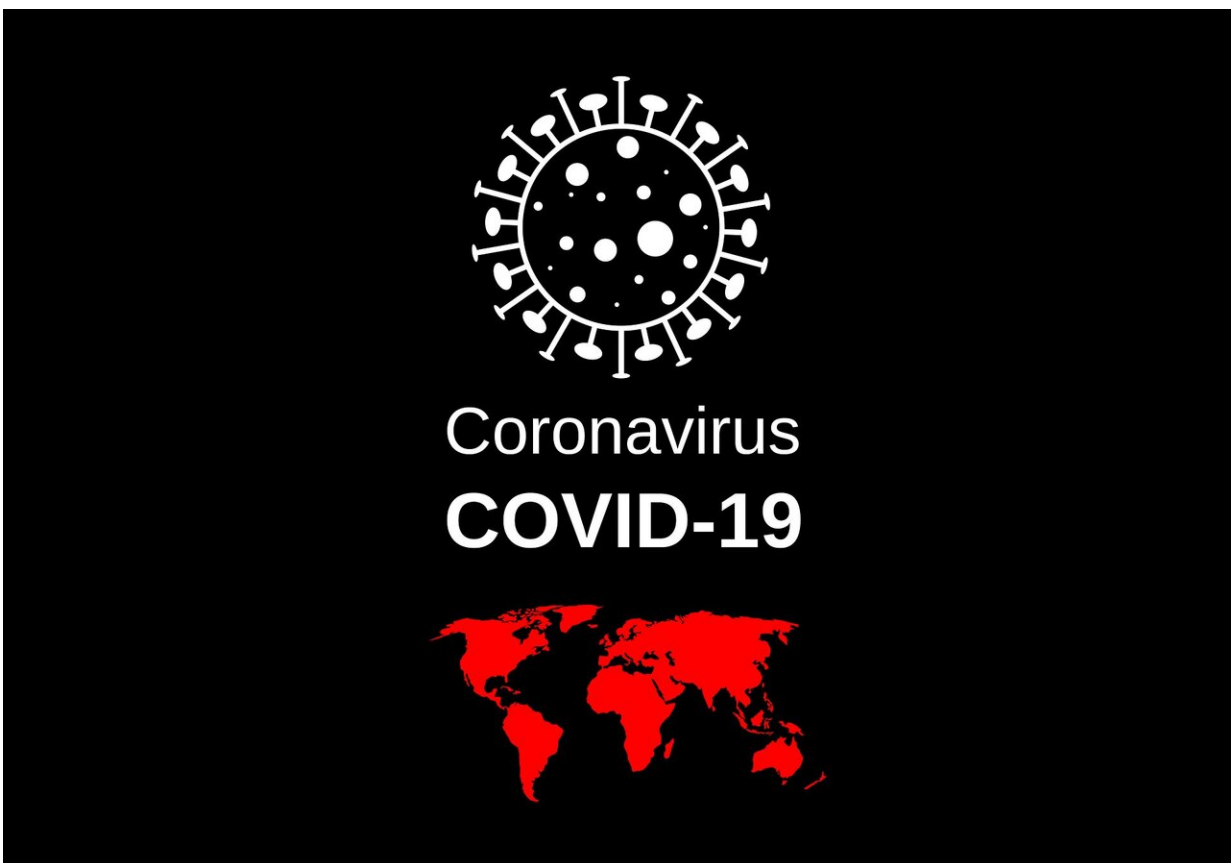


# Did you know loss of smell is one of the first symptoms of COVID-19? More answers from experts

March 26 2020, by Grace Wong

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As part of a weekly, hourlong webinar focused on COVID-19, the

Buffett Institute for Global Affairs at Northwestern University hosted Dr. Robert Murphy, executive director of the university's Institute for Global Health and a professor of infectious diseases at the Feinberg School of Medicine, to provide insight into the virus and its effects. He's an expert in HIV infection, viral hepatitis, antiviral drug development and global health.

Murphy's presentation, "Blunting the Impact of COVID-19," refers to the graph of the line that marks the passage of time and the number of fatalities. The higher the bump, the more deaths. "Blunting" the bump means decreasing the number of deaths. Murphy discussed the mortality rate of [coronavirus](#), its impact on the health care system and what measures we can take to lessen its consequences.

Here's some of what we learned. Answers have been edited for clarity and brevity.

**Q. Have we learned anything new about the virus?**

A. Loss of smell may be one of the first symptoms of COVID-19.

**Q. When should we expect more serious death numbers?**

A. The model shows that the U.S. is in the peak infection stage, but the damage will occur later in the year. The peak damage estimate is during May through June.

**Q. How many people should we be testing right now?**

A. We should be testing 4,000 people in Illinois daily and 100,000 people in the United States daily. "We are not doing that," Murphy said.

**Q. Why do we keep hearing experts say that testing is important?**

A. Besides identifying those who have COVID-19, there are a lot more people than we thought who have no symptoms but are infectious and spreading the disease. The only way to prevent this are mass screenings. "If we don't do mass screenings, I think nothing else will work." South Korea has done the most tests out of any country and has seen it pay off in blunting the curve.

**Q. Do we really need such an extreme reaction?**

A. "The more forceful we act now, the shorter the problem will be." Places like South Korea, Japan, Hong Kong, Taiwan and Singapore have been able to suppress the infection because of their strict measures.

**Q. How long do we need to practice social distancing to get us through the epidemic?**

A. "It's not 15 days." There are models that show the stricter you are, the shorter the bump. If we stop these interventions and leave it up to the states, I think we're in a lot of trouble for the next 12 to 24 months. "If we all get on the same page, we can start seeing decline in the early to midsummer."

**Q. When will we know that shelter in place is working?**

A. Public health officials are following the numbers closely. As soon as the number of new cases starts to level off, then starts to go down, we're going in the right direction.

**Q. What would happen to the hospitals if we don't blunt the curve?**

A. "We just don't have the beds." The intensive care units will be overwhelmed with people who need ventilators. People working in the hospitals need masks, gloves, gowns, and we don't have the capacity today to even provide hospitals with the amount of protective equipment that is necessary. It could lead to the collapse of the hospital system. Don't forget: Coronavirus cases would be on top of what's already going on during a normal day in a hospital.

**Q. Why is there such a huge test kit supply shortage compared with other countries like South Korea?**

A. "At the beginning of this thing, we opted to make a conscientious decision not to import World Health Organization-approved tests from Asia and Europe. We insisted on making our own tests." Those tests took weeks to make. Once they were sent out to the states, we realized they didn't work, so all those kits came back and we had to redo it. We wasted a whole month during a crucial time period as the number of people infected doubled in some places every three days and in others, every seven days. We haven't been able to catch up since. "It's a war without a general."

**Q. Are there any companies in Illinois making test kits?**

A. Abbott Labs could test the whole country, but they would have to put all their resources into creating testing kits and forgo everything else. They are making them, but there's just not enough.

**Q. Why is the U.S. so far behind other countries in blunting the curve?**

A. The United States is not set up with a strong public health organization. Most are relegated to the states. The Centers for Disease Control and Prevention gives guidance, and the states have the option of complying or not. The decision-makers are largely finance or business people. "They're ignoring our public health experts. If that continues, we're in big trouble."

**Q. What's happening on the state level?**

A. Governors don't have the ability to marshal the industrial forces the way the president would be able to. Essentially, their hands are tied, so they're competing with each other for resources.

**Q. What actions could the government be taking?**

A. Stricter border control, rapid testing and reenacting the Defense Production Act of 1950, which allows the government to take over industries during war or times of crises. We could direct companies to make more ventilators or personal protective equipment or reagents or test kits while requisitioning hotels and sports arenas. "It's not popular in certain groups and maybe it's an extreme measure, but with what's coming up, I don't see any way this could not be avoided."

**Q. Government leaders and Fox News seem to suggest that a lift on restrictions is coming soon. What do you think of this news?**

A. I watched last night to see where this idea was coming from, "I was

really horrified," Murphy said. "If we lift up our guard now, then the coronavirus will become the No. 1 cause of death and completely overwhelm the (hospital) system."

## **Q. So why stop at the national level? What is happening on the international level?**

A. Combined international efforts would be best, but what international authority do we have? WHO can make recommendations but they don't have any teeth. The United Nations can make recommendations but again, where is the teeth? "The teeth is going to be at the national level, and it's going to depend on the quality and determination of the national leader."

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