

[https://www.medscape.com/viewarticle/927225?nlid=134651\\_5402&src=wnl\\_dne\\_200324\\_mscpedit&uac=172207AZ&impID=2322202&faf=1](https://www.medscape.com/viewarticle/927225?nlid=134651_5402&src=wnl_dne_200324_mscpedit&uac=172207AZ&impID=2322202&faf=1)

# How to Respond to COVID-19 Deniers

*Editor's note: Find the latest COVID-19 news and guidance in Medscape's [Coronavirus Resource Center](#).*

For most of us in the United States, a world health crisis has never touched us. Older Americans may remember polio when social establishments shut down and children were isolated in their homes all summer, but recent global infections haven't impacted Americans' day to day life.

And then in a matter of weeks, [COVID-19](#) popped up in Wuhan, China, traveled the world, crossed American shores, and entered our neighborhoods. We now have national guidelines to limit gatherings to no more than 10 people. Schools are closed, people are working from home, and restaurants, bars, and gyms are shutting down.

Similar to the days of polio, it's critically important for us all to be on the same page. Public health experts are stressing social distancing will save lives.

But not everyone is on board with social distancing and other measures to control COVID-19. On Twitter and Facebook I see people essentially bragging that they're out to dinner in crowded venues. Some of my friends still want to give me a hug.

Here are a few of the most common arguments I'm hearing – and how I respond.

## **Myth: "Coronavirus is just like the flu – it'll all be ok."**

COVID-19 is similar to the [flu](#) in how it's transmitted – via respiratory droplets and contaminated surfaces. And that's why many of the preventive measures we talk about are the same as the flu. To stay well, avoid people who are sick, wash your hands for the full 20 seconds, and avoid touching your face. If you are sick, cover your mouth and nose when you cough, stay home if you're sick, and wash your hands for the full 20 seconds.

But the two viruses are different in ways that are significant and dangerous.

Flu has a vaccine; COVID-19 does not. The flu vaccine protects all of us, including our vulnerable populations who are frail or who have medical conditions. People who get the flu when they've taken the vaccine tend to have milder, and shorter illnesses. A vaccine for COVID-19 won't be available for many months, if even then. Everyone is vulnerable.

Flu has established treatments; COVID-19 does not. Our flu treatments make the illness milder and shorter. When someone does get hospitalized with the flu, the doctors and the health care team have experience treating the flu. With COVID-19 we don't have a treatment. This is new for everyone. And while many patients will have mild symptoms, around 20% need significant treatment for their shortness of breath and [viral pneumonia](#) at a hospital. This is different from the flu where [less than 2%](#) of patients require hospitalization.

### **Myth: "I don't need to worry about getting sick. I'm healthy."**

Are you really as healthy as you think? Sixty percent of Americans have at least one medical condition whether it's high blood pressure, diabetes, sleep apnea, or something else.

And feeling healthy may not guard you from danger. What really seems to be protective is youth, not being young at heart. In China the majority of patients were age 30 or older. And the group with the highest mortality was in their 70s. The median age for hospitalizations there was in the early 50s – this isn't an illness only impacting our oldest, sickest adults.

And while, thankfully, 80% of those with COVID-19 have mild symptoms, the mortality for COVID-19 is high. It's between 1-3% compared to the flu which is 0.1%. To put that into perspective, if 1 in 100 people die from COVID-19, that could be someone in your neighborhood, or someone from the last wedding you attended, or someone related to your child's classmate.

### **Myth: "Coronavirus is not in my area, so I can go out."**

You don't *know* it's not in your area. There's been a shortage of testing in the United States, so we don't have an accurate idea of how many people – or what areas – have truly been affected.

Individuals can shed the virus for up to 2 weeks before they get sick. That's why the quarantine for COVID-19 is 14 days. You can be out and about standing by someone who is infectious but not yet sick. Alternatively, you could be the one who is positive and inadvertently spreading it to others. This is part of what explains the rapid spread of the disease. People don't realize they are infectious.

This is why social distancing is so important. By severely limiting our interactions with each other (even if we *think* we're healthy), we have a chance of slowing the progress of the virus. If not, if COVID-19 spreads quickly and many people get sick at once, the U.S. won't have the medical resources to take care of patients. Our situation could be similar to Italy and Germany where there is a shortage of ventilators for critically ill patients.

I understand that the naysayers may be acting out of a false sense of security. Or, they may be downplaying the seriousness of the situation out of fear. But with lives at stake, we simply can't afford to deny the danger.

If we each do our part we will make a difference and flatten the curve. Look at polio, with global collaborative efforts polio is now 99% eliminated in the world. Today with the COVID-19 crisis, social distancing buys us the critical time we need to save lives.

*This blog post originally appeared on [WebMD.com](https://www.webmd.com).*