The Perfect Storm: COVID-19
Summary & Closing Remarks

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This presentation is the express opinion of Kevin Kavanagh, not of Health Watch USA™ or the Mass. Nurses Association.

Tracing The History of Ineffective Disease Policy

The 2019 novel-Coronavirus was not the first failing of the United States to Control an Epidemic. One of the first was MRSA. Instead of learning by this failure we repeated the same strategies with the hopes of obtaining a different result.

Insanity Is Doing the Same Thing Over and Over Again and Expecting Different Results
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1. The United States uses a “one size does not fit all” argument which discourages the adoption of standardized national strategies for infection control. This argument failed miserably with MRSA, it also failed us with the 2019 novel-Coronavirus.
And we need a coordinated National Strategy

Dr Hunter Maguire, President of the American Medical Association stated:
“... that one of the most important questions of the hour was quarantine .... A difficulty in dealing with infectious diseases in America was the rooted dislike to the curtailment of the personal liberty of the citizen for the benefit of the people at large. ... all patriots, representing every shade of political opinion, should unite in demanding of Congress the passage of a law.... that will enable the Government to properly protect its citizens against disease .... There is as much reason why the power of the Federal Government should be invoked to aid in repelling the advent of pestilence as to aid in repelling the advent of a hostile fleet or army.“
Unfortunately, this was in 1893. Things still have not changed


Reference supplied by Tom Lang of Tom Lang Communications and Training International
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2. In both MRSA and the 2019 novel-Coronavirus, we are not fully committed to the testing and screening of individuals. We still do not know the amount of MRSA spread in the community. Neither are we screening or testing on a widespread basis for community spread of the coronavirus. We do not have the testing capability or will.
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3. In both MRSA and the 2019 novel-Coronavirus we focused on hand hygiene as the primary strategy. However, this should be a backup measure. If a dangerous pathogen is on a worker’s hands, there has been a failure in containment and control.
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4. And similar to MRSA, when all else fails, we try to mitigate the impact of 2019 novel-Coronavirus, saying it is just like the flu and 99% of coronavirus cases “are totally harmless”.

5. The United States needs a national standardized reporting system for all dangerous contagions for all healthcare facilities.
We are on track to effectively treat COVID-19.

- Proning
- Dexamethasone
- Remdesivir
- Anticoagulation
- Antibody Serum
- Vaccine

These treatments are expected to decrease the fatality rate of the 2019 novel-Coronavirus. But this virus is still very dangerous and can leave lasting disability so we cannot let down our guard.
IF WE DO NOT CHANGE OUR DIRECTION,

we are likely to end up where we are headed.