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INDEPENDENT LIVING | ASSISTED LIVING | MEMORY CARE

COVID-19 SPECIAL EDITION

VOLUME 7 | MAY 2020

New COVID-19 Test Could Give Results in Under 1 Hour

By Robert Preidt

Researchers say they've developed a low-cost swab test that can diagnose COVID-19 infections in about 45 minutes.

The CRISPR-based test -- which uses gene-targeting technology and requires no specialized equipment -- could help relieve testing backlogs in the United States as COVID-19 continues to spread, the scientists said.

The U.S. Food and Drug Administration has not approved the test, but clinical assessments are being conducted in an effort to fast-track approval. The test is described in a paper published April 16 in the journal Nature Biotechnology.

"The introduction and availability of CRISPR technology will accelerate deployment of the next generation of tests to diagnose COVID-19 infection," co-lead developer Dr. Charles Chiu said in a University of California, San Francisco news release. He is a professor of laboratory medicine at the university.

The new test -- dubbed SARS-CoV-2 DETEC-TR -- is among the first to use CRISPR gene-targeting technology to test for the presence of the novel coronavirus.

CRISPR can be modified to target any genetic sequence, so test developers "programmed" it to zero in on two sequences in the genome of SARS-CoV-2, which causes COVID-19.

One sequence is common to all SARS-like coronaviruses, while the other is unique to SARS-CoV-2. Checking for both sequences ensures that the new test can distinguish between SARS-CoV-2 and closely related viruses, Chiu and his team explained.



Like other tests, this one can detect coronavirus in samples from respiratory swabs from patients. It provides results in about 45 minutes, compared with roughly four hours for widely used tests based on polymerase chain reaction (PCR) techniques.

The researchers said that another advantage of the new test is that it can be performed in virtually any lab, using off-the-shelf chemical agents and common equipment. PCR-based tests require specialized equipment, limiting them to well-equipped diagnostic labs.

The new test is also easy to interpret. Much like a store-bought pregnancy test, dark lines appear on test strips to indicate the presence of coronavirus genes.

While the new test is slightly less sensitive than PCR-based tests, researchers said that's unlikely to have much impact in diagnosis because infected patients typically have high viral loads.

As they work to validate the new test for FDA approval, researchers are making tweaks so that it can be used in field testing at locations such as airports, schools and small clinics.



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PANDEMICS IN HISTORY



1916

American Polio Epidemic The epidemic that started in New York City caused 27,000 cases and 6,000 deaths across the US



1918

Spanish Flu Pandemic

The Spanish Flu infected approximately 1/3 of the world's population and caused at least 50 million deaths



2009

Swine Flu Pandemic

The Swine Flu, a new strain of the H1N1 virus infected 1.4 billion people around the world and caused over 151,700 deaths

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Another Study Finds Loss of Smell Is Early Sign of COVID-19

By Robert Preidt

A new study adds to a growing pile of evidence that suggests losing your sense of smell and taste is an early sign of COVID-19.

While there has been anecdotal information about this link, these are the first empirical findings that make a strong connection, according to the researchers at the University of California, San Diego.

Other known symptoms of coronavirus infection include fever, fatigue, cough and difficulty breathing.

"Based on our study, if you have smell and taste loss, you are more than 10 times more likely to have COVID-19 infection than other causes of infection. The most common first sign of a COVID-19 infection remains fever, but fatigue and loss of smell and taste follow as other very common initial symptoms," said study author Dr. Carol Yan, an otolaryngologist and head and neck surgeon at UC San Diego Health.

"We know COVID-19 is an extremely contagious virus. This study supports the need to be aware of smell and taste loss as early signs of COVID-19," Yan said in a university news release.

The study was published April 12 in the journal International Forum of Allergy & Rhinology.

The findings came from a survey of 262 patients with flu-like symptoms who underwent testing at UC San Diego Health from March 3 through March 29. Of those patients, 59 tested positive for COVID-19 and 203 tested negative.

Of the COVID-19 patients who reported loss of smell and taste, the loss was typically significant. However, the rate of recovery of smell and taste was high and usually occurred within two to four weeks of infection.

"Our study not only showed that the high incidence of smell and taste is specific to COVID-19 infection, but we fortunately also



found that, for the majority of people, sensory recovery was generally rapid," Yan said.

"Among the COVID-19 patients with smell loss, more than 70% had reported improvement of smell at the time of survey and of those who hadn't reported improvement, many had only been diagnosed recently," she said.

The return of smell and taste often matched the timing of recovery from COVID-19.

The researchers also found that people with a sore throat more often tested negative for COVID-19.

Most of the patients in the study had milder forms of COVID-19 and did not require hospitalization or intubation.

The findings highlight the importance of identifying early or subtle symptoms of COVID-19 infection in people who may be at risk of transmitting the disease as they recover at home, Yan noted.

"It is our hope that with these findings other institutions will follow suit and not only list smell and taste loss as a symptom of COVID-19, but use it as a screening measure for the virus across the world," she said.

UC San Diego Health now includes loss of smell and taste as a COVID-19 screening requirement for visitors and staff, as well as a marker for testing patients who may be positive for the coronavirus.

By Serena Gordon

Can zinc help shorten a COVID-19 infection? Will vitamin C or other supplements prevent it?

These claims and plenty more can be found on social media and internet sites, but be advised: There is no pill or treatment that can prevent or cure COVID right now.

"We want to think that there is a quick way to get rid of this. But there is not a product out there that will keep you from getting the coronavirus," said Rebecca Dutch, a virologist with the University of Kentucky in Lexington.

The pandemic has spawned a wave of products claiming to protect you by boosting your immune system -- a simple claim people think they understand, said retired psychiatrist Dr. Stephen Barrett, who runs Quackwatch, a website that debunks pseudoscientific claims.

"They think, 'If I can boost my immune system, I'll be more resistant to the virus," but it's just not that simple, he said.

"The immune system is quite complex," Barrett explained. "There's not even a scientific process called strengthening or boosting the immune system."

He agreed with Dutch: "There is no product you can take that will prevent or cure COVID," he said.

Even a group representing supplement makers agreed. Two major industry groups --the Council for Responsible Nutrition and the American Herbal Products Association -- recently asked stores selling dietary supplements to refuse to stock or sell any products that claim to treat, cure or prevent COVID-19.

"We are not aware of any clinical research studies that demonstrate the efficacy of using a dietary supplement specifically to prevent or to treat COVID-19," the trade groups said in a statement.

They said consumers should report such products to the U.S. Food and Drug Administration.

The FDA has already sent warning letters to a number of companies selling fraudulent COVID-19 products. The agency also cautions that there are no approved preventatives or treatments for COVID-19.

Believing in magic?

Given the expert consensus, why are people still buying and trying these products?

Barrett said people "believe what they hear the most" and there's no organized effort to set the record straight.

"There's no economic incentive to say, 'This doesn't work," he said. "There's no money to be made rebutting false claims." But there's a lot of money to be made promoting those false claims, so that's what people tend to hear over and over, Barrett added.

People also tend to believe something works once they try it, he said. Say, for example, that you've recently had colds that lasted about a week. You try a supplement that says it will shorten a cold. If your next cold lasts four days, you'll think the supplement worked. But most illnesses are self-limiting, Barrett said. It might just be that you caught a virus that tends to last only a few days this time.

Dr. Philip Muskin, a professor of psychiatry at Columbia University Medical Center in New York City, also points to the fear factor.

"People are scared and when you're scared, your judgment may be impaired," he said. "You just want a solution, and up comes a photo of a beautiful woman or man in a beautiful setting telling you that a certain herbal or vitamin supplement can help you."

Even though you know it can't be real, everyone wants to believe in magic, Muskin said.

Older adults are more vulnerable

"Older adults are more often socially isolated and maybe a little lonelier, which opens them up to people who want to take advantage," said Dr. William Dale, director of the Center for Cancer and Aging at City of Hope in Los Angeles.

Older people also tend to be more trusting and use their phones more often than most, leaving them vulnerable to phone solicitations, he added. If you suspect someone has tried to scam an older friend or relative, Dale recommends you ask them what they've been told, hear their concerns and then correct misinformation.

"Take them seriously. Don't be dismissive. Take a kind approach. Remind people that right now, there are no cures for COVID. Try to reset the conversation," he said.

One way to do this is by mentioning their medications. Ask if they have a good supply on hand or if they need to contact their doctor for refills. "Sometimes the easiest way is to have the conversation about medicines and then say, 'Oh, this might interfere with your medication. You should ask your doctor if this is safe," Dale suggested.

What does help?

It also helps to remind older loved ones that people who don't have COVID-19 symptoms can still transmit the disease and that social distancing is important, Dale said.

All of the experts recommend washing your hands often -- especially whenever you have been outdoors.

"Regular soap disrupts this virus," Dutch said. "Any soap is OK, even if it's not antibacterial. If you have access to a sink and soap, use that. Save your hand sanitizer to use when you're out."

Muskin and Dutch both emphasized the importance of staying healthy overall. Exercise, eat a balanced diet, get stress relief from things like meditation and do your best to get enough sleep.

Experts agree that it's important to consider the source of any health information.

"We're in an unprecedented time of 'information' coming in. Trying to decipher who is the best to listen to and sorting out what makes sense and what doesn't is harder than ever," Dale said.

Barrett recommends checking sources you know are reputable, such as the FDA, the U.S. Centers for Disease Control and Prevention, and major universities' websites.

By Alan Mozes

In the brave new world of COVID-19, home is your sanctuary, the one place you want to be sure is virus-free.

But if you have to head outdoors, what are the best practices for decontaminating your things when you return home? Does everything -- smartphones, wallets, money and keys -need to be washed down with hot water and soap?

"We are all swimming through an invisible swamp of bacteria, viruses, fungi and parasites," noted Dr. Stephen Berger, co-founder of the Global Infectious Diseases and Epidemiology Network in Tel Aviv, Israel. "Those bookshelves and those pictures on the wall are teeming with ugly microbes. Not to mention your cellular phone, wristwatch, eyeglasses and everything else in your world."

In fact, "the list of objects which could potentially be contaminated is endless," he cautioned.

But that does not mean that everything you take outdoors needs a biohazard scrub-down upon return, Berger added.

"The good news is that you are in no danger from most of this," said Berger. "And you have no reason to compulsively avoid, or even clean, every object in your personal world. With one exception: your own hands!"

Why? Because when it comes to COVID-19 infection risk, "the true culprit here is your own hands," he said.

Which is not to say that inanimate objects don't pose any risk. They do, said Berger. And guidelines from the U.S. Centers for Disease Control and Prevention recommend that people do clean their phones and electronics,



either following the manufacturers' guidelines or by using wipes or sprays containing at least 70% alcohol.

"The current COVID-19 pandemic is caused by a virus. That virus will infect you through your nose or mouth, in most cases because somebody coughed -- or perhaps only breathed -- within a few feet of you," Berger said.

"But perhaps that same somebody coughed into his hand, or toward a nearby object, or simply opened a door. Later that day, you shake that hand in greeting, touch that table or grasp that doorknob. And then, you use your own contaminated hand to eat a snack," he explained.

The potential risk: that you then get infected, and "for the next week or two, this virus is multiplying in your system," he added.

Money is a good example of the problem, Berger noted. "Few people realize that money is -- as our mother told us many times -- 'dirty.' Several researchers have demonstrated an amazing variety of bacteria, parasites and other living things on paper bills."

New research scheduled for presentation this month at the European Congress of Clinical Microbiology and Infectious Diseases speaks to that concern.

Though the investigation, led by Johannes

Knobloch of the University Medical Center Hamburg-Eppendorf in Hamburg, Germany, didn't focus specifically on COVID-19, it did find evidence that European paper money ---made of cotton fiber -- is vulnerable to microbial contamination. (Coins, which are 75% copper in Europe, are less so.)

Still, "the solution here is not to throw your money away, or wash it in detergent," Berger said. Nor does it mean spraying your keys down with Lysol. Instead, he suggested, the solution is "caution and hygiene."

"In terms of the COVID pandemic, 'caution' involves strict attention to avoiding potential sources of disease," said Berger, meaning wearing face masks and practicing social distancing. "While 'hygiene' must include careful and repeated hand-washing, antiseptics and chemical wipes are fine. But simple soap and water also does the job."

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PUBLISHED BY: REGENCY PARK SENIOR LIVING, INC.

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