



Ask Dr. Arwady

February 7, 2023

Need help and don't know where to turn?



- Recently launched, 211 is now available to all Cook County residents.
- Find the health & social services you need today:
 - **Call 2-1-1,**
 - **Text your zip code to 898211, OR**
 - **Visit 211MetroChicago.org**



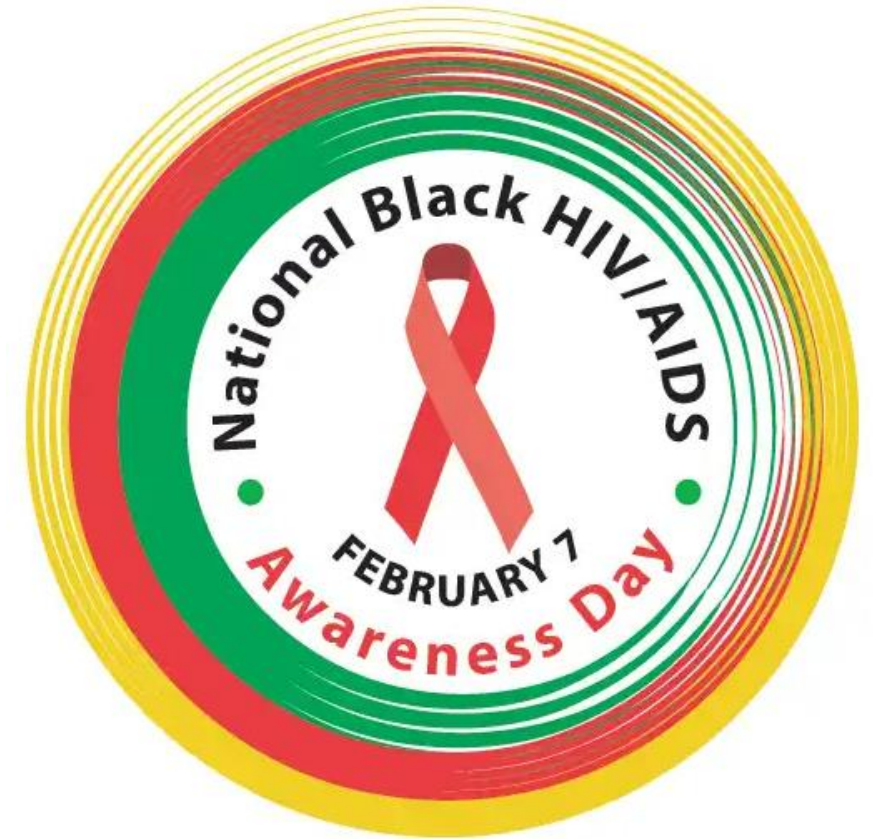
211MetroChicago.org



February 7: National Black HIV/AIDS Awareness Day



- Since about 1990, the majority of new HIV diagnoses in the U.S. and Chicago have been among African Americans.
- Despite decades of decline in new HIV cases, the rate of reduction hasn't been equitable for all.
 - Black people make up 13% of the U.S. population but had 42% of new HIV diagnoses in 2018.
 - In Chicago, in 2021, Blacks accounted for 47% of new HIV cases.
- In 2018, CDPH revamped its HIV service delivery system to help address the disparity. Today, all CDPH-funded programs prioritize services for three groups:
 - Black and Latino gay, bisexual, and other same-gender-loving men;
 - Black cisgender, heterosexual women; and
 - Black and Latina transgender women.
- To 'Get to Zero' new HIV cases, the goal by 2030, we must continue to focus our resources to the communities hardest hit by HIV – and that's Black and Latinx Chicagoans on the South and West sides.





February 7: Premiere screening of *HIV and the Journey Toward Zero* (available on YouTube February 8)

- What will 'Getting to Zero' mean for those who have been living with HIV?
- What does it mean for people (Black, Latinx, and transgender Chicagoans) who have been affected most by HIV over the past 3 decades?
- **Releasing on February 8 on CDPH's YouTube Channel**, this film presents a diverse group of Chicagoans who've been involved in the fight against HIV to tell their stories. A uniquely Chicago perspective on HIV's impact on our communities.
- Trailer, film information, resources, updates and more info at: journeytowardzero.com
- Instagram: @HIVzero



Unexpected questions from last week:

With so many people watching "The Last of Us," what is the scientific possibility of a fungus pandemic?

How worried should we be about Valley Fever fungus?

- Most fungal infections are from environmental exposures, rather than spread person-to-person
- While some fungi can be transmitted from person to person, they do not spread anywhere near as easily or quickly as viruses do in humans.
- Human body's immune response and temperature
- Availability of antifungal medications
- **Unlikely** that a fungus would cause a global outbreak



★ But for fun: *Ophiocordyceps unilateralis* (*Cordyceps*)

- Yes, it's an actual fungus that can infect and kill insects
 - 400 species of *Cordyceps* fungi, each evolved to target a different species of insect (various ants, beetles, flies, spiders)
- Take in nutrients from host then fill insect's body with spores to let fungus reproduce
 - Infiltrates the host's exoskeleton (then eventually brain) via spores from air that attach to host body
- "Mind control?"
 - Once inside the insect's body, the spores sprout long tendrils (mycelia) that eventually reach into the brain and release chemicals...or maybe there is physical manipulation of muscle fibers...scientists still aren't entirely sure of the mechanism
 - The chemicals (or other manipulation) compel the insect to move to a favorable location for the fungus to thrive and grow (usually climb high) and stay there before expelling spores.
 - Fungus then continues to feed on the host, sprouting new spores through the body. The spores burst and release more spores into the air that then go infect more hosts.



The fruiting body of a parasitic fungus erupts from the body of its victim.
Roberto Garcia-Roa (University of Valencia in Spain).
Taken in Peruvian jungle.
Won the 2022 BMC Ecology and Evolution image competition.

★ **HOWEVER...Even the “zombie-ant fungus”**

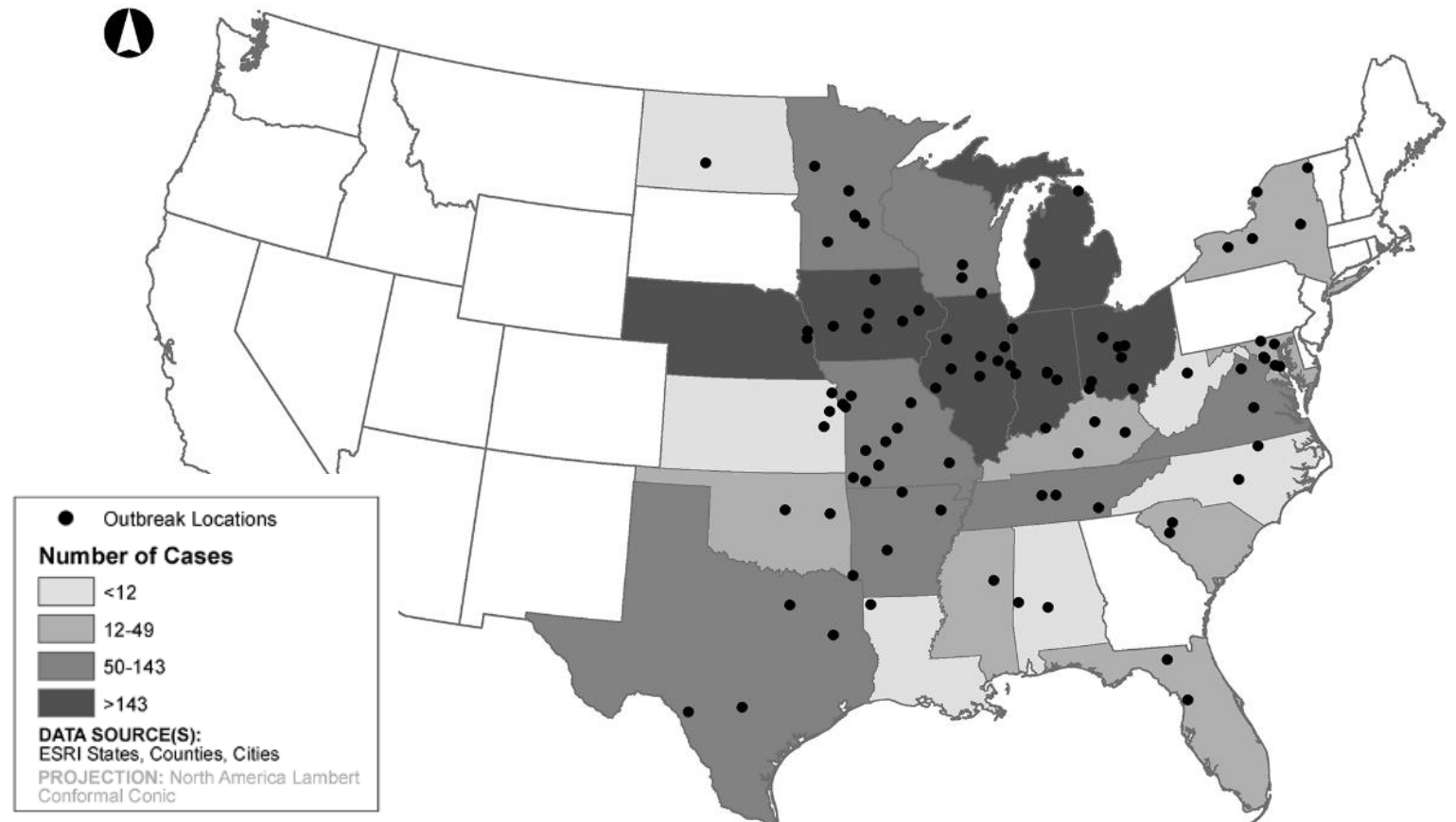
- Is not as dramatic as in the show
 - Cordyceps does NOT infect other hosts through the mouth
 - Infected aren't networked or connected to each other in any way
- AND the fungus cannot infect humans.
 - Our body temperatures are high enough that proteins would denature and can't survive
 - Fungus has evolved to attack insects in very specific ways (e.g. through exoskeleton)
- Bottom line: yes, there are fungal species known to alter a human's mental processing (best known: Psilocybin “magic mushrooms”) but VERY VERY unlikely to have a global fungal outbreak as portrayed in the show!

Yes, there are human fungal infections, with occasional outbreaks: **Valley fever** (coccidiomycosis) more in western U.S., **Histoplasmosis** more in central/eastern U.S. (IL)



- Histoplasmosis: Fungal spores found in soil, can cause infection when spores are disturbed, then inhaled
 - *Histoplasma* fungus often lives in soil with large amount of bird or bat droppings.
 - In the central and eastern U.S., especially around Ohio and Mississippi River valleys
- Most people who breathe in spores don't get sick at all; people with suppressed immune systems are at higher risk
- Symptoms include flu-like symptoms: cough, difficulty breathing, fever
- Public health at work behind the scenes

105 Histoplasmosis outbreaks detected between 1938 and 2013.
Total cases associated with these outbreaks from <12 to >143





Our local risk based on CDC COVID-19 Community Levels is:

Low

	New cases per 100,000 population (last 7 days) <i>[Goal is <200]</i>	New admissions per 100,000 population (last 7 days) <i>[Goal is <10]</i>	Percent of staffed inpatient beds occupied by COVID-19 patients (last 7 days) <i>[Goal is <10%]</i>
City of Chicago	85	6.8	3.1%
Cook County (including City of Chicago)	83	8.9	3.7%

Chicago metrics are calculated based on Chicago-level data.

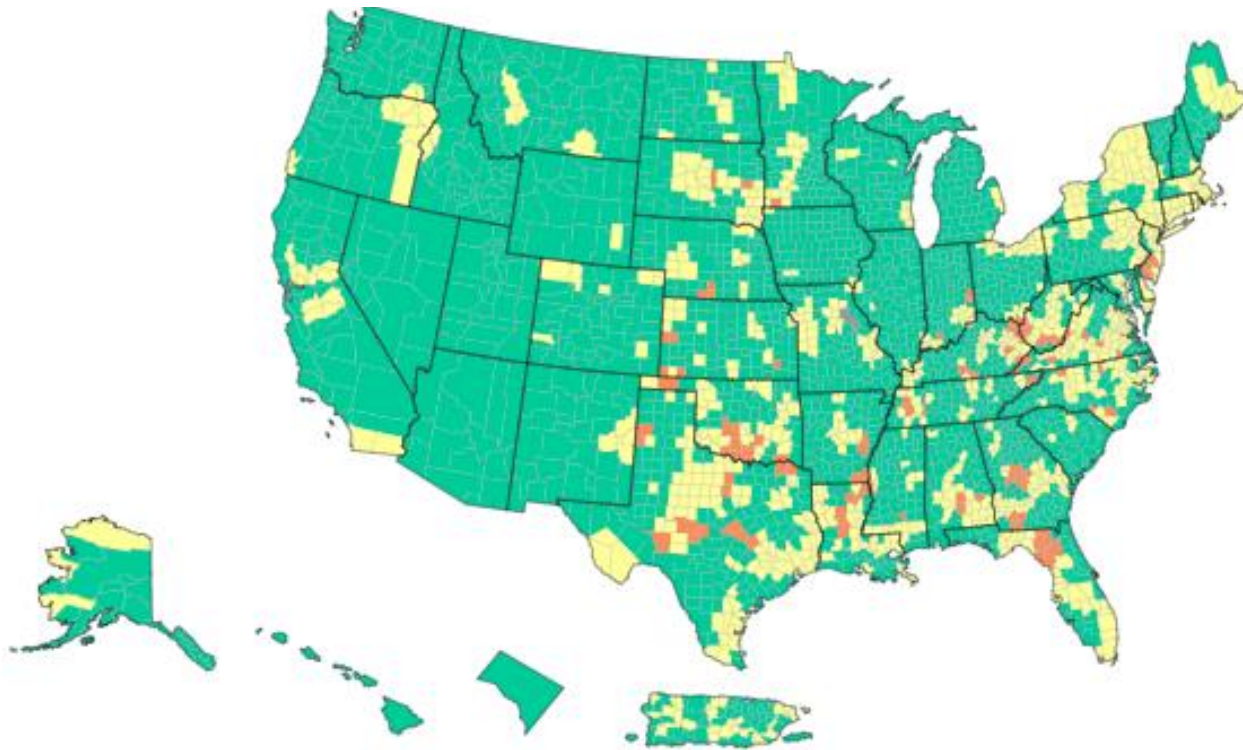
Cook County metrics are calculated by the CDC and posted on the [CDC Community Levels website](https://www.cdc.gov/communitylevels/).

Data current as of 2/1/2023.

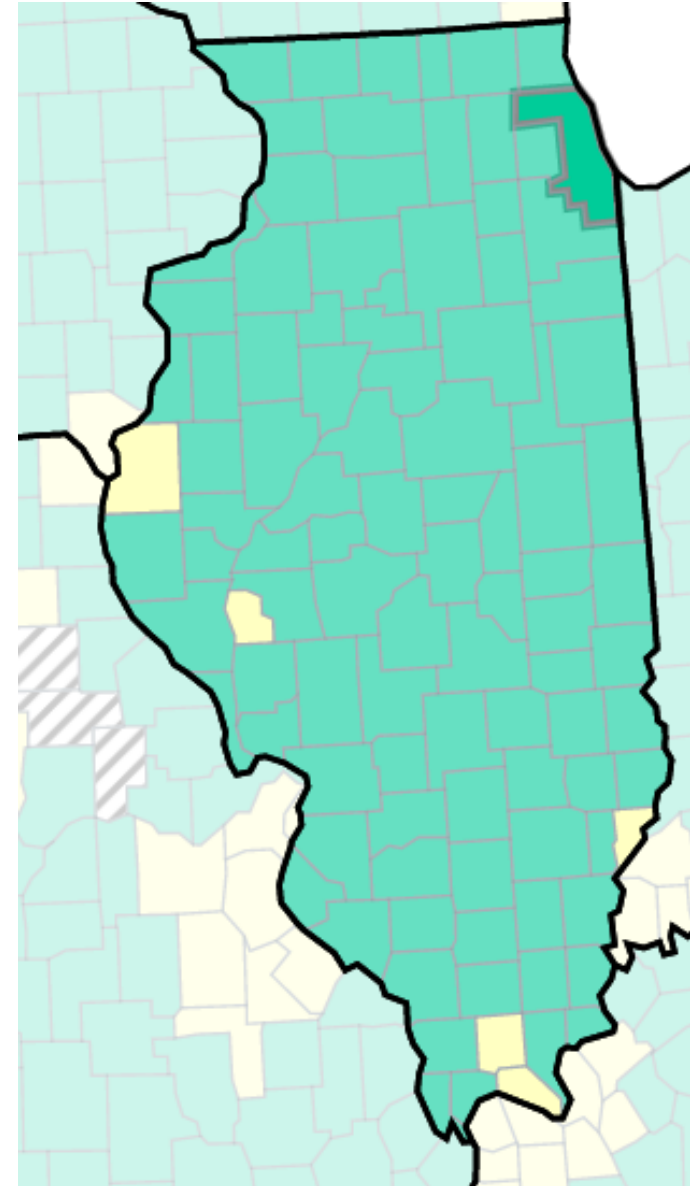
Last week, **4%** of U.S. Counties reported **High** COVID Community Level and **25%** reported **Medium** Level.



Low Medium High



GU AS MP VI





In “Low” Community Level, the Chicago Department of Public Health recommends individuals:

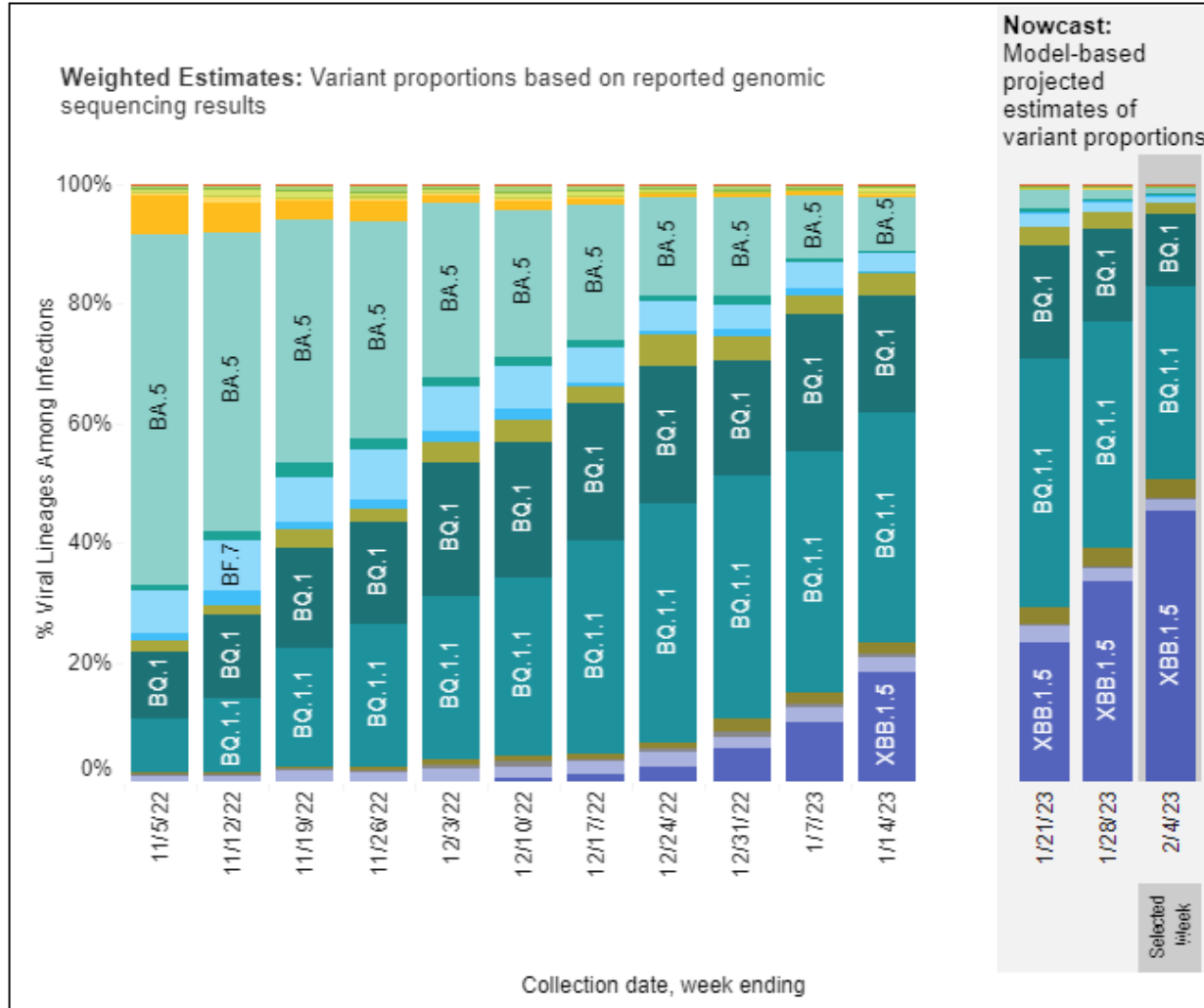
- Stay up to date with [COVID-19 vaccines](#).
- Get [tested](#) if you have symptoms.
- If you test positive for COVID-19, follow all isolation guidance, including wearing a face mask.
- If you are at high risk for severe illness, talk to your healthcare provider about whether you need to wear a mask and take other precautions.
- *Masks remain required in most healthcare/clinical settings*

Variant Surveillance, Midwest Region

Weighted and Nowcast Estimates for Weeks of 10/30/22 – 2/4/23



% Viral lineage
among infections



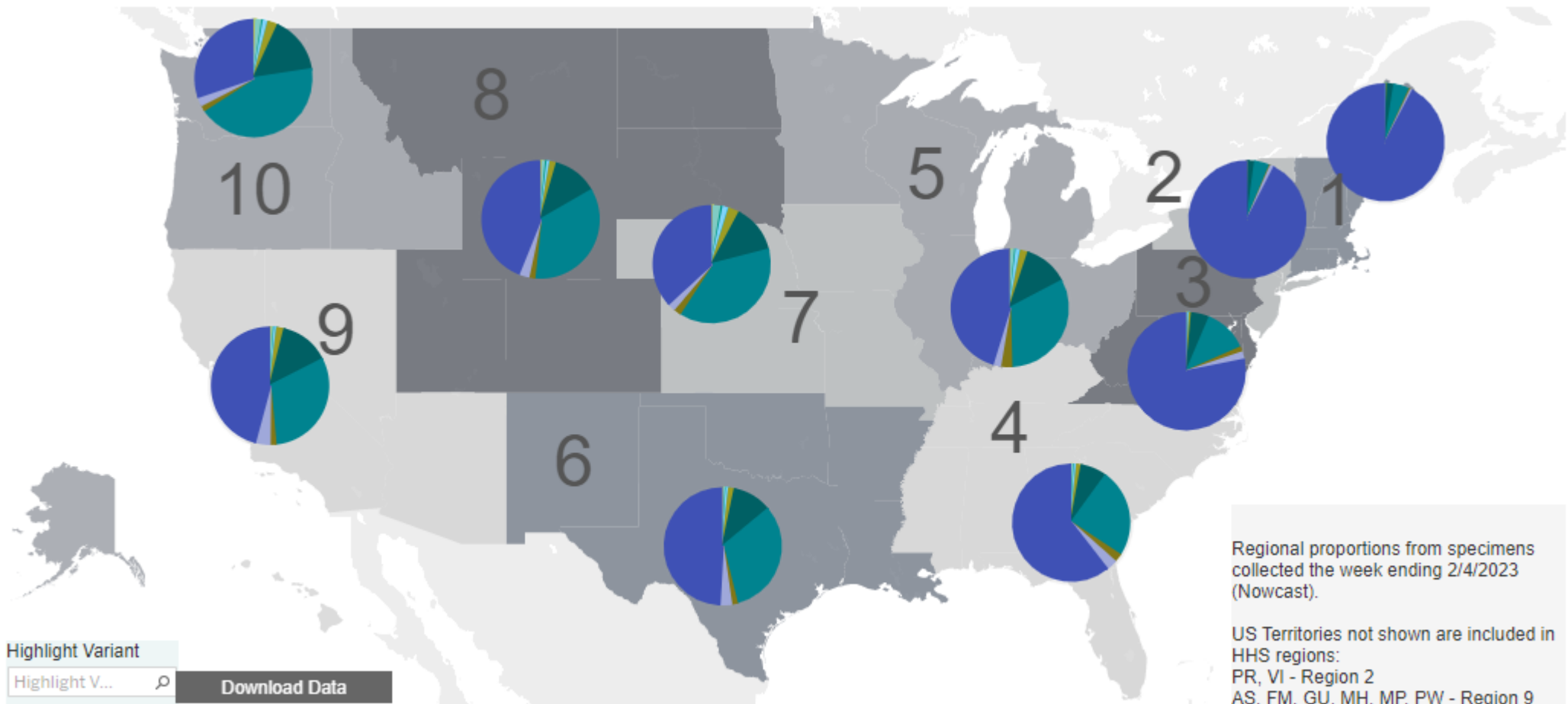
Collection date, week ending

XBB.1.5	45.3%	
BQ.1.1	32.3%	
BQ.1	12.2%	
CH.1.1	3.1%	
XBB	2.1%	
BN.1	2.0%	
BA.5	1.1%	
BF.7	1.0%	
BA.5.2.6	0.3%	
BF.11	0.2%	
BA.2	0.2%	
BA.2.75	0.1%	

Variant Surveillance, United States



Nowcast Estimates in for 1/29/2023 – 2/4/2023 by HHS Region



.5

Source: CDC Data Tracker



Higher Updated Booster Coverage among Chicagoans than Nationwide Estimates. Over 555,700 doses have been administered to Chicagoans since authorization.

People with an Updated (Bivalent) Booster Dose	Percent of US Population	Percent of Chicago Population
Population ≥ 5 years	16.6%	21.9%
Population ≥ 12 years	17.9%	23.1%
Population ≥ 18 years	19.0%	24.1%
Population ≥ 65 years	40.5%	40.5%

National data as of 2/1/2023.
Chicago data reported to I-CARE as of 1/31/2023.



IN THE NEWS: President Biden intends to end the COVID-19 national and public health emergencies on May 11.

Emergency ending: How will it affect antigen tests?



- Over-the-counter tests will remain available!
 - Ending the public health and national emergencies does NOT affect the FDA “emergency use authorizations” that have allowed COVID tests to be available quickly.
- Longer term, tests will no longer be free for everyone (though likely not right away)
- Antigen tests are already commercialized—but the U.S. bought a stockpile to provide via mail and have available.
 - CDPH has also purchased and stockpiled tests in case of surge, especially to help uninsured/underinsured Chicagoans access tests.
- However, for example, under public health emergency, health insurers have had to reimburse for up to 8 antigen tests per person per month. After May, they won’t have to.
 - Without guaranteed U.S. government purchase, likely fewer will be produced.

WHAT TO DO: Order your free federal tests by mail now, if you have not. I’d also recommend stocking up on some antigen tests in March or April while they are still covered and free of charge.

How to get your FREE at-home COVID-19 tests

-  VISIT
COVIDtests.gov
-  Review and place
your order
-  Enter contact and
shipping info

Or you can call
1-800-232-0233



Emergency ending: How will it affect vaccines?



- Vaccines will remain available!
 - Ending the public health and national emergencies does NOT affect the FDA “emergency use authorizations” that have allowed vaccines (and COVID tests and medications) to be available.
- Longer term, vaccines may no longer be free for everyone (though likely not right away)
 - Stockpile: the U.S. government, again, purchased vaccines from the pharma companies and there are still plenty available, even as COVID vaccines start to become commercialized.
 - But as vaccines hit their expiration dates and the stockpile runs out, they will be less available free of charge
 - For example, the Novavax COVID vaccine currently on the shelves in Chicago has expiration dates of late February 2023-- and we don't expect more to be available before commercialization.
- This is likely to be a bigger issue in Fall of 2023. With continued evolution of COVID virus, likely new booster formula in Fall 2023.
 - For those who are **insured** (Medicaid, Medicare, private insurance) vaccines should continue to be free (ACA)
 - But for those **uninsured**, many questions remain.
 - CDPH is concerned that uninsured (or underinsured) Chicagoans will be less able to access vaccines, which save money and save lives. We remain hopeful that we will see a national **Vaccines for Adults** program, to match the **Vaccines for Children** program we administer in Chicago
- **WHAT TO DO: Regardless of your insurance status, get your updated (available in Fall 2022) bivalent booster now, if you haven't already**



THINK YOU'RE UP TO DATE WITH YOUR COVID VACCINES?

IF YOU HAVEN'T
BEEN VACCINATED
SINCE LABOR DAY...



Previously vaccinated Chicagoans age 6months+ are eligible for the bivalent booster and the best protection against Omicron.



GET YOUR UPDATED COVID BOOSTER & FLU SHOT AT HOME



In-home vaccination is available to all Chicago households at no cost. Up to 10 people can be vaccinated, so invite your family, friends, or neighbors to get vaccinated together.

Emergency ending: How will it affect medications?



- **Evushield/Monoclonal antibodies** (important for people after organ transplant, for example) are no longer available, but this has nothing to do with the emergency.
 - Instead, the latest subvariants have mutated and the antibodies don't work any more.
 - Pharma companies not inclined to make more outside an emergency because the virus keeps changing.
- **Paxlovid** (oral medication most widely used for early COVID treatment) will remain available.
 - Again, the U.S. government bought a lot of Paxlovid from Pfizer and a lot remains available in the stockpile and here in Chicago. So it's unlikely to be an immediate issue in May.
- But eventually the price of Paxlovid will change.
 - As the declared emergency ends and this, too, is commercialized, Pfizer will determine the medication's price, and eventually how much you will pay at the pharmacy will depend on our health insurance.
 - After the stockpile runs out, likely later in 2023 or in 2024, this will become like any other medication, with copays and costs dependent on your insurance.
 - CDPH is concerned that uninsured Chicagoans will be less able to access early treatment, which saves money and saves lives.
- **WHAT TO DO NOW:** Right now, lots of Paxlovid remains available free of charge. If you are at high risk for severe outcomes from COVID and you test positive for COVID, please talk to your doctor or pharmacist right away about getting early treatment/medication. At least in the short term, you should continue to be able to receive Paxlovid at no cost.
- **ALL Chicagoans, even those who are uninsured, need a medical home (e.g. Federally Qualified Health Center).**



VAX & PAX lovid



If you're at high risk for severe illness, vaccines are your best protection against COVID-19. But if you do test positive, **TREATMENTS ARE AVAILABLE.**

PAXLOVID, for example, is an oral antiviral therapy for the treatment of mild to moderate COVID-19.



Individuals ages 12 and up who are at high risk of developing severe illness, are eligible.

Ask a healthcare provider if medications to treat COVID-19 are right for you.

★ Example beyond COVID: Medicaid enrollment

- Medicaid currently covers about **1 in every 4** Americans (about 90m people including children on CHIP, up from about 70m in 2019)
 - During the emergency, the feds barred states from removing people from Medicaid once they were enrolled. Lifted requirements on annual re-enrollment, etc.
 - Starting in April, states can start removing ineligible people--which will be millions
 - A lot of need to support re-enrollment of eligible Chicagoans, or to support Chicagoans no longer eligible to get insurance plans through employer or ACA marketplace.
- **WHAT TO DO NOW:** If you have Medicaid insurance, make sure your address information is up to date as more information will be coming by mail.

Example beyond COVID: SNAP

- SNAP (federal Supplemental Nutrition Assistance Program)
 - Prior to COVID, unemployed adults under age 50 and without kids had to either work or do job training 20 hours/week to be SNAP-eligible. That rule will be reinstated.
 - Also it was easier for low-income college students to get SNAP, which will end.
- Supplemental SNAP benefits already winding down: average of additional \$95/month in IL goes away next month.

SNAP Emergency Allotment is Ending

Beginning March 2023, all SNAP households will see their benefits decrease.

During the pandemic, IDHS issued SNAP Emergency Allotments across the State of Illinois. Since April 2020, all Illinois SNAP households received their regular monthly benefit and an Emergency Allotment to help manage food insecurity.

Due to a recent federal policy change, SNAP Emergency Allotments are ending February 28, 2023. The Emergency Allotments were an additional issuance of a minimum allotment of \$95 to each household's monthly benefits.

SNAP customers are encouraged to visit abe.illinois.gov or call the IDHS Helpline at 1-800-843-6154 and update information including a change of address, increase in housing costs, or decrease in income, to receive the maximum benefits for which they are eligible.

SNAP households should prepare accordingly for the decrease in benefits. All SNAP households are encouraged to visit their local food pantry. To find food a food pantry across Illinois, visit go.illinois.edu/findfood

WHAT TO DO:

Consider supporting your local food pantry, if you have the resources.

Food insecurity is likely to go up.

TAKE ACTION IF YOU TEST POSITIVE FOR COVID-19



DAY 1-5

Stay home:

- Everyone - *regardless of vaccination status* - should stay home and away from others (isolate).

People at high risk for severe illness:
Talk to your doctor about treatment

DAY 6 OR LATER

End isolation:

- If you never had symptoms OR symptoms are improving and are fever-free for 24 hours.

DAY 6-10

Wear a mask:

- If you take 2 antigen tests 48 hours apart and both are negative, you may remove your mask sooner
- Avoid people at high risk of getting very sick



**THANK
YOU!**



**CITY COLLEGES[®]
of CHICAGO**

Since December 2020,
City Colleges of Chicago
has welcomed CDPH to
host **589 total clinics**,
administering **127,749+**
COVID-19 vaccinations.



CHI.GOV/FLU

Saturday, February 11 • 9am-2pm

Harry Truman College • 1145 W Wilson Ave.
Register at: rebrand.ly/TrumanCollege

The new COVID-19 bivalent booster will be available!

Types of vaccines: Flu, Moderna primary series and bivalent boosters (6 months through 5 years), Pfizer primary series and bivalent boosters (6 months and older).



WALK-INS WELCOME!

LAST CHANCE!



Need a vaccine or a booster?
Have questions?

visit

CHI.GOV/COVIDVAX

or call

312-746-4835

