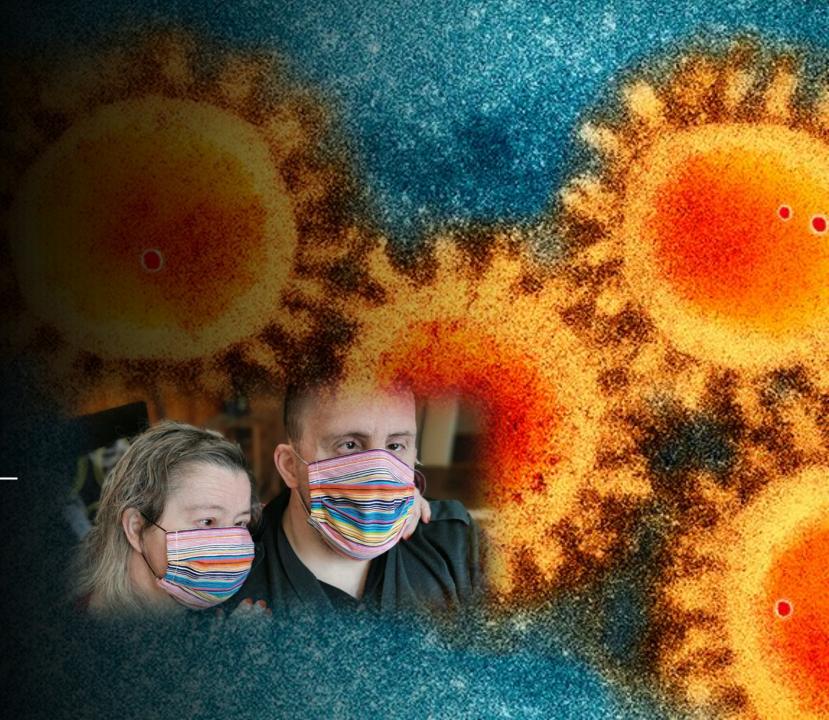
The Healthcare
Concerns of
COVID-19 in
People with IDD
and Dementia

Seth M. Keller, MD

Co-Chair NTG

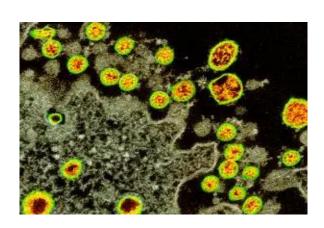
Past President AADMD

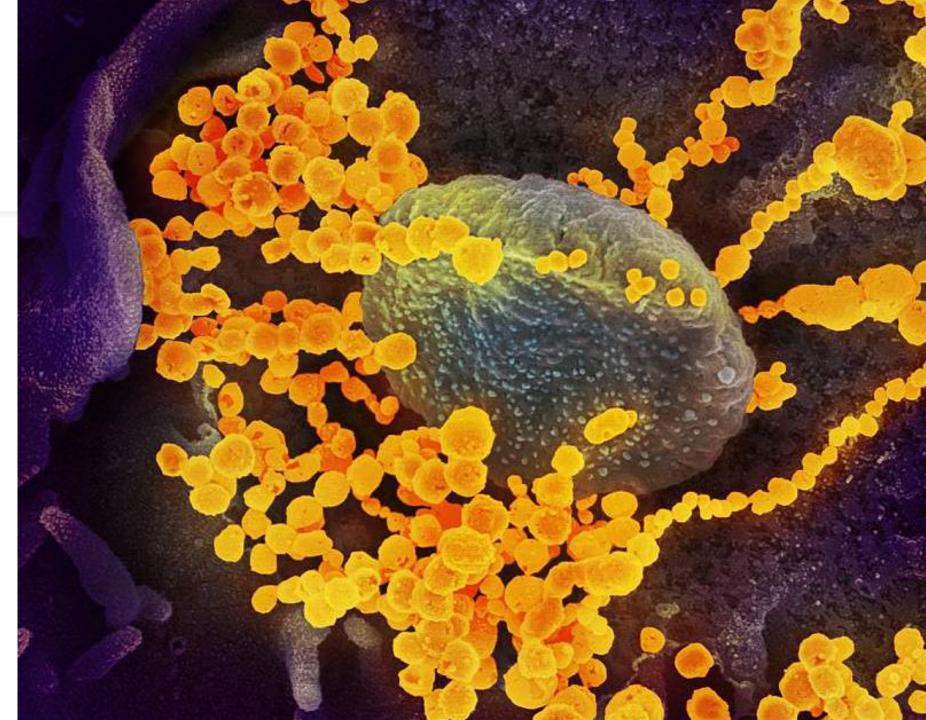
Chair Adult IDD Section AAN

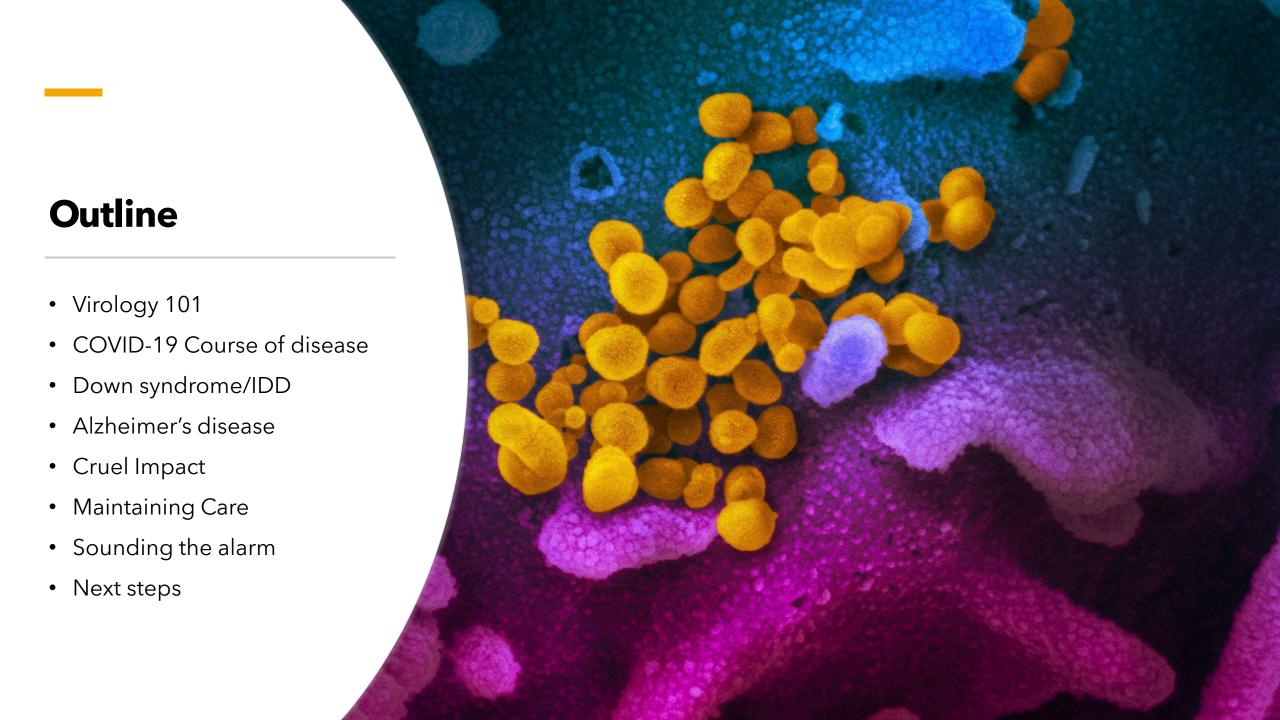


Disclosures

- Relationships with financial sponsors: none to disclose
- Potential for conflict(s) of interest: none to disclose

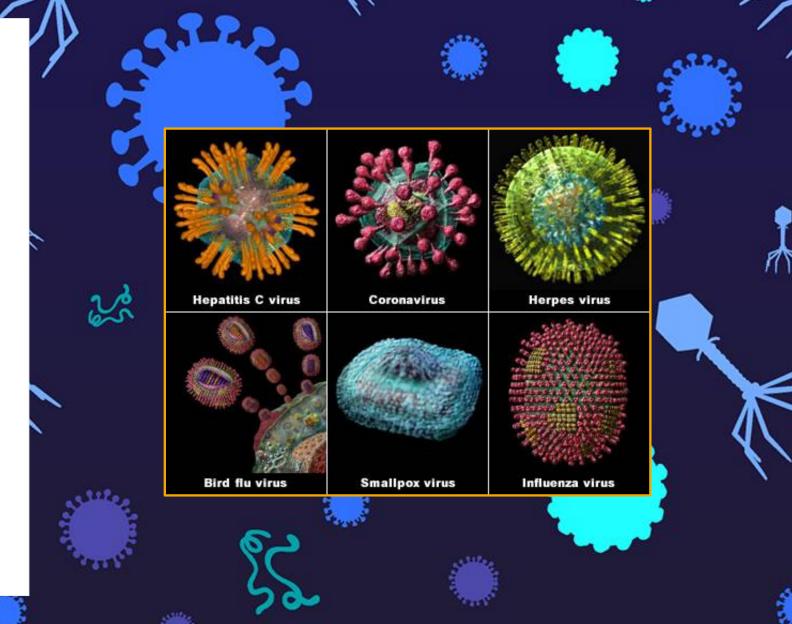






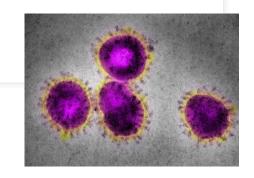
Virology 101

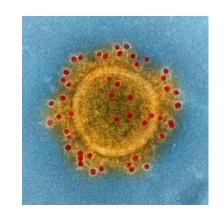
- A virus is genetic material contained within an organic particle that invades living cells and uses their host's metabolic processes to produce a new generation of viral particles.
- Vary in size, mode of transmission, DNA/RNA make up, infectivity and lethality

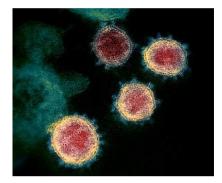


Coronavirus

- Severe Acute Respiratory Syndrome (SARS) 2002-2003
 - Guangdong Province China
 - Transmitted from bats to civets to humans
 - >8000 cases, 774 deaths, fatality rate approx. 9.6%
- Middle East Respiratory Syndrome (MERS) 2012
 - Saudi Arabia
 - Transmitted form camels to humans
 - >2400 cases, 858 deaths, fatality rate approx. 34.4%
- Novel 2019 Coronavirus (COVID-19) 2019-?
 - Wuhan Province China
 - Transmitted from ? Snakes to humans
 - >? cases, ?deaths, ?fatality rate approx.

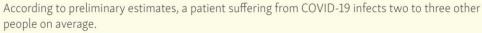


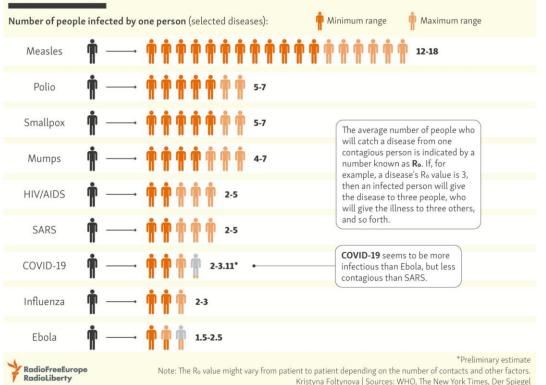




Not every Virus has the same impact

How Contagious Is COVID-19 Compared To Other Diseases?

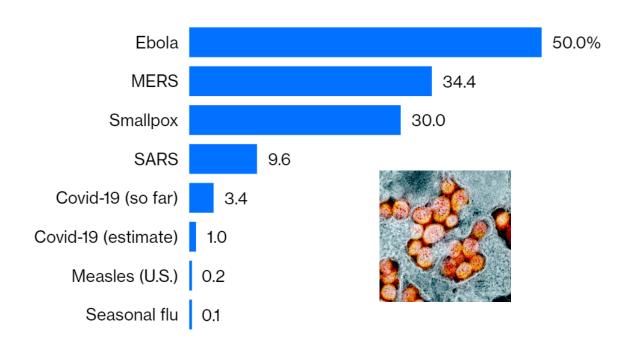




https://www.rferl.org/a/how-contagious-is-covid-19-compared-to-other-diseases/30492988.html

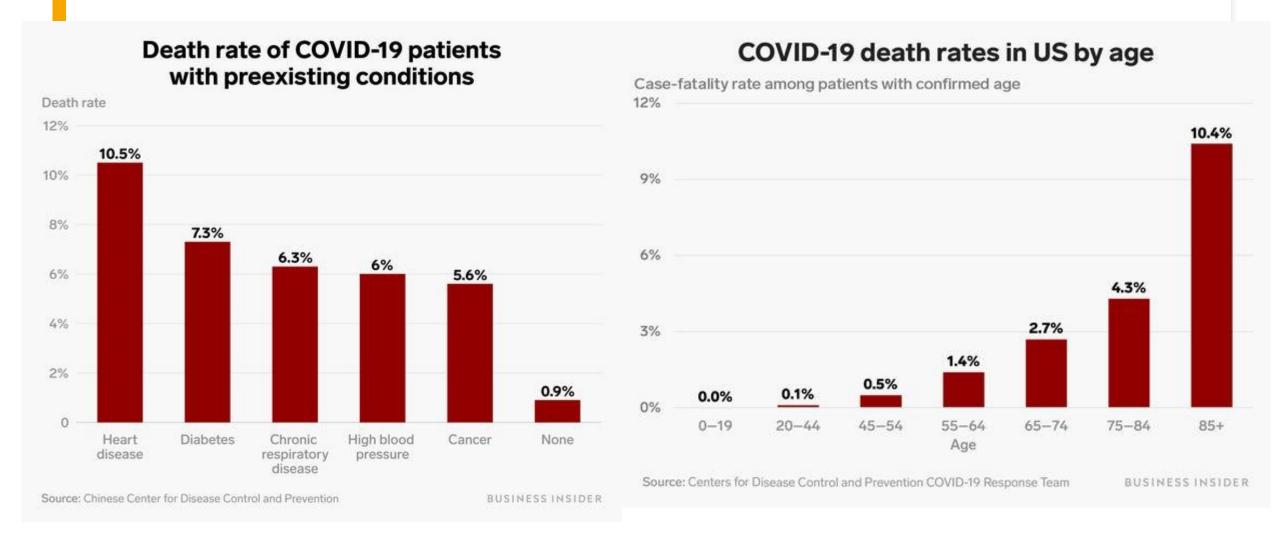
How Deadly Is That Disease?

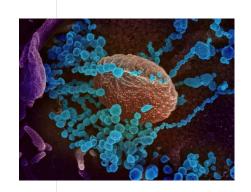
Approximate case-fatality rate



https://www.bloomberg.com/opinion/articles/2020-03-05/how-bad-is-the-coronavirus-let-s-compare-with-sars-ebola-flu

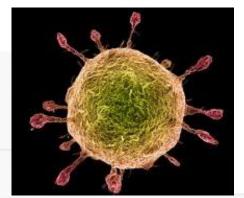
COVID-19 is worse for some than others

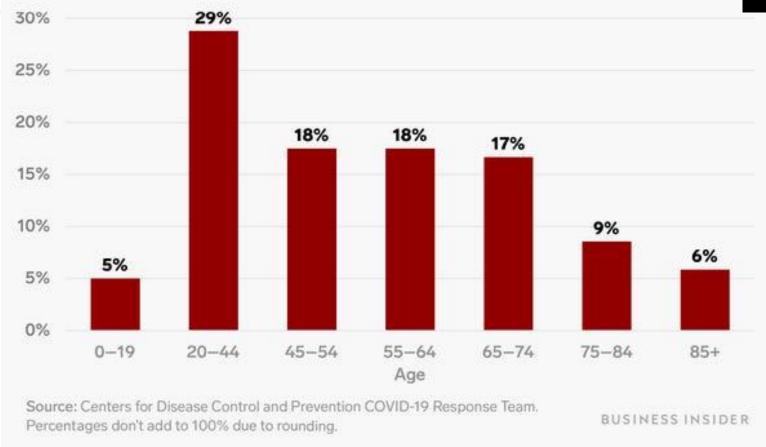




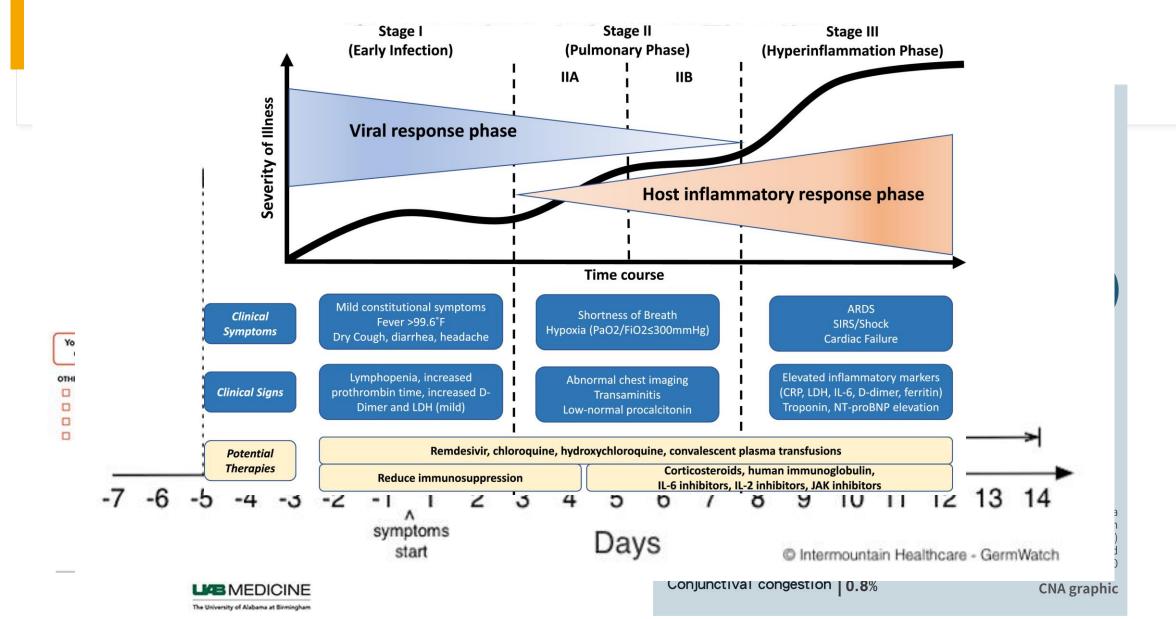
Age distribution of US COVID-19 cases

Percent share of cases in each age bracket 35%





https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6912e2-H.pdf



Dementia and COVID-19

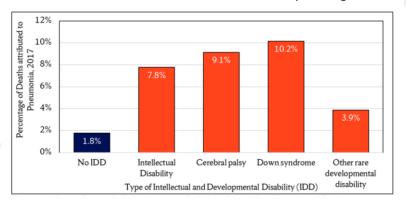
- Generally most over 65 years old, except for earlyonset Alzheimer's disease
- May not be able to understand or appreciate hygiene instructions and able to follow them
- May be around others who can pass on virus;
 congregate living
- Advanced disease associated with weakened immune system, breathing and swallowing difficulties
- Challenges with caregiver stress and availability



IDD/DS and COVID-19

- Breathing and swallowing difficulties; history of lung diseases
- Sleep apnea in those with DS
- Cardiac difficulties
- Weakened immune systems
- Higher degree of chronic diseases
- In relatively proximity to others at risk; congregate living
- Ability to follow and maintain adequate hygiene guidelines
- Impact associated with caregiver issues and concerns
- Insufficient data to know for certain

Potential Impacts of COVID-19 on Individuals with Intellectual and Developmental Disability: A Call for Accurate Cause of Death Reporting



Landes, S.D., Stevens, J.D., & Turk, M.A. (2019). Obscuring effect of coding developmental disability as the underlying cause of death on mortality trends for adults with developmental disability: A cross-sectional study using US Mortality Data from 2012 to 2016. BMJ Open, 9(2), 1-10.

The New York Times 'It's Hit Our Front Door': Homes for the Disabled See a Surge of Covid-19



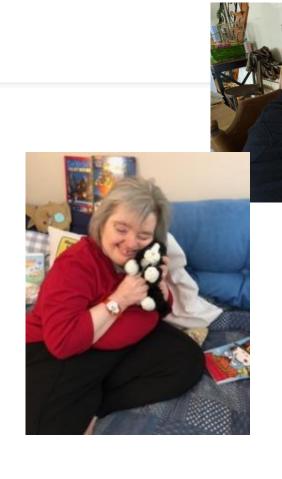
https://www.nytimes.com/2020/04/08/nyregion/corona virus-disabilities-group-homes.html

The Timeline of COVID-19 and its Impact

- Social distancing and under quarantine
- Getting sick
- Going to the hospital
- Recovery

Social distancing and isolation

- A change of routine in a restricted environment
- Stress and maintaining "normal"
- Being scared
- Keeping safe



Maintaining Care

Section of the sectio

- Chronic conditions do not go away
- Active mental health concerns
- Ensuring caregiver supports are considered
- Telehealth
- Staying connected

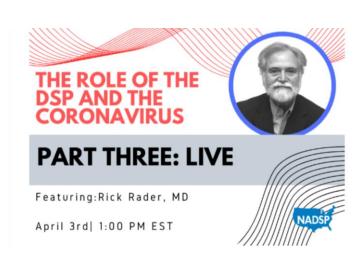


Getting sick

- Signs of the illness
- Testing; checking for fever, GI difficulties,
 Respiratory complaints and COVID-19 testing
- Care practices
- Quarantine
- Personal Protection Equipment (PPE)
- Deciding when a higher level of care is needed
- Stress management

Getting Information





https://nadsp.org/covid-19resources/



Covid-19 & Down Syndrome Q & A

NTG Joins National Groups in Issuing Q&A on COVID-19 and Down Syndrome

With the constantly changing status of the COVID-19 pandemic in the United States, the NTG joined in with an effort by national organizations to produce and issue a Q&A on COVID-19 and Down Syndrome. The Q&A has two versions, one a brief series of content answers, and another longer version covering numerous questions that have arisen. The Q&A is directed toward families and others concerned with impact of COVID-19 upon persons of all ages with Down syndrome.



lownload Abbreviated Version in English

Descargue la versión abreviada en españo

Download Expanded Version in English

Descargue la versión ampliada en español



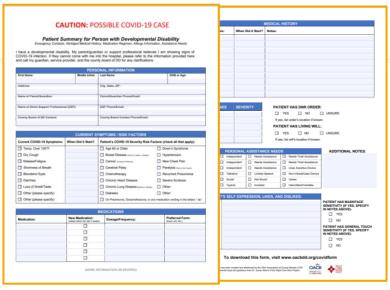
Going to the hospital

- Testing
- Treatment
- Getting the necessary care
- Quarantine
- Communication
- Palliative Care
- Death and dying



Improving Care in the Hospital

- Communication and Accurate Information; Health Passport/summary
- Support of the Caregiver/DSP; Cares Act Provision
- Hospital Visitation Rights; NY DOH, NJ, TN, National advocacy effort
- Ensure equity of care



http://www.oacbdd.org/news/20 20/04/08/releases/oacb-createshealth-passport-to-assist-peopleserved-unable-to-enter-hospitalswith-staff-family/





Due to COVID-19 Hospital Visitation Policies Exclude Caregivers of People with Disabilities: What We're Doing to Change the Policies https://myemail.constantcontact.com/--Hospital-Visitation-Policies-Exclude-Caregivers-of-People-with-Disabilities---What-We-re-Doing-To-Change-lt.html?soid=1102624420023&aid=POHFyW4NBHw

https://opwdd.ny.gov/system/files/documents/ 2020/04/doh_covid19_hospitalvisitation_4.10. 20.pdf

Sounding the Alarm

CORONAVIRUS AND INEQUALITY

Published — April 8, 2020

STATE POLICIES MAY SEND PEOPLE WITH DISABILITIES TO THE BACK OF THE LINE FOR VENTILATORS



https://www.propublica.org/article/people-with-intellectual-disabilities-may-be-denied-lifesaving-care-under-these-plans-as-coronavirus-spreads





Safeguard Against Disability
Discrimination During COVID-19

Including individuals with disabilities in the COVID-19 response to ensure equitable care



THINK EQUITABLE CARE - TAKE ACTION!

- Inform key medical personnel immediately that individuals with disabilities have equal rights to COVID-19 testing and treatment.
- Make equitable decisions to ensure that allocation of COVID-19 resources, supplies, and care are not based on inaccurate assumptions about life with a disability.
- Provide accommodations to make sure all individuals can access COVID-19 testing and treatment. This requirement includes accommodations for behavioral, intellectual, or physical disabilities that may impact someone's ability to comply during testing and treatment.



KNOW THE BEST PRACTICES - TAKE ACTION!

- When communicating with individuals with disabilities:
- Talk directly to them.
- · Ask permission before speaking with their caregivers, if possible.
- · Ask the caregiver for assistance if you need help communicating with a patient.
- Use plain language to tell individuals and caregivers about COVID-19 test results and anticipated procedures.
- Keep in mind that you may have difficulty understanding the patient, however, in most cases they understand you.

Make these accommodations:

- Allow a caregiver to go with a patient to ensure adequate support for decisionmaking and treatment.
- Provide ramps and rooms with enough access for a wheelchair.
- Provide qualified interpreter services for the deaf or hard of hearing.
- Use prompts, such as picture cues, for those with limited use of verbal communication.
- Provide the time needed for individuals to speak, respond, and understand.

THINK EQUITABLE!

This information is based on guidance from the Department of Health and Human Services Office for Civil Rights.

For more information, visit HHS.gov/ocr and bit.lv/2WXEscv

https://www.ucucedd.org/safeguard-against-disability-discrimination-during-covid-19/



HHS Office for Civil Rights in Action



March 28, 2020

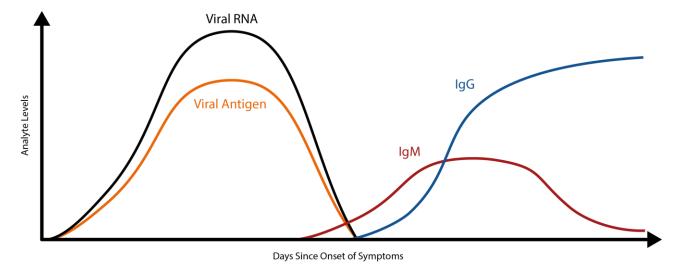
BULLETIN: Civil Rights, HIPAA, and the Coronavirus Disease 2019 (COVID-19)

In light of the Public Health Emergency concerning the <u>coronavirus disease 2019 (COVID-19)</u>, the Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services (HHS) is providing this bulletin to ensure that entities covered by civil rights authorities keep in mind their obligations under laws and regulations that prohibit discrimination on the basis of race, color, national origin, disability, age, sex, and exercise of conscience and religion in HHS-funded programs.¹

https://www.hhs.gov/sites/default/files/ocr-bulletin-3-28-20.pdf

COVID-19 Work up

- Nasal, oral, blood, fecal for evidence of the the virus
- How long to get back results
- How accurate are the tests results?
- Symptoms/signs
- Chest x-ray/CT Scan
- Blood; CRP, Ferritin, LDH, CPK, LDH
- Exclude other pathogens



https://thenativeantigencompany.com/why-we-need-antigen-and-antibody-tests-for-covid-19/

COVID-19 Treatment

- Prevent further spread
- Reduce fever
- Fluids/nutrition
- Respiratory and cardiac support
- Antiviral therapy; stopping the virus along its life cycle
 - ?? Hydroxychloroquine
 - ?? Remdesivir, Favipiravir
- Stress Management
- Communication
- Planning ahead

Prevention

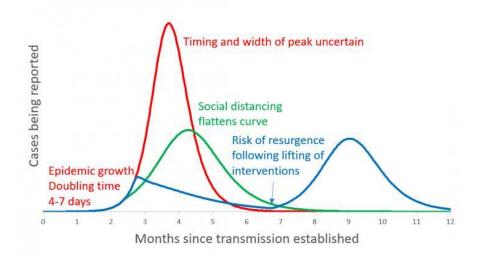
- Social distancing/hygiene
- Adequate Personal Protection Equipment (PPE)
- Convalescent plasma
- Vaccines





Recovery

- Post COVID-19 stress
- Transitioning and rehabilitation
- Getting back to "normal"
- Preparing for next wave
- Lessons learned







@whiteboardpsych