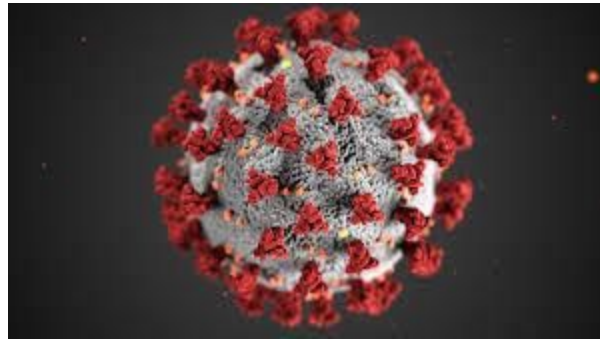


No news is good news for county health officer

April 16, 2020



I have no news to report — which is a good thing. We still have only two confirmed cases of COVID-19, and both are recovering well. Indeed, we consider them to be recovered at this point.

There are no confirmed patients in the hospital and no deaths in our county from this disease. There is ongoing testing and tomorrow, the news may change, but for today, things are much the same as last week. The huge spike in cases that we had expected a month ago has clearly been tamped down by all the measures that were put into place. So, instead of a huge spike, the state experienced a moderate spike, so far.

Health departments in the Bay Area started the shelter in place order and the rest of the state followed suit, but that order was only the last layer of all the other measures that were implemented last month. It is the only explanation. In California, we shut things down just in time, and the virus is crawling through communities, not racing through them.

The course has been rough in places like Los Angeles, but nowhere near as serious as New York. Back east, they have seen their projected cases level off quite a bit as well, but remember, they shut their city and state down only a day after California did. We are only a month or so away from that order from the Governor.

In Del Norte, we have seen this virus stall. We suspect that there are some cases going on, but that's OK. A trickle of cases is just what we want. So, now we know that social distancing, washing hands, staying home all helps, and not only helps, but stops this virus to almost nothing. We know how to make it shutdown. "Rollover and play dead" is what I said last week. We know we can do it. Now we need to figure out how to make it "sit up and beg." We need to figure out how to live with this virus moving through the community, but not overwhelming anything.

We need to figure out what to open up, what things can be relaxed, what measures can be taken away safely. We know that it took about a month for measures to calm down the hotspots-it will also take that long to see

if things start to heat up, and the virus gets active again. That is just the way it is with a virus like this one because of the way it incubates in people, it takes time for the trends to show up, in either direction.

What you are hearing in the news about “opening up” is a hopeful sign, but it absolutely needs to be done safely and with caution. There is no magical date when things go back to normal because this virus is only suppressed, not defeated. And it is definitely not over. At best, we are at the point of having 1-2% of the population infected, (which is an estimate, of course). This virus is not likely to slow down on its own until about 50% of the population has been infected and recovered or vaccinated-and since the 130 or so vaccines being developed around the world are only in the very first stages of testing, we have a long way to go.

The risk of “opening up” too soon is complicated by the lack of supplies in the medical community. If we relax too much, too fast and we create a surge of cases, we have to be completely prepared; the communication has been good, the planning has been good, the medical community is coping, especially the hospital, but the steady stream of supplies we need is not there yet.

For example, the state health department just released new guidance on preserving and reusing personal protective equipment. Some facilities have times where they have only a few days’ worth of equipment on hand, and some backup plans for substitute supplies have already been initiated several times. The supply chains for everything that we need are still swamped with orders and ramping up when you have most of the supply chain originating overseas takes time. I think everyone in the medical care community would be a lot happier about changes if they knew that they had enough supplies on hand to protect themselves and their staff. The main threat to caring for patients with COVID-19, outside of a huge surge, is not having enough healthy staff to continue needed operations. If we don’t plan with that in mind, we are potentially putting a lot of people at risk.

Just a word or two about testing, because we are hearing about a lot of inquiries. We would love to be able to test, including testing blood samples for antibodies, but the reality is that even though new tests have been announced almost daily this last week, the availability is still extremely limited. The entire nation is clamoring for these tests, and there simply is nowhere near enough to go around.

We are trying to find access to supplies, but for us, as a small county with almost no disease activity, there is little chance that we will get any of the new tests soon. Please believe me, as soon as we can involve new testing capacities, the hospital, the clinics and the entire community will be informed. And in truth, the medical community may learn of new testing available by commercial routes sooner than we do. But again, just because something exists, there is no guarantee it can be delivered.

And a final word; there are still a lot of questions out there about what is allowed and not allowed in the business environment during the time of the Governor’s executive order. We have tried to use some common-sense judgment, but a lot of the questions depend on what is defined as essential. We are coming up with a document with our county name on it to help people with this guidance. We have put a lot of thought into this, and we think it makes sense for our community, but we want to get it as right as possible.

