

Amid search for new normal, questions linger about COVID-19

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Two years after COVID-19 was declared a pandemic and life was upended in the United States, the country is again hoping for some sense of normalcy. The SARS-CoV-2 Omicron variant surges have declined. Mask requirements have started disappearing. While this provides many with a sense of optimism that the country might be turning a corner with the pandemic, it has left others with more questions than answers as a “new normal” emerges.

Recently, the physicians and scientists who lead the Centers for Disease Control and Prevention (CDC) relaxed their mask recommendations for most of the U.S. population, including children in schools, based on community level indicators. These new COVID-19 metrics place more than 98% of the country in areas of low or medium community levels, allowing many to shed their masks. Amid this new CDC advice, though, AMA President Gerald E. Harmon, MD, said he will continue to mask up to protect others.

The CDC’s COVID-19 community levels is a new tool to help families and communities decide what prevention steps to take based on the latest data, and come as cases plummet after the SARS-CoV-2 Omicron variant sent them surging. It remains essential that all Americans who are eligible get fully vaccinated and boosted to protect themselves from the worst outcomes of COVID-19.

For more, read Dr. Harmon’s Leadership Viewpoints column, “Are you boosted? If you’re eligible, now’s the time to act.” Yet as Omicron fades, new patient questions about wearing masks, getting tested and COVID-19 preventive measures have emerged.

Three physicians took time to discuss some questions patients might have. They are:

- Christopher Garofalo, MD, a family physician in North Attleboro, Massachusetts as well as a member of the AMA Organized Medical Staff Section and AMA Private Practice Physicians Section.
- Scott Koepsell, MD, PhD, a pathologist and vice chair for clinical operations at Nebraska Medicine in Omaha. He was instrumental in setting up testing for COVID-19 at the University

of Nebraska and for multiple sports teams around the region.

- Devang Sanghavi, MD, a critical care medicine specialist and medical director of the medical intensive care unit at Mayo Clinic in Jacksonville, Florida.

Should I still be wearing a mask?

“There is no harm in wearing a mask. People in other countries have been wearing masks for years to help blunt the effects of illnesses and pollution,” said Dr. Garofalo. “If you want to wear one, I encourage you to do so. I have not seen many patients with traditional flu this year or last, likely because of wearing masks.

“For most people it will be a choice and I support your choice,” he added, noting that “some people should still be wearing a mask.” That would include those who are ineligible for vaccination or people with compromised immune systems.

Additionally, “if you live in a household or work around people who have not been vaccinated, please consider wearing a mask for them, if not yourself,” said Dr. Garofalo. “The more people who wear masks, the more supported those who need to wear one will feel.”

Should my kids wear masks to school?

“Being indoors, such as when at school, is more of a risk for coming into contact with SARS-CoV-2 so it is reasonable to consider still wearing a mask at school,” Dr. Garofalo said. “If you are immunocompromised or have not been vaccinated, then I recommend wearing a mask since you are particularly vulnerable to the virus and getting sicker if you do catch it.”

But “being hospitalized or dying are not the only worrisome complications of COVID-19,” he said, noting that there is also the burden and effects of long COVID among many recovering from this disease.

For example, “we see many people who have trouble breathing, some needed oxygen or inhalers, and limiting their physical activity for months after getting sick,” said Dr. Garofalo. “Other people have problems with memory or brain fog or feel incredibly exhausted, which affects their ability to function well at school.”

Find out what to tell immunocompromised patients about COVID-19 vaccines.

I'm immunocompromised. Should I keep masking up?

Patients with compromised immune systems “should still be wearing a mask in an indoor setting at the very least,” said Dr. Sanghavi. Such patients have a higher risk “of getting breakthrough infections even though they were vaccinated and boosted.”

“That is because of their inability to mount a response to the vaccine and form adequate antibodies to the virus,” he explained, adding that “we knew before the booster dose of the vaccine got approval that our immunosuppressed patient had a lower level of circulating antibodies and should get a booster.”

Discover what doctors wish patients knew about breakthrough COVID infections.

What other health conditions put me at greater risk?

“Conditions and treatments that decrease your body's immune system and ability to fight off infections increase your risk and extra care is warranted,” said Dr. Garofalo. “Those who are receiving chemotherapy for cancer are at particular risk as well.”

Additionally, “many people who are on oral or injectable immunosuppressants for a variety of diseases such as rheumatoid arthritis, psoriasis and ulcerative colitis” should also take extra precautions, he said.

People with disabilities also are “at a higher risk of severe disease and worse outcomes,” said Dr. Sanghavi. “These patients do worse as compared to the general population and thus need special consideration in terms of masking” and other preventive measures.

Patients with end-stage renal disease, chronic obstructive pulmonary disease or other chronic pulmonary issues, congestive heart failure or coronary artery disease or if they are an older person have a lower “ability to handle a severe disease becomes less because of poor reserve,” he added.

“These patients should take special precautions as compared to the general population, especially when it comes to masking and vaccine boosters,” he said.

How do I know when to wear a mask?

“If there are places that still require you to wear a mask, such as at a hospital or physician office, please wear one,” Dr. Garofalo said. “You should also wear a mask at certain times when you are going to be around someone who you know is at high risk of catching the SARS-CoV-2 virus.”

Masks are also still required on public transit and in transportation hubs, at least through April 18.

Indoor activities are also riskier. That means “going on a hike with that person won't require a mask but wearing a mask while sitting in a movie theater, restaurant or comedy club would be the thoughtful and safer gesture,” he said. “Also, if someone asks you to wear a mask, for whatever reason, please respect that request as you would respect other requests that are made of you.”

“Masks can help to protect you from viruses and bacteria other than SARS-CoV-2, so you may be able to stay healthier, especially during the winter when we are indoors more,” said Dr. Garofalo. “Think of it as a new accessory like a scarf or headband.”

In fact, “wearing a mask is quite normal in some countries,” he said, adding that “if you do see someone wearing a mask, please be kind and do not judge or make fun of them. You don't know the whole story.”

Is it OK to eat in a restaurant?

“The number of cases of COVID-19 has dropped enough and enough people are vaccinated that eating inside at a restaurant is OK,” said Dr. Garofalo, noting that “wearing a mask while not eating is a choice and is not wrong.”

But this also depends on the COVID-19 transmission and community levels. It also depends on an individual's risk for severe outcomes from COVID-19.

“If you are with someone at higher risk of severe COVID-19, it is reasonable to wear a mask,” he emphasized.

Should I still be stockpiling COVID-19 tests?

“The supply of COVID-19 tests is now meeting demand and hoarding of tests is unlikely to be useful,” said Dr. Koepsell. “In addition, some tests have an expiration date after which the test should not be used.”

That means that “hoarded tests will only be good for a fixed amount of time,” he said.

Should I take a test every time I get together with friends or travel?

COVID-19 “rapid tests are not recommended for screening people with no symptoms,” said Dr. Koepsell. Similarly, the tests are not “meant to ensure or prove you will not spread the SARS-CoV-2 virus after a negative result.”

This is “because there can be false negatives,” he explained. “However, if someone does take the test before meeting friends or traveling and discovers they are positive, they should follow the CDC guidelines for self-isolating.”

Discover what doctors wish patients knew about which COVID-19 test is best.

How should I be using COVID-19 tests?

“The tests continue to be useful to determine whether someone with symptoms of COVID-19 has the virus,” said Dr. Koepsell. “Regardless of test results, if you are sick, you should limit your exposure to others.”

Visit the AMA COVID-19 resource center for clinical information, guides and resources, and updates on advocacy and medical ethics.

The AMA has developed frequently-asked-questions documents on COVID-19 vaccination covering safety, allocation and distribution, administration and more. There are two FAQs, one designed to answer patients’ questions (PDF), and another to address physicians’ COVID-19 vaccine questions (PDF).