COVID-19 FACT SHEET VULNERABLE HEALTH CARE WORKERS



What do they mean when they say some health care workers are more vulnerable when it comes to COVID-19?

Many health care workers are older. According to the Canadian Institute for Health Information, more than 11.2% of nurses in Canada are over 60 years of age. Their age puts them at a higher risk for serious COVID-19 outcomes.

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There are other conditions that also make some health care workers more vulnerable. Dr. Sandy Buchman, President of the Canadian Medical Association, told the CBC, "age is just one factor in how severe an outcome someone could have with COVID-19. It's also important to consider older doctors and nurses who have other chronic illnesses, such as hypertension and asthma, he said, as well as how vulnerable others in their home are." (CBC News, 2020)



I am a health care worker over the age of 60. What do I need to know?

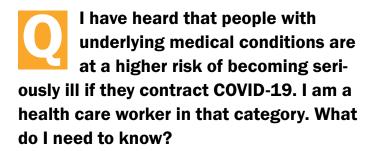
Statistics show that the risk of serious symptoms and death from COVID-19 increases with age. While anyone, at any age, can get really sick—and many young people have,—the older you are, the greater the chance you will end up having to be hospitalized, admitted to the ICU, or to die.

Dr. Theresa Tam has reported that over 90% of COVID-19 deaths in Canada occurred in those over 60 years of age, many of whom were in long-term care (CP, 2020). An examination of US statistics found the fatality rate was highest among those aged 85 or older.

Of perhaps greater concern for those working in health care, among those aged 20-54 years the death rate was under 1% while for those aged 55-64 years, mortality increased to 1% to 3%. Similarly, rates of admission to the ICU for those aged 45-64 years was 36%—three times higher than for those aged 20-44 years. (CDC (a), 2020

It is speculated that age reduces lung function and weakens the immune system, leaving older persons more at risk of poorer outcomes. Older individuals are also more likely to have other health problems that increase their risk.

If you are concerned that you might be at particular risk because of your age, ask for reassignment or a leave. You may have to ask your primary care provider for a letter.



COVID-19 can be mild, even undetectable, in some people. Others, for no apparent reason, can become very ill. Medical experts and scientists don't really know why some people are more likely to have severe symptoms or even die from it.

One thing they do know, however, is that a number of medical conditions have been found to put individuals at a greater risk. These include:

- chronic lung disease;
- moderate to severe asthma;
- serious heart conditions;
- · being immunocompromised from cancer treatment;
- being a smoker;
- bone marrow or organ transplantation;
- · immune deficiencies;
- poorly controlled HIV or AIDS;
- prolonged use of corticosteroids and other immune weakening medications;
- severe obesity;
- diabetes;
- · chronic kidney disease undergoing dialysis; and
- liver disease. (CDC (b), 2020)

Hypertension can also increase risk. (Govt. of Canada, 2020)

If you have any of these conditions, especially if they are not well controlled, it would be wise to consult your primary care provider to see whether or not you should be reassigned or take a leave from work.

I am pregnant and nervous about working around potential or confirmed cases? Does COVID-19 pose a particular risk to me or my baby?

There is still much we don't know about COVID-19. Given the uncertainty about the potential for harm to a pregnant health care worker or to her unborn fetus the Centre for Disease Prevention and Control (CDC) advises, "With viruses from the same family as COVID-19 and other viral respiratory infections, such as influenza, women have had a higher risk of developing severe illness...It is always important for pregnant women to protect themselves." (CDC (c), 2020)

If you are pregnant and concerned about getting sick, you should ask to be reassigned. You can consult with your obstetrician or primary care provider to obtain a letter if requested.

The Society of Obstetricians and Gynaecologists of Canada say that, "Given that the data on COVID-19 during pregnancy is in its infancy, where staffing allows, avoiding unnecessary exposure to patients with suspected or known COVID-19 should be considered." (SOCG, 2020) They also say that pregnant women with conditions such as high blood pressure, heart disease, or lung disease, should consider avoiding exposure (as should non-pregnant women with the same conditions).

Little is known about whether or not a mother who has contracted COVID-19 can pass it to her unborn child. Some small studies carried out in China suggest it is possible as they found a few cases in which the baby tested positive at birth. (Dong, et al. 2020)

Australia and New Zealand recommend that pregnant health care workers be assigned to areas where they are less likely to contract COVID-19. (RANZCOG, 2020). The UK has a similar policy. (RCOG, 2020)

If you are pregnant and concerned about getting sick, you should ask to be reassigned. You can consult with your obstetrician or primary care provider to obtain a letter if requested.

I am 28 weeks pregnant and am having trouble when I have to wear an N95 respirator all day to carry out my nursing duties with COVID-19 patients. Should I be concerned?

A study done after the SARS outbreak measured the effects on pregnant women of wearing N95s during physical effort, similar to what would be required as part of their regular nursing duties. The study found that, "Breathing through N95 mask materials have been shown to impede gaseous exchange and impose an additional workload on the metabolic system of pregnant healthcare workers, and this needs to be taken into consideration in guidelines for respirator use. The benefits of using N95 mask to prevent serious emerging infectious diseases should be weighed against potential respiratory consequences associated with extended N95 respirator usage." (Ye Tong PS, et al, 2015) This is not a healthy situation for either you or your fetus.

If you are pregnant and having any difficulties breathing, with donning and doffing PPE, or getting a good fit, you should ask to be reassigned. You can consult with your obstetrician or primary care provider to obtain a letter if need be.

In addition, Alberta Health Services says that those in the third trimester, may have difficulty adhering to personal protective equipment (PPE) protocols and, in which case, they should not work in areas of potential exposure.

The Canadian Federation of Nurses Unions (CFNU) recommends "that pregnant health care workers who are concerned about their health – especially those with co-morbidities – seek an accommodation from their employer if they are asked to care for presumed or confirmed COVID-19 patients in COVID-19 'hot zones' (such as intensive care units, emergency rooms, operating rooms, post-anaesthetic care units, negative pressure rooms, single-patient rooms used to isolate patients in absence of negative pressure rooms, and trauma centres), and accommodation be readily granted based on language in collective agreements and provincial human rights legislation."

Again, if you are pregnant and having any difficulties breathing or with donning and doffing PPE or getting a good fit, you should ask to be reassigned. You can consult with your obstetrician or primary care provider to obtain a letter if need be.

I am having trouble sleeping and am feeling especially depressed and anxious. I keep thinking about my patient who died of COVID-19—alone and calling out for her son. I am also terrified of contracting COVID-19 and keep imagining my family having to carry on without me. I know I'm not functioning at my best. What can I do?

In order for you to maintain your mental health and to function at your best, it is imperative that you pay attention to what your body and mind are telling you.

This is a very difficult time for everyone—but especially for those of you on the front lines. It is becoming increasingly apparent that front-line health care workers are experiencing troubling, and often traumatic, events—some on a daily basis.

Besides stress, many are suffering from anxiety related to their fear of contracting the virus. They fear they might take the virus home to their loved ones. Health care workers are wondering if there will be an unmanageable surge in new patients that will overwhelm the system.

They wonder whether enough medical equipment, such as ventilators, will be available for the patients who would be likely to die without them. They worry that inadequate supplies of personal protective equipment (PPE), such as masks, N95 respirators, and face shields, will leave them at the mercy of the virus. Many are feeling overwhelmed by the increased demands on them in an already overtaxed system. Some are experiencing PTSD.

If you are feeling that you need help, talk to your union representative, access your EAP programme or a hotline, and/or talk to your health care provider. Don't suffer in silence.

The *British Medical Journal* describes the concept of "moral injury" to health care workers that result from their inability to provide adequate care due to lack of resources, etc. It is important, when your patient has a bad outcome, that you can feel you did the best you could have. When adequate medical care isn't available, you may be left instead feeling you let them down. You can be left feeling guilty, inadequate, and depressed—through no fault of our own.

The authors write, "These are extraordinary times. There is a pressing need to ensure that the tasks ahead do not cause long lasting damage to healthcare staff. They will be the heroes of the day, but we will need them for tomorrow....ealthcare managers in supervisory positions must now acknowledge the challenge staff face and minimize the psychological risk inherent in dealing with difficult dilemmas, and those in charge of resources must provide them with the opportunity to do so." Support must be provided now and be ongoing.

There are likely to be issues to deal with when all of this settles down and they too must be addressed. If you are feeling that you need help, talk to your union representative, access your EAP programme or a hotline, and/or talk to your health care provider. Don't suffer in silence.



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