

# Dr. Delgado COVID-19 Update 10-8-20

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## **No time for pandemic fatigue**

No single innovation or strategy is going to ultimately rescue society from the pandemic: not masks, not more available testing, not a specific drug, and not even the upcoming vaccines. For any of these measures, it's easy to get caught up in optimism and hope. But the reality is that fighting the coronavirus will require a continuation of doing many things correctly and consistently. It demands a totality of smart choices and actions to minimize its transmission and impact on our lives.

Take testing and the events of the last week. The idea is that in testing often enough and catching cases when you can, it will reduce the number of times healthy people are exposed to infected ones. Like everything else with Covid-19, it's an odds game, and debates over any testing strategy and its perceived utility are only arguments about those odds.

The same is true of masks. The evidence from studies of the physics of transmission and the spread of coronavirus in countries with strict policies on masking have now led to near-universal agreement that masking is a good idea. They clearly reduce the odds of the virus spreading.

Although face-coverings are still mandatory in most public spaces, there yet remain too many instances of people either not wearing masks out of defiance or wearing them ineffectively. Masks must cover your entire nose and go below your chin. Loosely fitting masks with gaps on the sides are not adequate. Only use the ties or loops to put your mask on and pull it off. Don't touch the front of your mask when you take it off. Lastly, always wash your hands prior to putting on a mask and after wearing it.

You wouldn't bet on masks without testing— or testing without masks. Or either without continued social distancing. It's not that there is something unique about keeping six feet apart from people — some coughs or activities likely spread coronavirus even farther. But if everybody stays six feet away, the odds of transmission go down.

What of treatments? While some preliminary data show benefits of avoiding significant vitamin D or zinc deficiencies (rare with normal diets) in regard to poorer Covid outcomes, there still are no medication or treatment recommendations indicated for prophylaxis or early course therapy.

While there is still limited information about the safety and effectiveness of remdesivir when used for severe COVID-19 infections requiring hospitalizations, preliminary studies have shown that it may shorten recovery time in the hospital from 15 to 11 days.

More recently, the WHO issued new treatment guidelines to make corticosteroids a standard of care, but only for patients with “severe and critical” cases of COVID-19. The guidelines were made after an analysis of seven clinical trials, published in the Journal of the American Medical Association, showed that steroid therapy reduced the risk of death in hospitalized COVID-19 patients by a third.

Lastly, monoclonal antibodies remain promising, but its availability and more importantly the data and study of its effectiveness remains too limited to infer its potential role at this time.

And then there are vaccines. It’s not that the vaccines in development won’t work, or that a vaccine won’t be a key tool in combating the virus. But we could end up still needing masks at times such as large gatherings — or at minimum we likely won’t return to regularly shaking hands.

Until an effective vaccine against COVID-19 is available, we have to continue to do the hard, albeit tedious, work of keeping ourselves safe and healthy—by wearing facial coverings, keeping our social distance, practicing good hand hygiene, and staying home when we're sick.

This “new normal” is not going to magically disappear. The persistent calculation of both the inherent risks against the presumed benefits as to how we lead our lives will need to remain for the foreseeable future. This is not pessimism, but pragmatism with our current state of affairs.

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