



A point before we begin. Yes COVID-19 is a serious illness in certain people and in certain populations. Yes we should be doing everything we possibly can to prevent the spread of this illness, especially to our most vulnerable populations (people over the age of 60). COVID-19 is unique in a few different ways. Unlike the flu, which has an increased mortality rate in the very young, it seems that babies and young children are mostly unaffected by it. That is a good thing, but does not mean children are immune, it means that they could be infected and still spread it while exhibiting no symptoms. This sounds very scary, but also please remember that the vast majority (over 90% of people) that become infected with this virus exhibit little to no symptoms and will recover quite easily. The highest risk for death or critical illness are persons over the age of 60 and persons with severe medical problems such as chronic lung disease, uncontrolled diabetes, and coronary artery disease. This is why protective measures have been put in place, and why we should be working to keep our older and sicker population separated and away from possible exposure.

**There is information being shared that the virus doesn't like sunlight or temperatures over 90 degrees. Any truth/scientific evidence to that? If so, is that a preventative move or might it help those who already have the virus? What should people do to reap that benefit if there is any? I've heard drinking hot beverages would help. Any other so-called home remedies you have heard of that "might" be helpful or should be strongly debunked?**

Because COVID-19 is a novel virus, we don't really know how it will respond to environmental changes. The idea that the incidence of infection may naturally decline with warming temperatures comes from what we know about influenza and other seasonal viral infections. Those more well studied viral infections have a natural seasonal decline, and there is thought that COVID will naturally decline as well, but the truth is that we will likely have to wait and see. There is also thought that if COVID does decline with warmer temperatures and increased humidity, that we will see a recurrence next winter—we will again have to wait and see. Please understand that this is on a macro scale—meaning that keeping temperatures warmer in your homes or using a humidifier will have little to no effect on neutralizing the virus. As far as home remedies are concerned, there are no known home or alternative remedies to cure or prevent COVID-19 infections. This is important because unfortunately there are already plenty of individuals on the internet selling fake "cures". Please stay away, at best these won't work, and at worst they can be harmful. Take your vitamins and supplements that you've already discussed with your PCP, but be aware none of them have been scientifically proven to treat or prevent COVID.

**What should people do if they've been around someone who has been confirmed to have the virus, or maybe someone who is exhibiting the symptoms but has not been confirmed (maybe awaiting a test result)?**

There are varying levels of exposure when it comes to this viral infection. The highest risk of exposure and transmission of infection is in people who live in close proximity. The majority of person to person transmission have been between related individuals or people in very close proximity to infected persons for an extended period of time. Simply walking by someone who may be infected has a low risk of transmission. Also remember that just because someone has upper respiratory symptoms does not mean they have COVID. This time of year there are quite a few respiratory viruses going around that are always around this time of year. That does not mean that we should not keep our distance and practice good hygiene however. If a person has spent a significant amount of time around a person that ends up testing positive for COVID-19, they should self-quarantine at home for at least 14 days—and should contact their primary care provider should they start to exhibit symptoms.

The CDC defines close contact as:

- a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case  
– or –
- b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).

**Same question regarding someone who has been around a family member, a co-worker or other person who has had close contact with someone confirmed with the virus (basically second-person contact)?**

Second hand exposure is another interesting question that we have limited information on. It is difficult to assess the risk with second-hand exposure, but it is safe to say your risk is lower than it would be had that person been confirmed infected. It would still be recommended to self-quarantine and monitor for symptoms.

**What are some guidelines regarding how much someone should be concerned about their prior level of contact with someone later confirmed with the virus? Such as: What if you just spoke to someone briefly across a counter from 3 feet away. What if you just said hello and shook hands? Or what if you visited with someone for 5, 10, 20 minutes? Along those same lines, what if that contact was two days before the person started showing symptoms, or maybe five days or 10 days before?**

See the entry prior about the CDC's definition of close contact. The consensus currently is that the primary mode of transmission of COVID-19 is in respiratory droplets. That means small droplets of liquid that are emitted in the act of coughing or sneezing. These can stay in the air for a period of time or be on surfaces. Of some concern as well is the case of asymptomatic spread. That means that someone may already be shedding virus before they actually show any symptoms at all (fever, cough, runny nose). This means that they would not yet know they are infected and may not take the same precautions that they would if they were showing signs. That is one of the traits of this specific virus that makes it unique. That is also why social distancing practices have been put into effect. If everyone is already behaving as if they have

the virus, then the hope is that we aren't all giving it to one another before we realize we may have it. If you feel that you may have come into contact with someone who has it, the current recommendation is 14 days of self-isolation and monitoring of symptoms.

**Which is more beneficial, washing hands with soap and water or using hand sanitizer? What are some guidelines for when and how often to wash, and in what situations (if you are at home by yourself or with family members, or if you are in a work environment around other people)?**

One misconception that has led to hoarding and shortages is that somehow hand sanitizer is necessary to protect yourself from infection. While hand sanitizer is effective at neutralizing many germs you may come into contact with including COVID, soap and water for greater than 20 seconds is actually more effective and recommended over alcohol-based hand sanitizer. Please note that non-alcohol-based sanitizers will not kill these germs, nor will improvised sanitizers made from things like vodka or other drinking alcohol. Also know that if you do plan on using rubbing alcohol to sanitize your hands or other surfaces, to make sure it is at least 70%.

**Would you recommend people wearing gloves and breathing masks when they go to the grocery store or other public locations – even if it is just non-disposable cotton gloves or if the mask is the kind some people wear while mowing or in dusty situations?**

If someone feels safer wearing a mask or gloves in areas where they may come into contact with people that are infected, then they absolutely could wear one. Also know that as long as your mask does not become soiled (someone coughs or sneezes in your face) it may be reused. Also know that good distancing practices and hand washing are also recognized as preventative for infection, and for most people this should be all they need. Please do not hoard masks or other protective equipment.

**Similarly, what would be some best practices if someone does need to go shop at the grocery store, pharmacy, Dollar General, etc.?**

As recommended it is best to stay at least 6ft from anyone that is not a direct family member and to practice good personal hygiene. If you are touching surfaces in public places do not touch your face until you are able to wash your hands. And the opposite is true as well, please do not touch your mouth or any part of your face and then touch surfaces that others may also touch.

**Some communities have had groups sewing masks either to supplement what their local health personnel already are wearing, or to provide some level of benefit for elderly and those with compromised immune systems. Any thoughts on that? And is that needed here?**

There are many wonderful people making masks for both the public and for healthcare workers. Unfortunately, the CDC does not recognize homemade masks as PPE in a healthcare setting, as there is no way to know whether or not it prevents transmission of the virus or protects the wearer from exposure. That being said, a homemade mask could be used as a last resort if all other supplies are exhausted.

**Symptoms: What should be the concern level if someone just has one of the symptoms? Fever with no shortness of breath? Shortness of breath without fever? One or two of those without dry cough?**

Any symptoms should be taken seriously. It is still important to realize that we are still in flu and strep season. The providers at the clinic are still seeing patients, and would be happy to see anyone for a visit to rule out other causes for these symptoms. We are in the middle of a worldwide pandemic, but that does not mean patients stop getting strep, flu, urinary infections, and pneumonia/bronchitis that likely need medical attention. It is also important to know that shortness of breath and sudden onset of chills and sweats can be a sign of heart problems, and should be properly evaluated by a physician.

**Is there anything that can help people differentiate between strep, flu, and COVID if they start running a fever? Should they seek -- and do you want them coming in for -- a strep or flu test in such a situation?**

We have kept the clinic fully staffed for just this reason. We may be able to find another cause for symptoms, and we may need to treat you for that problem. We have modified the way we see patients to limit exposures and time in the waiting room. We have divided the clinic for sick and well, and also allow patients to wait in their vehicles for their appointment. We prefer that any patient exhibiting respiratory symptoms or fever be seen in their vehicle when possible to limit exposure to other patients and importantly our staff. We can take care of almost any issue outside in the car.

**Any idea, from a physician's point of view, how long we might be facing this -- at the current level of concern and if people do what they are now being told to do?**

Probably the most important question of all, how long do we have to do this? How long will the schools be closed? How long will the entire country be practically closed? Truth is we don't know. Some experts are recommending an extended shutdown. Some are saying we should quarantine the worst areas and slowly return the rest of the country to a normal routine. Some still say we should all go back to work and just have our most at-risk population continue to self-isolate since they are the most likely to die or have serious complications. We think there will likely be some combination of these things, and hopefully in the near future. For now we know that schools will be closed until at least May 4th, and that determinations for the rest of the school year will be made sometime before that. The clinic and hospital remain open, and will continue to be open and serve this town indefinitely. We hear the term "flatten the curve" thrown around quite a bit when politicians and scientists are talking about the virus and shutdowns. What that means is that we employ social distancing, limiting travel, and all these other means to slow down the transmission of the virus so that we keep the number of new cases and extremely sick people down. What that likely means is that we also lengthen the duration of this illness as it is taking people longer to be exposed. The goal in this is to not exceed our capacity to take care of patients and perform life-saving treatments. If we have 20 hospital beds available every day to take care of people, we need to make sure we don't have 40 people that need them. That ultimately is the reason for everything we are doing. We are well past being able to stop the spread, but the more we can slow it down, the better chance we have of beating it in the long run.