

SYNOPSIS

04/16/2020

Review of “Temporal dynamics in viral shedding and transmissibility of COVID-19”

Article citation: He X, Lau EHY, Wu P, Deng X, Wang J, Hao X, et al. Temporal dynamics in viral shedding and transmissibility of COVID-19. Nat Med. 2020 Apr 15 [Epub ahead of print]. Available from: <https://doi.org/10.1038/s41591-020-0869-5>

One-Minute Summary

- This study **investigated the timing of viral shedding** in coronavirus disease 2019 (COVID-19) patients (n=94) and **modeled infectiousness patterns** using infector-infectee transmission pairs (n=77) inside and outside China.
- In the viral shedding study, **viral RNA loads in 94 patients peaked at symptom onset, becoming undetectable at 21 days post symptom onset (PSO).**
- In 77 infector-infectee transmission pairs, the fitted gamma distribution estimated a **mean serial interval of 5.8 days** (95% confidence interval (CI): 4.8-6.8) and a **median serial interval of 5.2 days** (95% CI: 4.1-6.4); 7.6% of all serial intervals were negative.
- The authors inferred that **infectiousness began 2.3 days (95% CI: 0.8-3.0) before symptom onset, peaked at 0.7 days (95% CI: -0.2-2.0) before symptom onset** and declined by 7 days PSO. The authors estimated the **proportion of presymptomatic transmission was 44%** (95% CI: 25-69).
- The authors conclude that **viral shedding in COVID-19 patients may begin 2 to 3 days prior to the onset of symptoms**, decreasing once symptoms appear. The infectiousness pattern of COVID-19 more closely resembles that of influenza than SARS.
- The authors suggest that **contact tracing should take into account index case activities 2 to 3 days prior to symptom onset, and social distancing for all plus enhanced personal hygiene** would be key to controlling community spread of COVID-19.

Additional Information

- Viral RNA was detected by quantitative RT-PCR on throat swabs.
- All suspected and confirmed cases admitted from January 21 to February 14, 2020 to a hospital in Guangzhou with at least one throat sample testing positive for COVID-19 were selected for the viral shedding study.
- The median age of 94 patients in the viral shedding study was 46.0 years (interquartile range [IQR]: 33-61), with equal distribution by sex and a median of 4 (IQR: 3-5) throats swabs performed on each patient (from symptom onset up to 32 days PSO).
- Upon admission, no patients were classified with severe or critical infection; however, during hospitalization, 16 (17%) infections were severe and 4 (4%) were critical.

- Government and media announcements from China and elsewhere were used to identify the infector-infectee pairs (47 pairs in China, 29 pairs outside China in Asia, 1 pair in the United States) that showed a clear epidemiologic link.
- The authors acknowledge that recall bias may influence their estimates of serial intervals, only if there was a difference in symptom recall between infector and infectee pairs. In addition, it is unclear whether various treatment regimens affected viral shedding patterns.

PHO Reviewer’s Comments

- Viral shedding pattern was based on detection of viral RNA and may not reflect infectiousness.
- Quality and reliability of data on exposure and symptom onset for the infector-infectee pairs may vary as these were extracted entirely from various public announcements.

Citation

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Review of “Temporal dynamics in viral shedding and transmissibility of COVID-19”. Toronto, ON: Queen’s Printer for Ontario; 2020.

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