

HEALTH

What Do I Do IF... COVID Decision Guide

1. When Should I Get Tested?

The most obvious time to get tested for COVID-19 is when you have noticeable symptoms

The Symptoms of COVID are: (note that many resemble conditions such as seasonal allergies, the common cold and the flu...that's one reason we strongly suggest getting the flu shot immediately!)

- A cough
- Sore throat
- Minor congestion
- Low-grade fever
- Headache
- Fatigue

Loss of taste or smell (mainly associated with the Delta variant)

If you were exposed to someone who has COVID-19, you should get tested whether or not you have symptoms yourself

This test should be done 3-5 days after exposure

CDC definition of close contact is being within 6 feet (2 meters) for a total of 15 minutes or more, over a 24-hour period.

Get tested between three and five days after traveling internationally regardless of your symptoms

If you're traveling domestically

Fully vaccinated people should get tested only if they develop symptoms

Unvaccinated people should get tested three to five days after returning

Before attending gatherings:

You should use home tests or PCR tests before attending gatherings with people that you don't live with, especially if you don't know everyone's vaccination or booster status

2. What Are The Different Tests?

Currently, there are two types of diagnostic tests

Molecular (RT-PCR) tests that detect the virus's genetic material

These require testing by a laboratory service

This is the most accurate test option

Requires 1-3 days to get results.

The PCR test is not a test that we use after a COVID infection because it can stay positive for weeks to months

Antigen tests that detect specific proteins on the surface of the virus

These are the "home tests" that provide results immediately

Not as accurate as the PCR for initial diagnosis but, they have a very useful place in our COVID arsenal

Most accurate if you have symptoms of COVID

Results available in 15 minutes

If you do test positive with one of these tests, don't be shy about repeating a few times over the next few days just to

make sure

Samples are typically collected with a nasal or throat swab, or saliva collected by spitting into a tube.

Antibody tests look for antibodies that are made by the immune system in response to a threat, such as a specific virus

Antibodies can take several days or weeks to develop after you have an infection and may stay in your blood for several weeks after recovery.

3. What should you do if you or someone with whom you have been in close contact tests positive for coronavirus during the holidays?

Anyone with symptoms should get tested for COVID immediately and contact their healthcare provider

According to the CDC, COVID symptoms can appear anywhere from two to 14 days after someone is exposed to the virus

If I am Fully Vaccinated AND HAVE RECEIVED MY BOOSTER and am Asymptomatic:

If you have received your booster shot, you do not need to quarantine after exposure, but should wear a mask for 10 days following the exposure.

If symptoms do occur, the CDC stressed that you should immediately quarantine, until a negative test confirms that the symptoms are not due to COVID-19.

If I am Fully Vaccinated (but Without the Booster) and Asymptomatic:

Get a COVID test

Between five and seven days after their exposure

Start wearing a mask from the time of exposure for 14 days

If you get a negative test, then you can stop

If you get a positive test, then you need to quarantine for at least 10 days and

If you're having symptoms, then you need to be symptom-free for at least 24 hours, after those 10 days

Can I go outside? Do I need to Isolate?

Once you're exposed the most important thing is to make sure you don't spread the virus to others

The CDC recommends that fully vaccinated individuals should isolate for 5 days after exposure and a positive test

- If you continue to have no symptoms after five days, the CDC states that you may leave isolation if you "continue to mask for five days to minimize the risk of infecting others."

- If symptoms, such as a fever, are present, you should continue to stay home until your fever, or the other symptoms, resolve. If your symptoms resolve after five days, and you are without fever for 24 hours, the CDC said you are free to leave



your house with a mask on.

- During isolation, assume that you're infected and can spread the virus to others: it takes time for symptoms and tests to emerge as positive...you still can spread the virus to others before you feel ill or test positive.

- If you need to go out and get food or run to the drugstore, that's fine but keep it to essential activities, not going out to the bar on Friday with friends

- If you are traveling home after a holiday visit, and are vaccinated and asymptomatic: you can do so by car with other vaccinated and asymptomatic people or by commercial transportation as long as you follow the masking requirements

- When you do go out, it's essential to wear a mask to curb the potential that you might spread the virus to others...you should wear a higher-grade mask now that Omicron is so widespread but, at bare minimum, a surgical mask

What Do I Do If I Am Unvaccinated or Not Fully Vaccinated And Asymptomatic:

Get tested immediately when they are identified as a close contact.

Anyone, regardless of vaccination status, who tests positive for COVID-19 and is asymptomatic, should isolate themselves for at least five days..and be sure to always wear your mask

If you are exposed and unvaccinated, or not fully vaccinated, the CDC now recommends that you quarantine for five days, followed by "strict mask use" for five days after your quarantine. This guidance also applies to people who are more than six months out from their second mRNA dose of the vaccine — or more than two months out from their Johnson & Johnson Vaccine — but not yet been boosted.

What Do I Do If I am fully vaccinated, but still not eligible for a booster?

If you were fully vaccinated with either the Pfizer or the Moderna vaccine within the last six months, or you completed the primary series of the Johnson & Johnson vaccine within the last two months, the CDC said you do not need to be quarantined after exposure; however, you should still wear a mask for 10 days, following the exposure.

4. What To Do If Symptoms Develop?

Those who develop symptoms should get tested as soon as symptoms develop... and check in with your health professional

If a test is negative and symptoms persist: another test might be needed a few days later, particularly for those who use at-home test kits just to be sure

If you're having severe symptoms:

Call your doctor's office and get their advice because:

- There are of course other things like the flu that are out there that can mimic COVID symptoms

- They may recommend that you receive Monoclonal Antibodies (see below)

If you're having mild or lingering symptoms and your at-home test was negative:

Retest in three to five days...that's why most of these kits actually come with two tests

5. What Should An Asymptomatic Person Do Who Tests Positive?

Globally, more than 40% of confirmed COVID-19 cases were asymptomatic — and we know that asymptomatic cases can still contribute to the spread of the virus

Get in contact with your health care provider

The Symptoms of COVID are: (note that many resemble conditions such as seasonal allergies, the common cold and

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Everyday Things You Can Do to Protect Your Sight

By the year 2050, an estimated 895 million people worldwide will have developed vision impairment, according to a report in The Lancet. That's a 150 percent increase over the next 30 years. It's estimated that by age 65, more than 90 percent of people have a cataract and that half of people between ages 75 and 85 have lost some vision due to a cataract. By age 80, 1 in 8 people have glaucoma, according to an Australian study. In the U.S., African Americans are at particularly high risk. Still, as ominous as these statistics sound, many vision problems can be treated — and in some cases prevented — by following some simple, healthy habits.

1. Wear sunglasses with ultraviolet (UV) protection

Our skin isn't the only casualty of daily UV exposure. Those invisible rays up your chances of getting cataracts, a clouding of the eye lens that typically occurs with aging. Look for sunglasses with a label that says "100 percent protection against both UVA and UVB" or "100 percent protection against UV 400."

"A dark lens that does not filter out the UV properly is actually worse than no lens at all," says Andrea Thau, past president of the American Optometric Association and a New York City-based optometrist, "because that dark tint makes your pupil dilate and invites more UV radiation to enter the eye." Also, look for glasses that have a uniform tint.

If you spend a lot of time outdoors, consider wraparound sunglasses that protect from UV rays that can sneak in around the sides of the sunglasses. If you're in contact with airborne materials — by cutting wood, for instance, or mowing grass — consider safety glasses or protective goggles.

2. Eat right

Carrots may get all the press, but it's those dark-green leafy vegetables (think spinach, kale, collard greens) that are vision-protecting powerhouses. They are full of the antioxidants lutein and zeaxanthin. Experts suggest these nutrients may block high-energy blue light, which can harm retinal cells, helping to protect vision and prevent the progression of age-related macular degeneration (AMD). Eggs are another excellent source of lutein and zeaxanthin. Add more color to your plate with carrots, sweet potatoes, butternut squash and red bell peppers. These orange and red veggies are rich in beta-carotene, which the body uses to make vitamin A, which is essential for

good vision.

There's also evidence that omega-3 fatty acids — found in salmon, tuna and sardines — can increase oil production, helping to prevent dry eye. "Omega-3 supplements have also shown to be helpful," says Davinder S. Grover, M.D., clinical spokesperson for the American Academy of Ophthalmology and an ophthalmologist in Dallas. Not wild about seafood? Nibble on nuts, legumes or seeds.

If your diet is missing key vitamins or nutrients, or if you have a diagnosed deficiency, ask your doctor about supplements. Research has shown that a specific kind of high-dose dietary supplement, called AREDS, may be beneficial in patients with intermediate age-related macular degeneration, slowing its progression and preventing it from turning to late AMD.

3. Exercise

Couch potatoes, take note. A Swedish study, published in the journal Ophthalmology, examined a possible link between specific types of physical activity, including walking, and a reduced risk of age-related cataracts in 52,660 participants between the ages of 45 and 83. Hoofing it more than 60 minutes a day — versus hardly ever — was associated with a decreased risk of cloudy lenses. Conversely, high inactivity levels may be associated with an increased risk. Another eye-opener: According to research from the University of California Los Angeles, brisk walking may also lower your risk of getting glaucoma, with the most active among us having a 73 percent lower risk than the least active.

The benefits may be two-fold. First, exercise is believed to decrease your risk of developing type 2 diabetes, heart disease and high blood pressure, all of which can contribute to cataracts. Cardio may also lower intraocular pressure (the pressure in your eyes), increasing blood flow to the retina and optic nerve. To achieve vision-boosting effects, you don't have to break much of a sweat: IOP can be lowered with a brisk, 20-minute walk a minimum of four times a week.

4. Give your eyes a break

If you're staring at a computer screen or doing another task that requires visual concentration, take frequent breaks to give your eyes a rest. Try the 20-20-20 rule: Look away from the screen every 20 minutes, focusing on something 20 feet in the distance for at least 20 seconds. "Get into the habit of blinking every



few seconds," says Thau. "Make sure that your upper and lower lids are truly touching, not a halfway blink." This will help spread a fresh layer of tears over the surface of your eyes.

Glare can strain eyes, making it difficult to see objects on your monitor. Consider turning off some of the overhead light or placing an anti-glare cover over the screen. Keep the screen about an arm's length away, and make sure it's at the right height. "Our eyes do best when the top of the monitor is at eye level and we're looking down into the screen," says Thau. You won't have to open your eyes wide when viewing the screen.

5. Get regular eye exams

"We recommend a general eye exam every one to two years," says Merina Thomas, M.D., a retina specialist and ophthalmologist at Oregon Health & Science University. "If you have a family history of eye disease, especially glaucoma or MD, you should get an eye exam once a year."

However, a Harris/AAO survey found that while almost 70 percent of adults see a primary care physician or family medicine doctor regularly, just 52 percent of those polled see some type of eye care professional on a regular basis. That's problematic, since age-related eye diseases — such as cataracts, diabetic retinopathy, glaucoma and macular degeneration — are more treatable if diagnosed and treated early. "The most silent common blinder of losing sight without any symptoms is glaucoma," says Grover. "It's asymptomatic and a silent thief of vision. But when caught early and treated appropriately, it's highly preventable."

The benefits of an appointment with your ophthalmologist or optometrist go well beyond keep your eyes in working order. A close inspection of the lens, retina and optic nerve can reveal a host of

systemic disorders — high blood pressure and diabetes, among them — sometimes before there are any other symptoms.

6. Watch your glucose levels

People with diabetes — type 1 or type 2 — are at risk for a disease called diabetic retinopathy, in which consistently elevated blood-sugar levels damage the blood vessels in the retina, the thin layer of tissue at the back of your eye. In its early stages, you may not even know you have it. But as it worsens, your vision takes a hit. It may fluctuate between clear and blurry. You may get floaters, poor night vision, dark or empty areas in your vision, or colors that appear faded. Left unchecked, it can lead to vision loss.

Following a healthy diet is key. That means cutting out sugar and refined carbs — and, yes, staying away from processed foods. Following the Mediterranean diet — lean proteins, such as chicken and fish, non-starchy vegetables and fruit — is ideal. And watch your weight. Carrying excess pounds, especially in the abdominal area, can promote insulin resistance.

7. Don't smoke

If you've had trouble kicking your smoking habit, use these facts for motivation: You are two to three times more likely to develop cataracts and twice as likely to develop AMD as a nonsmoker. "If you have early signs of age-related macular degeneration, smoking increases the risk of it progressing tenfold," says Thomas. "It can get much worse much more quickly." Why? Among other reasons, cigarettes contain hundreds of toxins that can cause oxidative stress and prevent proper blood flow from reaching the eye. And that irritating smoke can damage the tear film, increasing your risk of dry eye (not to mention the many other health problems associated with smoking). (Source: AARP by Barbara Stepko)