

Transcription of Video/Audio clips with Dr. Doug Kasper, OSF HealthCare Infectious Disease physician

Dr. Kasper says OSF will continue using **convalescent plasma** but he points out nationwide, there is a limited supply and infrastructure for blood plasma screening and distribution. He says screening for other pathogens is important for health and safety.

“The pace at which all of these technologies and therapeutics is far quicker than anything we’ve done within medicine in our lifetimes and because of that, we often have to make sure these therapies are available and can be safely monitored when they’re given and that does require oversight from national boards.” (:25)

According to Dr. Kasper, early on doctors knew patients who were very sick progressed to **respiratory failure and required intubation**. So early treatments focused on trying to prevent that outcome.

“What’s changed in that time is that we developed a lot of strategies – some which are pharmacologic, some of which are patient management strategies that have helped with lung-related infection injury to keep people from progressing to full respiratory failure and ICU hospitalization.” (:20)

Part of the patient management strategy involved **proning** – putting patients on their stomachs.

“It helps oxygenate the posterior portions of the lungs. It is a free procedure that is minimally invasive to the patient and outside of some discomfort from being in the same position for a prolonged period of time it has shown a very big benefit in maintaining oxygen levels in the blood – reducing the progression of the disease toward intubation.” (:28)

Infectious disease doctors suspected the anti-malaria drug **hydroxychloroquine** could have some benefit for COVID-19 patients, based on previous research involving other coronaviruses, but additional research and experience early in the pandemic proved that was not the case.

“What has changed since that time is that we have multiple, randomized controlled placebo trials that have not yet shown clinical benefit for hydroxychloroquine for patient care. That was accepted by the government with the rescinding of the FDA’s Emergency Use Authorization in June.” (:23)

A lesser-publicized treatment involves using **steroids to reduce inflammation**, which develops as part of the body’s immune response.

“Specific other strategies that have been shown to reduce mortality include dexamethasone which is a steroid – which is FDA approved for many other conditions but has been shown to reduce mortality rates in patients with COVID-19 infection that are requiring supplemental oxygen or ICU-level admission.” (:23)

Excessive inflammation occur if the **immune system over reacts** and that can cause lasting damage.

“There are things were only aware of now because people who became infected in February and March are now showing us what happens over the long term. Our concern remains not only the acute infection but ensuring that long-term damage doesn’t occur to anyone that has the disease.” (:19)