

English	Simplified Chinese
<p>Coronavirus (COVID-19): Treatments</p> <p>Getting your coronavirus (COVID-19) vaccination is still the best way to protect yourself from the virus.</p> <p>There are additional treatment options for selected groups of people with coronavirus who are thought to be at greater risk. These treatments need to be given soon after you get a positive coronavirus test result to be most effective.</p> <p>These additional coronavirus treatments are available to the following groups of people:</p> <ul style="list-style-type: none"> • those thought to be at high risk and with a clinical condition that's been prioritised for treatment • those taking part in a registered clinical trial of antiviral and other therapies for coronavirus 	<p>2019 新冠肺炎（COVID-19）：治疗</p> <p>接种新冠病毒疫苗仍然是保护自己免受病毒感染的最佳方式。</p> <p>对于一些被认为风险更高的新冠病毒感染群体，还有额外的治疗方案。在新冠病毒检测结果呈阳性后，需要立即给予这些治疗，以达到最佳治疗效果。</p> <p>以下人群可获得这些额外的新冠病毒治疗方案：</p> <ul style="list-style-type: none"> • 被认为处于高风险并且患有某种临床疾病被优先治疗的人 • 一项针对新冠病毒的抗病毒和其他疗法的注册临床试验的参与者

<p>Direct access to coronavirus treatments for patients with clinical conditions prioritised for treatment</p> <p>Adults and children (aged 12 or over) who have all 3 of the following are eligible to be assessed for treatment:</p> <ul style="list-style-type: none"> • symptoms of coronavirus that started in the last 5 days with no signs of clinical recovery • are a member of one of the patient groups considered at high risk from coronavirus with a clinical condition prioritised for treatment • coronavirus is confirmed by either a positive lateral flow device (LFD) test or PCR test <p>Your LFD test is not complete until you report your result, either online or by phone, and receive a result confirmation notification.</p>	<p>患有临床疾病被优先治疗的患者可直接获得新冠病毒治疗</p> <p>有以下所有3种情况的成人和儿童（12岁或以上）有资格接受治疗评估：</p> <ul style="list-style-type: none"> • 在过去5天内开始出现新冠病毒症状，且没有临床康复的迹象 • 属于被认为有新冠病毒高风险并患有某种临床疾病被优先治疗的患者群体的一员 • 通过侧流装置（LFD）检测或聚合酶链式反应（PCR）检测确诊感染了新冠病毒 <p>通过网络或电话报告检测结果并收到结果确认通知后，您的LFD检测才算完成。</p>
<p>Adults 18 years or older considered at high risk from coronavirus and to be prioritised for treatment</p> <p>The following patient groups were determined by a group of clinical experts using the best available evidence on outcomes in coronavirus infection. More detailed information can be found in the published report of the independent advisory group.</p>	<p>被认为有新冠病毒高风险并被优先治疗的 18 岁或以上成人</p>

	<p>以下患者群体是由一个临床专家小组使用有关新冠病毒感染结局的现有最佳证据确定的。更多详细信息可参见独立咨询小组已发表的报告。</p>
<p>Down's syndrome and other genetic disorders</p> <p>Down's syndrome or other chromosomal disorders known to affect the immune system</p>	<p>唐氏综合征和其他遗传性疾病</p> <p>已知影响免疫系统的唐氏综合征或其他染色体疾病</p>
<p>Solid cancer</p> <ul style="list-style-type: none"> • metastatic or locally advanced inoperable cancer • lung cancer (at any stage) • people who have received chemotherapy, PI3K inhibitors or radiotherapy within the last 12 months • people who have had cancer resected within the last 12 months and are receiving no follow-up chemotherapy or radiotherapy (with the exception of people with basal cell carcinomas who have undergone local excision or topical treatment) 	<p>实体癌</p> <ul style="list-style-type: none"> • 转移癌或不能进行手术的局部晚期癌症 • 肺癌（任何阶段） • 在最近12个月内接受过化疗、PI3K抑制剂或放疗的患者 • 在过去12个月内接受过癌症切除且未接受后续化疗或放疗的患者（接受过局部切除或局部治疗的基底细胞癌患者除外）
<p>Haematological (blood) diseases and stem cell transplant recipients</p> <ul style="list-style-type: none"> • sickle cell disease 	<p>血液病和干细胞移植受者</p> <ul style="list-style-type: none"> • 镰状细胞病

<ul style="list-style-type: none"> • allogeneic haematopoietic stem cell transplant (HSCT) recipients in the last 12 months or active graft vs host disease (GVHD) regardless of time from transplant (including HSCT for non-malignant diseases) • autologous HSCT recipients in the last 12 months (including HSCT for non-malignant diseases) • individuals with haematological malignancies who have received chimaeric antigen receptor (CAR)-T cell therapy in the last 24 months, or radiotherapy in the last 12 months • individuals with haematological malignancies receiving systemic anti-cancer treatment (SACT) within the last 12 months <p>All people who are diagnosed with:</p> <ul style="list-style-type: none"> • myeloma (excluding monoclonal gammopathy of undetermined significance (MGUS)) • AL amyloidosis • chronic B-cell lymphoproliferative disorders (e.g. chronic lymphocytic leukaemia, follicular lymphoma) • myelodysplastic syndrome (MDS) • chronic myelomonocytic leukaemia (CMML) • myelofibrosis 	<ul style="list-style-type: none"> • 最近12个月内接受异基因造血干细胞移植（HSCT）的患者，或活动性移植物抗宿主病（GVHD）的患者，无论移植时间长短（包括针对非恶性疾病的HSCT） • 最近12个月内接受自体HSCT的患者（包括针对非恶性疾病的HSCT） • 血液系统恶性肿瘤患者，在过去的24个月内接受了嵌合抗原受体（CAR）T细胞疗法，或者在过去的12个月内接受了放疗 • 血液系统恶性肿瘤患者，在过去12个月内接受全身抗癌治疗（SACT） <p>诊断为以下疾病的所有患者：</p> <ul style="list-style-type: none"> • 骨髓瘤（不包括意义未定的单克隆丙种球蛋白病[MGUS]） • AL型淀粉样变性 • B细胞慢性淋巴增殖性疾病（如慢性淋巴细胞白血病、滤泡性淋巴瘤） • 骨髓增生异常综合征（MDS） • 慢性骨髓单核细胞性白血病（CMML） • 骨髓纤维变性 • 地中海贫血或罕见遗传性贫血患者，伴考虑为其他合并症（例如，糖尿病、慢性肝病或磁共振成像[MRI]显示的重度肝
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<ul style="list-style-type: none"> • people with thalassaemia or rare inherited anaemia with either severe cardiac iron overload or severe to moderate iron overload with an additional co-morbidity of concern (for example, diabetes, chronic liver disease or severe hepatic iron load on MRI) and where agreed by the haematology consultant responsible for the management of the patient's haematological condition • individuals with non-malignant haematological disorder (e.g. aplastic anaemia or paroxysmal nocturnal haemoglobinuria) receiving B-cell depleting systemic treatment (e.g. anti-CD20, anti thymocyte globulin [ATG] and alemtuzumab) within the last 12 months 	<p>铁负荷) 且负责管理患者血液系统疾病的血液学顾问认可的重度心脏铁过载或重度至中度铁超负荷</p> <ul style="list-style-type: none"> • 非恶性血液病 (如再生障碍性贫血或阵发性睡眠性血红蛋白尿症) 患者在过去12个月内接受了B细胞耗竭全身治疗 (如抗CD20、抗胸腺细胞球蛋白[ATG]和阿仑单抗)
<p>Renal (kidney) disease</p> <ul style="list-style-type: none"> • renal transplant recipients (including those with failed transplants within the past 12 months), particularly those who have: <ul style="list-style-type: none"> ○ received B cell depleting therapy within the past 12 months (including alemtuzumab, rituximab [anti-CD20], anti-thymocyte globulin) ○ an additional substantial risk factor which would in isolation make them eligible for nMABs or oral antivirals ○ not been vaccinated prior to transplantation 	<p>肾 (肾脏) 病</p> <ul style="list-style-type: none"> • 肾移植受者 (包括过去12个月内移植失败的患者), 特别是那些存在以下特征的患者: <ul style="list-style-type: none"> • 过去12个月内接受了B细胞耗竭治疗[包括阿仑单抗、利妥昔单抗 (抗CD20)、抗胸腺细胞球蛋白] • 有额外的重大风险因素, 使其在单独情况下有资格使用中和性单克隆抗体治疗 (nMAB) 或口服抗病毒药物 • 移植前未接种疫苗的患者 • 非移植患者, 但接受了同等水平的免疫抑制

<ul style="list-style-type: none"> • non-transplant patients who have received a comparable level of immunosuppression • people with chronic kidney stage (CKD) 4 or 5 (an eGFR less than 30 ml/min/1.73m2) without immunosuppression 	<ul style="list-style-type: none"> • 慢性肾病患者，第4或5期，估算肾小球滤过率（eGFR）低于30 ml/min/1.73m2，无免疫抑制
<p>Liver disease</p> <ul style="list-style-type: none"> • people with cirrhosis Child's-Pugh class A, B or C • people with a liver transplant • people with liver disease on immune suppressive therapy (including patients with and without cirrhosis) 	<p>肝病</p> <ul style="list-style-type: none"> • 肝硬化患者，Child's-Pugh A、B级或C级 • 肝移植患者 • 接受免疫抑制治疗的肝病患者（包括有和无肝硬化的患者）
<p>Immune-mediated inflammatory disorders (IMID)</p> <ul style="list-style-type: none"> • people who have received a B cell depleting therapy (anti-CD20 drug for example rituximab, ocrelizumab, ofatumab, obinutuzumab) in the last 12 months • people who have been treated with cyclophosphamide (IV or oral), biologic medicines or small molecule JAK-inhibitors (except anti-CD20 depleting monoclonal antibodies) in the last 6 months • people who have been treated with corticosteroids (equivalent to greater than 10mg per day of prednisolone) in the last 28 days 	<p>免疫介导的炎性疾病（IMID）</p> <ul style="list-style-type: none"> • 过去12个月内接受了B细胞耗竭疗法（抗CD20药物，例如利妥昔单抗、奥克雷珠单抗、奥法木单抗、阿比妥珠单抗）的患者 • 过去6个月内接受了环磷酰胺（静脉内[IV]或口服）、生物药物或小分子贾纳斯激酶（JAK）抑制剂（除外抗CD20耗竭单克隆抗体）治疗的患者 • 过去28天内接受了皮质类固醇（相当于剂量大于每日10mg的泼尼松龙）治疗的患者 • 目前正在接受吗替麦考酚酯、口服他克莫司、硫唑嘌呤/巯基嘌呤（用于治疗主要器官受累，例如肾脏、肝脏和/或间质性

<ul style="list-style-type: none"> • people who are on current treatment with mycophenolate mofetil, oral tacrolimus, azathioprine/mercaptopurine (for major organ involvement such as kidney, liver and/or interstitial lung disease), methotrexate (for interstitial lung disease) and/or ciclosporin • people who exhibit at least one of: (a) uncontrolled or clinically active disease (that is required recent increase in dose or initiation of new immunosuppressive drug or IM steroid injection or course of oral steroids within the 3 months prior to positive PCR); and/or (b) major organ involvement such as significant kidney, liver or lung inflammation or significantly impaired renal, liver and/or lung function) 	<p>肺病)、甲氨蝶呤（用于治疗间质性肺病）和/或环孢素治疗的患者</p> <ul style="list-style-type: none"> • 具有以下至少一种特征的患者：(a)未控制或临床活动性疾病（在PCR检测结果呈阳性之前的3个月内需要近期增加免疫抑制药物或肌肉注射[IM]类固醇的剂量或增加口服类固醇的疗程或开始使用新的免疫抑制药物或肌肉注射类固醇或口服类固醇的疗程）；和/或(b)主要器官受累，例如严重的肾脏、肝脏或肺部炎症或肾脏、肝脏和/或肺功能严重受损
<p>Immune deficiencies</p> <ul style="list-style-type: none"> • common variable immunodeficiency (CVID) • undefined primary antibody deficiency on immunoglobulin (or eligible for Ig) • hyper-IgM syndromes • Good's syndrome (thymoma plus B-cell deficiency) • severe Combined Immunodeficiency (SCID) 	<p>免疫缺陷</p> <ul style="list-style-type: none"> • 普通变异型免疫缺陷病（CVID） • 非特异性原发性抗体缺陷，接受免疫球蛋白治疗, 或有资格接受免疫球蛋白（Ig）治疗 • 高IgM综合征 • Good综合征（胸腺瘤加B细胞缺乏） • 重症联合免疫缺陷（SCID）

<ul style="list-style-type: none"> • autoimmune polyglandular syndromes/autoimmune polyendocrinopathy, candidiasis, ectodermal dystrophy (APECED syndrome) • primary immunodeficiency associated with impaired type I interferon signalling • x-linked agammaglobulinaemia (and other primary agammaglobulinaemias) • any person with a secondary immunodeficiency receiving or eligible for, immunoglobulin replacement therapy 	<ul style="list-style-type: none"> • 自身免疫性多内分泌腺病综合征/自身免疫性多内分泌腺病—念珠菌病-外胚层营养障碍病（APECED综合征） • 与I型干扰素信号传导受损相关的原发性免疫缺陷 • X-连锁无丙种球蛋白血症（以及其他原发性无丙种球蛋白血症） • 任何正在接受或有资格接受免疫球蛋白替代治疗的继发性免疫缺陷患者
<p>HIV/AIDS</p> <ul style="list-style-type: none"> • people with high levels of immune suppression, have uncontrolled/untreated HIV (high viral load) or present acutely with an AIDS defining diagnosis • people on treatment for HIV with CD4 <350 cells/mm³ and stable on HIV treatment or CD4>350 cells/mm³ and additional risk factors (e.g. age, diabetes, obesity, cardiovascular, liver or renal disease, homeless, those with alcohol-dependence) 	<p>艾滋病病毒（HIV）/艾滋病（AIDS）</p> <ul style="list-style-type: none"> • 免疫抑制程度高的患者，有未控制/未经治疗的HIV（病毒载量高）或急性表现可界定为AIDS。 • 接受HIV治疗的患者，CD4细胞计数<350 个细胞/mm³，但HIV治疗稳定，或CD4细胞计数>350 个细胞/mm³，但有其他风险因素（例如年龄、糖尿病、肥胖、心血管、肝脏或肾脏疾病、无家可归、酒精依赖者）
<p>Solid organ transplant recipients</p> <p>All recipients of solid organ transplants not otherwise specified above</p>	<p>实体器官移植受者</p> <p>所有接受实体器官移植的患者，非特指患有上述疾病的患者</p>

<p>Rare neurological conditions</p> <ul style="list-style-type: none"> • Multiple sclerosis • Motor neurone disease • Myasthenia gravis • Huntington's disease 	<p>罕见的神经疾病</p> <ul style="list-style-type: none"> • 多发性硬化 • 运动神经元病 • 重症肌无力 • 亨廷顿病（Huntington's disease）
<p>Young people aged 12 to 17 considered at high risk from coronavirus and to be prioritised for treatment</p> <p>Coronavirus is much less likely to progress to severe disease in people aged 12 to 17, even in those who might be viewed as at increased risk. Only those 12 to 17 year olds assessed as at exceptionally high risk will be offered an infusion of a monoclonal antibody treatment. The oral antiviral treatments are only authorised for use in adults aged over 18 years.</p> <p>The decision to treat will normally be made by a multi-disciplinary team after carefully weighing the risks and benefits. They'll take into consideration the recommendations from the independent advisory group.</p>	<p>被认为有新冠病毒高风险并被优先治疗的 12 至 17 岁的年轻人</p> <p>新冠病毒在 12 至 17 岁的人群中不太可能进展为严重的疾病，即使在可能被视为风险增高的人群中亦是如此。仅会针对那些被评估为异常高风险的 12 至 17 岁人群提供单克隆抗体的输注治疗。口服抗病毒治疗仅被许可用于 18 岁以上的成人。</p> <p>通常由多学科团队在仔细权衡风险和获益后做出治疗决策。他们将考虑独立咨询小组的建议。</p>
<p>Accessing testing</p>	<p>获取检测</p>

<p>If you have a health condition which means you may be eligible for new coronavirus treatments, you should keep a pack of lateral flow tests at home. Only use them if you develop symptoms. You can order a free pack for home delivery online or by phoning 119.</p> <p>Testing is still free of charge if you have a health condition which means you may be eligible for new coronavirus treatments.</p>	<p>如果您有某种健康问题，让您可能有资格接受新的新冠病毒治疗，您应在家备有一包侧流装置检测试剂盒。只有在有症状时检测。您可以在网上免费订购一包送货上门或拨打119订购。</p> <p>因有某种健康问题而可能有资格接受新的新冠病毒治疗的人仍然可以免费进行检测。</p>
<p>Positive LFD result</p> <p>If your LFD test is positive and you're eligible for treatment you need to do 3 things:</p> <ol style="list-style-type: none"> 1. Contact your NHS health board on the number on this page. They'll assess your suitability for treatment. 2. Phone 119 and request 2 PCR kits. Tell the call handler that you live in Scotland and are eligible for treatment. You should do this as soon as possible after your positive result. Two tests will arrive within 24 to 48 hours. You should take one of these tests as soon as it arrives and the other 5 days after your treatment begins. You cannot order these tests online. <p>Follow stay at home advice.</p>	<p>LFD 检测结果呈阳性</p> <p>如果您的LFD检测结果呈阳性且您有资格接受治疗，则需要完成以下3个事项：</p> <ol style="list-style-type: none"> 1. 请通过本页面上的电话号码联系您的NHS健康管理局。他们会针对您的情况进行是否适合治疗的评估。 2. 拨打119并申请2个PCR试剂盒。请告知呼叫处理人员您住在苏格兰且有资格接受治疗。您应该在得知检测结果为阳性后尽快如此处理。两个检测试剂盒将在24至48小时内送达。您应该在其送达后立即使用其一进行检测，然后在治疗开始后的5天进行另一次检测。您不能在网上订购这些检测试剂盒。 <p>请遵循居家隔离建议。</p>
<p>Negative LFD result</p>	<p>LFD 检测结果呈阴性</p>

<p>If your LFD test is negative, but you still have symptoms, you should take another LFD test on each of the next 2 days (3 tests in total over 3 days). If either of these tests is positive, follow the steps for a positive LFD test.</p>	<p>如果您的 LFD 检测结果呈阴性，但您仍有症状，则您应该在接下来的 2 天内的每一天都进行一次 LFD 检测（在总共 3 天内进行 3 次检测）。如果任何一次检测结果呈阳性，则请遵循 LFD 检测结果呈阳性的处置步骤。</p>
<p>PCR tests</p> <p>There is no need to take a PCR test to start receiving treatment. However, taking a PCR test before and after you have your treatment for coronavirus helps provide extra information about any changes to the virus and how well the treatments are working.</p> <p>The first test should be taken as soon as it arrives, if possible this should be before you take the first dose of your treatment. You should not delay treatment to wait for the PCR tests to arrive or wait for the result. If it hasn't arrived when you get your treatment, just take it as soon as you can.</p> <p>Take the second test on day 5 of your treatment, whether you have finished treatment or not, and regardless of when you took the first test.</p>	<p>PCR 检测</p> <p>无需接受 PCR 检测以开始接受治疗。然而，在您接受针对新冠病毒的治疗前后接受一次 PCR 检测有助于提供有关病毒变化和治疗的疗效如何的额外信息。</p> <p>应该在试剂盒送达后立即进行第一次检测，如果可能，应该在您服用首剂治疗药物前进行这次检测。您不得延迟治疗以等待 PCR 检测试剂盒送达或等待检测结果。如果在您接受治疗时试剂盒尚未送达，则只需在您可以接受检测时立即进行检测即可。</p> <p>请在您接受治疗后的第 5 天接受第二次检测，无论您是否已完成治疗，也无论您何时接受了第一次检测。</p>
<p>Accessing treatment</p>	<p>获得治疗</p>

The table below provides a phone number for each NHS health board that you can contact if you meet the eligibility criteria. You should contact your health board where you live.

If you test positive while you're away from home (for example on holiday) in any other part of Scotland or the UK, you should still contact your home health board where you permanently live. This is because your home health board in Scotland will have access to more information about you to support any requirements to confirm your eligibility. They'll then help you to access the closest treatment service to where you are temporarily staying.

The phone lines will be open 7 days a week including public holidays. You may reach an answering machine and be asked to leave a message as some areas are operating a call back service.

After contacting the number you'll be assessed for your suitability for treatment.

If eligible, you'll be asked about the medicines that you're currently taking. This is for safety reasons as some medicines can cause serious side effects when taken together. Please have the list of medicines that you're taking handy when you call. This includes medicines prescribed by your GP practice or hospital, medicines prescribed privately outside of the NHS, and any medicines bought from a pharmacy or shop without a prescription.

下表提供了每个NHS健康管理局的电话号码。如果您符合资格标准，您可以联系他们。您应该联系您居住地的健康管理局。

如果在您离家（例如休假期间）来到苏格兰或英国的任何其它地区时检测结果呈阳性，您仍然应该联系您永久居住地的健康管理局。这是因为您在苏格兰居住地的健康管理局将有权访问有关您的更多信息，以支持确认您的资格的任何要求。他们然后将帮助您访问距离您暂时停留处最近的治疗服务机构。

电话热线每周开放7天，包括公共假日。您可能会接通电话答录机，并请您留言，因为有些地区提供回拨服务。

联系了相关号码后，您会接受是否适合治疗的评估。

如果您有资格，您会被问及您目前服用的药物。这是出于安全考虑，因为有些药物一起服用时可能会产生严重的副作用。打电话时，请您把所服药物清单带着。这包括您的GP诊所或医院开的药、NHS以外的私人诊所处方药，以及从药房或商店购买的任何非处方药。

记得还要包括草药和您正在服用的维生素补充剂，以及贴片、吸入剂、栓剂、含片、凝胶、软膏或乳膏等药物。

NHS将告诉您哪种治疗方法（如有的话）适合您。您的临床医生可能会建议口服抗病毒治疗。或者，您可能需要去医院的日间诊所接

<p>Remember to also include herbal remedies and vitamin supplements you are taking, as well as medicines that come in patches, inhalers, suppositories, lozenges, gels, ointments, or creams.</p> <p>The NHS will advise which treatment, if any, is suitable for you. Your clinician may recommend an antiviral treatment to be taken orally. Alternatively, you might have to travel to a day clinic at a hospital to receive a treatment called a monoclonal antibody treatment. This is normally given by intravenous infusion (in your vein). You'll get instructions on where to get the treatment and how to get there and back safely.</p>	<p>受一种被称为单克隆抗体治疗的疗法。这通常是静脉注射（注入到您的静脉里）。您会被告知在哪里接受治疗以及如何安全往返。</p>
<p>These numbers should not be used if you're seeking urgent medical advice or have a general health query.</p> <p>NHS Ayrshire & Arran - 01563 825 610</p> <p>NHS Borders - 01896 827 015</p> <p>NHS Dumfries & Galloway - 01387 241 959</p> <p>NHS Fife - 01592 729 799</p> <p>NHS Forth Valley - 01786 434 110</p> <p>NHS Grampian - 01224 553 555</p>	<p>如果您正在寻求紧急医疗建议或进行一般的健康查询，不应使用这些号码。</p> <p>NHS Ayrshire & Arran - 01563 825 610</p> <p>NHS Borders - 01896 827 015</p> <p>NHS Dumfries & Galloway - 01387 241 959</p> <p>NHS Fife - 01592 729 799</p> <p>NHS Forth Valley - 01786 434 110</p> <p>NHS Grampian - 01224 553 555</p>

<p>NHS Greater Glasgow & Clyde - 0800 121 7072</p> <p>NHS Highland - 0800 085 1558</p> <p>NHS Lanarkshire - 01355 585 145</p> <p>NHS Lothian - 0300 790 6769</p> <p>NHS Orkney - 01856 888 259</p> <p>NHS Shetland - 01595 743 393</p> <p>NHS Tayside (Open 9am-4pm: Mon-Fri and 9am-1pm: Sat-Sun) - 01382 919 477</p> <p>NHS Western Isles - 01851 601 151</p>	<p>NHS Greater Glasgow & Clyde - 0800 121 7072</p> <p>NHS Highland - 0800 085 1558</p> <p>NHS Lanarkshire - 01355 585 145</p> <p>NHS Lothian - 0300 790 6769</p> <p>NHS Orkney - 01856 888 259</p> <p>NHS Shetland - 01595 743 393</p> <p>NHS Tayside （开放时间：星期一至星期五： 早上9点一下午1点，星期六至星期天： 早上9点一下午1点） - 01382 919 477</p> <p>NHS Western Isles - 01851 601 151</p>
<p>PANORAMIC Research Study</p> <p>Coronavirus oral antiviral treatments are being evaluated through a study called PANORAMIC, run by the University of Oxford.</p> <p>People across Scotland took part in the first stage of the study which evaluated a medicine called molnupiravir. This stage of the study has now closed.</p> <p>The second stage of the study will evaluate a medicine called Paxlovid. This stage is taking place through localised study sites. This is because the health professionals recruiting participants into</p>	<p>PANORAMIC 研究</p> <p>牛津大学正在开展一项名为“PANORAMIC”的研究，对新冠病毒口服抗病毒治疗进行评估。</p> <p>苏格兰各地的人们参加了第一阶段的研究，评估了名为“莫努匹韦”（molnupiravir）的药物。这一阶段的研究现已结束。</p> <p>第二阶段的研究将评估名为“奈玛特韦/利托那韦”（Paxlovid）的药物。此阶段通过局部研究地点正在进行中。这是因为招募参与者的</p>

<p>the study need access to medical record data to see if the medicine is suitable for individuals before they can enter the study.</p> <p>There are no study sites open yet in Scotland. Work is underway to find out how this stage of the study could be offered in Scotland in the future.</p> <p>For more information about the study, visit the PANORAMIC trial website or contact mailto:communications@nrs.org.uk</p>	<p>医疗专业人员需要在参与者进入研究之前查看其病历数据，看看药物是否适合他们。</p> <p>目前在苏格兰尚无研究地点。当前正在开展工作，以确定未来如何在苏格兰开展这一阶段的研究。</p> <p>欲了解有关此研究的更多信息，请访问PANORAMIC试验网站或联系 mailto:communications@nrs.org.uk</p>
<p>For more information about coronavirus (COVID-19) in Simplified Chinese go to www.nhsinform.scot/translations/languages/chinese-simplified/</p>	<p>更多有关2019新冠肺炎的中文信息，请访问 www.nhsinform.scot/translations/languages/chinese-simplified/</p>
<p>15 July 2022</p>	<p>2022年7月15日</p>