https://www.agupdate.com/iowafarmertoday/news/state-and-regional/covid-upsurge-demands-all-hands-effort/article_46256362-c158-11ea-b245-633e5e98be07.html

COVID upsurge demands all-hands effort

By Stephanie Leonard Jul 13, 2020 COVID upsurge demands all-hands effort | State & Regional | agupdate.com



The Kalona, Iowa Veterinary Clinic P.C. implements social distancing, face masks, and curbside service to protect the community and staff from Covid-19. "A mask is the new smile!" for Careteam staff Annette McGaffey, Brooke Kreiss, and Michelle Yutzy.

Photo by Stephanie Leonard

Imagine if one of our small Iowa towns was struck with a natural disaster, leaving no survivors. Or if an entire county was overcome with disease affecting every resident.

Safety Watch

These tragedies would be in the news, prompting shock, grief, and an outpouring of support and aid for those affected and assisting the people we consider our neighbors. The actual crisis is this: In just 12 weeks after the first coronavirus cases were confirmed in Iowa, more than 700 Iowans have died from COVID-19. A number roughly the population of Iowa's Battle Creek, Dayton, Essex, or Earlville communities.

As of June 30, Iowa's total case count approached 29,000.

And Iowa ranked 16th highest among states in the rate of 7-day rolling average of daily new cases per 100,000 residents (+12%).

Looking at the bigger picture: coronavirus has infected over 10.4 million people worldwide. The U.S. case count — over 2.6 million — exceeds all other countries, with new U.S. cases now increasing by over 40,000 daily. Nationally, new cases per day increased 80 percent in two weeks. The number of reported U.S. covid deaths — 126,000 — is widely regarded as an undercount.

After working together through two months of restrictions, closures, and voluntary lockdowns to successfully slow coronavirus spread, lifted restrictions and reopenings have occurred without widespread adherence to the practices proven successful in limiting transmission.

The results are that in most states, we are now bending the coronavirus curve — back upwards.

Anthony Fauci, the U.S.' leading infectious disease expert, testified on June 30, "We are now having 40-plus thousand new cases a day. I would not be surprised if we go up to 100,000 a day if this does not turn around."

Despite mounting data, there remains some aversion to acknowledging and managing the pandemic. This may be influenced by several factors: gaps in knowledge about how the virus works; fatigue, impatience, anger, stress from weeks of lockdown; confusion about evolving or mixed messages; economic strain; or a sense of invulnerability. I hear a range of perspectives, explanations, and rationale for discounting prescribed guidelines. What many of these comments seem to say are: It doesn't affect me; I'm not vulnerable; or the restrictions are over, I'm moving on.

In most states, coronavirus is now spreading faster than the rate of increased testing, after restrictions of the spring months were lifted. For states not hit early in the pandemic, cases are rising for the first time; for others, rebounds and spikes are occurring while guidelines for distancing, face coverings, and gatherings have been ignored or laxly enforced.

Know the facts

Turning this around starts with knowing the facts:

The main route of exposure and transmission is person-to-person through close contact

- between people who are in close contact with one another within about 6 feet
- through respiratory droplets and particles expelled when an infected person exhales, coughs, sneezes, talks, laughs, or sings.
- droplets and particles containing virus can be inhaled into the lungs or can land in the mouths or noses of people nearby.

Even people who have not yet developed symptoms or those who are infected and asymptomatic can spread the virus to others.

Touching surfaces contaminated with virus, and then touching your nose, mouth or eyes may be a route of transmission, but less significant than close personal contact.

COVID produces a range of symptoms, from none to severe, that vary widely in their presentation. They include:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

Studies indicate 35 to 44% of infected individuals are asymptomatic. These cases can still shed the virus, infecting others.

The timeline of exposure, infectious spread, symptoms to recovery or death extends over days to weeks or more. You may not develop symptoms for 2 to 14 days, if at all. Infected individuals are believed to be most contagious 2 days before symptoms develop. Testing for cases is generally most reliable about a week following exposure.

Older people and those with existing health conditions like heart disease, diabetes, obesity, and immune deficiency are most vulnerable to serious complications and death.

Young healthy people are not immune from serious disease or death; but in general, they experience milder symptoms or are asymptomatic cases. A concern regarding younger, milder, or asymptomatic cases is their risk of transmitting the virus to older or more vulnerable people.

Save lives

While treating the disease can been challenging, preventing transmission is straightforward:

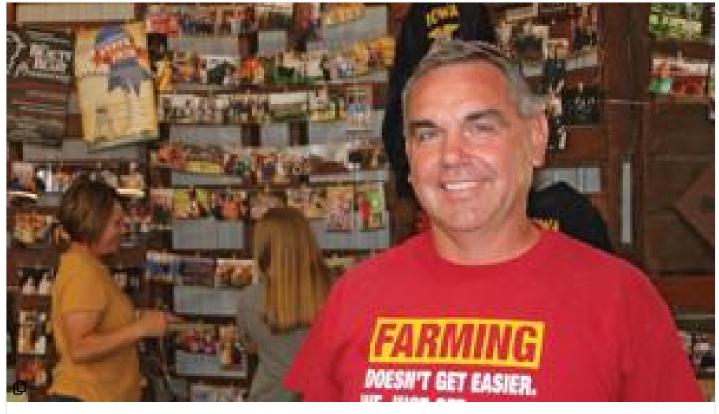
- Avoid or minimize time indoors where people gather,
- Avoid indoor gathering sites with poor airflow or circulation
- Maintain at least 6 foot distance from others to avoid breathing exhaled particles
- Wear a face covering when you're in public, even if you don't feel sick. Face coverings are proven to significantly reduce transmission by stopping exhaled respiratory particles and droplets. When we wear a face covering, we're protecting others. When everyone wears one, we're all protected.
- Wash hands often and for at least 20 seconds.

If you think you might have been exposed, track your contacts, let them know, and selfisolate for 14 days to prevent spread. Get tested.

Those people — the 700-plus Iowans we've lost, their grieving families, and those who've been sickened, aren't just numbers, they're our neighbors. They're spread all over the state but not showing up in the headlines.

We can't afford to lose more of them without doing everything we can to save lives.

Steph Leonard is an industrial hygienist at the University of Iowa. Contact her at stephanie-leonard@uiowa.edu.



Coping with COVID