Masks: It's Complicated

Wading through fact and fiction.

🐨 COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)



COVID19 Update

New reported cases by day in Arkansas

New cases

July



COVID19 Update

• Arkansas (Current)



Why is this a big deal?

- The potential to slow the spread of the virus and reduce the number of people that get infected, hospitalized, or die.
 - UAMS School of Public Health July 3, 2020 report on projected cases for the state of Arkansas.
 Predicted Active Infections in Arkansas



July 2, 2020 Simulation of New Infections:

New Infections

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	Large	Droplet
	Particulate	Nuclei
Sneezing	8 - 15 ft	+160 ft
	2.5 – 4 M	+45 M
Coughing	1 - 5 ft	+160 ft
	0.3 – 1.5 M	+45 M
Talking	1 - 3 ft	+160 ft
	0.3 - 1.0 M	+45 M

Virus Transmission in Indoor Air - Steven Welty CAPS, CIE, LEED AP

How does a mask work?

Peak exhalation speeds can reach **100 feet per second** for sneezes. The gas is emitted when a person coughs, sneezes or exhales.

3-6 feet

How does a mask work?

- How respiratory infections are Spread
 - Droplet Transmission vs. Aerosol (Airborne)

- Why does this matter?
 - Emerging evidence suggests COVID19 is spread both ways.
 - Research studies on masks differ based on what you're trying to prevent.

How a mask doesn't work.

Types of Masks

- Protection offered
 - Inward flow (protects the person wearing the mask from getting sick)
 - Outward flow (mask work by a sick person to protect those around them)
- Types of Masks
 - N95 must be "fit tested"; primarily to protect the wearer from getting sick
 - Surgical Mask universal fit; primarily to protect the wearer from getting sick
 - Cloth Masks lots of variation in types of materials and layers
 - Silk, Cotton, Cotton Blend; primarily protects others from getting sick if the wearer is sick <u>and doesn't know it</u>; offer some protection to wearer.

Effectiveness of different types of masks.

N95/FFP2 mask

Sources: EPA; FT research © FT * Virus carried in larger droplets that eventually evaporate

Effectiveness of different types of masks.

Mask Effectiveness Before and After 3 Hours

What are we seeing in other areas?

- Countries that mandate mask wearing in public
 - Germany, France, Italy, Spain, China, South Korea.
- States that mandate mask wearing in public
 - Since April: Connecticut, Delaware,

Maryland, New Jersey, New York, Pennsylvania; 24 in total

By The New York Times Updated July 12, 2020, 8:04 A.M. E.T. Leer en español

By The New York Times Updated July 12, 2020, 8:04 A.M. E.T.

By The New York Times Updated July 12, 2020, 8:04 A.M. E.T.

What do the Experts say?

Updated June 28, 2020

Other Languages -

Print Page

- CDC recommends that people wear cloth face coverings in public settings and when around people who don't live in your household, especially when other <u>social distancing</u> measures are difficult to maintain.
- Cloth face coverings may help prevent people who have COVID-19 from spreading the virus to others.
- Cloth face coverings are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings.
- Cloth face coverings should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

The WHO has new guidelines on face masks to fight Covid-19

The general public should wear cloth masks in public spaces where physical distancing is impossible, the agency says.

By Lois Parshley | Jun 6, 2020, 8:40am EDT

What do the Experts say?

Arkansas Department of Health

4815 West Markham Street • Little Rock, Arkansas 72205-3867 • Telephone (501) 661-2000 Governor Asa Hutchinson Nathaniel Smith, MD, MPH, Secretary of Health

June 19, 2020

Guidance on the Use of Face Coverings by the General Public

Based on the above data, the ADH makes the following recommendations:

- The general public should wear face coverings in <u>all</u> indoor environments where they are exposed to non-household members and distancing of 6 feet or more cannot be assured. This includes, but is not limited to, workplaces (with few exceptions), retail stores, businesses, places of worship, courtrooms, jails and prisons, schools, healthcare facilities, other people's homes and all the scenarios addressed by the Governor's Directives.
- The general public should also wear face coverings at all outdoor settings where they
 are exposed to non-household members, unless there is ample space (6 feet or more) to
 practice physical distancing.
- Regarding the type of face covering, medical masks may be somewhat more protective than cloth masks (if they are clean and dry), but more and more evidence supports cloth masks as being sufficient for the general public and effective in preventing transmission. Cloth masks should consist of at least two layers of fabric. N95 respirators should be reserved for front-line health care workers.
- All face coverings should cover both the mouth and nose at all times in order to be
 effective.

Welcome to Journal Club

- Evaluating medical evidence and therapeutic research.
 - Levels of evidence
 - Level 1a Systematic review of Randomized, Double Blind, Placebo Controlled Trials (RCT)
 - Level 1b Individual RCT
 - Level 2a Systematic review of cohort studies
 - Level 2b Individual cohort study
 - Level 3a Systematic review of case control studies
 - Level 3b Individual case control study
 - Level 4 Case series, low quality cohort or case control studies
 - Level 5 Expert Opinion
 - Peer Reviewed; Disclosures of bias
 - For this discussion, the date of the article matters (i.e. 2009 H1N1 pandemic)

HIS WEEK AT NEIM.ORG CLINICAL PRACTICE PERSPECTIVE The Politics of Emergency Contraception Hidradenitis Suppurativa G.B.E. Jemec A.I.I. Wood, I.M. Drazen, and M.F. Greene The Constitutionality of the ACA's Medicaid-IMAGES IN CLINICAL MEDICINI Expansion Mandate I.G. Cohen and J.F. Blumstein Paragonimiasis Expanding Eligibility, Cutting Costs - A Medicaid M.A. Barrientos and A.U. Carrasco Update J.K. Iglehart Jugular Venous C-V Wave in Severe Tricuspic Achieving Accountable Care - "It's Not About Regurgitation the Bike" J. Walker and A. McKethar N.B. Senguttuvan and G. Karthikeyan CASE RECORDS OF THE MASSACHUSETTS

GENERAL HOSPITAL

EDITORIALS

A Man with Persistent Ulcers on the Hands

D. Kroshinsky, M.P. Hoang, and R.P. Hasserjian

DRIGINAL ARTICLES

 Pertuzumab plus Trastuzumab plus Docetaxel for Metastatic Breast Cancer
 J. Baselga and Others

- Journal of Infectious Disease Modeling; April 2020
 - <u>To mask of not to Mask: Modeling the potential face mask use by the general public to curtail</u> <u>the COVID-19 Pandemic</u>
 - Looked at models of cloth mask use by the Public
 - Statistical and mathematical models used based on current data
 - Estimated that 80% adoption of mask wearing by the population of masks that were 50% effective could prevent 17-45% of projected deaths in New York while decreasing the peak daily death rate by 34-58%.
- Journal of Disaster Medicine and Public Health Preparedness; August 2013
 - <u>Testing the Efficacy of Homemade Masks: Would They Protect in an Influenza Pandemic?</u>
 - Human participants (21); homemade mask, surgical mask, no mask
 - Tea Towel and cotton mix performed best for homemade (70-80%); surgical mask better (89-96%)
 - Bacterial test was similar in size (0.95-1.25 mcg) to influenza and COVID
 - Does not recommend for reduction of transmission of aerosols.
 - Homemade mask should only be considered as a last resort (in the absence of a N95 or surgical mask) to prevent droplet transmission from infected individuals, but it would be better than no protection.

- The Lancet; June 2020; Systematic Review
 - <u>Physical distancing, face masks, and eye protection to prevent person-to-person transmission of SARS-CoV-2</u> and COIVD-19: a systematic review and meta-analysis
 - 172 observational studies in 16 countries
 - Largely healthcare settings; N95 and Surgical Masks or similar
 - Quoted frequently; masks worn in healthcare and public settings would reduce transmission of virus
- ACS Nano; June 2020
 - Aerosol Filtration Efficiency of Common Fabrics used in Respiratory Cloth Masks
 - Cotton at higher thread count and Cotton + silk, chiffon, flannel
 - More than 80% efficient in filtering < 300 nm particle size
 - "Overall we find that combinations of various commonly available fabrics used in cloth masks can potentially provide significant protection against the transmission of aerosol particles."
- Journal of Medical Virology; March 2020
 - Potential Utilities of Mask-Wearing and Instant Hand Hygiene for Fighting SARS-CoV-2
 - N95, Surgical mask, homemade mask
 - 99.98%, 97.14%, 95.15% blocking of virus in a lab setting (simulated breathing)
- PLOS One; July 2008
 - <u>Professional and Home-Made Face Masks Reduce Exposure to Respiratory Infections among the General</u> <u>Population</u>
 - Experimental study; Evaluated N95, Surgical Mask, Homemade mask
 - All showed efficacy on inward and outward protection (N95 was the highest; surgical and homemade were largely the same)

- International Journal of Infection Control; 2013
 - Use of Cloth Masks in the practice of infection control
 - Looked at 19 different laboratory and observational studies
 - Cloth masks shouldn't be used in the hospital or clinic to protect workers
 - Not a lot of evidence one way or the other. The article assumed cloth masks would be used in 3rd world countries, not developed countries (U.S.)
 - Many variables in the type of cloth mask used and protection offered.
 - Multiple layers of cotton were most effective and offered most protection.
- Annals of Occupational Hygiene; June 2010
 - <u>Evaluation of the Filtration Performance of Cloth Masks and Common Fabric</u> <u>Materials Against 20-1000 nm Size Particles</u>
 - Looked at use of cloth masks during an influenza pandemic when respirators (N95) were in short supply.
 - Cloth mask (commercial), sweatshirt, T-shirt (100% cotton), Towel, Scarf
 - May provide some level of protection from aerosolized infections (70/30 sweatshirt was best)
 - Droplet protection not investigated

- Proceedings of the National Academy of Sciences of the United States of America (PNAS)
 - Face Masks Against COVID-19: An Evidence Review; April 2020
 - A literature review for policymakers on public mask wearing.
 - Referenced 96 different research articles and publications
 - Looked at: aerosolized vs. droplets; filtration rates of different materials; use in other countries during pandemics and epidemics
 - "Our review of the literature offers evidence in favor of widespread mask use to reduce community transmission; non-medical masks use materials that obstruct droplets of the necessary size; people are most infectious in the initial period post-infection, where it is common to have few or no symptoms; non-medical masks have been effective in reducing transmission of influenza; non-medical masks have been shown to be effective in small trials blocking the transmission of coronavirus; and <u>places and time periods where mask usage is</u> required or widespread have shown substantially lower community transmission."

- Health Affairs
 - Evidence From a Natural Experiment Of State Mandates In The U.S.; June 2020
 - Looked at the changes in daily county level COVID-19 infections between March 31, 2020 and May 22,2020 in U.S. states that mandated mask wearing in public.
 - Noted a 2% reduction of new cases by day 21 with continued decline after the study period.
 - Worked in combination with other measures (social distancing, limited gatherings, school closures) to lower the daily number of infections.

Most Common Comments

- "We" said not to wear masks in the beginning and now "we"
 - are saying we should be?
 - Yes, two reasons
 - 1) Didn't want the supply of N95's and surgical masks to become critically low
 - 2) The American public was not ready to adopt it with number of cases
- "Masks lower the oxygen level of your blood."
 - Oxygen (O2) is a molecule is 1,000 times smaller than a virus, it passes right through the cloth mask.
- "Masks increase the carbon dioxide of your blood."
 - Cloth masks are not air tight; CO2 escapes around the edges of the mask or passes through.
- "Masks increase the amount of virus a sick person breathes
 - in making them sicker."
 - Once you're sick, you're sick. You can't increase the severity of your sickness by reinfecting yourself.

Main Points

- How did we even get here?
 - No one envisioned a global pandemic where the N95 mask that could be purchased in at Lowes or Home Depot would be in short supply for U.S. hospitals leaving the public to look for other means of protection.
 - The scientific and medical profession took for granted the public would trust their collective advice.
- Cloth masks offer some protection to the wearer, but primarily the person wearing a cloth mask is protecting others in case they are sick and don't know it yet.
- Wearing a mask is not in place of social distancing, it is in addition to (i.e. 6 feet apart, reduce time spent in closed spaces, refrain from large gatherings, etc.)

CDC, ADH, WHO, and a preponderance of experts in medicine and research

If the majority of the population committed to wearing a mask of any type (N95, surgical, or cloth*) while in public, it would significantly reduce the number of COVID19 infections, hospitalizations, and deaths in our community.

Why is this a big deal and what difference can a mask really make?

- The potential to slow the spread and reduce the number of people that get infected, hospitalized, or die.
 - UAMS School of Public Health July 3, 2020 report on projected cases for the state of Arkansas.
 Predicted Active Infections in Arkansas

Mean estimate of predicted active infections for the state (solid curve), including asymptomatic infections, with 90% confidence intervals shown (shaded region between dotted lines). Note the date of the peak varies with the magnitude of the peak – more severe estimates peak sooner.

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