

Nicole Riddle, MD, discusses what doctors wish patients knew about wearing masks

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Featured topic and speakers

In today's COVID-19 update, AMA Chief Experience Officer Todd Unger talks to health experts about six things doctors wish their patients knew about wearing masks.

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Speakers

- David Welsh, MD, MBA, general surgeon, chair of OMSS Governing Council, AMA
- Nicole Riddle, MD, associate professor, department of pathology, USF Health
- Ricardo Correa, MD, EdD, program director, endocrinology fellowship, U of A College of Medicine

Transcript

Unger: Hello, this is the American Medical Association's COVID-19 Update. Today we're discussing six things doctors wish their patients knew about masks, and addressing confusion that still surrounds mask wearing. I'm joined today by Dr. David Welsh, a general surgeon and chair of the AMA's Organized Medical Staff Section, or OMSS, governing council in Batesville, Indiana. Dr. Correa, program director of endocrinology fellowship, and the director on diversity of GME at the University of Arizona College of Medicine in Phoenix, Arizona. Dr. Correa is also a delegate of the AMA's IMG section governing council. And Dr. Nicole Riddle, associate professor in the Department of Pathology at USF Health in Tampa, Florida. She also serves as the member at large of the AMA Young Physician Section governing council. I'm Todd Unger, AMA's chief experience officer in Chicago. Dr. Riddle, let's start with you. What is the most important concept you wish patients knew about mask-wearing?

Dr. Riddle: Thank you very much, Todd, for that question, and thank you for having us all here today. First and foremost, it's just extremely important for everyone to understand at a basic level why they should wear a mask. Essentially, masks are essential to preventing the spread of the virus. In fact, a study out of the University of Washington showed that if 95% of Americans wore masks, we would actually be able to decrease the death rate between August and November by up to 34,000 people. I mean, that is a lot of people. So the bottom line is basically that masks really do save lives. They really do prevent the spread of disease, specifically this virus that we're all fighting, and they can save my life, your life, and everyone's loved ones' life.

Unger: Dr. Welsh, the data is there. Why are people confused about mask wearing?

Dr. Welsh: Part of the problem is we're getting mixed signals from different sources. If we stick to the science, we wouldn't have a problem. Unfortunately, people have their own version or their opinions about the situation. If we stick to science, we can show both good studies, such as out of Thailand and Singapore, where masking decreased their COVID spread. I'm a general surgeon. Surgeons have known for years the importance of wearing masks to decrease infection spread. COVID is respiratory. The nose is involved. Surgeons know that you want to make sure that you mask above the nose and over the mouth to be effective. Unfortunately, we have to keep re-discussing the same points that keep coming up from different versions. But we're back to the same idea that masks do work, and where they're used, spread is decreased and the severity is decreased.

Unger: Dr. Correa?

Dr. Correa: Yes. So another important thing is that what I feel during this pandemic is that this issue has been politicized, and that one party is the one that use the mask, and another is the one that don't use the mask. And this has nothing to do with politics. I know that we're in an election year. This has to do with public health, totally independent from politics. And something that both Dr. Riddle and Dr. Welsh mentioned is that if you want to protect the other, and if you care about the other, you should

wear a mask.

Unger: Well, Dr. Welsh, we talked a little bit about misconceptions earlier. One we hear repeatedly is about how long you can wear a mask. Is there an issue there? Can you clarify that for us?

Dr. Welsh: There is not an issue, and thankfully we do have science on this that has shown that wearing the mask for prolonged periods of time does not decrease oxygen saturation. It does not increase CO2 retention. As a general surgeon, I trained in a lot of different areas. I spent time in the OR, on some cases over 10 hours. The surgeons did fine. Anesthesia did fine. The nurses did fine. They were able to function effectively and do good jobs. People wear masks all day long. They're able to accomplish their goals. They're able to do the job and take good care of patients. And we have good science to support that.

Dr. Riddle: I mean, I would just like to echo what Dr. Welsh said is, of course it is okay to wear a mask for almost any amount of time. You can wear them without fear of deoxygenating, like Dr. Welsh said, without going into asthmatic fits for, for most people, or having an attack. You can wear them when you're exercising. I know people that have worn them through labor. I myself have worn them through 12, 14-hour surgeries. And there's really not an excuse for people not to wear a mask, for almost anyone.

Dr. Correa: And something that I would like to mention is that wearing a mask is wearing adequately or correctly the mask. So I have one from the AMA here. So you have to wear the mask on the top of your nose, the bottom of your mouth. You have to cover your entire half of your face. If you are not doing this, it's not correct. I have seen a lot of people that they wear it on their mouth and all their nose is open. That's not protecting anyone, because you're spilling all of the things through the nose. Or they're wearing under the mandible. I don't know what they are doing with that. That's better not to wear anything. So it's very important: wear your mask in your entire face. Well, half of your face.

Unger: Dr. Correa, in addition to wearing the mask properly, there is also a confusion about when people need to wear masks. Do they need to wear them every time they go out of the house, or what's the guideline there?

Dr. Correa: So this is a very important question, Todd, and thank you for asking. So basically at this point, the science is changing and we don't know exactly every detail. At this point the recommendation is that if you are inside a place where there is a lot of people, you should wear a mask. Even if you are inside a place that there's small amount of people you should wear a mask. Inside, wearing a mask is mandatory. Outside, if you are in a place that you have a lot of distance between people, you can consider not wearing a mask, depending on the situation. But if you are outside with a group of people, and we are seeing this in celebrations and things, you should wear a mask if you are very close to people. So it doesn't matter if you're inside or outside. If you see a crowd, there is the place where you should wear a mask.

Dr. Riddle: And that is exactly true, Dr. Correa, that whether you're going to the grocery store or the department store... We have to go to a Target or Walmart or whatever. You have to get essentials. Those are the sort of places you wear it. I know people that have had very small weddings or quinceaneras, and everybody still wears masks the whole time. They dress them up. You can make it part of the ensemble. I suppose if you're walking on the beach not near anyone, or in a park, and there's going to be lots of space between you and others... But other than that, you should really have one on.

Unger: Dr. Welsh, this is the question that we got on our Facebook page from a patient that asked, "We didn't need to wear a mask in March. Why are we being told to wear them now? So what have we learned about COVID-19 that we didn't know in March, and how would you answer that question?"

Dr. Welsh: That's a great question. Much of what we do in medicine evolves over time. We're in a situation with COVID where what we've seen evolve has been on fast-pace. We were learning things every day about COVID. We're finding out what works in Singapore doesn't work in Italy. We're finding out what affects folks in the East Coast may be different on the West Coast. We are learning, and we're learning at a rapid pace. We're exchanging ideas with colleagues around the world and learning from other folks' experience. What we have learned from March to now, we're learning what we can do and what we shouldn't do. And what we have learned is by masking up, we can decrease the rate of spread.

We've got great anecdotal stories as well as scientific stories. We have people in the hair salons who were masked up who became positive, but because they were masked up and their patrons were masked up, none of the patrons got the COVID. We've had situations where people went to a funeral. This is local for me. Went to a funeral, they weren't masking up. Someone there was positive. A large number of people became positive, some of them very, very ill.

So we have first-hand knowledge. We have scientific data showing that the importance of masking is out there. We're learning. We're learning that the things our mom taught us about washing our hands and staying home if sick, that moms were, right. We're going to learn more, and we're going to adjust

what we're doing as we learn more, because we're having conversations with colleagues around the world and we're learning from their experience. And as we learn, our message will change, except for one. We want everyone to do the best they can, we want everyone to do what mom said, and we want everyone to stay healthy.

Unger: Well, last question. I'd like to hear from each of you. You've had almost six months under your belt now of addressing the pandemic. What do you have in terms of communication tips for physicians to ensure their messages about mask wearing and other ways to protect themselves are heard? Dr. Riddle, why don't you start?

Dr. Riddle: So it's important, when you're speaking with patients or colleagues or anyone, to always just make sure you use clear, simple language: language that you know that whoever you're talking to will understand, but also language that's rooted in science. You want to make sure that you are facing them and have their attention. And lots of times what I like to do, particularly depending on who you're speaking to, you don't know exactly what their level of education is or where they stand on mask wearing. I often like to discuss things with colleagues in a way where I'm educating them without letting them know I'm educating them, where they're talking about something new that I just learned, or just talking about something that of course we know in general, just to not make somebody possibly feel bad or out of sorts that maybe they didn't understand something.

And then of course, since we don't know, people's level of understanding, even if you have to repeat yourself the third, fourth, fifth time using slightly different language each time to make sure that you end up using verbiage that hopefully they can comprehend or can really speak to them. And make sure that not to get that condescension in your voice that we doctors are notorious for forgetting sometimes. We want to make sure you avoid that.

Unger: Dr. Correa, what are your communication tips?

Dr. Correa: So, first I think that an analogy is that when you go to the doctor and the doctor recommends you something, for example, take a pill, the majority of the patient will follow that recommendation and you will take the pill for your chronic disease. This is the same thing that we are doing right now. It's not a pill, but it's a recommendation of wearing a mask and social--and physical distancing. I don't want to use the word social distance, because we are not socially distancing among each other. We're physical distancing among each other. So these are the recommendation that we are giving to each other. So these are the things that, if in the past you were following a pill, you should follow again the recommendation of doctors.

The other thing that I will recommend to all of my colleagues, something that Dr. Riddle mentioned, is to talk in the cultural background of that person and in the language of that person. Sometimes we assume things and the cultural backgrounds can influence things that we assume, and then they will not follow that recommendation. So in a specific example, for the Hispanic-Latinx population it's totally

different how you approach on wearing mask, than you will approach to an African-American Black population or a white Caucasian population. So you have to try to understand a little bit more of each background culture. It will be on the webpage of the AMA. The AMA is doing a lot of great work in other language. So look at that and then try to approach your patient at that level.

Unger: Dr. Welsh, do you want to comment?

Dr. Welsh: Those are great ideas, and I'm going to use some of those when I deal with my patients. I think we need to recognize that this problem generates a lot of anxiety, a lot of angst. First, we need to stay calm. We need to recognize that this brings up a high anxiety among a lot of folks. Some folks have misinformation that we talked about earlier. So we need to explain the science, as was previously mentioned, at the level they can understand, but to remain calm, make sure they realize there is no such thing as a bad question, and make sure that they can ask questions later if they forgot.

Locally, I'm a county health officer, and every week or two... Nothing to this level, Mr. Unger, but we do Helpful Hints from the Health Department, short several-minute videos with messaging to the public about what's the latest in our county and with COVID. And that seems to resonate with a lot of folks. So I think stay calm, stick to the signs, acknowledge people have high anxiety and their own opinions. But then steer them with the science to a good place and let them know that they have a stake in this and they can make a difference for themselves, their family, their friends, their coworkers and their neighbors. And together, we will get through this because we're all motivated to help our patients and help our community.

Unger: Well, thank you so much, Dr. Welsh, Dr. Riddle and Dr. Correa, for being here today and sharing your perspectives. This video was actually inspired by what is now one of the most popular articles on the AMA site, Six Things Doctors Wish Their Patients Knew About Masks. So thanks for reinforcing how vital it is that patients do wear masks. It's not political, it's about safety and it's about the data. You can wear them for long periods of time. Make sure you wear them right by covering your nose and your mouth. Know when to wear a mask and make sure when you're not having physical distancing, when you're inside; how important that is. And remember, we're always learning. Medicine changes as we know more. Let's embrace that change and learn from it.

So thank you so much for joining us today. That's it for today's COVID-19 update. For additional resources on COVID-19 visit [ama-assn.org/COVID-19](https://www.ama-assn.org/COVID-19). Thanks for joining us and please take care.

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