Daily Updates

The president advises the country against what medical experts are telling us

Late last week the president announced he tested positive for COVID-19 and there have been reports that he may have tested positive before it was told to the public.

The facts of the situation remain that the president was infected with COVID-19, went to Walter Reed Medical center where a team of at least ten doctors gave him the best medical attention and medicine the world has to fight the SARCoV-2 virus which included experiment treatments. The president over the weekend also got into a hermetically sealed vehicle to wave to his supporters who came to the facility where he was being cared for to wish him well. Yesterday the president announced via Twitter that he would be returning to the White House.

"I will be leaving the great Walter Reed Medical Center today at 6:30 p.m. Feeling really good! Don't be afraid of Covid. Don't let it dominate your life. We have developed, under the Trump Administration, some really great drugs & knowledge. I feel better than I did 20 years ago!" the president tweeted hours before leaving.

In the evening the president did return to the White House, where he waved to people from the balcony. Some noted his labored breathing as a sign that the infection is impacting him more than he is letting on.

The virus for almost everyone who has come in contact with it, even those not showing symptoms, takes more than a weekend to recover from. So odds are that while the president may be feeling better, he is most likely not out of the woods just yet as his doctor, Dr. Conley said at a briefing. John Hopkins Medicine has reported that recovery time frames may be two weeks or even longer depending on how severe your symptoms are.

Those with a mild case of COVID-19 appear to recover within one to two weeks. For severe cases, recovery may take six weeks or more, and there may be lasting damage to the heart, kidneys, lungs and brain.

About 1% of infected people worldwide will die from the disease.

The information about the heart, kidneys, lungs, and brain are why we shouldn't assume anything about the virus. Much is still not known about it. While yes, only 1% of people worldwide are predicted to die from this virus, the 99% who get it and survive, may have long lasting, side effects that aren't understood yet because of how new the virus is.

While his advice of not living in fear is something that other presidents have said during dark times for the country, his advice is in stark contrast with what medical experts who understand this virus best and how to keep people safe from it.

Understanding two dose vaccines

There has been talk that when a COVID-19 vaccine is available, it will need to be administered in two doses. Although there has been some promising research for Johnson & Johnson's single dose vaccine, it seems most likely that we will need two doses of the vaccine to build up our immunity.

As many of us will be getting a two dose version of the vaccine, it may be important for us to understand two dose vaccines as explained by the CDC.

•For some vaccines (primarily inactivated vaccines), the first dose does not provide as much immunity as possible. So, more than one dose is needed to build more complete immunity. The vaccine that protects against the bacteria Hib, which causes meningitis, is a good example.

• For some vaccines, after a while, immunity begins to wear off. At that point, a "booster" dose is needed to bring immunity levels back up. This booster dose usually occurs several years after the initial series of vaccine doses is given. For example, in the case of the DTaP vaccine, which protects against diphtheria, tetanus and pertussis, the initial series of four shots that children receive as part of their infant immunizations helps build immunity. But a booster dose is needed at 4 years through 6 years old. Another booster against these diseases is needed at 11 years or 12 years of age. This booster for older children—and teens and adults, too—is called Tdap.

• For some vaccines (primarily live vaccines), studies have shown that more than one dose is needed for everyone to develop the best immune response. For example, after one dose of the MMR vaccine, some people may not develop enough antibodies to fight off infection. The second dose helps make sure that almost everyone is protected.

• Finally, in the case of flu vaccines, adults and children (6 months and older) need to get a dose every year. Children 6 months through 8 years old who have never gotten a flu vaccine in the past or have only gotten one dose in past years need two doses the first year they are vaccinated. Then, an annual flu vaccine is needed because the flu viruses causing disease may be different from season to season. Every year, flu vaccines are made to protect against the viruses that research suggests will be most common. Also, the immunity a child gets from a flu vaccination wears off over time. Getting a flu vaccine every year helps keep a child protected, even if the vaccine viruses don't change from one season to the next.

The Bottom Line

Some people believe that naturally acquired immunity—immunity from having the disease itself—is better than the immunity provided by vaccines. However, natural infections can cause severe complications and be deadly. This is true even for diseases that many people consider mild, like chickenpox. It is impossible to predict who will get serious infections that may lead to hospitalization.

Vaccines, like any medication, can cause side effects. The most common side effects are mild. However, many vaccine-preventable disease symptoms can be serious, or even deadly. Although many of these diseases are rare in this country, they do circulate around the world and can be brought into the U.S., putting unvaccinated children at risk. Even with advances in health care, the diseases that vaccines prevent can still be very serious – and vaccination is the best way to prevent them.

For more information visit the CDC's website or NIAID's website for information on COVID-19 and other vaccines.

Source: https://www.cdc.gov/vaccines/hcp/conversations/downloads/vacsafe-understand-color-office.pdf