

Finding the best information to fight fear of COVID-19

Leslie Waters M.D.
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I would like to focus today on how we can best find accurate information about COVID-19, as it continues to rage through the world and through the United States. As of today, COVID-19 has infected almost 26 million people worldwide and taken the lives of nearly 860,000. In the USA alone, we have had 6.25 million cases and over 188,000 deaths (a 3% case fatality rate.) We still have about 24% of the cases worldwide, even though we only have 4.2% of the world's population. For comparison, the global death toll from COVID-19 so far is roughly equivalent to all of the lives lost in the 4 years of the American Civil War. The death toll in the United States is roughly equal to the entire population of Spokane.

We are not doing well as a nation, and we are not cooperating well as a globe. Thus schools by and large must begin the year online, many businesses remain closed or sharply constricted in their ability to do business, travel is severely restricted, and people remain isolated and confused about how best to protect themselves and others.

But now, more than 6 months into the Pandemic, we have learned a great deal about the virus that causes COVID-19, though the information is still coming in and there is much we still don't know.

Some of the unknowns are:

1. Why do some people who become infected have no symptoms, or very mild symptoms, while others have severe life-threatening disease, and others have symptoms that last for months?
2. Will having the disease provide some protection against repeat infections, and if so, for how long?
3. Will it be possible to invent a vaccine that is very effective AND long lasting AND without significant side effects?
4. In other countries, children under 10 have been shown to be less likely to spread COVID-19 than older children and adults. Will that be true in the United States, where the rate of viral spread is higher?

Fortunately, there are many things we now understand about the disease:

1. It is mainly spread through inhaling virus particles that are breathed out (or shouted, spoken or sung out) by an infected person. For this reason mask wearing has emerged as a vital strategy to prevent transmission.
2. The virus does live on surfaces and can be transferred to the nose, mouth and eyes, so hand washing and disinfection are helpful, though not enough by themselves.
3. A great deal of the spread of the virus, between 40 and 50%, is from people who do not have symptoms (either they have an asymptomatic infection, or they have not developed symptoms yet)
4. Certain populations are more vulnerable to severe infection and death – older people; people who have diabetes, heart disease, or obesity; people of color and ethnic minorities.
5. Certain circumstances increase vulnerability to infection, mainly crowded indoor living situations, including prisons, residential housing like nursing homes, and tight living quarters; and crowded work environments, such as food processing plants.
6. Overall, COVID-19 is much more deadly than the flu – at least 10 times the mortality, though that number is far higher in some populations. “Using the handful of studies that have calculated infection-fatality rates for seasonal flu, Meyerowitz-Katz determined that somewhere between 1 and 10 people die for every 100,000 that are infected. For COVID-19, that number ranges between 500 and 1,000 deaths per 100,000 infections. By his calculations, the coronavirus is likely to be 50 to 100 times more deadly than the seasonal flu, which supports the Columbia University findings.” From National Geographic, July 2, 2020
7. Even though younger people tend to have a better chance at having no symptoms or very mild symptoms, there are still young people who get very sick and some who die of the disease. There are also young people who continue to have symptoms for months and children who develop multi-system inflammatory syndrome. We do not yet understand who is most likely to get very sick, but genetics very likely play a role.

8. New data shows that using a face shield in addition to a mask reduces infection in people with high levels of exposure, including community health workers and hospital workers.

And there are things we now know about prevention:

1. The **safest** human-human interactions (other than within our “bubble”) occur outside with physical distancing.
2. The **most risky** interactions occur inside, where there is talking, singing or shouting and where masks are not worn. Variables that influence spread include ventilation, the amount of time spent in the space and the number and the proximity of other people. If 80% or more of the people in the space are wearing masks, the chance of infection decreases for everyone but does not completely go away.
3. Countries that have kept their infection and death rates down have:
 - a. Intervened early
 - b. Used a combination of measures, including closing schools, closing businesses, lockdowns when the virus was spreading fast
 - c. Delayed reopening of schools and businesses until virus transmission was under control
 - d. Required masks at least in public settings
 - e. Tested widely, located cases and traced the contacts so that infected people could be isolated, containing further spread of the virus

Finding accurate information about COVID-19 has been challenging. Although the WHO and CDC websites can be helpful in some ways, both have been slow to update their sites with current information and appropriate recommendations. And when politics gets combined with science in an era as polarized as the one we now live in, people get pushed apart, even to the extent of believing a completely different set of facts. As a consequence, we have all had to locate our own trusted sources of information, and the large amount of misinformation on the Internet makes ferreting out the facts much more difficult. Thus at a time when we really need to be on the same page as a society, working together to navigate this Pandemic with as little damage as possible, it is nearly impossible for us to do so.

As individuals, I believe that the best way to move forward with confidence and combat fear and anxiety is to have a plan based on good information. Our plans will all be a bit different since our life circumstances (Do we work or are we retired? Can we work remotely or must we show up in person? Do we have children? Do we have elders to care for or worry about?) are not the same. Our social needs (do we crave interaction, or are we comfortable home alone?) our risk category (are we older, do we have complicating conditions?) and our risk tolerance are all different as well. We must also consider the other people in our lives, and take into account their activities, behavior and risk tolerance as we decide whether or not we feel safe interacting with them, and if so, on what level.

The key to making a good plan is having information we can trust. Here are some guidelines for finding the best sources:

1. Read more than one reliable source of news. Try to read some of the science at whatever level you feel comfortable with. See the references below for some good sources of reliable information. MediaBiasFactCheck.com is a good site for evaluating media outlets.
2. Keep reading, since new information is coming out often, and recommendations are revised periodically. This is not because scientists are trying to mislead the public. It is because when new information is discovered about this new virus, sometimes we have to change our approach.
3. Do not EVER rely on social media, including Facebook, for accurate information. People can and do post whatever they want, and it is common for others to re-post inaccurate information. If you see something of interest on social media, ALWAYS check it in a reliable news source before acting on it and before passing it on to others!
4. Use fact-checking sites, such as Snopes.com, to check out the accuracy of a story that sounds fishy.
5. If what you are reading or listening to makes generalizations or accusations regarding political parties or political figures, beware! Science is not political. Science should be presented in neutral language that expresses the facts. If you see something like, “X political party is preventing you from getting this medication,” be sure to look elsewhere for confirmation.

6. Make a plan based upon the best information you can find now, which works for your personal and family situation. There are many helpful articles about forming a bubble, how to make and wear masks effectively, and activities that are safe vs. not so safe. Having a sensible plan, more than anything, works to increase enjoyment and safety and to reduce fear.
7. Be prepared to adjust your plan as more knowledge becomes available.

Humans have a preference for simpler explanations. We also have a tendency to look for data that supports what we already believe, or what we want to believe – that’s called “motivated reasoning.” On top of that, we don’t like change much, so when guidelines are revised based on new information we feel like we are being misled. And finally, we seem to be suffering from an epidemic of individualism, which keeps us from prioritizing the welfare of others.

It is helpful to recognize these tendencies and take them into account when we are doing the life or death work of educating ourselves about COVID-19 and making decisions based on that education.

Now is the time for a more scientific and analytical approach, as the physicist Marie Curie said: **"Nothing in life is to be feared, it is only to be understood. Now is the time to understand more, so that we may fear less."**

References:

Best reference for keeping track of COVID-19 treatments:

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Best references for unbiased scientific information:

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<https://www.statnews.com/tag/coronavirus/>

<https://covidtracking.com>

<https://www.covidexitstrategy.org>

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<https://libguides.stthomas.edu/covid-19>

<https://www.worldometers.info/coronavirus/>

<https://coronavirus.jhu.edu/news>

Health related news offering a global perspective:

<https://www.thinkglobalhealth.org>

Great explanations about all aspects of Coronavirus:

<https://www.vox.com/coronavirus-covid19>

Fact-Checking sites:

<https://www.snopes.com/?s=Covid-19>

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<https://www.newsguardtech.com/covid-19-resources/>

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List of official information sources:

<https://www.goodrx.com/blog/coronavirus-covid-19-reliable-information-resources-updates/>

Really good article on how to get the news you need about COVID-19:

https://ideas.ted.com/overwhelmed-by-covid-information-6-tips-to-help-you-know-what-and-who-to-trust/?utm_source=recommendation&utm_medium=email&utm_campaign=explore&utm_term=ideas-blog-3

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School Reopening and COVID-19:

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Help on facemasks:

<https://time.com/5880867/face-masks-coronavirus/>

New data on face shields:

<https://jamanetwork.com/journals/jama/fullarticle/2769693>

How deadly is COVID-19?

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<https://theconversation.com/how-deadly-is-covid-19-a-biostatistician-explores-the-question-142253>

<https://theconversation.com/fast-acting-countries-cut-their-coronavirus-death-rates-while-us-delays-cost-thousands-of-lives-139018>

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<https://www.nature.com/articles/d41586-020-01738-2>

<https://apnews.com/afs:Content:9243914747>

<https://www.nytimes.com/2020/07/04/health/coronavirus-death-rate.html>

<https://www.cgdev.org/blog/predicting-covid-19-infection-fatality-rates-around-world>

Variations in COVID-19:

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Non-partisan research study on Important Issues in the 2020 election:

<https://www.pewresearch.org/politics/2020/08/13/important-issues-in-the-2020-election/>

Zoom Meeting

Audio only

With video

