Get Used to the “P” Word: PANDEMIC

It appears that the “cat – or coronavirus – is out of the bag”. In the last few days, all signs are now pointing to the distinct probability that efforts in the US to contain the spread of the virus will fail. We need to shift our thinking from containing or stopping the spread to delaying its spread, so that the impact on our communities and healthcare systems is lessened. Healthcare resources will need to be utilized not for quarantine or isolation of exposed or mildly ill persons but reserved for those needing acute and critical care in order to save lives.

Soon to be labeled a pandemic, the novel coronavirus has spread from the city of Wuhan in central China around the world in the span of several months. In our global economy, we are all 24 hours or less from anywhere. There is mounting evidence of sustained human-to-human transmission in a growing number of countries. Because of this, and the fact that persons become contagious before or even without developing symptoms, efforts to screen persons or limit travel from certain areas is becoming impossible.

Estimates are that 10-40% of the population may become infected. The vast majority will either never develop symptoms or have symptoms mild enough that they are not reported and do not seek medical care. A lesser number will be seen by healthcare providers or hospitalized, still fewer will become critically ill, and some will die. The number of deaths could be approximately the same as we see annually caused by seasonal influenza infections and its complications. The highest risk population appears to be older men with pre-existing chronic medical conditions. Infections in children are relatively rare. Healthcare workers have become sick, and some have died after caring for sick patients.
Is there a vaccine? Not yet, although significant efforts are underway to rapidly produce a vaccine within months. Is there any treatment? Many trials are in process to determine if existing or new medications are effective in treating this virus.

When will the outbreak peak? Accuracy is difficult, especially given that data is very incomplete. A disease surveillance specialist at UNLV has been quoted as saying that “if you revise your predictions every week to say that the outbreak will peak in a week or two, eventually you will be correct.” Estimates are that a peak in China may be occurring now, while others say late March or May. The rest of the world will follow a few months later.

**What should you be thinking about and doing now to prepare?**

1. Current advice is not to travel to certain areas of the world. Since this changes daily, please go to the CDC for up-to-date information on travel recommendations: [https://wwwnc.cdc.gov/travel](https://wwwnc.cdc.gov/travel)

2. Currently the risk in the US is very low, as 100% of cases have been linked to travel from areas with infection. However, we expect that to change in the coming days. Information can be obtained at [https://www.cdc.gov/coronavirus/2019-ncov/index.html](https://www.cdc.gov/coronavirus/2019-ncov/index.html). Information can be found about symptoms, how it is spread, prevention and treatment, what to do if you are sick, and other topics.


4. There are lots of rumors, fallacies, and stigma out there in social media and the Internet. Validate your information and beware of scams about people groups or trying to sell you something you must have now! [https://www.cdc.gov/coronavirus/2019-ncov/about/related-stigma.html](https://www.cdc.gov/coronavirus/2019-ncov/about/related-stigma.html)

5. Although written for the possibility of a pandemic flu or other disasters, the following applies to this outbreak also:
   - [www.do1thing.com](http://www.do1thing.com)

6. If you take prescription medications, discuss plans with your pharmacist so you are prepared for any shortages that may occur. A 2-3 month supply of essential medications would be advisable.

**Please consider what actions you and your household should take now. This is not business as usual. We will keep you updated frequently. Please contact me with questions via e-mail.**