

UPDATE #5 | 17 March 2020



Advisory on COVID-19

SPORT MEDICINE ADVISORY COMMITTEE UPDATE:

As of March 17 the number of confirmed cases of COVID-19 is over 183,000 globally, with approximately 80,000 recovered and over 7,100 deaths. The largest surges in cases continue to be in Europe with Italy, France, Germany and Spain being hardest hit. There are 161 countries reporting cases. The WHO has declared COVID-19 as a pandemic.

In Canada, the numbers are rising, with over 440 confirmed cases, with 4 deaths in a nursing home in BC and 1 death in ON. The Public Health Agency of Canada still states that the overall risk of infection in Canada is low, but the entire nation needs to work together to "flatten the epidemic curve" (slow the rate of transmission so that at its peak, the case load will not overwhelm our health care system's capacity).

The existing strong advice on the importance of hand and facial hygiene and "social distancing" still holds.

Updated Government of Canada Recommendations:

- All non-essential travel outside Canada is to be avoided.
- All Canadians currently abroad are urged to return to Canada ASAP.
- All travellers returning from any destination including USA are required to self-isolate for 14 days from the date of return (see the infographic below for specific information on what is involved in self-isolation).
- Canadian borders are now closed except to Canadian citizens, permanent residents, and USA citizens.
- If you have symptoms (fever, cough, runny nose, sore throat) when attempting to board a plane to return to Canada you will not be allowed on the flight.
- Airlines are reducing capacity and flights (e.g. Air Canada is operating at 50% of normal capacity), such that it may be difficult to return to Canada later.
- As of 18 March, international arrivals by air (excluding USA, Caribbean, and Mexico) will only be through Toronto, Montreal, Calgary or Vancouver.
- There is enhanced screening and advice on self-isolation at all airports (see the infographic link below)
- All Canadians are requested to stay home and work from home, practice social distancing (2m distance) if at all possible.

KNOW THE DIFFERENCE: SELF-MONITORING, SELF-ISOLATION, AND ISOLATION FOR COVID-19

Sports and Institutes:

- The IOC remains committed to the Games in Tokyo going ahead on time and is addressing the qualification system through the International Sport Federations.
- See the IOC communiqué

- Tokyo 2020 Qualifying and test events continue to be cancelled.
- The IOC and IPC are working with International Sport Federations to develop fair alternate qualifying processes.
- INS, CSIO, CSIC, CSIP, CSCS, CSCM and CSCA are all closed. Many staff are working from home. Contact your regional institute or centre by email for details.
- Athletics Canada closed both its East and West Hubs on 16 March 2020.
- There was one confirmed positive case at the Cross Country World Cup event in Québec City. It was a foreign national who immediately isolated on arrival, but the Canadian team members have been advised to undergo 14 days of self-isolation after leaving Québec City.
- As noted before athletes should not seek on-site medical attention for respiratory conditions (cough, fever, runny nose, sore throat) at CSI clinics. Consult with local public health authorities or CMOs by telephone or email to discuss treatment, isolation or the need for testing.
- Over the last 48 hours there have been multiple closures and restrictions on public gatherings, restaurants, bars, casinos, gyms, libraries, *etc.* across the country. This varies by region. Check the provincial links here (<u>PROVINCIAL LINKS</u>) or your own city links for details and specifics.

Training Environments :

- NSOs should withhold athletes/coaches/staff with symptoms from attending training.
- Medical advice recommends that self-isolation includes staying at home and avoiding all mass gatherings and public transport. Training outside (e.g. running) is permissible in isolation; avoiding social gatherings or training groups.
- Spacing of 2 metres or greater for exercising athletes (equivalent to 4m² = 45ft² floor space per athlete in indoor spaces) is recommended and should be adopted by NSOs in terms of athlete and equipment spacing.
- If training facilities are still accessible NSOs should check with facility cleaning services regarding cleaning fluids and enhanced practices to ensure optimal effectiveness of products, and to ensure that cleaning is directed at surfaces frequently touched by hands rather than floors and walls, etc.
- NSOs should strongly review training in public venues that they cannot control for enhanced hygienic practices or social spacing appropriate to athletes. Consider off-hour use and NSO involvement in monitoring of cleaning.

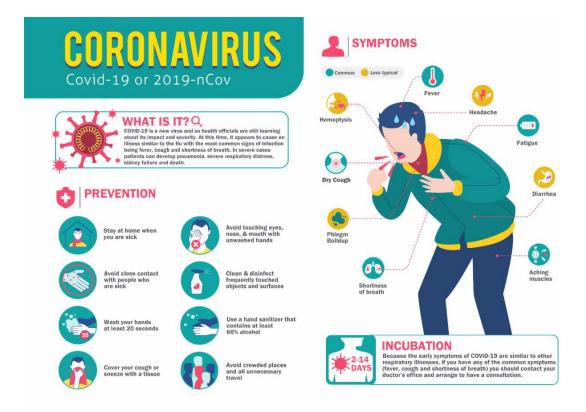
Mental Health:

- It is important to attend to the mental health of athletes whose training or qualification for 2020 Summer Games may have been interrupted by this pandemic.
- Athletes can reach out to mental health professionals or mental performance consultants through their NSO or at regional institutes by email.
- Please see the linked infographic from Game Plan for additional advice below.

CANADIAN NATIONAL TEAM ATHLETE MENTAL HEALTH RESOURCE GUIDE

AN UPDATE WILL BE PROVIDED EVERY 48 HOURS AT 4:00 PM EST.

Update #5: Advisory on COVID-19



Updated links from the Government of Canada and WHO

- https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html#fag
- https://www.who.int/emergencies/diseases/novel-coronavirus-2019
- Provincial Information

Travel Advisories

All countries recommend no travel and require 14 day self-isolation upon return.

Further Questions:

Further information about COVID-19 may be obtained from your NSO Chief Medical Officer or Team Physician, or the Chief Medical Officers of the Sport Medicine Advisory Committee.

- Dr. Mike Wilkinson, Canadian Olympic Committee: mwilkinson@olympic.ca
- Dr. Andy Marshall Canadian, Paralympic Committee: amarshall@paralympic.ca
- Dr. Suzanne Leclerc, Institut National du Sport du Québec: sleclerc@insquebec.org
- Dr. Doug Richards, Canadian Sport Institute Ontario: drichards@csiontario.ca
- Dr. Brian Benson, Canadian Sport Institute Calgary: bbenson@csicalgary.ca
- Dr. Paddy McCluskey, Canadian Sport Institute Pacific: pmccluskey@csipacific.ca

PREVIOUS UPDATES

General Information

This joint message is from the Own the Podium led Sport Medicine Advisory Committee comprised of Chief Medical Officers from the Canadian Olympic Committee, the Canadian Paralympic Committee, and the Canadian Olympic and Paralympic Sport Institute Network (COPSIN). It is meant to guide National Sporting Organizations (NSOs) in decision-making with respect to travel to competitions within and

outside Canada. Information has been obtained from the World Health Organization, Government of Canada and Australian Institute of Sports websites. Other references are listed in this document. This advisory will be updated regularly and distributed to NSOs and other high performance sport partners. The outbreak of severe respiratory illness related to the new coronavirus (COVID-19) continues to have an expanding impact internationally. The World Health Organization (WHO) provides regular updates which guide our recommendations. The latest WHO statements can be found at <u>WHO website on</u> <u>Coronavirus disease (COVID-19) outbreak</u>.

COVID-19 is a virus in the coronavirus family. Coronaviruses in this family are responsible for illnesses that range from the common cold to more serious illnesses such as Severe Acute Respiratory Syndrome (SARS-CoV) and Middle Eastern Respiratory Syndrome (MERS-CoV). COVID-19 is a new virus and so health officials are still learning about its impact and severity. At this time, it appears to cause an illness similar to the flu with the most common signs of infection being fever, cough and shortness of breath. In severe cases patients can develop pneumonia, severe respiratory distress, kidney failure and death.

Epidemiology: The numbers

The reports from China suggest that with COVID-19:

- 1% have no symptoms
- 81% have mild symptoms
- 14% have severe symptoms that cause them to miss work or go to the hospital
- 5% have severe symptoms that lead to ICU admission, including a fatality rate of 2.3%
- The fatality rate is highest in those that are elderly and have other medical conditions
- The estimate of risk to athletes (i.e., younger and healthier) is thought to be similar to the risk of health care workers; 0.3% fatality rate

Wu and McGoogan JAMA 2020-02-24 Characteristics of and Lessons from COVID-19 in China

The number of cases in Canada is small. At this time the risk of contracting COVID-19 in Canada is very low.

Clinical Course

It appears that COVID-19 is more contagious than the typical influenza virus. The virus is transmitted primarily through respiratory droplets. Those that are experiencing symptoms are more likely to spread the illness than those that have the illness but do not have symptoms. There is ongoing research to determine if there are other possible modes of transmission such as fecal or air.

The estimated incubation period (time from initial expose to onset of symptoms) is between 1-14 days but is about five days on average. Symptoms can persist for longer than three weeks, although the duration of illness will be highly variable.

Prevention

Recommendations for protecting yourself and preventing spread of this illness include frequent hand washing and covering both your nose and mouth when coughing. Try to cough or sneeze into your arm, away from others, or into tissue paper (to be disposed in toilet). Wash your hands immediately afterwards. You should avoid close contact with anyone showing symptoms of respiratory illness. Research on respiratory infections in travelling sporting teams suggests that the most likely pattern of spread occurs within a team, rather than from external sources. When an unwell team member joins the team, due to regular close physical contact between team members, the infections can spread readily (Valtonen et al, 2019). Consideration should be given for delaying travel for team members who are unwell.

What to do if you think you have COVID-19

Because the early symptoms of COVID-19 are similar to other respiratory illnesses, if you have any of the common symptoms (fever, cough and shortness of breath) you should contact your doctor's office and arrange to have a consultation.

Treatment:

At this time, there is no specific treatment for COVID-19. The goals of medical management are to identify other treatable causes of illness (such as influenza), manage any complications from COVID-19 and provide advice on how to limit the transmission from known cases.

There are efforts internationally to produce a vaccine and to identify if any of the currently available antiviral medications are effective and safe. An update is expected to be released in mid-2020. A vaccine will likely take longer as it will have to go through longer clinical trials to confirm safety and efficacy.

Travelling to sporting events

We recommend that you check for up-to-date travel advisories from the Government of Canada at: <u>Government of Canada COVID-19 Travel Advice.</u>

On Airplanes:

Vigilant hand and face hygiene should be practiced. Stay hydrated.

The European Centre for Disease Control (EDCD) has published research into the risk of contracting <u>Infectious Diseases on Aircraft</u>. While there are currently no data available on the transmission risk for COVID-19 during airline travel, we look to the risk related to similar diseases, such as influenza and SARS. The ECDC concluded that the quality of evidence to assess the risk of transmission of influenza onboard an aircraft is not adequate. SARS transmission has been documented from airline travel with transmission most likely from those who are severely ill or those experiencing rapid deterioration, usually in the second week of their illness.

On Return from Travel:

Public Health authorities recommend some combination of self-monitoring and self-isolation on return from international travel; the specific advice of each provincial and territorial authority may vary depending on the regions traveled to, and can be found in the table above.

Athletes and coaches who are currently unwell with fever, cough or shortness of breath should delay their flight and seek medical review. If you become unwell during your flight you should notify the flight attendants, place a P2 or N95 face mask on and seek medical review as soon as practical on arrival.

Face Masks:

Face masks are most effective in preventing transmission when worn by people who are unwell. If you are well, masks only need to be worn by those who have close contact with those who are unwell (i.e., recommended for health care workers). Correct fitting of face masks is most important to their effectiveness. A good resource is the Australian New South Wales Health web site (<u>How to Fit a Face Mask</u>).

Considerations for Athletes, Coaches, Sport Organizations & Event Producers:

Athletes and Coaches:

Prior to travelling overseas for training camps and competitions

- The risks associated with travel and competitions vary with multiple factors including location, age and origin of participants, indoor vs outdoor venues, and contact vs non-contact sports, among others. Check with your team physician, NSO CMO, or SMAC CMO for detailed consideration of these issues.
- Make an appointment with your team physician or regular doctor prior to departure to ensure that your vaccinations are up-to-date and that you will have enough of your regular medications, with the appropriate documentation, for your entire trip and at least an additional week. Vaccinations need to be administered well in advance of travel to be effective.
- Travel advisories change frequently. Check the <u>Government of Canada Travel Health Notices</u> regularly prior to departure as well, as the immigration department of the country you will travel to next.
- It is best to have contingency travel plans in place with the ability to change flights if needed.
- There is no need to alter your exercise or training if you are feeling well, nor do you need to wear a mask in public.

National Sporting Organizations (NSOs):

- Where travelling to places with an elevated risk, NSOs are urged to have a team doctor travel with the team. Other health professionals should not be expected to coordinate or provide medical care.
- Having appropriate travel insurance for your team that can be relied upon in the event a medical

evacuation is necessary.

- When planning training camps, consider factors such as ease of access to medical resources and the prevalence of infection rates in neighbouring countries.
- Sporting Events in Canada:
- There have been very few cases of COVID-19 diagnosed in Canada. There is currently no indication for event organizers to delay or postpone sporting events in Canada.
- For international athletes travelling to compete in Canada, only the Government of Canada should provide details the current travel restrictions in place. At present, the Government of Canada is asking only those that have returned from the Hubei province in the last 14 days should self-isolate for 14 days and contact your local health authority within 24 hours of arriving in Canada. There are no other recommendations. Event organizers should not impose additional restrictions on international athletes. All travelers that have symptoms of fever, cough and shortness of breath should be advised to have a physician assessment.
- Mass gathering and sporting events can pose additional infection control challenges in general. If
 there is concern regarding your event, please discuss with your Chief Medical Officer who can
 help put in place risk mitigation strategies in conjunction with your local public health unit if
 required.

Other Resources:

- WHO travel advice
- WHO emergency dashboard
- WHO situation reports
- WHO Coronavirus Myth Busters
- USA Centers for Disease Control and Prevention
- Johns Hopkins COVID-19 dashboard