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What About Coronavirus Disease 2019 (COVID-19)

Thank you for joining us this morning for this important discussion about COVID-19, a member of the coronavirus family. This family of viruses causes illnesses like the common cold. Corona means crown in Latin. That is how the virus looks under the microscope, like it is wearing a crown, thus the name.

Coronavirus disease 2019 (COVID-19) is definitely more than a common cold. It is having a tremendous impact all over the world. It is a novel or new kind of coronavirus that we have never seen before in humans. This virus has gone to work to show that it is the king of all viruses!

Background

Let's start with brief background on how this virus got started and how many people have been infected across the world. The first cases were reported in China in December 2019. Some have suggested that it may have started even before. Since it is a new virus we are still learning at every phase, but most scientist believe it started with a bat and then spread to humans, possible via an intermediary host like the Pangolin.

The first reported case in United States was in January 2020 in the state of Washington. From there fast forward to the current times. Worldwide there are now over **7 million cases** with U.S. accounting for **2 million of these cases**. The U.S. has over 115, 000 deaths. These numbers change frequently. The Johns Hopkins tracker, <https://coronavirus.jhu.edu/map.html>, provides very up-to-date numbers if you are interested. Looking closer at the Continent of Africa, as of 5/22/20 there were more than 100,000 cases and 3100 deaths. The World Health Organization tracker provides specific updates: <https://www.afro.who.int/health-topics/coronavirus-covid-19>.

The Path to Illness

If people are standing less than 6 feet apart, the virus can be passed person- person. The infected droplets that are released, primarily enter the body through the nose, but also can enter through the mouth and eyes. The virus starts attacking as soon as it gains entrance. It initially is in the back of the throat. If your immune system (system designed to fight off

infection) is effective the virus is destroyed there. However, symptoms become more severe once the infection starts making its way to the lower respiratory tract. If the virus is not resolved then it goes down the windpipe and enters the lower respiratory tract (lungs), where it wreaks havoc. The lungs are this virus' favorite space. In the lungs the virus continues to reproduce itself and can lead to pneumonia or bronchitis. The small air cells become damaged, the body and virus are at war, and subsequently the body is deprived of oxygen. This ultimately can lead to death in the most severe case.

Symptoms

There have been a few symptoms attributed to COVID-19 infection. The top three reported when this virus first emerged include fever, cough and shortness of breath(SOB). Other symptoms are listed in the table. **Note:** in severe cases people can be effected head to toe.

COVID-19 Symptoms	
<u>Common</u>	<u>Less common</u>
<ul style="list-style-type: none">• Fever• Cough• SOB• Fatigue• Chills• Myalgias, sore throat, anorexia, chest pain	<ul style="list-style-type: none">• GI- diarrhea, n/v• Loss of senses- smell, taste• COVID toes- purpuric lesions

An important concept in this discussion are people who are asymptomatic (infected but no symptoms). It is estimated that 35-50% of people that could have the virus may be asymptomatic. **“You can’t tell by looking or listening.”**

Either way, once exposed to COVID-19 symptoms can start 2-14 days later, with the average being 5 days. Also unlike the flu where spread is roughly 1: 1, with COVID-19 one infected person can infect 2-3 more people. Those 2-3 people can EACH infect 2-3 more people and so on. Thus you reach the numbers that were mentioned above.

We are now dealing with two viruses that are intricately connected- COVID-19 and racism. But, this virus **DOES NOT DISCRIMINATE**- gender, sexual orientation, ability, race, ethnicity, religion, political affiliation, country of origin..... and more.

However the risk is greater for some:

- People of color- African Americans/Black(die the most), Latinx, American Indian
- Older people, those older than 65 years of age
- People with chronic diseases- diabetes, hypertension, obesity, asthma, COPD, heart disease, etc. We know that most of these are areas of health disparity.
- Immunocompromised- cancers- chemotherapy, lupus , rheumatoid arthritis-on meds
- Social determinants of health-poverty, inadequate community health-food deserts, close knit housing, etc. We know that structural racism has played a part in these inequities.

Please access drteant.com to see what I am thinking and writing about on COVID-19 and related issues. Thank you so much for your time and attention to this critical matter.