



Coronavirus Disease 2019 (COVID-19)

Keeping up With Critical Diabetes Care and Prevention During COVID-19

1

00:00:00,086 --> 00:00:01,026

>> Hello everyone.

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00:00:02,916 --> 00:00:07,206

My name is Angel Rocha and

I would like to welcome you

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00:00:07,206 --> 00:00:11,226

to today's CDC Partner Update Call on COVID-19.

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00:00:12,256 --> 00:00:18,696

This call serves as a way for CDC to share

updates on COVID-19 and our latest resources

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00:00:18,696 --> 00:00:22,976

and guidances, and to answer

questions submitted by participants.

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00:00:29,076 --> 00:00:34,266

On today's call, we will discuss diabetes.

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00:00:34,266 --> 00:00:40,896

First, we will hear from one of our science officers on CDC's COVID-19 emergency response

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00:00:40,996 --> 00:00:44,266

who will describe where we are with the response

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00:00:44,266 --> 00:00:48,536

and give us insight into recent scientific findings.

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00:00:48,926 --> 00:00:53,476

Then we will hear from an expert in the Division of Diabetes Translation,

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00:00:53,666 --> 00:00:58,566

and an overview of diabetes care and prevention during the pandemic.

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00:00:59,336 --> 00:01:07,396

Afterwards, our speakers will answer questions we've received over the last week via email.

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00:01:07,526 --> 00:01:12,346

If you experience technical difficulties, or

otherwise would like to review today's call,

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00:01:12,816 --> 00:01:18,346

you can find the recording on [cdc.gov](https://www.cdc.gov)
and YouTube in eight to 10 days.

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00:01:19,206 --> 00:01:23,626

All past partner calls can be
found there, so please take time

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00:01:23,626 --> 00:01:26,216

to review and share prior recordings.

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00:01:26,626 --> 00:01:33,446

For information about these webinars,
visit our COVID-19 Partner Calls webpage,

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00:01:34,106 --> 00:01:40,106

where you can register for future partner
calls and see recordings of previous webinars.

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00:01:40,106 --> 00:01:44,996

If this is your first webinar with us, welcome.

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00:01:45,936 --> 00:01:51,046

Please see the link in the chat to subscribe
and to receive future call invitations.

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00:01:52,736 --> 00:01:56,836

Please note, this call is
not intended for media,

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00:01:57,196 --> 00:02:00,246

although we welcome the media
who may be here today.

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00:02:01,666 --> 00:02:09,566

Should you be a reporter and have questions,
we invite you to reach out to media@cdc.gov.

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00:02:09,996 --> 00:02:12,966

Repeat, media@cdc.gov.

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00:02:19,056 --> 00:02:24,936

These calls are designed to share the latest
science, guidance and resources from CDC.

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00:02:26,076 --> 00:02:32,246

CDC has issued thousands of resources and
guidance materials for individuals, businesses

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00:02:32,246 --> 00:02:35,176

and the public on our website, [cdc.gov](https://www.cdc.gov).

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00:02:36,586 --> 00:02:43,146

Here are some highlights on just a few of our recent web additions.

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00:02:43,496 --> 00:02:49,476

First, CDC published *In Consideration for Case Investigations and Contact Tracing*

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00:02:49,476 --> 00:02:57,426

in K-12 Schools and Institutions of Higher Education, IHE's, providing guidance

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00:02:57,426 --> 00:03:02,726

to administrators of K-12 schools, agencies and health officials on how to prepare

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00:03:02,726 --> 00:03:05,976

and implement COVID-19 case investigations.

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00:03:11,106 --> 00:03:13,856

And Contact Tracing Efforts in educational Settings.

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00:03:15,106 --> 00:03:18,966

This guidance consolidates two
previously published documents

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00:03:18,966 --> 00:03:22,316

and highlights the importance
of a well-coordinated effort

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00:03:22,316 --> 00:03:27,226

between K-12 schools and
IHE's and health officials.

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00:03:27,226 --> 00:03:34,296

It is meant to supplement, not
replace, any federal, state tribal,

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00:03:34,296 --> 00:03:40,766

local or territorial privacy or public
health and safety laws, rules and regulations

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00:03:42,016 --> 00:03:45,906

with which K-12 schools and IHE comply.

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00:03:46,286 --> 00:03:53,566

This guidance addresses implications of updated information on identifying close contacts,

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00:03:54,306 --> 00:04:01,736

testing for COVID-19, vaccinations, mask use, isolation,

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00:04:02,396 --> 00:04:07,906

and quarantine for K-12 schools and IHE settings.

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00:04:08,056 --> 00:04:15,906

As schools and IHE's resume in-personal learning, case investigation

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00:04:15,906 --> 00:04:22,146

and contact tracing are effective strategies to identify and isolate people with COVID-19,

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00:04:22,906 --> 00:04:28,826

and test and quarantine people who might have been exposed to COVID-19 in order

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00:04:28,826 --> 00:04:33,196

to reduce transmission amongst staff, educators and students.

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00:04:34,416 --> 00:04:38,766

Working together, school health leaders
and community members can take actions

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00:04:38,766 --> 00:04:46,476

to keep K-12 schools and IHS open for
in-person learning by protecting students,

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00:04:46,646 --> 00:04:51,976

teachers and school staff where
they live, work, learn and play.

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00:04:55,056 --> 00:05:00,386

Second, CDC and FDA have determine the use

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00:05:00,386 --> 00:05:06,956

of the Janssen COVID-19 vaccine shall
be resumed in the United States.

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00:05:07,726 --> 00:05:11,666

The FDA and CDC have confidence
that this vaccine is safe

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00:05:11,666 --> 00:05:15,706

and effective in preventing COVID-19.

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00:05:15,706 --> 00:05:20,766

The FDA has determined that the available data show that the vaccine's known

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00:05:20,766 --> 00:05:25,556

and potential benefits outweigh its known and potential risk

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00:05:25,946 --> 00:05:28,756

in individuals 18 years of age and older.

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00:05:29,276 --> 00:05:36,386

At this time, the available data suggests that the chance of rare blood clotting known

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00:05:36,386 --> 00:05:42,306

as thrombosis thrombocytopenia syndrome, TTS, occurring is very low.

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00:05:42,746 --> 00:05:48,886

But the FDA and CDC will remain vigilant in continuing to investigate this risk.

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00:05:52,046 --> 00:05:56,026

Healthcare providers administering
the vaccine and vaccine recipients

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00:05:56,026 --> 00:06:02,406

or caregivers should review the
Janssen COVID-19 vaccine facts sheet

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00:06:02,406 --> 00:06:08,956

for healthcare providers administering
vaccination providers and fact sheet

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00:06:08,956 --> 00:06:14,946

for recipients and caregivers, which have been
revised to include information about the risk

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00:06:14,946 --> 00:06:19,626

of this syndrome, which has occurred
in a very small number of people

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00:06:19,626 --> 00:06:21,976

who have received Janssen COVID-19 vaccine.

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00:06:28,066 --> 00:06:31,376

I am pleased to be joined
today by two CDC experts.

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00:06:31,796 --> 00:06:37,636

Dr. Kyle Bernstein, the Science Officer
in support of the Chief Medical Officer

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00:06:37,636 --> 00:06:40,816

on the CDC COVID-19 emergency response.

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00:06:40,946 --> 00:06:46,416

And Dr. Beth Bigman, the Associate
Director of Science and Acting Director

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00:06:46,416 --> 00:06:49,536

of CDC's Division of Diabetes Translation.

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00:06:49,966 --> 00:06:54,206

Now I'm going to turn it over to Dr.
Bernstein for some general updates.

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00:06:54,206 --> 00:06:54,976

Dr. Bernstein?

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00:06:57,046 --> 00:06:57,726

>> Thank you, Angel.

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00:06:57,726 --> 00:07:01,416

And welcome to everyone joining us today.

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00:07:01,416 --> 00:07:03,336

My name is Dr. Kyle Bernstein.

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00:07:03,336 --> 00:07:07,906

And as mentioned, I'm a Science
Officer supporting serving in support

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00:07:07,906 --> 00:07:11,416

of the Chief Medical Officer
for the COVID-19 response.

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00:07:11,776 --> 00:07:16,066

And today, I'd like to provide a brief
update on the response and review some

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00:07:16,066 --> 00:07:18,306

of the latest scientific developments.

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00:07:20,066 --> 00:07:23,386

So first, I'd like to provide
a situational update.

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00:07:23,696 --> 00:07:27,436

You can see from the slide
that national COVID-19 cases

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00:07:27,436 --> 00:07:32,436

and deaths have slightly decreased over the
past week as compared to the previous week.

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00:07:33,596 --> 00:07:39,686

As of April 24th, the seven-day
average in cases decreased by 2.8%

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00:07:39,686 --> 00:07:41,786

over the previous seven-day average.

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00:07:42,596 --> 00:07:48,006

The seven-day average in deaths decreased
by 4.3% over the previous seven-day average.

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00:07:48,786 --> 00:07:54,056

We are seeing a slight decrease in reported
COVID-19 cases after an upward trend

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00:07:54,056 --> 00:07:58,026

that was occurring since March 20th of 2021.

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00:07:58,286 --> 00:08:03,456

These statistics provide us with a lot of very valuable information.

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00:08:03,946 --> 00:08:08,706

When these percentages are decreasing, this tells us that mitigation efforts are working.

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00:08:09,656 --> 00:08:14,406

When we see case counts increase, this indicates to us that we need to step

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00:08:14,406 --> 00:08:18,036

up mitigation efforts to slow the spread of COVID-19.

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00:08:19,516 --> 00:08:27,096

As of April 25th, 228 million vaccine doses have been administered in the United States.

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00:08:27,866 --> 00:08:35,936

About 139 million people or approximately 42% of the US population have received

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00:08:35,936 --> 00:08:39,026

at least one COVID-19 vaccine dose.

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00:08:39,026 --> 00:08:44,366

And 28.5% of the US population
is fully vaccinated.

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00:08:45,366 --> 00:08:51,406

We encourage you to visit CDC's data tracker on
the new weekly review for the latest statistics

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00:08:51,406 --> 00:08:54,266

and key indicators from the pandemic.

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00:08:55,716 --> 00:09:01,256

New this week, I wanted to share some of
what we've learned from a couple of reports

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00:09:01,256 --> 00:09:08,076

that were recently released in CDC's
Morbidity and Mortality Weekly Report or MMWR.

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00:09:08,076 --> 00:09:14,356

In the interest of time, I will only briefly
touch on the high points of these reports.

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00:09:14,706 --> 00:09:17,856

But you will see the link to the reports in the chat, and I encourage you

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00:09:17,856 --> 00:09:21,246

to visit [cdc.gov](https://www.cdc.gov) to read the reports in full.

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00:09:22,376 --> 00:09:29,296

First, we'd like to report on two MMWR's highlighting COVID-19 infections

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00:09:29,296 --> 00:09:31,546

in fully vaccinated persons.

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00:09:31,546 --> 00:09:34,206

This is sometimes known as breakthrough cases.

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00:09:35,106 --> 00:09:41,956

The first report is entitled Post-Vaccination SARS-CoV-2 Infections Among Skilled Nursing

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00:09:41,956 --> 00:09:44,866

Facility Residents and Staff Members.

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00:09:45,036 --> 00:09:49,966

And the second report is entitled
COVID-19 Outbreak Associated

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00:09:49,966 --> 00:09:54,036

with the SARS-CoV-2 R1 Lineage Variant

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00:09:54,036 --> 00:09:57,966

in a Skilled Nursing Facility
after Vaccination Program.

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00:09:59,216 --> 00:10:04,236

These two reports were published late
last week and summarize investigations

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00:10:04,236 --> 00:10:08,986

into SARS-CoV-2 infections among
staff members and residents

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00:10:08,986 --> 00:10:12,456

of skilled nursing facilities
in Chicago and Kentucky.

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00:10:13,406 --> 00:10:19,076

While these investigations identified infections
among fully vaccinated staff and residents,

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00:10:19,506 --> 00:10:23,566

people who were vaccinated
were less likely to get sick.

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00:10:24,206 --> 00:10:28,826

Most breakthrough cases resulted
in asymptomatic or mild illness.

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00:10:28,826 --> 00:10:32,966

However, both reports identified a death
among a fully vaccinated individual.

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00:10:36,046 --> 00:10:39,346

These infections in skilled nursing
facilities demonstrate the need

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00:10:39,346 --> 00:10:43,986

to promote high vaccination coverage among
staff and residents in these facilities,

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00:10:44,466 --> 00:10:46,956

but also the importance of ongoing compliance

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00:10:46,956 --> 00:10:51,066

with recommended routine infection prevention and control practices.

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00:10:51,996 --> 00:10:57,516

COVID-19 vaccines help protect people who are vaccinated from getting COVID-19

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00:10:57,516 --> 00:11:02,946

and may reduce severity of illness among people who get vaccinated but still become infected.

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00:11:03,946 --> 00:11:09,116

Vaccination of both skilled nursing facility residents and staff combined

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00:11:09,116 --> 00:11:12,686

with ongoing infection prevention and control practices,

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00:11:13,036 --> 00:11:18,256

along with continued routine surveillance testing are all essential to reduce the number

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00:11:18,256 --> 00:11:23,926

of COVID-19 cases being introduced or spreading in skilled nursing facilities.

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00:11:25,996 --> 00:11:28,506

Finally, I'd like to highlight an MMWR

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00:11:28,506 --> 00:11:33,606

on post-COVID symptoms that's
entitled Healthcare Utilization

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00:11:33,606 --> 00:11:40,826

and Clinical Characteristics of Non-Hospitalized
Adults in an Integrated Healthcare System 28

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00:11:40,826 --> 00:11:44,976

to 180 Days After a COVID-19 Diagnosis.

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00:11:47,046 --> 00:11:54,526

>> As of April 19th, 2021, over 21 million
COVID-19 cases have been reported among

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00:11:54,526 --> 00:11:55,986

US adults.

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00:11:56,116 --> 00:12:01,366

Most of them have had mild or moderate
disease that did not require hospitalization.

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00:12:02,466 --> 00:12:07,286

In order to better understand the longer-term healthcare use and characteristics

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00:12:07,286 --> 00:12:11,936

of non-hospitalized adults following a diagnosis of COVID-19,

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00:12:12,086 --> 00:12:17,966

CDC and Kaiser Permanente Georgia analyzed electronic health record data

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00:12:17,966 --> 00:12:25,306

from healthcare visits in the 28 through 180 days after being diagnosed with COVID-19.

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00:12:26,036 --> 00:12:32,556

About seven out of 10 non-hospitalized patients sought medical care in that 28

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00:12:32,556 --> 00:12:36,786

to 180 day period after their COVID-19 diagnosis.

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00:12:37,566 --> 00:12:43,736

The symptoms potentially related to COVID-19 were among the most common new visit diagnoses.

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00:12:44,486 --> 00:12:47,746

Visits for these symptoms decreased after 60 days,

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00:12:47,746 --> 00:12:52,886

but for some patients continued through 120 through 180 days.

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00:12:53,796 --> 00:13:00,116

Raising awareness among patients, clinicians and healthcare systems about common new diagnoses

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00:13:00,116 --> 00:13:04,126

and health needs after a COVID-19 illness is important

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00:13:04,126 --> 00:13:08,506

to understand the long-term health effects of SARS-CoV-2 infection.

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00:13:09,476 --> 00:13:13,616

With that, it is now my pleasure to

hand over to my esteemed colleague

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00:13:13,616 --> 00:13:15,976

in the Division of Diabetes Translation.

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00:13:21,096 --> 00:13:22,036

>> Thank you.

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00:13:22,926 --> 00:13:28,086

My name is Beth Bigman and I'm the Associate
Director for Science and Acting Director

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00:13:28,086 --> 00:13:30,896

of CDC's Division of Diabetes Translation.

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00:13:30,896 --> 00:13:36,246

I'm really glad to be here and grateful for
the opportunity to speak with you all today

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00:13:36,246 --> 00:13:40,266

about the intersection of
diabetes and the COVID-19 pandemic.

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00:13:40,586 --> 00:13:45,676

I'll start today with an overview of

diabetes, then talk about the relationship

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00:13:46,386 --> 00:13:49,576

between diabetes and COVID-19 infection.

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00:13:50,226 --> 00:13:56,856

And finally, highlight actions that can be taken to prevent, delay and manage diabetes

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00:13:57,226 --> 00:13:59,976

and reduce the risk of severe illness from COVID-19 infection.

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00:14:06,046 --> 00:14:09,486

I'd like to start today by giving a brief overview of diabetes.

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00:14:10,746 --> 00:14:15,986

Diabetes is a chronic condition that affects how your body turns food into energy.

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00:14:17,196 --> 00:14:21,126

If you have diabetes, your body either doesn't make enough insulin

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00:14:21,316 --> 00:14:24,396

or can't use the insulin it
makes as well as it should.

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00:14:25,386 --> 00:14:29,146

When there isn't enough insulin or
cells stop responding to insulin,

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00:14:29,456 --> 00:14:31,906

too much blood sugar stays in your bloodstream.

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00:14:32,726 --> 00:14:35,726

Over time that can cause
serious health problems,

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00:14:35,976 --> 00:14:40,596

such as heart disease, vision
loss and kidney disease.

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00:14:40,726 --> 00:14:45,886

Diabetes is among the leading causes of death in
the United States, and is the number one cause

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00:14:45,886 --> 00:14:49,746

of kidney failure, lower limb
amputations and adult blindness.

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00:14:51,286 --> 00:14:56,056

Related to diabetes is prediabetes,
a serious health condition

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00:14:56,256 --> 00:15:00,166

where blood sugar levels are higher
than normal, but not yet high enough

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00:15:00,166 --> 00:15:02,596

to be diagnosed as type two diabetes.

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00:15:03,406 --> 00:15:09,866

More than 122 million Americans are living
with either diabetes or prediabetes --

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00:15:10,426 --> 00:15:15,086

about 34 million with diabetes,
and 88 million with prediabetes.

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00:15:16,226 --> 00:15:19,936

Most adults with prediabetes
don't know they have it.

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00:15:20,336 --> 00:15:23,976

Reducing new diabetes cases
is a priority for CDC.

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00:15:28,056 --> 00:15:33,036

The two most common types of diabetes
are type one and type two diabetes.

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00:15:34,036 --> 00:15:38,476

Type one diabetes is thought to be
caused by an autoimmune reaction

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00:15:38,476 --> 00:15:43,936

in which the body attacks itself by
mistake and the body stops making insulin.

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00:15:45,026 --> 00:15:49,206

Approximately 5 to 10% of people
who have diabetes have type one.

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00:15:50,246 --> 00:15:53,486

It's usually diagnosed in
children, teens and young adults.

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00:15:54,576 --> 00:15:58,046

Currently, no one knows how
to prevent type one diabetes.

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00:15:59,736 --> 00:16:03,616

With type two diabetes, the
body doesn't use insulin well

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00:16:03,616 --> 00:16:05,956

and can't keep blood sugar at normal levels.

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00:16:06,826 --> 00:16:10,866

About 90 to 95% of people
with diabetes have type two.

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00:16:10,866 --> 00:16:17,706

Type two diabetes typically develops over many
years, and is usually diagnosed in adults.

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00:16:17,966 --> 00:16:21,976

But more and more we're seeing type two
in children, teens and young adults.

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00:16:27,066 --> 00:16:31,446

There are several risk factors that increase
a person's risk for developing prediabetes

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00:16:31,446 --> 00:16:36,996

or type two diabetes, including
being overweight, having a parent,

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00:16:37,096 --> 00:16:41,756

brother or sister with type two
diabetes, being physically active less

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00:16:41,816 --> 00:16:45,716

than three times a week,
and being 45 years or older.

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00:16:47,206 --> 00:16:50,206

Some racial and ethnic groups are at higher risk

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00:16:50,206 --> 00:16:53,436

of developing prediabetes and
type two diabetes as well.

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00:16:54,616 --> 00:16:59,926

In the last 20 years, the number of adults
diagnosed with diabetes has more than tripled

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00:16:59,926 --> 00:17:04,216

as the US population has gotten
older and become more overweight.

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00:17:05,606 --> 00:17:11,296

However, it is possible to prevent or delay
the onset of type two diabetes by losing weight

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00:17:11,296 --> 00:17:14,976

if necessary, eating healthier
and being more physically active.

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00:17:21,066 --> 00:17:24,996

Taking action to prevent
or delay type two diabetes

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00:17:24,996 --> 00:17:28,626

and to manage diabetes is always important.

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00:17:29,486 --> 00:17:35,036

This is even more true during an emergency or
crisis, because diabetes can make it harder

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00:17:35,036 --> 00:17:41,346

for the immune system to fight infections,
increasing the risk of serious complications.

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00:17:42,936 --> 00:17:48,116

Disrupted routines and added stress of an

emergency or crisis can make it more difficult

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00:17:48,116 --> 00:17:50,976

for people with diabetes to
manage their blood sugar.

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00:17:56,166 --> 00:18:00,296

The ongoing COVID pandemic has
further underscored the importance

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00:18:00,296 --> 00:18:02,476

of diabetes prevention and management.

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00:18:03,446 --> 00:18:09,486

We now know that adults with either type one or
type two diabetes can be more likely than others

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00:18:09,486 --> 00:18:13,096

to become severely ill if
infected with COVID-19.

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00:18:13,956 --> 00:18:17,306

Which means they're more
likely to need hospitalization,

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00:18:17,526 --> 00:18:21,286

to be admitted into an intensive care unit, to need a ventilator

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00:18:21,286 --> 00:18:23,916

to help them breathe, or they may even die.

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00:18:29,156 --> 00:18:33,716

Building on what I just mentioned, data show that hospitalizations were six times higher

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00:18:34,016 --> 00:18:37,546

and deaths 12 times higher for COVID-19 patients

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00:18:37,606 --> 00:18:40,956

with reported underlying conditions such as diabetes.

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00:18:40,956 --> 00:18:47,296

In addition, data from 16 public health departments found that among those who died

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00:18:47,296 --> 00:18:54,956

from COVID-19, almost half less than age 65 had diabetes, and one-third over 65 had diabetes.

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00:18:56,106 --> 00:19:01,176

Another recent study showed that diabetes was one of the most frequent conditions contributing

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00:19:01,176 --> 00:19:06,736

to COVID-19 deaths, as it was included in more than 10% of studied death certificates.

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00:19:11,176 --> 00:19:16,896

The COVID-19 pandemic has also impacted how people use and access medical services.

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00:19:17,846 --> 00:19:21,316

For example, some people who need diabetes services

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00:19:21,316 --> 00:19:26,586

to maintain blood sugar management may not be getting them during this time.

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00:19:26,696 --> 00:19:29,186

This can lead to uncontrolled high blood sugar.

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00:19:30,186 --> 00:19:32,586

However, data show a decline in visits

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00:19:32,586 --> 00:19:36,796

to emergency departments during the first 10 weeks of the COVID-19 pandemic.

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00:19:36,796 --> 00:19:41,686

A lack of blood sugar management and other self-management routines,

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00:19:42,156 --> 00:19:47,936

even over a short time, can have a lasting negative consequence for people with diabetes.

224

00:19:49,126 --> 00:19:53,646

It is crucial for people who experience any life-threatening conditions

225

00:19:54,076 --> 00:19:58,986

to seek immediate emergency care, even during this COVID-19 pandemic.

226

00:20:04,056 --> 00:20:09,336

Another important characteristic of the COVID-19 pandemic is the disproportionate impact

227

00:20:09,336 --> 00:20:11,156

on some racial and ethnic groups.

228

00:20:11,676 --> 00:20:13,276

As you can see from this graph,

229

00:20:13,856 --> 00:20:19,966

COVID-19 associated hospitalization rates are highest among people who are American Indian

230

00:20:19,966 --> 00:20:24,326

or Alaskan Native, black and Hispanic or Latino.

231

00:20:25,456 --> 00:20:29,956

These higher hospitalization rates likely result from a multitude of factors,

232

00:20:30,256 --> 00:20:35,916

including structural and social factors that can lead to increased risk for exposure

233

00:20:36,196 --> 00:20:38,976

to the virus that causes COVID-19 infection.

234

00:20:39,106 --> 00:20:45,536

Structural factors include economic and housing policies, while social factors are things

235

00:20:45,536 --> 00:20:50,646

like employment that requires in-person work, such as meatpacking, agricultural,

236

00:20:50,786 --> 00:20:55,976

service and healthcare industries, and living in multigenerational and multifamily households.

237

00:21:01,046 --> 00:21:05,906

We see similar racial and ethnic disparities among people diagnosed with diabetes.

238

00:21:06,846 --> 00:21:10,466

Members of some racial and ethnic minority groups are more likely

239

00:21:10,466 --> 00:21:12,806

to have diabetes than non-Hispanic whites.

240

00:21:13,626 --> 00:21:17,296

American Indian and Alaskan Native adults have the highest rate

241

00:21:17,296 --> 00:21:22,536

of diagnosed diabetes among all US racial and ethnic groups at 14.7%.

242

00:21:23,776 --> 00:21:30,576

12.5% percent of Hispanic adults and 11.7% of non-Hispanic black adults have diabetes,

243

00:21:30,736 --> 00:21:34,126

compared to 7.5% percent of non-Hispanic white adults.

244

00:21:35,066 --> 00:21:39,196

These racial and ethnic groups also have higher rates of obesity,

245

00:21:39,196 --> 00:21:40,976

which is a primary risk factor for type two diabetes.

246

00:21:47,046 --> 00:21:51,706

Given all the information I've shared so far, it's important to know how we can help people

247

00:21:51,706 --> 00:21:56,896

with diabetes and prediabetes, especially
in the context of COVID-19 pandemic.

248

00:21:58,146 --> 00:22:04,806

First, we can increase awareness of
prediabetes, and of the two key programs

249

00:22:04,806 --> 00:22:09,456

for diabetes prevention and management,
the National Diabetes Prevention Program

250

00:22:09,776 --> 00:22:13,316

and diabetes self-management
education and support services.

251

00:22:14,856 --> 00:22:18,396

Next, we can help people
with prediabetes prevent

252

00:22:18,396 --> 00:22:21,056

or delay the development of type two diabetes.

253

00:22:21,976 --> 00:22:26,796

And for people who have diabetes, we can
help facilitate better management practices.

254

00:22:27,276 --> 00:22:33,446

We can also encourage people with diabetes to get a COVID-19 vaccination.

255

00:22:34,276 --> 00:22:37,916

As I mentioned, people with diabetes are at a higher risk

256

00:22:37,916 --> 00:22:40,376

of severe illness from COVID-19 infection.

257

00:22:41,446 --> 00:22:45,986

Everyone 16 and older is now eligible to get a COVID-19 vaccination.

258

00:22:46,226 --> 00:22:50,686

And we encourage everyone, especially those at higher risk for severe illness

259

00:22:51,186 --> 00:22:54,156

to get COVID-19 vaccine as soon as possible.

260

00:22:54,926 --> 00:22:58,596

Widespread vaccination is a critical tool to help stop the pandemic.

261

00:22:58,806 --> 00:23:03,936

Finally, we can work to address the social determinants of health to reduce

262

00:23:03,936 --> 00:23:06,976

and ultimately eliminate racial and ethnic health disparities.

263

00:23:12,296 --> 00:23:18,316

As I mentioned, increasing awareness of prediabetes and of two key CDC programs

264

00:23:18,376 --> 00:23:22,926

to prevent, delay and manage type two diabetes are important actions we can take.

265

00:23:23,956 --> 00:23:28,846

The first program I want to highlight is CDC National Diabetes Prevention Program,

266

00:23:29,096 --> 00:23:31,636

or the National DPP.

267

00:23:31,866 --> 00:23:36,556

The National DPP is a partnership of public and private organizations working

268

00:23:36,556 --> 00:23:39,236

to prevent or delay type two diabetes.

269

00:23:40,076 --> 00:23:43,926

In addition to CDC, this partnership includes other federal agencies,

270

00:23:44,196 --> 00:23:50,016

state and local health departments, national and community organizations, employers,

271

00:23:50,356 --> 00:23:53,666

public and private insurers, healthcare professionals,

272

00:23:54,086 --> 00:23:58,626

university community education programs, and businesses that focus on wellness.

273

00:23:59,996 --> 00:24:05,486

The National DPP strives to make it easier for people with prediabetes to participate

274

00:24:05,486 --> 00:24:10,426

in an affordable, high-quality lifestyle
change program to reduce their risk

275

00:24:10,426 --> 00:24:13,246

of type two diabetes and
improve their overall health.

276

00:24:14,646 --> 00:24:20,666

Research shows that participants who lost 5 to
7% of their body weight and added 150 minutes

277

00:24:20,816 --> 00:24:28,126

or two and a half hours of exercise per week cut
the risk of developing type two diabetes by 58%.

278

00:24:28,766 --> 00:24:32,406

This risk was cut by 71% for people over age 60.

279

00:24:33,646 --> 00:24:38,726

Participating in the program can also lower
the risk of having a heart attack or stroke,

280

00:24:38,816 --> 00:24:44,916

improve overall health, increase

energy and may reverse prediabetes.

281

00:24:45,376 --> 00:24:50,336

To improve access to and participation in the National DPP lifestyle change program,

282

00:24:50,706 --> 00:24:53,856

CDC has supported 10 national organizations

283

00:24:53,856 --> 00:24:57,136

to start new in-person programs in underserved areas.

284

00:24:57,906 --> 00:25:03,246

These organizations are committed to enrolling both general and priority populations.

285

00:25:04,086 --> 00:25:08,556

Certain populations are being prioritized because they have been under-enrolled

286

00:25:08,556 --> 00:25:13,506

and in the National DPP's lifestyle change program despite relatively high rates

287

00:25:13,506 --> 00:25:14,786

of type two diabetes.

288

00:25:19,346 --> 00:25:25,196

Currently, there are more than 1,800 CDC
recognized National DPP delivery organizations

289

00:25:25,626 --> 00:25:28,966

offering in-person and virtual
classes across the country.

290

00:25:29,996 --> 00:25:35,026

These lifestyle change programs use
approved curriculums that meet established,

291

00:25:35,026 --> 00:25:39,226

scientifically proven requirements
and standards.

292

00:25:39,226 --> 00:25:43,576

In these programs, a trained coach
helps participants make lasting changes,

293

00:25:43,836 --> 00:25:48,126

like eating healthier, reducing stress,
and increasing physical activity.

294

00:25:48,126 --> 00:25:54,146

The program also includes group support from others with common goals and struggles.

295

00:25:54,886 --> 00:25:59,816

It's important to underscore that the National DPP is not a fad diet

296

00:25:59,816 --> 00:26:02,556

and exercise class or a quick fix.

297

00:26:02,596 --> 00:26:07,226

It's a year-long program focused on long-term changes and lasting results

298

00:26:07,566 --> 00:26:09,916

to prevent or delay type two diabetes.

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00:26:10,946 --> 00:26:17,356

Both in-person and online CDC recognized National DPP programs can be found by searching

300

00:26:17,356 --> 00:26:18,976

on the web page shown on this screen.

301

00:26:24,236 --> 00:26:29,296

Just as the National DPP is critical to help people prevent type two diabetes,

302

00:26:29,496 --> 00:26:34,096

diabetes self-management, education and support services, or DSMES are important

303

00:26:34,856 --> 00:26:37,796

for people who already have diabetes.

304

00:26:38,566 --> 00:26:43,206

These services help people with diabetes learn how to take the best care of themselves,

305

00:26:43,206 --> 00:26:48,746

and avoid or delay serious health complications, such as kidney disease and vision loss.

306

00:26:49,966 --> 00:26:55,456

DSMES services include a healthcare team who teaches participants how to stay healthy

307

00:26:55,456 --> 00:26:58,426

and how to incorporate self-care lessons into daily life.

308

00:26:58,426 --> 00:27:01,886

I will explain more about these lessons in a moment.

309

00:27:02,086 --> 00:27:07,476

But for now, I want to mention that the first step in accessing DSMES services is to talk

310

00:27:07,476 --> 00:27:09,976

to a doctor and specifically ask for a referral.

311

00:27:12,046 --> 00:27:15,026

People with diabetes can find the diabetes education program

312

00:27:15,026 --> 00:27:17,976

in their area using the tool referenced on this slide.

313

00:27:23,416 --> 00:27:27,166

As I mentioned, DSMES can help improve health outcomes

314

00:27:27,476 --> 00:27:30,506

and increase healthy behaviors
for people with diabetes.

315

00:27:31,336 --> 00:27:38,656

For example, participants learn to eat healthy,
be active, check blood sugar, take medicine,

316

00:27:38,956 --> 00:27:43,006

solve problems, cope with the
emotional side of diabetes,

317

00:27:43,376 --> 00:27:45,826

and reduce the risk of other health problems.

318

00:27:46,846 --> 00:27:52,826

Some benefits of DMSES participation
could include improved A1C, blood pressure

319

00:27:52,826 --> 00:27:56,516

and cholesterol levels, better
medication adherence,

320

00:27:57,246 --> 00:28:01,326

and fewer or less severe

diabetes related complications.

321

00:28:02,886 --> 00:28:08,416

Most insurance plans including Medicare and Medicaid, cover up to 10 hours

322

00:28:08,416 --> 00:28:11,386

of diabetes education in the first year of diagnosis

323

00:28:11,736 --> 00:28:15,246

if the patient's physician documents the need and makes a referral.

324

00:28:15,636 --> 00:28:22,316

CDC supports state and local health departments to improve access to DSMES services.

325

00:28:22,376 --> 00:28:28,546

CDC also supports infrastructure for community health workers who link health systems

326

00:28:28,546 --> 00:28:30,976

and community resources for people with diabetes.

327

00:28:35,526 --> 00:28:41,066

In summary, research to date shows that people with diabetes are at an increased risk

328

00:28:41,066 --> 00:28:45,186

for severe COVID-19 illness, including hospitalization,

329

00:28:45,396 --> 00:28:49,246

intensive care unit admission, ventilator use and even death.

330

00:28:50,536 --> 00:28:55,026

This further underscores the importance of diabetes prevention and management

331

00:28:55,026 --> 00:28:59,356

and amplifies the importance of working with populations disproportionately impacted

332

00:28:59,356 --> 00:29:05,156

by diabetes, as these populations have also been more heavily impacted by COVID-19.

333

00:29:06,516 --> 00:29:12,776

Taking action to prevent COVID-19 infection,
including getting vaccinated, wearing a mask

334

00:29:12,776 --> 00:29:17,906

and practicing social distancing are even
more important for people at increased risk

335

00:29:17,906 --> 00:29:23,896

for severe COVID-19 illness, such as people with
diabetes, and for members of their households.

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00:29:29,096 --> 00:29:33,736

Before I end, I want to mention some of
the ways CDC is addressing COVID-19 illness

337

00:29:34,076 --> 00:29:36,886

and severe complications
among people with diabetes.

338

00:29:37,906 --> 00:29:43,046

CDC is conducting studies to better
understand why some people are more likely

339

00:29:43,046 --> 00:29:45,836

to develop severe COVID-19 illness.

340

00:29:47,136 --> 00:29:52,506

We are participating with organizations to explore risk factors for COVID-19 and diabetes,

341

00:29:52,636 --> 00:29:55,936

such as social determinants of health.

342

00:29:55,936 --> 00:30:00,676

We're supporting telehealth options for delivery of the National Diabetes Prevention Program

343

00:30:00,966 --> 00:30:04,156

and diabetes self-management, education and support services.

344

00:30:05,186 --> 00:30:09,976

And we're encouraging vaccination for all adults, including those with diabetes.

345

00:30:14,306 --> 00:30:19,416

Please visit the websites listed on this slide for additional information.

346

00:30:20,106 --> 00:30:21,846

Thank you all for joining us today.

347

00:30:24,116 --> 00:30:29,786

>> Thank you, Dr. Bigman and Dr. Bernstein,
for those extremely informative presentations.

348

00:30:30,436 --> 00:30:35,146

Before we move on to the Q&A portion
of the call, please take a moment

349

00:30:35,146 --> 00:30:36,976

to answer the questions through
the poll on your screen.

350

00:30:42,046 --> 00:30:46,276

For those of you who submitted questions
in advance of this call, thank you.

351

00:30:47,086 --> 00:30:52,576

We received many excellent questions and
we'll try to get to as many as we can today.

352

00:30:52,936 --> 00:30:58,976

I'll give you a minute to complete the
poll before we get started with questions.

353

00:31:21,046 --> 00:31:26,566

Dr. Bernstein, if you could start us off
by answering the first few questions,

354

00:31:27,156 --> 00:31:29,796

I'll start with the first question post.

355

00:31:31,456 --> 00:31:35,976

With summer, can I wear a
face shield instead of a mask?

356

00:31:37,156 --> 00:31:38,756

>> Thanks for that question.

357

00:31:38,876 --> 00:31:46,396

So CDC continues to not recommend using a face
shield or goggles as a substitute for masks.

358

00:31:46,916 --> 00:31:51,546

Goggles or other eye protection can
be used in addition to wearing a mask.

359

00:31:51,546 --> 00:31:56,516

And I think there's a couple of things to think
about when we're talking about face shields

360

00:31:56,516 --> 00:31:59,886

and goggles as a primary source of protection.

361

00:32:00,626 --> 00:32:03,976

First, goggles do not cover the mouth and nose.

362

00:32:04,296 --> 00:32:10,106

Face shields are not as effective as masks at protecting you or the people

363

00:32:10,106 --> 00:32:13,336

around you from respiratory droplets.

364

00:32:13,336 --> 00:32:18,776

Additionally, face shields have large gaps below and alongside the face

365

00:32:19,006 --> 00:32:25,046

where your respiratory droplets may escape and reach others around you and will not protect you

366

00:32:25,046 --> 00:32:26,976

from respiratory droplets from others.

367

00:32:30,056 --> 00:32:31,896

>> Thank you, Dr. Bernstein.

368

00:32:31,896 --> 00:32:32,816

Next question.

369

00:32:32,816 --> 00:32:38,826

Are there any special recommendations for cleaning my electronics like my phone?

370

00:32:41,206 --> 00:32:47,526

>> With respect to cleaning electronics like iPads, tablets, touchscreens or phones,

371

00:32:47,606 --> 00:32:51,546

consider putting a wipeable cover on your electronics.

372

00:32:51,916 --> 00:32:53,916

This will make cleaning easier.

373

00:32:54,706 --> 00:32:58,336

We encourage you to follow the manufacturer's instructions

374

00:32:58,336 --> 00:33:02,596

for cleaning all electronic devices.

375

00:33:03,436 --> 00:33:09,726

If soap and water is not suitable for
cleaning your electronics, use a disinfectant

376

00:33:09,726 --> 00:33:13,966

from the EPA List N and note
that many of the products

377

00:33:13,966 --> 00:33:16,916

for electronics contain alcohol
because it dries quickly.

378

00:33:19,046 --> 00:33:19,676

>> Thank you.

379

00:33:19,896 --> 00:33:20,726

Next question.

380

00:33:21,826 --> 00:33:28,026

When conducting birdwatching or
wildlife tours, can binoculars be shared

381

00:33:28,166 --> 00:33:29,976

or should they be cleaned between uses?

382

00:33:32,066 --> 00:33:37,686

>> So while COVID-19 spreads less commonly through contact with contaminated surfaces,

383

00:33:38,086 --> 00:33:43,676

it is possible that a person could get COVID-19 by touching a surface or object

384

00:33:43,676 --> 00:33:48,156

that has the virus on it and then touching their own mouth, nose or eyes.

385

00:33:48,316 --> 00:33:51,336

So to prevent spread, we recommend

386

00:33:51,336 --> 00:33:53,976

that binoculars should be cleaned before being shared.

387

00:33:56,046 --> 00:33:56,606

>> Thank you.

388

00:33:56,606 --> 00:33:58,416

Next question.

389

00:33:58,676 --> 00:34:04,396

During this pandemic, how safe am I
being a passenger in someone else's car,

390

00:34:04,866 --> 00:34:07,976

knowing all the occupants and
knowing they've been vaccinated?

391

00:34:11,066 --> 00:34:15,406

>> If you've been fully vaccinated,
it's generally safe together indoors,

392

00:34:15,406 --> 00:34:20,326

or in this case an enclosed vehicle,
with other fully vaccinated people

393

00:34:20,326 --> 00:34:24,476

without wearing a mask or
staying six feet apart.

394

00:34:24,726 --> 00:34:27,606

CDC does recommend reducing the risk

395

00:34:27,606 --> 00:34:30,296

by improving the ventilation
in the vehicle if possible.

396

00:34:30,296 --> 00:34:34,996

So for example, driving with the
windows open or set the air ventilation

397

00:34:34,996 --> 00:34:37,756

or air conditioning or non-circulation mode.

398

00:34:39,176 --> 00:34:45,276

Indoor visits between fully vaccinated people
and unvaccinated people who do not wear masks

399

00:34:45,276 --> 00:34:50,806

or physically distant from one another are
likely low risk for the vaccinated people.

400

00:34:51,736 --> 00:34:56,886

Therefore, the level of precaution taken
should be determined by the characteristics

401

00:34:56,886 --> 00:35:01,896

of the unvaccinated people who

remain unprotected against COVID-19.

402

00:35:01,896 --> 00:35:05,476

>> Thank you, Dr. Bernstein.

403

00:35:05,516 --> 00:35:07,966

The next set of questions are for Dr. Bigman.

404

00:35:08,296 --> 00:35:15,916

First question, why isn't in type one diabetes on the high risk list

405

00:35:15,986 --> 00:35:17,976

for COVID vaccine prioritization?

406

00:35:20,136 --> 00:35:25,306

>> Well, initially, only type two diabetes was included on the prioritization list.

407

00:35:26,556 --> 00:35:30,926

But additional research showed that those with type one diabetes are also more likely

408

00:35:30,926 --> 00:35:33,256

to get severely ill from COVID-19.

409

00:35:33,876 --> 00:35:38,416

As a result, diabetes overall
which includes both type one

410

00:35:38,486 --> 00:35:42,386

and type two is now on CDC's prioritized list.

411

00:35:43,176 --> 00:35:48,096

No matter what type of diabetes a person
may have, we are encouraging everyone

412

00:35:48,096 --> 00:35:50,976

to get a COVID-19 vaccination
as soon as possible.

413

00:35:53,056 --> 00:35:53,346

>> Thank you.

414

00:35:53,626 --> 00:35:54,536

Next question.

415

00:35:55,236 --> 00:36:00,976

Do people with diabetes have a higher chance
of serious complications from COVID-19?

416

00:36:03,546 --> 00:36:09,086

>> Yes, people with diabetes are more likely to develop severe COVID-19 illness.

417

00:36:10,006 --> 00:36:14,816

In general, people with diabetes are more likely to have severe symptoms

418

00:36:14,816 --> 00:36:17,496

and complications when infected with any virus.

419

00:36:18,536 --> 00:36:23,546

But the risk for severe illness is likely to be lower if their diabetes is well managed.

420

00:36:24,436 --> 00:36:27,916

However, having heart disease or other complications in addition

421

00:36:27,916 --> 00:36:33,516

to diabetes could worsen the chance of getting seriously ill from COVID-19, because having more

422

00:36:33,516 --> 00:36:36,896

than one condition makes it harder
for your body to fight the infection.

423

00:36:43,066 --> 00:36:47,996

>> Moving on to the next question,
what can we do to help prevent people

424

00:36:47,996 --> 00:36:49,976

from developing diabetes during COVID?

425

00:36:53,046 --> 00:36:55,406

>> The increased risk for people with diabetes

426

00:36:55,406 --> 00:37:00,076

from the COVID-19 pandemic illustrates
how important diabetes prevention

427

00:37:00,076 --> 00:37:01,036

and management are.

428

00:37:01,776 --> 00:37:06,026

However, the need to social distance
has impacted some of our programs.

429

00:37:06,666 --> 00:37:11,686

Because of this, CDC has focused heavily over the past year on supporting telehealth options

430

00:37:12,146 --> 00:37:16,766

for delivery of both the National DPP lifestyle change program to help people

431

00:37:16,766 --> 00:37:19,476

with prediabetes reduce their risk for type two diabetes,

432

00:37:19,476 --> 00:37:24,016

and the diabetes self-management education and support services

433

00:37:24,396 --> 00:37:26,316

for people who already have diabetes.

434

00:37:27,066 --> 00:37:30,876

Telehealth allows people to continue to participate in these programs

435

00:37:31,276 --> 00:37:33,976

without increasing their risk of exposure to COVID-19.

436

00:37:38,046 --> 00:37:38,496

>> Thank you.

437

00:37:39,706 --> 00:37:45,046

Next question, what else is CDC
doing to learn about the risks

438

00:37:45,046 --> 00:37:47,966

of COVID-19 for people with diabetes?

439

00:37:51,046 --> 00:37:54,246

>> CDC and its partners are conducting
extensive research to learn more

440

00:37:54,246 --> 00:37:57,066

about the intersection of COVID-19 and diabetes.

441

00:37:57,666 --> 00:38:00,986

This includes disease surveillance
and field investigations

442

00:38:01,236 --> 00:38:05,876

to better understand why some people are more
likely to develop severe COVID-19 illness.

443

00:38:06,816 --> 00:38:10,326

Some questions that we're learning more about include whether the risk

444

00:38:10,326 --> 00:38:14,046

of severe illness differs between type one and type two diabetes.

445

00:38:14,906 --> 00:38:20,376

Whether this risk is associated with high glucose levels or specific diabetes medications.

446

00:38:21,246 --> 00:38:26,316

To what extent do end stage renal disease and chronic kidney disease, common complications

447

00:38:26,316 --> 00:38:31,096

of diabetes, increase an individual's risk of severe complications?

448

00:38:31,556 --> 00:38:37,446

And in general, how do common comorbidities associated with diabetes such as obesity,

449

00:38:37,446 --> 00:38:39,716

heart disease and hypertension, for example,

450

00:38:40,026 --> 00:38:43,246

increase the risk of severe
illness among people with diabetes?

451

00:38:44,006 --> 00:38:49,846

What we learn from these efforts will provide
important information to help CDC scientists

452

00:38:49,846 --> 00:38:54,046

and other public health officials
protect our most vulnerable populations.

453

00:38:54,956 --> 00:38:56,896

Knowing more about the risk factors

454

00:38:56,896 --> 00:39:01,166

for severe COVID-19 illness can help
healthcare providers advise precautions

455

00:39:01,166 --> 00:39:02,976

for patients as they go about daily life.

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00:39:07,716 --> 00:39:07,896

>> Thank you.

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00:39:07,896 --> 00:39:14,796

Next question, how is CDC addressing the health disparities that exist among people

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00:39:14,796 --> 00:39:18,976

with diabetes that put them at higher risk for COVID-19?

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00:39:22,266 --> 00:39:27,296

>> Well, reducing health disparities is a cornerstone in all of our work at CDC.

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00:39:27,976 --> 00:39:32,466

We are conducting studies to better understand why some people, such as those with diabetes

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00:39:32,466 --> 00:39:37,586

and with certain racial and ethnic groups, are more likely to develop severe COVID-19 illness.

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00:39:38,366 --> 00:39:43,266

We're also partnering with organizations to explore risk factors for COVID-19 and diabetes,

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00:39:43,466 --> 00:39:45,216

such as social determinants of health.

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00:39:46,326 --> 00:39:50,256

And we are encouraging vaccination
for all adults with diabetes.

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00:39:50,996 --> 00:39:55,756

In addition, CDC has numerous diabetes
prevention educational programs,

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00:39:56,106 --> 00:40:00,116

working to end health disparities in
high-risk and vulnerable populations.

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00:40:00,706 --> 00:40:04,186

For example, we are funding 10
national organizations to further build

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00:40:04,186 --> 00:40:09,116

out the National Diabetes Prevention
Program in underserved areas of the US,

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00:40:09,116 --> 00:40:13,806

and to reach priority populations

currently under-enrolled in the program.

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00:40:15,236 --> 00:40:20,866

Also, the CDC-led Appalachian Diabetes Control and Translation Project is working

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00:40:20,866 --> 00:40:24,616

to reduce the impact of type two diabetes among people who live in high-risk,

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00:40:24,616 --> 00:40:27,556

economically distressed Appalachian communities.

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00:40:28,656 --> 00:40:34,026

And our Native Diabetes Wellness Program honors and the balance between cultural practices

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00:40:34,026 --> 00:40:37,846

and Western science in Indian country to promote health

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00:40:37,846 --> 00:40:41,476

and help prevent type two diabetes among Native Americans who are at risk.

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00:40:42,326 --> 00:40:47,606

In summary, CDC's work to address health inequities include scientific research,

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00:40:47,906 --> 00:40:51,506

community programs, policy effort, and workforce development.

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00:40:51,796 --> 00:40:55,736

Through this work, we aim to better understand social determinants of health

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00:40:55,826 --> 00:40:59,956

and combat inequities illuminated through the COVID-19 pandemic.

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00:41:02,176 --> 00:41:03,506

>> Thank you, Dr. Bigman.

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00:41:03,606 --> 00:41:06,946

We have some follow up questions for Dr. Bernstein.

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00:41:07,316 --> 00:41:10,596

Dr. Bernstein, who is tasked with ensuring

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00:41:10,596 --> 00:41:13,976

that each industry implements updated guidelines in a timely manner?

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00:41:16,126 --> 00:41:20,336

>> The Occupational Safety and Health Administration, or OSHA,

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00:41:20,966 --> 00:41:25,966

provides guidance for employers and workers in most workplace settings outside of healthcare,

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00:41:26,036 --> 00:41:33,446

to help them identify the risks of being exposed to and/or contracting COVID-19 at work.

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00:41:33,446 --> 00:41:38,396

And to help them determine appropriate control measures to implement.

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00:41:38,746 --> 00:41:43,316

OSHA has separate guidance for healthcare and emergency response settings.

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00:41:43,826 --> 00:41:48,806

And in the chat, we're posting a link
to the OSHA guidance on mitigating

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00:41:48,806 --> 00:41:54,536

and preventing the spread of COVID-19 in the
workplace, which provides more information

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00:41:54,536 --> 00:41:59,836

on how to protect workers from potential
exposures, according to their exposure.

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00:41:59,836 --> 00:42:01,886

>> Thank you.

493

00:42:01,886 --> 00:42:03,376

Next question.

494

00:42:04,186 --> 00:42:10,596

What is the guidance for barbers, beauticians
and trade schools to mitigate for COVID-19?

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00:42:12,046 --> 00:42:16,256

>> These entities should evaluate
their workplaces to identify activities

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00:42:16,256 --> 00:42:19,476

where workers cannot maintain social distancing

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00:42:19,476 --> 00:42:23,136

of at least six feet from
each other and clients.

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00:42:23,706 --> 00:42:28,486

They should use appropriate combinations of
controls following the hierarchy of controls

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00:42:28,486 --> 00:42:32,916

to address these situations to
limit the spread of COVID-19.

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00:42:33,946 --> 00:42:38,576

While protecting workers, it is important
to note that control recommendations

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00:42:38,576 --> 00:42:46,146

or interventions to reduce the risk of COVID-19
must be compatible with any safety programs,

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00:42:46,146 --> 00:42:49,836

existing rules regarding
health and public safety,

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00:42:49,836 --> 00:42:54,416

and personal protective equipment normally required for the job task.

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00:42:54,756 --> 00:42:59,646

Some approaches that can be considered can be creating a COVID Workplace Health

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00:42:59,646 --> 00:43:02,776

and Safety Plan, or taking action if a worker

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00:43:02,776 --> 00:43:06,456

or a client is suspected or confirmed to have COVID-19.

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00:43:07,896 --> 00:43:11,916

Finally, developing hazard controls using the hierarchy of controls

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00:43:11,916 --> 00:43:14,596

to prevent infection among workers.

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00:43:15,026 --> 00:43:19,006

All of these recommendations and

more can be found on the CDC website,

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00:43:19,006 --> 00:43:20,976

and the link is posted here in the chat.

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00:43:24,076 --> 00:43:24,846

>> Thank you.

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00:43:25,206 --> 00:43:27,526

We have two more questions.

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00:43:27,526 --> 00:43:31,976

How likely is it to become
infected through the eyes?

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00:43:34,046 --> 00:43:34,726

>> Thanks for that question.

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00:43:34,726 --> 00:43:40,296

So infections occur mainly through exposure
to respiratory droplets when a person is

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00:43:40,296 --> 00:43:43,436

in close contact with someone who has COVID-19.

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00:43:44,316 --> 00:43:49,226

People produce these respiratory droplets
when they cough or sneeze, when they sing,

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00:43:49,226 --> 00:43:51,086

talk or even just simply breathing.

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00:43:51,086 --> 00:43:58,006

Respiratory droplets cause infection when they
are inhaled or deposited on mucous membranes,

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00:43:58,006 --> 00:44:02,206

such as those that line the
inside of the nose and mouth.

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00:44:02,986 --> 00:44:06,506

Respiratory droplets can also
land on surfaces and objects.

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00:44:06,506 --> 00:44:11,946

So it's possible that a person could get
COVID-19 by touching a surface or object

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00:44:11,946 --> 00:44:16,506

that has virus on it and then

touching their own eyes, mouth or nose.

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00:44:16,816 --> 00:44:20,796

However, spread from touching
surfaces is not thought

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00:44:20,796 --> 00:44:22,976

to be a common way that COVID-19 spreads.

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00:44:25,046 --> 00:44:25,506

>> Thank you.

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00:44:26,096 --> 00:44:27,106

Last question.

528

00:44:27,936 --> 00:44:31,686

What is the timeline for
the three vaccines currently

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00:44:31,686 --> 00:44:34,976

with an emergency use authorization
to receive full approval?

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00:44:38,046 --> 00:44:42,276

>> There's no predetermined

timeline for vaccine development.

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00:44:42,276 --> 00:44:47,736

The US Food and Drug Administration, or FDA, expects vaccine manufacturers to include

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00:44:47,736 --> 00:44:55,646

in their emergency use authorizations, or EUA's, a plan for active follow up for safety,

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00:44:55,916 --> 00:45:00,156

which includes monitoring deaths, hospitalization and other serious

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00:45:00,156 --> 00:45:04,246

or clinically significant adverse events among individuals

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00:45:04,246 --> 00:45:06,386

who received the vaccine under an EUA.

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00:45:06,386 --> 00:45:10,826

And this helps inform ongoing risk-benefit determinations

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00:45:10,826 --> 00:45:12,876

to support continuation of the EUA.

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00:45:13,576 --> 00:45:20,286

FDA also expects manufacturers who receive an EUA to continue their clinical trials

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00:45:20,286 --> 00:45:26,976

to obtain important safety and effectiveness information and pursue licensure or approval.

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00:45:30,046 --> 00:45:35,906

>> Thank you, Dr. Bernstein and Dr. Bigman, for providing this timely information.

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00:45:36,406 --> 00:45:39,466

This concludes today's discussion.

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00:45:40,426 --> 00:45:42,766

Thank you everyone for joining our call today.

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00:45:42,986 --> 00:45:48,796

A recording will be posted on our partner call web page where you can find other recordings

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00:45:48,796 --> 00:45:51,346

and information about previous webinars.

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00:45:51,886 --> 00:45:56,496

Our next call will take place
on Monday, May 24th.

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00:45:56,496 --> 00:46:00,586

As announced last week, we will be
reducing the frequency of these webinars

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00:46:00,586 --> 00:46:02,966

from a weekly to a monthly cycle.

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00:46:02,966 --> 00:46:08,466

Please make sure to sign up for the upcoming
partner call announcement to stay informed.

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00:46:08,856 --> 00:46:16,956

The link is listed on the slide, or feel free
to click or copy the link and contact us.

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00:46:17,386 --> 00:46:20,756

Thank you again for attending,
and a special thank you to those

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00:46:20,756 --> 00:46:23,766

who have been attending the partner call on a weekly basis.

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00:46:23,886 --> 00:46:26,896

We truly appreciate your commitment to getting the most

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00:46:26,896 --> 00:46:29,696

up to date information from our CDC experts.

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00:46:30,196 --> 00:46:39,526

Until next time, wear a mask, stay six feet apart, avoid crowds and please get a vaccine.

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00:46:41,036 --> 00:46:41,666

Over and out.