

Dr Emmanuel M Makasa

Dear Colleagues,

This is an exciting APORG newletter, which talks to the success of the network across Africa. Currently, the ASOS-2 Trial is in the process of concluding. A landmark achievement by African clinician investigators. In order to determine if increased postoperative surveillance decreases mortality, it is hugely important that we present the best trial which includes as much data as possible. This will honour the contributions of all the investigators and patients across Africa who participated. To this end, it is important that all hospital investigators submit their data as soon as possible, and complete and submit their GCP (Good Clinical Practice) certificates. Sites without GCPs cannot be included in the trial, and so this is important.

Another exciting development is the African Covid-19 Critical Care Outcomes Study (ACCCOS) which hopefully will provide data on resources and interventions which may be associated with better outcomes in our critically ill Covid-19 patients. It is hoped that these data could be rapidly communicated with the network to help provide guidance in the management of these patients across Africa during the pandemic.

Please enrol your sites in the study, as the contribution of many sites are needed to generate the data need to provide this guidance timeously.

Look after yourselves and #BeSafe Regards

Emmanuel

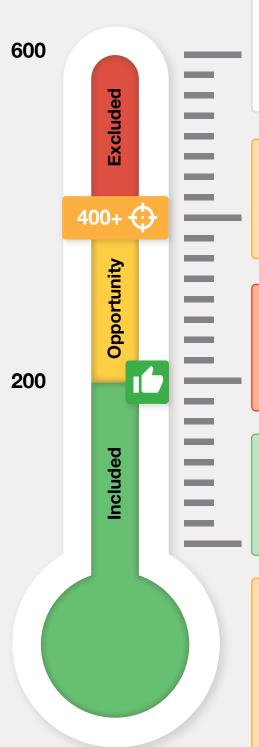


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Good Clinical Practice (GCP) in ASOS-2



Thank you for your contribution to the ASOS-2 Trial. Your endeavours show the world that Africa can conduct quality research.



GCP is the international ethical and scientific quality standard for conducting clinical trials involving human participants

ASOS-2 must demonstrate to the international scientific community that our African network of investigators can conduct research with integrity

ASOS-2 randomised over 600 hospitals in the trial. Because of extreme circumstances across Africa, 145 hospitals were excluded.

To date about 200 hospitals have provided their data with a GCP certificate for their hospital and are included in the trial

It is our goal to include at **least 400 hospitals** in the analysis. To achieve this goal and a valid outcome from this ground-breaking trial, every remaining hospital's data and GCP certificate matters. **Everyone of these hospitals is important to the** success of ASOS-2



Don't miss out on this landmark Trial because you don't have a GCP. Every hospital counts, every patient matters and every GCP is necessary. https://elearning.trree.org/

https://globalhealthtrainingcentre.tghn.org/ich-good-clinical-practice/



BACKGROUND

The infectious disease COVID-19, caused by coronavirus SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2), has been declared a pandemic and an international healthcare emergency by the World Health Organization (WHO). It has spread across the globe, overwhelming healthcare systems by causing high rates of critical illness. Mortality from COVID-19 exceeds 4%, with older people with comorbidities being extremely vulnerable. It is expected that between 50-80% of the world's population may contract SARS-CoV-2 over the next two years.

We expect the outcomes to be potentially worse in Africa, because firstly, there is a limited workforce, and secondly there are limited intensive care facilities and critical care resources across Africa to provide sufficient care.

It is important therefore to establish what resources, comorbidities and interventions are potentially associated with either mortality or survival in patients with COVID-19 who are referred for critical care in Africa. Rapid dissemination of these findings may help mitigate mortality from COVID-19 in critical care patients in Africa. These points provide the rationale for the African COVID-19 Critical Care Outcomes Study (ACCCOS).

STUDY OBJECTIVES

In patients with suspected or known COVID-19 infection in Africa;

- 1. To identify critical care resources associated with survival,
- 2. To identify patient comorbidities and other risk factors associated with in-hospital mortality,
- 3. To identify in hospital interventions associated with in-hospital survival.

STUDY DESIGN

- An African multi-centre prospective observational cohort study of adult (≥18 years) patients
 referred to critical care or high-care units with suspected or known COVID-19 infection. Patient
 follow up will be for a maximum of 30 days in-hospital.
- The primary outcome is in-hospital mortality in adult patients admitted to critical care or highcare units following suspected or known COVID-19 infection in Africa.
- The intention is to provide a representative sample of the mortality and the risk factors associated with mortality in adult patients with suspected or known COVID-19 referred for critical care in Africa. This study will run between April to December 2020.

PREPARATORY WORK

This study is built on the successful African Perioperative Research Group (APORG) of over 600
hospitals in over 40 African countries which has successfully conducted the African Surgical
Outcomes Study (ASOS).

IMPORTANCE OF THIS STUDY

 To decrease the mortality associated with severe COVID-19 infection in Africa, it is important to rapidly establish risk factors for adverse outcomes, and resources potentially associated with survival. The APORG network has the capacity to provide these data timeously.