

Public health expert: U.S. hasn't 'found the edges of the outbreak yet'

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Despite the ongoing spread of COVID-19 in the United States, public health expert Caitlin Rivers is confident in one thing: social distancing is working.



Rivers, a senior scholar at the Johns Hopkins Center for Health Security, joined Kelly Henning from the Bloomberg Philanthropies Public Health Program for a virtual news conference Thursday to discuss the coronavirus pandemic and how the U.S. government and the international community have responded.

"We know that staying home is the right thing to do. It will work, it's just a matter of letting that intervention unfold," Rivers said. She pointed to New York, where falling rates of COVID-19-related hospitalizations and intensive care admissions led Gov. Andrew Cuomo to declare during a briefing Thursday that transmission may be decreasing for the state.

"Any intervention you take today will probably not be visible in the data for two to three weeks, maybe even four weeks," Rivers said.
"Washington, D.C., has been staying home for two weeks now, so we are hopeful that we will begin to see the impact of that timeline on our data soon."

During the news conference, Rivers discussed a recent American Enterprise Institute report she co-authored outlining the road to reopening the United States after enacting social distancing measures to slow the spread of disease. Currently, the United States is in Phase I—the "slow the spread" phase—and, the report contends, must ensure schools and businesses remain closed until health care systems can safely diagnose, treat, and isolate people with COVID-19. At that point, the nation can move to Phase II, in which schools and businesses can begin to reopen, and much of normal life can—gradually—begin to resume in a phased approach.

"We specifically took a capabilities-based approach in the report rather than a timeline-based approach," Rivers said. "How quickly we are able to move from Phase I to Phase II is going to depend on how robust and speedy our response is."



She recommended the United States work to scale up its health care systems—even in areas that haven't seen outbreaks of the disease yet.

"There's a lot of infrastructure to put in place. And we can't just do it in one place, we really have to do it in every community," Rivers said.

It's particularly important for rural areas to expand their health care systems and workforce, she said, because oftentimes those regions, while less densely populated, have fewer and smaller hospitals. The arrival of COVID-19 in rural towns could quickly overwhelm unprepared health care systems.

Additionally, Rivers said, testing capacity must increase. Although the U.S. currently runs more than a million tests for COVID-19 each week, state and local health department data suggests patients are testing positive as much as 40% of the time—and in some cases more often, Rivers said. By comparison, countries with more controlled outbreaks—and more per capita testing—are finding positive cases less than 10% of the time. As of a few weeks ago, Germany was averaging 7% positive tests, and in South Korea, that number has dropped as low as 2%.

These numbers indicate that a broad testing effort is in place that is able to identify more sick people—and therefore treat them and prevent them from transmitting the disease to others.

"When you're seeing 20%, 30%, 40% of tests coming back positive in the U.S., it tells me we need to keep expanding testing capacity and finding more cases," Rivers said. "We haven't found the edges of the outbreak yet."

Henning, who leads the Bloomberg Philanthropies Public Health Program, added that it is similarly critical to scale up testing capabilities



in parts of Africa where confirmed COVID-19 case numbers remain low. Rapidly rising rates of hospitalization due to pneumonia—an illness commonly associated with COVID-19—indicate that the virus is in fact affecting these regions, but inadequate testing capability means these cases go unrecorded.

Overall, Rivers said, countries must devise data-driven strategies for containing the <u>coronavirus</u> outbreak and begin to prepare for the next pandemic scenario—although that's a difficult task to undertake in the midst of a public health crisis.

"We've never seen a situation like this before," Rivers said. "We should also be thinking now about how we optimize our systems and what new capabilities and new expansions we need to put into place in order to optimize [future responses]."

All of which points back to the importance—and the proven successes—of social distancing measures. Rivers said she doesn't expect to see large gatherings permitted for some time, including in sports venues even after professional leagues eventually end their hiatus. But these efforts, as personally challenging as they can be, save lives, especially at this point in the pandemic timeline.

"We've seen [social distancing work] in Italy, we've seen it work in New York City, and we've seen it work in Washington state," Rivers said. "So I am confident that staying home will slow the spread."

More information: National coronavirus response: A road map to reopening: www.aei.org/research-products/... ad-map-to-reopening/

Provided by Johns Hopkins University



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