

Topic of the week: Updates on COVID-19

I don't know if you want to hear more about COVID-19 or if you are all over it already. The talk on February 4th was well attended. I wish I had recorded it, only so that I could have captured all of the rich questions to include in the newsletter. Here is a brief summary of new information since the last COVID-19 update.

Prevention Updates:

- CDC requirements: masks when traveling by plane, ship, ferry, train, subway, bus, taxi, ride-share. Plus travel hubs i.e. airports, subways. Not bandanas, shirt collars, scarves, or face shields alone or masks with valves
- All travelers to the U.S. negative requires a negative COVID test within 3 days before flight, or documented recovery from COVID. Then they must retest 3-5 days after return and stay home for 1 week upon return
- Must wear mask even if vaccinated.
- If you have a high-risk exposure (i.e. your spouse) and you are at high risk of getting very sick from COVID, Regeneron's monoclonal antibody may help prevent disease. This is currently not available, but may be soon. We will let you know.

Risks

- COVID-19 spread in hospitals, medical offices and dentist offices continues to be a very rare occurrence, so continue to get the health care that you need.
- Being in quarantine has increased the rates of nearsightedness (myopia) especially in children. If your vision is blurry, your vision feels strained, or you are getting headaches, get your eyes checked!

Vaccines

- As of January 27th, 23 million people in the US had been vaccinated, 63% female, 55% >50 years old, 17% 40-49, and 28% 18-39. (Remember the young people are our healthcare workers) 60% white, 14% multiracial, 12% Latinx, 6% Asian, 5% Black, 2% Native
- Pfizer alone expects to have 120 million doses out by the end of March and another 100 million out by the end of summer
- If you had COVID, wait 1 month before vaccination
- If you had a monoclonal antibody infusion, like bamlanivimab, wait 3 months before vaccination
- There are new strains of COVID-19 developing in the UK, South Africa, Brazil, and California. The current Pfizer and Moderna vaccines are protective against the UK strain. They should also prevent severe disease from the Brazil and South African strains but you may still develop mild symptoms. The Astra Zeneca vaccine was just pulled from South Africa due to lack of efficacy against mild and moderate disease in their country.
- The UK strain is expected to be the dominant strain in the United States by March.

- You should anticipate booster shots in the future but the timing of booster shots and their frequency are unknown.
- The company Merck stopped its clinical trials due to lack of efficacy.
- Russia now has a vaccine called the Sputnik V with 92% efficacy at 2 months.
- I don't know anything yet about when vaccinations may be available for children.

Vaccine Side Effects

- Of the first 1,893,360 Pfizer vaccines given: 0.2% 4393 had adverse reactions, 21 of which were anaphylaxis. 90% of those who had anaphylaxis were women. Other symptoms included itchiness, scratchy throat, mild respiratory symptoms and rash. No deaths reported.
- Of the first 4,041,396 Moderna vaccines given: 10 had anaphylaxis, most were females with prior anaphylaxis. No deaths reported.

Treatment Updates

- Convalescent plasma initially failed in clinical trials. It has recently shown benefit in a small subset of patients. For patients within 3 days of testing positive, older patients and those that have a high-titer of infection, convalescent plasma decreases mortality 8%, and only if patient doesn't require mechanical ventilation.
- Ivermectin works in the lab to reduce inflammation and as an anti-viral. However, there no good quality human studies yet.

Complications

- Among patients hospitalized with COVID-19, 76% of patients have at least one persistent symptom: 63% fatigue, 63% weakness, 26% sleep difficulty, 23% anxiety, 22% depression. 33% failed a 6 minute walk test, meaning they couldn't walk for 6 minutes without abnormal heart rate, respiratory rate, blood pressure or oxygen levels.
- We are learning from autopsies that much of the damage to the heart, lungs, and kidneys is being caused by teeny tiny blood clots, which cause cells to die.

Local Vaccine Distribution

- Our practice has reached out to institutions with vaccines. We will then receive calls saying for example, "We have 20 vaccines available for patients over 85 that live in this county. If you can call and get them scheduled, we will vaccinate them." Or "We have 30 vaccines available for patients over 75 if you give us a random list of patients, we will choose 30 to vaccinate and you can call and schedule them."
- The office has hired additional staff to make phone calls, including Dave's other adult daughter Emma, Ciella, and Karen who assists with the phones. We have also extended Kris's hours. The office often has 30 minutes or less to call 30 patients and get them scheduled before the vaccines will be allocated to someone else. We then divide up the list and start making phone calls.