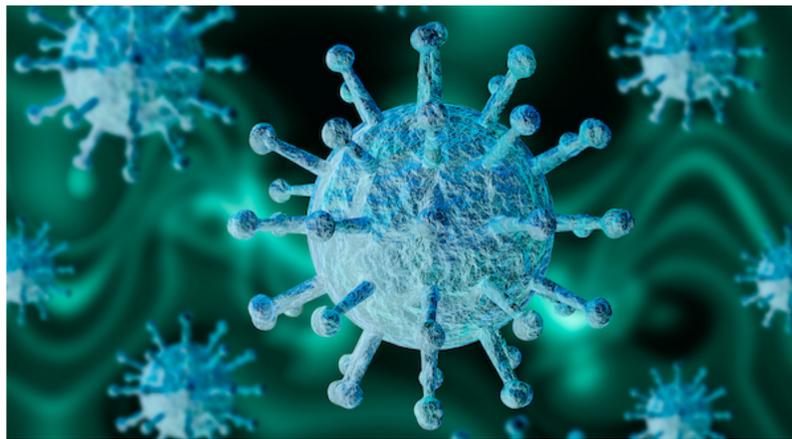


COVID-19 and influenza flu are both potentially deadly, but that's where the comparison ends

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All of a sudden — seemingly overnight — many people are speaking as if they're qualified epidemiologists and infectious disease experts. While I'm flattered that my profession has finally garnered the attention it deserves and we've all come to understand public health is of the utmost importance, what is also critical is that those dispensing information on how to keep us all safe are qualified to do so.

It appears that some Americans may regard the advice of popular television personalities with the same reverence as Dr. Anthony Fauci, the Director of the National Institute of Allergy and Infectious Diseases. It's even more mind-boggling when I hear misinformation from those who should know better. The other day, I attended a virtual seminar with cardiologists — all brilliant men and women in their own right — and a few of them shrugged off the novel coronavirus by equating it to a bad case of influenza.

This is patently false. So here are some hard facts, for those who think contracting Covid-19 is the same as your garden-variety flu.

Yes, at face value, there are some similarities: In the early stages, many cases are asymptomatic. And, when symptoms do appear, they have a few in common such as sore throat, fever, and cough. But that's only at the beginning. Afterward, we see stark and important differences.

First, the two diseases are caused by completely different viruses. Covid-19 is closely related to the same virus that causes SARS and, while it is not as lethal as that deadly disease, it can produce drastically severe complications in the body like the acute respiratory distress syndrome. And while Covid-19 can viciously attack the lungs, it can also wreak havoc on other organs such as the heart and liver.

The virus also *behaves* differently. The average number of people someone with Covid-19 is liable to infect is around 2.5 times more than someone with the flu. Although the flu should not be taken lightly — the CDC reports that the average annual number of deaths is around 40,000 and when severe can reach 80,000 such as in 2017. It's easier to achieve herd immunity than the novel coronavirus where we still don't quite know the percentage of the population who could be immune. We also know that we see flu infections peak during the winter months. While some are

predicting coronavirus infections will subside as the weather heats up, nobody really knows for sure.

As for the rate of infection, there's no comparison as to which virus is more lethal. According to the CDC, nearly 1 percent of those over 65 die if they suffer from the flu. With Covid-19, for those in the 60–69 age bracket, it is estimated that more than three percent may die and whopping 14 percent of patients over 80 succumb to the illness.

Now, there are some that say that those over 80 have had a long life, and death at these ages is inevitable. Remember, though, that 80 is approximately the life expectancy in developed countries and more than half of the population can expect to live beyond this age. The majority will continue to live active lives for many years after the age of 80. So to those cynics, I ask, is it acceptable that COVID-19 could double the mortality rate in this age?

The statistics bear this out: In developed countries, about 1 in 200 people die every year from a variety of causes. More than 50 percent of those are over 80. But if half of the population became infected with COVID-19 in one year and one percent of those people died from the infection, the mortality rate would easily double. In the U.S., that would translate to 1.5 million coronavirus deaths. Some have accused public officials of generating fear among the general population when there is no need for alarm. Yes, it's true that we're used to the flu season and the tragic amount of death associated with people who die from the virus, but Covid-19 can kill many more.

Remember, the nearly 60,000 COVID-19 deaths we're seeing in the United States is *after* strict social distancing policies were put in place in many states. An untamed coronavirus pandemic will only add to the death toll we already expect to see from the flu which would result in a devastating and alarming statistic that nobody wants to see.

There is also, of course, a vaccine for the flu. And while it doesn't cover all strains of the virus, it has proven to be extremely effective in keeping the spread of the disease at bay.

For COVID-19, on the other hand, we don't have an effective treatment, let alone a vaccine. Letting this virus spread like wildfire again in our communities would be extremely reckless and we must remain cautious until rapid testing, expedited (and affordable) treatments are put in place or — in the best case scenario — we have a vaccine.

So while some restrictions are being lifted as we head into the summer, please remember that this virus is still very much with us and can come roaring back to life. For now, scientists and health care providers are gaining a better understanding of how to combat the virus. In some countries, for example, we're seeing more and more formerly critically ill patients being discharged from the hospital. This is an encouraging sign.

We all want the economy to get back on track. But as clinical trials are underway to develop better medications and vaccines, I encourage everyone to continue to demonstrate caution. While we like to see our lives return to normal as much as possible, a measure of physical distancing and good hygiene will be good practice for the foreseeable future.

And, please, listen to the experts.