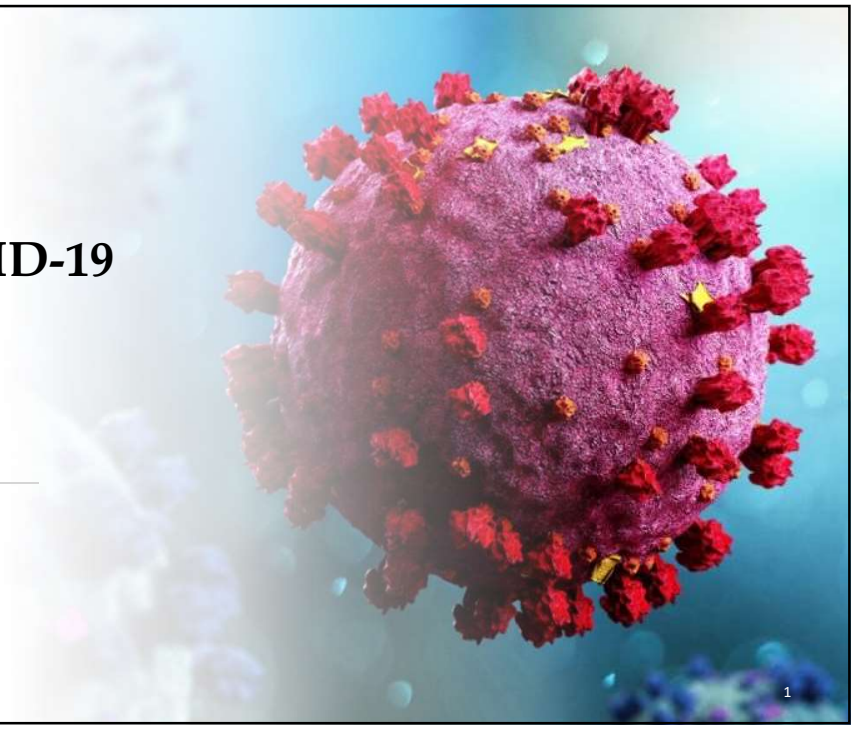
Updates on COVID-19

By:
Dr. Latefa Dardas



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COVID-19

- Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus.
- Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV).
- The World Health Organization (WHO) first learned of this new virus on 31 December 2019, following a report of a cluster of cases of 'viral pneumonia' in Wuhan, People's Republic of China.
- On February 11, 2020 the WHO announced an official name for the disease that is causing the 2019 novel coronavirus outbreak, COVID-19.

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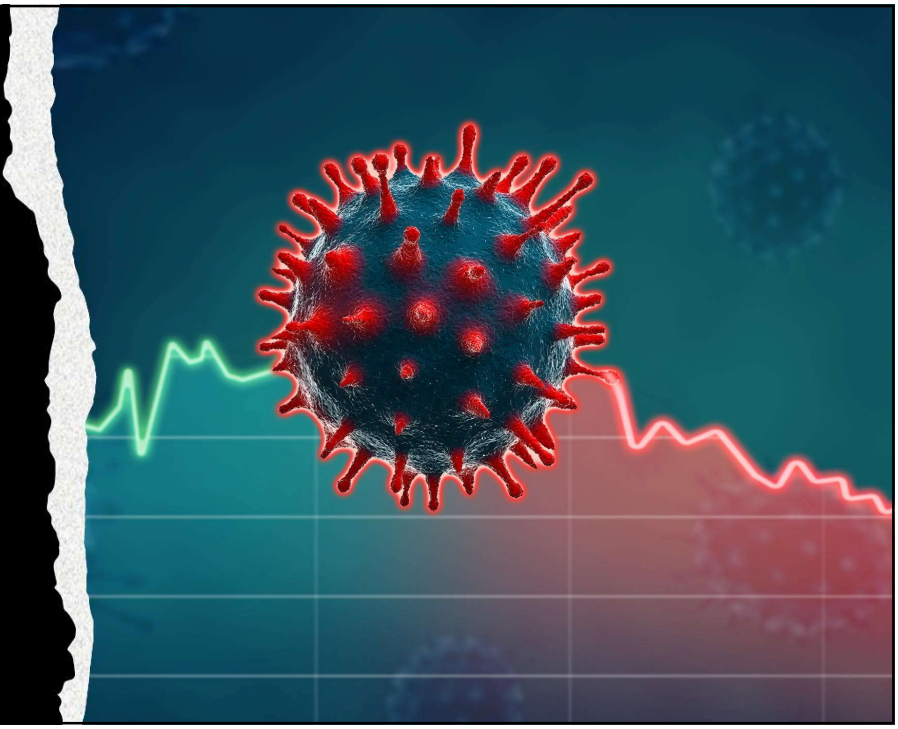
Globally, as of 21 March 2023, there have been 761,071,826 confirmed cases of COVID-19, including 6,879,677 deaths, reported to WHO.
As of 20 March 2023, a total of 13,260,401,200 vaccine doses have been administered.



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Signs and Symptoms

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- Most people infected with the virus will experience mild to moderate respiratory illness and recover without requiring special treatment. However, some will become seriously ill and require medical attention. Older people and those with underlying medical conditions like cardiovascular disease, diabetes, chronic respiratory disease, or cancer are more likely to develop serious illness. Anyone can get sick with COVID-19 and become seriously ill or die at any age.

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As a smoker, am I likely to get more severe symptoms if infected?

- Smoking any kind of tobacco reduces lung capacity and increases the risk of many respiratory infections and can increase the severity of respiratory diseases. COVID-19 is an infectious disease that primarily attacks the lungs. Smoking impairs lung function making it harder for the body to fight off coronaviruses and other respiratory diseases. Available research suggests that smokers are at higher risk of developing severe COVID-19 outcomes and death.

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As a smoker, is my risk of getting the COVID-19 virus higher than that of a non-smoker?

- Currently, there are no peer-reviewed studies that have evaluated the risk of SARS-CoV-2 infection associated with smoking. However, tobacco smokers (cigarettes, waterpipes, bidis, cigars, heated tobacco products) may be more vulnerable to contracting COVID-19, as the act of smoking involves contact of fingers (and possibly contaminated cigarettes) with the lips, which increases the possibility of transmission of viruses from hand to mouth. Smoking waterpipes, also known as shisha or hookah, often involves the sharing of mouth pieces and hoses, which could facilitate the transmission of the COVID-19 virus in communal and social settings.

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Are there long-term effects of COVID-19?

- Some people who have had COVID-19, whether they have needed hospitalization or not, continue to experience symptoms, including fatigue, respiratory and neurological symptoms.
- Research is now ongoing on patients beyond the initial acute course of illness to understand the proportion of patients who have long term effects, how long they persist, and why they occur.

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COVID-19 Transmission

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COVID-19 most commonly spreads during close contact

- People who are physically near (within 6 feet) a person with COVID-19 or have direct contact with that person are at greatest risk of infection.
- When people with COVID-19 cough, sneeze, sing, talk, or breathe they produce respiratory droplets. These droplets can range in size from larger droplets (some of which are visible) to smaller droplets. Small droplets can also form particles when they dry very quickly in the airstream.
- Infections occur mainly through exposure to respiratory droplets when a person is in close contact with someone who has COVID-19.
- Respiratory droplets cause infection when they are inhaled or deposited on mucous membranes, such as those that line the inside of the nose and mouth.
- As the respiratory droplets travel further from the person with COVID-19, the concentration of these droplets decreases. Larger droplets fall out of the air due to gravity. Smaller droplets and particles spread apart in the air.
- With passing time, the amount of infectious virus in respiratory droplets also decreases.

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COVID-19 can sometimes be spread by airborne transmission

- Some infections can be spread by exposure to virus in small droplets and particles that can linger in the air for minutes to hours. These viruses may be able to infect people who are further than 6 feet away from the person who is infected or after that person has left the space.
- This kind of spread is referred to as airborne transmission and is an important way that infections like tuberculosis, measles, and chicken pox are spread.
- There is evidence that under certain conditions, people with COVID-19 seem to have infected others who were more than 6 feet away. These transmissions occurred within enclosed spaces that had inadequate ventilation. Sometimes the infected person was breathing heavily, for example while singing or exercising.
- Available data indicate that it is much more common for the virus that causes COVID-19 to spread through close contact with a person who has COVID-19 than through airborne transmission.

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COVID-19 spreads less commonly through contact with contaminated surfaces

- Respiratory droplets can also land on surfaces and objects. It is possible that a person could get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes.
- Spread from touching surfaces is not thought to be a common way that COVID-19 spreads.

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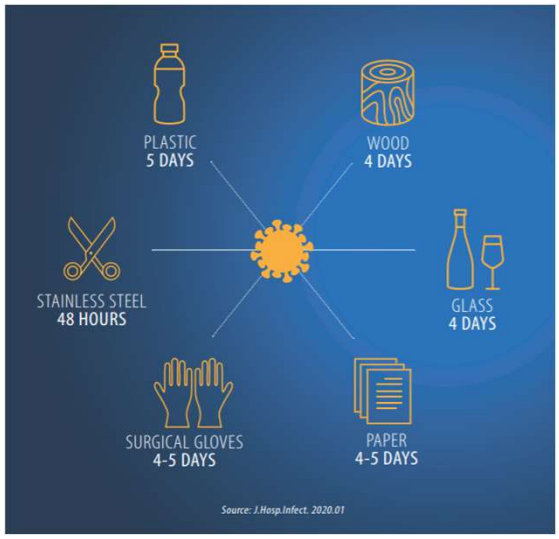
How long does the virus survive on surfaces?



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COVID-19 rarely spreads between people and animals

- More studies and surveillance are needed to understand how SARS-CoV-2 is spread between people and animals.
- It appears that the virus that causes COVID-19 can spread from people to animals in some situations.
- At this time, the risk of COVID-19 spreading from animals to people is considered to be low.
- People with suspected or confirmed COVID-19 should avoid contact with animals, including pets, livestock, and wildlife.

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Can COVID-19 be passed through breastfeeding?

- Transmission of active COVID-19 (virus that can cause infection) through breast milk and breastfeeding has not been detected to date. There is no reason to avoid or stop breastfeeding.

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Can COVID-19 be passed through breastfeeding?

- Women with confirmed or suspected COVID-19 can breastfeed if they wish to do so. They should:
  - Wash hands frequently with soap and water or use alcohol-based hand rub and especially before touching the baby;
  - Wear a medical mask during any contact with the baby, including while feeding;
  - Sneeze or cough into a tissue. Then dispose of it immediately and wash hands again;
  - Routinely clean and disinfect surfaces that mothers have touched.

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Reinfection with COVID-19

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Reinfection with COVID-19

- In general, reinfection means a person was infected (got sick) once, recovered, and then later became infected again.
- An individual can be reinfected multiple times. Reinfections are most often mild, but severe illness can occur. People who are reinfected can also spread the virus to others. Staying up to date with vaccines and starting treatment within days after developing symptoms decrease a person's risk of experiencing severe illness from reinfection.
- After infection with SARS-CoV-2, people's immune systems respond to protect them from SARS-CoV-2, including by creating antibodies. This immune response can provide a high level of protection against infection with the same or other SARS-CoV-2 variants for several months, but this protection decreases over time. People with weakened immune systems may have a limited or even no immune response after infection. Protection against severe COVID-19 illness generally lasts longer than protection against SARS-CoV-2 infections in general.
- As the virus evolves, new variants with the ability to evade a person's existing immunity can appear and lead to an increased risk for reinfection. Reinfections may occur during the first 90 days, and as early as several weeks after the previous infection, although this does not happen frequently. This risk of early reinfection may increase when new variants emerge.

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Testing for COVID-19

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What test should I get to see if I have COVID-19?

- In most situations, a molecular test is used to detect SARS-CoV-2 and confirm infection. Polymerase chain reaction (PCR) is the most commonly used molecular test. Samples are collected from the nose and/or throat with a swab. Molecular tests detect virus in the sample by amplifying viral genetic material to detectable levels. For this reason, a molecular test is used to confirm an active infection, usually within a few days of exposure and around the time that symptoms may begin.

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What about rapid tests?

- Rapid antigen tests (sometimes known as a rapid diagnostic test – RDT) detect viral proteins (known as antigens). Samples are collected from the nose and/or throat with a swab. These tests are cheaper than PCR and will offer results more quickly, although they are generally less accurate. These tests perform best when there is more virus circulating in the community and when sampled from an individual during the time they are most infectious.

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I want to find out if I had COVID-19 in the past, what test could I take?

- Antibody tests can tell us whether someone has had an infection in the past, even if they have not had symptoms. Also known as serological tests and usually done on a blood sample, these tests detect antibodies produced in response to an infection. In most people, antibodies start to develop after days to weeks and can indicate if a person has had past infection. Antibody tests cannot be used to diagnose COVID-19 in the early stages of infection or disease but can indicate whether or not someone has had the disease in the past.

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Treatment for COVID-19

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Are there treatments for COVID-19?

- Scientists around the world are working to find and develop treatments for COVID-19.
- Optimal supportive care includes oxygen for severely ill patients and those who are at risk for severe disease and more advanced respiratory support such as ventilation for patients who are critically ill.
- Dexamethasone is a corticosteroid that can help reduce the length of time on a ventilator and save lives of patients with severe and critical illness.
- Results from the WHO's Solidarity Trial indicated that remdesivir, hydroxychloroquine, lopinavir/ritonavir and interferon regimens appear to have little or no effect on 28-day mortality or the in-hospital course of COVID-19 among hospitalized patients.
- Hydroxychloroquine has not been shown to offer any benefit for treatment of COVID-19.
- WHO does not recommend self-medication with any medicines, including antibiotics, as a prevention or cure for COVID-19. WHO is coordinating efforts to develop treatments for COVID-19 and will continue to provide new information as it becomes available.

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Are antibiotics effective in preventing or treating COVID-19?

- Antibiotics do not work against viruses; they only work on bacterial infections. COVID-19 is caused by a virus, so antibiotics do not work. Antibiotics should not be used as a means of prevention or treatment of COVID-19.
- In hospitals, physicians will sometimes use antibiotics to prevent or treat secondary bacterial infections which can be a complication of COVID-19 in severely ill patients. They should only be used as directed by a physician to treat a bacterial infection.

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Protection against COVID-19

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Wearing Masks

- Masks are a key measure to suppress transmission and save lives.
- Masks should be used as part of a comprehensive 'Do it all!' approach including physical distancing, avoiding crowded, closed and close-contact settings, good ventilation, cleaning hands, covering sneezes and coughs, and more.
- Depending on the type, masks can be used for either protection of healthy persons or to prevent onward transmission.

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Who should wear what kind of mask?

- Medical masks are recommended for:
  - Health workers in clinical settings. See our guidance for more information on the use of personal protective equipment by health care workers.
  - Anyone who is feeling unwell, including people with mild symptoms, such as muscle aches, slight cough, sore throat or fatigue.
  - Anyone awaiting COVID-19 test results or who has tested positive.
  - People caring for someone who is a suspected or confirmed case of COVID-19 outside of health facilities.
  - People aged 60 or over.
  - People of any age with underlying health conditions, including chronic respiratory disease, cardiovascular disease, cancer, obesity, immunocompromised patients and diabetes mellitus.
- Non-medical, fabric masks can be used by the general public under the age of 60 and who do not have underlying health conditions.

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	 Respirators (including N95)	 Surgical Masks	 Non-Medical Masks
Evaluation, Testing, and Certification	Respirators are evaluated, tested and certified by the National Institute for Occupational Health and Safety (NIOSH).	Surgical masks are classified by the American Society for Testing and Materials (ASTM).	Have not been evaluated or tested to recognized standards.
Purpose	Respirators protect from exposure to airborne particles, including viruses.	Surgical masks are a barrier to spreading droplets and spit.	Non-medical masks help limit the spread of droplets and spit when you sneeze or cough.
Fit (Face Seal)	Respirators are designed to seal tight to the face of the wearer.	Are not designed to seal tight against the face.	Are not designed to seal tight against the face.
Filtration	Respirator filters that collect at least 95% of the challenge aerosol are given a 95 rating.	Surgical masks do not effectively filter small particles from the air.	Fabrics are not the same as materials used in certified masks and do not necessarily filter viruses.
Use Limitations	Generally single use but repurposing may be appropriate in certain circumstances. Follow manufacturer's instructions.	Generally single use, but repurposing may be appropriate in certain circumstances. Follow manufacturer's instructions.	Can be difficult to breathe through fabric. Wash between uses.
Who Should Use and When	Health care workers and others when providing direct care to a COVID-19 patient.	Health care workers and others when providing direct care to a COVID-19 patient.	General public when consistent physical distancing is not possible, such as in stores and shopping areas, and on public transit.

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- **Make hand sanitizer part of your mask wearing routine:** https://youtu.be/GEIYCvcOHLw
- **How to properly fit your mask: https://youtu.be/YPd-XrDhzrQ**
- **Confused about when to wear a mask? https://youtu.be/vohiTyczR8w**
- **How to wear a medical mask?** https://youtu.be/adB8RW4I3o4
- **How to wear a fabric mask? https://youtu.be/ciUniZGD4tY**

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Using Hand Sanitizers

- To prevent the spread of germs, including COVID-19, CDC recommends washing hands with soap and water whenever possible because it reduces the amount of many types of germs and chemicals on hands. But if soap and water are not readily available, using a hand sanitizer with at least 60% alcohol can help you avoid getting sick and spreading germs to others.
- Do not Choose hand sanitizers labeled as “alcohol-free.”

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Wearing Gloves

- Wear gloves when cleaning and when caring for someone who is sick.
- Wearing gloves outside of these instances (for example, when using a shopping cart or using an ATM) will not necessarily protect you from getting COVID-19 and may still lead to the spread of germs.
- The best way to protect yourself from germs when running errands and after going out is to regularly wash your hands with soap and water for 20 seconds or use hand sanitizer with at least 60% alcohol.

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Social Distancing

- Social distancing, also called "physical distancing," means keeping a safe space between yourself and other people who are not from your household.
- To practice social or physical distancing, stay at least 6 feet (about 2 arm lengths) from other people who are not from your household in both indoor and outdoor spaces.
- Social distancing should be practiced in combination with other everyday preventive actions to reduce the spread of COVID-19, including wearing masks, avoiding touching your face with unwashed hands, and frequently washing your hands with soap and water for at least 20 seconds.

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What is the difference between isolation and quarantine?

- Both isolation and quarantine are methods of preventing the spread of COVID-19.
- **Quarantine** is used for anyone who is a contact of someone infected with the SARS-CoV-2 virus, which causes COVID-19, whether the infected person has symptoms or not. Quarantine means that you remain separated from others because you have been exposed to the virus and you may be infected and can take place in a designated facility or at home. For COVID-19, this means staying in the facility or at home for 14 days.
- **Isolation** is used for people with COVID-19 symptoms or who have tested positive for the virus. Being in isolation means being separated from other people, ideally in a medically facility where you can receive clinical care. If isolation in a medical facility is not possible and you are not in a high risk group of developing severe disease, isolation can take place at home. If you have symptoms, you should remain in isolation for at least 10 days plus an additional 3 days without symptoms. If you are infected and do not develop symptoms, you should remain in isolation for 10 days from the time you test positive.

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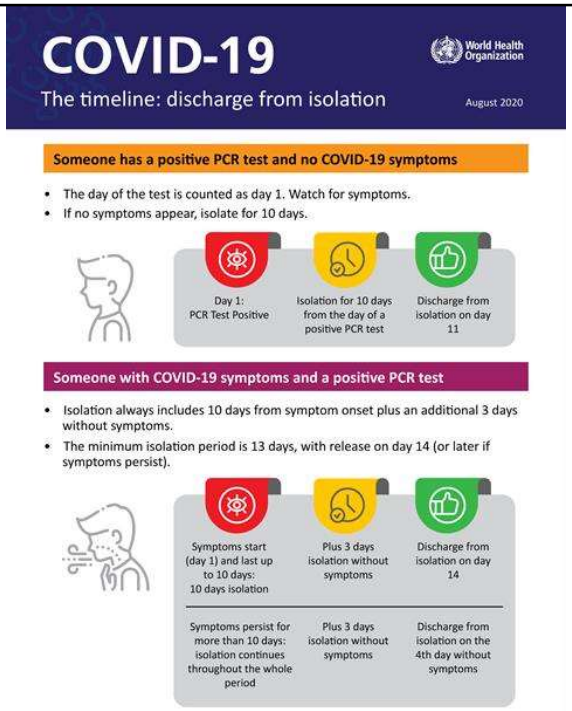

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COVID-19 Vaccines

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What types of COVID-19 vaccines are being developed? How would they work?

- Several different types of potential vaccines for COVID-19 are in development, including:
  - Inactivated or weakened virus vaccines, which use a form of the virus that has been inactivated or weakened so it doesn't cause disease, but still generates an immune response.
  - Protein-based vaccines, which use harmless fragments of proteins or protein shells that mimic the COVID-19 virus to safely generate an immune response.
  - Viral vector vaccines, which use a safe virus that cannot cause disease but serves as a platform to produce coronavirus proteins to generate an immune response.
  - RNA and DNA vaccines, a cutting-edge approach that uses genetically engineered RNA or DNA to generate a protein that itself safely prompts an immune response.

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COVID-19 vaccines

- The first mass vaccination programme started in early December 2020 and the number of vaccination doses administered is updated on a daily basis at this website(https://covid19.who.int/). At least 13 different vaccines (across 4 platforms) have been administered. Campaigns have started in 206 economies.
- The Pfizer/BioNtech Comirnaty vaccine was listed for WHO Emergency Use Listing (EUL) on 31 December 2020. The SII/Covishield and AstraZeneca/AZD1222 vaccines (developed by AstraZeneca/Oxford and manufactured by the Serum Institute of India and SK Bio respectively) were given EUL on 16 February. The Janssen/Ad26.COV 2.S developed by Johnson & Johnson, was listed for EUL on 12 March 2021. The Moderna COVID-19 vaccine (mRNA 1273) was listed for EUL on 30 April 2021 and the Sinopharm COVID-19 vaccine was listed for EUL on 7 May 2021. The Sinopharm vaccine is produced by Beijing Bio-Institute of Biological Products Co Ltd, subsidiary of China National Biotec Group (CNBG).

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COVID-19 vaccines

- **As of 12 January 2022, the following vaccines have obtained EUL:**
- The Pfizer/BioNTech Comirnaty vaccine, 31 December 2020.
- The SII/COVISHIELD and AstraZeneca/AZD1222 vaccines, 16 February 2021.
- The Janssen/Ad26.COV 2.S vaccine developed by Johnson & Johnson, 12 March 2021.
- The Moderna COVID-19 vaccine (mRNA 1273), 30 April 2021.
- The Sinopharm COVID-19 vaccine, 7 May 2021.
- The Sinovac-CoronaVac vaccine, 1 June 2021.
- The Bharat Biotech BBV152 COVAXIN vaccine, 3 November 2021.
- The Covovax (NVX-CoV2373) vaccine, 17 December 2021.
- The Nuvaxovid (NVX-CoV2373) vaccine, 20 December 2021

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What are the benefits of getting vaccinated?

- The COVID-19 vaccines produce protection against the disease, as a result of developing an immune response to the SARS-Cov-2 virus. Developing immunity through vaccination means there is a reduced risk of developing the illness and its consequences. This immunity helps you fight the virus if exposed. Getting vaccinated may also protect people around you, because if you are protected from getting infected and from disease, you are less likely to infect someone else. This is particularly important to protect people at increased risk for severe illness from COVID-19, such as healthcare providers, older or elderly adults, and people with other medical conditions.

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Can a COVID-19 vaccine make me sick with COVID-19?

- NO. COVID-19 vaccines teach our immune systems how to recognize and fight the virus that causes COVID-19. Sometimes this process can cause symptoms, such as fever. These symptoms are normal and are signs that the body is building protection against the virus that causes COVID-19.
- Because none of the authorized COVID-19 vaccines contain the live virus that causes COVID-19, the vaccine cannot make you sick with COVID-19.

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What are the side effects of COVID-19 vaccines?

- Like with any vaccine, some people will experience mild to moderate side effects after being vaccinated against COVID-19. This is a normal sign that the body is developing protection. Side effects to COVID-19 vaccines include a fever, tiredness, headache, muscle ache, chills, diarrhoea and pain or redness at the injection site. Not everyone will experience side effects. Most side effects go away within a few days on their own. You can manage any side effects with rest, plenty of non-alcoholic liquids and taking medication to manage pain and fever, if needed.
- If you are worried that the side effects that you are experiencing are unusual, if the pain in the arm where you got the injection gets worse after 24 hours or your side effects don't go away in a few days, contact your healthcare provider for advice.
- More serious or long-lasting side effects to COVID-19 vaccines are possible but extremely rare. If you experience difficulty breathing, chest pain, confusion, loss of speech or mobility after your vaccine, contact your healthcare provider immediately. Vaccines are continually monitored for as long as they are in use to detect and respond to rare adverse events.

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Does having side effects mean that the vaccine is working? What does having no side effects mean?

- The vaccine stimulates your immune system to protect you from the virus. This process can sometimes cause side effects like fever, chills or headache, but not everyone will experiences any side effect. The presence or magnitude of the reaction you may have vaccination does not predict or reflect your immune response to the vaccine.
- You do not have to have side effects in order to be protected.

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Is it safe to mix-and-match different COVID-19 vaccines?

- It is safe for you to receive two different COVID-19 vaccines for your first and second dose. This is sometimes called mixing and matching vaccines, or a heterologous vaccine schedule.
- By mixing and matching vaccines, countries are able to maximise vaccine impact in the event of constrained or limited supply.
- Further trials are underway to understand more about mixed doses, which will inform any future changes to WHO's recommendations.

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Do the COVID-19 Astra Zeneca and Johnson & Johnson/Janssen vaccines cause blood clots?

- Globally, COVID-19 vaccines such as AstraZeneca and Johnson &Johnson/Janssen have been used to protect millions of people. Data is available from both clinical trials and preliminary data from country surveillance programmes on their efficacy and safety. Some mild to moderate side effects such as fever, muscle and head aches, soreness around the injection site and tiredness are expected to affect some people after vaccination. These are a normal indications that the body is developing protection.

- There have been reports of very rare but serious cases of blood clots accompanied by low platelet counts (known as thrombosis with thrombocytopenia syndrome (TTS)) occurring 3 to 30 days after vaccination with COVID-19 vaccines (such as the AstraZeneca and Janssen vaccines).

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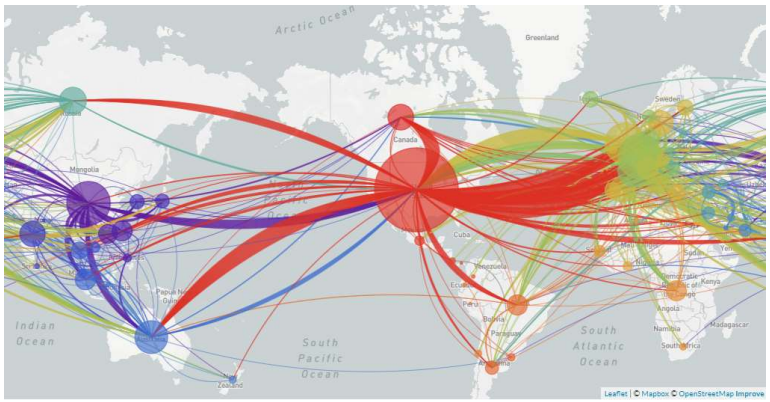
Coronavirus Evolution



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What does it mean to say a virus mutates or changes?

- When a virus replicates or makes copies of itself, it sometimes changes a little bit. These changes are called "mutations." A virus with one or several new mutations is referred to as a "variant" of the original virus.
- The more viruses circulate, the more they may change. These changes can occasionally result in a virus variant that is better adapted to its environment compared to the original virus. This process of changing and selection of successful variants is called "virus evolution."
- Some mutations can lead to changes in a virus's characteristics, such as altered transmission (for example, it may spread more easily) or severity (for example, it may cause more severe disease).
- Some viruses change quickly and others more slowly. SARS-CoV-2, the virus which causes COVID-19, tends to change more slowly than others such as HIV or influenza viruses. This could in part be explained by the virus's internal "proofreading mechanism" which can correct "mistakes" when it makes copies of itself. Scientists continue to study this mechanism to better understand how it works.

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What does it mean to say a virus mutates or changes?

Multiple variants of the virus that causes COVID-19 are circulating globally:

1. The United Kingdom (UK) identified a variant called B.1.1.7 with a large number of mutations in the fall of 2020. This variant spreads more easily and quickly than other variants.
2. In South Africa, another variant called B.1.351 emerged independently of B.1.1.7.
3. In Brazil, a variant called P.1 emerged that was first identified in travelers from Brazil, who were tested during routine screening at an airport in Japan, in early January. This variant contains a set of additional mutations that may affect its ability to be recognized by antibodies.

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Know The Facts….

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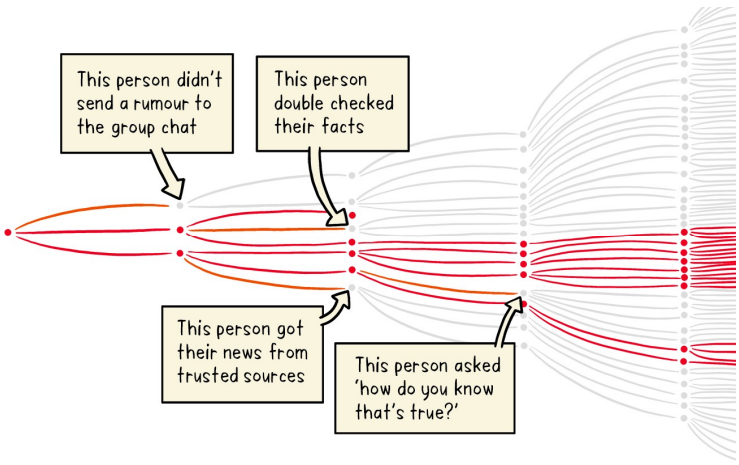
Let's flatten the infodemic curve



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Top tips for navigating the infodemic

World Health Organization

1. Assess the source:

Who shared the information with you and where did they get it from? Even if it is friends or family, you still need to vet their source.

2. Go beyond headlines:

Headlines may be intentionally sensational or provocative.

3. Identify the author:

Search the author's name online to see if they are real or credible.

4. Check the date:

Is it up to date and relevant to current events? Has a headline, image or statistic been used out of context?

5. Examine the supporting evidence:

Credible stories back up their claims with facts.

6. Check your biases:

Think about whether your own biases could affect your judgment on what is or is not trustworthy.

7. Turn to fact-checkers:

Consult trusted fact-checking organizations, such as the International Fact-Checking Network and global news outlets focused on debunking misinformation.

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COVID-19 Mythbusters

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Micronutrients, such as vitamins D and C and zinc, are critical for a well-functioning immune system and play a vital role in promoting health and nutritional well-being.
There is currently no guidance on the use of micronutrient supplements as a treatment of COVID-19.
WHO is coordinating efforts to develop and evaluate medicines to treat COVID-19.

World Health Organization #Coronavirus #COVID19

FACT:
Vitamin and mineral supplements cannot cure COVID-19

22 September 2020

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Studies of hydroxychloroquine among seriously ill hospitalized patients were stopped in the WHO Solidarity Trial because data didn't show that it reduces mortality of hospitalised COVID-19 patients.
WHO is coordinating efforts to develop and evaluate medicines to treat COVID-19.

World Health Organization #Coronavirus #COVID19

FACT:
Hydroxychloroquine does NOT reduce mortality of hospitalised COVID-19 patients

16 November 2020

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Corticosteroids (dexamethasone and hydrocortisone) are recommended for severe and critically ill COVID-19 patients under medical supervision.

A review of 8 randomized studies with more than 7,000 patients found that the systemic treatment (intravenous or oral) reduced mortality for this group.

In contrast, WHO does NOT advise the use of corticosteroids for patients with non-severe COVID-19, because they may increase the risk of complications or adverse effects.

World Health Organization #Coronavirus #COVID19

FACT:
Corticosteroids (dexamethasone and hydrocortisone) are recommended for severe and critically ill COVID-19 patients.

5 November 2020

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The COVID-19 virus does not transmit through water while swimming.
However, the virus spreads between people when someone has close contact with an infected person.

WHAT YOU CAN DO:
Avoid crowds and maintain at least a 1-metre distance from others, even when you are swimming or at swimming areas.
Wear a mask when you're not in the water and you can't stay distant. Clean your hands frequently, cover a cough or sneeze with a tissue or bent elbow, and stay home if you're unwell.

World Health Organization #Coronavirus #COVID19

FACT:
Water or swimming does not transmit the COVID-19 virus

16 October 2020

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COVID-19

Dr. Latefa Dardas

The prolonged use of medical masks can be uncomfortable. However, it does not lead to CO2 intoxication nor oxygen deficiency.

While wearing a medical mask, make sure it fits properly and that it is tight enough to allow you to breathe normally. Do not re-use a disposable mask and always change it as soon as it gets damp.

* Medical masks (also known as surgical masks) are flat or pleated; they are affixed to the head with straps or have ear loops.

World Health Organization #Coronavirus #COVID19

FACT:
The prolonged use of medical masks* when properly worn, DOES NOT cause CO2 intoxication nor oxygen deficiency

5 June 2020

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COVID-19

Dr. Latefa Dardas

Most people who get COVID-19 have mild or moderate symptoms and can recover thanks to supportive care.

If you have a cough, fever and difficulty breathing seek medical care early – call your health facility by telephone first.

If you have fever and live in an area with malaria or dengue seek medical care immediately.

World Health Organization #Coronavirus #COVID19

FACT:
Most people who get COVID-19 recover from it

27 May 2020

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COVID-19

Dr. Latefa Dardas

Thermal scanners are effective in detecting people who have a fever (i.e. have a higher than normal body temperature). They cannot detect people who are infected with COVID-19.

There are many causes of fever. Call your healthcare provider if you need assistance or seek immediate medical care if you have fever and live in an area with malaria or dengue.

World Health Organization #COVID19 #Coronavirus

FACT:
Thermal scanners CANNOT detect COVID-19

27 May 2020

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COVID-19

Dr. Latefa Dardas

Do not under any circumstance spray or introduce bleach or any other disinfectant into your body. These substances can be poisonous if ingested and cause irritation and damage to your skin and eyes.

Bleach and disinfectant should be used carefully to disinfect surfaces only.

Remember to keep chlorine (bleach) and other disinfectants out of the reach of children.

World Health Organization #COVID19 #coronavirus

FACT:
Spraying or introducing bleach or another disinfectant into your body WILL NOT protect you against COVID-19 and can be dangerous

27 April 2020

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COVID-19

Dr. Latefa Dardas

You can catch COVID-19, no matter how sunny or hot the weather is.
Countries with hot weather have reported cases of COVID-19.
To protect yourself, make sure you clean your hands frequently and thoroughly and avoid touching your eyes, mouth and nose.

World Health Organization #Coronavirus #COVID19

FACT:
Exposing yourself to the sun or to temperatures higher than 25C degrees DOES NOT prevent nor cure COVID-19

27 April 2020

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COVID-19

Dr. Latefa Dardas

The most common symptoms of COVID-19 are dry cough, tiredness and fever. Some people may develop more severe forms of the disease, such as pneumonia. The best way to confirm if you have the virus producing COVID-19 disease is with a laboratory test. You cannot confirm it with this breathing exercise, which can even be dangerous.

World Health Organization #Coronavirus #COVID19

FACT:
Being able to hold your breath for 10 seconds or more without coughing or feeling discomfort DOES NOT mean you are free from the coronavirus disease (COVID-19) or any other lung disease.

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COVID-19

Dr. Latefa Dardas

The COVID-19 virus can be transmitted in any climate, including areas with hot and humid weather.

The best way to protect yourself against COVID-19 is by maintaining physical distance of at least 1 metre from others and frequently cleaning your hands. By doing this you eliminate viruses that may be on your hands and avoid infection that could occur by then touching your eyes, mouth, and nose.

World Health Organization #Coronavirus #COVID19

FACT:
COVID-19 can be transmitted in areas with hot and humid climates

27 April 2020

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COVID-19

Dr. Latefa Dardas

There is no reason to believe that cold weather can kill the new coronavirus or other diseases.

The normal human body temperature remains around 36.5°C and 37°C, regardless of the external temperature or weather.

The most effective way to protect yourself against the new coronavirus is by frequently cleaning your hands with alcohol-based hand rub or washing them with soap and water.

World Health Organization #Coronavirus #COVID19

FACT:
Cold weather and snow CANNOT kill the new coronavirus

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COVID-19

Dr. Latefa Dardas

Taking a hot bath will not prevent you from catching COVID-19. Your normal body temperature remains around 36.5°C to 37°C, regardless of the temperature of your bath or shower. Actually, taking a hot bath with extremely hot water can be harmful, as it can burn you.

The best way to protect yourself against COVID-19 is by frequently cleaning your hands. By doing this you eliminate viruses that may be on your hands and avoid infection that could occur by then touching your eyes, mouth, and nose.

World Health Organization #Coronavirus #COVID19

FACT:
Taking a hot bath does not prevent the new coronavirus disease

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COVID-19

Dr. Latefa Dardas

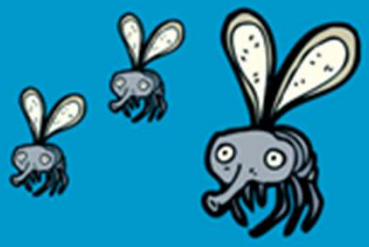
To date there has been no information nor evidence to suggest that the new coronavirus could be transmitted by mosquitoes.

The new coronavirus is a respiratory virus which spreads primarily through droplets generated when an infected person coughs or sneezes, or through droplets of saliva or discharge from the nose.

To protect yourself, clean your hands frequently with an alcohol-based hand rub or wash them with soap and water. Also, avoid close contact with anyone who is coughing and sneezing.

World Health Organization #Coronavirus #COVID19

FACT:
The new coronavirus CANNOT be transmitted through mosquito bites



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COVID-19

Dr. Latefa Dardas

Are hand dryers effective in killing the new coronavirus?

No. Hand dryers are not effective in killing the 2019-nCoV.

To protect yourself against the new coronavirus, you should frequently clean your hands with an alcohol-based hand rub or wash them with soap and water. Once your hands are cleaned, you should dry them thoroughly by using paper towels or a warm air dryer.

World Health Organization

#2019nCoV

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COVID-19

Dr. Latefa Dardas

Can regularly rinsing your nose with saline help prevent infection with the new coronavirus?

No. There is no evidence that regularly rinsing the nose with saline has protected people from infection with the new coronavirus.

There is some limited evidence that regularly rinsing the nose with saline can help people recover more quickly from the common cold. However, regularly rinsing the nose has not been shown to prevent respiratory infections.

World Health Organization

#2019nCoV

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COVID-19

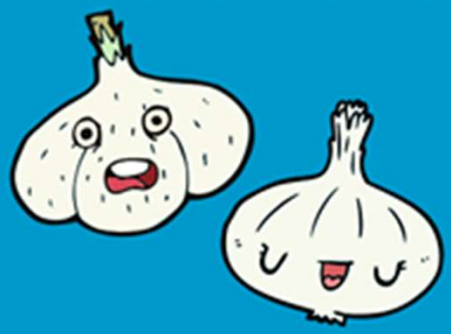
Dr. Latefa Dardas

Garlic is a healthy food that may have some antimicrobial properties. However, there is no evidence from the current outbreak that eating garlic has protected people from the new coronavirus (2019-nCoV)

World Health Organization

#2019nCoV

Can eating garlic help prevent infection with the new coronavirus?



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COVID-19

Dr. Latefa Dardas

Can people wear masks while exercising?

16 June 2020

People should NOT wear masks when exercising as masks may reduce the ability to breathe comfortably.

Sweat can make the mask become wet more quickly which makes it difficult to breathe and promotes the growth of microorganisms.

The important preventive measure during exercise is to maintain physical distance of at least one meter from others.

#Coronavirus #COVID19

World Health Organization

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COVID-19

Dr. Latefa Dardas

Can shoes spread the COVID-19 virus?

The likelihood of COVID-19 being spread on shoes and infecting individuals is very low.

As a precautionary measure, particularly in homes where infants and small children crawl or play on floors, consider leaving your shoes at the entrance of your home. This will help prevent contact with dirt or any waste that could be carried on the soles of shoes.

11 June 2020

#Coronavirus #COVID19

World Health Organization

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Thank you…

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