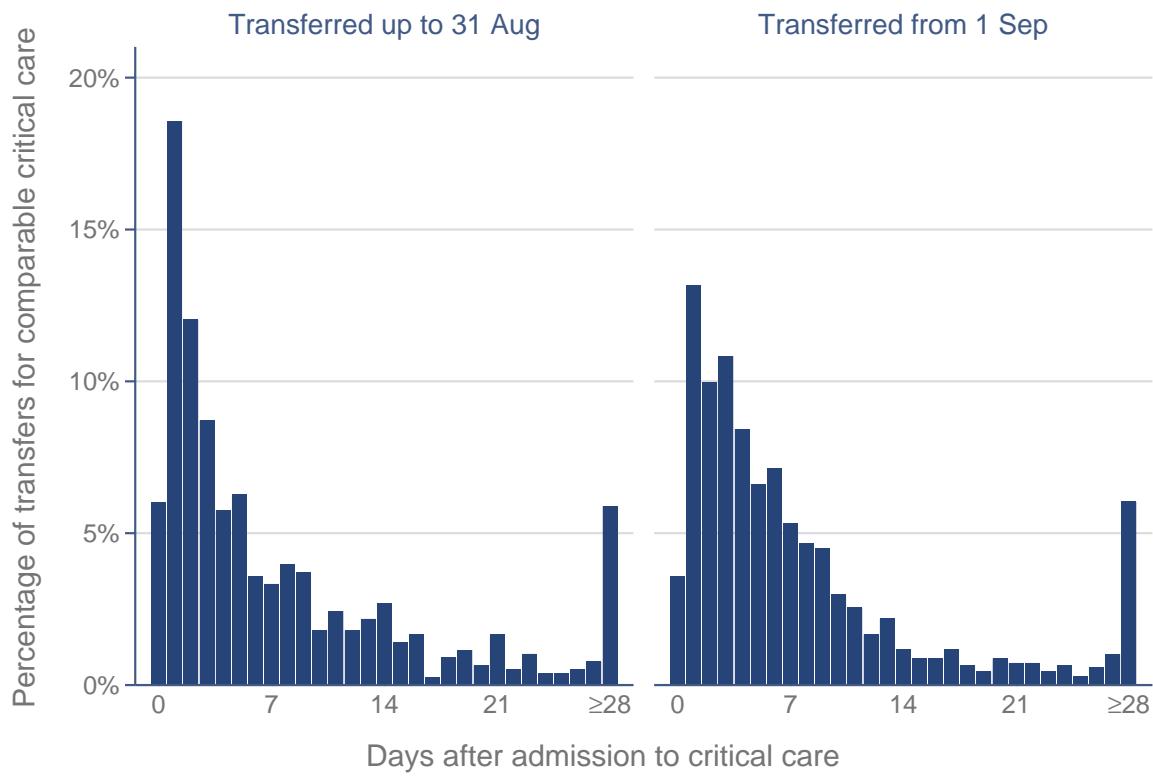


Figure 29. Inter-hospital critical care transfers for comparable critical care by region

Number and percentage of critical care admissions with confirmed COVID-19 that were transfers between critical care units in different hospitals for comparable critical care * by month of admission.

* Please see Definitions on page 99. Dashed line and shading indicates incomplete month.

The distribution of the number of days from critical care admission to transfer for comparable critical care for patients critically ill with confirmed COVID-19 is shown in Figure 30.



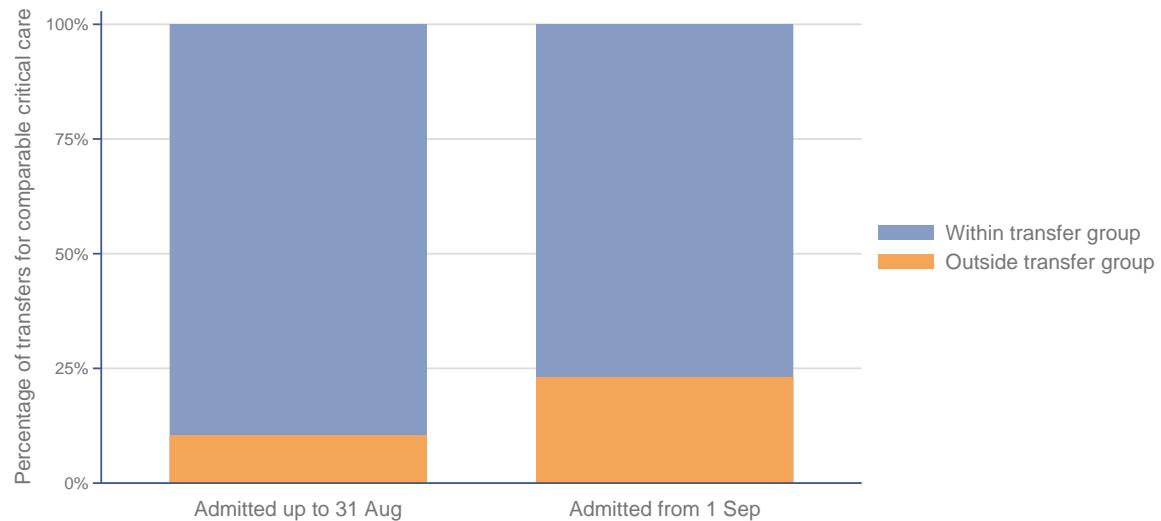
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Figure 30. Timing of inter-hospital critical care transfers for comparable critical care

Percentage of patients critically ill with confirmed COVID-19 transferred for comparable critical care
* by number of days from critical care admission to first transfer.

* Please see Definitions on page 99.

The percentage of transfers for comparable critical care that were to a hospital within or outside of the critical care unit's local transfer group is shown overall in Figure 31 and by month of transfer in Figure 32.

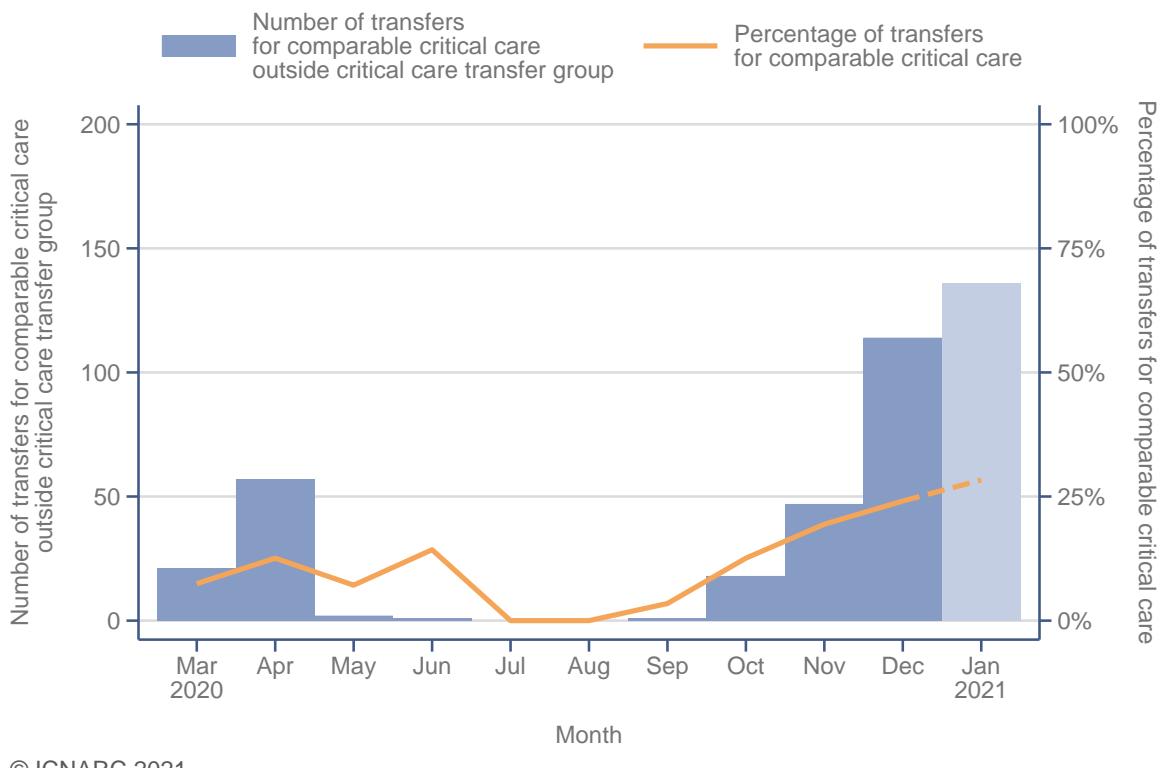


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Figure 31. Inter-hospital critical care transfers for comparable critical care within and outside transfer group *

Percentage of transfers for comparable critical care * of patients critically ill with confirmed COVID-19 by whether the hospital was within or outside the local transfer group.

* Please see Definitions on page 99.



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Figure 32. Inter-hospital critical care transfers for comparable critical care outside transfer group * by month

Number and percentage of transfers for comparable critical care * of patients critically ill with confirmed COVID-19 that were outside the local transfer group by month of transfer.

* Please see Definitions on page 99. Dashed line and shading indicates incomplete month.

Characteristics of patients critically ill with confirmed COVID-19 that were transferred to a critical care unit in another hospital for comparable critical care admitted from 1 September 2020 to date are summarised in Tables 16-18 and compared with those admitted up to 31 August 2020.

Table 16. Patient characteristics: demographics (any transfer for comparable critical care)

Demographics	Patients with confirmed COVID-19 transferred for comparable critical care	
	Admitted from 1 Sep (N=1314)	Admitted up to 31 Aug (N=747)
Age at admission (years) [N=1314]		
Mean (SD)	59.7 (12.1)	57.8 (11.2)
Median (IQR)	61 (53, 68)	59 (51, 66)
Sex, n (%) [N=1309]		
Female	418 (31.9)	175 (23.5)
Male	891 (68.1)	570 (76.5)
Ethnicity, n (%) [N=1272]		
White	804 (63.2)	359 (49.0)
Mixed	16 (1.3)	18 (2.5)
Asian	267 (21.0)	196 (26.8)
Black	97 (7.6)	86 (11.7)
Other	88 (6.9)	73 (10.0)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=1301]		
1 (least deprived)	153 (11.8)	93 (12.5)
2	199 (15.3)	92 (12.4)
3	241 (18.5)	150 (20.2)
4	312 (24.0)	217 (29.2)
5 (most deprived)	396 (30.4)	190 (25.6)
Urban/rural classification *, n (%) [N=1267]		
Major conurbation	749 (59.1)	530 (74.0)
Minor conurbation	33 (2.6)	27 (3.8)
City and town	394 (31.1)	126 (17.6)
Rural	91 (7.2)	33 (4.6)

* Please see Definitions on page 99.

Table 17. Patient characteristics: medical history (any transfer for comparable critical care)

Patients with confirmed COVID-19 transferred for comparable critical care		
Medical history	Admitted from 1 Sep (N=1314)	Admitted up to 31 Aug (N=747)
Dependency prior to admission to acute hospital, n (%) [N=1226]		
Able to live without assistance in daily activities	1125 (91.8)	701 (95.4)
Some assistance with daily activities	97 (7.9)	32 (4.4)
Total assistance with all daily activities	4 (0.3)	2 (0.3)
Very severe comorbidities *, n (%) [N=1260]		
Cardiovascular	2 (0.2)	0 (0.0)
Respiratory	4 (0.3)	4 (0.5)
Renal	9 (0.7)	4 (0.5)
Liver	4 (0.3)	0 (0.0)
Metastatic disease	0 (0.0)	1 (0.1)
Haematological malignancy	12 (1.0)	5 (0.7)
Immunocompromised	26 (2.1)	14 (1.9)
Body mass index *, n (%) [N=1152]		
<18.5	9 (0.8)	5 (0.7)
18.5-<25	208 (18.1)	171 (23.4)
25-<30	389 (33.8)	288 (39.4)
30-<40	441 (38.3)	232 (31.7)
≥40	105 (9.1)	35 (4.8)
CPR within previous 24h, n (%) [N=1285]		
In the community	5 (0.4)	0 (0.0)
In hospital	8 (0.6)	6 (0.8)
Prior hospital length of stay [N=1304]		
Mean (SD)	2.5 (4.3)	1.9 (3.6)
Median (IQR)	1 (0, 3)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49) [N=93]		
Currently pregnant	4 (4.3)	1 (3.1)
Recently pregnant (within 6 weeks)	3 (3.2)	1 (3.1)
Not known to be pregnant	86 (92.5)	30 (93.8)

* Please see Definitions on page 99.

Table 18. Patient characteristics: indicators of acute severity (any transfer for comparable critical care)

Patients with confirmed COVID-19 transferred for comparable critical care		
Indicators of acute severity	Admitted from 1 Sep (N=1314)	Admitted up to 31 Aug (N=747)
Invasively ventilated within first 24h *, n (%) [N=1157]	665 (57.5)	598 (81.8)
APACHE II Score [N=1177]		
Mean (SD)	14.8 (4.8)	14.4 (4.9)
Median (IQR)	14 (12, 17)	14 (11, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=1124]	12.2 (9.2, 16.0)	15.1 (10.9, 19.8)
PaO ₂ /FiO ₂ ratio †, n (%) [N=1124]		
< 13.3 kPa (< 100 mmHg)	658 (58.5)	282 (38.8)
13.3-26.6 kPa (100-200 mmHg)	398 (35.4)	375 (51.6)
≥ 26.7 kPa (≥ 200 mmHg)	68 (6.0)	70 (9.6)
FiO ₂ †, median (IQR) [N=1124]	0.65 (0.50, 0.80)	0.60 (0.45, 0.75)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Outcomes, duration of critical care and organ support

Critical care outcomes have been received for 12,703 (of 17,015) patients. Of these, 4868 have died and 7835 have been discharged from critical care (Figures 33 and 34). The remaining 4312 were last reported to still be receiving critical care.

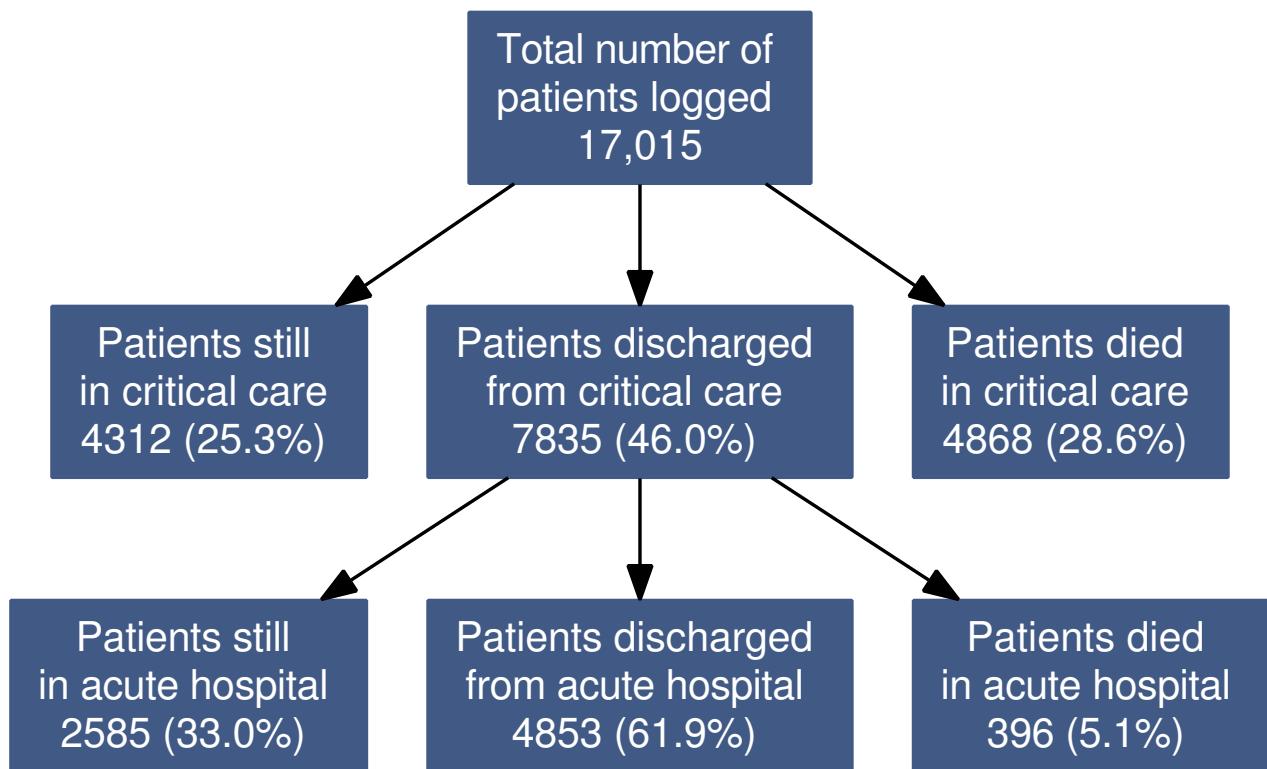


Figure 33. Critical care and acute hospital outcomes

Critical care and acute hospital outcomes for patients admitted from 1 September 2020 to date.

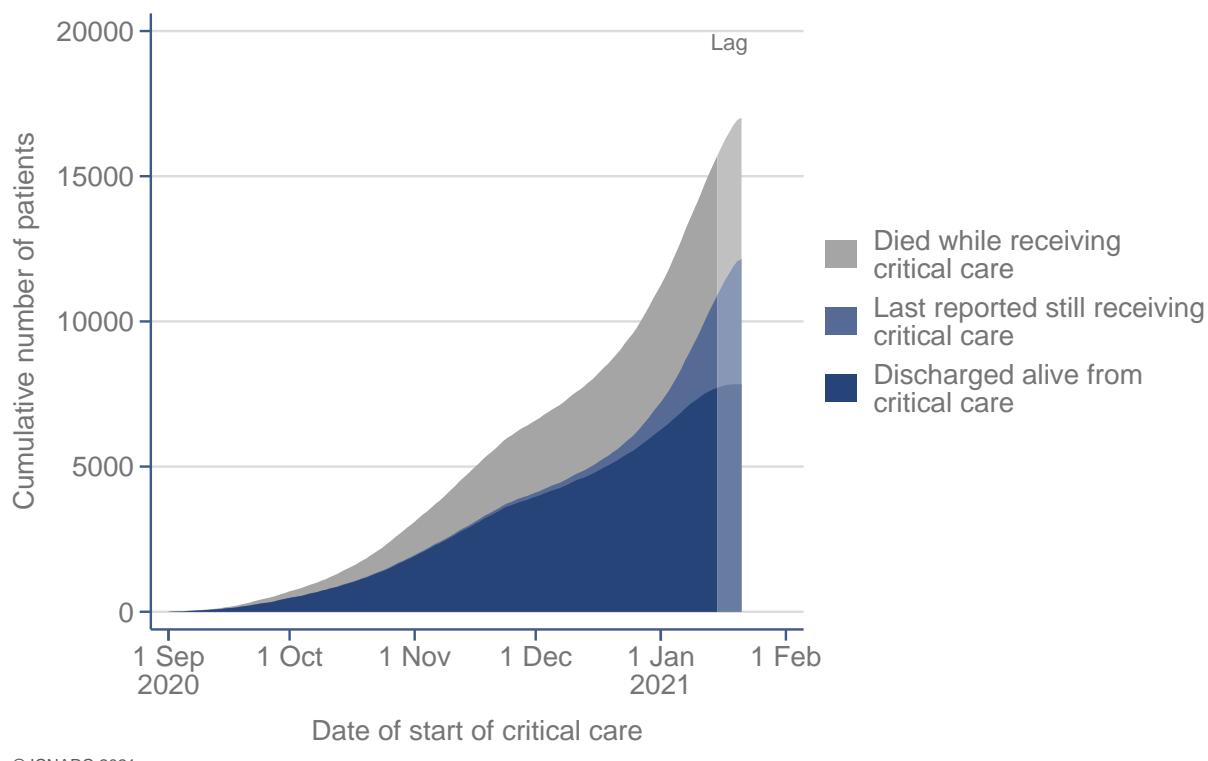


Figure 34. Cumulative outcomes *

Cumulative outcomes for patients admitted from 1 September 2020 to date by date of start of critical care.

* Please note that patients whose outcome data have not been received are assumed to remain in critical care as of 21 January 2021.

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date for whom outcomes have been received are summarised in Table 19 and compared with those admitted up to 31 August 2020.

Table 19. Critical care outcome, duration of critical care and organ support

Critical care outcome	Patients with confirmed COVID-19 and outcome received	
	Admitted from 1 Sep (N=17,015)	Admitted up to 31 Aug (N=10,938)
Outcome at end of critical care, n (%)		
Discharged	7835 (46.0)	6623 (60.6)
Died	4868 (28.6)	4312 (39.4)
Still receiving critical care	4312 (25.3)	3 (0.0)
Duration of critical care	(N=12,672)	(N=10,929)
Duration of critical care (days) †, median (IQR)		
Survivors	6 (3, 10)	12 (5, 28)
Non-survivors	10 (5, 16)	9 (5, 16)
Organ support (Critical Care Minimum Dataset) *	(N=12,546)	(N=10,934)
Receipt of organ support, at any point, n (%)		
Advanced respiratory support	5651 (45.0)	7877 (72.0)
Basic respiratory support only	6348 (50.6)	2793 (25.5)
No respiratory support	547 (4.4)	264 (2.4)
Advanced cardiovascular support	2345 (18.7)	3366 (30.8)
Basic cardiovascular support only	9397 (74.9)	7107 (65.0)
No cardiovascular support	804 (6.4)	461 (4.2)
Renal support	1733 (13.8)	2928 (26.8)
Liver support	74 (0.6)	114 (1.0)
Neurological support	725 (5.8)	996 (9.1)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	10 (5, 17)	14 (7, 24)
Total (advanced + basic) respiratory support	7 (4, 14)	11 (5, 22)
Advanced cardiovascular support	2 (1, 5)	3 (2, 6)
Total (advanced + basic) cardiovascular support	7 (4, 14)	11 (5, 22)
Renal support	5 (2, 10)	8 (3, 15)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 99.

† Duration of critical care is the total over all critical care admissions for the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

Outcomes, duration of critical care and organ support – invasively ventilated first 24 hours

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 and receiving invasive ventilation during the first 24 hours in critical care admitted from 1 September 2020 to date for whom outcomes have been received are summarised in Table 20 and compared with those admitted up to 31 August 2020.

Table 20. Critical care outcome, duration of critical care and organ support (invasively ventilated first 24 hours)

Patients with confirmed COVID-19 invasively ventilated first 24 hours *		
Critical care outcome	Admitted from 1 Sep (N=4012)	Admitted up to 31 Aug (N=5868)
Outcome at end of critical care, n (%)		
Discharged	1250 (31.2)	3131 (53.4)
Died	1611 (40.2)	2735 (46.6)
Still receiving critical care	1151 (28.7)	2 (0.0)
Duration of critical care	(N=2857)	(N=5863)
Duration of critical care (days) †, median (IQR)		
Survivors	12 (6, 23)	22 (12, 35)
Non-survivors	10 (4, 16)	10 (5, 17)
Organ support (Critical Care Minimum Dataset) *	(N=2826)	(N=5865)
Receipt of organ support, at any point, n (%)		
Advanced cardiovascular support	1136 (40.2)	2392 (40.8)
Basic cardiovascular support only	1685 (59.6)	3460 (59.0)
No cardiovascular support	5 (0.2)	13 (0.2)
Renal support	733 (25.9)	2121 (36.2)
Liver support	41 (1.5)	80 (1.4)
Neurological support	384 (13.6)	719 (12.3)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	10 (4, 17)	14 (7, 24)
Total (advanced + basic) respiratory support	11 (6, 18)	15 (8, 26)
Advanced cardiovascular support	2 (1, 5)	3 (2, 6)
Total (advanced + basic) cardiovascular support	11 (6, 18)	15 (8, 26)
Renal support	5 (2, 11)	8 (4, 16)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 99.

† Duration of critical care is the total over all critical care admissions for the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

Outcomes, duration of critical care and organ support – advanced respiratory support

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 that received advanced respiratory support at any time during their critical care stay admitted from 1 September 2020 to date for whom outcomes have been received are summarised in Table 21 and compared with those admitted up to 31 August 2020.

Table 21. Critical care outcome, duration of critical care and organ support (any advanced respiratory support)

Patients with confirmed COVID-19 and advanced respiratory support *		
Critical care outcome	Admitted from 1 Sep (N=9021 ‡)	Admitted up to 31 Aug (N=7877)
Outcome at end of critical care, n (%)		
Discharged	2113 (23.4)	4121 (52.3)
Died	3538 (39.2)	3756 (47.7)
Still receiving critical care ‡	3370 (37.4)	0 (0.0)
Duration of critical care	(N=5640)	(N=7872)
Duration of critical care (days) †, median (IQR)		
Survivors	13 (7, 27)	23 (12, 37)
Non-survivors	12 (7, 18)	10 (6, 17)
Organ support (Critical Care Minimum Dataset) *	(N=5651)	(N=7877)
Receipt of organ support, at any point, n (%)		
Advanced cardiovascular support	2206 (39.0)	3296 (41.8)
Basic cardiovascular support only	3433 (60.8)	4565 (58.0)
No cardiovascular support	12 (0.2)	16 (0.2)
Renal support	1495 (26.5)	2778 (35.3)
Liver support	67 (1.2)	110 (1.4)
Neurological support	673 (11.9)	970 (12.3)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	10 (5, 17)	14 (7, 24)
Total (advanced + basic) respiratory support	13 (7, 20)	16 (8, 27)
Advanced cardiovascular support	2 (1, 5)	3 (2, 6)
Total (advanced + basic) cardiovascular support	13 (7, 20)	16 (9, 27)
Renal support	5 (3, 11)	8 (4, 15)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 99.

† Duration of critical care is the total over all critical care admissions for the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

‡ Numbers of patients still receiving critical care estimated based on observed, incomplete organ support data received.

Outcomes, duration of critical care and organ support – basic respiratory support only

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 that received basic respiratory support only during their critical care stay admitted from 1 September 2020 to date for whom outcomes have been received are summarised in Table 22 and compared with those admitted up to 31 August 2020.

Table 22. Critical care outcome, duration of critical care and organ support (basic respiratory support only)

Patients with confirmed COVID-19 and basic respiratory support only *		
Critical care outcome	Admitted from 1 Sep (N=7447 ‡)	Admitted up to 31 Aug (N=2793)
Outcome at end of critical care, n (%)		
Discharged	5162 (69.3)	2252 (80.6)
Died	1186 (15.9)	541 (19.4)
Still receiving critical care ‡	1099 (14.8)	0 (0.0)
Duration of critical care	(N=6329)	(N=2792)
Duration of critical care (days) †, median (IQR)		
Survivors	5 (3, 7)	4 (2, 7)
Non-survivors	5 (2, 9)	4 (2, 7)
Organ support (Critical Care Minimum Dataset) *	(N=6348)	(N=2793)
Receipt of organ support, at any point, n (%)		
Advanced cardiovascular support	118 (1.9)	53 (1.9)
Basic cardiovascular support only	5704 (89.9)	2329 (83.4)
No cardiovascular support	526 (8.3)	411 (14.7)
Renal support	190 (3.0)	115 (4.1)
Liver support	4 (0.1)	3 (0.1)
Neurological support	46 (0.7)	22 (0.8)
Duration of organ support (calendar days), median (IQR)		
Total (advanced + basic) respiratory support	5 (3, 8)	4 (3, 7)
Advanced cardiovascular support	2 (1, 3)	2 (1, 3)
Total (advanced + basic) cardiovascular support	5 (3, 8)	5 (3, 7)
Renal support	4 (2, 6)	3 (2, 5)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 99.

† Duration of critical care is the total over all critical care admissions for the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

‡ Numbers of patients still receiving critical care estimated based on observed, incomplete organ support data received.

Outcomes, duration of critical care and organ support – renal support

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 that received renal support at any time during their critical care stay admitted from 1 September 2020 to date for whom outcomes have been received are summarised in Table 23 and compared with those admitted up to 31 August 2020.

Table 23. Critical care outcome, duration of critical care and organ support (any renal support)

Critical care outcome	Patients with confirmed COVID-19 and renal support *	
	Admitted from 1 Sep (N=2214 ‡)	Admitted up to 31 Aug (N=2928)
Outcome at end of critical care, n (%)		
Discharged	409 (18.5)	1277 (43.6)
Died	1324 (59.8)	1651 (56.4)
Still receiving critical care ‡	481 (21.7)	0 (0.0)
Duration of critical care	(N=1732)	(N=2928)
Duration of critical care (days) †, median (IQR)		
Survivors	15 (5, 37)	32 (19, 46)
Non-survivors	13 (7, 20)	13 (7, 20)
Organ support (Critical Care Minimum Dataset) *	(N=1733)	(N=2928)
Receipt of organ support, at any point, n (%)		
Advanced respiratory support	1495 (86.3)	2778 (94.9)
Basic respiratory support only	190 (11.0)	115 (3.9)
No respiratory support	48 (2.8)	35 (1.2)
Advanced cardiovascular support	908 (52.4)	1586 (54.2)
Basic cardiovascular support only	804 (46.4)	1333 (45.5)
No cardiovascular support	21 (1.2)	9 (0.3)
Liver support	41 (2.4)	78 (2.7)
Neurological support	199 (11.5)	411 (14.0)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	12 (7, 20)	18 (11, 30)
Total (advanced + basic) respiratory support	14 (8, 22)	19 (11, 33)
Advanced cardiovascular support	3 (2, 5)	4 (2, 7)
Total (advanced + basic) cardiovascular support	14 (8, 22)	19 (11, 32)
Renal support	5 (2, 10)	8 (3, 15)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 99.

† Duration of critical care is the total over all critical care admissions for the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

‡ Numbers of patients still receiving critical care estimated based on observed, incomplete organ support data received.

Exploring the new variant

To explore the potential impact of the new variant of COVID-19 (B.1.1.7), Tables 24-26 present the patient characteristics split into time periods of September to November 2020 compared with December 2020 to date. Tables 27-32 break these characteristics down further into the regions in which the new variant was first identified to be spreading widely (London, South East and East Of England) compared with all other regions.

Table 24. Patient characteristics: demographics (September to November versus December to date)

Demographics	Patients with confirmed COVID-19	
	Admitted 1 Sep - 30 Nov (N=6095)	Admitted from 1 Dec (N=9975)
Age at admission (years)		
Mean (SD)	61.1 (13.7)	58.9 (13.2)
Median (IQR)	63 (53, 71)	60 (51, 69)
Sex, n (%)		
Female	1886 (31.0)	3564 (35.8)
Male	4204 (69.0)	6400 (64.2)
Ethnicity, n (%)		
White	4332 (73.9)	6085 (68.3)
Mixed	56 (1.0)	164 (1.8)
Asian	995 (17.0)	1532 (17.2)
Black	242 (4.1)	588 (6.6)
Other	235 (4.0)	545 (6.1)
Index of Multiple Deprivation (IMD) quintile *, n (%)		
1 (least deprived)	709 (11.8)	1295 (13.3)
2	840 (14.0)	1527 (15.7)
3	999 (16.6)	1924 (19.7)
4	1410 (23.4)	2413 (24.8)
5 (most deprived)	2061 (34.2)	2588 (26.6)
Urban/rural classification *, n (%)		
Major conurbation	2815 (46.5)	4603 (47.0)
Minor conurbation	359 (5.9)	264 (2.7)
City and town	2284 (37.7)	3880 (39.6)
Rural	594 (9.8)	1040 (10.6)

* Please see Definitions on page 99.

Table 25. Patient characteristics: medical history (September to November versus December to date)

Medical history	Patients with confirmed COVID-19	
	Admitted 1 Sep - 30 Nov (N=6095)	Admitted from 1 Dec (N=9975)
Dependency prior to admission to acute hospital, n (%)		
Able to live without assistance in daily activities	5232 (87.4)	7533 (89.2)
Some assistance with daily activities	738 (12.3)	878 (10.4)
Total assistance with all daily activities	17 (0.3)	31 (0.4)
Very severe comorbidities *, n (%)		
Cardiovascular	46 (0.8)	70 (0.8)
Respiratory	61 (1.0)	93 (1.1)
Renal	107 (1.8)	147 (1.7)
Liver	40 (0.7)	48 (0.5)
Metastatic disease	47 (0.8)	55 (0.6)
Haematological malignancy	107 (1.8)	116 (1.3)
Immunocompromised	235 (3.9)	256 (2.9)
Body mass index *, n (%)		
<18.5	42 (0.7)	57 (0.7)
18.5-<25	1137 (19.8)	1597 (19.9)
25-<30	1923 (33.4)	2437 (30.3)
30-<40	2059 (35.8)	2978 (37.0)
≥40	593 (10.3)	970 (12.1)
CPR within previous 24h, n (%)		
In the community	37 (0.6)	60 (0.7)
In hospital	48 (0.8)	94 (1.0)
Prior hospital length of stay		
Mean (SD)	2.8 (6.2)	3.4 (14.8)
Median (IQR)	1 (0, 3)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49)		
Currently pregnant	36 (8.0)	55 (6.2)
Recently pregnant (within 6 weeks)	21 (4.7)	55 (6.2)
Not known to be pregnant	393 (87.3)	771 (87.5)

* Please see Definitions on page 99.

Table 26. Patient characteristics: indicators of acute severity (September to November versus December to date)

Indicators of acute severity	Patients with confirmed COVID-19 and 24h data received	
	Admitted 1 Sep - 30 Nov (N=6095)	Admitted from 1 Dec (N=9975)
Invasively ventilated within first 24h *, n (%)	1321 (22.0)	2270 (29.3)
APACHE II Score		
Mean (SD)	14.8 (5.2)	14.1 (5.3)
Median (IQR)	14 (11, 18)	14 (11, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR)	13.5 (10.0, 19.0)	13.0 (9.7, 18.2)
PaO ₂ /FiO ₂ ratio †, n (%)		
< 13.3 kPa (< 100 mmHg)	2775 (48.8)	3798 (51.8)
13.3-26.6 kPa (100-200 mmHg)	2287 (40.2)	2774 (37.9)
≥ 26.7 kPa (≥ 200 mmHg)	626 (11.0)	753 (10.3)
FiO ₂ †, median (IQR)	0.60 (0.45, 0.75)	0.60 (0.45, 0.80)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Table 27. Patient characteristics: demographics (London, South East and East of England)

Demographics	Patients with confirmed COVID-19	
	Admitted 1 Sep - 30 Nov (N=1767)	Admitted from 1 Dec (N=5732)
Age at admission (years)		
Mean (SD)	61.4 (14.5)	58.9 (13.2)
Median (IQR)	62 (53, 72)	60 (51, 69)
Sex, n (%)		
Female	586 (33.2)	2074 (36.2)
Male	1180 (66.8)	3648 (63.8)
Ethnicity, n (%)		
White	1054 (63.1)	3090 (60.6)
Mixed	27 (1.6)	105 (2.1)
Asian	336 (20.1)	980 (19.2)
Black	115 (6.9)	471 (9.2)
Other	138 (8.3)	457 (9.0)
Index of Multiple Deprivation (IMD) quintile *, n (%)		
1 (least deprived)	286 (16.6)	790 (14.2)
2	270 (15.6)	911 (16.3)
3	382 (22.1)	1270 (22.7)
4	488 (28.2)	1573 (28.2)
5 (most deprived)	302 (17.5)	1039 (18.6)
Urban/rural classification *, n (%)		
Major conurbation	957 (55.0)	3104 (55.4)
Minor conurbation	2 (0.1)	1 (0.0)
City and town	635 (36.5)	2000 (35.7)
Rural	147 (8.4)	494 (8.8)

* Please see Definitions on page 99.

Table 28. Patient characteristics: medical history (London, South East and East of England)

Medical history	Patients with confirmed COVID-19	
	Admitted 1 Sep - 30 Nov (N=1767)	Admitted from 1 Dec (N=5732)
Dependency prior to admission to acute hospital, n (%)		
Able to live without assistance in daily activities	1445 (83.7)	4344 (89.0)
Some assistance with daily activities	272 (15.8)	520 (10.7)
Total assistance with all daily activities	9 (0.5)	18 (0.4)
Very severe comorbidities *, n (%)		
Cardiovascular	10 (0.6)	30 (0.6)
Respiratory	13 (0.7)	43 (0.8)
Renal	50 (2.9)	95 (1.8)
Liver	16 (0.9)	32 (0.6)
Metastatic disease	16 (0.9)	31 (0.6)
Haematological malignancy	31 (1.8)	68 (1.3)
Immunocompromised	75 (4.3)	154 (3.0)
Body mass index *, n (%)		
<18.5	19 (1.2)	36 (0.8)
18.5-<25	372 (22.9)	1045 (22.3)
25-<30	553 (34.0)	1440 (30.7)
30-<40	538 (33.1)	1634 (34.8)
≥40	145 (8.9)	534 (11.4)
CPR within previous 24h, n (%)		
In the community	12 (0.7)	30 (0.6)
In hospital	16 (0.9)	57 (1.1)
Prior hospital length of stay		
Mean (SD)	3.2 (6.7)	3.6 (16.6)
Median (IQR)	1 (0, 3)	1 (0, 4)
Currently or recently pregnant, n (% of females aged 16-49)		
Currently pregnant	10 (8.1)	37 (7.1)
Recently pregnant (within 6 weeks)	8 (6.5)	32 (6.2)
Not known to be pregnant	106 (85.5)	450 (86.7)

* Please see Definitions on page 99.

Table 29. Patient characteristics: indicators of acute severity (London, South East and East of England)

Indicators of acute severity	Patients with confirmed COVID-19 and 24h data received	
	Admitted 1 Sep - 30 Nov (N=1767)	Admitted from 1 Dec (N=5732)
Invasively ventilated within first 24h *, n (%)	435 (25.3)	1520 (34.3)
APACHE II Score		
Mean (SD)	14.9 (5.5)	14.3 (5.3)
Median (IQR)	14 (11, 18)	14 (11, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR)	14.3 (10.3, 20.9)	12.9 (9.7, 18.0)
PaO ₂ /FiO ₂ ratio †, n (%)		
< 13.3 kPa (< 100 mmHg)	718 (44.4)	2178 (52.7)
13.3-26.6 kPa (100-200 mmHg)	644 (39.8)	1478 (35.8)
≥ 26.7 kPa (≥ 200 mmHg)	255 (15.8)	476 (11.5)
FiO ₂ †, median (IQR)	0.60 (0.40, 0.70)	0.60 (0.45, 0.80)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Table 30. Patient characteristics: demographics (all other regions)

Demographics	Patients with confirmed COVID-19	
	Admitted 1 Sep - 30 Nov (N=4328)	Admitted from 1 Dec (N=4243)
Age at admission (years)		
Mean (SD)	60.9 (13.4)	59.0 (13.3)
Median (IQR)	63 (53, 71)	60 (51, 69)
Sex, n (%)		
Female	1300 (30.1)	1490 (35.1)
Male	3024 (69.9)	2752 (64.9)
Ethnicity, n (%)		
White	3278 (78.2)	2995 (78.6)
Mixed	29 (0.7)	59 (1.5)
Asian	659 (15.7)	552 (14.5)
Black	127 (3.0)	117 (3.1)
Other	97 (2.3)	88 (2.3)
Index of Multiple Deprivation (IMD) quintile *, n (%)		
1 (least deprived)	423 (9.9)	505 (12.1)
2	570 (13.3)	616 (14.8)
3	617 (14.4)	654 (15.7)
4	922 (21.5)	840 (20.2)
5 (most deprived)	1759 (41.0)	1549 (37.2)
Urban/rural classification *, n (%)		
Major conurbation	1858 (43.1)	1499 (35.8)
Minor conurbation	357 (8.3)	263 (6.3)
City and town	1649 (38.2)	1880 (44.9)
Rural	447 (10.4)	546 (13.0)

* Please see Definitions on page 99.

Table 31. Patient characteristics: medical history (all other regions)

Medical history	Patients with confirmed COVID-19	
	Admitted 1 Sep - 30 Nov (N=4328)	Admitted from 1 Dec (N=4243)
Dependency prior to admission to acute hospital, n (%)		
Able to live without assistance in daily activities	3787 (88.9)	3189 (89.6)
Some assistance with daily activities	466 (10.9)	358 (10.1)
Total assistance with all daily activities	8 (0.2)	13 (0.4)
Very severe comorbidities *, n (%)		
Cardiovascular	36 (0.8)	40 (1.1)
Respiratory	48 (1.1)	50 (1.4)
Renal	57 (1.3)	52 (1.4)
Liver	24 (0.6)	16 (0.4)
Metastatic disease	31 (0.7)	24 (0.7)
Haematological malignancy	76 (1.8)	48 (1.3)
Immunocompromised	160 (3.8)	102 (2.8)
Body mass index *, n (%)		
<18.5	23 (0.6)	21 (0.6)
18.5-<25	765 (18.5)	552 (16.5)
25-<30	1370 (33.2)	997 (29.8)
30-<40	1521 (36.9)	1344 (40.1)
≥40	448 (10.9)	436 (13.0)
CPR within previous 24h, n (%)		
In the community	25 (0.6)	30 (0.8)
In hospital	32 (0.7)	37 (1.0)
Prior hospital length of stay		
Mean (SD)	2.6 (6.0)	3.2 (11.8)
Median (IQR)	1 (0, 3)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49)		
Currently pregnant	26 (8.0)	18 (5.0)
Recently pregnant (within 6 weeks)	13 (4.0)	23 (6.4)
Not known to be pregnant	287 (88.0)	321 (88.7)

* Please see Definitions on page 99.

Table 32. Patient characteristics: indicators of acute severity (all other regions)

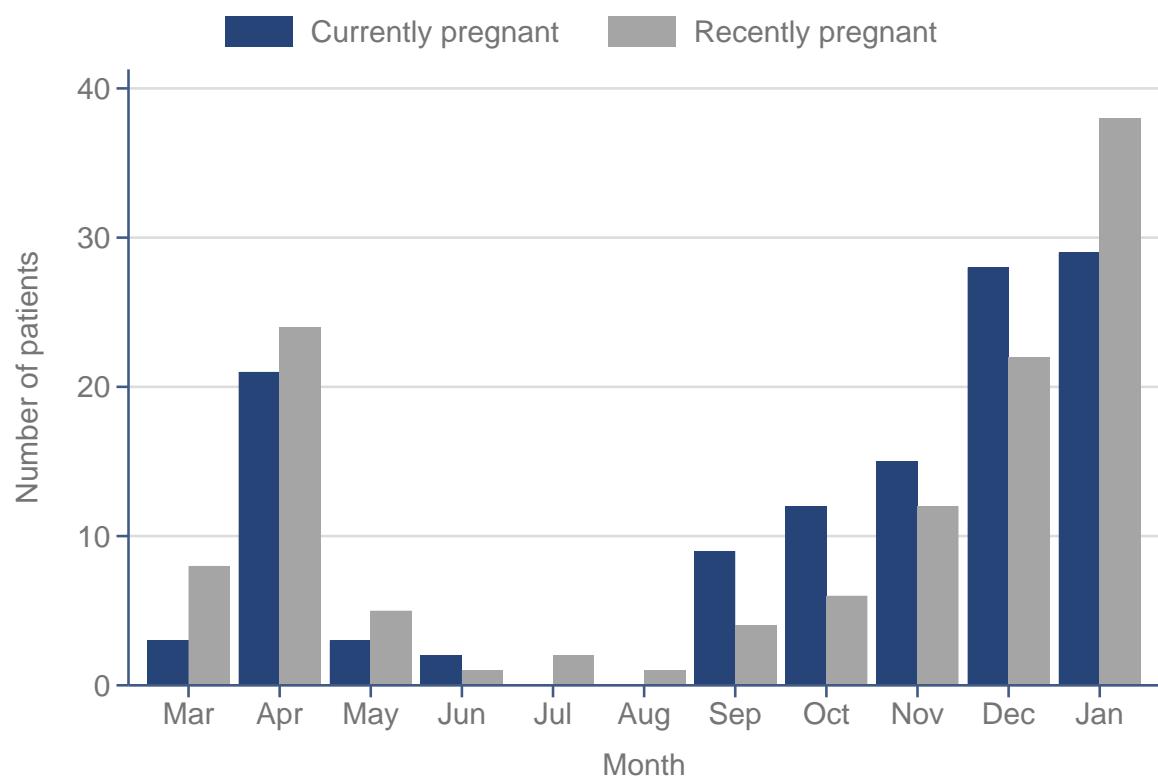
Indicators of acute severity	Patients with confirmed COVID-19 and 24h data received	
	Admitted 1 Sep - 30 Nov (N=4328)	Admitted from 1 Dec (N=4243)
Invasively ventilated within first 24h *, n (%)	886 (20.6)	750 (22.5)
APACHE II Score		
Mean (SD)	14.7 (5.1)	14.0 (5.3)
Median (IQR)	14 (11, 17)	14 (11, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR)	13.2 (9.9, 18.3)	13.2 (9.7, 18.2)
PaO ₂ /FiO ₂ ratio †, n (%)		
< 13.3 kPa (< 100 mmHg)	2057 (50.5)	1620 (50.7)
13.3-26.6 kPa (100-200 mmHg)	1643 (40.4)	1296 (40.6)
≥ 26.7 kPa (≥ 200 mmHg)	371 (9.1)	277 (8.7)
FiO ₂ †, median (IQR)	0.60 (0.45, 0.80)	0.60 (0.45, 0.80)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Pregnancy

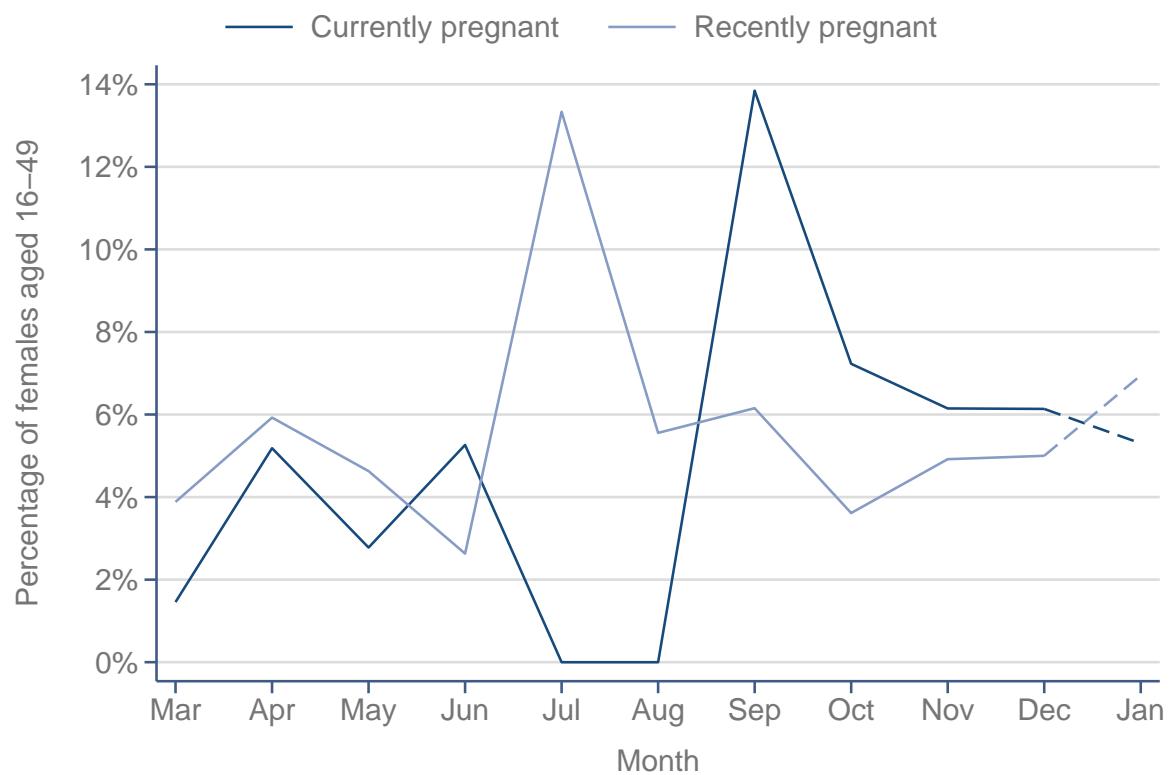
The numbers of critically ill women with confirmed COVID-19 reported to be currently and recently pregnant on admission to critical care are shown in Figure 35 and, as a percentage of women aged 16-49 years, in Figure 36. Characteristics and critical care outcome of women aged 16-49 years by pregnancy status are reported in Table 33 for women admitted from 1 September and compared with women admitted up to 31 August in Table 34.



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Figure 35. Numbers currently and recently pregnant

Monthly trend in the number of women reported to be currently or recently pregnant on admission to critical care.



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Figure 36. Percentages currently and recently pregnant

Monthly trend in the percentage of women aged 16-49 years reported to be currently or recently pregnant on admission to critical care.

Table 33. Characteristics of females aged 16-49 admitted from 1 September by pregnancy status

Characteristics	Women with confirmed COVID-19 aged 16-49 years		
	Currently pregnant (N=92)	Recently pregnant (N=82)	Not known to be pregnant (N=1224)
Age at admission (years)			
Mean (SD)	33.1 (5.7)	33.1 (6.0)	40.4 (7.6)
Median (IQR)	34 (30, 37)	34 (29, 37)	42 (36, 47)
Ethnicity, n (%)			
White	31 (35.6)	45 (56.3)	773 (66.6)
Mixed	3 (3.4)	5 (6.3)	19 (1.6)
Asian	32 (36.8)	15 (18.8)	220 (19.0)
Black	16 (18.4)	9 (11.3)	83 (7.2)
Other	5 (5.7)	6 (7.5)	65 (5.6)
IMD quintile *, n (%)			
1 (least deprived)	5 (5.6)	8 (10.3)	112 (9.3)
2	6 (6.7)	12 (15.4)	146 (12.1)
3	13 (14.6)	13 (16.7)	195 (16.2)
4	29 (32.6)	17 (21.8)	322 (26.7)
5 (most deprived)	36 (40.4)	28 (35.9)	430 (35.7)
First pregnancy, n (%)	N/A	40 (51.9)	N/A
Invasively ventilated within first 24h *, n (%)	20 (24.4)	27 (40.9)	312 (29.0)
APACHE II Score			
Mean (SD)	11.8 (3.9)	10.8 (4.5)	12.3 (5.0)
Median (IQR)	12 (10, 14)	11 (8, 14)	12 (9, 15)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR)	15.3 (10.8, 26.8)	19.2 (12.2, 29.7)	14.0 (10.0, 21.0)
PaO₂ /FiO₂ ratio †, n (%)			
< 13.3 kPa (< 100 mmHg)	26 (34.2)	26 (34.2)	26 (34.2)
13.3-26.6 kPa (100-200 mmHg)	19 (29.7)	19 (29.7)	19 (29.7)
≥ 26.7 kPa (≥ 200 mmHg)	464 (45.4)	464 (45.4)	464 (45.4)
FiO ₂ †, median (IQR)	0.57 (0.35, 0.78)	0.40 (0.34, 0.61)	0.60 (0.40, 0.75)
Outcome at end of critical care, n (%)			
Discharged	63 (68.5)	59 (72.0)	784 (64.1)
Died	3 (3.3)	1 (1.2)	169 (13.8)
Still receiving critical care	26 (28.3)	22 (26.8)	271 (22.1)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care. N/A denotes not available.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Table 34. Characteristics of females aged 16-49 admitted up to 31 August by pregnancy status

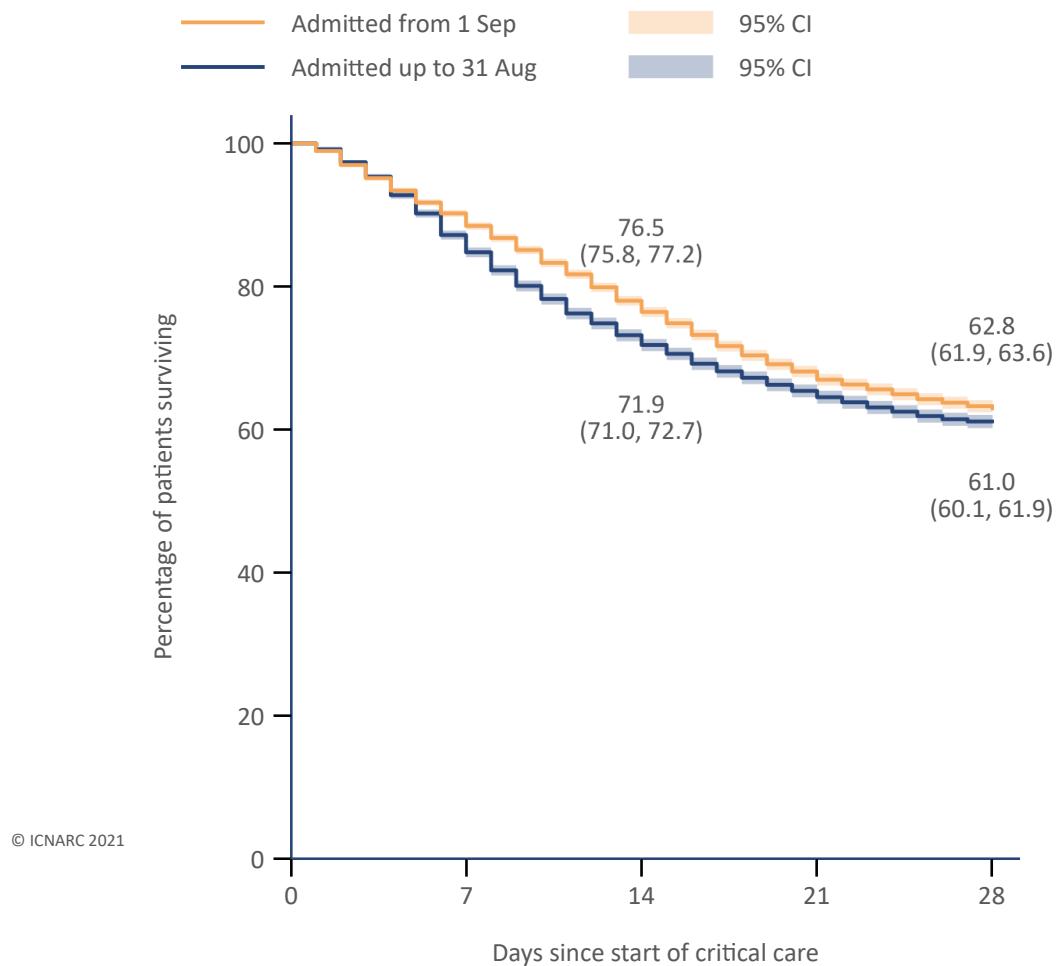
Characteristics	Women with confirmed COVID-19 aged 16-49 years		
	Currently pregnant (N=29)	Recently pregnant (N=41)	Not known to be pregnant (N=720)
Age at admission (years)			
Mean (SD)	34.2 (5.7)	32.3 (5.4)	40.3 (7.6)
Median (IQR)	34 (31, 39)	32 (28, 35)	42 (35, 46)
Ethnicity, n (%)			
White	12 (42.9)	13 (32.5)	412 (59.1)
Mixed	0 (0.0)	1 (2.5)	16 (2.3)
Asian	6 (21.4)	10 (25.0)	135 (19.4)
Black	4 (14.3)	10 (25.0)	81 (11.6)
Other	6 (21.4)	6 (15.0)	53 (7.6)
IMD quintile *, n (%)			
1 (least deprived)	5 (17.2)	2 (4.9)	77 (10.9)
2	4 (13.8)	2 (4.9)	84 (11.9)
3	4 (13.8)	10 (24.4)	124 (17.5)
4	8 (27.6)	12 (29.3)	161 (22.7)
5 (most deprived)	8 (27.6)	15 (36.6)	262 (37.0)
First pregnancy, n (%)	N/A	15 (36.6)	N/A
Invasively ventilated within first 24h *, n (%)	9 (32.1)	22 (53.7)	344 (48.5)
APACHE II Score			
Mean (SD)	11.7 (3.9)	11.7 (4.6)	13.2 (5.5)
Median (IQR)	11 (9, 14)	12 (9, 14)	12 (10, 16)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR)	18.7 (14.3, 29.2)	22.0 (15.6, 34.7)	17.2 (12.1, 25.1)
PaO ₂ /FiO ₂ ratio †, n (%)			
< 13.3 kPa (< 100 mmHg)	6 (21.4)	6 (21.4)	6 (21.4)
13.3-26.6 kPa (100-200 mmHg)	6 (15.4)	6 (15.4)	6 (15.4)
≥ 26.7 kPa (≥ 200 mmHg)	214 (31.9)	214 (31.9)	214 (31.9)
FiO ₂ †, median (IQR)	0.50 (0.35, 0.60)	0.40 (0.28, 0.50)	0.50 (0.35, 0.65)
Outcome at end of critical care, n (%)			
Discharged	28 (96.6)	37 (90.2)	557 (77.4)
Died	1 (3.4)	4 (9.8)	163 (22.6)
Still receiving critical care	0 (0.0)	0 (0.0)	0 (0.0)

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care. N/A denotes not available.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

28-day in-hospital outcome - overall

A Kaplan-Meier plot of in-hospital survival to 28 days following admission to critical care for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date is shown in Figure 37 and compared with those admitted up to 31 August 2020.



Admitted from 1 Sep

At risk	15860	12891	9524	7059	5715
Died (in hospital)	0	1786	3423	4523	4944
Censored	0	1183	2913	4278	5201

Admitted up to 31 Aug

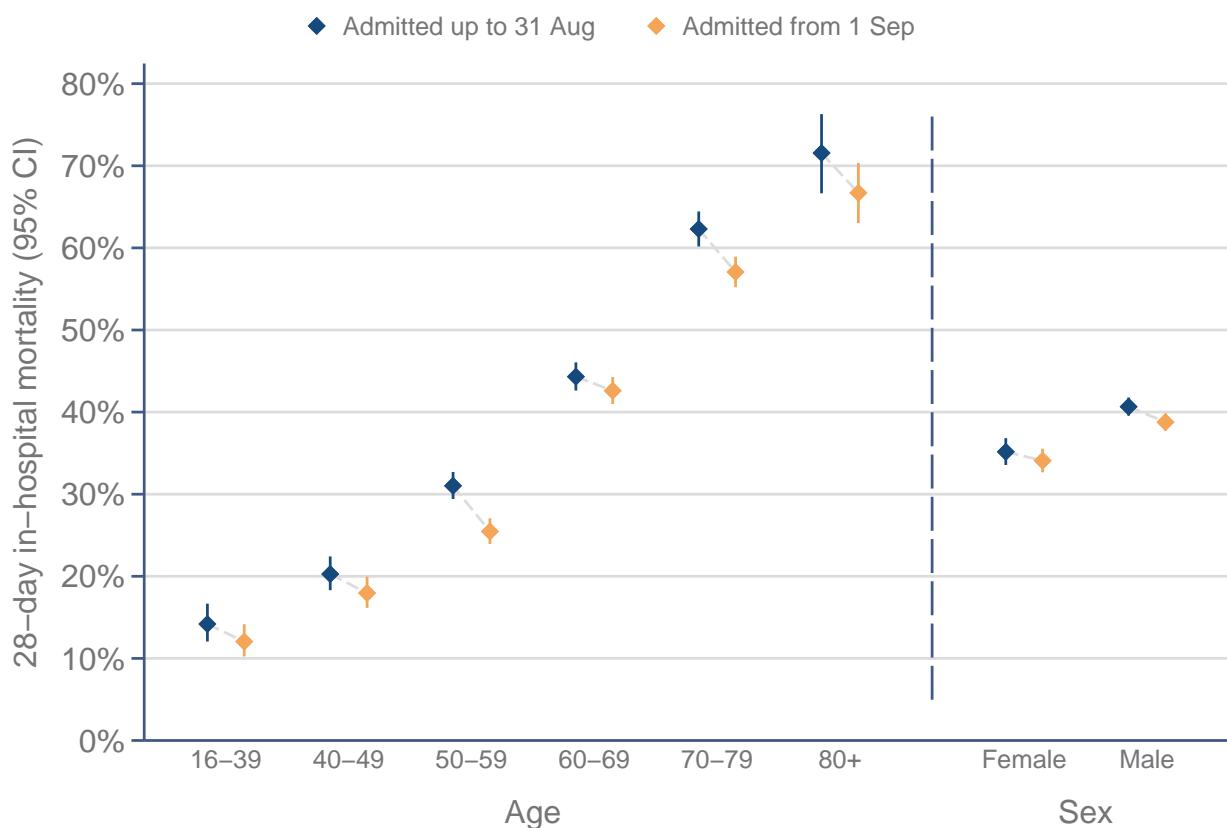
At risk	10938	9273	7861	7066	6669
Died (in hospital)	0	1665	3077	3872	4268
Censored	0	0	0	0	1

Figure 37. In-hospital survival to 28 days following admission to critical care

Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these survival curves are not adjusted for differences in patient characteristics (see Tables 1-3).

28-day in-hospital outcome - by patient characteristics

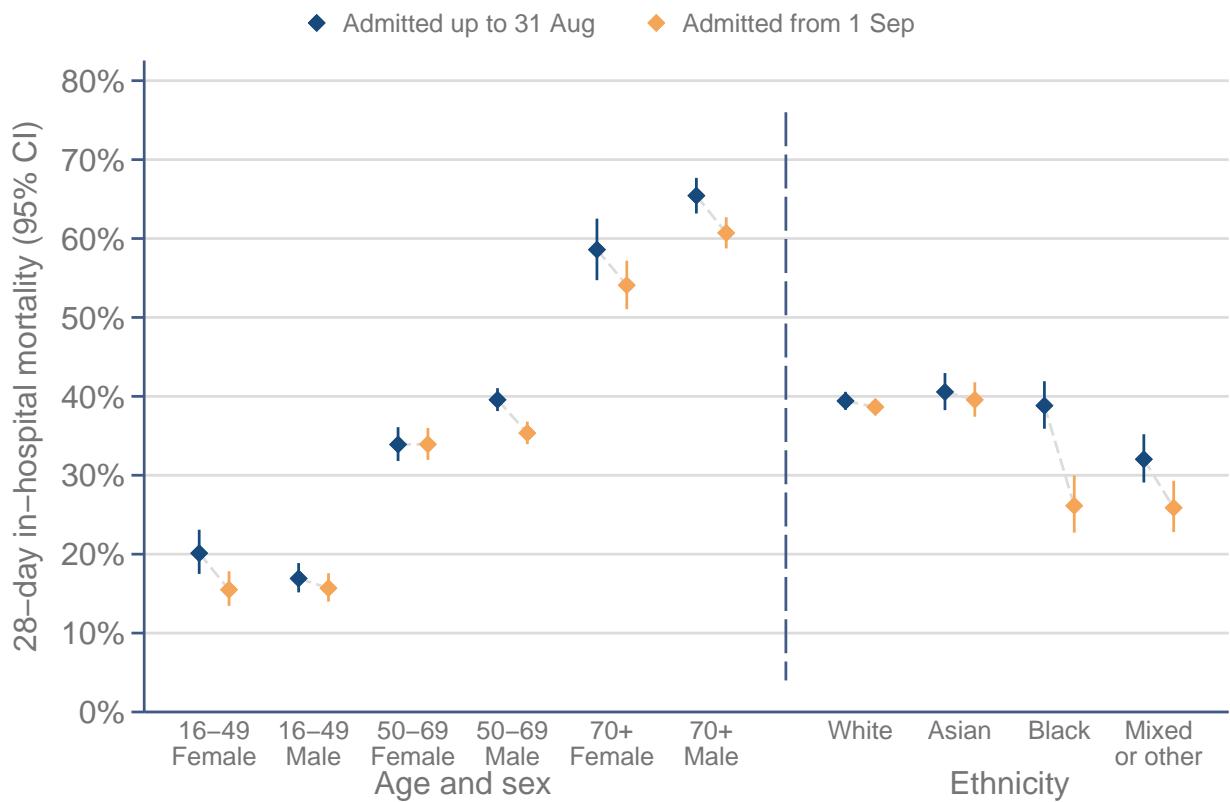
28-day in-hospital mortality for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date by patient characteristics (demographics, medical history and indicators of acute severity) is presented in Figures 38-41 and compared with those admitted up to 31 August 2020.



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Figure 38. 28-day in-hospital mortality by patient characteristics (demographics)

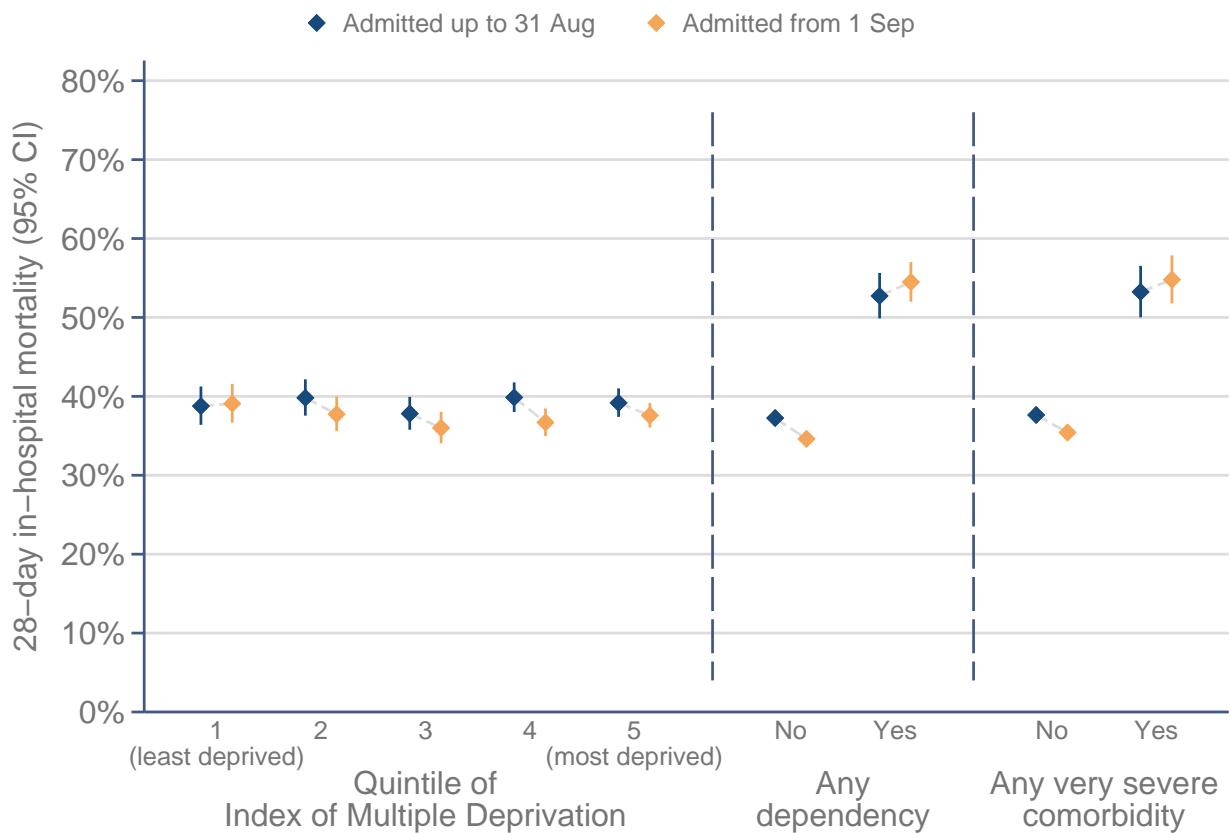
Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).



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Figure 39. 28-day in-hospital mortality by patient characteristics (demographics continued)

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).



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Figure 40. 28-day in-hospital mortality by patient characteristics (demographics and medical history)

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).

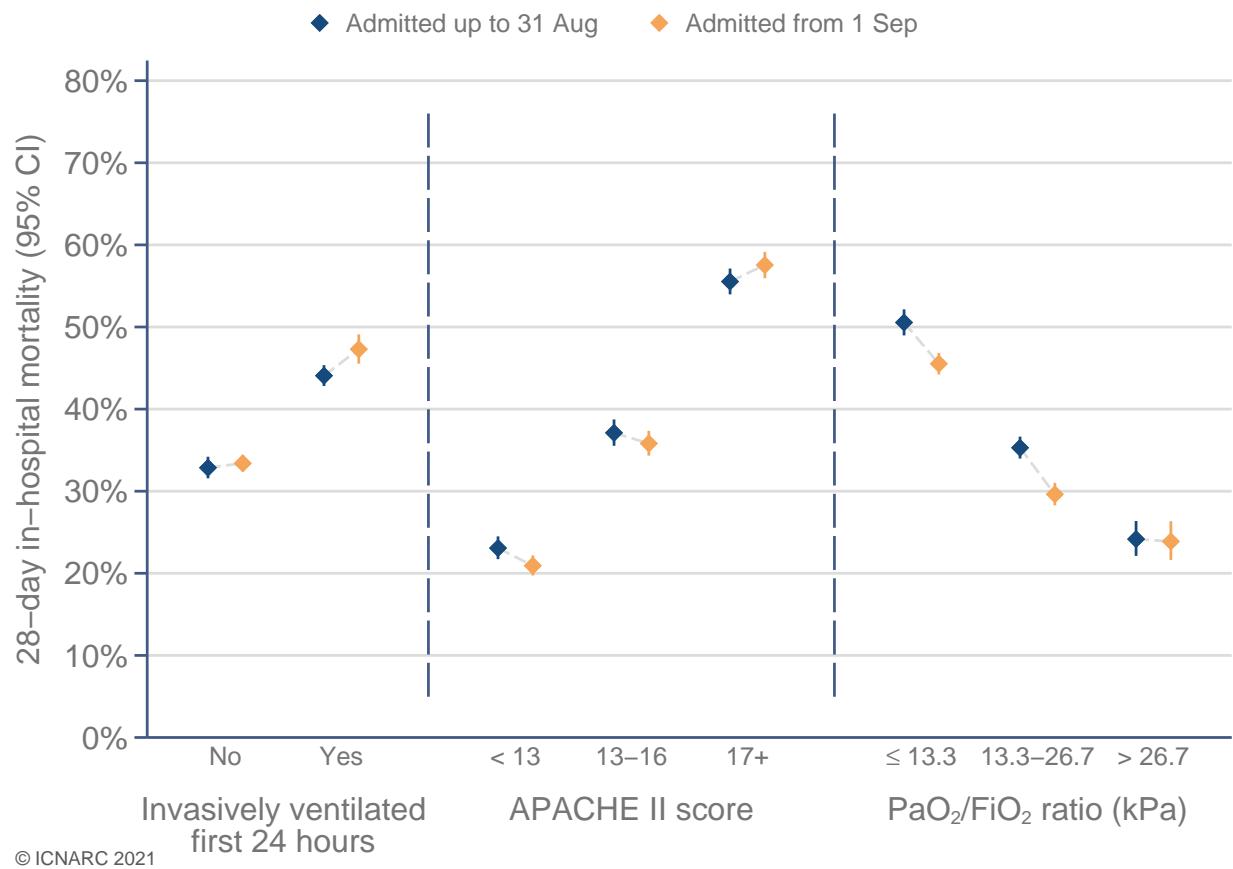


Figure 41. 28-day in-hospital mortality by patient characteristics (indicators of acute severity *)

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

28-day in-hospital outcome - by patient characteristics and invasive ventilation first 24 hours

28-day in-hospital mortality for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date by patient characteristics (demographics and indicators of acute severity) separately for those invasively ventilated and not invasively ventilated during the first 24 hours of critical care is presented in Figures 42-44 and compared with those admitted up to 31 August 2020.

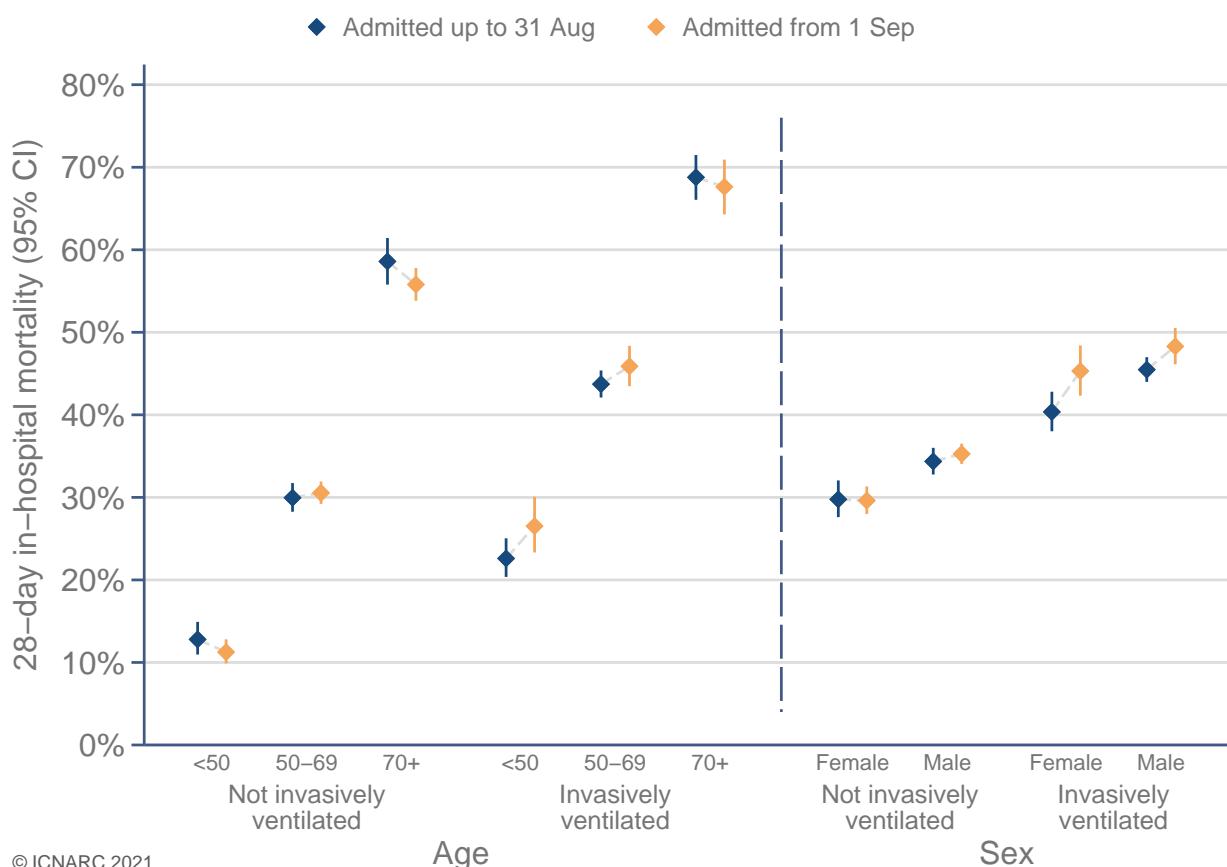
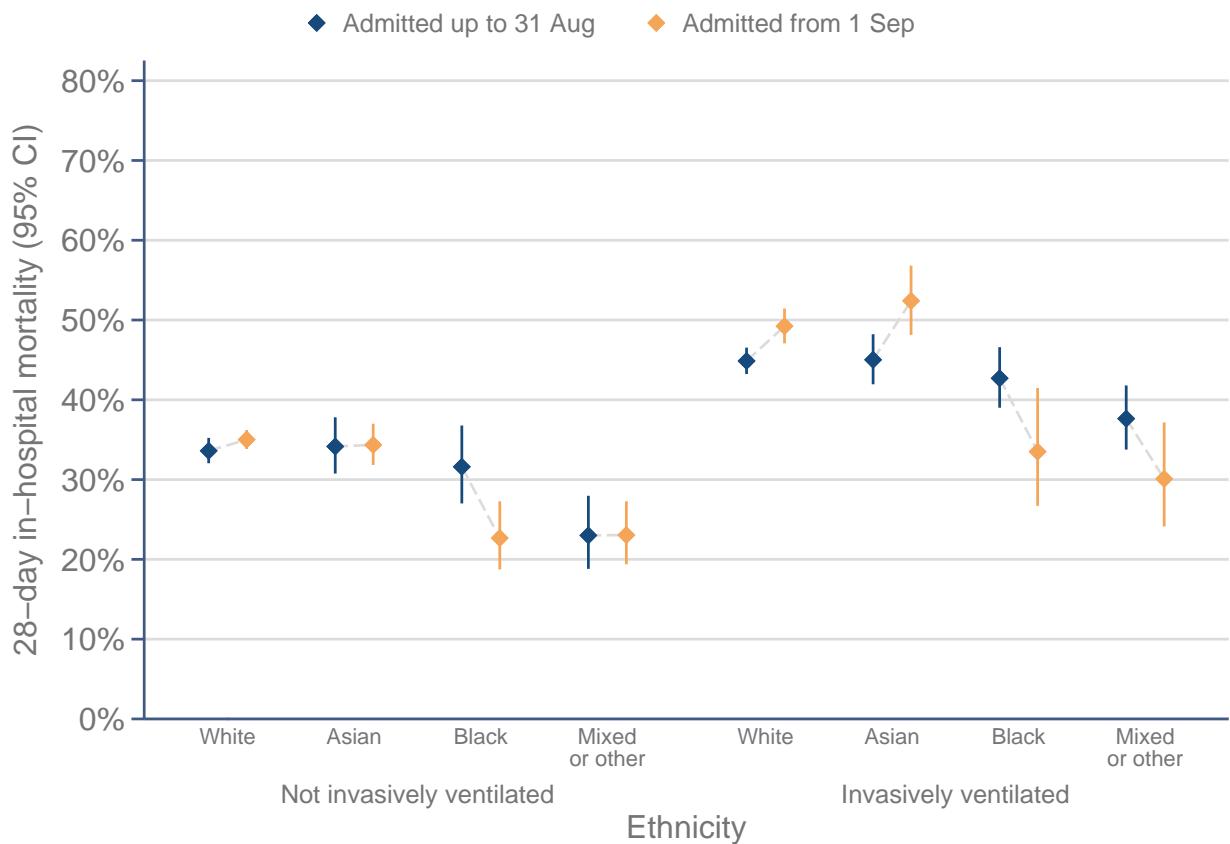


Figure 42. 28-day in-hospital mortality by patient characteristics and invasive ventilation (demographics)

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).



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Figure 43. 28-day in-hospital mortality by patient characteristics and invasive ventilation (demographics continued)

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).

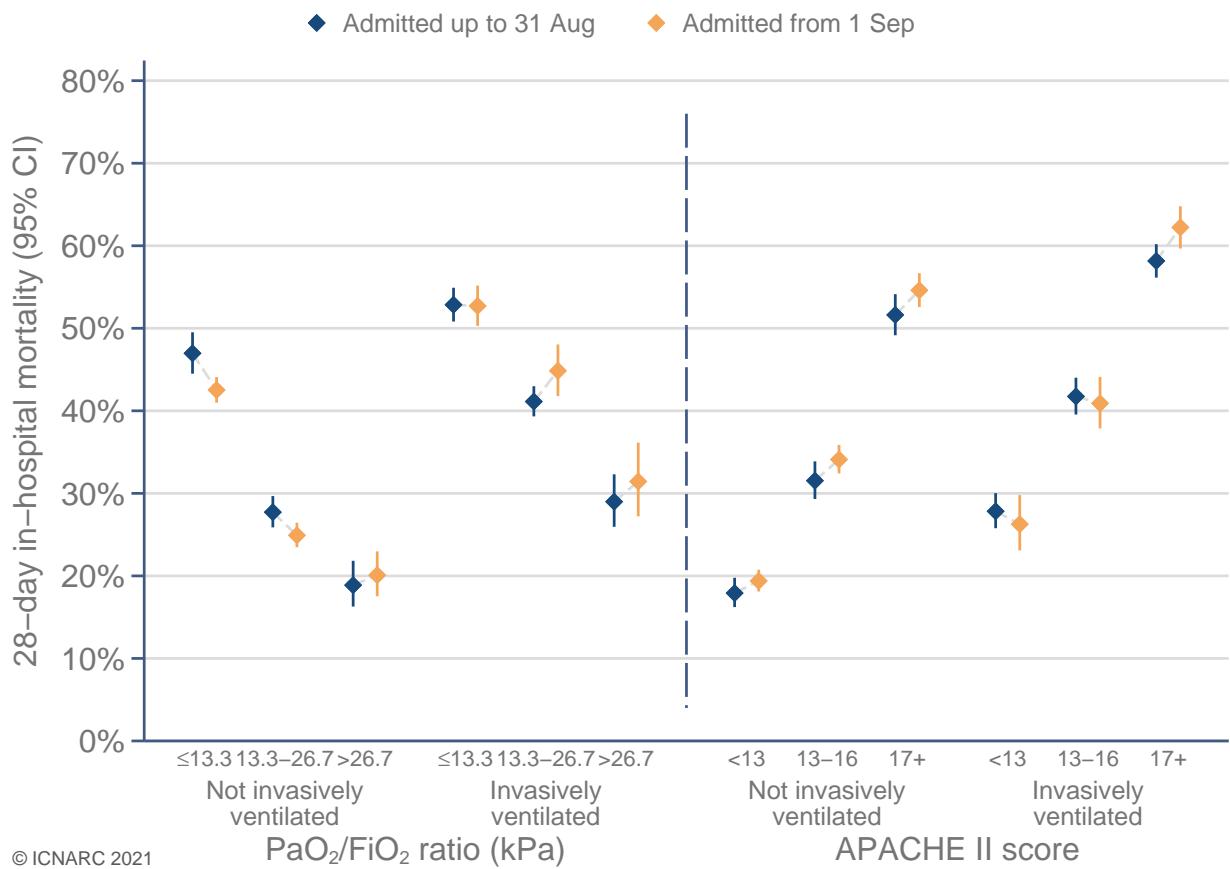
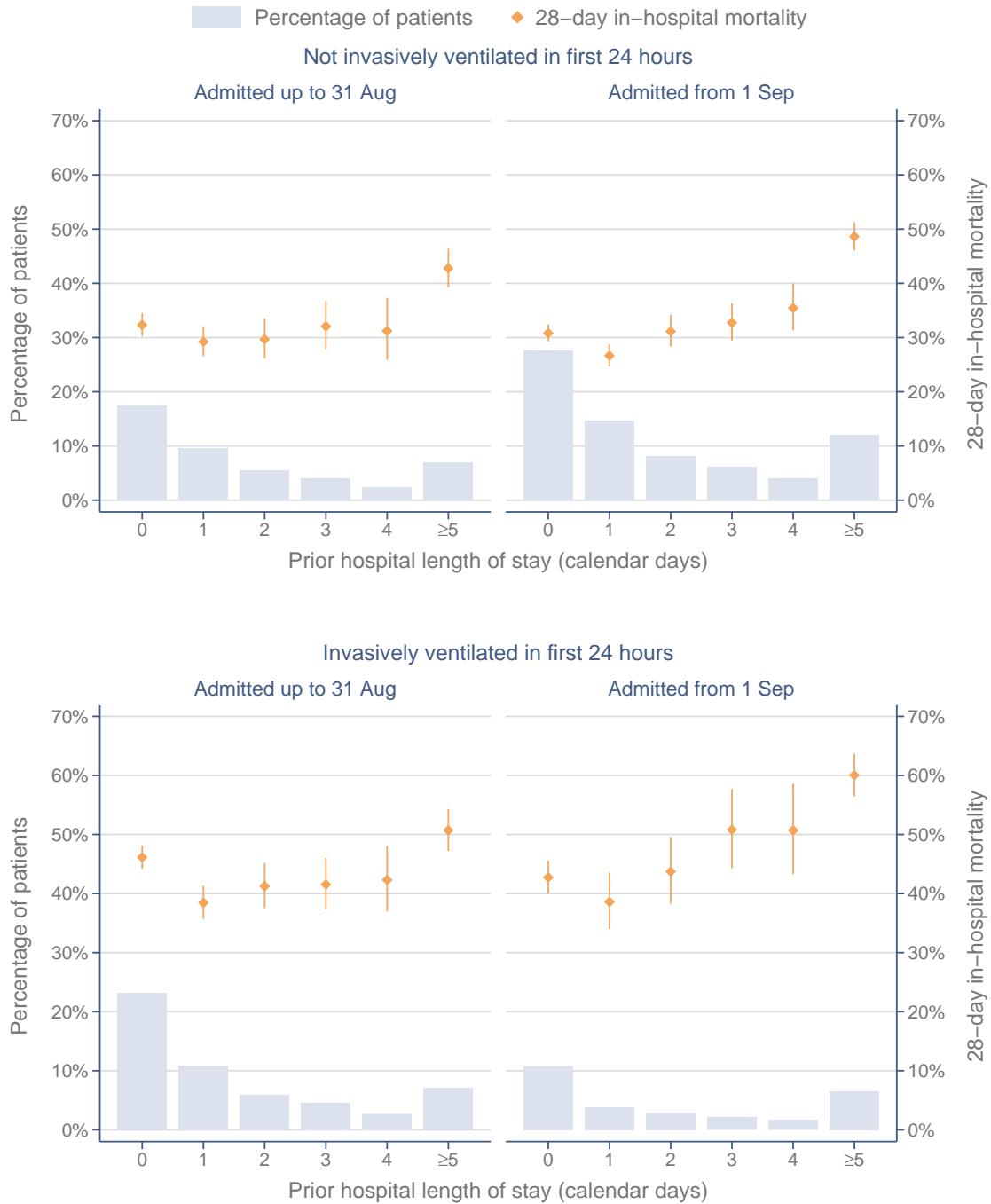


Figure 44. 28-day in-hospital mortality by patient characteristics and invasive ventilation (acute severity)

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).

* Please see Definitions on page 99. Indicators of acute severity are based on data from the first 24 hours of critical care.

28-day in-hospital mortality for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date by the number of days in hospital prior to admission to critical care, separately for those invasively ventilated and not invasively ventilated during the first 24 hours of critical care, is presented in Figure 45 and compared with those admitted up to 31 August 2020.



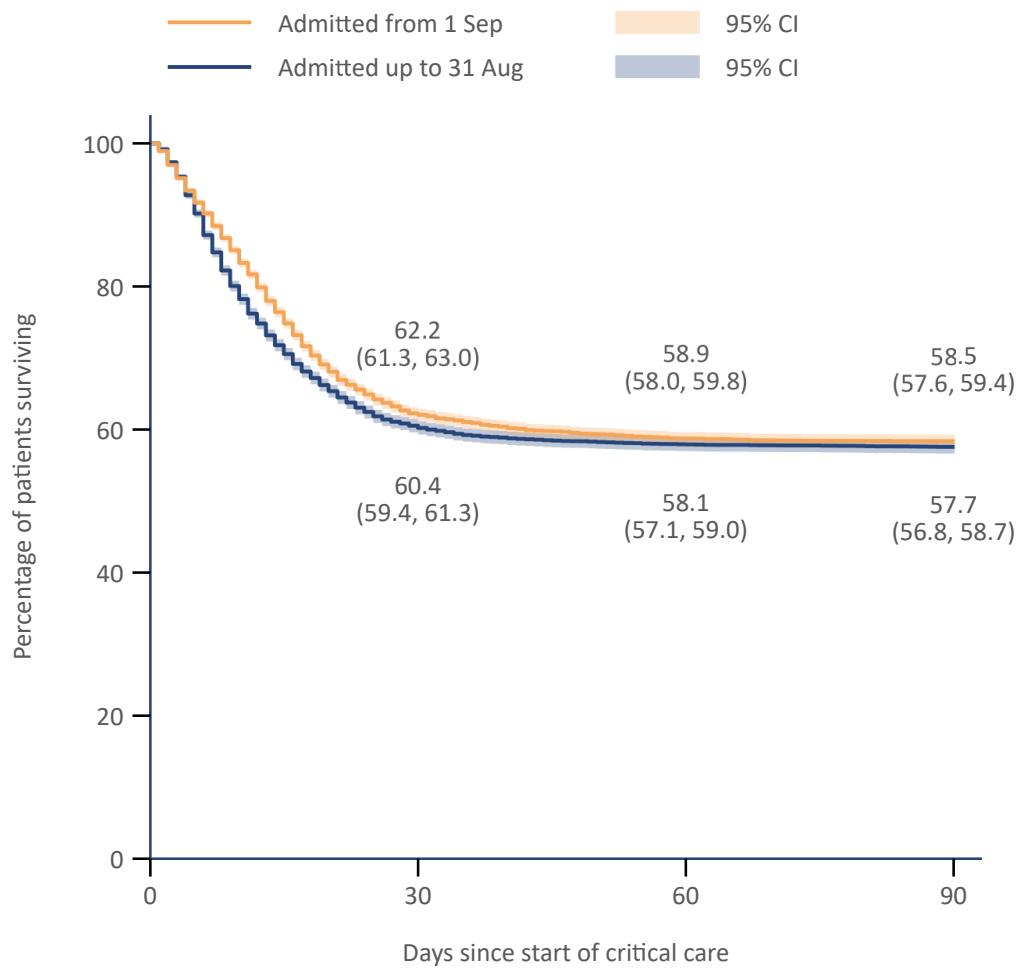
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Figure 45. Percentage of patients and 28-day in-hospital mortality by invasive ventilation and prior hospital length of stay

Percentages of patients are reported as a percentage of all patients admitted within the time period. Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for differences in other patient characteristics (see Tables 1-3).

90-day in-hospital outcome

A Kaplan-Meier plot of in-hospital survival to 90 days following admission to critical care for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date is shown in Figure 46 and compared with those admitted up to 31 August 2020.



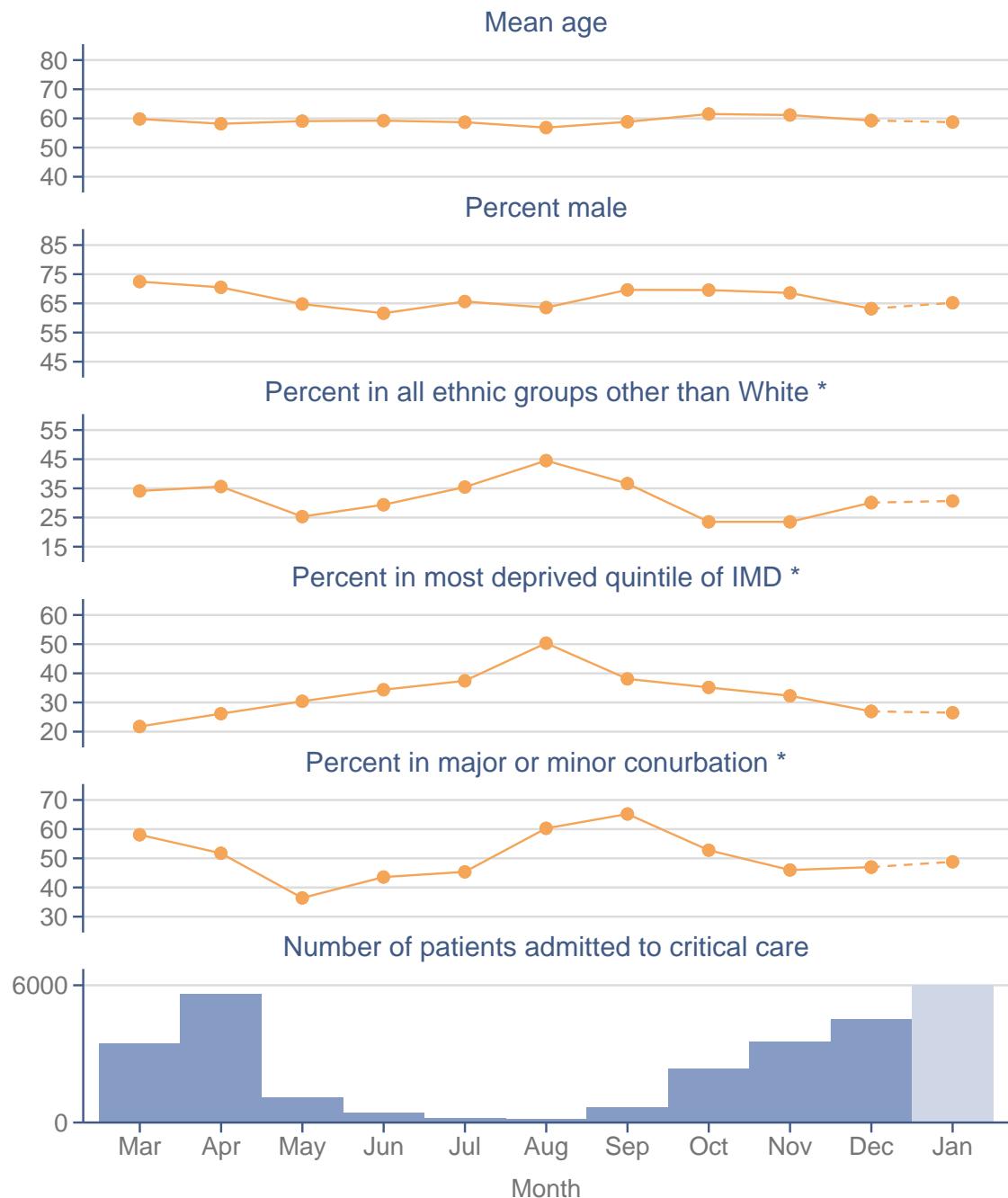
Admitted from 1 Sep				
At risk	15860	5451	3384	1301
Died (in hospital)	0	4999	5248	5266
Censored	0	5410	7228	9293
Admitted up to 31 Aug				
At risk	10938	6601	6327	6286
Died (in hospital)	0	4336	4587	4623
Censored	0	1	24	29

Figure 46. In-hospital survival to 90 days following admission to critical care

Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 90 days assumed to survive to 90 days. Please note that these survival curves are not adjusted for differences in patient characteristics (see Tables 1-3).

Monthly trends – COVID-19

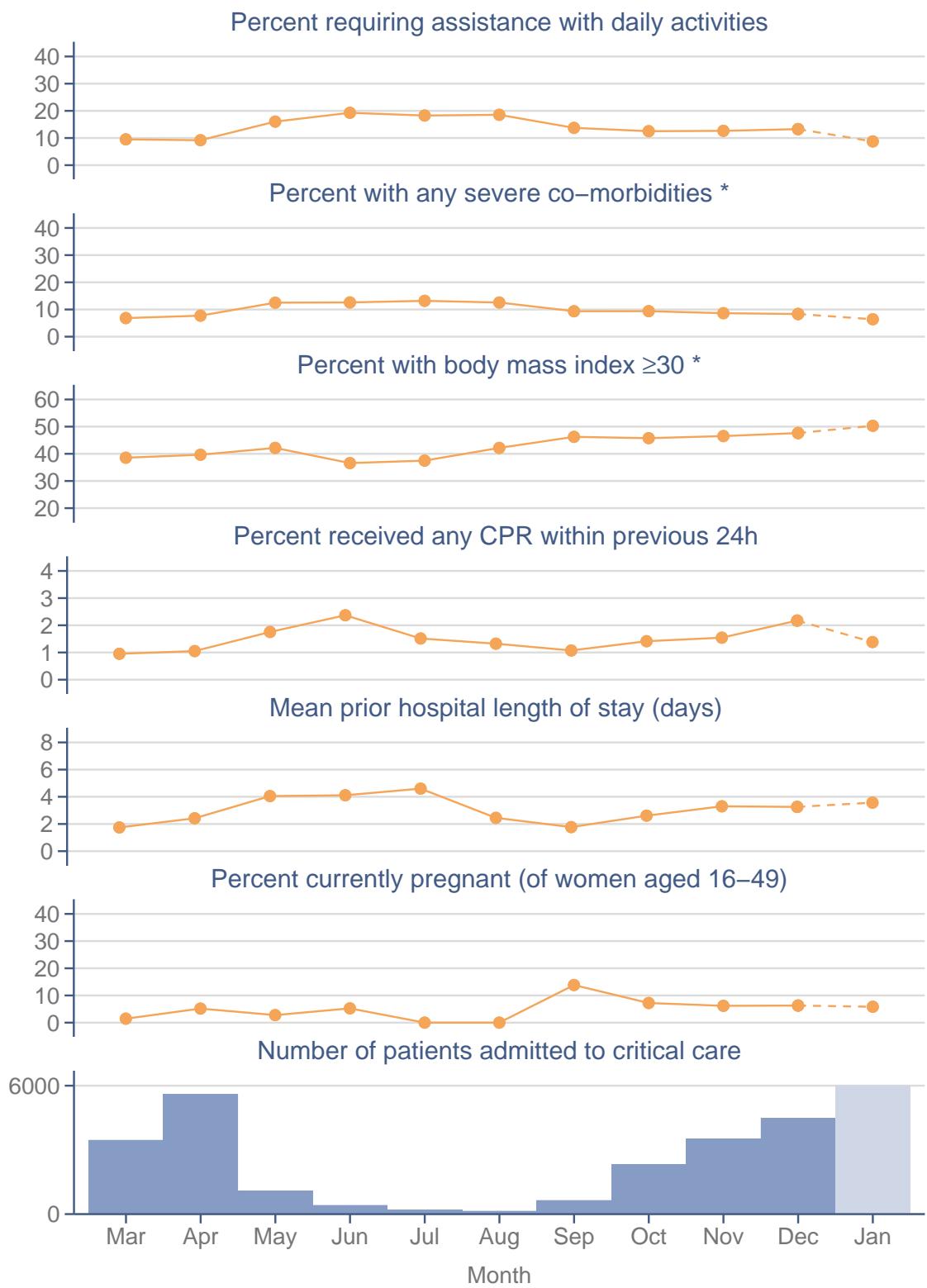
Monthly trends in characteristics for patients critically ill with confirmed COVID-19 are shown for key summary statistics in Figures 47-49 and as full distributions in Figures 50-52.



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Figure 47. Monthly trend in patient characteristics (demographics)

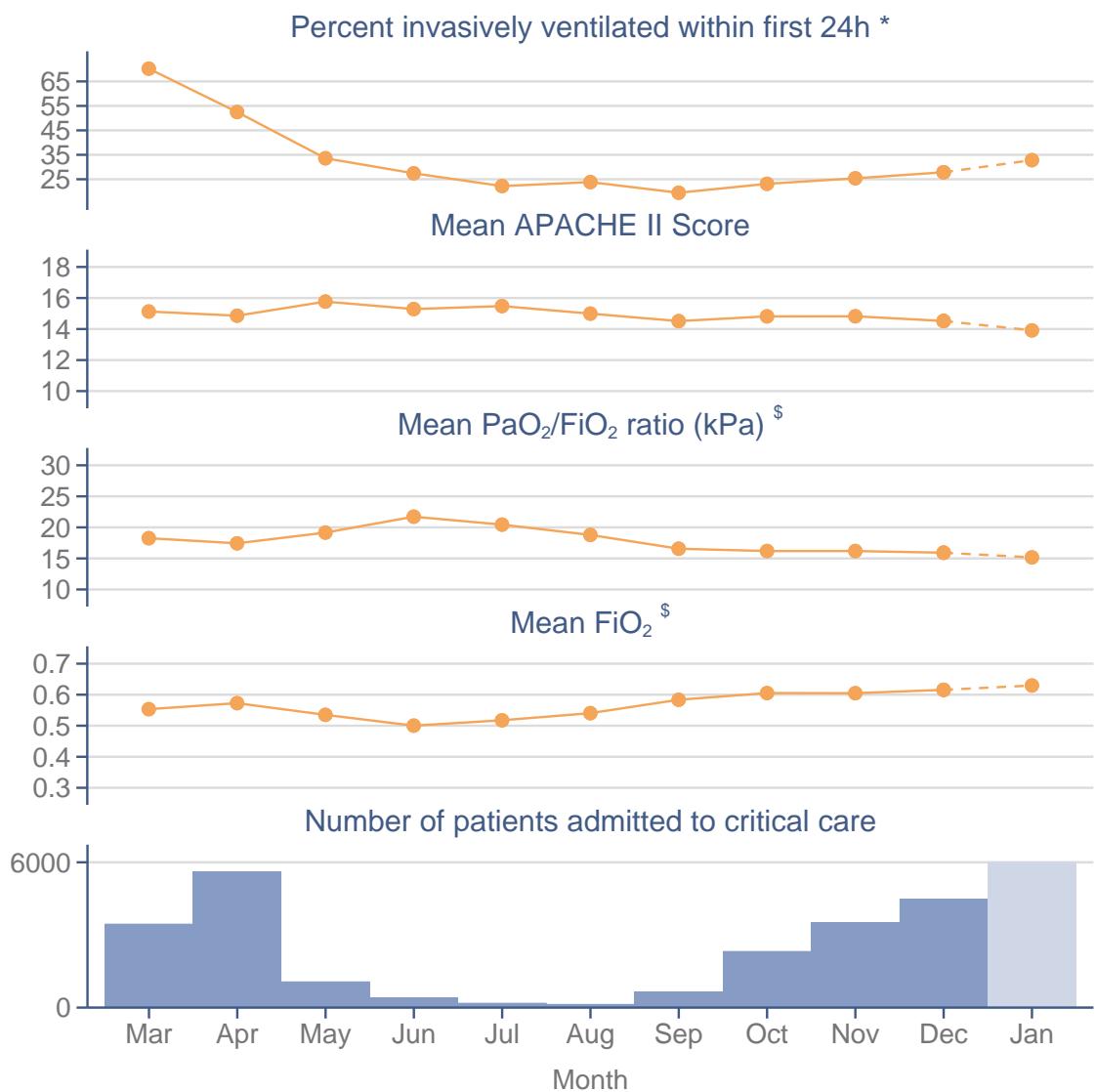
* Please see Definitions on page 99. Dashed line and shading indicates incomplete month.



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Figure 48. Monthly trend in patient characteristics (medical history)

* Please see Definitions on page 99. Dashed line and shading indicates incomplete month.

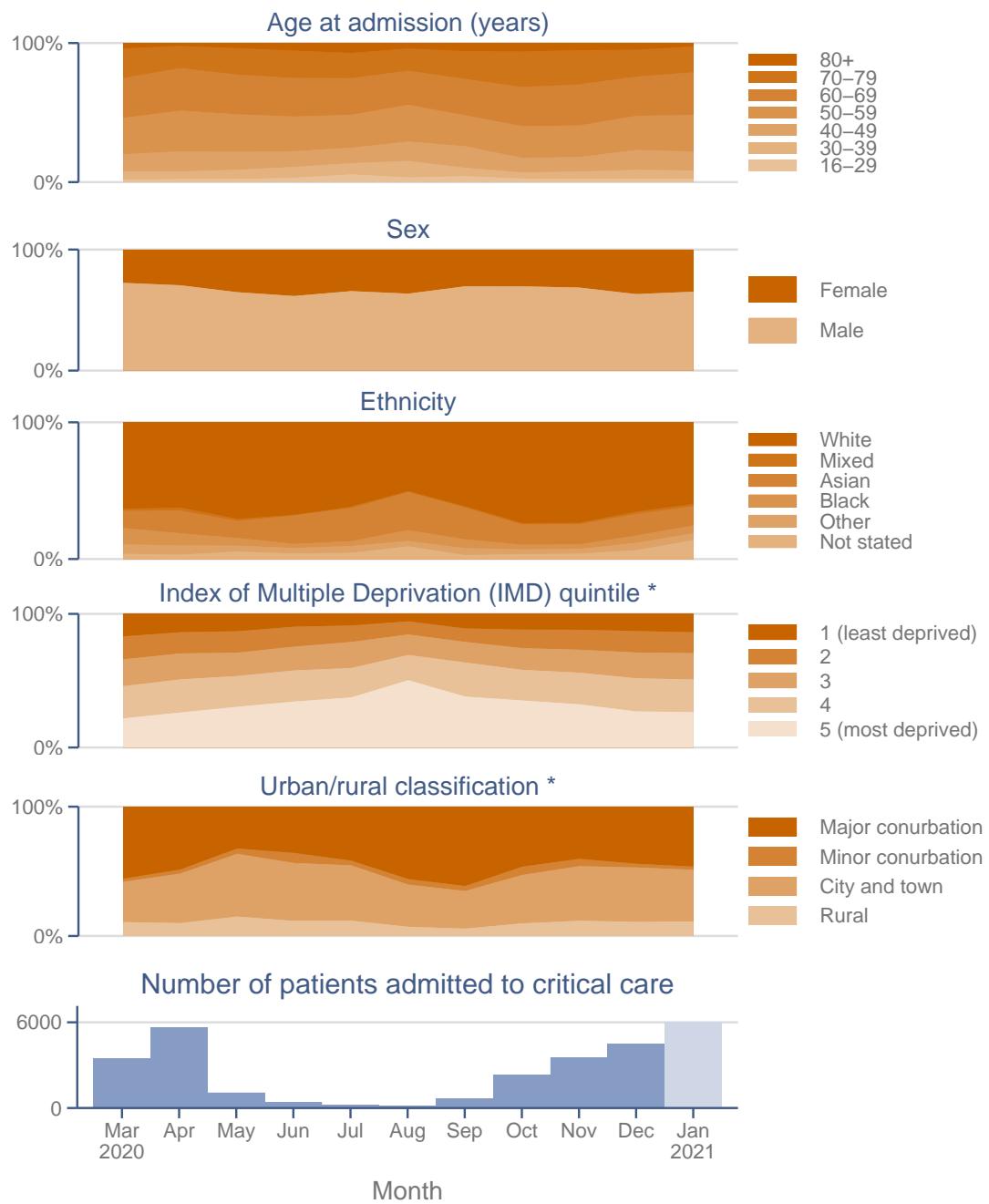


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Figure 49. Monthly trend in patient characteristics (indicators of acute severity)

* Please see Definitions on page 99. Dashed line and shading indicates incomplete month.

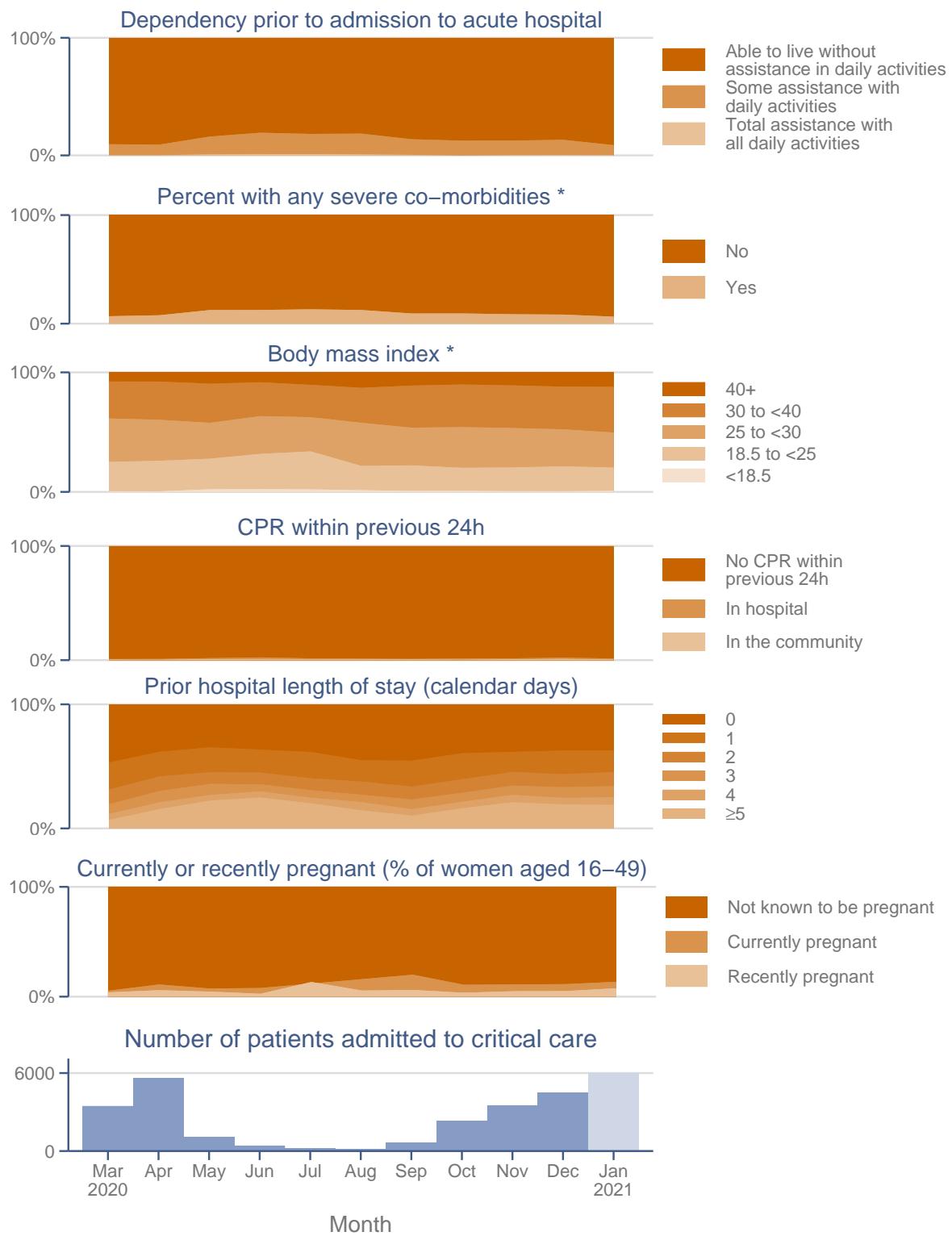
\$ Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.



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Figure 50. Monthly trend in patient characteristics (demographics) – distributions

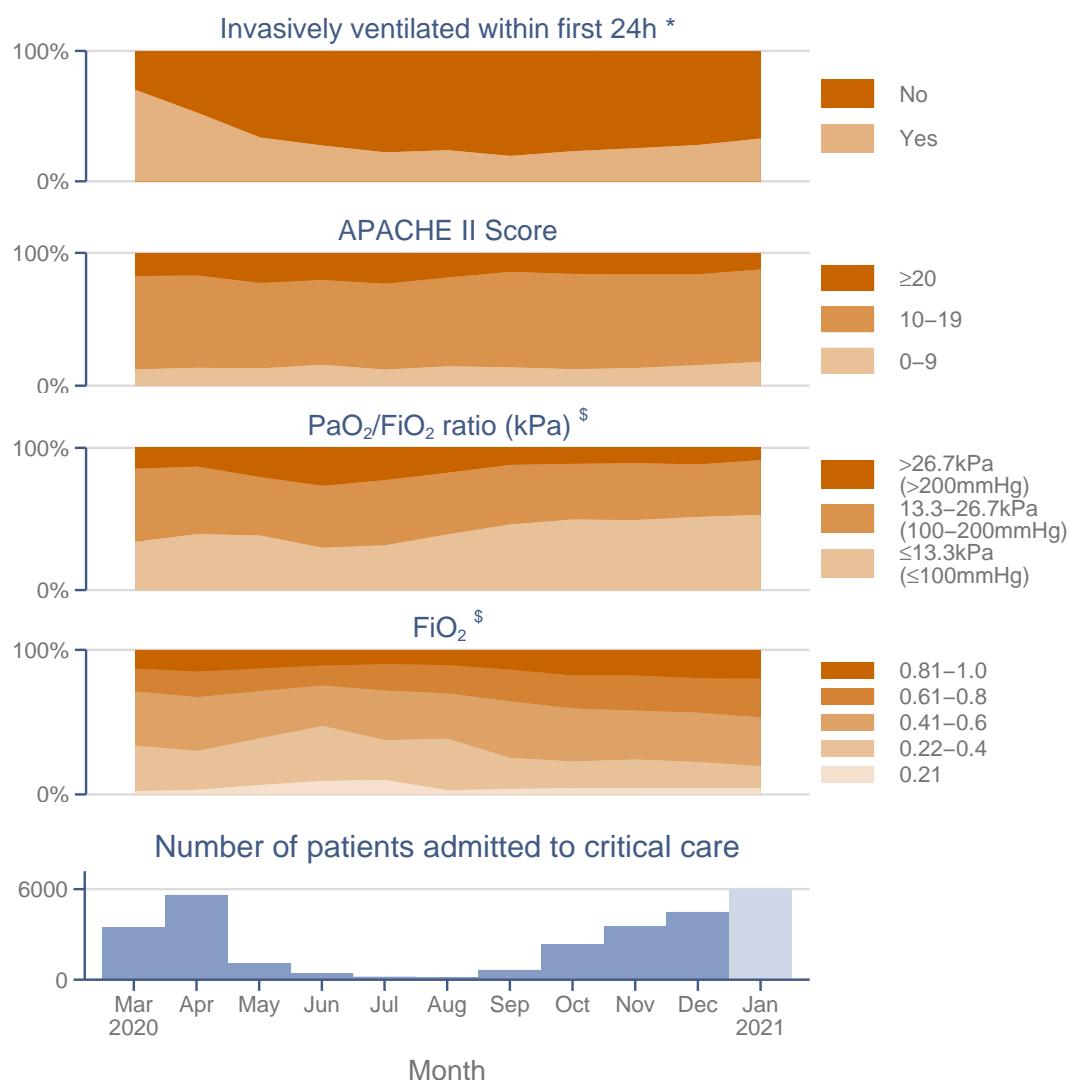
* Please see Definitions on page 99. Shading indicates incomplete month.



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Figure 51. Monthly trend in patient characteristics (medical history) – distributions

* Please see Definitions on page 99. Shading indicates incomplete month.



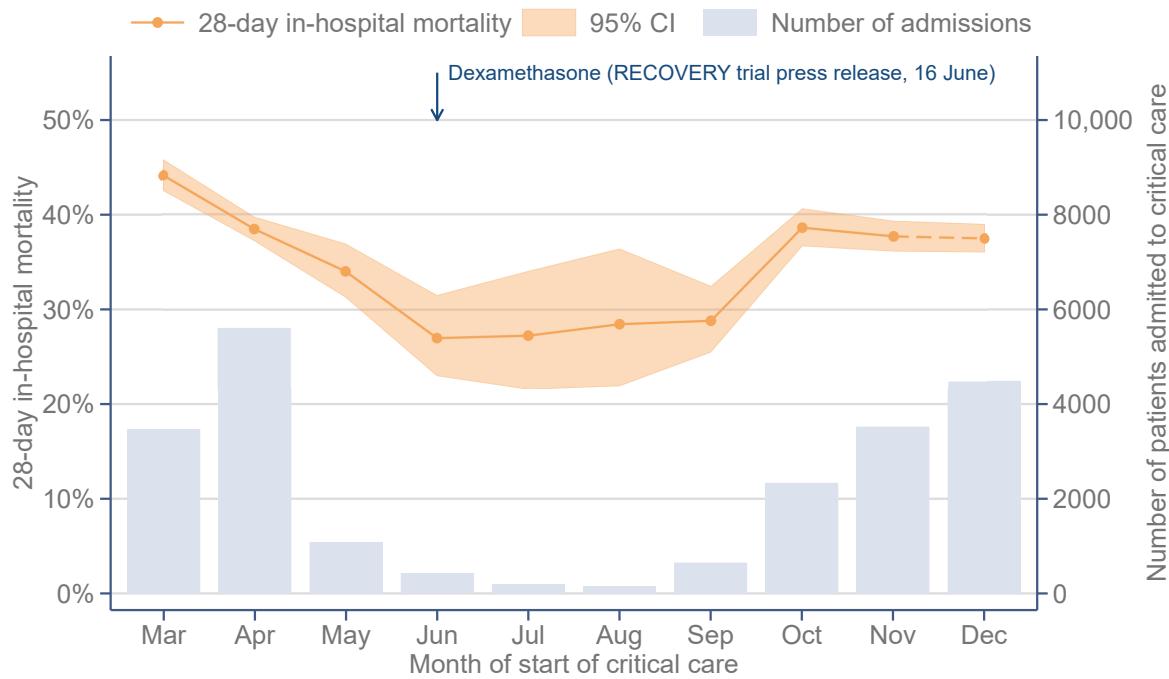
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Figure 52. Monthly trend in patient characteristics (indicators of acute severity) – distributions

* Please see Definitions on page 99. Shading indicates incomplete month.

§ Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Figure 53 shows the monthly number of new patients critically ill with confirmed COVID-19 from March 2020 until the last complete month and the corresponding 28-day in-hospital mortality, indicating the month on which information became available identifying steroids (Dexamethasone) as an effective treatment for critically ill patients. Figures 54-56 show monthly variation in patient characteristics relating to ventilation and timing of critical care compared with the change in mortality.

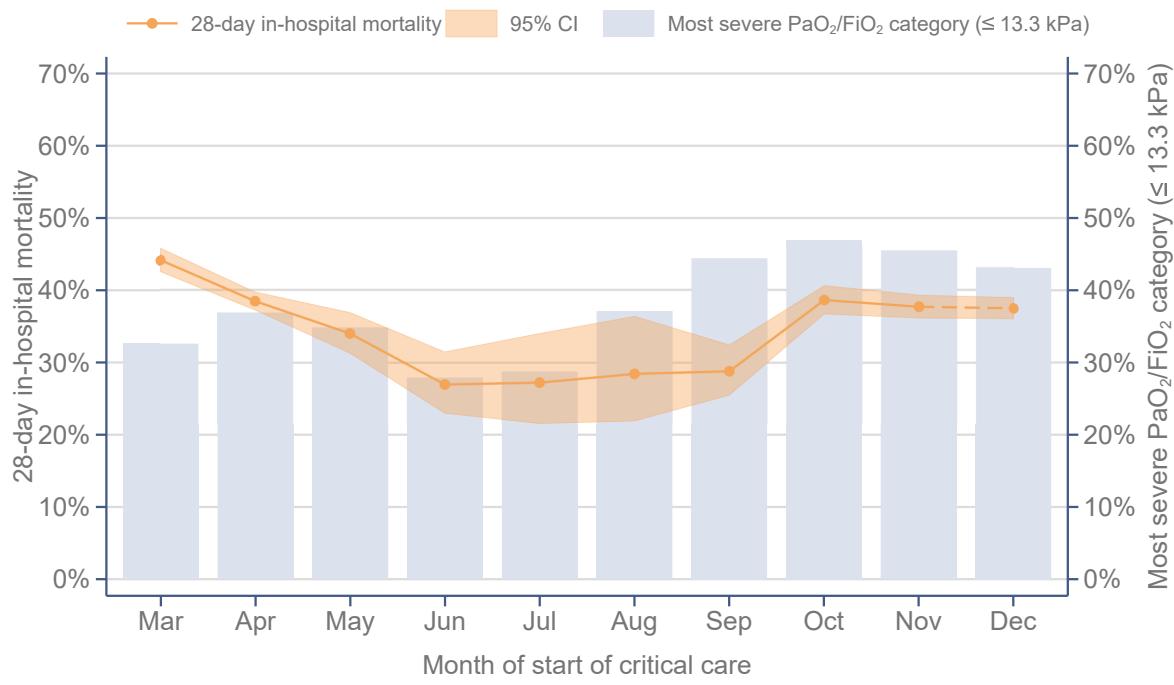


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Figure 53. Number of admissions and 28-day in-hospital mortality by month

Number of admissions and 28-day in-hospital mortality for patients critically ill with confirmed COVID-19 by month of start of critical care.

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for changes in patient characteristics (see Tables 1-3).

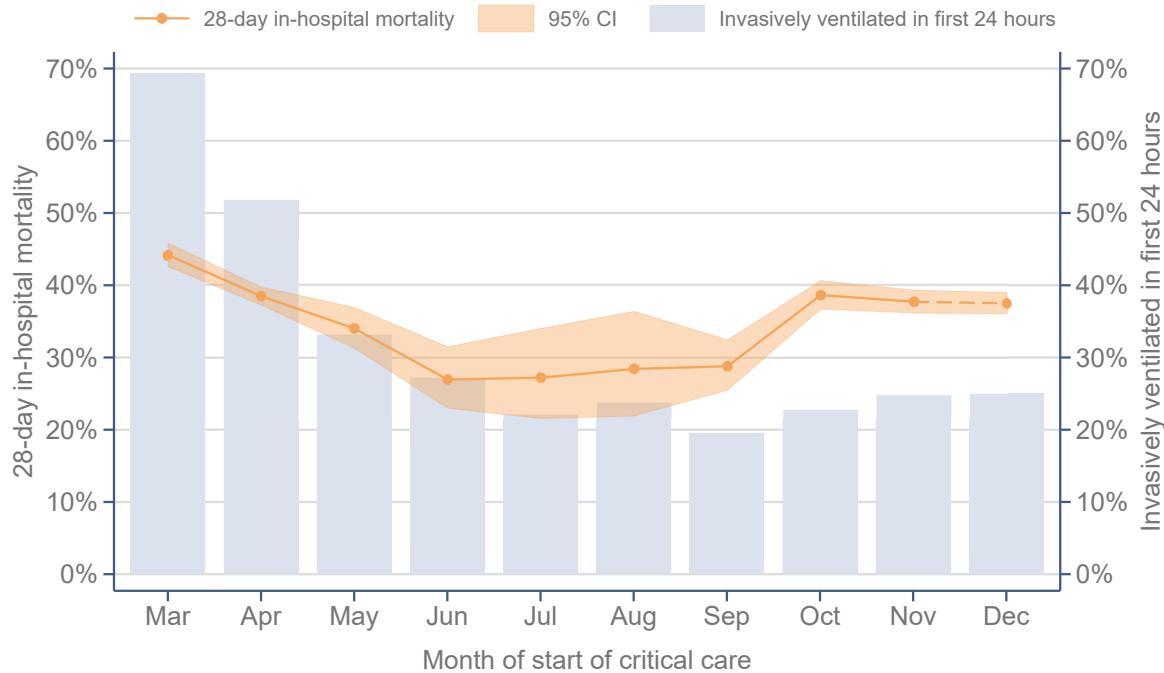


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Figure 54. PaO₂/FiO₂ and 28-day in-hospital mortality by month

Percentage of patients in most severe PaO₂/FiO₂ category (≤ 13.3 kPa) and 28-day in-hospital mortality for patients critically ill with confirmed COVID-19 by month of start of critical care.

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for changes in patient characteristics (see Tables 1-3).

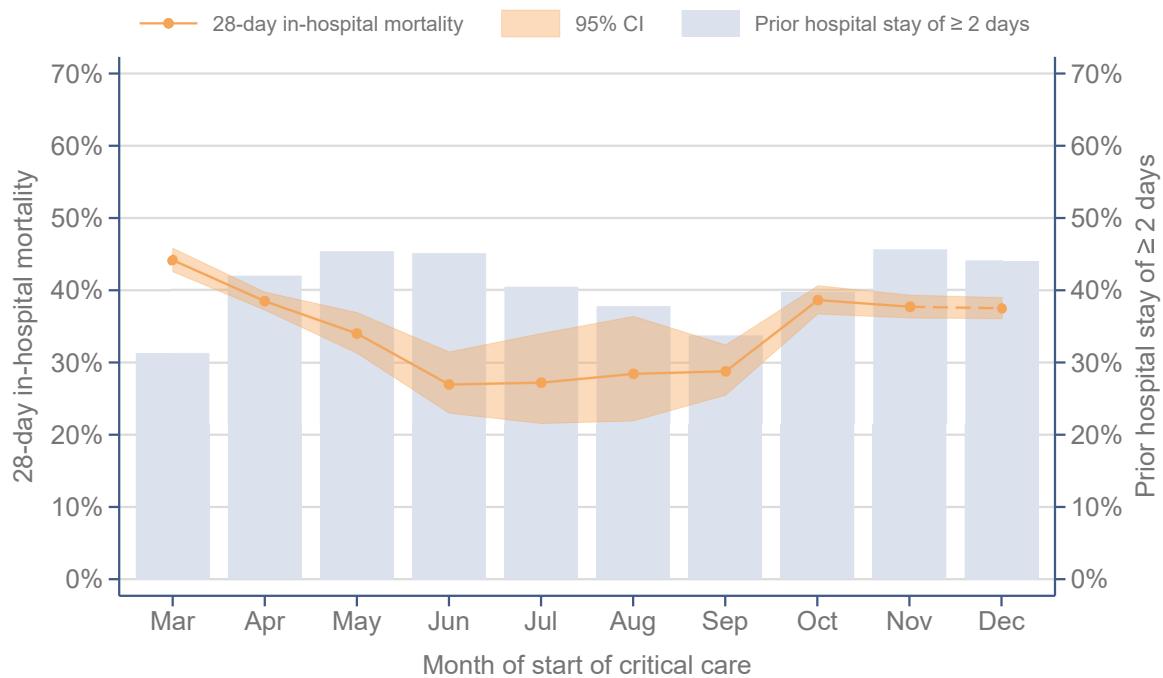


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Figure 55. Invasive ventilation first 24 hours and 28-day in-hospital mortality by month

Percentage of patients receiving invasive ventilation during the first 24 hours in critical care and 28-day in-hospital mortality for patients critically ill with confirmed COVID-19 by month of start of critical care.

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for changes in patient characteristics (see Tables 1-3).



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Figure 56. Prior hospital length of stay and 28-day in-hospital mortality by month

Percentage of patients with a hospital stay of 2 or more days before admission to critical care and 28-day in-hospital mortality for patients critically ill with confirmed COVID-19 by month of start of critical care.

Estimates of 28-day in-hospital mortality based on Kaplan-Meier survival analysis. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 28 days assumed to survive to 28 days. Please note that these estimates are not adjusted for changes in patient characteristics (see Tables 1-3).

Additional analyses for patients admitted up to 31 August 2020

Updated outcomes up to discharge from acute hospital for patients critically ill with confirmed COVID-19 admitted up to 31 August 2020 are shown in Figure 57.

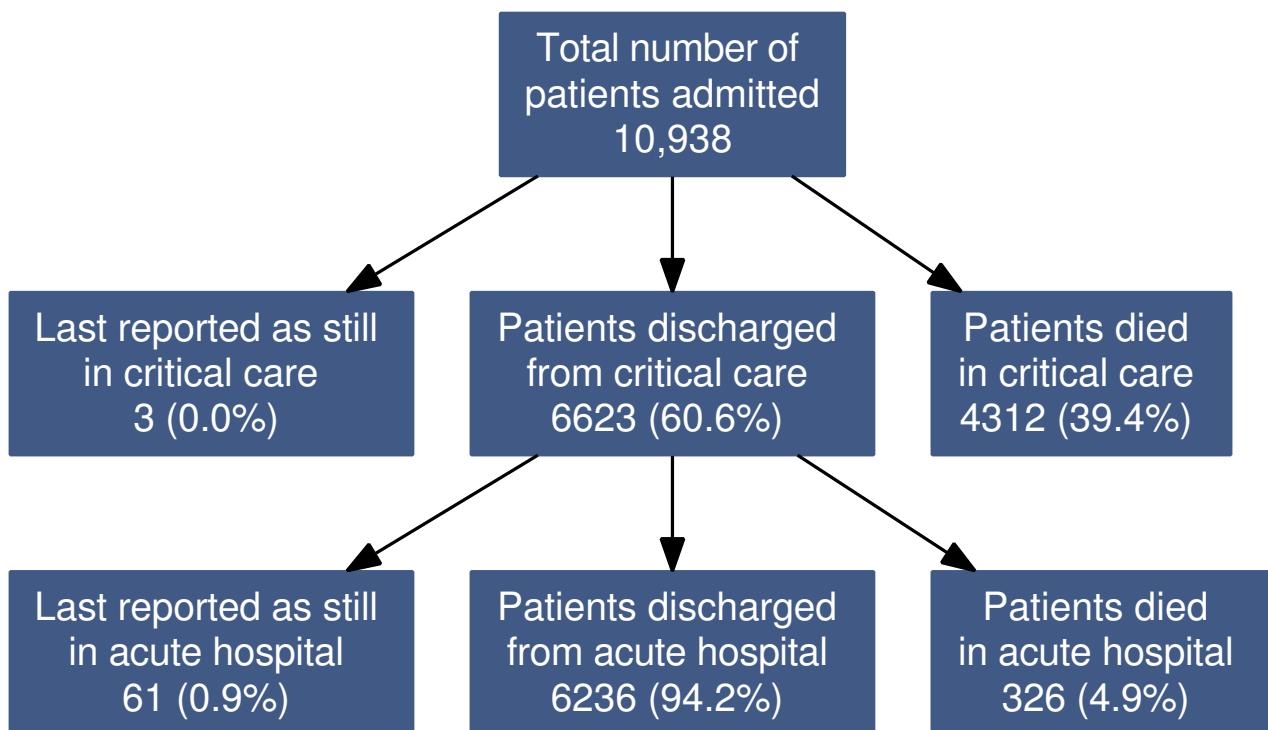


Figure 57. Critical care and acute hospital outcomes for patients admitted up to 31 August 2020

Of 10,167 patients admitted up to 31 May 2020, 5726 have been discharged alive from acute hospital and, of these, 117 have subsequently been readmitted to critical care.

Definitions

Reason for transfer between critical care units is categorised as:

- Comparable critical care: transfer for similar care as provided in the transferring critical care unit
- Repatriation: returning a patient to their original unit, hospital or area
- More-specialist critical care: transfer for specialist critical care not available in the transferring critical care unit

Critical care transfer groups are groups of local critical care units developed to reduce the number of long distance transfers that take place and to ensure that transfers are contained within the critical care network or, by special agreement, between hospitals at the borders of adjacent networks.

Ethnicity is recorded using the ethnic category codes from the 2001 census and grouped as:

- White: White – British; White – Irish; White – any other
- Mixed: Mixed – white and black Caribbean; Mixed – white and black African; Mixed – white and Asian; Mixed – any other
- Asian: Asian or Asian British – Indian; Asian or Asian British – Pakistani; Asian or Asian British – Bangladeshi; Asian or Asian British – any other
- Black: Black or black British – Caribbean; Black or black British – African; Black or black British – any other
- Other: Other ethnic group – Chinese; Any other ethnic group
- Not stated or not recorded

Index of Multiple Deprivation (IMD) is based on the patient's usual residential postcode (assigned at the level of Lower Layer Super Output Area) according to:

- English Index of Multiple Deprivation 2019 for postcodes in England
- Welsh Index of Multiple Deprivation 2019 for postcodes in Wales
- Northern Ireland Multiple Deprivation Measure 2017 for postcodes in Northern Ireland

Urban/rural classification is based on the patient's usual residential postcode (assigned at the level of Output Area) and categorised according to 2011 census categories as:

- Urban: the majority of the population lives within settlements with a population of more than 10,000 people, subcategorised according to dwelling densities for every 100m x 100m square and the density in squares at varying distances around each square as either Major conurbation, Minor conurbation, or City or town
- Rural: the majority of the population lives within settlements with a population of less than 10,000 people (combining the categories Town and fringe, Village, and Hamlet or isolated dwellings)

Body mass index is calculated as the weight in kilograms divided by the height in metres squared. Weight and height values may have been measured or estimated.

Dependency prior to admission to acute hospital is assessed as the best description for the dependency of the patient in the two weeks prior to admission to acute hospital and prior to the onset of the acute illness, i.e. “usual” dependency. It is assessed according to the amount of personal assistance they receive with daily activities (bathing, dressing, going to the toilet, moving in/out of bed/chair, continence and eating).

Very severe comorbidities must have been evident within the six months prior to critical care and documented at or prior to critical care:

- Cardiovascular: symptoms at rest
- Respiratory: shortness of breath with light activity or home ventilation
- Renal: renal replacement therapy for end-stage renal disease
- Liver: biopsy-proven cirrhosis, portal hypertension or hepatic encephalopathy
- Metastatic disease: distant metastases
- Haematological malignancy: acute or chronic leukaemia, multiple myeloma or lymphoma
- Immunocompromise: chemotherapy, radiotherapy or daily high dose steroid treatment in previous six months, HIV/AIDS or congenital immune deficiency

Invasive ventilation during the first 24 hours was defined as mechanical ventilation (identified by the recording of a ventilated respiratory rate, indicating that all or some of the breaths or a portion of the breaths were delivered by a mechanical device) and sedation (receiving continuous or intermittent doses of agents to produce and maintain a continuous decreased level of consciousness with or without paralysing agents) at any time during the first 24 hours and not reported as having zero days of advanced respiratory support.

Organ support is recorded as the number of calendar days (00:00-23:59) on which the support was received at any time, defined as:

- Advanced respiratory: invasive ventilation, BPAP via trans-laryngeal tube or tracheostomy, CPAP via trans-laryngeal tube, extracorporeal respiratory support
- Basic respiratory: >50% oxygen by face mask, close observation due to potential for acute deterioration, physiotherapy/suction to clear secretions at least two-hourly, recently extubated after a period of mechanical ventilation, mask/hood CPAP/BPAP, non-invasive ventilation, CPAP via a tracheostomy, intubated to protect airway
- Advanced cardiovascular: multiple IV/rhythm controlling drugs (at least one vasoactive), continuous observation of cardiac output, intra-aortic balloon pump, temporary cardiac pacemaker
- Basic cardiovascular: central venous catheter, arterial line, single IV vasoactive/ rhythm controlling drug
- Renal: acute renal replacement therapy, renal replacement therapy for chronic renal failure where other organ support is received
- Liver: management of coagulopathy and/or portal hypertension for acute or chronic hepatocellular failure or primary acute hepatocellular failure
- Neurological: central nervous system depression sufficient to prejudice airway, invasive neurological monitoring, continuous IV medication to control seizures, therapeutic hypothermia

Publications

The following publications, based on Case Mix Programme data for patients critically ill with confirmed COVID-19, are published, in press or in preprint:

- Richards-Belle A, Orzechowska I, Doidge J, Thomas K, Harrison DA, Koelewyn A, Christian MD, Shankar-Hari M, Rowan KM, Gould DW. Critical care outcomes, for the first 200 patients with confirmed COVID-19, in England, Wales and Northern Ireland: a report from the ICNARC Case Mix Programme. *J Intensive Care Soc* 2020; doi:[10.1177/1751143720961672](https://doi.org/10.1177/1751143720961672)
- Richards-Belle A, Orzechowska I, Gould DW, Thomas K, Doidge JC, Mouncey PR, Christian MD, Shankar-Hari M, Harrison DA, Rowan KM. COVID-19 in critical care: epidemiology of the first epidemic wave across England, Wales and Northern Ireland. *Intensive Care Med* 2020; doi:[10.1007/s00134-020-06267-0](https://doi.org/10.1007/s00134-020-06267-0)
- Ferrando-Vivas P, Doidge J, Thomas K, Gould DW, Mouncey P, Shankar-Hari M, Young JD, Rowan KM, Harrison DA. Prognostic Factors for 30-day Mortality in Critically Ill Patients with Coronavirus Disease 2019: An Observational Cohort Study. *Crit Care Med* 2020; doi:[10.1097/CCM.0000000000004740](https://doi.org/10.1097/CCM.0000000000004740)
- Doidge JC, Gould DW, Ferrando-Vivas P, Mouncey PR, Thomas K, Shankar-Hari M, Harrison DA, Rowan KM. Trends in intensive care for patients with COVID-19 in England, Wales and Northern Ireland. *Am J Respir Crit Care Med* 2020; doi:[10.1164/rccm.202008-321OC](https://doi.org/10.1164/rccm.202008-321OC)

The following publications, based on external data sources linked with Case Mix Programme data for patients critically ill with confirmed COVID-19, are published, in press or in preprint:

- Hippisley-Cox J, Young D, Coupland C, Channon KM, Tan PS, Harrison DA, Rowan K, Aveyard P, Pavord ID, Watkinson PJ. Risk of severe COVID-19 disease with ACE inhibitors and angiotensin receptor blockers: cohort study including 8.3 million people. *Heart* 2020; doi:[10.1136/heartjnl-2020-317393](https://doi.org/10.1136/heartjnl-2020-317393)
- Mathur R, Rentsch CT, Morton C, Hulme WJ, Schultze A, MacKenna B, Eggo RM, Bhaskaran K, Wong AYS, Williamson EJ, Forbes H, Wing K, McDonald HI, Bates C, Bacon S, Walker AJ, Evans D, Inglesby P, Mehrkar A, Curtis HJ, DeVito NJ, Croker R, Drysdale H, Cockburn J, Parry J, Hester F, Harper S, Douglas IJ, Tomlinson L, Evans S, Grieve R, Harrison D, Rowan K, Khunti K, Chaturvedi N, Smeeth L, Goldacre B. Ethnic differences in COVID-19 infection, hospitalisation, and mortality: an OpenSAFELY analysis of 17 million adults in England. *medRxiv* 2020; doi:[10.1101/2020.09.22.20198754](https://doi.org/10.1101/2020.09.22.20198754)

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Please acknowledge the source of these data in all future presentations (oral and/or written) as follows:

“These data derive from the ICNARC Case Mix Programme Database. The Case Mix Programme is the national clinical audit of patient outcomes from adult critical care coordinated by the Intensive Care National Audit Research Centre (ICNARC). For more information on the representativeness and quality of these data, please contact ICNARC.”