

COVID-19, SOCIAL DISTANCING AND PUBLIC POLICIES

COVID-19, isolamento social e políticas públicas

By the time I am writing this editorial, the Brazilian Ministry of Health website reports 4,256 confirmed cases of COVID-19 and 136 deaths from this cause, making for a fatality rate of 3.2%.¹ Across the planet, at this very moment, these numbers are, 755,591 cases, 36,211 deaths, and 4.8%, respectively.²

We are at the beginning of the upward curve. Nothing tells us that the path will be different from the patterns observed in the various countries where SARS-Cov-2 has spread. Our population is not as old as the Italian one; our political system is not as closed as the Chinese one; however, we probably have a large part of the population living in conditions of greater vulnerability, compared to the populations of China and Italy, with poorly controlled chronic diseases and inadequate sanitary and housing conditions. Additionally, we have a president who has been resistant to scientific evidence, walking on the streets, greeting people and making statements that do nothing to help control the pandemic.³

As it could not be otherwise, we, geriatricians and gerontologists, are attentive to the available scientific evidence and stick to it to make responsible decisions. Social distancing is still the best available evidence for pandemic control by flattening the COVID-19 curve. So, at the moment, everyone should stay at home, working from home if possible, so that we can get back to our usual activities as quickly as possible, with the least economic damage, but, above all, preserving lives.

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