Hello and welcome to the Rx Counter a podcast produced by student pharmacist at the University of Iowa College of Pharmacy where we provide student insight into the pharmacy profession. I'm your host Emily style and here today is Tanner fry, who has brought Han coronavirus looks increasingly like a pandemic, experts say by Donald G. McNeil Jr. To the counter today. Tanner, thank you for joining us the counter is yours.

Unknown Speaker 0:26
Thank you, Emily. This is so the move on coronavirus has been a pretty new and popular topic for the past two, three months. And this is something that I personally didn't read a lot into until lately when I've had a lot of family and friends asked me about it actually. So this is something that I thought would be good to discuss. And so we can educate beyond our means to the other people in the world about uhand coronavirus, and it's definitely brought up some major concerns about putting a lot of transmissible is like, Can we contain it and prevent the spread of disease? People are probably fearing it so much because of how much we don't know about it to kind of visibility about it. But I think an important thing to note about it is that and something that a lot of public doesn't know is that the coronavirus is actually like a typical common cold virus that just like your Rhino viruses and whatnot, and so that in some way we can infer how people will react to it by looking at how other perona viruses

Unknown Speaker 1:44
have

Unknown Speaker 1:47
basically been present in people so that I can open the floor to any questions or the

Unknown Speaker 1:52
difference how you said it was a comment like it's like a common cold. So what's the difference between the coronavirus That maybe a lot of people have and the different and the coronavirus, the coronavirus that is creating this once said to be a pandemic.

Unknown Speaker 2:09
Okay, so, um, I mean, some typical characteristics of like Corona viruses is that the Pekin winter, and so that kind of matches this one. How many kind of I think it was in December is when it was introduced, but they do also have a tendency to come back in the next like previous years well, but one thing to know definitely is that they're not threat as much as like the flu, for example, which a lot of people don't know how dangerous the fluids but they typically cause a range of respiratory illnesses, kind of like your common cold ones. But with this whoo Han virus.

Unknown Speaker 2:54
I think

Unknown Speaker 2:56
what people see about it is just mostly like they see that people are dying. From like a certain percentage, and that's all they look at, and they're like, Am I gonna die from it. But an important though is also like, how it also depends where you live. Being in the US, we have a lot more tools, I think for prevention. Even if people do get the disease, there's a lot we can do to help them. People are generally Mount nutritions or anything like that. So they're definitely not as much as a risk here as some other maybe underdeveloped societies.

Unknown Speaker 3:36
In China, the death rate of it is around 10%. So it's not like half the people that are getting it are dying from it.

Unknown Speaker 3:43
Well, I'm absolutely opinion about that. So the actual number of this Okay, the best way is actually you have to have both the number of deaths and also number of infected so the number of infected might be Seriously, underestimate. Now because few reasons from what I have written is that when the academics started to have very limited resources to diagnosis, so now people being under diagnosis and a lot of people died when they were on diagnosis to the team to the
case are lost to that 2% or 4% mortality rate is not something we should rely on. But what I have seen individual cases that there were people being Otherwise Otherwise pretty healthy, and they die really quickly. So it's can be so the seriousness of this disease might be estimated, so we need to be be aware that the statistic right now is not reliable. That's the point we don't make. So everybody to be aware of with that.

Unknown Speaker 4:58
Especially because a lot of the day Going to determine what death rates are, are from an ongoing epidemic. We're like Bowen said, we still don't know all the people that have had it and died before even realizing what it was. And the people that haven't Now, that may go on to die. So the number of the valleys hard to determine, but I think it's safe to say that it's less deadly less potent than the common flu. But we already have, you know, infrastructure to support that we have easy diagnosis, we have preventative measures. And I feel like this is interesting for something to happen at this scale, or the severity at this time because it's a come like a back and forth between two main concept we're in the most advanced age in human history where we can have the best technology available. We have the best communications available, but we have the best sanitation infrastructure available. But we also have the ease of movement, like we've never known before. I mean, the cruise ship that just got out they've can bounce around the world, like what three days to go all the way around, which is and people can fly to from New York to Australia to China in one day, and that's three continents and like a few thousand miles in less than 24 hours. So it's a balance as a concept between the inferred the health infrastructure we have, but also the transport infrastructure we have, which is what I feel like makes this interesting to see how it develops and see how our system will react to it. Because along with communications, there's also collaboration, academic, or just policy wise

Unknown Speaker 6:58
and know that there's a

Unknown Speaker 7:01
The after it was announced I think the genome was published in like less than a week, which is phenomenal and astounding fast to, for an entire genome for I don't even know how many nucleotides the coronavirus has but it's not like four, it's on a scale of thousands or millions. So just the destruction we have to fight it, but also the infrastructure that it has to move. I feel like it's going to be interesting dynamic to see go head to head here.

Unknown Speaker 7:33
I think when we hear about communicable diseases, we get kind of excited as general consumers of healthcare. And obviously we have the healthcare background and literacy that we understand. Maybe this isn't as concerning as just what we are used to on a daily day to day basis, but influence whoever general public how they consume, their healthcare is going to be different, a lot different from how healthcare providers do. So what does that mean? It means they have the mob mentality. mob mentality is they hear somebody talking about coronavirus growing up I've never heard of coronavirus but it sounds cool. What is it? Oh people have died from it. I'd better prevent myself from getting it. Do I know anything about coronavirus? No, but I heard someone died from Little did they know that coronavirus and how that presents is similar to rhinovirus or the common cold. So, right then and there, we have the general public not even be able to decipher what the difference between the two is, in order to even understand that they are both dangerous diseases. So how do we as pharmacists is dedicated healthcare providers in the general community and for people to take ownership of their health, not only when they hear about coronavirus or bola or any other communicable diseases, but at all times when they hear about you know, maybe their friend guy influence a but they don't want to get the flu shot because one time the flu shot made them feel upset. How do we convince them persuade them that

Unknown Speaker 9:02
it's important to still be flu shots, to do those preventative measures, I

Unknown Speaker 9:08
think that's probably one of the biggest opportunities that we have as pharmacists for just general education. Because we mean, we talked about all the time how we have this ability, we have this accessibility that no other that few other healthcare professionals have. And that along with that comes with with our ability to unionize. So those two together I feel like really gives us a unique opportunity and perspective to talk to people about preventative measures. I mean, even if they do get it, there is a medication that's already has pretty good efficacy, efficacy in terms of treating it, like
oseltamivir with liberty, we're in return of here. So like they're all available, I mean, they'll open your ears actually like a really old HIV. medication. But all three of them together apparently has decent efficacy data and sitting behind and what's been used to for cures? What the exact date is I'm not entirely sure. So I'm not going to go out and say, do it if it happens, because that's not my place.

Unknown Speaker 10:14
So at the same time, Tamiflu in my opinion kind of gives people a safer, they think that if I do get the food that I can go take these beds, and then I'll be good again. I don't need to get my flu shot because I have this secondary option to get it, then I can take the lead. So how do we that's a demographic of people that are the most susceptible. How do we reach out to them? How do we persuade them and to say, you know, let's talk about how the utility what you look into valuing getting the flu versus valuing maybe some symptoms, side effects of the flu shot because people who have experienced influenza, know that that it's not fun to take them out to the hospital. They are in the hospital for sometimes weeks. Some people actually die from it. A lot of People can actually die from it. So how do we give them to understand that, you know, influenza is not fun to get just as dangerous, if not more dangerous and definitely more possible that you get it than the corona virus? And how do we get them to take those preventative measures?

Unknown Speaker 11:17
Well, I think one thing that we can educate a patient that preventive measures always better than treatment, if we can prevent it from happening is often better because Okay, so let me talk about something about the stops. So when SARS came, came out, and strict channel I was pretty young, I was I was leaving China at that time, so so I basically experienced the whole thing. So one thing that they're kind of similar from the source and the nuclear Nova is that at a very short period of time, a lot of people get infected so basically dissociated the hospital door to healthcare system. So imagine you have a 10% population got infected and need to be admitted in the hospital. get treated, we're going to happen. There's no extra resources for anybody else. So that kind of circumstance, the best way to protect yourself and your family, it just don't get it. Right. So preventive measures, always the best choice you you can't you can't choose before. Since getting really nasty.

Unknown Speaker 12:21
I think that brings an important point when we counsel while we get the flu shot. It's not just for yourself, you are protecting the community, your friends, your friends, your family, your loved ones. If you're not getting it for yourself, at least do it for them. And then maybe for yourself, you can practice safe handwashing and maybe if you want to wear a viral protective mask, go ahead and do that if that makes you happy and that makes you feel comfortable and do that. But if you're going to put other people first and your consideration for your family and your loved ones first and then I think it's important that you do get a shot. You make sure that you are protecting that just yourself to everybody else in the community. So I think how we talk to consumers of health care about this is very important. We are educated that this is an efficacious joke. That's great. We know about that. They don't necessarily know about that. We are taught that influenza is a dangerous virus we know about that. They don't know about that. They know, Corona virus and dangerous because somebody wrote about it on social media. And that's not a bad thing, that they're at least taking ownership of that part to understand a little bit more about what the new and upcoming viruses are. But we need to take that step to bridge the gap on to the rest of the healthcare spectrum and say, Hey, this is important that we take those preventative measures, but it's not just saying get your flu shot. If you don't do that. It's telling them why they do it, why it's important, why it will benefit not just them but everybody else in the community and not being judgmental for the responses. It's important to hear out why they might not want to why somebody told him that they shouldn't get why they have bad experiences. So listening and just being able to be that person that listens to them and then make it. Give them guidance into what they should be doing. Least have them understand where you're coming from a non judgmental way.

Unknown Speaker 14:23
And being proactive as a dispenser of medications, and talking about things like preventative care, what do you know about the flu shot or the flu or the corona virus because we all have a little gap of time, when we're waiting for our registers to ring out the person and there's this awkward silence of I don't really want to say anything. patient doesn't want to say anything. They're just gonna stare at the counter for a little while. But that's a great opportunity for us to say, Hey, have you gotten your flu shot yet? or open up a door dialogue about any sort of infection that's going on. And that'll actually get a conversation rolling. And they may just say, Yeah, I got my flu shot a couple months ago or
whatever. It's been a year. I got it last year. And then you can say, all right, well, you want to get it now because we can do that at the pharmacy. Or what do you know about the coronavirus? I don't know anything, what should I be doing? And then they can start asking you questions, then you can start giving them information. But really just taking advantage of any opportunity. You have to talk to a patient a little further, especially when there's downtime is important.

Unknown Speaker 15:41

brings up a great point, I think, within the community setting especially, there's such a unique opportunity that you're having hundreds of patients that you see on a daily basis that you can have an impact. And that's not just I'm giving them their chronic care medications and I'm hopefully lawyer, they're able to cholesterol, it's I can educate them on anything that they want to learn more about anything that can benefit their healthcare. And that opportunity is always there when they come to the pharmacy. So taking advantage of that is extremely important. I think we need to get less into the here's your medications Goodbye, and more into what's concerning you about your health care. How can I make an impact on your care? What things are you interested in changing? How can we change it, we need to really involve evolve into that health coach role, and be able to coach patients into their healthiest lifestyle. And that's also a great way to build a very core patient. Because if we keep on just sending them on their way, without that conversation happening, we're no longer the healthcare provider. We're just addressing them. And they will look at us like that. So being able to give that to them just builds that rapport so I'm going to be mid later down the line when they do hear about something that they're interested in, and they do hear about, maybe I shouldn't have to shower, maybe I should tell me more about it. All it takes is that one relationship with a reporter to be to be built.

Unknown Speaker 17:14

Getting back to the article, it talks about them looking at ways to build a vaccine against the corona virus. Just kind of wanted to get some thoughts about that. And you know why we didn't do that back when SARS and MERS was infecting everyone and a vaccine takes years and years to develop. We think it's worth it. To do that, especially for a virus it's similar to the common cold but why haven't we built a vaccine against the common cold then already? Well,

Unknown Speaker 17:56

the common cold, it mutated so fast. We all kind of know that because and I believe the stars The thing that many years ago they did have some kind of a news report saying that some people with developing the was developing the vaccine for somehow to kind of lost track wasn't really successful I do believe just new company that the using some sort of algorithm to design a vaccine using computer. We can interesting I was I want to see that how that will work.

Unknown Speaker 18:32

Yeah, I think we have outside we have since it's been, what 10 or so years since SARS virus we have the more technology and people interested in doing this. And also with it being the flu epidemic that it is possibly becoming a pandemic. There's a lot of resources that you know, our FDA and other international organizations can throw at this and we can throw all of our stuff into finding the treatment and finding the vaccine. So kind of mobilizing these resources that are available in kind building this network for if we are to have a pandemic and we want to stop it from becoming a pandemic, we're really throwing all the resources. So I think, you know, if we can get a vaccine, like I think they've come up with an Ebola vaccine, I think we're able to do this, I feel like we should try and limit the amount of mutation that like the common cold virus goes through. I mean, is this or is this virus also going to mutate? And by the time that we get a vaccine all through testing, is this pandemic going to be over? So at that point, like, Is it more worth throwing all of our resources into creating a vaccine or educating the public about how to prevent it, like in ways besides a vaccine if we can't produce a vaccine quick enough?

Unknown Speaker 19:43

I think both.

Unknown Speaker 19:47

manufacturers are faced with a tough decision because that is very expensive. When we look at how influenza vaccine changes every single year, or it switches based off of the most common countries and strains. And that's how they've kind of dealt with mutations since they switched it up. But this is years and years of research, and every single year,
who, in the CDC pretty sure, put an extensive amount of time into figuring out what's going to be in the next following years. vaccine protocols? It will, it will definitely be beneficial to have a Corona virus vaccine. I think that they definitely think about that as well. But they do have to think about the financial aspect to it as well. I mean, I the funds there

Unknown Speaker 20:36
is the time there is a going to be eradicated by the time we come out with it.

Unknown Speaker 20:42
They do think about those things. It's just a challenging situation because we don't know how long it's going to last and we always it could be the next flu and everybody the corona virus vaccine every single year. We don't know that until I guess mutates enough to understand Saying more about it, but it's never going to harm anybody but doing research on it and trying to figure out more about it. And then one thing, I think that not

Unknown Speaker 21:08
everyone knows that the corona virus itself is not new, but this blue Corona virus is new. And that's what's getting people scared. And it's easy to, you know, shift some blame, because it's originating from a certain place. But really, it happens all the time. It's just on a different scale. And I think that also goes to show like some social or other stigmas that are associated around healthcare, and what this virus is doing for people in the United States versus people in China, or even Asian Americans as well, for the stigma that's associated.

Unknown Speaker 21:50
That gives us another

Unknown Speaker 21:54
void politics

Unknown Speaker 21:57
does still give us another opportunity to talk to patients educate them about that, because I guarantee you, not all of them, if not any of them understand that because Corona to them. It's just that they were that came up into the head and not their newsfeed. And they're just like, oh my god, this is the newest virus that I could die from, as you mentioned, as we know, it's not new. How do we educate them about that we have the opportunity when you come, maybe ask us a question. Do we do you have any bad spiral? masca your pharmacy and we all answer No, because nobody has.

Unknown Speaker 22:28
That is the opportunity for

Unknown Speaker 22:30
us to educate them. Well, you know, what are you using the viral mass for because I guarantee you it's not for whatever, like go to the hospital visiting a friend and family. They want to use it on a daily basis now, because they heard about this. There's not just a mass surge and wanting to use viral mass because it looked cool. So we have an opportunity. That's a conversation starter right there. I think some people just pull it off and say No, we don't. You can try out this pharmacy and then they leave and that was a wasted opportunity. Because every time they come in there and said, yo viral mask, and we say no, that's a conversation started, what are you using it for? What do you want to use it for them why you can start about it, start the conversation, have it with them and educate them because they would benefit from it.

Unknown Speaker 23:13
Not only that, but I think just as pharmacy students to enter, you're saying some new friends just Hey, hey, what do you know about this? Because people are going to turn to us not necessarily as pharmacists, but as members of the healthcare team. People are going to ask us questions about health care and on this and disease, manner of health care. So I think that's just an important thing for us to realize our role, not only in the system, but also in society.
Well, that's all the time we have. Thank you, Tina, for sharing. We hope you learned if you did pass the lessons along to your friends and family. Thanks for listening and we'll catch you next time at The Rx Counter.

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