

ICNARC report on COVID-19 in critical care 24 July 2020

This report presents analyses of data on patients critically ill with confirmed COVID-19 reported to ICNARC up to 4pm on 23 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.

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* 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:	263
Units with zero patients:	24
Units with uncertain participation:	2

Admissions to critical care

To date, ICNARC have been notified of 13,308 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 12,981 admissions for 10,557 patients (Figure 1). Of the 10,557 patients, 10,228 have outcomes reported and 329 patients were last reported as still receiving critical care.

Of the 65 new patients included in the report for the first time this week, 16 were admitted to critical care within the last week (Figure 2), with the majority representing back-filling of cases from preceding weeks. Of 41 patients with a start of critical care in the last two weeks (09/07/2020 to 22/07/2020), the largest numbers were admitted in the North East And Yorkshire and Midlands regions (Figure 3).

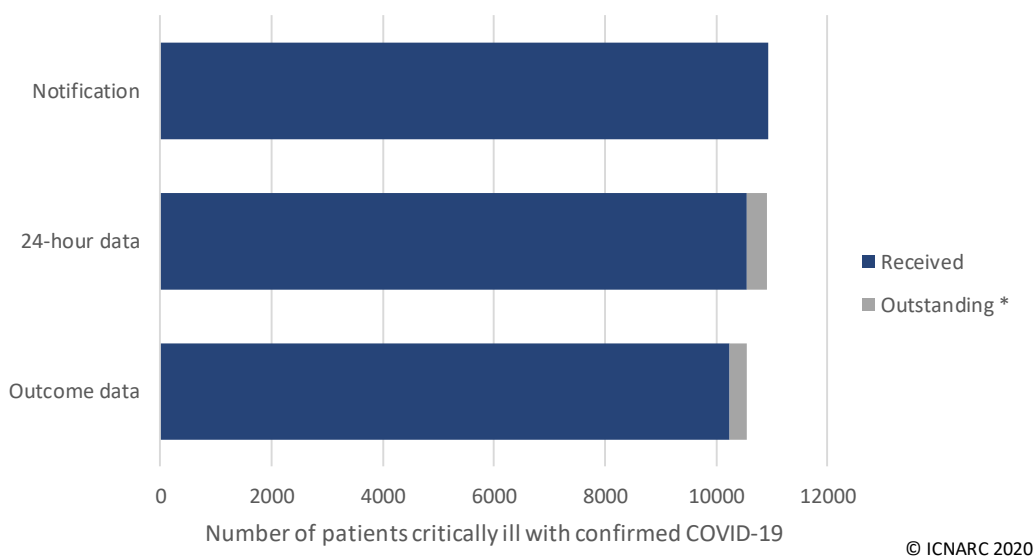


Figure 1 Numbers of patients with data included in this report and outstanding *

* 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.

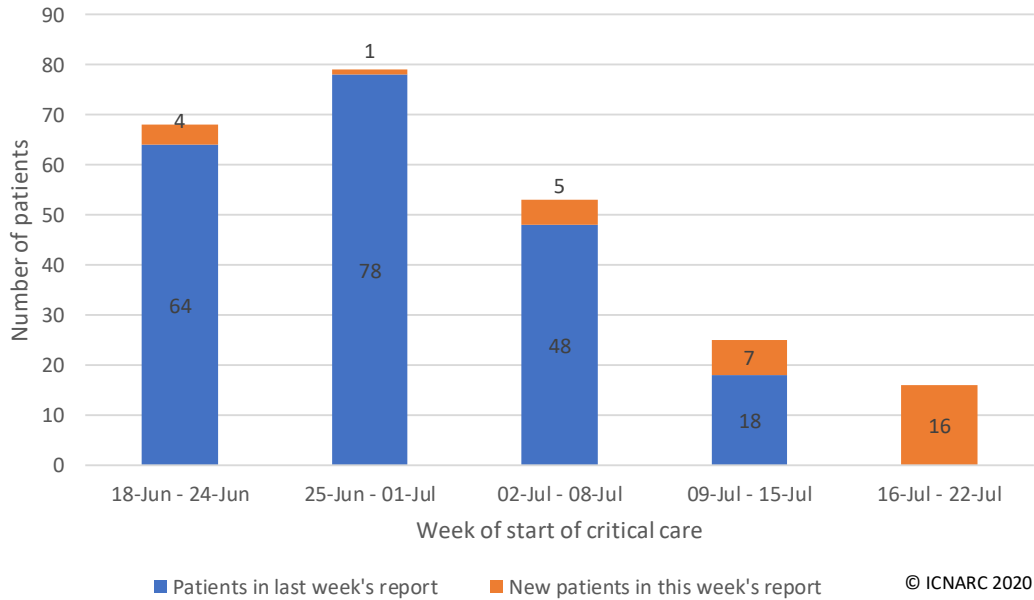


Figure 2 New patients included this week by week of start critical care

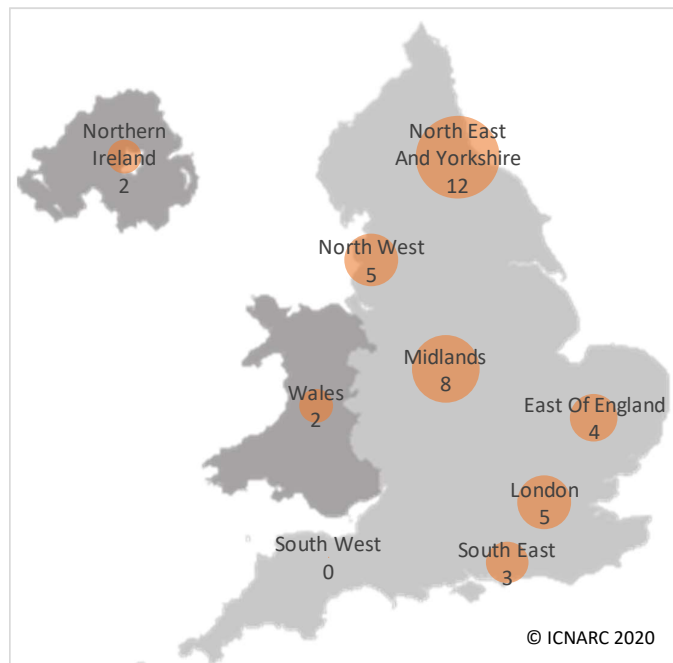


Figure 3 New patients with a start of critical care in the last two weeks by region

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 (3017) 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).

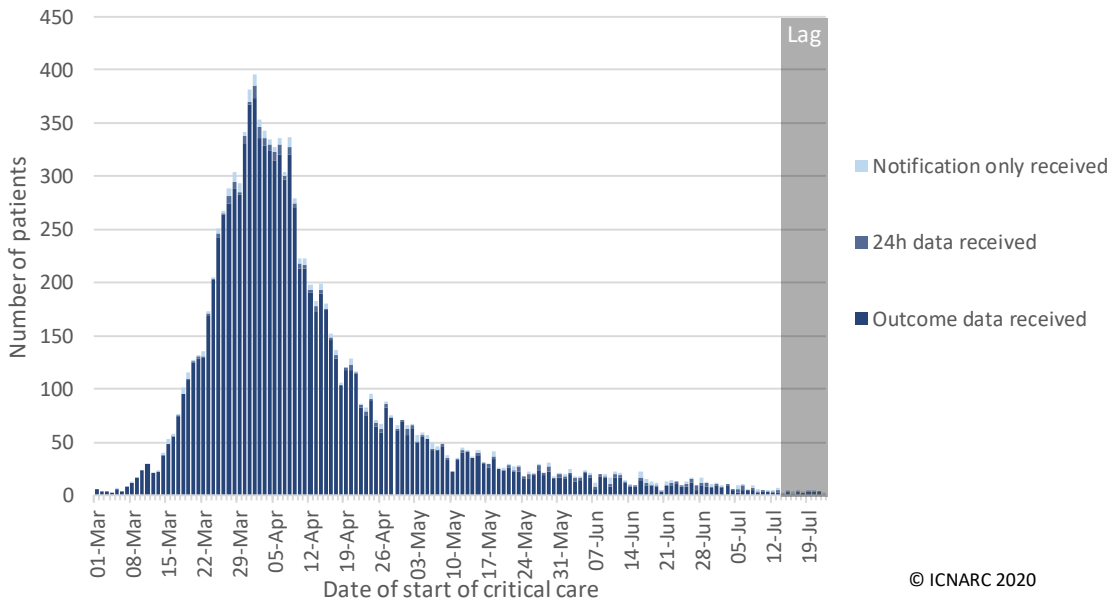


Figure 4 Number of new patients critically ill with confirmed COVID-19 by date of start of critical care

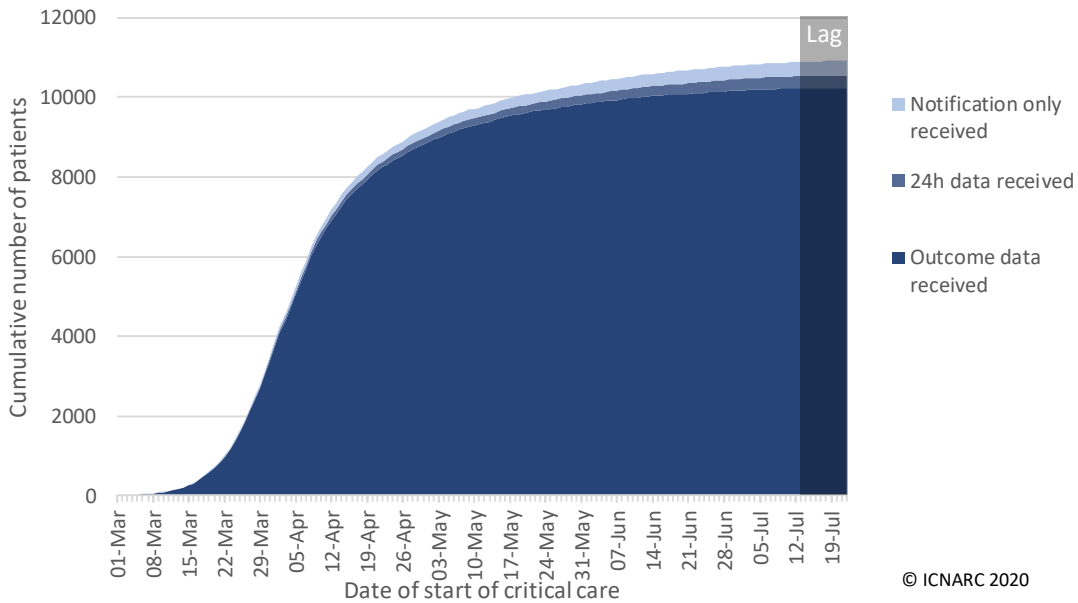


Figure 5 Cumulative number of patients critically ill with confirmed COVID-19 by date of start of critical care

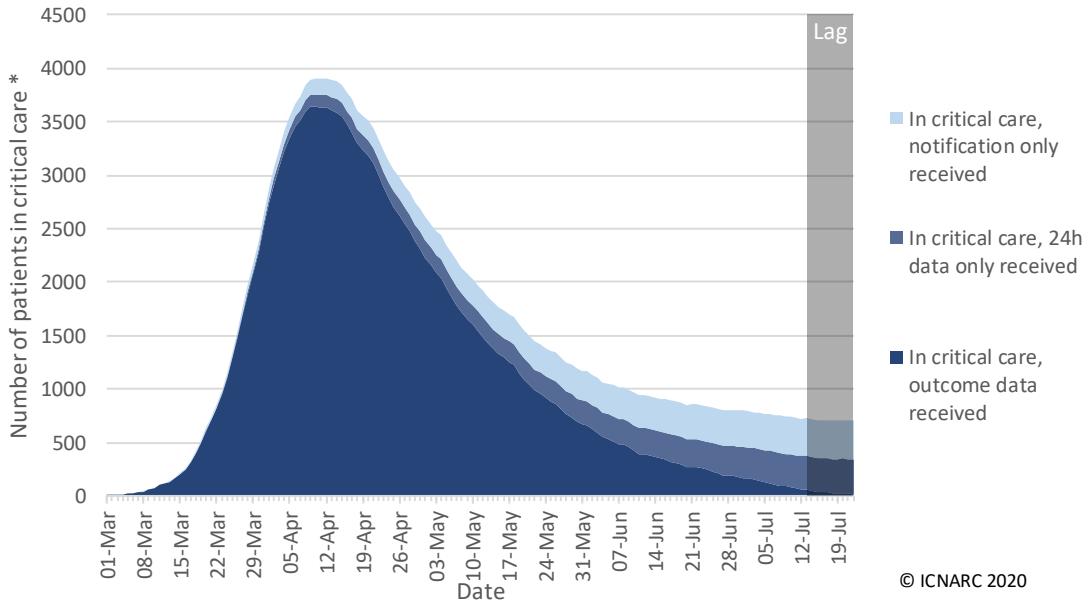


Figure 6 Total number of patients critically ill with confirmed COVID-19 by date *

* Please note that patients whose outcome data have not been received are assumed to remain in critical care as of 23 July 2020.

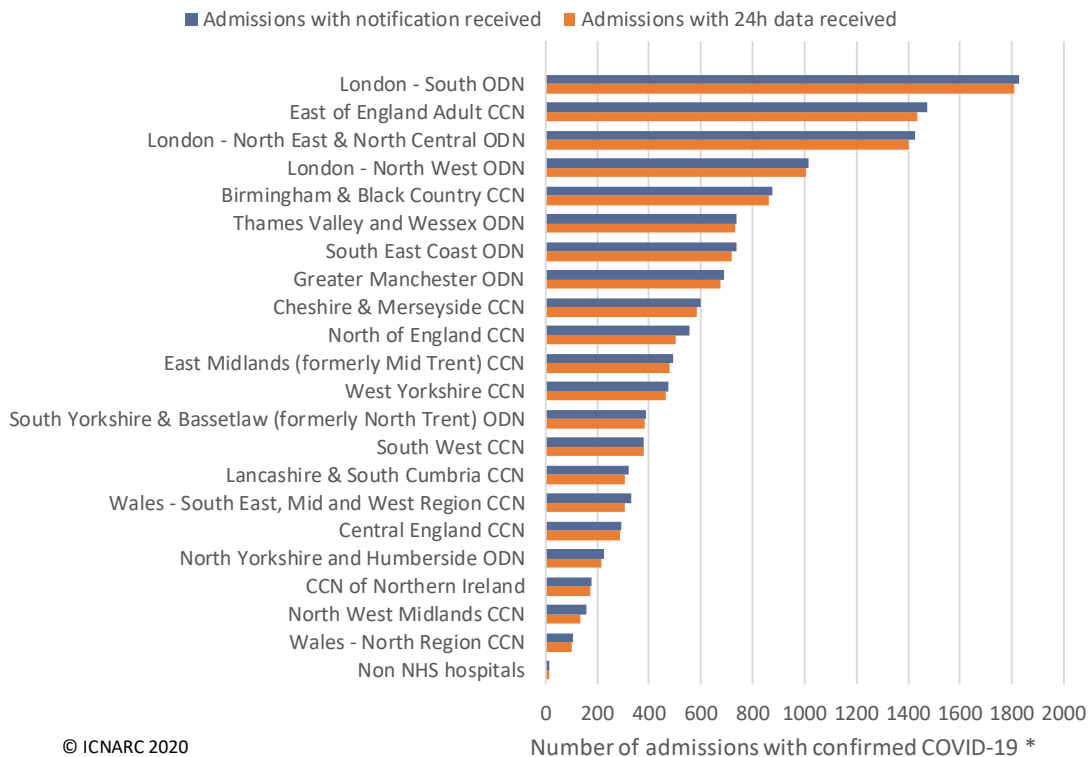


Figure 7 Number of admissions critically ill with confirmed COVID-19 by Critical Care Network *

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.

Table 1 Patient characteristics: demographics

Demographics	Patients with confirmed COVID-19 and 24h data (N=10557)	Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5782)
Age at admission (years) [N=10547]		
Mean (SD)	58.8 (12.7)	58.0 (17.4)
Median (IQR)	60 (51, 68)	61 (48, 71)
Sex, n (%) [N=10550]		
Female	3141 (29.8)	2641 (45.7)
Male	7409 (70.2)	3141 (54.3)
Currently or recently pregnant, n (% of females aged 16-49) [N=751]		
Currently pregnant	28 (3.7)	56 (7.4)
Recently pregnant (within 6 weeks)	39 (5.2)	29 (3.8)
Not known to be pregnant	684 (91.1)	674 (88.8)
Ethnicity *, n (%) [N=10148]		
White	6704 (66.1)	4951 (88.4)
Mixed	185 (1.8)	52 (0.9)
Asian	1586 (15.6)	325 (5.8)
Black	981 (9.7)	155 (2.8)
Other	692 (6.8)	117 (2.1)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=9811]		
1 (least deprived)	1408 (14.4)	873 (15.3)
2	1569 (16.0)	999 (17.5)
3	1929 (19.7)	1115 (19.5)
4	2359 (24.0)	1232 (21.6)
5 (most deprived)	2546 (26.0)	1489 (26.1)
Body mass index *, n (%) [N=9992]		
<18.5	75 (0.8)	310 (5.5)
18.5-<25	2556 (25.6)	1933 (34.2)
25-<30	3436 (34.4)	1691 (29.9)
30-<40	3135 (31.4)	1330 (23.5)
40+	790 (7.9)	394 (7.0)

* Please see Definitions on page 39.

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

Medical history	Patients with confirmed COVID-19 and 24h data (N=10557)	Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5782)
Dependency prior to admission to acute hospital *, n (%) [N=10395]		
Able to live without assistance in daily activities	9328 (89.7)	4244 (73.6)
Some assistance with daily activities	1028 (9.9)	1392 (24.1)
Total assistance with all daily activities	39 (0.4)	134 (2.3)
Very severe comorbidities *, n (%) [N=10428]		
Cardiovascular	72 (0.7)	78 (1.4)
Respiratory	127 (1.2)	295 (5.1)
Renal	179 (1.7)	120 (2.1)
Liver	46 (0.4)	54 (0.9)
Metastatic disease	60 (0.6)	68 (1.2)
Haematological malignancy	199 (1.9)	268 (4.6)
Immunocompromise	369 (3.5)	503 (8.7)
Prior hospital length of stay [N=10552]		
Mean (SD)	2.5 (6.3)	2.7 (13.0)
Median (IQR)	1 (0, 3)	1 (0, 2)
CPR within previous 24h, n (%) [N=10538]		
In the community	57 (0.5)	21 (0.4)
In hospital	73 (0.7)	85 (1.5)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=10271]	6037 (58.8)	2482 (43.0)
APACHE II Score [N=10390]		
Mean (SD)	15.1 (5.3)	17.2 (6.3)
Median (IQR)	15 (11, 18)	17 (13, 21)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=9801]	15.8 (11.2, 22.2)	18.0 (11.6, 26.4)
PaO ₂ /FiO ₂ ratio †, n (%) [N=9801]		
≤ 13.3 kPa (≤ 100 mmHg)	3614 (36.9)	1819 (33.3)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	4689 (47.8)	2318 (42.4)
> 26.7 kPa (> 200 mmHg)	1498 (15.3)	1328 (24.3)

* 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.

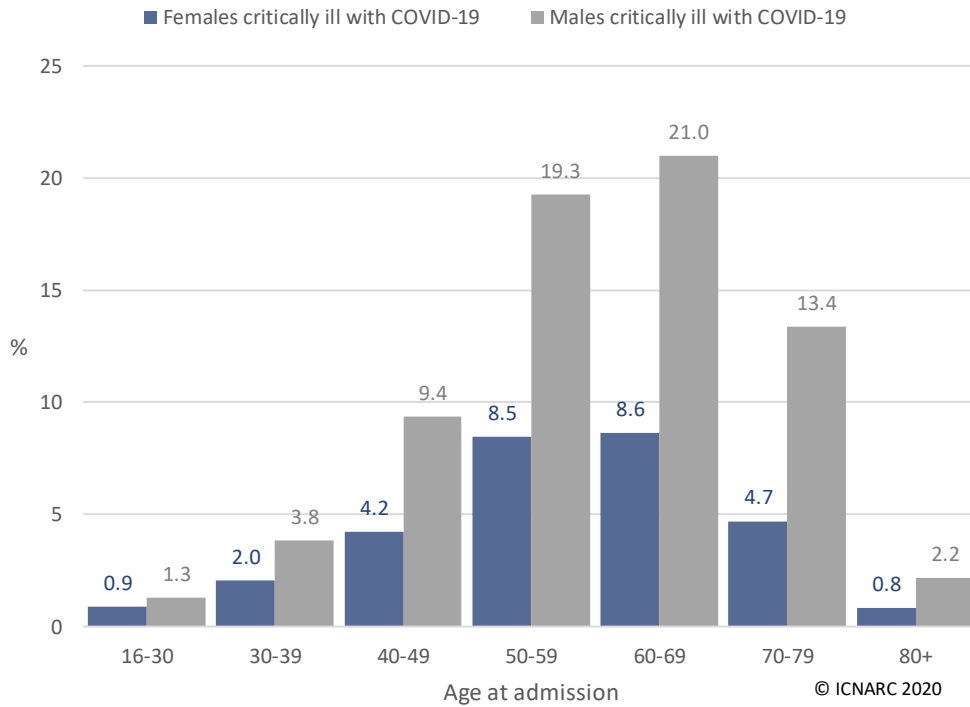


Figure 8 Age and sex distribution of patients critically ill with confirmed COVID-19

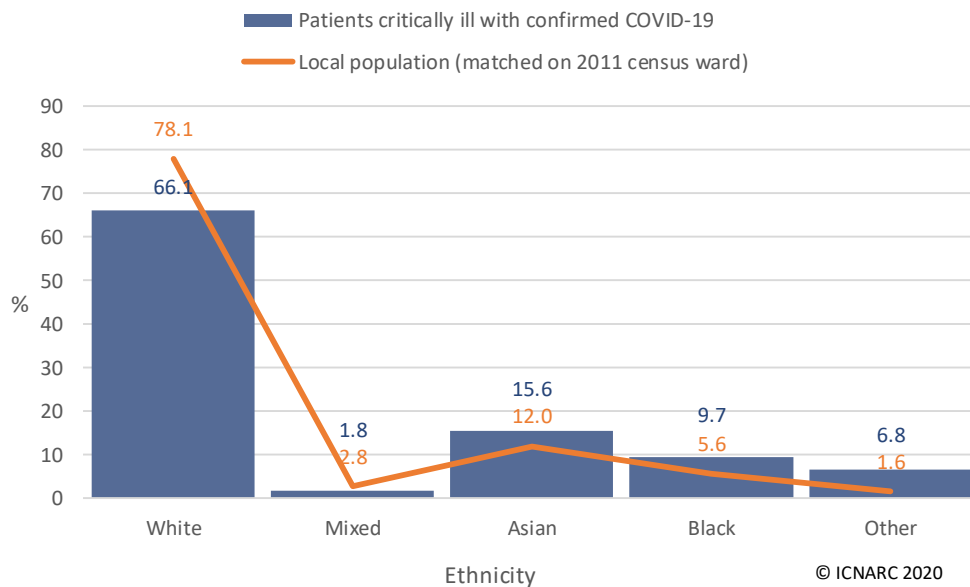


Figure 9 Ethnicity distribution of patients critically ill with confirmed COVID-19

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.

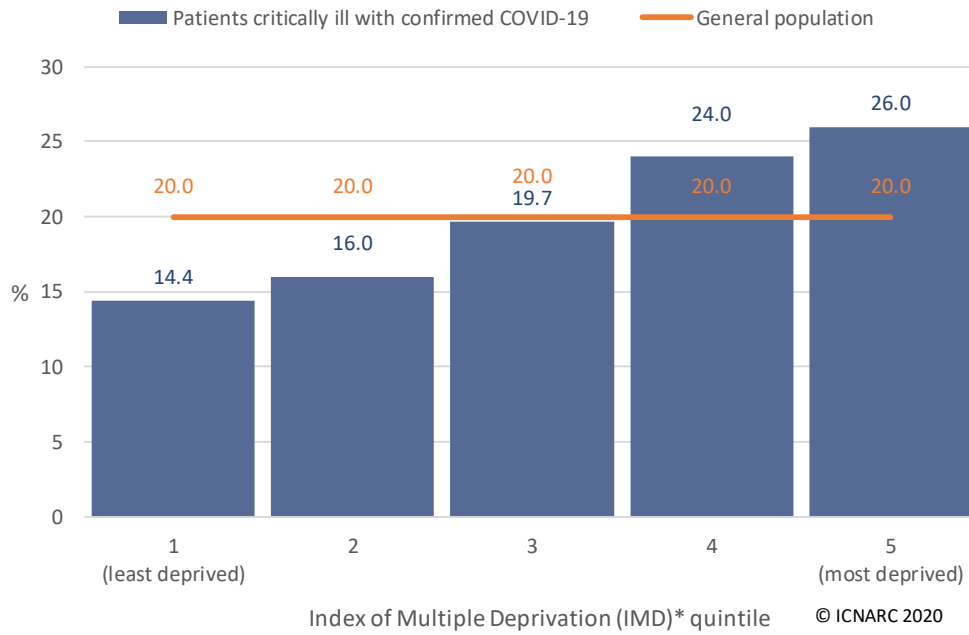


Figure 10 Index of Multiple Deprivation (IMD) * distribution of patients critically ill with confirmed COVID-19

* Please see Definitions on page 39.

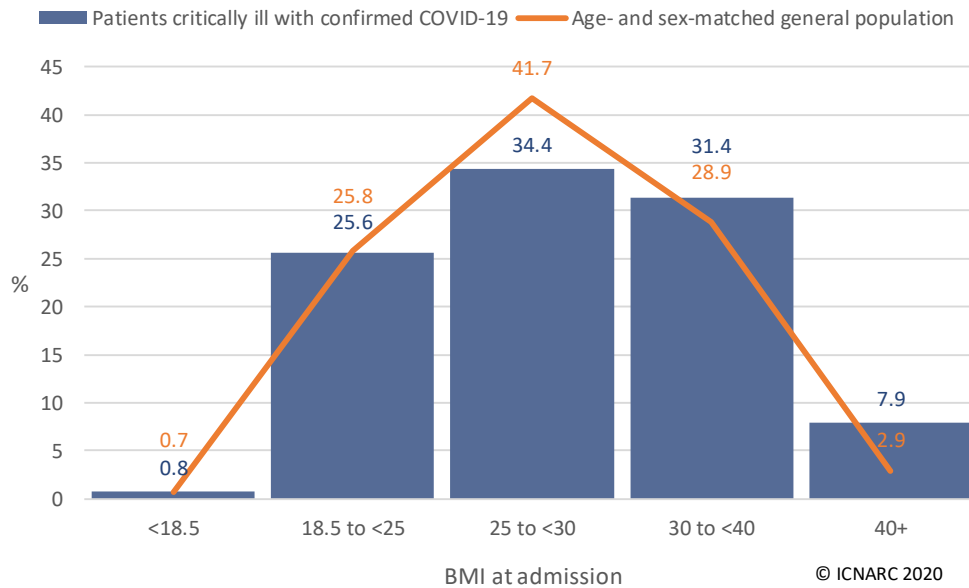


Figure 11 BMI distribution of patients critically ill with confirmed COVID-19

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.

Table 3 Patient characteristics: demographics by ethnicity *

Demographics	Patients of white ethnicity (N=6704)	Patients of non-white ethnicity (N=3444)
Age at admission (years) [N=10138]		
Mean (SD)	60.6 (12.4)	55.4 (12.4)
Median (IQR)	62 (53, 70)	56 (47, 64)
Sex, n (%) [N=10141]		
Female	2015 (30.1)	1015 (29.5)
Male	4687 (69.9)	2424 (70.5)
Currently or recently pregnant, n (% of females) [N=728]		
Currently pregnant	12 (2.9)	15 (4.7)
Recently pregnant (within 6 weeks)	13 (3.2)	25 (7.9)
Not known to be pregnant	387 (93.9)	276 (87.3)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=9465]		
1 (least deprived)	1103 (17.7)	250 (7.8)
2	1149 (18.4)	365 (11.3)
3	1267 (20.3)	586 (18.2)
4	1296 (20.8)	969 (30.1)
5 (most deprived)	1429 (22.9)	1051 (32.6)
Body mass index *, n (%) [N=9613]		
<18.5	50 (0.8)	23 (0.7)
18.5-<25	1452 (23.0)	986 (30.0)
25-<30	2130 (33.7)	1184 (36.0)
30-<40	2109 (33.3)	917 (27.9)
40+	583 (9.2)	179 (5.4)

* 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=6704)	Patients of non-white ethnicity (N=3444)
Dependency prior to admission to acute hospital *, n (%) [N=10003]		
Able to live without assistance in daily activities	5832 (88.2)	3151 (92.9)
Some assistance with daily activities	755 (11.4)	227 (6.7)
Total assistance with all daily activities	26 (0.4)	12 (0.4)
Very severe comorbidities *, n (%) [N=10032]		
Cardiovascular	60 (0.9)	10 (0.3)
Respiratory	96 (1.4)	25 (0.7)
Renal	80 (1.2)	95 (2.8)
Liver	34 (0.5)	9 (0.3)
Metastatic disease	50 (0.8)	8 (0.2)
Haematological malignancy	151 (2.3)	36 (1.1)
Immunocompromise	266 (4.0)	83 (2.4)
Prior hospital length of stay [N=10145]		
Mean (SD)	2.6 (6.2)	2.2 (6.5)
Median (IQR)	1 (0, 3)	1 (0, 3)
CPR within previous 24h, n (%) [N=10132]		
In the community	37 (0.6)	16 (0.2)
In hospital	40 (0.6)	26 (0.4)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=9886]	3589 (54.7)	2207 (66.3)
APACHE II Score [N=9996]		
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=9432]	16.0 (11.3, 22.3)	15.5 (11.3, 21.7)
PaO ₂ /FiO ₂ ratio †, n (%) [N=9432]		
≤ 13.3 kPa (≤ 100 mmHg)	2275 (36.6)	1190 (37.0)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	2966 (47.7)	1568 (48.7)
> 26.7 kPa (> 200 mmHg)	972 (15.6)	461 (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 (95.1%) also received advanced respiratory support.

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

Demographics	Patients receiving advanced respiratory support (N=7355)	Patients receiving only basic respiratory support (N=2591)
Age at admission (years) [N=9938]		
Mean (SD)	58.7 (11.9)	59.3 (14.3)
Median (IQR)	60 (51, 67)	60 (50, 70)
Sex, n (%) [N=9939]		
Female	2052 (27.9)	867 (33.5)
Male	5297 (72.1)	1723 (66.5)
Currently or recently pregnant, n (% of females aged 16-49) [N=696]		
Currently pregnant	14 (2.9)	10 (4.6)
Recently pregnant (within 6 weeks)	26 (5.5)	9 (4.1)
Not known to be pregnant	437 (91.6)	200 (91.3)
Ethnicity *, n (%) [N=9580]		
White	4454 (63.0)	1885 (75.2)
Mixed	140 (2.0)	37 (1.5)
Asian	1166 (16.5)	309 (12.3)
Black	780 (11.0)	156 (6.2)
Other	535 (7.6)	118 (4.7)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=9241]		
1 (least deprived)	916 (13.5)	409 (16.6)
2	1060 (15.6)	425 (17.3)
3	1367 (20.2)	444 (18.0)
4	1692 (25.0)	536 (21.8)
5 (most deprived)	1743 (25.7)	649 (26.3)
Body mass index *, n (%) [N=9419]		
<18.5	39 (0.6)	25 (1.1)
18.5-<25	1748 (24.7)	612 (26.1)
25-<30	2472 (34.9)	798 (34.0)
30-<40	2292 (32.4)	681 (29.0)
40+	522 (7.4)	230 (9.8)

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

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

Medical history	Patients receiving advanced respiratory support (N=7355)	Patients receiving only basic respiratory support (N=2591)
Dependency prior to admission to acute hospital *, n (%) [N=9823]		
Able to live without assistance in daily activities	6697 (92.2)	2139 (83.7)
Some assistance with daily activities	559 (7.7)	394 (15.4)
Total assistance with all daily activities	11 (0.2)	23 (0.9)
Very severe comorbidities *, n (%) [N=9842]		
Cardiovascular	21 (0.3)	46 (1.8)
Respiratory	42 (0.6)	77 (3.0)
Renal	89 (1.2)	70 (2.7)
Liver	24 (0.3)	18 (0.7)
Metastatic disease	23 (0.3)	26 (1.0)
Haematological malignancy	116 (1.6)	72 (2.8)
Immunocompromise	217 (3.0)	130 (5.1)
Prior hospital length of stay [N=9945]		
Mean (SD)	2.2 (5.4)	2.9 (7.1)
Median (IQR)	1 (0, 3)	1 (0, 3)
CPR within previous 24h, n (%) [N=9938]		
In the community	46 (0.4)	7 (0.3)
In hospital	67 (0.6)	3 (0.1)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=9757]	5729 (79.4)	---
APACHE II Score [N=9830]		
Mean (SD)	15.4 (5.1)	14.2 (5.5)
Median (IQR)	15 (12, 18)	14 (10, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=9346]	15.1 (10.8, 21.1)	17.6 (12.7, 24.0)
PaO ₂ /FiO ₂ ratio †, n(%) [N=9346]		
≤ 13.3 kPa (≤ 100 mmHg)	2855 (40.0)	629 (28.4)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	3360 (47.1)	1178 (53.2)
> 26.7 kPa (> 200 mmHg)	916 (12.8)	408 (18.4)

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

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

Demographics	Patients receiving any renal support (N=2707)	Patients not receiving any renal support (N=7461)
Age at admission (years) [N=10160]		
Mean (SD)	59.1 (11.0)	58.8 (13.2)
Median (IQR)	60 (52, 67)	60 (51, 68)
Sex, n (%) [N=10161]		
Female	617 (22.8)	2394 (32.1)
Male	2088 (77.2)	5062 (67.9)
Currently or recently pregnant, n (% of females aged 16-49) [N=714]		
Currently pregnant	2 (1.4)	24 (4.2)
Recently pregnant (within 6 weeks)	4 (2.8)	35 (6.1)
Not known to be pregnant	137 (95.8)	512 (89.7)
Ethnicity *, n (%) [N=9785]		
White	1538 (59.1)	4944 (68.8)
Mixed	46 (1.8)	132 (1.8)
Asian	430 (16.5)	1077 (15.0)
Black	398 (15.3)	556 (7.7)
Other	189 (7.3)	475 (6.6)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=9443]		
1 (least deprived)	321 (12.8)	1035 (14.9)
2	374 (14.9)	1138 (16.4)
3	528 (21.0)	1317 (19.0)
4	625 (24.9)	1658 (23.9)
5 (most deprived)	661 (26.3)	1786 (25.8)
Body mass index *, n (%) [N=9633]		
<18.5	14 (0.5)	58 (0.8)
18.5-<25	589 (22.4)	1850 (26.4)
25-<30	903 (34.4)	2427 (34.6)
30-<40	915 (34.9)	2112 (30.1)
40+	204 (7.8)	561 (8.0)

* Please see Definitions on page 39. Includes 175 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=2707)	Patients not receiving any renal support (N=7461)
Dependency prior to admission to acute hospital *, n (%) [N=10042]		
Able to live without assistance in daily activities	2473 (92.1)	6532 (88.8)
Some assistance with daily activities	205 (7.6)	793 (10.8)
Total assistance with all daily activities	6 (0.2)	33 (0.4)
Very severe comorbidities *, n (%) [N=10061]		
Cardiovascular	11 (0.4)	59 (0.8)
Respiratory	16 (0.6)	106 (1.4)
Renal	139 (5.2)	36 (0.5)
Liver	5 (0.2)	39 (0.5)
Metastatic disease	11 (0.4)	47 (0.6)
Haematological malignancy	42 (1.6)	151 (2.0)
Immunocompromise	83 (3.1)	278 (3.8)
Prior hospital length of stay [N=10167]		
Mean (SD)	2.3 (5.2)	2.5 (6.5)
Median (IQR)	1 (0, 3)	1 (0, 3)
CPR within previous 24h, n (%) [N=10160]		
In the community	13 (0.2)	39 (0.6)
In hospital	16 (0.2)	56 (0.8)
Indicator of acute severity		
Mechanically ventilated within first 24h *, n (%) [N=9967]	2056 (77.0)	3821 (52.4)
APACHE II Score [N=10046]		
Mean (SD)	17.0 (5.5)	14.4 (5.0)
Median (IQR)	16 (13, 20)	14 (11, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=9505]	14.4 (10.5, 20.0)	16.4 (11.6, 23.1)
PaO ₂ /FiO ₂ ratio †, n(%) [N=9505]		
≤ 13.3 kPa (≤ 100 mmHg)	1152 (44.0)	2335 (33.9)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	1175 (44.9)	3379 (49.1)
> 26.7 kPa (> 200 mmHg)	292 (11.1)	1172 (17.0)

* Please see Definitions on page 39. Includes 175 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 10,228 (of 10,557) patients, of whom 4078 patients have died and 6150 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 6150 patients discharged from critical care, 517 (8.4%) were last reported to be still in an acute hospital setting and 289 (4.7%) 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.

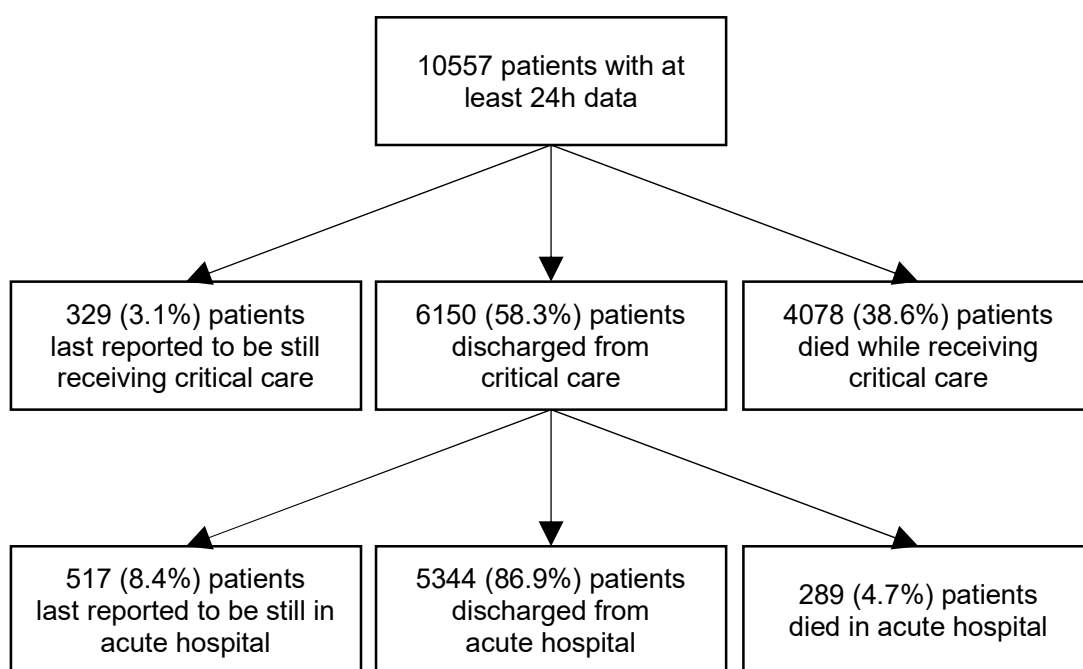


Figure 12 Critical care and acute hospital outcomes among patients with at least 24h data received

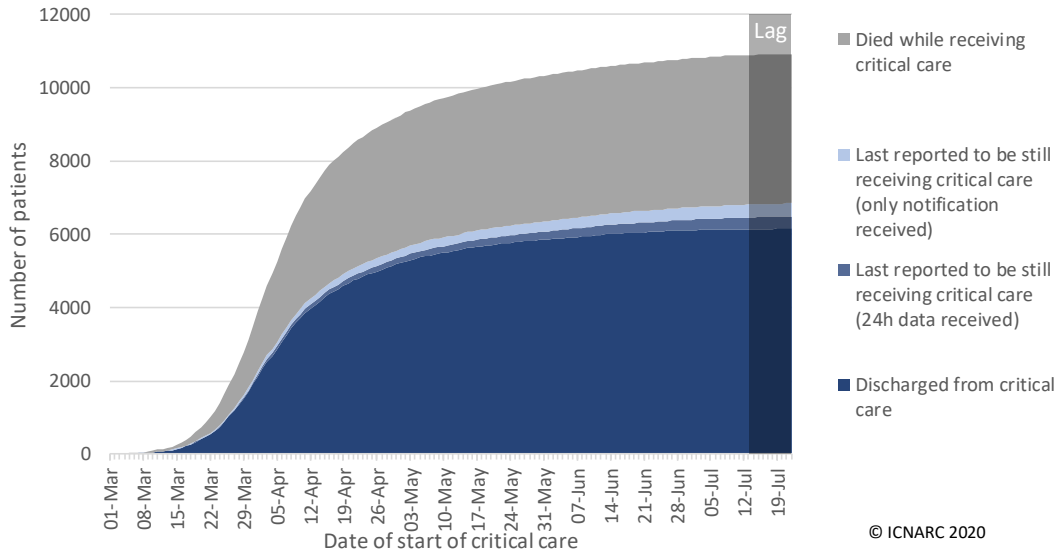
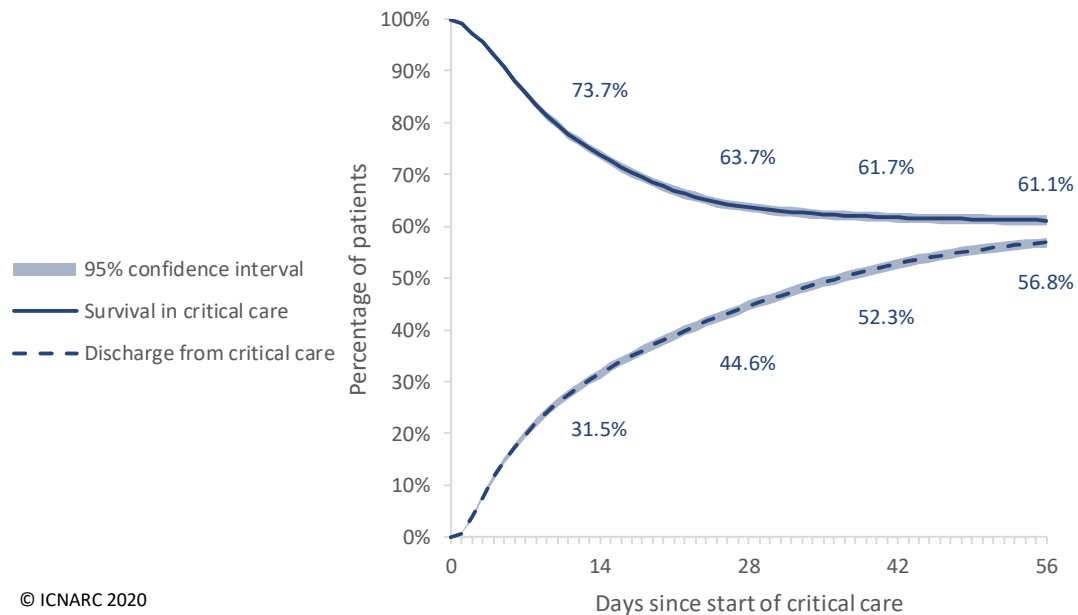


Figure 13 Cumulative outcomes by date of start of critical care *

* Please note that patients whose outcome data have not been received are assumed to remain in critical care as of 23 July 2020.



Died while receiving critical care	0	2743	3772	3974	4017
Still receiving critical care	10498	4410	1984	930	446
Discharged from critical care	0	3286	4637	5468	5875
Censored	0	59	105	126	160

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 23 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.

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

Critical care outcomes among patients who have been discharged or died	Patients with COVID-19 and outcome reported (N=10228)	Patients with viral pneumonia (non-COVID-19), 2017-19 (N=5626)
Outcome at end of critical care, n (%)		
Discharged	6150 (60.1)	4423 (78.6)
Died	4078 (39.9)	1203 (21.4)
Duration of critical care		
Duration of critical care † (days), median (IQR)		
Survivors	12 (5, 28)	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	7355 (72.2)	2721 (48.4)
Basic respiratory support	6898 (67.7)	4527 (80.5)
Advanced cardiovascular support	3054 (30.0)	1261 (22.4)
Basic cardiovascular support	9477 (93.0)	5219 (92.8)
Renal support	2707 (26.6)	957 (17.0)
Liver support	104 (1.0)	53 (0.9)
Neurological support	899 (8.9)	320 (5.7)
Combinations of advanced respiratory, advanced cardiovascular and renal support, n (%):		
Advanced respiratory support only	3196 (31.2)	1257 (22.3)
Advanced cardiovascular support only	46 (0.4)	79 (1.4)
Renal support only	120 (1.2)	116 (2.1)
Advanced respiratory and advanced cardiovascular support only	1566 (15.3)	640 (11.4)
Advanced respiratory and renal support only	1165 (11.4)	299 (5.3)
Advanced cardiovascular and renal support only	14 (0.1)	17 (0.3)
Advanced respiratory, advanced cardiovascular and renal support	1428 (14.0)	525 (9.3)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	13 (7, 23)	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, 22)	6 (3, 12)
Renal support	8 (3, 15)	6 (3, 12)

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).

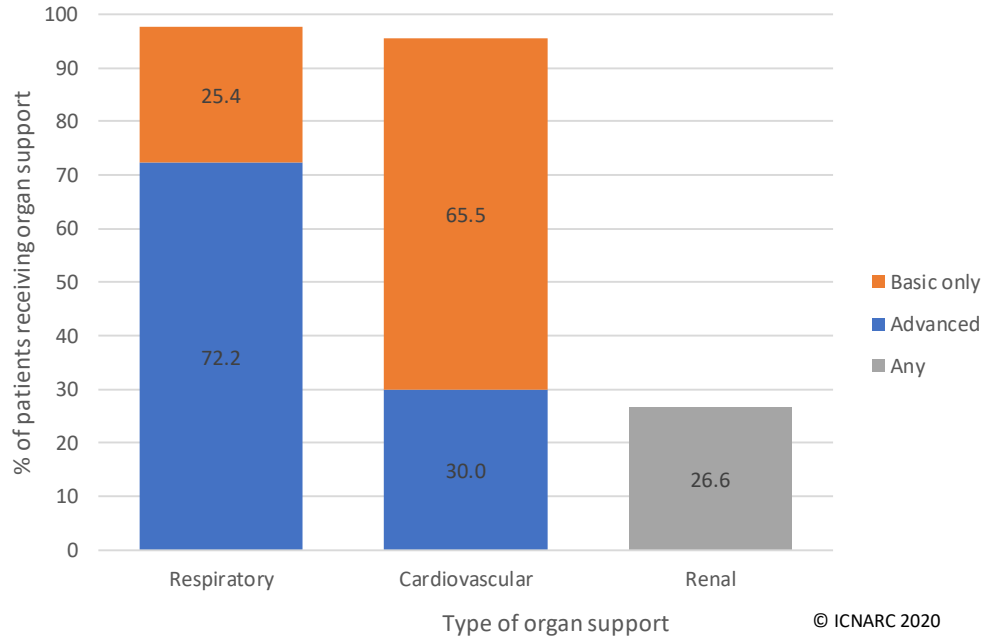


Figure 15 Percentage of patients receiving organ support *

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.

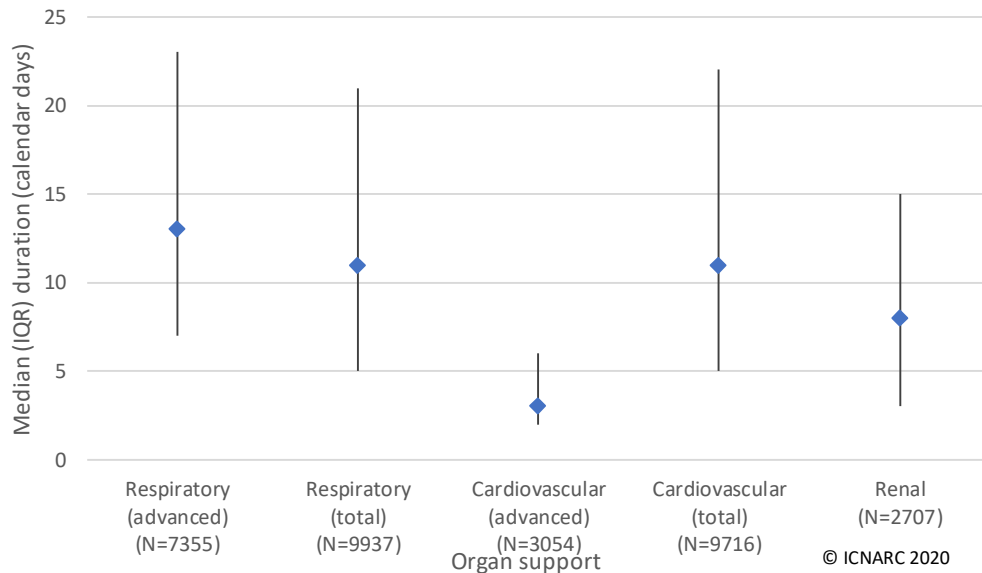


Figure 16 Duration of organ support received *

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, 21.3% were reported to have been discharged from critical care for palliative care. A total of 1329 inter-hospital critical care transfers for 1134 patients have been reported, as well as 260 readmissions for 249 patients (Figure 18).

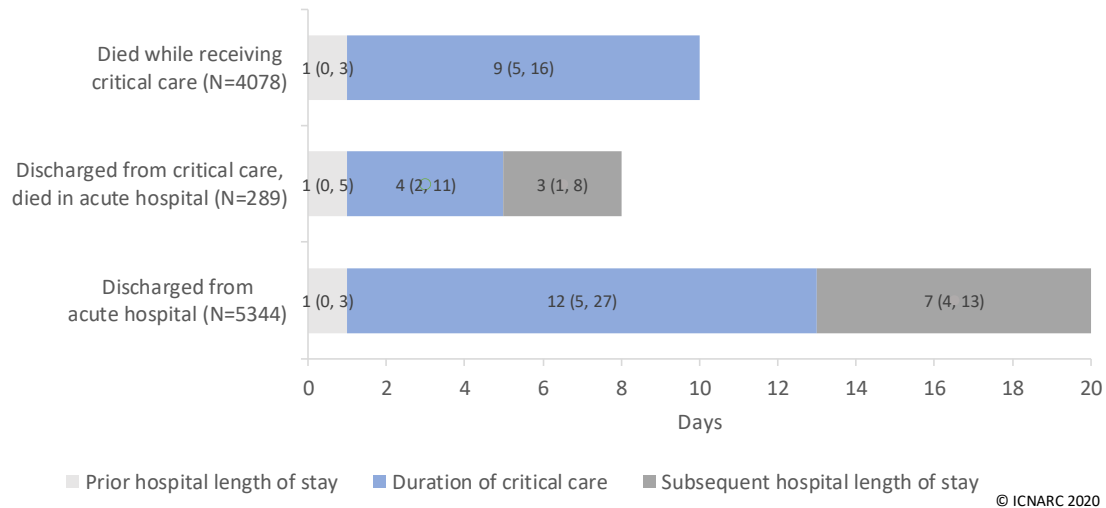


Figure 17 Median lengths of stay among patients with hospital outcome data received

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.

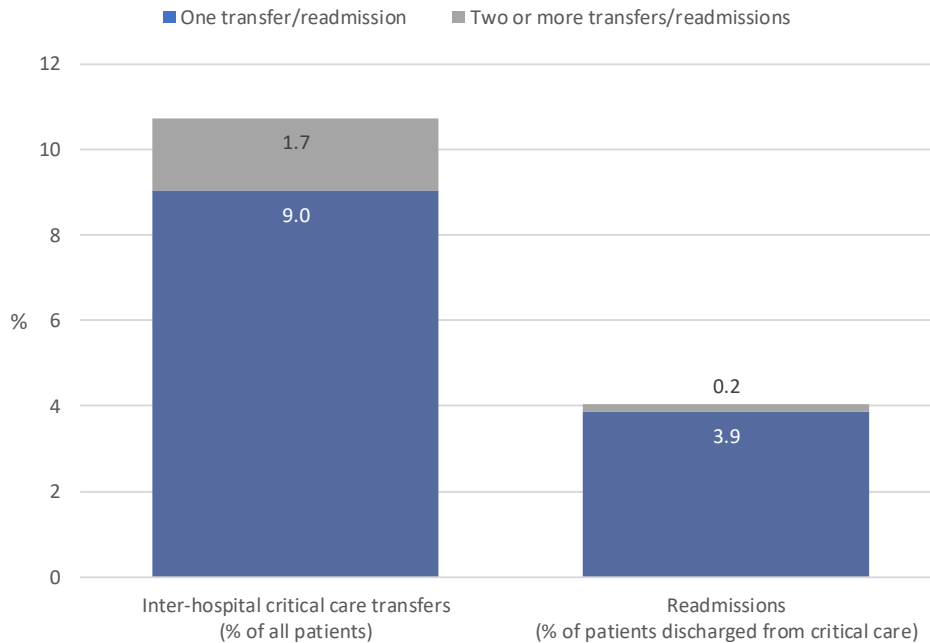


Figure 18 Inter-hospital critical care transfers and readmissions

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.

Table 10 Outcome by patient characteristics

Patient characteristic	Patients with COVID-19 and outcome reported (N=10228)		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	700 (85.3)	121 (14.7)	(7.1)
40-49	1088 (78.5)	298 (21.5)	(12.1)
50-59	1878 (66.4)	952 (33.6)	(19.1)
60-69	1603 (53.1)	1417 (46.9)	(25.7)
70-79	749 (40.5)	1102 (59.5)	(31.2)
80+	128 (41.0)	184 (59.0)	(30.8)
Sex			
Female	1962 (64.7)	1069 (35.3)	(19.1)
Male	4184 (58.2)	3006 (41.8)	(23.3)
Ethnicity *			
White	3974 (61.0)	2543 (39.0)	(21.7)
Mixed	107 (59.4)	73 (40.6)	(14.0)
Asian	854 (56.2)	665 (43.8)	(19.4)
Black	557 (58.2)	400 (41.8)	(12.4)
Other	439 (65.7)	229 (34.3)	(18.6)
Index of Multiple Deprivation (IMD) quintile *			
1 (least deprived)	849 (61.8)	524 (38.2)	(22.3)
2	925 (60.8)	596 (39.2)	(22.6)
3	1116 (60.0)	744 (40.0)	(22.5)
4	1378 (60.0)	917 (40.0)	(20.1)
5 (most deprived)	1498 (61.1)	955 (38.9)	(20.3)
Body mass index			
<25	1498 (59.3)	1030 (40.7)	(23.1)
25-<30	1936 (57.8)	1413 (42.2)	(22.5)
30-<40	1936 (63.6)	1108 (36.4)	(18.9)
40+	502 (65.2)	268 (34.8)	(13.6)
Assistance required with daily activities			
No	5548 (61.2)	3513 (38.8)	(19.4)
Yes	536 (51.6)	503 (48.4)	(27.2)
Any very severe comorbidities *			
No	5678 (61.2)	3599 (38.8)	(18.8)
Yes	419 (49.7)	424 (50.3)	(32.8)

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.

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

Critical care unit outcomes among patients who have been discharged or died	Patients of white ethnicity (N=6517)	Patients of non-white ethnicity (N=3324)
Outcome at end of critical care, n (%)		
Alive	3974 (61.0)	1957 (58.9)
Dead	2543 (39.0)	1367 (41.1)
Duration of critical care		
Duration of critical care † (days), median (IQR)		
Survivors	11 (4, 25)	15 (6, 32)
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	4454 (68.6)	2621 (79.2)
Basic respiratory support	4527 (69.7)	2135 (64.5)
Advanced cardiovascular support	1844 (28.4)	1085 (32.8)
Basic cardiovascular support	5976 (92.0)	3145 (95.0)
Renal support	1538 (23.7)	1063 (32.2)
Liver support	46 (0.7)	50 (1.5)
Neurological support	561 (8.7)	307 (9.3)
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 (1, 6)
Total (advanced + basic) cardiovascular support	10 (5, 21)	13 (6, 24)
Renal support	8 (3, 14)	8 (3, 15)

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.

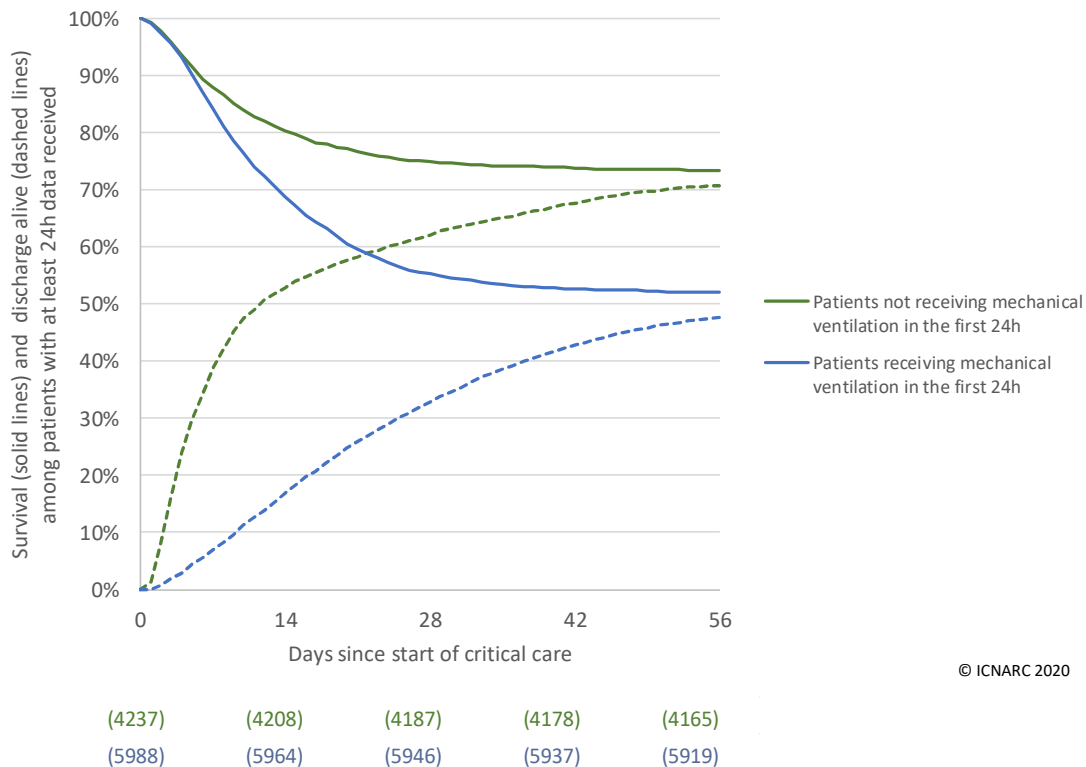


Figure 19 Survival and discharge by mechanical ventilation during the first 24 hours *

* 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 23 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.

Table 12 Outcome by combinations of organ support *

Organ support received *	Patients with COVID-19 and outcome reported (N=10228)		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	2085 (80.5)	506 (19.5)	(11.2)
Advanced	3817 (51.9)	3538 (48.1)	(33.3)
Any renal support	1176 (43.1)	1551 (56.9)	(46.1)
Combinations of advanced respiratory, advanced cardiovascular and renal support:			
Advanced respiratory support only	2031 (63.5)	1165 (36.5)	(18.7)
Advanced respiratory and advanced cardiovascular support only	707 (45.1)	859 (54.9)	(40.2)
Advanced respiratory and renal support only	566 (48.6)	599 (51.4)	(38.8)
Advanced respiratory, advanced cardiovascular and renal support	513 (35.9)	915 (64.1)	(56.6)

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 13 Outcome, 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=7355)	Patients receiving only basic respiratory support * (N=2591)
Outcome at end of critical care, n (%)		
Discharged	3817 (51.9)	2085 (80.5)
Died	3538 (48.1)	506 (19.5)
Duration of critical care		
Duration of critical care † (days), median (IQR)		
Survivors	22 (12, 36)	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	4299 (58.5)	2591 (100.0)
Advanced cardiovascular support	2994 (40.8)	44 (1.7)
Basic cardiovascular support	7092 (96.5)	2184 (84.3)
Renal support	2574 (35.1)	101 (3.9)
Liver support	100 (1.4)	3 (0.1)
Neurological support	872 (11.9)	23 (0.9)
Duration of organ support (calendar days), median (IQR)		
Total (advanced + basic) respiratory support	15 (8, 26)	4 (3, 7)
Advanced cardiovascular support	3 (2, 6)	2 (1, 3.5)
Total (advanced + basic) cardiovascular support	15 (8, 26)	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=2707)	Patients not receiving any renal support * (N=7461)
Outcome at end of critical care, n (%)		
Discharged	1160 (42.9)	4947 (66.3)
Died	1547 (57.1)	2514 (33.7)
Duration of critical care		
Duration of critical care † (days), median (IQR)		
Survivors	31 (19, 45)	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	2574 (95.1)	4762 (63.8)
Basic respiratory support	1481 (54.7)	5398 (72.4)
Advanced cardiovascular support	1437 (53.1)	1611 (21.6)
Basic cardiovascular support	2615 (96.6)	6836 (91.6)
Liver support	69 (2.6)	35 (0.5)
Neurological support	378 (14.0)	521 (7.0)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	17 (10, 28)	11 (6, 20)
Total (advanced + basic) respiratory support	19 (11, 31)	9 (4, 17)
Advanced cardiovascular support	4 (2, 7)	3 (1, 5)
Total (advanced + basic) cardiovascular support	19 (10, 31)	9 (4, 18)

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 175 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.

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

Patient characteristic	Patients receiving advanced respiratory support * (N=7355)		Patients receiving only basic respiratory support * (N=2591)	
	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 (years)				
16-39	410 (78.4)	113 (21.6)	252 (97.3)	7 (2.7)
40-49	720 (72.8)	269 (27.2)	328 (92.4)	27 (7.6)
50-59	1239 (58.4)	881 (41.6)	594 (90.8)	60 (9.2)
60-69	1033 (44.7)	1279 (55.3)	504 (79.6)	129 (20.4)
70-79	384 (29.9)	899 (70.1)	325 (62.4)	196 (37.6)
80+	27 (22.5)	93 (77.5)	82 (48.5)	87 (51.5)
Sex				
Female	1155 (56.3)	897 (43.7)	707 (81.5)	160 (18.5)
Male	2659 (50.2)	2638 (49.8)	1377 (79.9)	346 (20.1)
Ethnicity *				
White	2316 (52.0)	2138 (48.0)	1496 (79.4)	389 (20.6)
Mixed	73 (52.1)	67 (47.9)	31 (83.8)	6 (16.2)
Asian	573 (49.1)	593 (50.9)	248 (80.3)	61 (19.7)
Black	406 (52.1)	374 (47.9)	132 (84.6)	24 (15.4)
Other	319 (59.6)	216 (40.4)	107 (90.7)	11 (9.3)
Index of Multiple Deprivation (IMD) quintile				
1 (least deprived)	479 (52.3)	437 (47.7)	327 (80.0)	82 (20.0)
2	556 (52.5)	504 (47.5)	338 (79.5)	87 (20.5)
3	721 (52.7)	646 (47.3)	354 (79.7)	90 (20.3)
4	878 (51.9)	814 (48.1)	443 (82.6)	93 (17.4)
5 (most deprived)	931 (53.4)	812 (46.6)	511 (78.7)	138 (21.3)
Body mass index				
<25	908 (50.8)	879 (49.2)	500 (78.5)	137 (21.5)
25-<30	1214 (49.1)	1258 (50.9)	651 (81.6)	147 (18.4)
30-<40	1298 (56.6)	994 (43.4)	576 (84.6)	105 (15.4)
40+	292 (55.9)	230 (44.1)	193 (83.9)	37 (16.1)
Assistance required with daily activities				
No	3522 (52.6)	3175 (47.4)	1825 (85.3)	314 (14.7)
Yes	252 (44.2)	318 (55.8)	239 (57.3)	178 (42.7)
Any very severe comorbidities *				
No	3609 (52.8)	3221 (47.2)	1860 (84.1)	352 (15.9)
Yes	172 (38.6)	274 (61.4)	210 (59.3)	144 (40.7)

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.

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

Patient characteristic	Patients receiving any renal support * (N=2707)		Patients not receiving any renal support * (N=7461)	
	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 (years)				
16-39	86 (64.2)	48 (35.8)	606 (89.2)	73 (10.8)
40-49	246 (67.2)	120 (32.8)	829 (82.7)	174 (17.3)
50-59	384 (47.9)	418 (52.1)	1485 (73.8)	527 (26.2)
60-69	319 (35.1)	591 (64.9)	1275 (60.7)	825 (39.3)
70-79	116 (25.2)	344 (74.8)	630 (45.5)	755 (54.5)
80+	7 (24.1)	22 (75.9)	120 (42.9)	160 (57.1)
Sex				
Female	282 (45.7)	335 (54.3)	1667 (69.6)	727 (30.4)
Male	878 (42.0)	1210 (58.0)	3276 (64.7)	1786 (35.3)
Ethnicity *				
White	657 (42.7)	881 (57.3)	3288 (66.5)	1656 (33.5)
Mixed	23 (50.0)	23 (50.0)	82 (62.1)	50 (37.9)
Asian	166 (38.6)	264 (61.4)	683 (63.4)	394 (36.6)
Black	191 (48.0)	207 (52.0)	364 (65.5)	192 (34.5)
Other	85 (45.0)	104 (55.0)	351 (73.9)	124 (26.1)
Index of Multiple Deprivation (IMD) quintile				
1 (least deprived)	148 (46.1)	173 (53.9)	686 (66.3)	349 (33.7)
2	156 (41.7)	218 (58.3)	762 (67.0)	376 (33.0)
3	254 (48.1)	274 (51.9)	851 (64.6)	466 (35.4)
4	253 (40.5)	372 (59.5)	1120 (67.6)	538 (32.4)
5 (most deprived)	289 (43.7)	372 (56.3)	1205 (67.5)	581 (32.5)
Body mass index				
<25	241 (40.0)	362 (60.0)	1248 (65.4)	660 (34.6)
25-<30	345 (38.2)	558 (61.8)	1576 (64.9)	851 (35.1)
30-<40	444 (48.5)	471 (51.5)	1480 (70.1)	632 (29.9)
40+	104 (51.0)	100 (49.0)	393 (70.1)	168 (29.9)
Assistance required with daily activities				
No	1065 (43.1)	1408 (56.9)	4441 (68.0)	2091 (32.0)
Yes	84 (39.8)	127 (60.2)	451 (54.6)	375 (45.4)
Any very severe comorbidities *				
No	1034 (42.7)	1387 (57.3)	4601 (67.7)	2198 (32.3)
Yes	118 (44.4)	148 (55.6)	301 (52.3)	274 (47.7)

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 175 patients requiring chronic renal replacement therapy for end stage renal disease prior to critical care; outcomes for these patients are similar.

Patient characteristics and outcomes for longer stay patients

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 17 Patient 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=1877)
Age at admission (years) [N=1872]	
Mean (SD)	56.7 (10.9)
Median (IQR)	58 (50, 64)
Sex, n (%) [N=1874]	
Female	491 (26.2)
Male	1383 (73.8)
Currently or recently pregnant, n (% of females) [N=126]	
Currently pregnant	4 (3.2)
Recently pregnant (within 6 weeks)	6 (4.8)
Not known to be pregnant	116 (92.1)
Ethnicity *, n (%) [N=1822]	
White	1062 (58.3)
Mixed	45 (2.5)
Asian	340 (18.7)
Black	206 (11.3)
Other	169 (9.3)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=1788]	
1 (least deprived)	229 (12.8)
2	274 (15.3)
3	385 (21.5)
4	450 (25.2)
5 (most deprived)	450 (25.2)
Body mass index *, n (%) [N=1825]	
<18.5	9 (0.5)
18.5-<25	447 (24.5)
25-<30	611 (33.5)
30-<40	637 (34.9)
40+	121 (6.6)

* 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=1877)
Dependency prior to admission to acute hospital *, n (%) [N=1850]	
Able to live without assistance in daily activities	1744 (94.3)
Some assistance with daily activities	105 (5.7)
Total assistance with all daily activities	1 (0.1)
Very severe comorbidities *, n (%) [N=1858]	
Cardiovascular	4 (0.2)
Respiratory	9 (0.5)
Renal	22 (1.2)
Liver	2 (0.1)
Metastatic disease	6 (0.3)
Haematological malignancy	27 (1.5)
Immunocompromise	48 (2.6)
Prior hospital length of stay [N=1876]	
Mean (SD)	2.1 (4.3)
Median (IQR)	1 (0, 3)
CPR within previous 24h, n (%) [N=1873]	
In the community	4 (0.0)
In hospital	5 (0.1)
Indicator of acute severity	
Mechanically ventilated within first 24h *, n (%) [N=1852]	1395 (75.3)
APACHE II Score [N=1861]	
Mean (SD)	14.8 (4.8)
Median (IQR)	14 (12, 18)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=1816]	
PaO ₂ /FiO ₂ ratio †, n (%) [N=1816]	15.0 (11.1, 20.2)
≤ 13.3 kPa (≤ 100 mmHg)	726 (40.0)
> 13.3 and ≤ 26.7 kPa (> 100 and ≤ 200 mmHg)	912 (50.2)
> 26.7 kPa (> 200 mmHg)	178 (9.8)

* 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 19 Outcome, 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=1765)
Outcome at end of critical care, n (%)	
Alive	1503 (85.2)
Dead	262 (14.8)
Duration of critical care	
Duration of critical care † (days), median (IQR)	
Survivors	40 (33, 50)
Non-survivors	34 (30, 41)
Organ support (Critical Care Minimum Dataset)*	
Receipt of organ support, at any point, n (%)	
Advanced respiratory support	1736 (98.7)
Basic respiratory support	1484 (84.4)
Advanced cardiovascular support	805 (45.9)
Basic cardiovascular support	1745 (99.2)
Renal support	832 (47.5)
Liver support	48 (2.8)
Neurological support	329 (18.8)
Duration of organ support (calendar days), median (IQR)	
Advanced respiratory support	33 (27, 41)
Total (advanced + basic) respiratory support	37 (31, 46)
Advanced cardiovascular support	4 (2, 9)
Total (advanced + basic) cardiovascular support	36 (31, 45)
Renal support	17 (9, 26)

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.

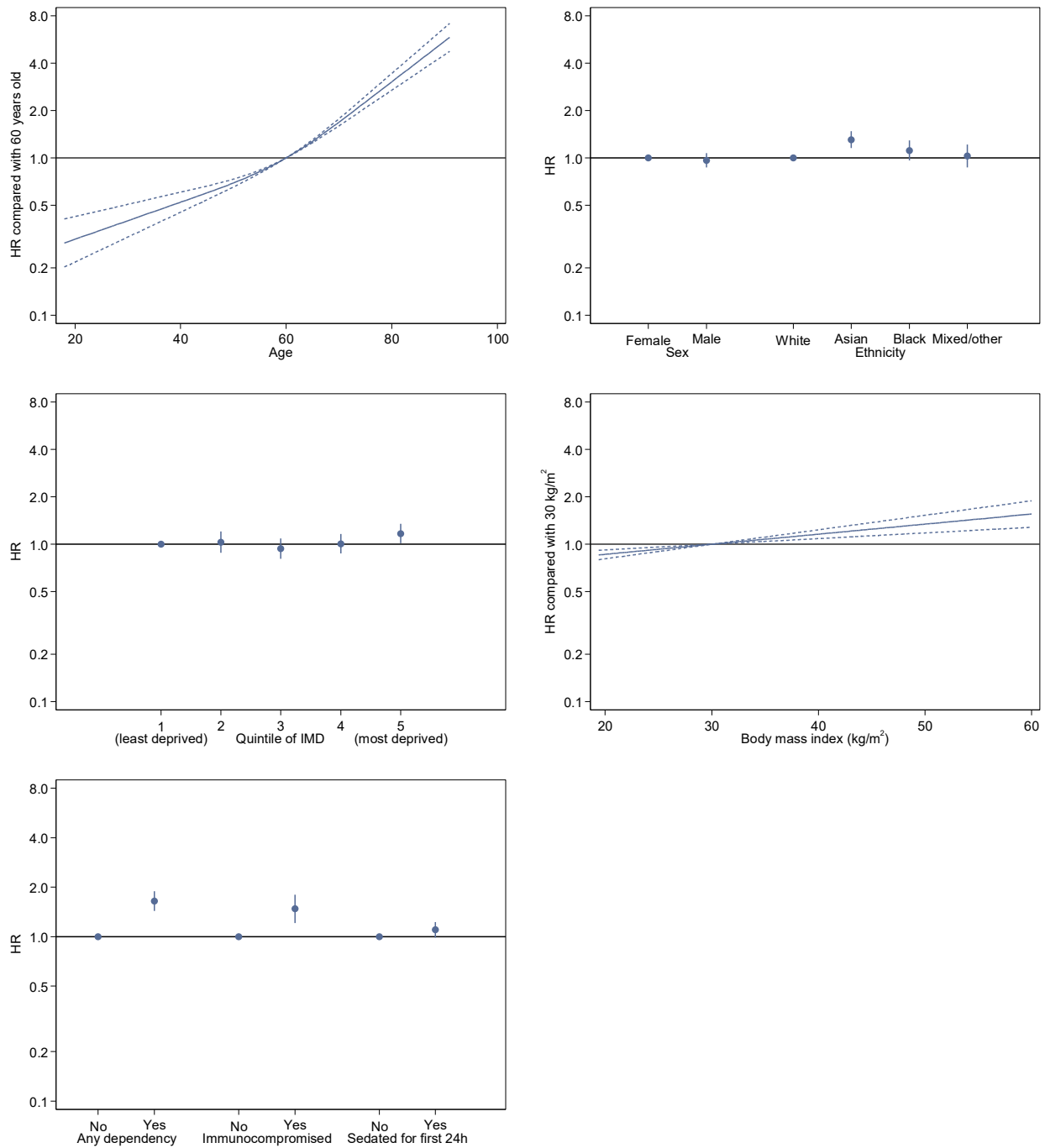


Figure 20 Hazard ratios and 95% confidence intervals from Cox proportional hazards regression model for death within 30 days following start of critical care: demographics and medical history

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/m²). Immunocompromised includes the conditions as defined on page 39 and also metastatic disease and haematological malignancy.

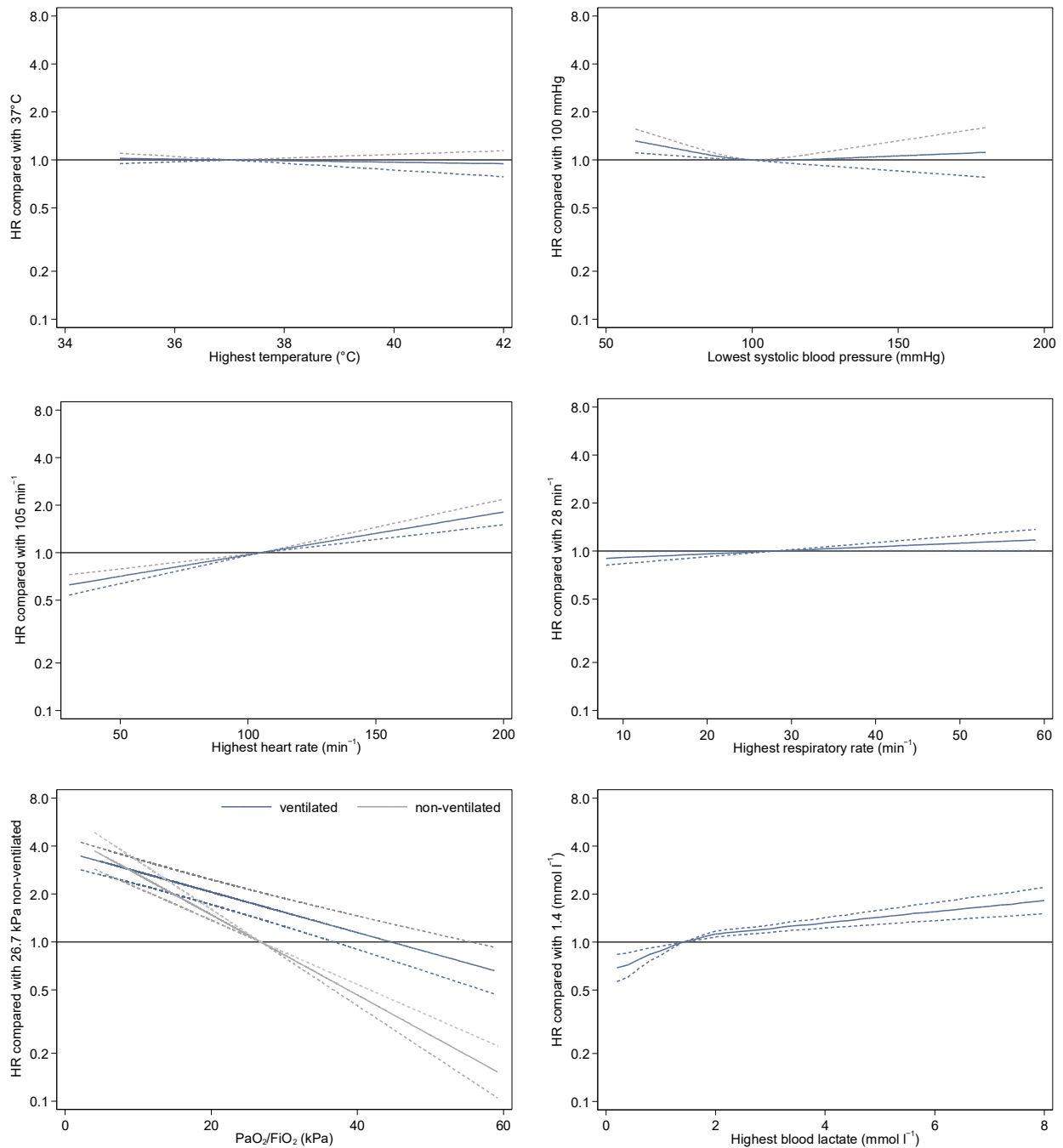


Figure 21 Hazard ratios and 95% confidence intervals from Cox proportional hazards regression model for death within 30 days following start of critical care: physiology (1)

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 PaO₂/FiO₂ which is reported relative to the threshold for defining ARDS (26.7 kPa).

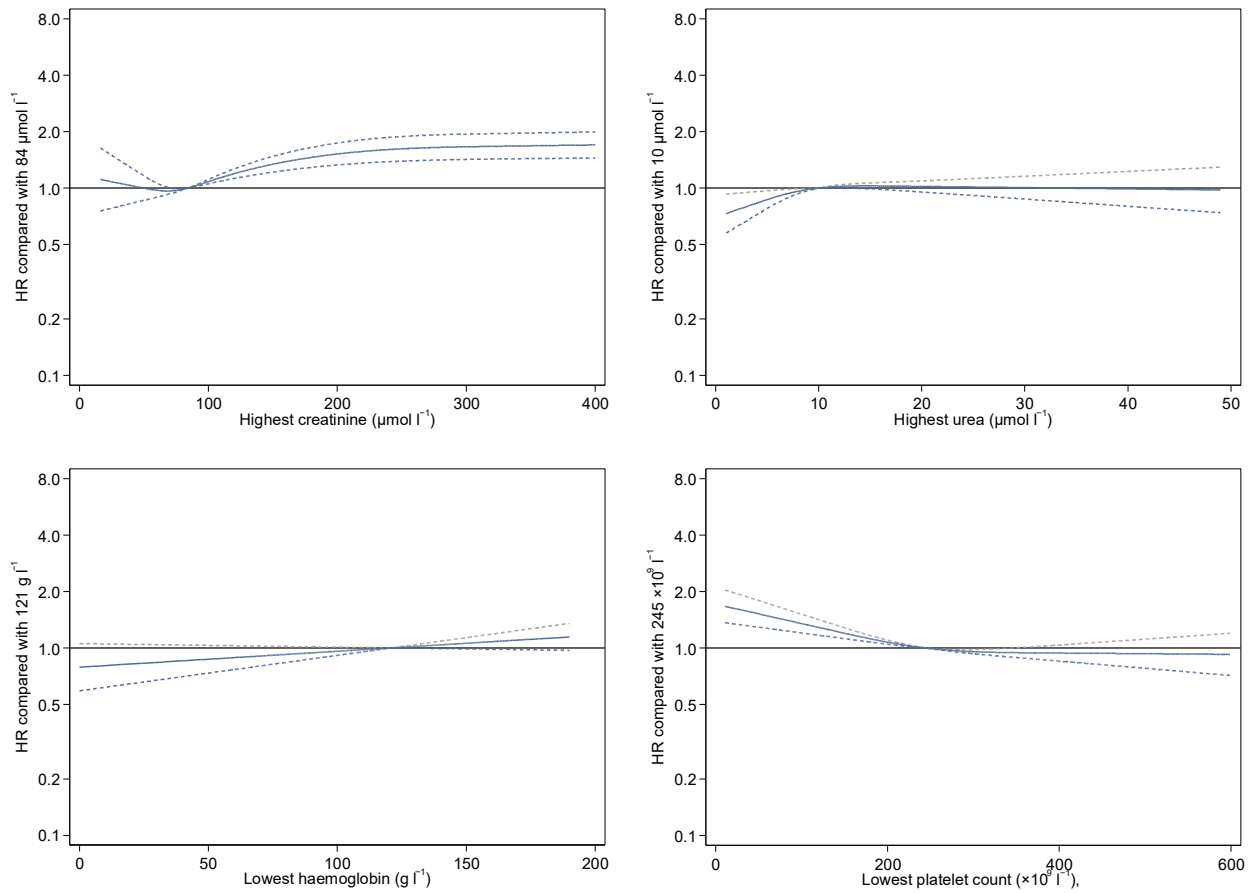


Figure 22 Hazard ratios and 95% confidence intervals from Cox proportional hazards regression model for death within 30 days following start of critical care: physiology (2)

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=10557)	
NHS number (used to combine transfers and readmissions)	211 (2.0)
Age	1 (0.0)
Sex	7 (0.1)
Currently or recently pregnant	1 (0.1) †
Ethnicity *	409 (3.9)
Index of Multiple Deprivation	746 (7.1)
BMI	565 (5.4)
Prior dependency *	162 (1.5)
Very severe comorbidities *	129 (1.2)
Prior hospital length of stay	5 (0.0)
CPR within previous 24h	19 (0.2)
Mechanical ventilation during the first 24h *	286 (2.7)
APACHE II Score	166 (1.6)
PaO ₂ /FiO ₂ ratio	756 (7.2)
Outcome variables (N=10228)	
Length of stay in critical care	78 (0.8)
Advanced respiratory support *	40 (0.4)
Basic respiratory support *	41 (0.4)
Advanced cardiovascular support *	50 (0.5)
Basic cardiovascular support *	34 (0.3)
Renal support *	60 (0.6)
Liver support *	77 (0.8)
Neurological support *	73 (0.7)

* 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 critical care 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.”