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ICNARC report on COVID-19 in critical care 03 July 2020

This report presents analyses of data on patients critically ill with confirmed COVID-19 reported to ICNARC up to 4pm on 02 July 2020 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). 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 participating in the Case Mix Programme are asked to:

- notify ICNARC as soon as they have an admission with confirmed COVID-19;
- submit early data for admissions with confirmed COVID-19, including demographics and 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.

The same data are reported for an historic cohort of patients critically ill with viral pneumonia (non-COVID-19) admitted between 1 January 2017 and 31 December 2019.

Contents

Participation and population coverage	4
Patient characteristics	8
Patient characteristics by ethnicity	12
Patient characteristics by receipt of organ support	14
Outcomes, duration of critical care and organ support	18
Outcomes by patient characteristics	23
Outcomes by receipt of organ support	25
Patient characteristics and outcomes for longer stay patients	31
Multivariable analyses	34
Data completeness	38
Definitions	39
Acknowledgement	40

List of tables

Table 1	Patient characteristics: demographics
Table 2	Patient characteristics: medical history and indicators of acute severity *9
Table 3	Patient characteristics: demographics by ethnicity * 12
Table 4	Patient characteristics: medical history and indicators of acute severity by
	ethnicity *
Table 5	Patient characteristics: demographics by receipt of respiratory support * 14
Table 6	Patient characteristics: medical history and indicators of acute severity by receipt
	of respiratory support * 15
Table 7	Patient characteristics: demographics by receipt of renal support *
Table 8	Patient characteristics: medical history and indicators of acute severity by receipt
	of renal support * 17
Table 9	Outcome, duration of critical care and organ support *
Table 10	Outcome by patient characteristics
Table 11	Outcome, duration of critical care and organ support by ethnicity *
Table 12	Outcome by combinations of organ support *
Table 13	Outcome, duration of critical care and organ support by receipt of respiratory
	support *
Table 14	Outcome, duration of critical care and organ support by receipt of renal support *
Table 15	Outcome by receipt of respiratory support * and patient characteristics
Table 16	Outcome by receipt of renal support * and patient characteristics
Table 17	Patient characteristics: demographics for patients receiving critical care for a
	total of 28 days or more
Table 18	Patient characteristics: medical history and indicators of acute severity for
	patients receiving critical care for a total of 28 days or more
Table 19	Outcome, duration of critical care and organ support for patients receiving critical
	care for a total of 28 days or more
Table 20	Data completeness of key variables

List of figures

Figure 1	Numbers of patients with data included in this report and outstanding *4
Figure 2	New patients included this week by week of start critical care
Figure 3	New patients with a start of critical care in the last two weeks by region
Figure 4	Number of new patients critically ill with confirmed COVID-19 by date of start of
	critical care
Figure 5	Cumulative number of patients critically ill with confirmed COVID-19 by date of
	start of critical care
Figure 6	Total number of patients critically ill with confirmed COVID-19 by date *7
Figure 7	Number of admissions critically ill with confirmed COVID-19 by Critical Care
	Network *7
Figure 8	Age and sex distribution of patients critically ill with confirmed COVID-19 10
Figure 9	Ethnicity distribution of patients critically ill with confirmed COVID-1910
Figure 10	Index of Multiple Deprivation (IMD) * distribution of patients critically ill with
	confirmed COVID-19 11
Figure 11	BMI distribution of patients critically ill with confirmed COVID-1911
Figure 12	Critical care and acute hospital outcomes among patients with at least 24h data
	received
Figure 13	Cumulative outcomes by date of start of critical care *
Figure 14	Survival and discharge among patients with at least 24h data received
Figure 15	Percentage of patients receiving organ support *
Figure 16	Duration of organ support received *
Figure 17	Median lengths of stay among patients with hospital outcome data received \dots 22
Figure 18	Inter-hospital critical care transfers and readmissions
Figure 19	Survival and discharge by mechanical ventilation during the first 24 hours * 25
Figure 20	Hazard ratios and 95% confidence intervals from Cox proportional hazards
	regression model for death within 30 days following start of critical care:
	demographics and medical history
Figure 21	Hazard ratios and 95% confidence intervals from Cox proportional hazards
	regression model for death within 30 days following start of critical care:
	physiology (1)
Figure 22	Hazard ratios and 95% confidence intervals from Cox proportional hazards
	regression model for death within 30 days following start of critical care:
	physiology (2)

* Please see individual notes for Tables/Figures

Participation and population coverage

Critical care unit participation

Total number of units:	<u>289</u>
Units with at least one patient notified:	258
Units with zero patients:	29
Units with uncertain participation:	2

Admissions to critical care

To date, ICNARC have been notified of 13,025 admissions for critical care with confirmed COVID-19, either at or after the start of critical care, in England, Wales and Northern Ireland. Of these, early data covering the first 24 hours of critical care have been submitted to ICNARC for 12,615 admissions for 10,287 patients (Figure 1). Of the 10,287 patients, 9768 have outcomes reported and 519 patients were last reported as still receiving critical care.

Of the 157 new patients included in the report for the first time this week, 50 were admitted to critical care within the last week (Figure 2), with the majority representing back-filling of cases from the peak of the epidemic. Of 105 patients with a start of critical care in the last two weeks (18/06/2020 to 01/07/2020), the largest numbers were admitted in the North West, Midlands and North East and Yorkshire regions (Figure 3).

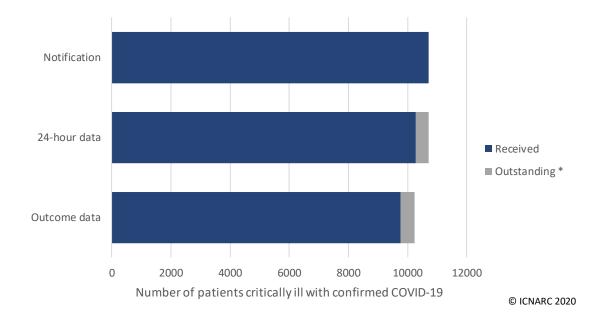


Figure 1 Numbers of patients with data included in this report and outstanding *

* Please note that 24-hour data are considered outstanding where ICNARC was notified of the admission 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.

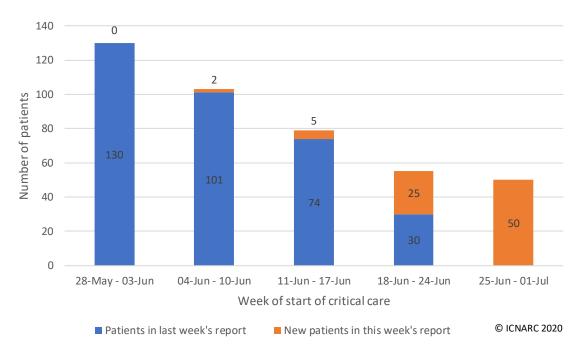


Figure 2 New patients included this week by week of start critical care

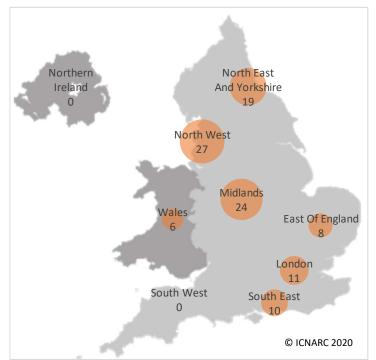


Figure 3 New patients with a start of critical care in the last two weeks by region

The numbers of new patients, cumulative numbers of patients and number of patients in critical care by date are shown in Figures 4-6. The largest numbers of patients (2960) have been managed by the three London Operational Delivery Networks (Figure 7). Please note that Figures 4-6 are affected by a variable lag time for submission of data (shaded grey).

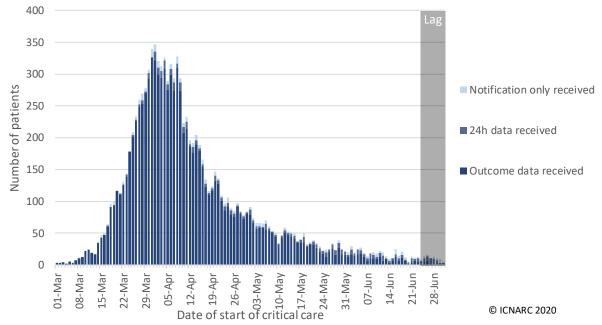


Figure 4 Number of new patients critically ill with confirmed COVID-19 by date of start of critical care

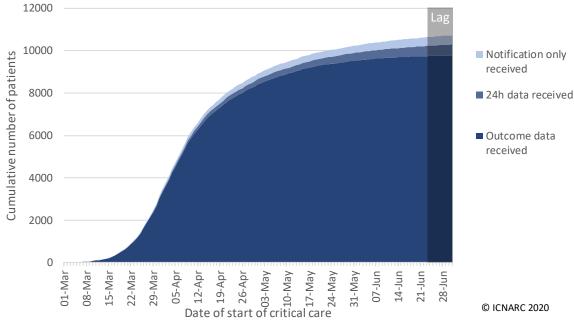
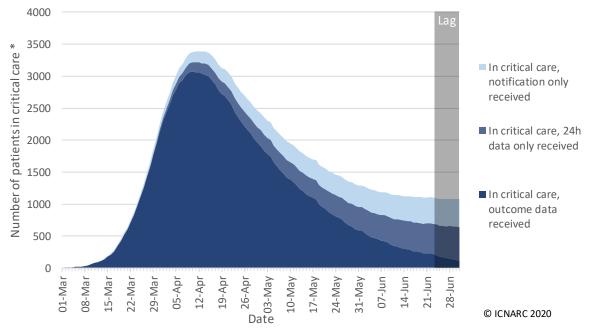
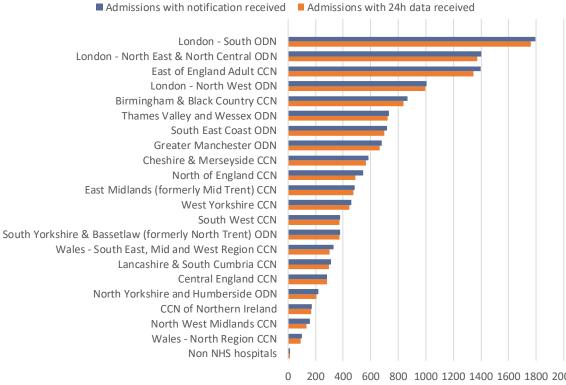


Figure 5 Cumulative number of patients critically ill with confirmed COVID-19 by date of start of critical care





* Please note that patients whose outcome data have not been received are assumed to remain in critical care as of 02 July 2020.



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0 200 400 600 800 1000 1200 1400 1600 1800 2000 Number of admissions with confirmed COVID-19 *

Figure 7 Number of admissions critically ill with confirmed COVID-19 by Critical Care Network *

ODN: Organisational Delivery Network; CCN: Critical Care Network. * Please note that this figure represents the number of admissions (i.e. includes transfers between units and readmissions) and NOT the number of patients.

Patient characteristics

Characteristics of patients critically ill with confirmed COVID-19 are summarised in Table 1 and Table 2 and compared with an historic cohort of patients critically ill with viral pneumonia (non-COVID-19) admitted between 1 January 2017 and 31 December 2019.

Demographics	Patients with confirmed COVID-19 and 24h data (N=10287)	Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5782)
Age at admission (years) [N=10273]		
Mean (SD)	58.8 (12.7)	58.0 (17.4)
Median (IQR)	60 (51, 68)	61 (48, 71)
Sex, n (%) [N=10278]		
Female	3034 (29.5)	2641 (45.7)
Male	7244 (70.5)	3141 (54.3)
Currently or recently pregnant, n (% of females	s aged 16-49) [N=730]	
Currently pregnant	28 (3.8)	56 (7.4)
Recently pregnant (within 6 weeks)	37 (5.1)	29 (3.8)
Not known to be pregnant	665 (91.1)	674 (88.8)
Ethnicity *, n (%) [N=9822]		
White	6485 (66.0)	4951 (88.4)
Mixed	181 (1.8)	52 (0.9)
Asian	1527 (15.5)	325 (5.8)
Black	957 (9.7)	155 (2.8)
Other	672 (6.8)	117 (2.1)
Index of Multiple Deprivation (IMD) quintile *, n	(%) [N=10122]	
1 (least deprived)	1474 (14.6)	873 (15.3)
2	1637 (16.2)	999 (17.5)
3	1971 (19.5)	1115 (19.5)
4	2466 (24.4)	1232 (21.6)
5 (most deprived)	2574 (25.4)	1489 (26.1)
Body mass index *, n (%) [N=9662]		
<18.5	72 (0.7)	310 (5.5)
18.5-<25	2450 (25.4)	1933 (34.2)
25-<30	3353 (34.7)	1691 (29.9)
30-<40	3030 (31.4)	1330 (23.5)
40+	757 (7.8)	394 (7.0)

Table 1 Patient characteristics: demographics

* Please see Definitions on page 39.

Medical history	Patients with confirmed COVID-19 and 24h data (N=10287)	Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5782)
Dependency prior to admission to acute hospital *, r	n (%) [N=10075]	
Able to live without assistance in daily activities	9086 (90.2)	4244 (73.6)
Some assistance with daily activities	952 (9.4)	1392 (24.1)
Total assistance with all daily activities	37 (0.4)	134 (2.3)
Very severe comorbidities *, n (%) [N=10133]		
Cardiovascular	70 (0.7)	78 (1.4)
Respiratory	117 (1.2)	295 (5.1)
Renal	171 (1.7)	120 (2.1)
Liver	45 (0.4)	54 (0.9)
Metastatic disease	56 (0.6)	68 (1.2)
Haematological malignancy	185 (1.8)	268 (4.6)
Immunocompromise	355 (3.5)	503 (8.7)
Prior hospital length of stay [N=10274]		
Mean (SD)	2.5 (6.3)	2.7 (13.0)
Median (IQR)	1 (0, 3)	1 (0, 2)
CPR within previous 24h, n (%) [N=10252]		
In the community	54 (0.5)	21 (0.4)
In hospital	71 (0.7)	85 (1.5)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=9901]	5927 (59.9)	2482 (43.0)
APACHE II Score [N=10042]		
Mean (SD)	15.0 (5.3)	17.2 (6.3)
Median (IQR)	15 (11, 18)	17 (13, 21)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=9467]	15.8 (11.2, 22.0)	18.0 (11.6, 26.4)
PaO ₂ /FiO ₂ ratio †, n (%) [N=9467]	· /	. ,
≤ 13.3 kPa (≤ 100 mmHg)	3504 (37.0)	1819 (33.3)
> 13.3 and \leq 26.7 kPa (> 100 and \leq 200 mmHg)	4537 (47.9)	2318 (42.4)
> 26.7 kPa (> 200 mmHg)	1426 (15.1)	1328 (24.3)

Table 2 Patient characteristics: medical history and indicators of acute severity *

* Please see Definitions on page 39. 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 8. The distribution of ethnicity, matched on 2011 census ward for location of patients critically ill with COVID-19, is presented in Figure 9.

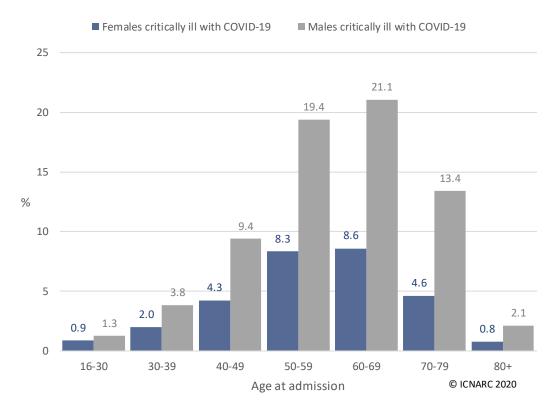


Figure 8 Age and sex distribution of patients critically ill with confirmed COVID-19

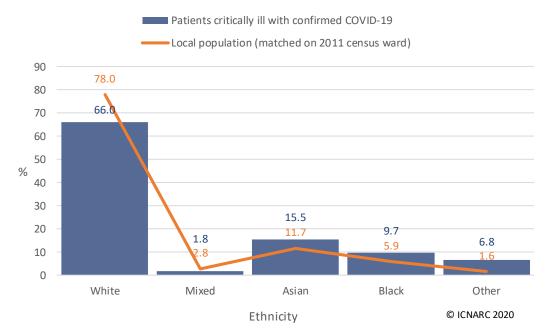


Figure 9 Ethnicity distribution of patients critically ill with confirmed COVID-19

The distribution of Index of Multiple Deprivation (IMD) is presented in Figure 10. 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 11.

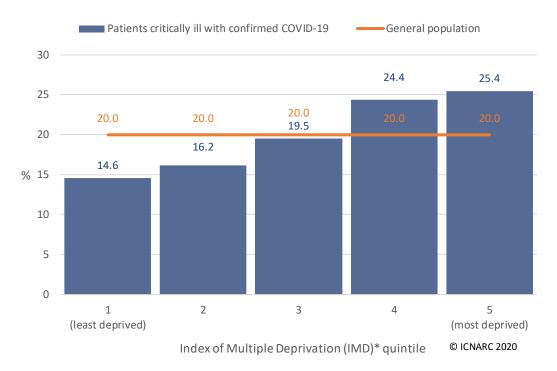


Figure 10 Index of Multiple Deprivation (IMD) * distribution of patients critically ill with confirmed COVID-19

* Please see Definitions on page 39.

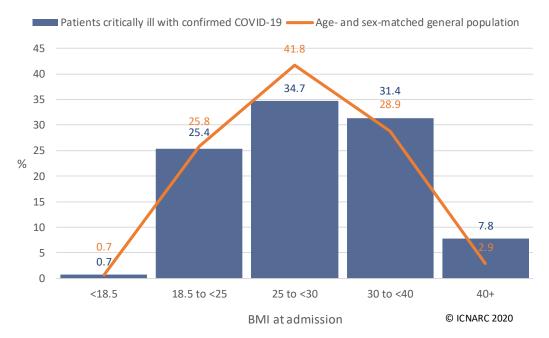


Figure 11 BMI distribution of patients critically ill with confirmed COVID-19

Patient characteristics by ethnicity

Characteristics of patients critically ill with confirmed COVID-19 by ethnicity, for patients of white ethnicities compared with patients of all non-white ethnicities combined (mixed, Asian, black or other), are summarised in Table 3 and Table 4.

Demographics	Patients of white ethnicity (N=6485)	Patients of non-white ethnicity (N=3337)
Age at admission (years) [N=9808]		
Mean (SD)	60.5 (12.4)	55.4 (12.4)
Median (IQR)	61 (53, 70)	57 (47, 64)
Sex, n (%) [N=9814]		
Female	1933 (29.8)	983 (29.5)
Male	4550 (70.2)	2348 (70.5)
Currently or recently pregnant, n (% of females)	[N=705]	
Currently pregnant	12 (3.0)	15 (4.9)
Recently pregnant (within 6 weeks)	13 (3.3)	23 (7.5)
Not known to be pregnant	373 (93.7)	269 (87.6)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=9671]	
1 (least deprived)	1144 (17.9)	258 (7.9)
2	1188 (18.6)	375 (11.4)
3	1290 (20.2)	588 (17.9)
4	1336 (20.9)	1010 (30.8)
5 (most deprived)	1436 (22.5)	1046 (31.9)
Body mass index *, n (%) [N=9238]		
<18.5	47 (0.8)	23 (0.7)
18.5-<25	1378 (22.7)	939 (29.7)
25-<30	2061 (33.9)	1156 (36.6)
30-<40	2033 (33.4)	871 (27.6)
40+	561 (9.2)	169 (5.4)

 Table 3
 Patient characteristics: demographics by ethnicity *

* Please see Definitions on page 39. Patients with ethnicity recorded as 'not stated' excluded.

Table 4 Patient characteristics: medical history and indicators of acute severity by ethnicity *

Medical history	Patients of white ethnicity (N=6485)	Patients of non-white ethnicity (N=3337)
Dependency prior to admission to acute hospital *, n ((%) [N=9640]	
Able to live without assistance in daily activities	5653 (88.7)	3046 (93.2)
Some assistance with daily activities	693 (10.9)	212 (6.5)
Total assistance with all daily activities	25 (0.4)	11 (0.3)
Very severe comorbidities *, n (%) [N=9689]		
Cardiovascular	57 (0.9)	10 (0.3)
Respiratory	89 (1.4)	22 (0.7)
Renal	73 (1.1)	95 (2.9)
Liver	33 (0.5)	9 (0.3)
Metastatic disease	46 (0.7)	8 (0.2)
Haematological malignancy	139 (2.2)	34 (1.0)
Immunocompromise	252 (3.9)	79 (2.4)
Prior hospital length of stay [N=9814]		
Mean (SD)	2.6 (6.1)	2.2 (6.5)
Median (IQR)	1 (0, 3)	1 (0, 3)
CPR within previous 24h, n (%) [N=9796]		
In the community	33 (0.5)	17 (0.3)
In hospital	38 (0.6)	25 (0.4)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=9467]	3508 (55.8)	2159 (67.9)
APACHE II Score [N=9599]		
Mean (SD)	15.1 (5.2)	14.9 (5.4)
Median (IQR)	15 (12, 18)	14 (11, 18)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=9056]	16.0 (11.3, 22.3)	15.5 (11.3, 21.8)
PaO ₂ /FiO ₂ ratio †, n (%) [N=9056]		
≤ 13.3 kPa (≤ 100 mmHg)	2189 (36.6)	1145 (37.2)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	2868 (48.0)	1495 (48.5)
> 26.7 kPa (> 200 mmHg)	918 (15.4)	441 (14.3)

* Please see Definitions on page 39. Patients with ethnicity recorded as 'not stated' excluded. 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 from the first 24 hours of critical care.

Patient characteristics by receipt of organ support

Characteristics of patients critically ill with confirmed COVID-19 who received advanced respiratory support at any point during critical care and those who received basic respiratory support only are summarised in Table 5 and Table 6. Characteristics of patients critically ill with confirmed COVID-19 who received renal support at any point during critical care and those who did not receive renal support are summarised in Table 7 and Table 8. Most patients who received renal support (95.2%) also received advanced respiratory support.

Demographics	Patients receiving advanced respiratory support (N=7032)	Patients receiving only basic respiratory support (N=2436)
Age at admission (years) [N=9456]		
Mean (SD)	58.7 (12.0)	59.3 (14.2)
Median (IQR)	60 (51, 67)	60 (50, 70)
Sex, n (%) [N=9460]		
Female	1960 (27.9)	807 (33.1)
Male	5065 (72.1)	1628 (66.9)
Currently or recently pregnant, n (% of females age	ed 16-49) [N=662]	
Currently pregnant	13 (2.9)	10 (4.7)
Recently pregnant (within 6 weeks)	24 (5.3)	9 (4.3)
Not known to be pregnant	414 (91.8)	192 (91.0)
Ethnicity *, n (%) [N=9067]		
White	4236 (63.0)	1777 (76.0)
Mixed	132 (2.0)	33 (1.4)
Asian	1102 (16.4)	279 (11.9)
Black	748 (11.1)	140 (6.0)
Other	510 (7.6)	110 (4.7)
Index of Multiple Deprivation (IMD) quintile *, n (%)	[N=9320]	
1 (least deprived)	962 (13.9)	405 (17.0)
2	1100 (15.9)	419 (17.6)
3	1381 (19.9)	429 (18.0)
4	1755 (25.3)	516 (21.6)
5 (most deprived)	1735 (25.0)	618 (25.9)
Body mass index *, n (%) [N=8920]		
<18.5	35 (0.5)	23 (1.1)
18.5-<25	1640 (24.3)	567 (26.0)
25-<30	2372 (35.2)	745 (34.2)
30-<40	2185 (32.4)	642 (29.4)
40+	508 (7.5)	203 (9.3)

Table 5 Patient characteristics: demographics by receipt of respiratory support *

* Please see Definitions on page 39. Patients receiving no respiratory support excluded due to small numbers.

Medical history	Patients receiving advanced respiratory support (N=7032)	Patients receiving only basic respiratory support (N=2436)
Dependency prior to admission to acute hospital *, n	(%) [N=9326]	
Able to live without assistance in daily activities	6410 (92.4)	2020 (84.5)
Some assistance with daily activities	515 (7.4)	351 (14.7)
Total assistance with all daily activities	10 (0.1)	20 (0.8)
Very severe comorbidities *, n (%) [N=9359]		
Cardiovascular	22 (0.3)	41 (1.7)
Respiratory	40 (0.6)	69 (2.9)
Renal	87 (1.3)	65 (2.7)
Liver	24 (0.3)	16 (0.7)
Metastatic disease	22 (0.3)	23 (1.0)
Haematological malignancy	105 (1.5)	68 (2.8)
Immunocompromise	208 (3.0)	122 (5.1)
Prior hospital length of stay [N=9466]		
Mean (SD)	2.2 (5.5)	2.9 (7.2)
Median (IQR)	1 (0, 3)	1 (0, 3)
CPR within previous 24h, n (%) [N=9458]		
In the community	45 (0.4)	5 (0.2)
In hospital	65 (0.6)	2 (0.1)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=9231]	5495 (80.2)	
APACHE II Score [N=9315]		
Mean (SD)	15.4 (5.1)	14.1 (5.5)
Median (IQR)	15 (12, 18)	14 (10, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=8857]	15.2 (10.8, 21.1)	17.6 (12.7, 24.2)
PaO ₂ /FiO ₂ ratio †, n(%) [N=8857]		
≤ 13.3 kPa (≤ 100 mmHg)	2716 (40.0)	592 (28.6)
> 13.3 and \leq 26.7 kPa (> 100 and \leq 200 mmHg)	3206 (47.2)	1097 (53.0)
> 26.7 kPa (> 200 mmHg)	864 (12.7)	382 (18.4)

Table 6Patient characteristics: medical history and indicators of acute severity by
receipt of respiratory support *

* Please see Definitions on page 39. Patients receiving no respiratory support excluded due to small numbers. Indicators of acute severity are based on data from the first 24 hours of critical care. \dagger Derived from the arterial blood gas with the lowest PaO₂ from the first 24 hours of critical care.

Demographics	Patients receiving any renal support (N=2577)	Patients not receiving any renal support (N=7109)
Age at admission (years) [N=9675]		
Mean (SD)	59.2 (11.0)	58.7 (13.2)
Median (IQR)	60 (52, 67)	60 (51, 68)
Sex, n (%) [N=9678]		
Female	586 (22.8)	2269 (31.9)
Male	1988 (77.2)	4835 (68.1)
Currently or recently pregnant, n (% of female	s aged 16-49) [N=679]	
Currently pregnant	2 (1.5)	23 (4.2)
Recently pregnant (within 6 weeks)	4 (2.9)	32 (5.9)
Not known to be pregnant	130 (95.6)	488 (89.9)
Ethnicity *, n (%) [N=9268]		
White	1455 (59.0)	4697 (69.0)
Mixed	42 (1.7)	124 (1.8)
Asian	408 (16.6)	1005 (14.8)
Black	380 (15.4)	527 (7.7)
Other	180 (7.3)	450 (6.6)
Index of Multiple Deprivation (IMD) quintile *, r	n (%) [N=9530]	
1 (least deprived)	337 (13.3)	1060 (15.2)
2	377 (14.8)	1178 (16.9)
3	526 (20.7)	1317 (18.8)
4	649 (25.6)	1678 (24.0)
5 (most deprived)	651 (25.6)	1757 (25.1)
Body mass index *, n (%) [N=9128]	· ·	· · ·
<18.5	14 (0.6)	51 (0.8)
18.5-<25	562 (22.5)	1723 (26.0)
25-<30	853 (34.2)	2325 (35.1)
30-<40	869 (34.8)	2008 (30.3)
40+	197 (7.9)	526 (7.9)

Table 7 Patient characteristics: demographics by receipt of renal support *

* Please see Definitions on page 39. Includes 167 patients requiring chronic renal replacement therapy for end stage renal disease prior to critical care; outcomes for these patients are similar.

Table 8	Patient characteristics: medical history and indicators of acute severity by
	receipt of renal support *

Medical history	Patients receiving any renal support (N=2577)	Patients not receiving any renal support (N=7109)
Dependency prior to admission to acute hospital *, n	(%) [N=9540]	
Able to live without assistance in daily activities	2359 (92.4)	6237 (89.3)
Some assistance with daily activities	190 (7.4)	717 (10.3)
Total assistance with all daily activities	5 (0.2)	32 (0.5)
Very severe comorbidities *, n (%) [N=9574]		
Cardiovascular	12 (0.5)	54 (0.8)
Respiratory	13 (0.5)	99 (1.4)
Renal	133 (5.2)	34 (0.5)
Liver	5 (0.2)	37 (0.5)
Metastatic disease	10 (0.4)	43 (0.6)
Haematological malignancy	36 (1.4)	142 (2.0)
Immunocompromise	81 (3.2)	263 (3.7)
Prior hospital length of stay [N=9684]		
Mean (SD)	2.2 (5.2)	2.5 (6.6)
Median (IQR)	1 (0, 3)	1 (0, 3)
CPR within previous 24h, n (%) [N=9676]		
In the community	12 (0.2)	37 (0.6)
In hospital	16 (0.2)	53 (0.8)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=9432]	1970 (78.0)	3691 (53.5)
APACHE II Score [N=9525]		
Mean (SD)	16.9 (5.5)	14.3 (5.0)
Median (IQR)	16 (13, 20)	14 (11, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=9009]	14.4 (10.4, 20.0)	16.5 (11.6, 23.1)
PaO ₂ /FiO ₂ ratio †, n(%) [N=9009]		
≤ 13.3 kPa (≤ 100 mmHg)	1093 (44.0)	2220 (34.0)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	1115 (44.9)	3205 (49.1)
> 26.7 kPa (> 200 mmHg)	278 (11.2)	1098 (16.8)

* Please see Definitions on page 39. Includes 167 patients requiring chronic renal replacement therapy for end stage renal disease prior to critical care; outcomes for these patients are similar. 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 from the first 24 hours of critical care.

Outcomes, duration of critical care and organ support

Critical care outcomes have been received for 9768 (of 10,287) patients, of whom 3948 patients have died and 5820 have been discharged alive from critical care (Figures 12-14). Duration of critical care and receipt and duration of organ support in critical care are summarised in Table 9 and compared with an historic cohort of patients critically ill with viral pneumonia (non-COVID-19) admitted between 1 January 2017 and 31 December 2019. Receipt and duration of organ support are summarised graphically in Figure 15 and in Figure 16, respectively. Of the 5820 patients discharged from critical care, 742 (12.8%) were last reported to be still in an acute hospital setting and 254 (4.4%) died before being discharged from hospital (Figure 12).

Please note that Figure 14 is biased towards longer lengths of stay in critical care due to the time lag in notification of a patients' discharge or death, while Table 9 and Figures 15 and 16 are biased towards patients with shorter lengths of stay in critical care due to the ongoing nature of the UK epidemic. Figure 13 and Figure 14 assume that patients are still in critical care unless ICNARC has been notified otherwise, and Table 9 and Figures 15 and 16 include only those patients who have either died or been discharged from critical care.

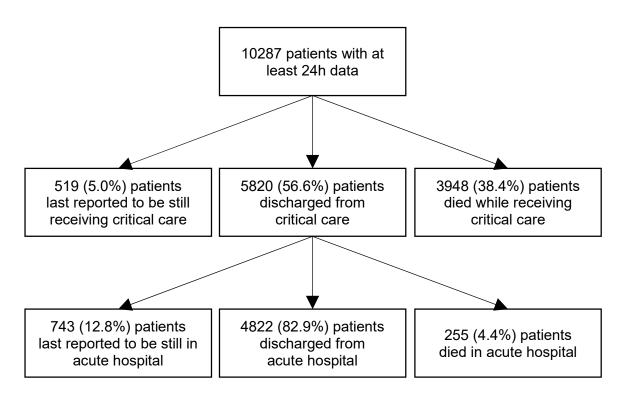


Figure 12 Critical care and acute hospital outcomes among patients with at least 24h data received

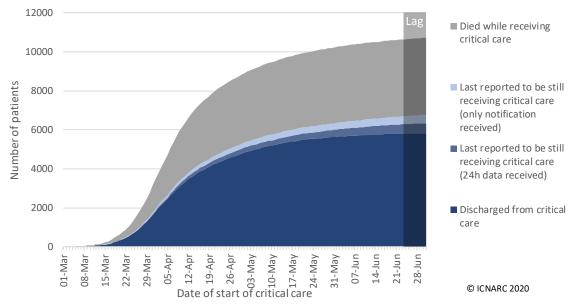


Figure 13 Cumulative outcomes by date of start of critical care *

* Please note that patients whose outcome data have not been received are assumed to remain in critical care as of 02 July 2020.

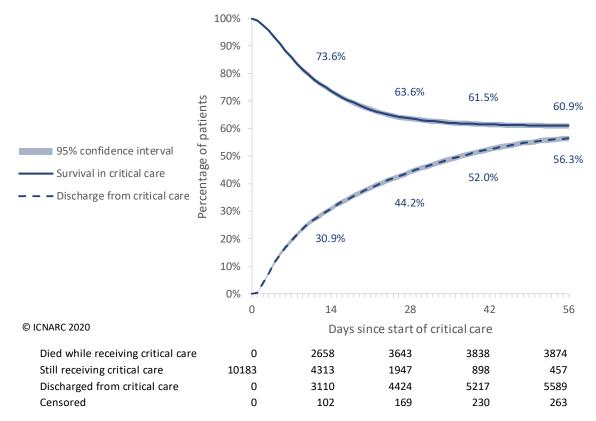


Figure 14 Survival and discharge among patients with at least 24h data received

Please note that due to the time lag in notification of patients' discharge or death, this figure is expected to be biased towards *longer* lengths of stay in critical care. Patients who are still in critical care are included only for the period in which they are known to have been in critical care, i.e. from their date of admission until 02 July 2020. Due to the ongoing nature of the UK epidemic, the total number of patients available for reporting becomes smaller at longer lengths of follow-up. Compared with the survival statistics presented in Tables 9, 13 and 14, this approach makes better use of all available data, including data about patients who are still in critical care.

Critical care outcomes among patients who have been discharged or died	Patients with COVID-19 and outcome reported (N=9768)	Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5626)
Outcome at end of critical care, n (%)		
Discharged	5820 (59.6)	4423 (78.6)
Died	3948 (40.4)	1203 (21.4)
Duration of critical care		
Duration of critical care † (days), median (IQR)		
Survivors	12 (5, 27)	6 (3, 13)
Non-survivors	9 (5, 16)	6 (3, 13)
Organ support (Critical Care Minimum Dataset) *		
Receipt of organ support, at any point, n (%)		
Advanced respiratory support	7032 (72.5)	2721 (48.4)
Basic respiratory support	6478 (66.7)	4527 (80.5)
Advanced cardiovascular support	2887 (29.8)	1261 (22.4)
Basic cardiovascular support	9026 (92.9)	5219 (92.8)
Renal support	2577 (26.6)	957 (17.0)
Liver support	97 (1.0)	53 (0.9)
Neurological support	836 (8.6)	320 (5.7)
Combinations of advanced respiratory, advanced cardiovascular and renal support, n (%):		
Advanced respiratory support only	3072 (31.4)	1257 (22.3)
Advanced cardiovascular support only	42 (0.4)	79 (1.4)
Renal support only	111 (1.1)	116 (2.1)
Advanced respiratory and advanced cardiovascular support only	1488 (15.2)	640 (11.4)
Advanced respiratory and renal support only	1128 (11.5)	299 (5.3)
Advanced cardiovascular and renal support only	13 (0.1)	17 (0.3)
Advanced respiratory, advanced cardiovascular and renal support	1344 (13.8)	525 (9.3)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	13 (7, 22)	9 (4, 17)
Total (advanced + basic) respiratory support	11 (5, 21)	6 (3, 12)
Advanced cardiovascular support	3 (2, 6)	3 (2, 5)
Total (advanced + basic) cardiovascular support	11 (5, 21)	6 (3, 12)
Renal support	7 (3, 14)	6 (3, 12)

Table 9 Outcome, duration of critical care and organ support *

Please note that owing to the ongoing nature of the epidemic, the sample of patients with confirmed COVID-19 represented in this table is biased towards patients with *shorter* lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly. This does not apply to the comparison patients with viral pneumonia (non-COVID-19), 2017-19. * Please see Definitions on page 39. † Duration of critical care is from original admission to critical care until final unit outcome and includes any time spent outside critical care areas (e.g. prior to any readmissions).

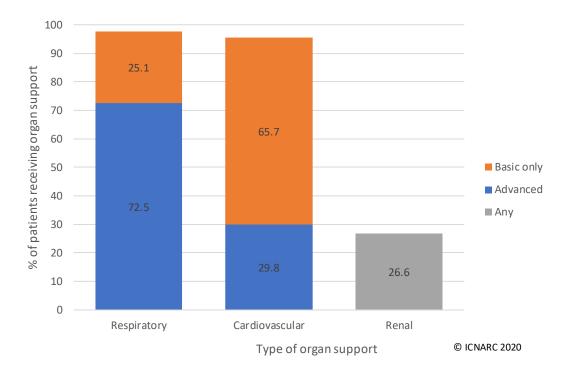
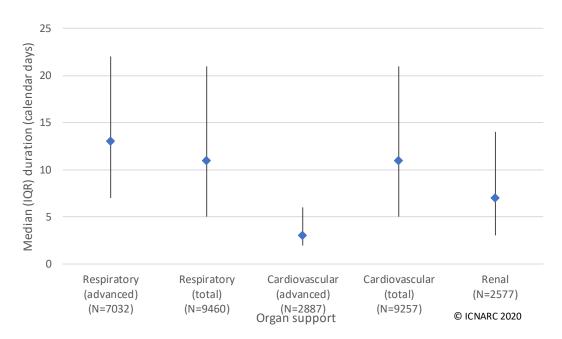


Figure 15 Percentage of patients receiving organ support *

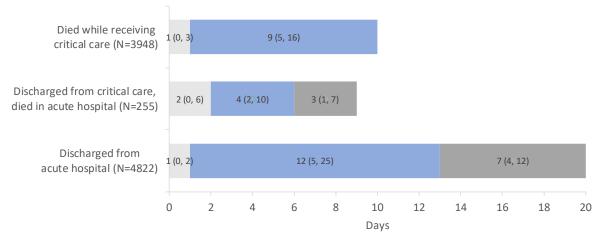
Please note that owing to the ongoing nature of the epidemic, the sample of patients with confirmed COVID-19 represented in this figure is biased towards patients with *shorter* lengths of stay in critical care prior to discharge or death, i.e. patients who died or recovered quickly. * Please see Definitions on page 39.





This Figure presents median and interquartile range, in calendar days. Please note that owing to the ongoing nature of the epidemic, the sample of patients with confirmed COVID-19 represented in this figure is biased towards patients with *shorter* lengths of stay in critical care prior to discharge or death, i.e. patients who died or recovered quickly. * Please see Definitions on page 39.

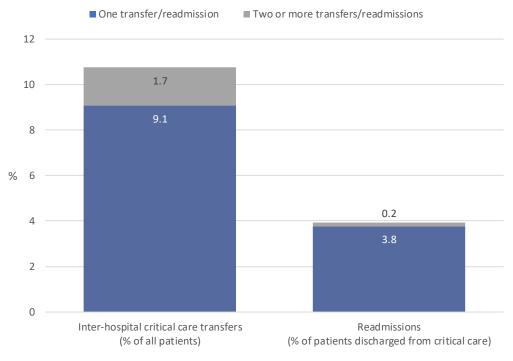
The median length of stay in hospital prior to the start of critical care, duration of critical care, and subsequent length of stay in hospital following discharge from critical care are summarised in Figure 17. Among patients who died in acute hospital following discharge from critical care, 21.8% were reported to have been discharged from critical care for palliative care. A total of 1292 inter-hospital critical care transfers for 1106 patients have been reported, as well as 240 readmissions for 229 patients (Figure 18).



■ Prior hospital length of stay ■ Duration of critical care ■ Subsequent hospital length of stay © ICNARC 2020

Figure 17 Median lengths of stay among patients with hospital outcome data received

The numbers within each bar are the median and interquartile range, in days. Please note that owing to the ongoing nature of the epidemic, the sample of patients with confirmed COVID-19 represented in this figure is biased towards patients with *shorter* lengths of stay in acute hospital prior to discharge or death, i.e. patients who died or recovered more quickly.



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Figure 18 Inter-hospital critical care transfers and readmissions

Source: ICNARC Case Mix Programme Database 03 July 2020 22

Outcomes by patient characteristics

Critical care outcomes for patients critically ill with confirmed COVID-19 across major patient subgroups are summarised in Table 10 and compared with an historic cohort of patients critically ill with viral pneumonia (non-COVID-19) admitted between 1 January 2017 and 31 December 2019.

Patient characteristic	Patients with COVID-19 and outcome reported (N=9768)		Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5782)	
	Discharged alive from critical care	Died in critical care	Died in critical care	
	n (%)	n (%)	(%)	
Age at admission (years)			(- .)	
16-39	662 (84.8)	119 (15.2)	(7.1)	
40-49	1044 (78.3)	290 (21.7)	(12.1)	
50-59	1776 (65.9)	918 (34.1)	(19.1)	
60-69	1507 (52.3)	1372 (47.7)	(25.7)	
70-79	705 (39.7)	1069 (60.3)	(31.2)	
80+	118 (40.1)	176 (59.9)	(30.8)	
Sex				
Female	1853 (64.3)	1030 (35.7)	(19.1)	
Male	3963 (57.6)	2914 (42.4)	(23.3)	
Ethnicity *				
White	3760 (60.7)	2439 (39.3)	(21.7)	
Mixed	101 (60.1)	67 (39.9)	(14.0)	
Asian	784 (54.9)	644 (45.1)	(19.4)	
Black	526 (57.6)	387 (42.4)	(12.4)	
Other	412 (64.9)	223 (35.1)	(18.6)	
Index of Multiple Deprivation (IMD) quinti	ile *			
1 (least deprived)	864 (61.0)	552 (39.0)	(22.3)	
2	940 (60.0)	627 (40.0)	(22.6)	
3	1109 (59.4)	757 (40.6)	(22.5)	
4	1360 (58.1)	982 (41.9)	(20.1)	
5 (most deprived)	1437 (59.4)	983 (40.6)	(20.3)	
Body mass index	/	. ,	. ,	
<25	1398 (58.8)	980 (41.2)	(23.1)	
25-<30	1835 (57.3)	1366 (42.7)	(22.5)	
30-<40	1828 (63.1)	1070 (36.9)	(18.9)	
40+	464 (63.7)	264 (36.3)	(13.6)	
Assistance required with daily activities	- ()	()	()	
No	5252 (60.6)	3417 (39.4)	(19.4)	
Yes	487 (51.4)	460 (48.6)	(27.2)	
Any very severe comorbidities *		(1010)	()	
No	5370 (60.6)	3489 (39.4)	(18.8)	
Yes	392 (49.2)	404 (50.8)	(32.8)	

Table 10 Outcome by patient characteristics

Please note that owing to the ongoing nature of the epidemic, the sample of patients with COVID-19 represented in this table is biased towards patients with *shorter* lengths of stay in critical care prior to discharge or death (i.e. those who died or recovered quickly). This does not apply to the comparison patients with viral pneumonia (non-COVID-19), 2017-19. * Please see Definitions on page 39.

Critical care outcomes for patients of white ethnicities compared with patients of non-white ethnicities are summarised in Table 11.

Critical care unit outcomes among patients who have been discharged or died	Patients of white ethnicity (N=6199)	Patients of non-white ethnicity (N=3144)
Outcome at end of critical care, n (%)		
Alive	3760 (60.7)	1823 (58.0)
Dead	2439 (39.3)	1321 (42.0)
Duration of critical care		
Duration of critical care † (days), median (IQR)		
Survivors	11 (4, 25)	15 (6, 31)
Non-survivors	8 (4, 15)	10 (5, 17)
Organ support (Critical Care Minimum Dataset)*		
Receipt of organ support, at any point, n (%)		
Advanced respiratory support	4236 (68.7)	2492 (79.8)
Basic respiratory support	4250 (68.9)	1970 (63.1)
Advanced cardiovascular support	1739 (28.2)	1013 (32.5)
Basic cardiovascular support	5681 (92.1)	2961 (94.8)
Renal support	1455 (23.7)	1010 (32.4)
Liver support	41 (0.7)	47 (1.5)
Neurological support	520 (8.5)	287 (9.2)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	13 (7, 22)	14 (8, 24)
Total (advanced + basic) respiratory support	10 (5, 20)	13 (6, 24)
Advanced cardiovascular support	3 (2, 6)	3 (2, 6)
Total (advanced + basic) cardiovascular support	10 (5, 20)	13 (6, 24)
Renal support	8 (3, 14)	8 (3, 15)

Table 11 Outcome, duration of critical care and organ support by ethnicity *

Please note that owing to the ongoing nature of the epidemic, the sample of patients with COVID-19 represented in this table is 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 39. Patients with ethnicity reported as 'not stated' excluded. † Duration of critical care is from original admission to critical care until final unit outcome and includes any time spent outside critical care areas (e.g. prior to any readmissions).

Outcomes by receipt of organ support

Figure 19 presents 30-day survival for patients critically ill with confirmed COVID-19 who received mechanical ventilation during the first 24 hours of critical care compared with patients who did not.

Critical care outcomes for patients critically ill with confirmed COVID-19 who received advanced respiratory support at any point during critical care and who received basic respiratory support only are summarised in Table 13. Critical care outcomes for patients critically ill with confirmed COVID-19 who received renal support at any point during critical care and who did not receive renal support are summarised in Table 14.

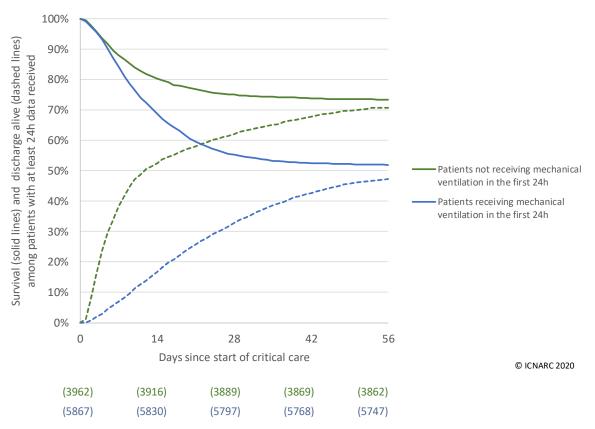


Figure 19 Survival and discharge by mechanical ventilation during the first 24 hours *

* Please see Definitions on page 39. Patients who are still in critical care are included only for the period in which they are known to have been in critical care, i.e. from their date of start of critical care until 02 July 2020. The numbers of patients available for reporting (in brackets) are the number of patients who are known to have either died or been discharged on or before that time point plus the number of patients known to have been still in critical care beyond that time point. Due to the ongoing nature of the UK epidemic, the total number of patients available for reporting becomes smaller at longer lengths of follow-up. Compared with the survival statistics presented in Tables 9, 13 and 14, this approach makes better use of all available data, including data about patients who are still in critical care.

Organ support received *	Patients with COVID-19 and outcome reported (N=9768)		Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5782)
	Discharged alive from critical care	Died in critical care	Died in critical care
	n (%)	n (%)	(%)
Any respiratory support			
Basic only	1956 (80.3)	480 (19.7)	(11.2)
Advanced	3614 (51.4)	3418 (48.6)	(33.3)
Any renal support	1094 (42.1)	1502 (57.9)	(46.1)
Combinations of advanced respiratory, advanced cardiovascular and renal support:			
Advanced respiratory support only	1950 (63.5)	1122 (36.5)	(18.7)
Advanced respiratory and advanced cardiovascular support only	662 (44.5)	826 (55.5)	(40.2)
Advanced respiratory and renal support only	538 (47.7)	590 (52.3)	(38.8)
Advanced respiratory, advanced cardiovascular and renal support	464 (34.5)	880 (65.5)	(56.6)

Table 12 Outcome by combinations of organ support *

Please note that owing to the ongoing nature of the epidemic, the sample of patients with COVID-19 represented in this table is 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 39.

Table 13Outcome, duration of critical care and organ support by receipt of
respiratory support *

Critical care outcomes among patients who have been discharged or died	Patients receiving advanced respiratory support * (N=7032)	Patients receiving only basic respiratory support * (N=2436)
Outcome at end of critical care, n (%)		
Discharged	3614 (51.4)	1956 (80.3)
Died	3418 (48.6)	480 (19.7)
Duration of critical care		
Duration of critical care + (days), median (IQR)		
Survivors	22 (12, 35)	4 (2, 7)
Non-survivors	10 (5, 17)	4 (2, 7)
Organ support (Critical Care Minimum Dataset) *		
Receipt of organ support, at any point, n (%)		
Basic respiratory support	4034 (57.4)	2436 (100.0)
Advanced cardiovascular support	2832 (40.3)	39 (1.6)
Basic cardiovascular support	6776 (96.4)	2057 (84.4)
Renal support	2454 (35.0)	93 (3.8)
Liver support	93 (1.3)	3 (0.1)
Neurological support	810 (11.6)	22 (0.9)
Duration of organ support (calendar days), median (IQR)		
Total (advanced + basic) respiratory support	15 (8, 25)	4 (3, 7)
Advanced cardiovascular support	3 (2, 6)	2 (1, 4)
Total (advanced + basic) cardiovascular support	15 (8, 25)	4 (3, 7)
Renal support	8 (4, 15)	3 (2, 5)

Please note that owing to the ongoing nature of the epidemic, the sample of patients with COVID-19 represented in this table is 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 39. Patients receiving no respiratory support excluded due to small numbers. † Duration of critical care is from original admission to critical care until final unit outcome and includes any time spent outside critical care areas (e.g. prior to any readmissions).

Table 14	Outcome, duration of critical care and organ support by receipt of renal
	support *

Critical care outcomes among patients who have been discharged or died	Patients receiving any renal support * (N=2577)	Patients not receiving any renal support * (N=7109)
Outcome at end of critical care, n (%)		
Discharged	1079 (41.9)	4688 (65.9)
Died	1498 (58.1)	2421 (34.1)
Duration of critical care		
Duration of critical care † (days), median (IQR)		
Survivors	30 (19, 43)	9 (4, 21)
Non-survivors	13 (7, 20)	7 (4, 13)
Organ support (Critical Care Minimum Dataset) *		
Receipt of organ support, at any point, n (%)		
Advanced respiratory support	2454 (95.2)	4560 (64.1)
Basic respiratory support	1371 (53.2)	5088 (71.6)
Advanced cardiovascular support	1353 (52.5)	1529 (21.5)
Basic cardiovascular support	2491 (96.7)	6509 (91.6)
Liver support	62 (2.4)	35 (0.5)
Neurological support	350 (13.6)	486 (6.8)
Duration of organ support (calendar days), median (IQ	(R)	
Advanced respiratory support	17 (10, 27)	11 (6, 20)
Total (advanced + basic) respiratory support	18 (10, 30)	9 (4, 17)
Advanced cardiovascular support	4 (2, 7)	3 (1, 5)
Total (advanced + basic) cardiovascular support	18 (10, 30)	9 (4, 17)

Please note that owing to the ongoing nature of the epidemic, the sample of patients with COVID-19 represented in this table is 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 39. Includes 167 patients requiring chronic renal replacement therapy for end stage renal disease prior to critical care; outcomes for these patients are similar. † Duration of critical care is from original admission to critical care until final unit outcome and includes any time spent outside critical care areas (e.g. prior to any readmissions).

Critical care outcomes for patients critically ill with confirmed COVID-19 who received advanced respiratory support at any point during critical care and who received basic respiratory support only across major patient subgroups are summarised in Table 15. Critical care outcomes for patients critically ill with confirmed COVID-19 who received renal support at any point during critical care and who did not receive renal support across major patient subgroups are summarised in Table 16.

Patient	Patients receiving advanced respiratory support * (N=7032)		Patients receiving only basic respiratory support * (N=2436)	
characteristic	Discharged alive from critical care	Died in critical care	Discharged alive from critical care	Died in critical care
	n (%)	n (%)	n (%)	n (%)
Age at admission (ye	ars)			
16-39	390 (78.0)	110 (22.0)	233 (97.1)	7 (2.9)
40-49	691 (72.6)	261 (27.4)	313 (92.3)	26 (7.7)
50-59	1171 (58.0)	849 (42.0)	558 (90.9)	56 (9.1)
60-69	962 (43.9)	1230 (56.1)	480 (79.6)	123 (20.4)
70-79	368 (29.6)	875 (70.4)	297 (61.7)	184 (38.3)
80+	24 (21.2)	89 (78.8)	75 (47.2)	84 (52.8)
Sex				
Female	1094 (55.8)	866 (44.2)	659 (81.7)	148 (18.3)
Male	2517 (49.7)	2548 (50.3)	1296 (79.6)	332 (20.4)
Ethnicity *				
White	2190 (51.7)	2046 (48.3)	1409 (79.3)	368 (20.7)
Mixed	70 (53.0)	62 (47.0)	28 (84.8)	5 (15.2)
Asian	529 (48.0)	573 (52.0)	221 (79.2)	58 (20.8)
Black	388 (51.9)	360 (48.1)	118 (84.3)	22 (15.7)
Other	301 (59.0)	209 (41.0)	99 (90.0)	11 (10.0)
Index of Multiple Dep	rivation (IMD) quintile			
1 (least deprived)	498 (51.8)	464 (48.2)	324 (80.0)	81 (20.0)
2	565 (51.4)	535 (48.6)	336 (80.2)	83 (19.8)
3	723 (52.4)	658 (47.6)	341 (79.5)	88 (20.5)
4	874 (49.8)	881 (50.2)	427 (82.8)	89 (17.2)
5 (most deprived)	896 (51.6)	839 (48.4)	484 (78.3)	134 (21.7)
Body mass index				
<25	840 (50.1)	835 (49.9)	467 (79.2)	123 (20.8)
25-<30	1159 (48.9)	1213 (51.1)	605 (81.2)	140 (18.8)
30-<40	1225 (56.1)	960 (43.9)	543 (84.6)	99 (15.4)
40+	280 (55.1)	228 (44.9)	168 (82.8)	35 (17.2)
Assistance required v	vith daily activities			
No	3335 (52.0)	3075 (48.0)	1715 (84.9)	305 (15.1)
Yes	232 (44.2)	293 (55.8)	212 (57.1)	159 (42.9)
Any very severe com	orbidities *			· · · · · ·
No	3411 (52.3)	3111 (47.7)	1746 (83.8)	337 (16.2)
Yes	165 (38.5)	264 (61.5)	192 (59.1)	133 (40.9)

Table 15 Outcome by receipt of respiratory support * and patient characteristics

Please note that owing to the ongoing nature of the epidemic, the sample of patients with COVID-19 represented in this table is 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 39. Patients receiving no respiratory support excluded due to small numbers.

Patient	Patients receiving any renal support * (N=2577)		Patients not receiving any renal support * (N=7109)	
characteristic	Discharged alive from critical care	Died in critical care	Discharged alive from critical care	Died in critical care
	n (%)			
Age at admission (year		n (%)	n (%)	n (%)
16-39	79 (62.7)	47 (37.3)	575 (89.0)	71 (11.0)
40-49	240 (67.8)	114 (32.2)	789 (82.2)	171 (17.8)
40-49 50-59	348 (46.0)	408 (54.0)	1417 (73.9)	501 (26.1)
60-69	287 (33.5)	408 (54.0) 569 (66.5)	1206 (60.3)	. ,
	. ,	. ,	· · · ·	794 (39.7) 724 (55.5)
70-79	115 (25.6)	334 (74.4)	587 (44.5)	731 (55.5)
80+	7 (24.1)	22 (75.9)	110 (41.8)	153 (58.2)
Sex	062 (44.0)	202 (55.4)	4574 (60.0)	COR (20 R)
Female	263 (44.9)	323 (55.1)	1571 (69.2)	698 (30.8)
Male	816 (41.0)	1172 (59.0)	3113 (64.4)	1722 (35.6)
Ethnicity *	COO (44 O)	040 (50.4)	0440 (00 0)	4504 (00 7)
White	609 (41.9)	846 (58.1)	3116 (66.3)	1581 (33.7)
Mixed	23 (54.8)	19 (45.2)	76 (61.3)	48 (38.7)
Asian	152 (37.3)	256 (62.7)	626 (62.3)	379 (37.7)
Black	181 (47.6)	199 (52.4)	342 (64.9)	185 (35.1)
Other	78 (43.3)	102 (56.7)	331 (73.6)	119 (26.4)
Index of Multiple Dep				
1 (least deprived)	152 (45.1)	185 (54.9)	697 (65.8)	363 (34.2)
2	152 (40.3)	225 (59.7)	779 (66.1)	399 (33.9)
3	246 (46.8)	280 (53.2)	847 (64.3)	470 (35.7)
4	246 (37.9)	403 (62.1)	1108 (66.0)	570 (34.0)
5 (most deprived)	269 (41.3)	382 (58.7)	1162 (66.1)	595 (33.9)
Body mass index				
<25	225 (39.1)	351 (60.9)	1160 (65.4)	614 (34.6)
25-<30	319 (37.4)	534 (62.6)	1501 (64.6)	824 (35.4)
30-<40	413 (47.5)	456 (52.5)	1400 (69.7)	608 (30.3)
40+	98 (49.7)	99 (50.3)	361 (68.6)	165 (31.4)
Assistance required v	vith daily activities			
No	991 (42.0)	1368 (58.0)	4213 (67.5)	2024 (32.5)
Yes	78 (40.0)	117 (60.0)	407 (54.3)	342 (45.7)
Any very severe come	orbidities *			
No	960 (41.6)	1345 (58.4)	4357 (67.3)	2119 (32.7)
Yes	112 (44.3)	141 (55.7)	280 (51.9)	260 (48.1)

Table 16 Outcome by receipt of renal support * and patient characteristics

Please note that owing to the ongoing nature of the epidemic, the sample of patients with COVID-19 represented in this table is 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 39. Includes 167 patients requiring chronic renal replacement therapy for end stage renal disease prior to critical care; outcomes for these patients are similar.

Characteristics of patients critically ill with confirmed COVID-19 receiving critical care for 28 days or more are summarised in Table 17 and Table 18.

Table 17Patient characteristics: demographics for patients receiving critical care
for a total of 28 days or more

Demographics	Patients receiving critical care for 28 days or more (N=1824)
Age at admission (years) [N=1817]	
Mean (SD)	56.7 (10.9)
Median (IQR)	58 (50, 64)
Sex, n (%) [N=1821]	
Female	474 (26.0)
Male	1347 (74.0)
Currently or recently pregnant, n (% of females) [N=119]	
Currently pregnant	4 (3.4)
Recently pregnant (within 6 weeks)	6 (5.0)
Not known to be pregnant	109 (91.6)
Ethnicity *, n (%) [N=1758]	
White	1027 (58.4)
Mixed	46 (2.6)
Asian	322 (18.3)
Black	200 (11.4)
Other	163 (9.3)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=1796]	
1 (least deprived)	232 (12.9)
2	272 (15.1)
3	383 (21.3)
4	460 (25.6)
5 (most deprived)	449 (25.0)
Body mass index *, n (%) [N=1758]	
<18.5	8 (0.5)
18.5-<25	420 (23.9)
25-<30	600 (34.1)
30-<40	615 (35.0)
40+	115 (6.5)

* Please see Definitions on page 39.

Table 18	Patient characteristics: medical history and indicators of acute severity for
	patients receiving critical care for a total of 28 days or more

Medical history	Patients receiving critical care for 28 days or more (N=1824)
Dependency prior to admission to acute hospital *, n (%) [N=1790]	
Able to live without assistance in daily activities	1688 (94.3)
Some assistance with daily activities	101 (5.6)
Total assistance with all daily activities	1 (0.1)
Very severe comorbidities *, n (%) [N=1798]	
Cardiovascular	5 (0.3)
Respiratory	7 (0.4)
Renal	21 (1.2)
Liver	3 (0.2)
Metastatic disease	5 (0.3)
Haematological malignancy	25 (1.4)
Immunocompromise	48 (2.7)
Prior hospital length of stay [N=1821]	
Mean (SD)	2.0 (4.2)
Median (IQR)	1 (0, 2)
CPR within previous 24h, n (%) [N=1816]	
In the community	3 (0.0)
In hospital	5 (0.1)
Indicator of acute severity	
Mechanically ventilated within first 24h *, n (%) [N=1775]	1351 (76.1)
APACHE II Score [N=1788]	
Mean (SD)	14.8 (4.8)
Median (IQR)	14 (12, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=1746]	15.1 (11.1, 20.4)
PaO ₂ /FiO ₂ ratio †, n (%) [N=1746]	
≤ 13.3 kPa (≤ 100 mmHg)	690 (39.5)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	883 (50.6)
> 26.7 kPa (> 200 mmHg)	173 (9.9)

* Please see Definitions on page 39. 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.

Critical care outcomes for patients critically ill with confirmed COVID-19 receiving critical care for 28 days or more are summarised in Table 19.

Table 19Outcome, duration of critical care and organ support for patients receiving
critical care for a total of 28 days or more

Critical care unit outcomes among patients who have been discharged or died	Patients receiving critical care for 28 days or more (N=1615)
Outcome at end of critical care, n (%)	
Alive	1370 (84.8)
Dead	245 (15.2)
Duration of critical care	
Duration of critical care † (days), median (IQR)	
Survivors	39 (33, 48)
Non-survivors	34 (30, 40)
Organ support (Critical Care Minimum Dataset)*	
Receipt of organ support, at any point, n (%)	
Advanced respiratory support	1587 (98.9)
Basic respiratory support	1336 (83.2)
Advanced cardiovascular support	722 (45.1)
Basic cardiovascular support	1595 (99.3)
Renal support	752 (47.0)
Liver support	42 (2.6)
Neurological support	293 (18.4)
Duration of organ support (calendar days), median (IQR)	
Advanced respiratory support	33 (27, 40)
Total (advanced + basic) respiratory support	37 (31, 45)
Advanced cardiovascular support	4 (2, 9)
Total (advanced + basic) cardiovascular support	35 (30, 44)
Renal support	16 (9, 25)

Please note that owing to the ongoing nature of the epidemic, the sample of patients with confirmed COVID-19 represented in this table is biased towards patients with *shorter* lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly. This does not apply to the comparison patients with viral pneumonia (non-COVID-19), 2017-19. * Please see Definitions on page 39. † Duration of critical care is from original admission to critical care until final unit outcome and includes any time spent outside critical care areas (e.g. prior to any readmissions).

Multivariable analyses

Patient population:

- A multivariable Cox proportional hazards regression model was developed based solely on available data from patients critically ill with confirmed COVID-19 with a start of critical care between 1 March and 21 April 2020, locked on 4 June 2020.
- All patients were followed up for a minimum of 7 days, and outcomes were censored at 30 days following the start of critical care. Patients discharged alive from hospital within 30 days, and those ending critical care within 30 days with missing hospital outcome were assumed to survive to 30 days.
- Patients either with a duration of critical care of less than 24 hours or with no data recorded for any core physiology (temperature, systolic blood pressure, heart rate or respiratory rate) were excluded.

Prognostic factors:

- Prognostic factors were selected, a priori, based on established relationships with outcome for critically ill patients and on emerging information from the COVID-19 pandemic.
- Continuous prognostic factors were assessed for non-linearity using restricted cubic splines with up to five knots.
- Missing data were imputed using fully conditional specification (with models fitted in ten multiply imputed datasets and results combined).

Results:

- Of 6989 patients, 58 had a duration of critical care of less than 24 hours and 595 had no data recorded for any core physiology; a cohort of 6336 patients were included in the model.
- The results of the multivariable modelling are presented in Figures 20-22.

Explanation:

- The figures present the hazard ratio (solid lines or points) for values of each prognostic factor compared with a reference value (as indicated).
- A hazard ratio is a measure of how much more or less likely the event (death) is to occur.

For example, a patient aged 70 has a hazard ratio of approximately 2 compared with a patient aged 60; this means that they are twice as likely to die within 30 days of the start of critical care. In contrast, a patient aged 40 has a hazard ratio of approximately 0.5 compared with a patient aged 60; this means that they are half as likely to die within 30 days of the start of critical care. A hazard ratio of 1 means that the risk of death is the same.

• The hazard ratios indicate the association between each prognostic factor and the outcome adjusted for the effect of all the other variables in the model.

For example, the hazard ratio for dependency is adjusted for patients with dependency being older on average than those without dependency.

• The estimated hazard ratios are shown with 95% confidence intervals (as dashed lines or vertical spikes) indicating a range of possible values for the hazard ratio that will include the true value 19 times out of 20.

A manuscript reporting the full details of the modelling has been submitted for publication.

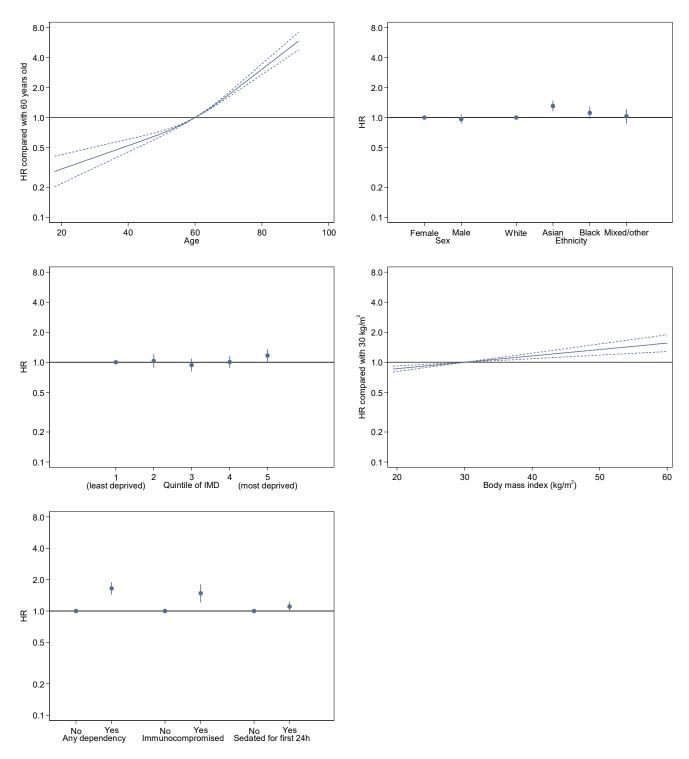


Figure 20 Hazard ratios and 95% confidence intervals from Cox proportional hazards regression model for death within 30 days following start of critical care: demographics and medical history

Please note that hazard ratios (HR) are reported relative to the median value for age (60 years) and the threshold for defining obesity for body mass index (30 kg/m^2). Immunocompromised includes the conditions as defined on page 39 and also metastatic disease and haematological malignancy.

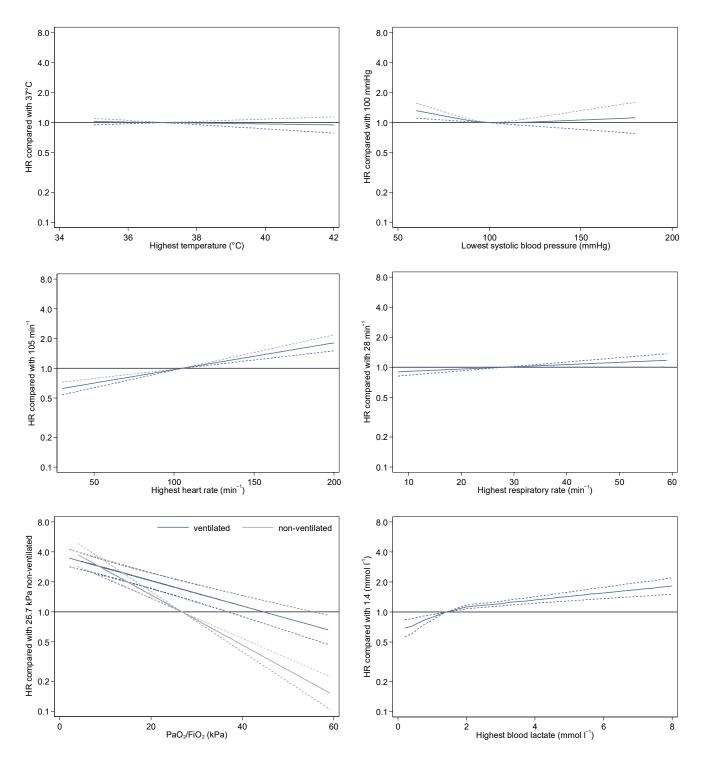


Figure 21 Hazard ratios and 95% confidence intervals from Cox proportional hazards regression model for death within 30 days following start of critical care: physiology (1)

Please note that hazard ratios (HR) are reported relative to the median value for each physiological parameter (as indicated on the y-axis) except for PaO_2/FiO_2 which is reported relative to the threshold for defining ARDS (26.7 kPa).

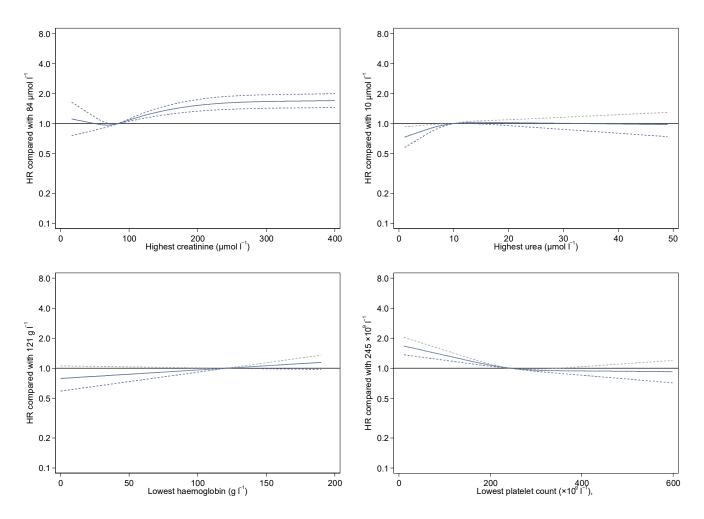


Figure 22 Hazard ratios and 95% confidence intervals from Cox proportional hazards regression model for death within 30 days following start of critical care: physiology (2)

Please note that hazard ratios (HR) are reported relative to the median value for each physiological parameter (as indicated on the y-axis).

Data completeness

Completeness of key variables is summarised in Table 20.

Table 20 Data completeness of key variables

Variable	N missing %
24h variables (N=10287)	
NHS number (used to combine transfers and readmissions)	225 (2.2)
Age	2 (0.0)
Sex	9 (0.1)
Currently or recently pregnant	6 (0.8) †
Ethnicity *	465 (4.5)
Index of Multiple Deprivation	165 (1.6)
BMI	625 (6.1)
Prior dependency *	212 (2.1)
Very severe comorbidities *	154 (1.5)
Prior hospital length of stay	13 (0.1)
CPR within previous 24h	35 (0.3)
Mechanical ventilation during the first 24h *	386 (3.8)
APACHE II Score	243 (2.4)
PaO2/FiO2 ratio	820 (8.0)
Outcome variables (N=9758)	
Length of stay in critical care	98 (1.0)
Advanced respiratory support *	63 (0.6)
Basic respiratory support *	63 (0.6)
Advanced cardiovascular support *	73 (0.7)
Basic cardiovascular support *	56 (0.6)
Renal support *	82 (0.8)
Liver support *	98 (1.0)
Neurological support *	95 (1.0)

* Please see Definitions on page 39; † % of female patients aged 16-49 years

Definitions

Patients are classified as either:

- Notification only received: ICNARC has received a notification of the patient's admission to critical care but has not received any patient data from the first 24 hours or beyond
- 24h data only received: ICNARC has received patient data relating to the first 24 hours in critical care but has not yet been notified of the patient's critical care outcome
- Outcome data received: ICNARC has received submission of data relating to the patient's <u>critical care</u> outcome (e.g. survival, length of stay, duration of organ support)
- Hospital outcome data received: Data have been updated with outcomes at ultimate discharge from hospital

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

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

Mechanical ventilation during the first 24 hours was identified by the recording of a ventilated respiratory rate, indicating that all or some of the breaths or a portion of the breaths (pressure support) were delivered by a mechanical device. This usually indicates invasive ventilation; BPAP (bilevel positive airway pressure) would meet this definition but CPAP (continuous positive airway pressure) does not.

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 on 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

Acknowledgement

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."