



Victoria Community Health Co-operative, the VHC

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www.victoriahealthcooperative.ca Serving our Member-Owners and Community

COVID-19 Principles

Kindly provided by Garth McBride MD, MSc, FRCPC (rtd) Co-Chair, Health Advisory Committee 2020 05 02

COVID-19 transmission shares common features with the common cold, Influenza and other respiratory viruses. To cause infection these viruses must come in contact with mucous cells in the interior lining of the nose, mouth or eyelid.

Once landing on a mucous cell the COVID-19 virus attaches itself and inserts its RNA code taking over the cell's own systems to produce copies of itself. The copies are released in great numbers and spread to other cells forcing them to produce more viruses.

A few days before symptoms develop infected individuals can transmit the disease to others. Symptoms appear within 2 to 14 days of exposure commonly with cough, fever, muscle aches and shortness of breath. Loss of taste and smell have been reported as an early symptom and rarely nausea and diarrhea.

Urgent medical assessment is needed for severe shortness of breath, mental confusion or decreased alertness.

Managing the transmission of COVID-19 is especially complex as a percentage of infected individuals never develop symptoms but still may be able to spread the virus to others.

Some victims may continue to spread the virus even after their symptoms have subsided.

TRANSMISSION - AIRBORNE

Infected individuals, when talking, singing, sneezing or coughing, can release virus in tiny moist micro or larger droplets which, coming in direct contact with mucous surfaces of others can result in spread of the infection.

Our physical distance rule is based on experimental evidence the particles do not generally travel more than a 6-foot distance before falling onto surrounding surfaces. This is a key preventative step that resulted in flattening the curve.

In medical settings, due high risk of exposure, N95/surgical mask wearing, face guards and proper glove wearing techniques are essential. Due to supply issues we must leave this equipment for healthcare workers.

TRANSMISSION - HAND TO FACE

By far the most common route of spread of COVID-19 (also true for influenza and the common cold) is self-inoculation to eyes, nose and mouth from hands contaminated by touching virus laden surfaces.

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Virus deposited by droplets or from contaminated hands lives less than 24 hours on paper but on smooth surfaces (plastic or steel) may survive up to 3 days.

PROTECTION - HAND WASHING/SANITIZING

Hand to mouth, nose or eye self-transfer of viruses is the most common route of transmission.

Avoid handshaking and touching of potentially contaminated surfaces.

DO NOT touch your face with unwashed hands EVER!

Proper soap and water hand washing using World Health Organization hand technique is the most effective protection.

WHO Hand washing Technique <https://www.youtube.com/watch?v=lisgnbMfKvI&feature=youtu.be>

Hand sanitizers, containing at least 60% alcohol, generously and thoroughly applied are a second choice to use only when soap and water washing is not available.

PROTECTION - FACE MASKS

Surgical mask wearing by infected or potentially infected individuals makes the significant contribution to decreasing the risk of airborne spread.

Mask wearing by non-infected general public (especially home-made versions) has only a small theoretical preventive effect and perhaps a negative effect if it causes relaxation of physical distancing. Despite the lack of evidence such mask wearing is becoming a common behaviour or even a mandatory requirement.

THE FUTURE

COVID-19 has caused the first major global pandemic since the 1918 influenza pandemic. All the measures taken to date have been directed at “flattening the curve” to avoid completely overwhelming our healthcare workers and entire health care system. It seems likely we have accomplished that to date but the battle is far from over. How we lived our business and social lives before COVID-19 appeared cannot be resumed fully until the world population has a high level of immunity to this specific virus. This can only be achieved when we have immunized a majority of the world population with an effective vaccine or when the majority of the world population has had COVID-19. Until then we will continue to have cases and deaths. We must have the patience, discipline and cooperative spirit to keep COVIDS-19 cases at controlled numbers allowing the healthcare system to continue to understand and deal with the disease without being overwhelmed.

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