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David Katzman, MD & Jennifer DeLaney, MD Internal Medicine Specialists

Coronavirus (Covid-19)

David Katzman, MD

I am sure all of you are aware of the viral epidemic with the novel coronavirus, Covid-19, that initiated in China and is now spreading around the globe. On January 30, the World Health Organization declared the outbreak a health emergency of international concern.

As of this writing, there have been 75,000 laboratory-confirmed cases (and rising) in China. In addition, there is sporadic but increasing numbers in other countries, with 53 reported cases occurring in the US. While 2,465 have died, only 23 deaths have been outside of mainland China. The epidemic has spread to South Korea, with 600 new cases, Japan, with 700 cases, and now new outbreaks in Italy and Iran. Many countries are restricting incoming travel from people who have visited China, South Korea and Japan in the previous 14 day before arrival.

Symptoms are typical of respiratory viruses and include fever, cough, and shortness of breath. Most people infected with the Covid-19 have mild symptoms, 20% have more serious pneumonia or organ failure. Most fatalities have occurred in those with underlying medical problems, with a case fatality rate under 3% (some suggest much lower, under 1%, outside China). It is spread through inhaling droplets that infected patients exhale when they cough or sneeze. Typically, one needs to be within 6 feet of an infected individual to be at risk for inhaling the virus. The incubation period between infection and developing symptoms averages 5 days, although it may be as long as 14 days. It is not entirely clear if it can be spread during the asymptomatic phase.

Treatment consists of isolation and supportive care. There are no medications that have been proven to be effective. There is no vaccine at this time. Currently the CDC suggests avoiding all non-essential travel to China, and practicing "enhanced precautions" if traveling to Japan or South Korea. They recommend reconsidering cruise trips to Asia.

While we should maintain our concern and vigilance, we need to put this latest threat in perspective. Remember that influenza killed 34,000 Americans last year and 61,000 the year before, with world-wide mortality of 400,000 per year. It is likely that the case fatality rate of Covid-19 outside of China is similar to Influenza. So, remember to get your Influenza vaccine yearly!

The likelihood is high that there will be community transmission of Covid-19 in the US this year. Measures that you can take to reduce your risk in the case of a local outbreak are the following:

- Avoid ill people. If someone is coughing or sneezing move at least 6 feet

away.

- Wash your hands thoroughly and frequently. Spend 20 seconds washing with soap, including between the fingers. This is particularly important before meals.
- Wear a mask if you are ill and out in public or if you are in crowded places with ill people. N-95 masks are more effective than simple surgical masks.
- Buy a HEPA filter for your desk/office/home if a family member or colleague is ill to reduce airborne transmission.
- Reduce travel to high risk areas if possible.

Medicaid Expansion

Jennifer DeLaney, MD

A petition is being circulated to place Medicaid expansion for Missouri on the November ballot. Dr. Katzman and I would encourage you to sign this petition and to vote for the initiative in November. Thirty-seven states have passed Medicaid expansion. The Center for Health Economics and Policy at Washington University did an extensive economic analysis of the financial impact of approving this measure. They estimate that approving Medicaid expansion will result in 315,000 additional Missouri citizens having health care at a projected direct savings to the state of \$38.9 million, with that savings projected to increase year over year. In addition to the direct effects on the Missouri budget, there are many positive effects for society in general if people have access to health care. These include better health, higher levels of productivity and less absenteeism, and lower health care premiums for people with private insurance due to less cost-shifting in the health care system. If you are interested in reading more on this topic, please click this [link](#).

Framework for Dietary Changes

David Katzman, MD

It seems like there is never enough to say about how to change one's diet. I have found this framework very useful for altering one's eating habits. Here are the three ways one can change how they eat:

Dietary restriction--this involves limiting or stopping certain food groups; popular options have been restricting carbohydrates (think Adkins or Keto diets) or fatty foods.

Calorie restriction--this involves limiting the calories one consumes, either intuitively based on knowledge or plans like Weight Watchers, or actually calorie counting; certain apps are useful for this such as Lose It or Noom.

Time restriction--we wrote about this in our last newsletter, but, as a reminder, this involves limiting when one eats, such as only over a 6 or 8-hour period every day, or even fasting longer periodically.

Other general principles:

1. One's approach to the above choices should depend on goals; for example if the goal is to improve cholesterol, a keto diet may not be the best choice; improved metabolic health is likely better achieved with time restricted eating or lowering carbohydrate intake; and weight loss is mainly accomplished with calorie restriction.
2. Whatever route is chosen must fit in with your lifestyle in order for it to be durable; we all have our daily routine and social life which can be disruptive if the changes made do not fit in well with our everyday life.
3. For weight loss, what works for me may not work for you.
4. The three types of restriction are not mutually exclusive; for example you can count your calories within the 8-hour window you are eating, or avoid carbohydrates, etc.

As your physicians, we are here to help guide you in eating changes to achieve your goals for improved health and wellness. Feel free to set up an appointment to discuss.

Heart Health

Even though February, which is National Heart Month, is about to come to a close, it's important to keep heart health top of mind year-round. Here are a few things to consider, in addition to diet and exercise, when it comes to heart health:

- Decrease the effects of stress on your body by finding ways to decompress throughout the day. Deep breathing, meditation, music, exercise and yoga are all great ways to help you relax.
- Did you know poor dental health, specifically gum disease, can have a negative impact on your heart? Visit your dentist twice a year, brush twice a day, and floss daily to keep your teeth, gums, and also your heart, healthy.
- CPR can save a life - as we saw happen with Blues player Jay Bouwmeester. Consider taking a CPR class and encourage your loved ones to attend as well. A couple of our local hospitals offer community CPR classes: [BJC](#), [Mercy](#). You can also check with your local [American Heart Association](#) or [Red Cross](#).
- Don't forget to come see us! Visit your doctor at least once a year, or more often if you have chronic conditions. This helps to keep them abreast of your health status and monitor any changes.

The American Heart Association has some tasty heart-healthy recipes on their [website](#). Here's one to try during these cold nights: [Turkey Chili](#).

Office News

New Information?: Please be patient and allow a few extra minutes as we will continue to check and update all insurance cards and demographics at your office visit. This will allow us to expedite your services in a more timely manner. If you have more than one address, please make sure we have both on file here at the office. This is helpful when trying to get prior authorizations approved or ordering durable medical equipment. Otherwise, these may get denied by your insurance. Please call our office if you need to update any insurance or demographic information, or you may email [Marsha](#).

Reminders

Medicare's New ID Cards: If you haven't already, please bring in your new Medicare card. (The member ID is no longer your social security number.) It is important that we have your new member ID when requesting any diagnostic testing, labs, medications or other services. Several institutions, including Quest, will no longer accept your old number. We will not be able to obtain authorization for services needed in a timely matter without correct card information. Thank you!

Billing Concerns and Questions: *Please remember to continue to write your invoice number(s) on every check.* It is ok to pay multiple invoices on one check as long as they are for the same doctor. Tonya can be reached via [e-mail](#) if you have any questions, and she is available to speak with on Tuesdays.

United Healthcare and Quest: United Healthcare contracted with Quest for laboratory testing starting back in January 2019. If you have your labs drawn in our office, they should be covered according to your usual plan benefits.

Florida Blue and EPO's: If you have the Medicare supplement plan [Florida Blue](#) please check the website to find out if you are covered outside of Florida. If you have coverage, check if you need to have an in-network primary care physician designated to order all of your diagnostic tests. **Dr. Katzman and Dr. DeLaney are not in network.** There are many health insurance plans that are considered an **EPO** (exclusive provider organization). This is a managed care plan where services are only covered if you go to doctors, specialists, or hospitals in the plan's network. This means you may have to pay the full cost of services provided if you use a physician out of network. Since Dr. DeLaney and Dr. Katzman are not in network, they will not be able to order any diagnostic services for you even if the facility is in network.

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