Be Aware Of Coronavirus

Aejaz Iqbal

The symptoms of most coronaviruses are similar to any other upper respiratory infection, including runny nose, coughing, sore throat, and sometimes a fever. In most cases, you won't know whether you have a coronavirus or a different cold-causing virus, such as rhinovirus. You could get lab tests, including nose and throat cultures and blood work, to find out whether your cold was caused by a coronavirus, but there's no reason to. The test results wouldn't change how you treat your symptoms, which typically go away in a few days.

oronaviruses were First Identified in the 1960s, but we don't know where they come from. They get their name from their crown-like shape. Sometimes, but not often, a coronavirus can infect both animals and humans.

Most coronaviruses spread the same way other cold-causing viruses do: through infected people coughing and sneezing, by touching an infected person's hands or face, or by touching things such as doorknobs that infected people have touched.

Almost everyone gets a coronavirus infection at least once in their life, most likely as a young child. In the United States, coronaviruses are more common in the fall and winter, but anyone can come down with a coronavirus infection at any time

Symptoms of Coronavirus

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You could get lab tests, including nose and throat cultures and blood work, to find out whether your cold was caused by a coronavirus, but there's no reason to. The test results wouldn't change how you treat your symptoms, which typically go away in a few days.

But if a coronavirus infection spreads to the lower respiratory tract (your windpipe and your lungs), it can cause pneumonia, especially in older people, people with heart disease, or people with weakened immune systems.

Prevention

- There is no vaccine for coronavirus. To help prevent a coronavirus infection, do the same things you do to avoid the common cold:
- Wash your hands thoroughly with soap and warm water or with an alcohol-based hand sanitizer.
 Keep your hands and fingers away from your eyes,
- nose, and mouth.

 Avoid Close contact with people who are infected.
- You treat a coronavirus infection the same way you treat a cold:

Get Plenty of Rest.

Drink Fluids.

Take over-the-counter medicine for a sore throat and fever. But don't give aspirin to children or teens younger than 19, use ibuprofen or acet-



aminopheninstead.

A Humidifier or steamy shower can also help ease a sore and scratchy throat.

Even when a coronavirus causes MERS or SARS in other countries, the kind of coronavirus infection common in the U.S. isn't a serious threat for an otherwise healthy adult. If you get sick, treat your symptoms and contact a doctor if they get worse or don't go away.

Symptoms

These illnesses usually only last for a short amount of time. Symptoms may include

Types of Coronaviruses

Common Human coronaviruses

Common human coronaviruses, including types 229E, NL63, OC43, and HKU1, usually cause mild to moderate upper-respiratory tract illnesses, like the common cold. Most people get

infected with these viruses at some point in their lives. These illnesses usually only last for a short amount of time. Symptoms may include

Diagnosis

Your healthcare provider may order laboratory tests on respiratory specimens and serum (part of your blood) to detect human coronaviruses. Laboratory testing is more likely to be used if you have severe disease or are suspected of having MERS.

If you are experiencing symptoms, you should tell your healthcare provider about any recent travel or contact with animals. Most MERS-CoV infections have been reported from countries in the Arabian Peninsula. Therefore reporting a travel history or contact with camels or camel products is very important when trying to diagnose MERS.

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Hygiene Is Our Best Defence Against Deadly Viruses

Suresh Pattali

hen I think back on the monumental events of our lifetime that had directly posed do-or-die challenges to me, nightmares of war-like preparations which I endured on two occasions still frighten me to death. One, the 1990 Gulf War following Saddam Hussein's invasion of Kuwait and two, the 2003 Sars invasion of Singapore.

My wife's early morning flight on August

2, 1990, from Thiruvananthapuram took off for Dubai without any clue that the world was about to wake up to a farrago of missteps by Iraq that would ultimately lead to Saddam's overthrow. By the time my wife's flight landed in Dubai, a single event had changed the course of world history whose rumblings are still echoing in the region's many simmering battlefields. "She brought a war to the Gulf," people still joke about my wife.

We lived on the edge the peyt few months.

We lived on the edge the next few months, stocking up essentials like rice, dal, candles, cooking oil, cans of water, etc. Government advisories and newspaper articles taught us the dos and don'ts, including how to air-seal windows and doors in the event of a gas attack by Saddam. Housewives were glued to CNN, making the American broadcaster and its war reporter Peter Arnett a household name. Residents of Dubai, who were ignorant about the phenomenon sonic boom that fighter jets leave behind, touched off rumours that Iraqi scuds had landed in urban areas like Bur Dubai and Karama. Families had one bag packed and ready which they could just grab and rush to catch the first available flight just in case. Fear stalked us at every step.

Life in Singapore in later years was as smooth as its eponymous cocktail, until 2003 when the SARS (Severe Acute Respiratory Syndrome) epidemic unleashed fears of great magnitude on that little nation of 5.6 million people. SARS first reached Singapore in February 2003 along with three Singaporean women returning after holidaying in Hong Kong, where they contracted the virus from a hotel guest, a doctor from Guangzhou, China. They were hospitalised for pneumonia but two of them recovered without infecting anyone. However, Esther Mok, the third woman, infected 22 close contacts before she eventually recovered. One of those she in-



fected was a nurse who subsequently infected a hospital patient who, in turn, infected 21 health-care workers, and five family members. They subsequently gave rise to a cluster of infections in other hospitals and markets.

What followed was a lesson for the world to remember in crisis management, which essentially focused on prevention and control. Hospitals checked the temperature of all visitors and took down their personal details to facilitate contact tracing. Hospital staff had to wear protective gear such as face masks, gloves, and gowns when attending to patients, and monitor their own temperatures daily. Temperature checks were also carried out at schools and workplaces.

The public was educated through schools,

community centres, clinics, and the print and electronic media on the symptoms of the disease and ways of its transmission. The government even distributed thermometers to more than one million households. My family also received the classic analogue thermometer, delivered at our deep stop.

livered at our door step.

The Ministry of Health invoked the Infectious Diseases Act on 24 March 2003 to quarantine and monitor all suspected cases. Some were confined to their own homes, with police deployed to enforce the curfew. Food was delivered from of shores to such homes.

ered free of charge to such homes.

We went out wearing surgical masks which also had a disadvantage as cabbies refused to stop and fellow passengers on public transport refused to share seats. Even a gentle sneeze at

a coffee shop would send people scurrying for cover. In the office, we opened doors using tissue paper. Such was the paranoia a new tissue was used for each door.

Business giants, including Singapore Press Holdings where I worked, drew up the ultimate contingency plan in the event of a SARS outbreak in their workplaces. They vertically split their workforce and moved one group to a different location, creating a functioning replica of the office. I was one of the team members who were relocated to an eerie industrial area where I worked till the situation stabilised.

At home, we fell victim to the acquired obsessive-compulsive disorder by bathing in medicated water multiple times - mostly, every time we returned from outside.

People avoided public or crowded places like swimming pools and shopping centres.

Coffee shops that were usually crowded in the evenings wore a deserted look. Tables lay cleared of the usual pile of crumbled-up tissue papers. Waiters wore surgical masks and the ones with high temperatures were kept off duty. Businesses took a plunge as visitor arrivals declined. During the April-June quarter of 2003, the economy contracted by 4.2 per cent year-on-year.

Gurmit Singh and his Phua Chua Kang group, Singapore's favourite comedians, provided the much-needed comic relief by cutting an educational rap called SAR-vivor that beguiled a nation in times of plague:

SARS is the virus that I just want to minus. No more surprises if you use your brain, use your brain, use your brain.

Seventeen years after the disease claimed 33 lives in Singapore, my children still sing the song, which bonded a nation in its battle for survival.

Despite the aggressive steps taken by China to contain the latest coronavirus that originated in its central city of Wuhan late last year, the disease has spread to countries far and wide. The biggest takeaway from the SARS crisis in Singapore was the heightened awareness of proper hygiene habits. This is the lesson China refuses to learn from past nightmares. The dragon must clean up its ugly backyard that breeds killer diseases

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