How to keep coronavirus away: 4 questions answered by a public health professional

March 5 2020, by Brian Labus

Credit: CC0 Public Domain

The World Health Organization has declared that COVID-19, the disease caused by the new coronavirus, has a [higher fatality rate than the flu](). As of March 4, 2020, nine deaths have been reported in the U.S. Brian Labus, a professor of public health, provides essential safety

information for you, from disinfectants to storing food and supplies.

1. What can I do to prevent becoming infected?

When people are sick with a respiratory disease like COVID-19, they cough or sneeze particles into the air. If someone is coughing near you, the virus could easily land on your eyes, nose or mouth. These particles travel only about six feet and fall out of the air rather quickly. However, they do land on surfaces that you touch all the time, such as railings, doorknobs, elevator buttons or subway poles. The average person also touches their face 23 times per hour, and about half of these touches are to the mouth, eyes, and nose, which are the mucosal surfaces that the COVID-19 virus infects.

We public health professionals can't stress this enough: Proper hand-washing is the best thing you can do to protect yourself from a number of diseases including COVID-19. While hand-washing is preferred, hand sanitizers with at least a 60% alcohol concentration can be an effective alternative to always using soap and water, but only if your hands are not visibly soiled.

2. Wouldn't it be easier just to clean surfaces?

Not really. Public health experts don't fully understand the role these surfaces play in the transmission of disease, and you could still be infected by a virus that landed directly on you. We also don't know how long the coronavirus that causes COVID-19 can survive on hard surfaces, although other coronaviruses can survive for up to nine days on hard surfaces like stair railings.

Frequent cleaning could remove the virus if a surface has been contaminated by a sick person, such as when someone in your household

is sick. In these situations, it is important to use a disinfectant that is thought to be effective against the COVID-19 virus. Although specific products have [not yet been tested against COVID-19 coronavirus](link), there are many products that are [effective against the general family of coronaviruses](link). Cleaning recommendations using "natural" products like vinegar are popular on social media, but there is no evidence that they are effective against coronavirus.

You also have to use these products properly in accordance with the directions, and that typically means keeping the surface wet with the product for a period of time, often several minutes. Simply wiping the surface down with a product is usually not enough to kill the virus.

In short, it isn't possible to properly clean every [surface](link) you touch throughout your day, so hand-washing is still your best defense against COVID-19.

3. What about wearing masks?

While people have turned to [masks](link) as protection against COVID-19, masks often provide nothing more than a false sense of security to the wearer. The masks that were widely available at pharmacies, big-box stores and home improvement stores—until a worried public bought them all—work well at filtering out large particles like dust. The problem is that the particles that carry the COVID-19 virus are small and easily move right through dust masks and surgical masks. These masks may provide some protection to other people if you wear one while you are sick—like coughing into a tissue—but they will do little to protect you from other [sick people](link).

[N95 masks](link), which filter out 95% of the small, virus-containing particles, are worn in [health care settings to protect doctors and nurses](link) from exposure to [respiratory diseases](link). These masks provide protection only if

they are worn properly. They require special testing to ensure that they provide a seal around your face and that air doesn't leak in the sides, defeating the purpose of the mask. People wearing the mask also must take special steps when removing the mask to ensure that they are not contaminating themselves with the viral particles that the mask filtered out. If you don't wear the mask properly, don't remove it properly or put it in your pocket and reuse it later, even the best mask won't do you any good.

4. Should I stockpile food and supplies?

As a general preparedness step, you should have a three-day supply of [food](#) and [water](#) in case of emergencies. This helps protect from disruptions to the water supply or during power outages.

While this is great general preparation advice, it doesn't help you during a disease outbreak. There is no reason to expect COVID-19 to cause the same damage to our infrastructure that we Americans would see after an earthquake, hurricane or tornado, so you shouldn't plan for it in the same way. While you don't want to run out of toilet paper, there is no reason to buy [50 packages](#).

A Wuhan-type quarantine is extremely unlikely, as a quarantine won't stop the spread of a disease that has been found all over the world. The types of disruptions that you should plan for are small disruptions in your day-to-day life. You should have a plan in case you or a family member gets sick and you can't leave the house for a few days. This includes stocking up on basic things you need to take care of yourself, like food and medicines.

If you do get sick, the last thing you are going to want to do is run to the grocery store, where you would expose other people to your illness. You shouldn't wait until you are out of an important medication before

requesting a refill just in case your pharmacy closes for a couple days because all their employees are sick. You also should plan for how to handle issues like temporary school or day care closures. You don't need to prepare anything extreme; a little common-sense preparation will go a long way to make your life easier if you or your loved ones become sick.

This article is republished from The Conversation under a Creative Commons license. Read the original article.

Provided by The Conversation