

COVID -19 WHAT IS IT & WHAT IS MY RESPONSIBILITY?

Gold Country Baptist Church
8-8-2020

Covid-19 What is it and what is my responsibility?

- This class is intended to provide medical facts and related spiritual principles so that you can make wise decisions in various circumstances and be a good witness of our Lord and Savior Jesus.
- This class is not intended to interpret regulations or recommendations or make general recommendations due to the significant differences in various situations.
- The opinion or perceived opinion of individual panel members may not represent those of other panel members or GCBC.
- We desire to equip the saints in order for you to do the work of ministry of reconciliation and building up one another. Gain reliable knowledge and make informed decisions and take actions that glorify God.
- **May God be glorified in our time together!**

Introduction: Why are we here?

Corinthians 5:14 For the love of Christ compels us....

(motivated by the Gospel to love God and others)

God is a giver and we want to be one also

Spiritual Aspects: What is our responsibility?

We are responsible to come to know the theology of the **Sovereignty of God**

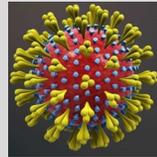
We are responsible to choose a reliable source of **Knowledge**

We are responsible to submit to God's sovereignty and apply **Wisdom** in doing so

Spiritual Aspects: We are responsible to come to know the theology of the **Sovereignty of God**

True or False:

1. COVID 19 molecules are random and out of God's control.



.00004"

GOD Infinite.

Genesis 1:6 He is omnipotent-all powerful. He creates matter out of nothing by speaking
Colossians 1:16, 17 He created all things and holds all things together.

2. COVID is so powerful that no good can come from it.

Romans 8:28, 29 God works all things together for good,
to conform us to the image of His Son. (!)

3. God dictates: what men, including governments, are authorized to do and who they are to submit to.

Bible!

4. Satan is a liar & destroyer. He wants to cause disharmony, division & dissention between men, especially believers.

John 8:44 Jesus speaking of Satan – reveals his attempts to undermine the Sovereignty of God – did God really ___

We are responsible to choose a reliable source of Knowledge

If you want reliable, spiritual information for application - we study, investigate, rightly handle the _____

2 Timothy 2: 15so we won't be ashamed!

If you want reliable, medical information for application – we study, investigate, rightly handle:

Social media?

Our best friend?

Biased media?

Unbiased Medical professionals?

Unbiased scientific reports?

Bias factors

The more public the less reliable - sensationalism

Raw data is better data

\$\$\$\$ influences – filtering, spins, out of context, etc. - consider duckduckgo search engine

Beware of leaders or officials that deny the possibility of bias influence

Look for reference source or footnote

Work hard at being a critical thinker – make responsible, informed decisions

c.f. Proverbs – reliable Knowledge is valuable, don't be fooled and ashamed.

The Christian Post August 4, 2020

CDC director agrees hospitals have monetary incentive to inflate COVID-19 data.

- U.S. Centers for Disease Control and Prevention Director Robert Redfield acknowledged during a [House hearing](#) Friday that COVID-19 data could be inflated because hospitals receive a monetary gain by reporting COVID-19 cases.
- Republican Rep. Blaine Luetkemeyer of Missouri questioned Redfield during a House Oversight and Reform subcommittee hearing on coronavirus containment. He asked about the “perverse incentive” for hospitals to classify deaths as being coronavirus related when the virus didn’t cause the death.
- Luetkemeyer voiced concern about how an automobile accident-related death could be [recorded](#) as a COVID-related death. In this scenario, the death was recorded as COVID-related because the virus was in the victim’s system, even if the car accident was the major factor.
- “As long as you have COVID in your system you get to claim it as a COVID death, which means you get more money as attending physician, hospital, whatever,” Luetkemeyer said during the hearing. “Would you like to comment on that, about the perverse incentive? Is there an effort to try and do something different.”
- Redfield responded by telling the congressman, “I think you’re correct in that and we’ve seen this in other disease processes too.”

<https://www.christianpost.com/news/cdc-director-agrees-that-hospitals-have-monetary-incentive-to-inflate-covid-19-data.html>

Why?

The initial comment was made by Minnesota State Sen. Scott Jensen, a family physician, who [spoke](#) with Fox News host Laura Ingraham on April 8 about the idea that the number of COVID-19 deaths may be inflated. Jensen was responding to National Institute of Allergy and Infectious Diseases Director Anthony Fauci, who — while answering a reporter’s question about that theory — [said](#) “you will always have conspiracy theories when you have very challenging public health crises. They are nothing but distractions.”

Jensen, April 8: I would remind him that anytime health care intersects with dollars it gets awkward. Right now Medicare has determined that if you have a COVID-19 admission to the hospital, you’ll get paid \$13,000. If that COVID-19 patient goes on a ventilator, you get \$39,000, three times as much. Nobody can tell me after 35 years in the world of medicine that sometimes those kinds of things impact on what we do.

In an interview with FactCheck.org, however, Jensen said he did not think that hospitals were intentionally misclassifying cases for financial reasons.

<https://www.factcheck.org/2020/04/hospital-payments-and-the-covid-19-death-count/>

We are responsible to submit to God's sovereignty and apply **Wisdom** in doing so.

Recognizing God's sovereignty – creator, sustainer and Lord:

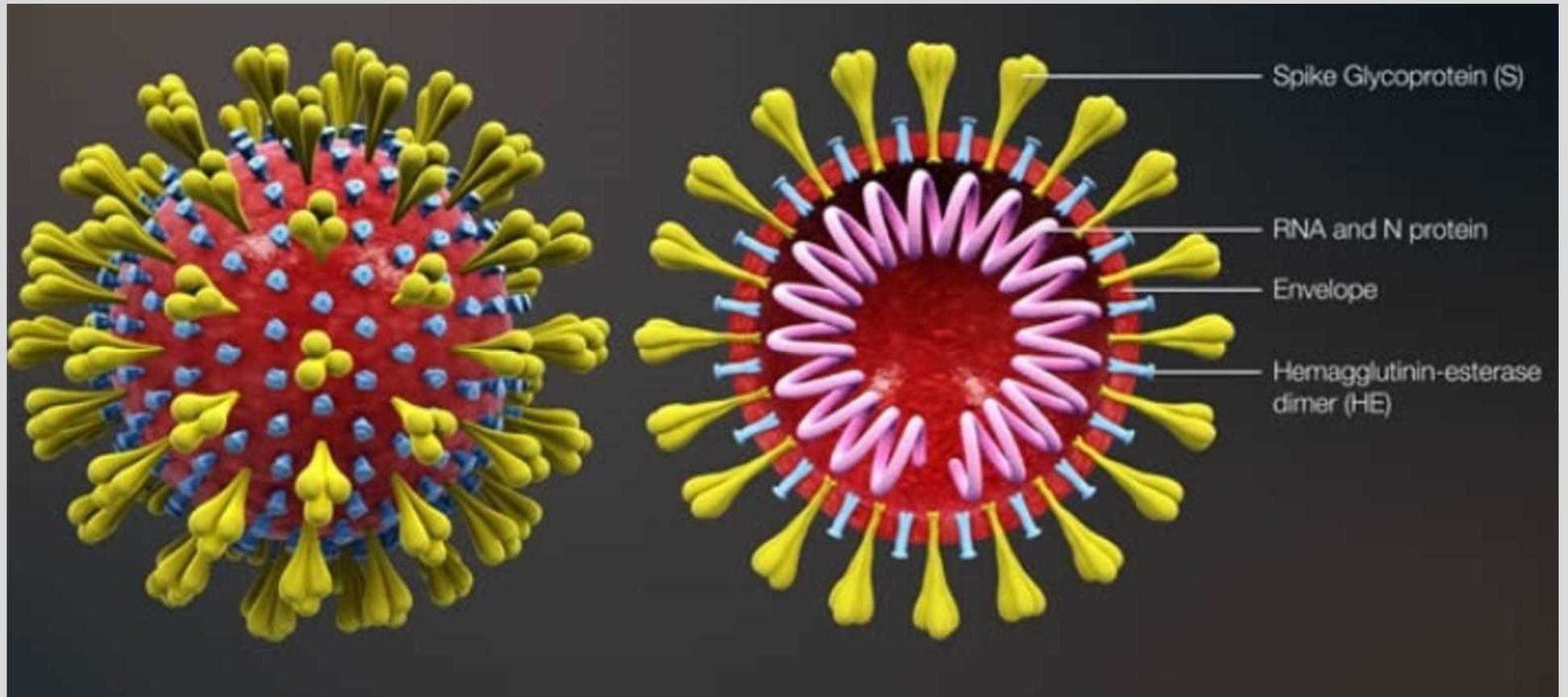
We are to use reliable knowledge to act responsibly.

Colossians 3:17 And whatever you do, in word or in deed, do everything in the name (as a representative) of the Lord Jesus,...

Ephesians 5: 1, 2 Be imitators of God ...And walk in love, as Christ loved us....

Practical applications/scenarios:

Here's your Corona - enters through mucous membranes – replicates in lungs. Could lead to SARS Severe Acute Respiratory Syndrome



Rate of Transmission — This guy & Dr. Foltz know their stuff.

<https://www.youtube.com/watch?v=YRfwZcLeOm4>

Ninja Nerd Covid

The whiteboard content includes:

- Handwritten notes: "BAT", "Host", "SARS-CoV-2", and a small Italian flag.
- Equation: $\text{RATE OF TRANSMISSION} = R_0 + S_I$
- Diagram: A transmission tree starting with one green node at the top, branching into three red nodes, which then branch into a larger group of purple nodes, and finally into a large group of light blue nodes at the bottom.
- Graph: A coordinate system with the y-axis labeled "# of CASES" and the x-axis labeled "TIME". A purple curve shows exponential growth, while a green horizontal line represents a constant baseline.

Video player controls at the bottom show a play button, a volume icon, and a progress bar at 13:48 / 47:27.

Protect your T-Zone

E.N.T.

Eyes, Nose, Throat



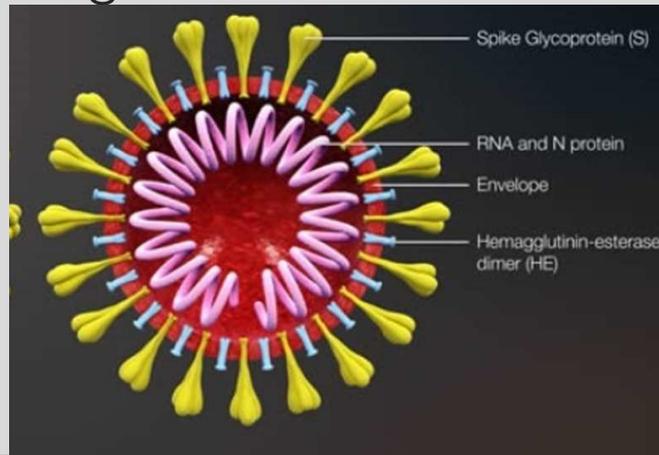
COVID -19 is a **fragile** virus-disable it by:

Using 70% or greater isopropyl based sanitizer

Do not use methanol based sanitizers.

Cell wall (envelope) is dissolved and RNA is disabled rendering the Virus harmless!

Don't depend upon foaming sanitizers.



Repel the Virus – Build your immune system

- Stay Healthy
- Evidence that normal Vitamin D levels are important.
 - Sunlight – spend time outside
 - D3 supplements
- Co-morbidity is a very significant factor!
 - Obesity
 - Cardiovascular diseases
 - Compromised Respiratory function

A healthy immune system should be able to ward off the virus with out significant effects

US Deaths from Covid

% of Covid Deaths by Age Group

(Feb. 1- June 17, 2020)

Deaths in U.S. by Age, Race | American Council... <https://www.acsh.org/news/2020/06/23/coronavirus-covid-deaths-19.1>

U.S. Deaths from Coronavirus by Age Group (Feb. 1 – June 17, 2020)

Age group	COVID-19 Deaths	Percentage of COVID Deaths
Under 1 year	8	0.008%
1-4 years	5	0.005%
5-14 years	13	0.013%
15-24 years	125	0.121%
25-34 years	699	0.676%
35-44 years	1,780	1.722%
45-54 years	4,976	4.815%
55-64 years	12,307	11.909%
65-74 years	21,462	20.769%
75-84 years	27,529	26.640%
85 years and over	34,435	33.322%
All Ages	103,339	100.000%

Source: CDC

US Deaths from Covid

% of Deaths due to Covid by Age Group

(Feb. 1- July8, 2020)

COVID Deaths Among Children and Reopening School... <https://www.acsh.org/news/2020/07/14/coronavirus-covid-deaths-a-81909>

(/news/2020/06/23/coronavirus-covid-deaths-us-age-race-14863) previously, but these numbers are updated to include deaths from February 1 to July 8.)

Age group	COVID-19 Deaths	Total Deaths	Percentage of Deaths Due to COVID-19
Under 1 year	9	7,174	0.13%
1-4 years	7	1,361	0.51%
5-14 years	14	2,081	0.67%
15-24 years	149	12,958	1.15%
25-34 years	795	27,384	2.90%
35-44 years	2,026	38,899	5.21%
45-54 years	5,650	73,179	7.72%
55-64 years	13,808	170,463	8.10%
65-74 years	23,866	260,514	9.16%
75-84 years	30,369	322,323	9.42%
85 years and over	38,048	408,622	9.31%
All Ages	114,741	1,324,958	8.66%

Practical applications/scenarios:

Transmission

- Droplet
 - Virus particles travel in respiratory droplets
 - Thought to be the primary route of transmission
- Airborne
 - Virus travels on much smaller particles which are “aerosolized”
- Contact
 - Direct – person-to-person
 - Indirect – contact with contaminated object
 - Little evidence that this is a primary source of transmission

Incubation period

- Average is 5 days (range 2-14) , many are asymptomatic (no symptoms) for this period of time
 - Some studies have indicated that viral load peaks in the days before symptoms begin and that speaking is enough to expel virus-carrying droplets

- <https://www.acc.org/latest-in-cardiology/journal-scans/2020/05/11/15/18/the-incubation-period-of-coronavirus-disease>
- <https://www.ucsf.edu/news/2020/06/417906/still-confused-about-masks-heres-science-behind-how-face-masks-prevent>
- http://files.fast.ai/papers/masks_lit_review.pdf

All about masking...

- Source control
 - Barrier of mask prevents respiratory droplets that are created from breathing, talking, coughing, or sneezing from travelling past the mask
 - Note: masks with valves do not effectively prevent droplet transmission because the valve is open when the user exhales
 - Types of masks
 - Cloth – traps droplets
 - Function is source control
 - Surgical – traps droplets/particles
 - Function is source control
 - N95 and respirators – filters small and large particles, requires fit test
 - Main function is to protect the user
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- <https://www.acc.org/latest-in-cardiology/journal-scans/2020/05/11/15/18/the-incubation-period-of-coronavirus-disease>
 - <https://www.ucsf.edu/news/2020/06/417906/still-confused-about-masks-heres-science-behind-how-face-masks-prevent>
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- **Main Point:** The goal of the recommendations for distancing of 6' and masking efforts is to protect others
 - This is a way we can choose to show love and consideration despite the discomfort/inconvenience
 - Also important to consider the effects that isolation have – look for ways to connect with, fellowship with, and care for our fellow brothers and sisters

- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>

Ron – comments about quarantine practices, antibody testing, risk among children.

- Data applied to decision to reopen schools

What Do the Data Suggest About Reopening Schools?

There are many additional ways to analyze the data (e.g., case-fatality rates, infection-fatality rates, mortality rates). To answer the question, "What is the chance I will die if I get coronavirus?" we need to have good estimates for the infection-fatality rate by age. A study (<https://osf.io/wdbpe/>) based in Geneva, Switzerland came up with the following numbers:

Infection Fatality Rate Estimates by Age

Age group	IFR
5-9 years	0.0016%
10-19 years	0.00032%
20-49 years	0.0092%
50-64 years	0.14%
65 years and over	5.6%
All Ages	0.64%

Source: <https://osf.io/wdbpe/>

The CDC's latest estimate (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/planning-scenarios.html#table-1>) of 0.65% is in close agreement with the the overall IFR reported by the Swiss study.

Regardless of how one looks at the data, they all point in the same direction: COVID-19 poses a very minor threat to students. The threat of reopening schools, therefore, is the health of teachers, faculty, and childrens' families. Measures should be aimed at protecting those populations.

- CDC Recommended Duration of isolation and precautions

- For most persons with COVID-19 illness, isolation and precautions can generally be discontinued 10 days *after symptom onset* and resolution of fever for at least 24 hours, without the use of fever-reducing medications, and with improvement of other symptoms.
 - A limited number of persons with severe illness may produce replication-competent virus beyond 10 days that may warrant extending duration of isolation and precautions for up to 20 days after symptom onset; consider consultation with infection control experts.
- For persons who never develop symptoms, isolation and other precautions can be discontinued 10 days *after the date of their first positive RT-PCR test for SARS-CoV-2 RNA*.

Spiritual Applications:

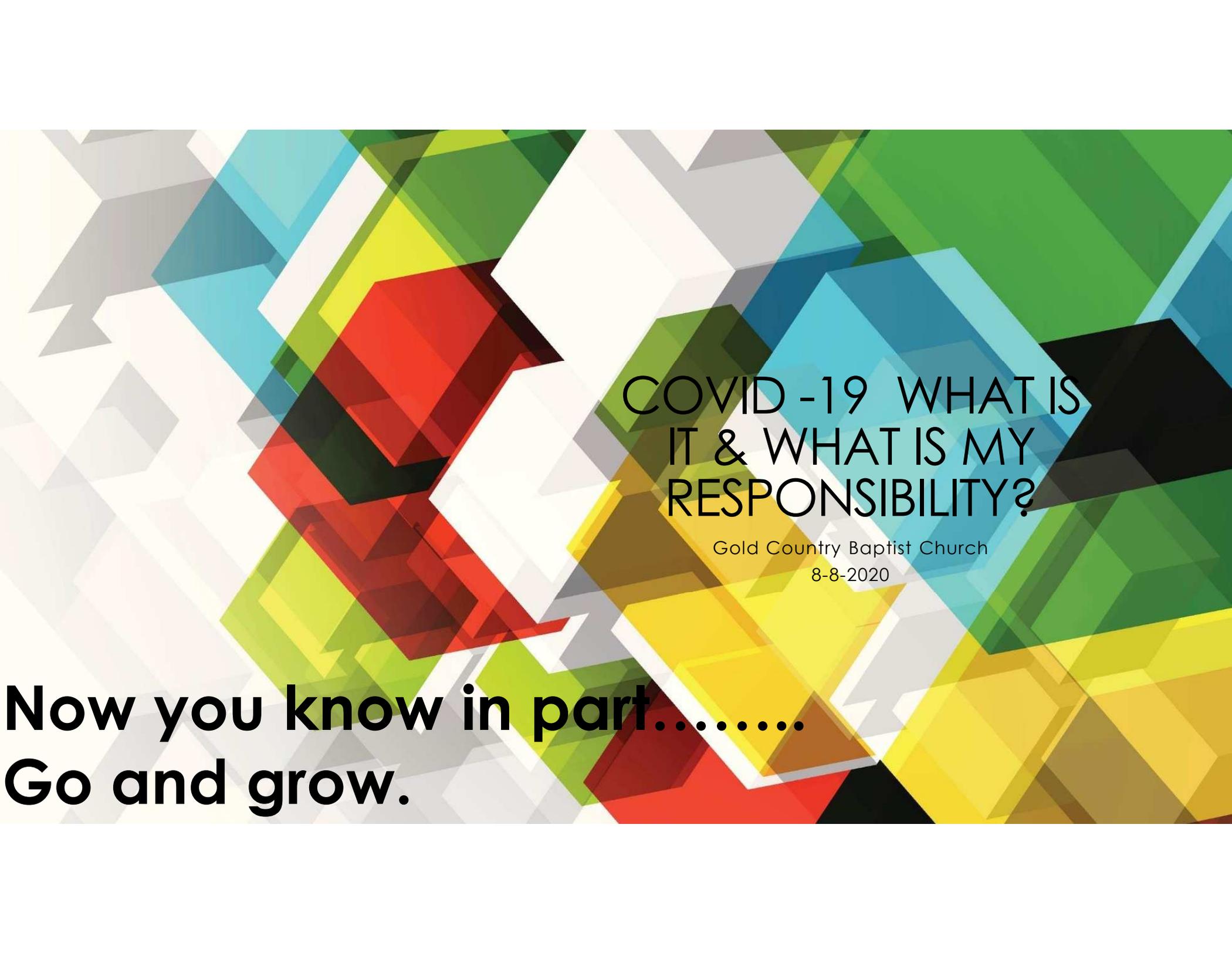
Love – Walk in love, speak the truth in (with) love so that we are all built up into Christ likeness!
Ephesians 5:1,2 4:15, 29 c.f. 1 Corinthians 13:1-13.

And the greatest of these is _____ .

Witness – John 13:35 By this all people will know that you are my disciples, if you have love for one another.

Submission – 1 Peter 5:8b Your adversary the devil prowls around like a roaring lion, seeking someone to devour
James 4:7 Submit yourself therefore to God. Resist the devil, and he will flee from you.

Practical applications/scenarios:



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**Now you know in part.....
Go and grow.**