

Ontario at a critical point in fight against COVID-19, says medical officer of health



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By Nate Smelle

Last week The Bancroft Times spoke with Hastings Prince Edward Public Health Unit's medical officer of health, Dr. Piotr Oglaza about the local state of the COVID-19 pandemic. The following conversation between Oglaza and Times reporter Nate Smelle provides insight into how the virus is impacting people in the region, and what the public needs to do to slow its spread.

Smelle: I know you are very busy now, so thanks very much for taking the time to share with us what you are seeing locally on the front lines of the fight against COVID-19. Oglaza: You're welcome. Thank you for the opportunity.

Smelle: What can you tell me about the current state of the pandemic in the region? Oglaza: If you are following the numbers closely you might see that the number of probable cases is fluctuating. For instance, yesterday the number of probable cases was less than the day before. That's because of a few reasons. Some of the people who might have being classified as probable cases could have being tested and the results came back as negative. Or, some of the people from the probable cases would be considered resolved after 14 days in absence of their symptoms. Also, some of the probable cases might have come back with positive test results and that increases a number of lab-confirmed cases. That is why you can see the fluctuations in the numbers of probable cases, but with the number of lab-confirmed you see them fairly steady and going up. The increase doesn't seem to be that much because now we have 25 and before we had 24. But, the biggest concern here is that among those 25 cases, we are starting to see more and more cases that are considered to be acquired through community spread. That is really concerning, and that is something I really want to remind everyone in our communities that this is exactly the reason now is more important than ever to continue with these physical distancing practices that we have been doing diligently for the past few weeks.

Smelle: I have heard several health care professionals and experts describe the next few weeks as being 'critical' in Ontario's response to COVID-19. Can you explain for our readers why now is such a pivotal moment in our response? Oglaza: The most important message to convey is that once we start seeing some community spread, we know that it is critical for us to contain it. And we also know that depends on which actions we take. So, if we were to do nothing that small number that are attributed to community spread could potentially spread much more widely. We could see that in jurisdictions and areas where perhaps measures weren't put in place early enough. We have measures in place with the noted community spread and we know that we can contain it if we keep up these measures. We should continue with all of this physical distancing, and we should continue with self-isolation when sick. We should not ease these measures at this time because now we are at this critical juncture where that small number of cases attributed to community spread could either basically remain low and represent flattening the curve, or they could spike. If that were to happen it will happen in the next few weeks, so keeping up these measures within the next few weeks would certainly prevent that spike.

Smelle: With all the current measures in place, how does community spread still occur? Oglaza: Initially we were talking about people who were returning travellers. Returning travellers

were asked to self-isolate for 14 days and at first it was a recommendation and a request, then it became a federal order under the Quarantine Act. So let's say someone came back before all these orders were in place and that person was not self-isolating. That person could have had mild symptoms and maybe didn't think much of it, and somehow passed it to others. If that person came to our attention we would still investigate case contact and consider it to be linked to international travel. But, if that person didn't know about it, that one individual could then pass it to another individual in the community, and that person would literally have no connection with a returning traveller. How we look at the spread of this infection is by direct contact or by droplets. So, what that basically means is that with anyone who is within two-metres of another person there is a potential that they can come in contact with droplets, the small particles they are sending into the air within that two-metre radius. Because the larger particles drop on surfaces, if you are within that two-metre distance from one another, you could get direct contact from someone coughing, sneezing, or just being in that same space for some amount of time. If you are careful and you are not that close, you can still get it if you say touch a surface that is commonly touched and you touch your face. That is how you transfer the virus into your own organism. So you would look at that mode of transmission as being through inanimate objects. That is why it is so important to maintain good hand hygiene by washing hands thoroughly with soap and water or use alcohol-based hand sanitizer. It basically prevents that transfer of the virus from door knobs, counters, railings, or any surfaces that people generally touch, onto their face. Smelle: It appears that the majority of people are taking COVID-19 seriously, however speaking with some of the front line workers providing essential services in the community, there is still a significant number of people who don't seem to get it. What do these individuals need to know about their role in the public's response to the pandemic? Oglaza: The message of physical distancing does help, because if we are not within each others' breathing space ? within that two-metre radius ? if we are careful and diligent about hand washing, if we are isolating when sick, this reduces the opportunity for us to pass the virus to another person. We know from studies in other jurisdictions that on average one person infected with COVID-19 could infect anywhere from two or three other individuals. That's how this can spread in the community. But again, if we were to reduce that number from infecting two to three people, to infecting one or even less than one, we know that infection is not going to propagate. It's not going to spread as easily because we are basically stopping it right there. That is really the goal a physical distancing, and all of these other measures. Smelle: With allergy season just around the corner and the very likely potential of more people sneezing and projecting droplets, is it possible that this could increase the risk of transmission? Also, is there any evidence of people with allergies being more susceptible to COVID-19? Oglaza: I am not sure whether there is any particular susceptibility in those individuals. Certainly if someone has symptoms of seasonal allergies like a runny nose and things like that, it is really difficult to distinguish if it is from infection or it is from allergies. I think it is going to pose an additional challenge. When in doubt it is always important to self-isolate. But I understand if it's a known single symptom related to seasonal allergies that should be discussed with a health-care professional. Again, depending on the overall clinical scenario, you could have someone with COVID-19 that just has a runny nose and then other symptoms develop. This is not a message that is really appropriate for the general population as a reassurance, it is more of a case-by-case. If you have seasonal allergies and you start developing symptoms be very cautious whether you are attributing them to the allergies versus an infection. Smelle: So basically if you aren't sure and you think you might be exhibiting symptoms just stay home and contact your health-care provider. Oglaza: Absolutely, yes! Smelle: Recently, there has been some debate on the use of masks to help slow the spread of COVID-19? What are your thoughts on this? Oglaza: I think that debate is really about two issues. One, should a person wear a mask to protect themselves ? and the answer is still no, a homemade mask isn't really going to be that helpful to protect you from others that might be sick in the community. There are so many ways you can get it into your system. That homemade mask is not covering your eyes, so it is not really doing much to help you if others around you have the virus. What that mask is going to do, potentially on the population level, is if people are adding the mask to all the other measures they are potentially reducing the risk [of community spread], if they themselves are mildly sick because it could prevent them from projecting the virus two-metres away to other people. So it is not a measure to protect yourself, it is a measure to protect others? At this point it is not a universal measure that we broadly recommend to the public. It is something that in some certain circumstances could be beneficial. One thing to be clear about is that if someone is sick themselves they should maintain their self-isolation and physical distancing. The mask is not a substitute. If someone is sick and they think they cannot wear a mask and then go to the store and mix with the public. That would be very inappropriate because that's what leads to community spread. The mask adds some level of protection but it is not foolproof. The primary intervention is self-isolation and physical distancing. Smelle: Is there anything else the public needs to know regarding how they can protect themselves and others? Oglaza: Overall it is about being diligent about physical distancing, being diligent about avoiding gatherings. This is all now supported by orders under the emergency declaration in Ontario. But again these measures are in place for a reason and we need to take all these corrective action to prevent the spread. HPE Public Health recently issued an order which is under the Health Protection and Promotion Act. This is a class order which

requires anyone who has being identified as a positive or a presumptive case of COVID-19 to self-isolate and stay in their home and on their property. As with any order under legislation it does come with that nudge which is that that there is a fine resulting from non-compliance. Smelle: How much are the fines? Oglaza: It is fairly significant. It could be up to \$5,000 for any day, or part of the day in which they disregard the order. If someone is ordered to self-isolate it's a requirement, it's under a legal order which has penalties if someone chooses not to follow it. If we are asking someone to self-isolate, most of the time the vast majority of individuals understand the reason behind that and they do self-isolate. It is basically just to create that legal framework. We are protecting the public by putting these measures in place. Smelle: There has been a recent push to increase the amount of testing being done in Ontario, is there anything impeding an increase in the amount of testing that is currently being done? Oglaza: With the testing strategy by the provincial government, we have been taking steps to increase that capacity and make sure that testing is available. We are testing individuals, and we are working with partners in the health-care community to increase that capacity so the work is underway. We should expect seeing more of these tests being done fairly shortly. That's based on the work that has been happening to date to increase the capacity. I know that the province has done tremendous work to increase the lab-capacity, and provide swabs. Now we are developing the processes in which we will be testing people in the coming weeks. To keep up to date on the rapidly changing situation with COVID-19 in Hastings and Prince Edward counties, visit HPE Public Health's website at: www.hpepublichealth.ca; and tune into Dr. Piotr Oglaza's weekly live video updates on HPE public health's Facebook page.