Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

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cases had connection of AKI with previous COVID-19. In addition, they all had SIRS markers, corresponding diagnostic criteria of SARS-Cov2 associated multisystem inflammatory syndrome.

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PS05.20 (959)

Evaluation of neutrophil to lymphocyte ratio as a predicted marker for the assessment of severe Coronavirus Disease-19 patients under a resource-constrained setting

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Purpose: Analysis of clinical and laboratory markers are critical to determining the disease severity in Coronavirus Disease-19 (COVID-19) patients. The purpose of this study was to evaluate neutrophil to lymphocyte ratio (NLR) as a predicting marker of severe COVID-19 cases under the resource-constrained setting.

Methods & Materials: This retrospective cross-sectional study was conducted among the purposively selected 71 COVID-19 patients admitted to the COVID hospital of the Bangabandhu Sheikh Mujib Medical University (BSMMU) from March 2021 to May 2021. The study population was grouped into mild to moderate COVID-19 (n=25) and Severe COVID-19 (n=46) patients based on the World Health Organization (WHO) COVID-19 disease severity classification. The predictive performance of the NLR for the assessment of severity in the COVID-19 population was determined by generating receiver operative characteristics (ROC) curves to obtain the best cut-off value.

Results: Among the study populations, none of the studied laboratory parameters was found to significantly varied between the mild to moderate and severe COVID-19 patients group except NLR. NLR values in severe COVID-19 patients (median: 12.57, IQR: 3.79-18.6) were found significantly higher (P<0.01) than that of the mild to moderate COVID-19 group (median: 3.45; IQR: 2.71-8.16). Based on the ROC curve analysis, the best cut off value to determine the severe COVID-19 cases over mild to moderate COVID-19 patients was 4.26 with a sensitivity and specificity of 71.1% and 52.4% respectively. The area under the curve (AUC) was 0.701 with a 95% confidence interval (95% CI) of 0.557 to 0.845.

Conclusion: This study demonstrated NLR as a low-cost laboratory predictor for the assessment of disease severity in COVID-19 patients that can be utilized under resource constraints settings.

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PS05.21 (395)

Long COVID-19 - a pathology of concern

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Purpose: COVID-19 is an infectious disease that has been concerning the entire medical world for more than a year. But in addition to the severity of the acute phase, more people who have experienced non severe forms of acute infection suffer from a polymorphic clinical features that gradually begins in the subsequent weeks after acute episode and persists for weeks and months after.

Methods & Materials: A 6-month prospective study from January to June 2021, was conducted in a private practice for Infectious Diseases, Oradea, Romania. The study’s outcome was the identification and follow-up of a set of clinical manifestations occurring one month after a non-severe acute episode of COVID-19. The statistical analysis was performed by Software SPSS (Statistical Package for the Social Sciences), version 26.

Results: A total of 75 patients were available for analysis. We identified fatigue in 33.33% (25), anxiety in 40% (30), depression in 13.33% (10), brain fog in 20% (15), fever in 20% (15), anosmia in 13.33% (10), dysgeusia in 6.66% (5), cough in 26.66% (20), dysphonia in 21.33% (16), chest pain in 4% (3.33%), rash in 4% (3), hair loss in 33.33% (25), dizziness in 6.66% (5), hypotension in 28% (21), arrhythmias in 2.66 % (2), diarrhoea in 42.66% (32), peripheral limb ischemia in 1.33% (1) cases, in the period between 4 to 12 weeks after acute COVID-19. The following clinical features were reported after 12 weeks from acute episode: brain fog in 6.66% (5), fever in 1.33% (1), cough in 5.33% (4), dysphonia in 9.33% (7), hair loss in 4% (3), hypotension in 2.66% (2), diarrhoea in 12% (9) cases. A direct positive statistically significant correlation between the patients’ age and the number of clinical features has been registered (r=0.29, p=0.01).

Conclusion: The long COVID-19 leads to negative socioeconomic and medical effects for people who have suffered from COVID-19. The effects intensify as patients age.

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PS05.22 (1053)

Descriptive Study On Starvation Ketoacidosis in Covid-19 Obstetric Patients In A Tertiary Hospital in Central Region of Malaysia

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Purpose: This study describes the presentation of starvation ketoacidosis in cases of pregnancy related Covid 19 pneumonia and their outcomes toward Cytokine Release Syndrome (CRS), Intensive Care Unit (ICU) admission, overall maternal and fetal outcome.

Methods & Materials: Prospective study on all obstetric admissions for Covid 19 pneumonia in a tertiary hospital in central region of Malaysia (Hospital Ampang) from 1st July to 31st August 2021 was done. Starvation ketoacidosis cases as defined as serum bicarbonate less than 20mmol/L with serum ketone of more than 3mmol/L or urine ketone more than 4+ were selected. Their outcome related to CRS, ICU admission and fetal outcome was monitored. Patients with incomplete data, and other cause of metabolic acidosis were excluded from this study.

Results: 31 patients been isolated to have starvation ketoacidosis based on our study criteria. The median age of our study population was 31 years old. Patients mostly presented in stable condition before the onset of starvation ketoacidosis whereby 23 cases (74.19%) presented with Category 1 to 3 Covid-19 infection and only 8 cases (25.81%) require oxygen (Category 4) on presentation. Starvation ketoacidosis has commonly been observed in gestational diabetes mothers (61.29%) and those with obesity (51.61%). It happened mostly at day 6 to day 10 of covid infection (54.83%) with commonly lower CRP count of less than 50 (61.29%) during onset...
of acidosis. The mean random blood sugar (RBS) among patients who diagnosed with starvation ketoacidosis was 5.95 mmol/L. Total of 25 from 31 patients (80.64 %) went into CRS, and required oxygen supplementation and 13 patients (41.94%) required ICU care. We also observed 21 out of 31 patients (67.74%) in our sample population whom needed delivery of the fetus

**Conclusion:** Starvation ketoacidosis in Covid 19 Obstetric patients may precede CRS and ICU admission. The association of starvation ketoacidosis with CRS and ICU admission or worsening Covid 19 pneumonia need to be further evaluated in a bigger study sample. A prompt early multidisciplinary treatment involving Infectious Disease team, Intensive Care team and Obstetric Team could avoid undesirable patient outcome.

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**Topic 06: COVID-19 Ethics and Misinformation**

**OP06.01 (216)**

**Methods for Counting COVID-19 Deaths in US States and Territories**

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**Purpose:** The US Centers for Disease Control and Prevention (CDC) never issued guidelines on how states should publicly report COVID-19 deaths, and as a result, states ended up settling on different methods. Critics have claimed that some methods, such as counting “deaths with COVID-19” rather than “deaths from COVID-19”, resulted in overcounts of COVID-19 deaths. While it is clear from alternate measures like excess mortality that all states underestimated COVID-19 deaths, we investigated whether different methods had any effect on state death reporting.

**Methods & Materials:** We identified the methods states use to report COVID-19 deaths on their dashboards, then compared state-reported data collected by CDC in its COVID Data Tracker against data from the CDC’s National Center for Health Statistics (NCHS)’s national review of death certificates measuring deaths from COVID-19. Comparing state data against this standardized national dataset allowed us to see if state definitions affected their reporting.

**Results:** Contrary to critics’ claims, few states have definitions that could systematically include individuals who died of causes unrelated to COVID-19. State death definitions instead vary along two lines: whether positive PCR tests were required to count COVID-19 deaths—with states requiring tests having cumulative totals 9.03% lower than NCHS data, while states not requiring them had totals 10.21% higher (p=.06)—and whether states exclusively used death certificates to measure COVID-19 deaths, with these states’ totals coming in 27.63% higher than NCHS data, compared to 3.26% higher for states using additional information (p=.11).

**Conclusion:** Rather than certain methods leading to systematic overcounts of COVID-19 deaths, it appears some methods could be especially prone to undercounts. Only states using death certificate reviews had counts substantially higher than NCHS data, and since NCHS also uses death certificates, the difference appears to be a matter of the faster speed of state review. Meanwhile, many states using different methods have discovered they missed large quantities of COVID-19 deaths in their counts. The CDC should have provided leadership to states on how they should report COVID-19 deaths to avoid any preventable undercounts, and public communication to quell misinformation about overcounts.

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**PS06.01 (909)**

**Access to Information, Concerns, Myths and Truths on Food Safety During COVID-19: An Overview of Portuguese Population**

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**Purpose:** The COVID-19 pandemic raised questions and concerns about the possibility of transmission of SARS-CoV-2 via foods. While cases of COVID were rapidly rising, information related to the virus and ways of prevention was also increasing, with much of this information being provided by the media and the general population. In this context, this study had two main objectives: 1) To understand the doubts and concerns of the Portuguese population related to food safety during the first wave of COVID-19 and how they clarified these issues and 2) to analyze the population’s opinion on myths and truths related to the transmission of the infection.

**Methods & Materials:** A survey including questions about a) concerns and information on food safety during the first wave of COVID-19 pandemic; b) myths and truths about COVID-19; and c) respondents’ profile. The survey was released online between June and October of 2020.

**Results:** The main doubt of the respondents was related to the manipulation of food (40.7%) followed by the possibility of transmission of COVID-19 through food (12.6%) and which foods should be avoided due to the pandemic (12.6%). 33.3% of the participants stated that television was the main mean of information accessed to clarify these doubts, followed by a Guideline launched by the Directorate-General of Health (31.8%). However, 50.3% said that they had only found answers to some of their questions. 50% of the respondents with higher level of education and 30% of the respondents with lower level of education had doubts about the possibility of the transmission of COVID-19 through food. Also, most of the survey participants disagreed with the affirmations regarding popular ways of disinfecting food to prevent infection.

**Conclusion:** COVID-19 pandemic raised several doubts, however when related to food safety, the main doubt was about the manipulation of food due to the concern of SARS-CoV-2 transmission. Most respondents do not believe myths about COVID-19 and food safety, but this was dependent on the level of education.

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**PS06.02 (656)**

**Medical Students and Youth-Led Efforts against Infodemic**

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