

April 20, 2025

'THE WEEKLY DOCTOR DOUG REPORT'

**FLU SEASON IS OVER IN ARIZONA.....AND IN
DECLINE NATIONALLY.**

**STILL, THERE IS A FAIR BIT OF NONSPECIFIC VIRAL
UPPER RESPIRATORY INFECTIONS AROUND, BUT
FLU, COVID AND RSV ARE ALL VERY LOW.**

***CURRENT COVID VACCINE IS IN PHARMACIES. IT IS
STILL A SOLID MATCH FOR THE CURRENT COVID
VIRUS**

MEASLES CONCERNS/OUTBREAK:

**MEASLES OUTBREAKS ARE IN THE NEWS. A
CHILDHOOD VIRUS THAT IS THE MOST HIGHLY
CONTAGIOUS VIRUS KNOWN TO MAN, IT HAS BEEN
ALL BUT ERADICATED IN THE USA, WITH A
FOOTHOLD DEVELOPING DUE TO ANTI-VACCINE
CONCERNS.**

**ADULTS ARE GENERALLY NOT AT RISK, BUT HERE IS
INFORMATION FOR YOU:**

**IF YOU WERE BORN BEFORE 1957 YOU HAVE NO
CONCERNS. IT IS ALMOST CERTAIN YOU HAVE
MEASLES AND YOU REMAIN IMMUNE.**

IF YOU WERE BORN IN 1968 OR LATER YOU CERTAINLY HAD AN EFFECTIVE MEASLES VACCINE AND ARE PROTECTED.

IF YOU WERE BORN IN 1958-1967, IT IS POSSIBLE THAT YOUR MEASLES VACCINE HAS WORN OFF. ALTHOUGH LIKELY THAT YOU HAVE IMMUNITY, YOU COULD CONSIDER A BLOOD TEST TO CHECK FOR IMMUNITY AND IF NEGATIVE, GET AND MMR BOOSTER SHOT. IN GENERAL, I DO NOT RECOMMEND TESTING PEOPLE IN THIS AGE GROUP UNLESS THEY ARE IMMUNE COMPROMISED, THEN IT IS WORTHWHILE. THE ONLY OTHER REASON IS IF YOU REMAIN WORRIED SO THAT YOU HAVE PEACE OF MIND ON THIS TOPIC. THE RISKS OF MEASLES BROADLY REMAIN VERY VERY LOW.

RECOMMENDATIONS FOR 2025 IMMUNIZATIONS:

DATA CONTINUES TO SUPPORT BENEFIT FROM COVID VACCINATION. BENEFITS OF THE SHOT INCREASE WITH AGE AND WITH CONDITIONS THAT PREDISPOSE TO COMPLICATIONS (EMPHYSEMA/COPD, HEART FAILURE, DIABETES, IMMUNE SUPPRESSION)

ONCE A YEAR: FOR THOSE OVER 65 YEARS OLD AND HEALTH...A COVID VACCINE ONCE A YEAR WILL PREVENT HOSPITALIZATION.

EVERY 6 MONTHS: FOR THOSE OVER 80 AND THOSE 65 AND OLDER WITH SIGNIFICANT HEALTH

ISSUES SUCH AS DIABETES, COPD, HEART FAILURE, SIGNIFICANT KIDNEY DISEASE.....EVERY 6 MONTHS IS APPROPRIATE FOR THE COVID VACCINE, AND CERTAINLY AT LEAST ONCE A YEAR. THIS PREVENTS HOSPITALIZATION.

CURRENT COVID STATUS:

THE CURRENT COVID STRAINS ARE VERY CONTAGIOUS AND PRESENT THROUGHOUT ARIZONA... WE ARE SEEING SEVERAL EACH WEEK, MOST DUE TO TRAVEL OR LARGE EVENT ATTENDANCE.

IF YOU GET SICK AFTER TRAVEL OR ATTENDING A BIG GATHERING... DO A COVID TEST. ALL STANDARD COVID TESTS WORK TO IDENTIFY THE CURRENT STRAINS.

ALL DOING WELL. BE PROACTIVE TO PREVENT THE NEED FOR HOSPITALIZATION. PROTECTION IS UP TO YOU AND NOW IS A PERSONAL DECISION. DO WHAT MAKES YOU COMFORTABLE.

DATA 100% SHOWS THAT GOOD MASKS MAKE A DIFFERENCE. THEY ARE NOT PERFECT, BUT THEY DO REDUCE RISK OF EXPOSURE AND INFECTION.

- **I CANNOT STRESS THIS ENOUGH... IF YOU DON'T WANT COVID & FLU FROM TRAVEL... WEAR A MASK IN THE AIRPORT CROWDS AND ON THE AIRPLANE (UNTIL 10,000 FEET) ... THIS IS NOT AS ESSENTIAL AS IT WAS WHEN COVID WAS MORE SEVERE... BUT IF YOU WANT TO AVOID INFECTIONS IN GENERAL DURING TRAVEL... IT'S A RECOMMENDATION.**

- **EVEN SELECTIVE MASK USE WORKS WELL... SUCH AS ONLY IN CROWDED SPACES IN THE AIRPORT, AND DURING TRAVEL 'TO' YOUR DESTINATION, SO THAT YOU ARE NOT ILL DURING YOU VACATION/TRAVEL TIME. LESS IMPORTANT WHEN YOU RETURN FROM VACATION.**

VACCINATIONS:

- **COVID SHOT...GET UPDATED VERSION**
- **FLU SHOT ...SEASON IS COMING TO AN END. IF TRAVELLING EXTENSIVELY YOU CAN CONSIDER THE FLU SHOT. IF NOT... IT'S PROBABLY TOO LATE IN THE FLU SEASON TO JUSTIFY A SHOT NOW.**
- **RSV SHOT (CAN CONSIDER TAKING IF YOU HAVE NOT TAKEN YET)**

DO NOT GET ALL SHOTS AT THE SAME TIME. RSV SHOULD BE TAKEN ALONE.

**RSV VACCINE:
THIS IS A NEWISH VACCINE. HAS BEEN GENERALLY
AVAILABLE FOR 2+ YEAR.**

WHO SHOULD GET IT:

THE MOST IMPORTANT GROUP IS NOW CLEAR.... THOSE WHO LIVE IN GROUP SETTINGS, INDEPENDENT LIVING WITH PEOPLE CONGREGATE FOR MEALS AND THOSE IN ASSISTED LIVING SITUATIONS.

**ALSO.... PEOPLE AT HIGHER RISK SHOULD CONSIDER
GETTING THE RSV VACCINE THIS YEAR IF THEY ARE
INCLINED...BUT DON'T FEEL OBLIGATED.**

**FOR THOSE OVER 65 WHO HAVE ADDITIONAL RISK FOR
SERIOUS ILLNESS AS A RESULT OF HEALTH ISSUES SUCH
AS: ACTIVELY TREATED HEART FAILURE, CANCER, LUNG
DISEASE, OR DIABETES.**

**THERE ARE TWO VERSIONS, BOTH SIMILAR, AND THERE IS
NO SPECIFIC REASON TO CHOOSE ONE OVER THE OTHER
(ONE IS GSK..MAKERS OF SHINGRIX, THE OTHER IF
PFIZER...MAKERS OF THE COVID VACCINE)
WHEN TO GET RSV VACCINE:**

CAN GET AT ANY TIME. ANY SEASON IS FINE.

**IF YOU GET SICK YOU NEED TO TEST FOR COVID.
CONSIDER COMING INTO THE OFFICE PARKING LOT FOR
FLU TESTING AS WELL**

**TREATMENT FOR COVID AND FOR FLU IS AVAILABLE AND
WORTHWHILE IN MANY INSTANCES.**

**TREATMENT FOR RSV IS PURELY SYMPTOMATIC.... WE
TREAT THE SYMPTOMS AS THERE IS NO ANTIVIRAL FOR
RSV**

**PAXLOVID ANTI-VIRAL PILLS ARE WIDELY AVAILABLE....
BUT MOST PEOPLE DO NOT REQUIRE MEDICATION TO
TREAT THEIR CASE OF COVID.**

PLEASE LIVE LIFE, BEING CAREFUL IN WAYS THAT MAKE YOU FEEL MOST COMFORTABLE, BUT DO NOT RESTRICT YOUR ACTIVITIES.

FOR THE UNVACCINATED.... KEEP YOUR EYES ON THE ROAD.... COVID CONTINUES TO BE AN ISSUE. THE CURRENT VARIANT IS MUCH Milder, BUT THERE ARE CONCERNS FOR THOSE WHO ARE NOT VACCINATED. WE ARE TREATING NEARLY ALL THE UNVACCINATED THAT GET COVID.

RECOMMENDATIONS FOR MASKING WHEN TRAVELING IS A PERSONAL DECISION.

DO NOT CONCERN YOURSELF IF OTHERS ARE MASKING. IF YOU WEAR A HIGH-QUALITY MASK YOU ARE INCREASING YOUR PROTECTION AND DECREASING YOUR RISK.

- I DO RECOMMEND WEARING A KN95 OR N95 IN THE AIRPORT TERMINAL WHERE EXPOSURE IS GREATEST.**
- ON THE AIRPLANE, WHEN THE ENGINES ARE FULLY ON, THE AIR IS BEING HIGHLY FILTERED AND EXPOSURE IS MUCH LESS. WEARING AN EXCELLENT MASK WILL REDUCE YOUR RISK DURING FLIGHT, BUT IT IS UP TO YOU IF YOU WISH TO USE THE MASK AT THAT TIME.**

**Yours in good health,
Dr. Lakin**