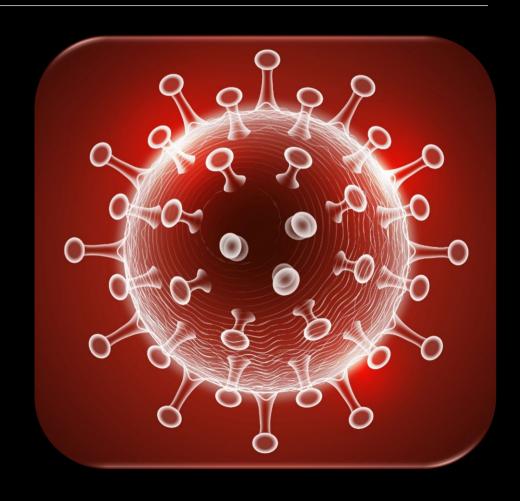
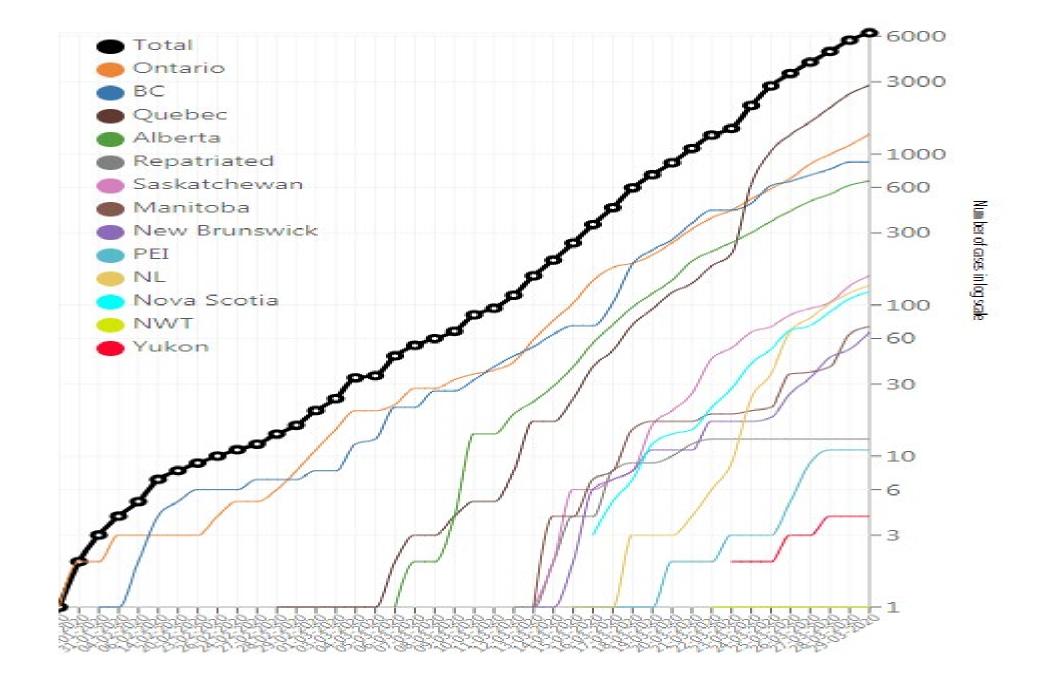




COVID-19 Public Health Update

Dr. Jia Hu March 30, 2020





Alberta overview

- Cases: 661 (~2/3 in Calgary Zone)
 - Hospitalized: 41
 - ICU: 14
 - Deaths: 3
- Major clusters:
 - Prayer Group
 - Medical Bonspiel
 - LTCs McKenzie Towne
- Tests: 45K+ tests done
- **Test rate:** ~3000+/day historically; recent decrease (~2000/day over the last couple days)

5 problems to solve

Public health measures

- 1. Increase lab testing
- 2. Do case & contact follow-up for all confirmed cases
- 3. Effective self-isolation / quarantine + social distancing

Health system measures

- 1. Have enough stuff (PPE, ventilators)
- 2. Increase hospital capacity

Our strategy

- Containment rests on 3 pillars (always done with mitigation)
 - 1. Lab capacity that allows for aggressive testing (ideally test all ILI)
 - 2. Accessible testing w/ low TAT (assessment centres, China's TAT was ~4 hrs)
 - 3. Case & Contact follow-up of every single case
- Easy to give up on this strategy as work will increase dramatically, but consequences of failure are dire
 - New York State: ~0.3% infected
 - Italy: ~0.2% infected
 - Imagine what even a 30% infection rate (100x New York) would look like
 - Economic consequences: WCS traded at <\$5/barrel; trillions lost from equity markets; Canada will 'definitely' see double digit unemployment

FAQs

- What happens if a staff member or patient gets COVID?
 - PH will do a risk assessment in general no concerns if person was never at work while asymptomatic
 - If symptomatic while at work, then PH will work w/clinic to do rapid risk assessment and tell all contacts to self-isolate
 - PH will almost never recommend practice closure

Who do we swab?

- Recent guidelines from Mar 23 recommended focus on high-risk populations (e.g., HCWs, LTC, etc.) but is vague and allows for leeway
- Shift due to a temporary decrease in lab capacity —> this is expected to change

FAQs

- Do we need N95s?
 - Only if AGMP COVID-19 not believed to be airborne spread
- What about asymptomatic transmission?
 - This is complex current evidence & recommendations from reputable public health agencies suggest this is a small part of transmission
 - Evidence on this is evolving

FAQs

Should we test in office?

- Ideally not goal is to have patients go to assessment centres
- However, if patient is already in office and PPE is available, testing is a good idea

How long will this COVID-19 last?

- Predictive modelling has evolved regarding peak & duration
- Ultimately, I believe this will end when we have immunity, whether through vaccine or infection

What impact will this have?

• This depends on how good our control measures are ©