






UPCOMING WEBINARS

Register on our website at allergyasthmanetwork.org – scroll to the bottom of our home page and click on the webinar you want to join us for. Webinar recordings are also found here.

- 
Back to School with Asthma
 August 11 - 3:00 PM ET
 Regan Lloyd & Sally Schoessler
- 
Biologic Basics: The Type 2 Connection
 August 25 – 4:00 PM ET
 Dr. James Tracy
- 
Care & Future Treatments for Food Allergy
 September 27 – 4:00 PM ET
 Dr. Aikaterini Anagnostou

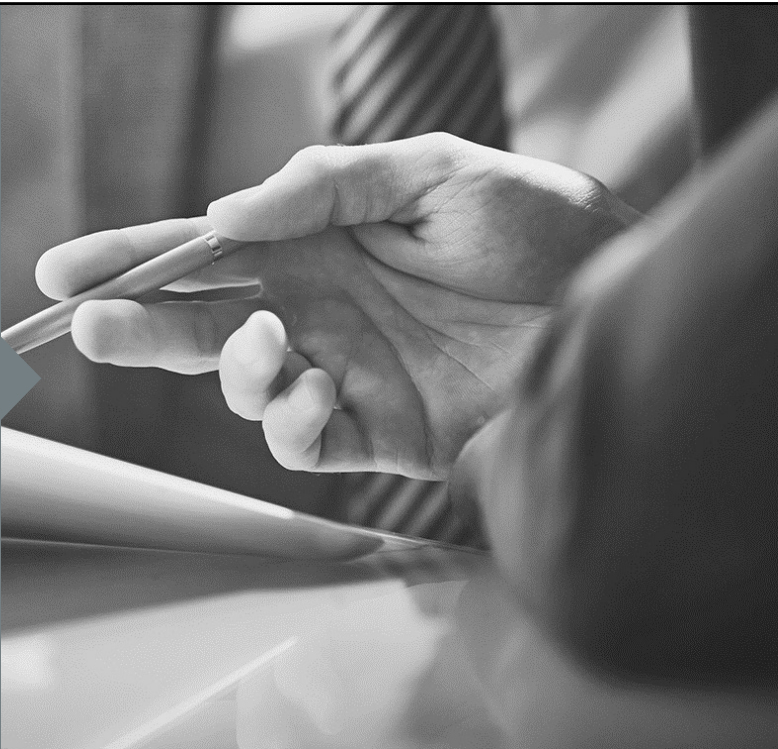
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COVID-19 Key Strategies:
 Medications,
 Treatments and
 Pediatric Vaccines



COVID-19 Webinar Series

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The mission of
**ALLERGY & ASTHMA
NETWORK**

Is to end the needless
death and suffering due to
asthma, allergies and
related conditions through
outreach, education,
advocacy and research.



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Today's Program

- 01** | CURRENT STATE OF COVID-19
- 02** | 5 THINGS TO KNOW ABOUT COVID-19
- 03** | VACCINES & MEDICAL MANAGEMENT OF COVID-19



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**POLL
QUESTION**


We'd like to know who is with us today!

What category best describes you? (we have a limited number of answers or would offer more!)

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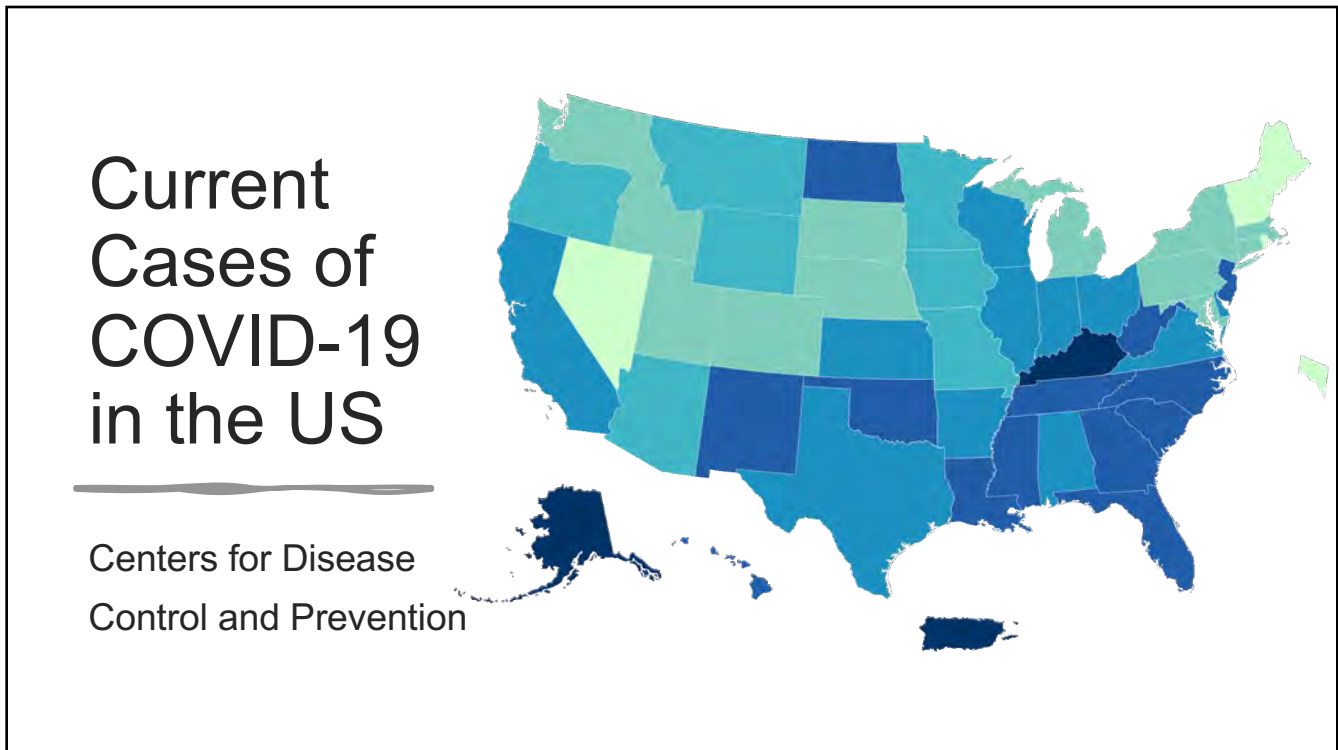
**CURRENT
STATE OF
COVID-19**



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COVID-19 Update

BA.5 Variant

COVID infections are rising due to the Omicron BA.5 variant, which is currently the dominant strain in the U.S. – BA.5 now causes about 2/3 of COVID cases.

Hospitalization Rates




Hospitalization rates are up, although not at the levels they were in early 2022. The virus does not appear to cause more serious illness.

Prior Infection / Booster Vaccine

Prior infections and booster vaccines offer some protection and treatments with antivirals can help keep hospitalizations down.

Boosters – 50 and Older

U.S. government officials urge anyone age 50 or older who has not gotten a shot in 2022 to get a booster.

 <p>BA.5 Variant</p>	 <p>Hospitalization Rates</p>
 <p>Infection/Booster</p>	 <p>Boosters</p>

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IN THE NEWS

Dr. Fauci:

“One of the things that's clear from the data [is] that even though vaccines - because of the high degree of transmissibility of this virus - don't protect overly well, as it were, against infection, they protect quite well against severe disease leading to hospitalization and death.”

Health and Human Services extends the COVID-19 Public Health Emergency

HHS has extended the public health emergency (PHE) for 90 days in response to the COVID-19 pandemic and has pledged to provide 60 days notice when it decides to terminate the PHE.



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IN THE NEWS

CDC:

“The rate of new infections appears to be dropping, with the U.S. now reporting 107,000 new cases each day – an average that has fallen by 12% in the last week.” But, “coronavirus-related deaths remain at a persistently high level.”

CNN:

The US “seems to have hit a COVID-19 plateau, with more than 40,000 people hospitalized and more than 400 deaths a day consistently over the past month or so.”

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IN THE NEWS

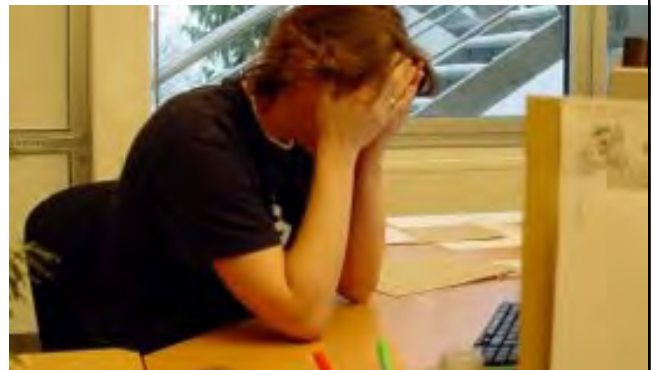
Antibodies responding to COVID may damage brain

NIH Study found evidence that the immune response triggered by COVID-19 may lead to short-term & long-term neurological symptoms. The antibodies are believed to attach the cells lining the brain’s blood vessels.


President Biden tested positive for COVID – then had rebound case
Was given Paxlovid, self-isolated – tested negative for 2 days on Monday – returned to full activity

UK Study

Sore throat and cough top the list of COVID symptoms.



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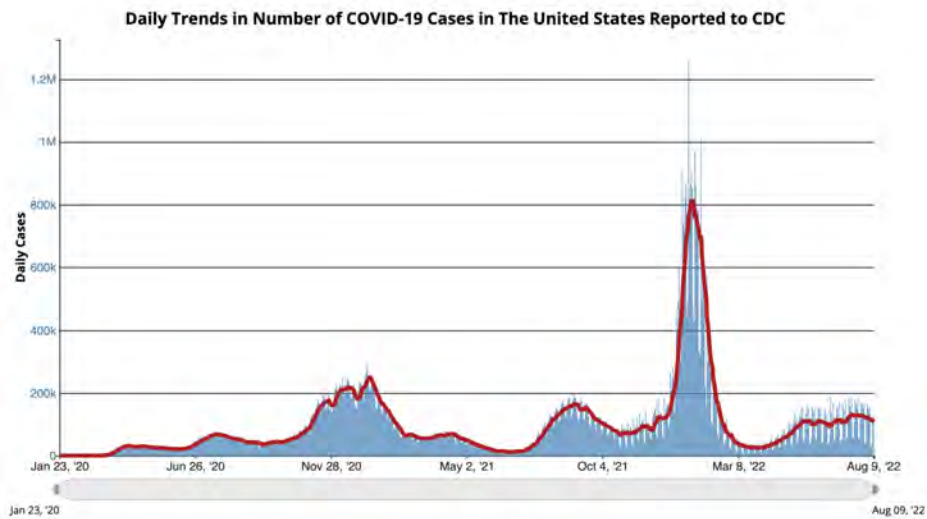
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POLL QUESTION

What source(s) do you go to for information on COVID-19?

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COVID-19 Cases by Date Reported CDC Data



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COVID-19 has been with us since late 2019

We've seen multiple surges and variants

3 major vaccines available in the US – CDC endorses a clinical preference for Pfizer & Moderna

Case rates have gone up & down – currently around the same level as Fall of 2021

Our knowledge base about COVID-19 is increasing all of the time

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5 Things to Know About the COVID-19 Outbreak

From Yale Medicine - <https://www.yalemedicine.org/news/2019-novel-coronavirus>

1. What we know about COVID-19 has changed rapidly

- Number of people infected changes daily – impact of disease varies by location
- Illness ranges from mild or asymptomatic to severe – requiring intensive care, risk for complications
 - Some experience "Long COVID-19", autoimmune diseases and/or multisystem inflammatory syndrome
- Viruses are known to change constantly – medical experts are studying variants and vaccines – new information is available all of the time

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5 Things to Know About the COVID-19 Outbreak

From Yale Medicine - <https://www.yalemedicine.org/news/2019-novel-coronavirus>

2. Strict measures are critical for slowing the spread of disease

- Public health has worked to "flatten the curve"
 - Fewer patients – hospitals better equipped to handle the number of people who are sick
- We've seen shutdowns, curfews, limiting numbers that can gather indoors and mask mandates
- The timeline for "herd immunity" is still uncertain
 - Variants make this difficult as we see surges – affects overall progress

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5 Things to Know About the COVID-19 Outbreak

From Yale Medicine - <https://www.yalemedicine.org/news/2019-novel-coronavirus>

3. Infection prevention is key

- Vaccination is still the main strategy for avoiding infection
- Especially effective in preventing severe disease, hospitalization and death
- If fully vaccinated – you should wear a mask if you have a weakened immune system, underlying medical condition
- CDC urges people who are pregnant to get vaccinated

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CDC – Preventative Actions



Wash hands with soap & water

Wash for at least 20 seconds – no soap? Use hand sanitizer with at least 60% alcohol

Stay home if you're sick



Avoid touching nose, eyes & mouth

Use a tissue to cover a cough or sneeze

Wear a mask that fits snugly over your nose, mouth and chin

Disposable surgical masks and KN95 masks offer protection.

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CDC – Preventative Actions

Keep about 6 feet between yourself & others

A mask is not a substitute for social distancing

Use household wipe or spray to disinfect

Doorknobs, light switches, keyboards, sinks, cell phones

Create a household plan

If someone gets sick plan how to isolate yet provide care – keep the rest of the family healthy

Plan visits with friends & family outdoors

Think about well-ventilated spaces – avoid travel



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5 Things to Know About the COVID-19 Outbreak

From Yale Medicine - <https://www.yalemedicine.org/news/2019-novel-coronavirus>

4. Experts are working rapidly to find solutions

- Testing has been evolving – two kinds of tests
 - Viral tests to help diagnose a current infection
 - Antibody tests to determine if you've had a previous one
- Scientists are studying the virus closely
- Multiple vaccines are being studied
- Doctors are refining their approaches to treating COVID-19
 - Antiviral drugs

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5 Things to Know About the COVID-19 Outbreak

From Yale Medicine - <https://www.yalemedicine.org/news/2019-novel-coronavirus>

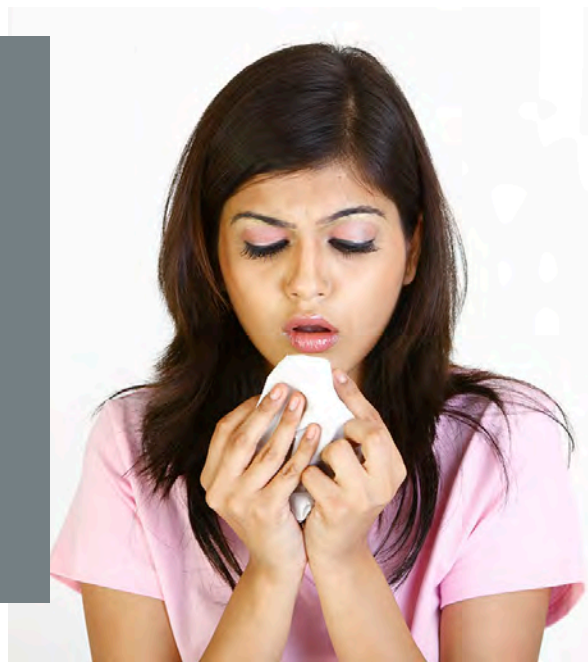
5. If you feel ill, here's what you should do:

- Watch for symptoms of COVID-19
- Anyone who thinks they've been exposed should get tested
 - Stay home and away from others
- Symptoms appear between 2 and 14 days after exposure
- Call your medical provider if you experience COVID symptoms
- Most people have mild illness and can recover at home
- Know emergency signs & when to get emergency care

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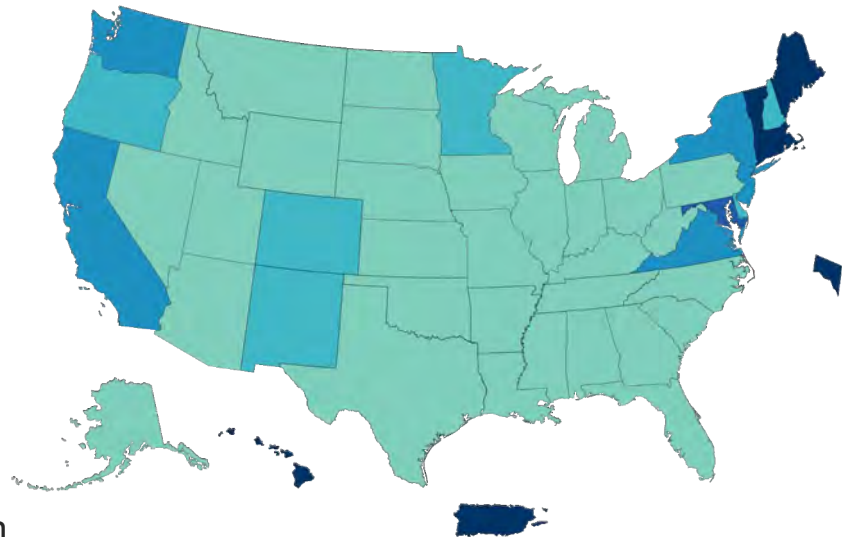
VACCINES & MEDICAL MANAGEMENT OF COVID-19



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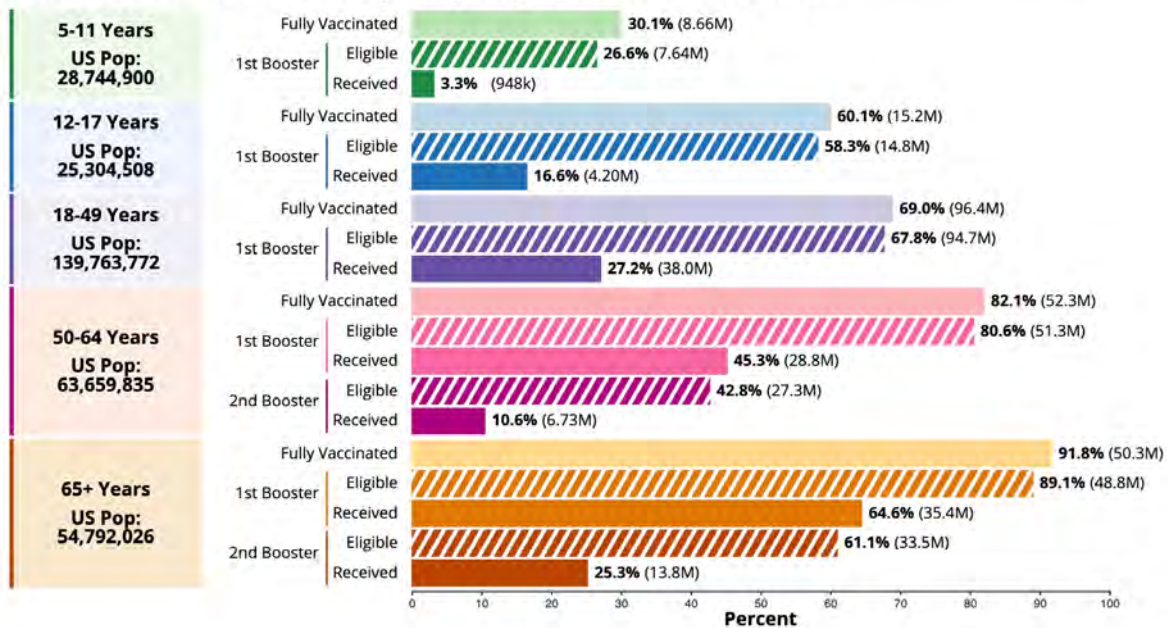
Vaccine Coverage in the US

Center for Disease Control and Prevention



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Primary Series Completion, Booster Dose Eligibility, and Booster Dose Receipt by Age, United States



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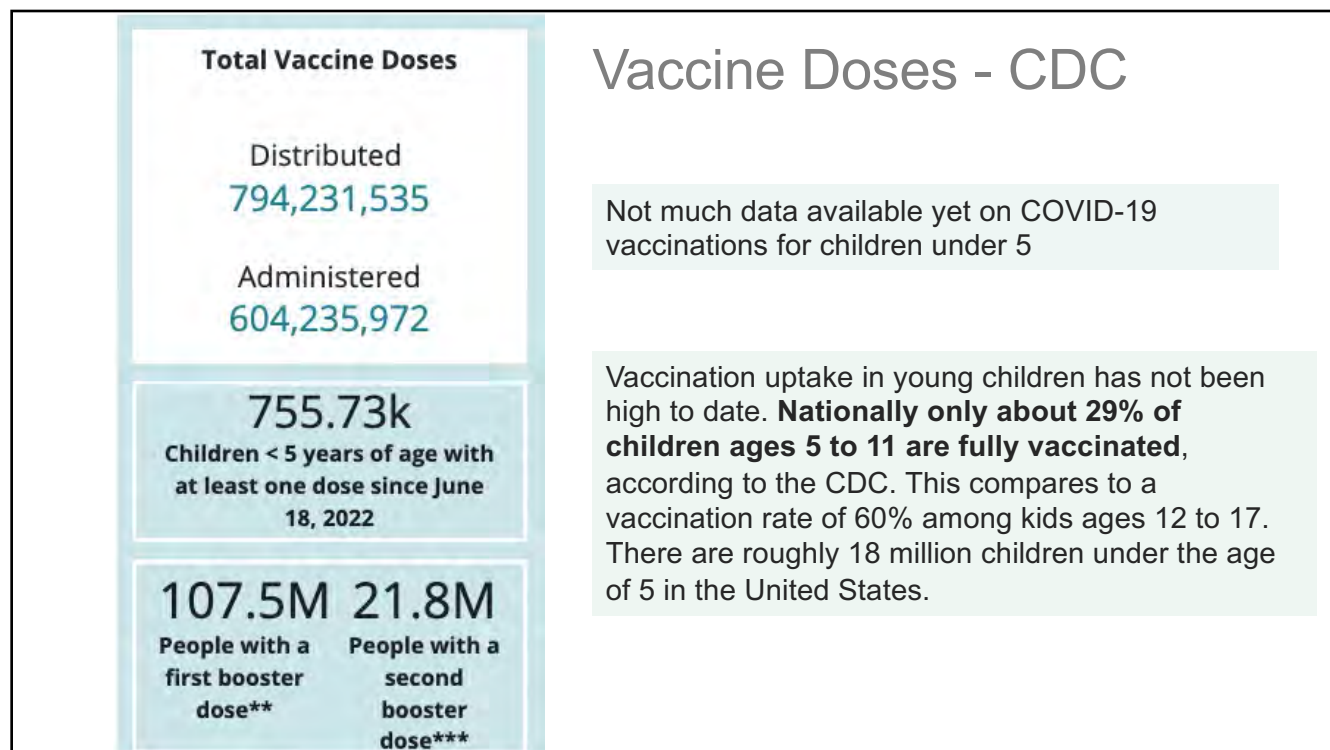
COVID-19 Vaccine Recommendations for Children and Teens

Updated June 24, 2022 Languages ▼ Print

What You Need to Know

- CDC recommends **everyone ages 6 months and older** get vaccinated against COVID-19.
- Everyone 5 years and older should also get a COVID-19 booster, if eligible.
- Use [CDC's COVID-19 booster tool](#) to learn if and when your child or teen can get boosters to stay up to date with their COVID-19 vaccines.

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COVID-19 vaccine dosage is based on age on the day of vaccination, not on size or weight

COVID-19 primary series vaccination for children and teens

Child's Age	Pfizer-BioNTech	Moderna	J&J/Janssen
6 months – 4 years old	3-dose primary series	2-dose primary series	Not authorized
5 – 17 years old	2-dose primary series	2-dose primary series	Not authorized

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COVID-19 Vaccine Safety in Children and Teens

Updated June 19, 2022 Languages ▼ Print

What You Need to Know

- [Millions of children and teens](#) ages 5 through 17 years have received at least one dose of a COVID-19 vaccine.
- Through continued safety monitoring, COVID-19 vaccination has been found to be safe for children and teens.
- The known risks and possible severe complications of COVID-19 outweigh the potential risks of having a rare, adverse reaction to vaccination.
- Everyone ages 6 months and older should [stay up to date](#) with their COVID-19 vaccines, which includes getting boosters for everyone 5 years and older if eligible.
- Use [CDC's COVID-19 booster tool](#) to learn if and when your child or teen can get boosters to [stay up to date](#) with their COVID-19 vaccines.

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Pediatric Vaccine Notes - CDC



If a child or teen has had COVID-19, should they still get vaccinated?

Even if a child has had COVID-19, they should still get vaccinated.
For children who have been infected with COVID-19, their next dose can be delayed 3 months from when symptoms started or, if they did not have symptoms, when they received a positive test.



Can COVID-19 vaccines and other vaccines be given at the same visit?

Children and teens may get a COVID-19 vaccine and other vaccines, including a flu vaccine, at the same time.

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Pediatric Vaccine Notes - CDC



Is the COVID-19 vaccine safe for children and teens?

Before authorizing or approving COVID-19 vaccines, scientists conducted clinical trials with thousands of children and teens to establish their safety and effectiveness. COVID-19 vaccines are being monitored under the most comprehensive and intense vaccine safety monitoring program in U.S. history.



Have there been serious health events after COVID-19 vaccination?

Serious reactions after COVID-19 vaccination in children and teens are rare. When they are reported, serious reactions most frequently occur within a few days after vaccination.

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What to do if you or someone you know has been exposed to COVID-19 or becomes symptomatic



You were exposed to COVID

You have COVID Symptoms

Get a COVID test or do a home COVID test

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COVID Test Results

If your test is negative

You should consider testing again one to two days after your negative test.

If you get multiple negative test results, it is more likely that you are not infected with COVID. If you are feeling sick, even if it is not COVID, it's still a good idea to stay home and not infect others.

If your test is positive

As much as possible, **stay in a specific room and away from other people and pets in your home.** If possible, you should use a separate bathroom. If you need to be around other people or animals in or outside of the home, wear a well-fitting mask. Tell your close contacts that they may have been exposed to COVID-19.

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Medications used to treat COVID-19

Pain reliever & OTC drugs may be enough – but check with your healthcare team to see if other medications might be needed.

COVID-19 MEDICATIONS

01

ANTIVIRAL DRUGS

Researchers are testing the antiviral drugs favipiravir and merimepodib. Studies have found that the combination of lopinavir and ritonavir isn't effective.

02

ANTI-INFLAMMATORY THERAPY

Used to treat or prevent dysfunction of several organs & lung injury from infection-associated inflammation

03

DEXAMETHASONE

One type of anti-inflammatory drug that researchers are studying to treat or prevent organ dysfunction and lung injury – Reduces risk of death by 30% for people on ventilators & 20% for people who need supplemental oxygen

04

IMMUNE-BASED THERAPY

Monoclonal antibodies are proteins created in a lab that can help the immune system fight off viruses. Look at these in detail in just a minute

05

SOME UNAPPROVED DRUGS HAVE BEEN OR ARE BEING USED

Ivermectin, hydroxychloroquine, chloroquine and more

<https://www.mayoclinic.org/diseases-conditions/coronavirus/expert-answers/coronavirus-drugs/faq-20485627>

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More Information on Monoclonal Antibodies

What are monoclonal antibodies?

Antibodies are naturally produced by your body to fight off infections. When your body is introduced to a new virus such as COVID-19, it does not have the antibodies to fight it off. That is where monoclonal antibodies come in. Monoclonal antibodies are created in a laboratory. They can target a particular virus or infection such as COVID-19.

How does monoclonal antibody therapy work?

Monoclonal antibodies are given by IV or a single-dose injection to people diagnosed with COVID-19. This therapy uses COVID-19 antibodies to help a person's body fight off the infection. The injection is a lower dosage than the infusion therapy.

Research suggests these antibodies lower the amount of virus — the “viral load” — in a person's body. People with lower viral loads have more mild symptoms. Reducing the viral load may help prevent hospitalization and death.

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What monoclonal antibody therapies for COVID-19 are available?

The Food and Drug Administration (FDA) has approved emergency use authorization for four antibody infusion therapies:

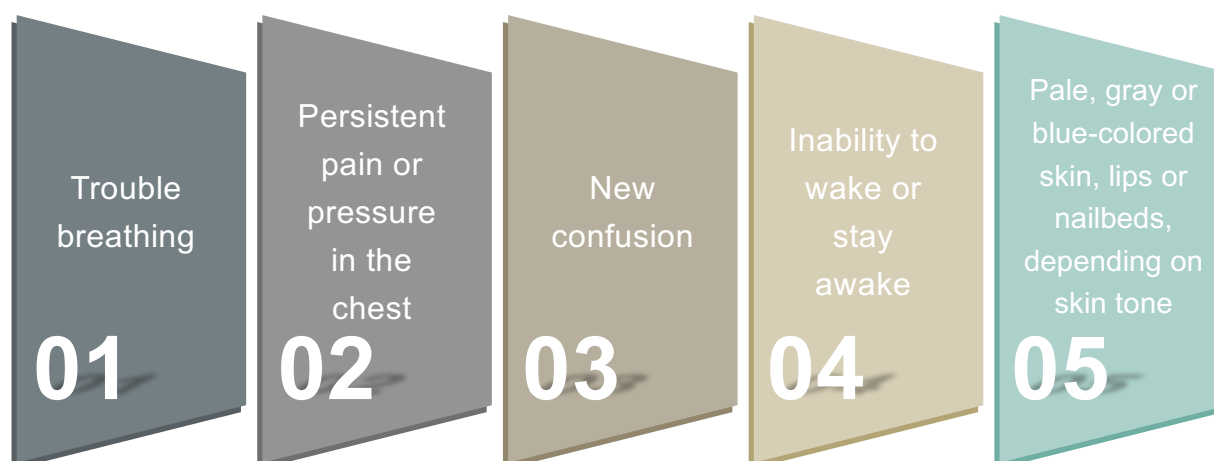
- **Sotrovimab**
- **Tocilizumab**
- **Bebtelovimab**
- A combination of **tixagevimab and cilgavimab**

Monoclonal Antibody Treatment Chart

	Outpatient Treatment	Hospital Treatment	Post Exposure & High Risk	Prevention and High Risk	Effective Against Omicron BA.1	Effective Against Omicron BA.2
Sotrovimab	X				Yes	No
Tocilizumab		X			No	No
Tixagevimab and cilgavimab (Evusheld)				X	Yes	Yes
Bebtelovimab	X		X		Yes	Yes

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Monitor Your Condition – Seek **Emergency** Care:



Call 911 – Tell them you have COVID



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COVID-19 Questions

If I was infected 1 – 2 years ago, am I protected from the current COVID strain?

- Lab data suggests a prior infection with the original omicron is not very protective against reinfection with the new mutants, though the true risk of being reinfected no matter the variant is unique to every person and situation.

If I was infected less than 6 months ago, am I protected from the current COVID strain?

- A study from the U.K. found that only about 19% of people who had an earlier infection from COVID-19 were protected from getting sick from the Omicron variant
- The CDC suggests that protection from the Pfizer and Moderna COVID-19 vaccines starts to fade around 4 months after a booster dose.

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COVID-19 Questions

Is the current COVID strain more transmissible? Do people get more severe symptoms?

- Omicron is more transmissible than Delta was.
- Data has suggested that the original Omicron strain was less severe, in general, than previous variants, according to the CDC. But it has also noted that surges in cases may lead to significant increases in hospitalizations and deaths.

How do we really know case rates since most people are not getting tested in facility?

- The number of Covid-19 tests being done in non-traditional settings, like at home, has already surpassed the number being done in laboratories, according to the National Institutes of Health.
- Cases are likely very underreported.
- A more reliable metric to watch is the hospitalization rates.

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COVID-19 Questions

At what point should I seek treatment with an antiviral medication?

- CDC: If you test positive for COVID-19 and are more likely to get very sick, treatments are available that can reduce your chances of hospitalization and death.
 - Over 50 years, unvaccinated, at-risk medical conditions
- Don't delay: Treatment must be started within days after you first develop symptoms to be effective.

Do we know if monoclonal antibodies (MABs) work for current strains?

- Therapeutic options may be available to combat the omicron variant of SARS-CoV-2; however, some therapeutic monoclonal antibodies may not be effective against this variant.
- Simply put, some work, some don't. Contact your doctor for the most up-to-date information.

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COVID-19 Questions



Will there likely be lockdowns again or are we "over" it?

- Political decisions suggests there will never be widespread agreement on whether lockdowns, the most controversial coronavirus policy, were worthwhile.
- Moving from pandemic to endemic – lockdowns are less likely, but until the future is here, no way to be sure.

Will I need a COVID vaccine every 3 months, 6 months, 12 months?

- This is difficult to answer.
- Each year, we have a different flu vaccine because flu changes so much year to year that the prior year's protection from the vaccine isn't necessarily protecting you the following year. That may be true of COVID if we continue to see new variants of COVID.



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**POLL
QUESTION**

Have you had COVID-19?

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**POLL
QUESTION**

If you've had COVID-19 – how many times have you had it?

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QUESTIONS



Record your questions in the question box
We'll get to as many as we can!

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Next Webinar

Join us for our upcoming
webinar

Back to School with Asthma

Thursday, August 16, 2022
3:00 PM ET



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Please remain online for 2 – 3 minutes to complete an evaluation survey! **Thank you!**