

# Michigan Chronicle **SENIOR**care

**COVID-19 Resources Guide For Seniors and Caretakers**





A photograph of an elderly couple, a man and a woman, smiling and looking down at a document they are holding together. The man is on the left, wearing a yellow and white striped shirt. The woman is on the right, wearing a light blue shirt. They are both looking at the document with interest and joy. The background is a bright, out-of-focus window showing greenery outside.

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Since the very first cases of COVID-19 were detected in Metro Detroit, the Michigan Chronicle has been actively engaged in informing our readers about the pandemic. As a trusted voice of the community, we are here to help our readers navigate these frightening and challenging times.

As the COVID-19 pandemic forever changes our lives, the Michigan Chronicle is strengthening its commitment to serving the community. Over its 84 years of operation, the Michigan Chronicle has seen crisis before, but we're resilient, we are survivors just like our readers. As the pandemic affects our community, the Michigan Chronicle is needed now more than ever to provide our readers with access to information that they can trust.



We are all adapting to a new way of life amid these uncertain times and need help in navigating the new normal with

as much information about COVID-19 as possible. Through our **SENIORCare** brand, the Michigan Chronicle will provide resource information and trusted content.

The Michigan Chronicle is committed to supporting seniors, caregivers, and the community as a whole through these uncertain times brought about by the COVID-19 health crisis. During this time of heightened awareness about public health and reducing the risk of exposure for ourselves and those we care for, it's very important to gather updated information from trusted sources.

The **SENIORcare** COVID-19 Resource Guide will be filled with COVID-19 related resources and articles in a print and online version that will reach seniors, caregivers, loved ones and the community at large with important information such as:

- Steps to help prevent the spread of **COVID-19**
- What to do if you become ill
- Resources for Home:
  - Plan, prepare, and respond to Coronavirus
- Stay Home, Stay Safe, Save Lives: What this Means for You
- What you should know about COVID-19

Stay safe! Be well!

A stylized, handwritten signature in black ink, appearing to read 'H. E. Jackson'.

Hiram E. Jackson  
Publisher, Michigan Chronicle  
Chief Executive Officer, Real Times Media





# CORONAVIRUS SENIOR CARE:

## Top Caregiver Questions Answered

Excerpted from [www.DailyCaring.com](http://www.DailyCaring.com) with permission



Presented by the Detroit Area Agency on Aging  
Providing answers to keep older adults safe during COVID-19

The caregiving tips here were condensed from an ongoing series of caregiver questions in response to COVID-19 available in their entirety at [www.DailyCaring.com](http://www.DailyCaring.com)

### Is the COVID-19 virus airborne? Can I get infected by using the elevator in my building?

When an infected person coughs or sneezes, tiny droplets that contain the virus fly out of their noses and mouths and into the air. (That's why we should cough or sneeze into our elbow.)

A recent study published in Journal of the American Medical Association found that in some conditions, droplets from coughs, sneezes, or just breathing can travel more than 26 feet and linger in the air for minutes.

Outdoors, the breeze, open space, and air circulation will disperse the "gas cloud" of droplets.

But a small, enclosed space like an elevator doesn't get much air circulation. That increases the chance that you could walk into an invisible cloud of virus particles lingering in the air.

First, following CDC recommendations for physical distancing means avoiding riding in elevators with other people.

Second, an infected person could touch common surfaces like buttons or handrails, leaving them contaminated.

Adding to that, there could be virus particles in the air inside an elevator from previous passengers.

Taking all that into consideration, it's best to avoid riding in elevators as much as possible.

If taking the elevator is essential, follow CDC recommendations to wear a face covering or cloth mask. You may also want to wear gloves or use hand sanitizer to disinfect your hands after touching those publicly used surfaces. -- Updated 4/5/20

### Should I wear a face mask when I go out? What about at home?

Yes. On April 3, the CDC issued guidelines recommending that people wear cloth masks or face coverings in public. This is in addition



to maintaining a 6 foot distance from other people, another essential step in slowing the spread of coronavirus.

The CDC has learned that COVID-19 is more easily spread than they first thought. That's because a significant number of people with coronavirus have no symptoms and even people who later develop symptoms can transmit the virus to others before showing symptoms.

They emphasize that people might consider homemade, non-medical masks because medical-grade surgical and N95 masks are in short supply and urgently needed by healthcare workers and first responders.

At home, wearing a mask around an especially high-risk older adult would likely reduce their risk of getting the virus from someone

who is infected, but has no symptoms.

### Should older adults have visitors during this time?

No. Everyone, and especially seniors, should try to interact with as few people as possible. Keep all interactions to the bare minimum.

Reducing the number of people an older adult comes into contact with reduces the amount of germs that they're exposed to. That reduces the risk that they'll become infected with COVID-19.

However, the goal isn't to isolate your older adult.

You may want to arrange phone calls or video calls so your older adults can "virtually" en-

joy the company of family and friends.

### What precautions should I take when I'm visiting an older adult's home?

Similar to seasonal flu, COVID-19 is passed between people through coughing, sneezing, or close contact like touching or shaking hands.

It can also be transmitted by touching a surface with the virus on it and then touching the eyes, nose, or mouth without washing hands.

When you enter your older adult's home, you'll have potentially come into contact with the virus while you were out and should take precautions to reduce the risk of transmitting the virus to them.

First, make sure your visit is essential. If you're dropping something off for them, consider leaving it on their doorstep or just inside their door.

Generally, you should follow the CDC's recommendations for high risk individuals like seniors.

That includes diligent and proper hand-washing for 20 seconds, not touching your face, and cleaning high touch surfaces like your mobile phone, faucet knobs, doorknobs, and countertops.

Refer to the CDC website for the full list of recommendations.

### When I bring purchases into the home, like food or household supplies, do I need to sanitize them before putting them away or using them?

Items from stores have been touched by many people and could potentially carry the virus, which can live for up to 3 days on surfaces like plastic and steel. Items that have been packed or delivered by grocery services have also been handled by other people.

Packages received at home have been handled by a delivery person, who could potentially transfer "fresh" virus particles to the package when they're delivering it. Then, when you handle the item or outer packaging later at home, lingering germs could be transferred to your hands.

If you are concerned about the risk, wipe down packages with disinfectant wipes and wash your hands thoroughly.

*You don't have to figure it all out on your own. Visit the website at <https://dailycaring.com> to get practical senior care and Alzheimer's & dementia tips and resources. Sign up for the free daily email newsletter to get tips delivered to your inbox.*



### How do I disinfect my older adult's home to prevent the spread of viruses?

At home, the CDC recommends that people practice routine cleaning of frequently touched surfaces with household cleaners and EPA-registered disinfectants that are appropriate for the surface, following label instructions. High-touch surfaces include sinks, countertops, toilets, faucets, light switches, door knobs and handles.

### I care for two separate people, in two separate locations. How can I safely provide care and not transmit viruses between them or from myself?

It's great to be extra cautious when caring for two separate high-risk individuals. The goal is to reduce the amount of potential germs that you're bringing into each of their homes or living spaces.

To reduce the risk of transmitting the virus to them or between them, we'd suggest following the CDC's recommendations for high-risk individuals at [www.cdc.gov](http://www.cdc.gov).

For example, if you're seeing two separate people on the same day, you may want to do a full change of clothing before seeing the 2nd person. If they're especially high-risk, you could consider taking a full shower as well. The precautions that you choose to take will depend on your assessment of the risk and the feasibility of taking those precautions.

### My older adult is in a nursing home or assisted living community that has been locked down – no visitors are allowed. How can I keep in touch with them and make sure they're not scared or lonely?

Some care communities have promised to help residents use computers or tablets to communicate with family, but haven't yet done so. Realistically, your means of communication will be limited by what your older adult is currently capable of and what the facility allows.

In general, just do the best that you can. And periodically check in with the facility to make sure your older adult is doing well and find out when they might be arranging calls or video communication, including Zoom. Ask if letters or packages could be dropped off, and if so, what cleaning precautions are required.

Remember to wash your hands thoroughly before handling anything that you'll be giving to your older adult.

### What should I do if I start to feel ill?

COVID-19 symptoms are unfortunately generic -- fever and cough, possibly shortness of breath. And for seniors, those types of symptoms could also be caused by issues related to existing chronic health conditions.

If you feel like you have mild cold symptoms that you wouldn't normally call a doctor about, then you should self-isolate at home to avoid transmitting it to others and take care of yourself with your regular cold remedies.

But if you have shortness of breath, unremitting fever, weakness or lethargy, it's definitely time to get in touch with a health-care professional. Those could be signs of pneumonia, which is common in severe cases of coronavirus.

### If I have a fever and don't know if I have COVID-19, is it ok to take Advil (ibuprofen) to bring down the fever?

There's still debate on this within the medical community. The only recommendation everyone seems to agree on is that you **must** consult with your own doctor to find out what treatments they recommend for your specific medical history and current health conditions.

With COVID-19, a new concern was raised when the French health minister stated that taking anti-inflammatories like ibuprofen or cortisone could worsen the symptoms of the illness.

For seniors, the question about ibuprofen (Advil) could be a moot point. Generally for older adults, acetaminophen (Tylenol) is a safer painkiller and fever reducer.

There's also another consideration. Infectious disease specialists say that "the greater concern is that when Nsaids and acetaminophen reduce fever, patients may be more comfortable but their lower temperatures can short-circuit the body's main defense against infection."

So if you or your older adult are feeling ill or have a fever, the first thing to do is call the doctor's office (don't go in until you speak with them) and ask what you should do.

### Should seniors go to existing medical appointments?

Many older adults have regular appointments with doctors and specialists to treat and manage chronic health conditions. But going to a medical appointment could expose your older adult to the virus.

Many experts advise cancelling non-essential medical appointments. However, for seniors, those regular appointments may be essential for maintaining their health.

Call the doctor to determine if the visit is necessary at this time, or how long it can be postponed without harming the health of your older adult. The same holds true for regular check-ins to monitor blood chemistry or take other physical readings.

### Should grandparents be visiting with grandchildren right now?

No. Doctors and other medical professionals recommend that grandparents shouldn't visit with their grandchildren during the coronavirus outbreak. That's because children are known carriers of illness and older adults are at high risk of becoming severely ill if infected with COVID-19.

For situations where three generations all live in the same household, the recommendation is for older adults to isolate themselves from the rest of the family as much as possible. Hands should be washed frequently, high-touch surfaces should be cleaned regularly, and everyone in the family should self-isolate, with only 1 or 2 people going out for essentials such as groceries or urgent medical appointments.

### Should I make my own hand sanitizer? Can I use DIY hand sanitizer recipes that I find online?

Hand sanitizers are actually over-the-counter (OTC) drugs that are regulated by the FDA.

If not made correctly, they can be ineffective or even cause injury. For example, there have been reports of skin burns from homemade hand sanitizer.

Hand sanitizers are a convenient alternative when handwashing with soap and water isn't possible. But simple hand washing is the best way to protect yourself and your family from coronavirus.

Remember, using disinfectant sprays or wipes on your skin may cause skin and eye irritation. They are intended to clean surfaces, not people or animals.

### What can you do when seniors won't take social distancing or stay-at-home orders seriously?

To the frustration of adult children and spouses, some people aren't taking the threat of COVID-19 seriously -- even though they're in a high-risk group simply due to the immune system changes that come with being over 60 years of age.

To convince them to stay home, 1) figure out who they listen to and what sources of information they trust, 2) offer alternative ways to stay connected so they won't feel isolated or abandoned, 3) explain that they could be passing the virus to others, and 4) share what you're doing to keep yourself and your family safe and why.



During the COVID-19 pandemic, the Detroit Area Agency on Aging continues its services to thousands of seniors and disabled adults. For safety reasons, home-delivered and community meals are now frozen, and face-to-face nutrition assessments and care management appointments are conducted by phone. Weekdays, from 8:30 a.m. to 5:00 p.m., your calls will be directed to Information & Assistance team members who are working remotely to help identify the resources you need – just as we have for the last 40 years.

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# American Heart Association Advises Increased Caution Among Those with Cardiovascular Disease During Global COVID-19 Pandemic

Cardiovascular disease and hypertension  
associated with increased COVID-19 fatality rate

The American Heart Association is advising caution and preparation for elderly people with coronary heart disease or hypertension because it appears they are more likely than others to be infected by the coronavirus that causes COVID-19 and to develop more severe symptoms. People who have survived a stroke may also face a higher risk of complications.

The Association recognizes the urgency and increased risk of contracting COVID-19 for the approximately 120 million people in the U.S. who have cardiovascular disease. Data from China, published last month, indicates cardiovascular disease and hypertension were associated with an increased COVID-19 case fatality rate: 10.5% and 6.0%, respectively. Among patients who died from COVID-19, substantial cardiac damage was observed. In addition, elderly persons with heart disease or hypertension were more likely to be infected and to develop more severe symptoms and complications from COVID-19.

The overall risk of getting this virus is still low in the United States, but the U.S. Centers for Disease Control and Prevention says the risk will increase as the outbreak expands. As a result, people who have heart disease or another underlying condition should stay home to limit their risk of contracting the virus.

For heart patients, prevention is key. Their risk is not higher for getting the coronavirus as a patient, but if they do get it they have a higher chance of complications. Others facing this higher risk include people 60 and over, pregnant women, young children, people with serious chronic lung and kidney conditions, and people with compromised immune systems. As

mentioned, stroke survivors may also have a higher risk of complications.

“Prevention is key in limiting the spread of coronavirus, and with more people working remotely or limiting their exposure to crowds, it’s important to maintain healthy habits at home,” said Eduardo Sanchez, M.D., M.P.H., FAAFP, American Heart Association’s chief medical officer for prevention. “Wash your hands often and stay home when you feel sick, but don’t disregard your physical activity and healthy eating habits. These are the foundation to maintaining and improving your health.”

The American Heart Association and its thousands of science volunteers are poised and ready to provide urgent support to ensure optimal care for patients with cardiovascular disease who contract COVID-19 (coronavirus), according to a new article published in the American Heart Association’s flagship journal *Circulation*. The article details the Association’s necessary role and commitment to addressing the global COVID-19 pandemic.

As part of its global response to the growing pandemic, the American Heart Association is committing \$2.5 million to research efforts to better understand COVID-19 and its interaction with the body’s cardiovascular and cerebrovascular systems. The Association will be offering fast-tracked research grants for short-term projects that can turn around results within nine to 12 months to better understand the diagnosis, prevention, treatment and clinical management of COVID-19 as it relates to heart and brain health. There will also be additional funding made available to the Association’s new Health Technologies & Innovation Strategically Focused Research Centers to develop rapid technology solutions to aid in dealing with the COVID 19 pandemic.

For more COVID-19 resources, visit [heart.org/en/about-us/coronavirus-covid-19-resources](https://heart.org/en/about-us/coronavirus-covid-19-resources).

“Prevention is key in limiting the spread of coronavirus, and with more people working remotely or limiting their exposure to crowds, it’s important to maintain healthy habits at home.”

— Eduardo Sanchez, M.D.



# Tips to Help Family Caregivers Avoid

# BURNOUT

Family caregivers lead busy and at times, stressful lives, often balancing work, their own kids and spouses, hobbies and more, all while ensuring their loved ones are happy and healthy.

In celebration of family caregivers and all that they do, Interim HealthCare Inc. shares tips to help them avoid burnout and provide better care:

- **Know you're not alone:** As of 2015, an estimated 43.5 million adults in the U.S. have provided unpaid care to an adult age 50 or older, according to AARP. Of these individuals, around 28 percent have a child or grandchild under the age of 18 living in their household, and six in 10 caregivers report being employed at some point in the past year while caregiving. Online and in-person support groups can be a great way to connect with others who may be in similar situations. These groups can be found through hospitals, Facebook, Meetup.com or organizations like the Alzheimer's Association or the American Heart Association.
- **Make life easier:** You can simplify daily tasks for your senior with a few considerations. For example, if utensils are difficult to use, look for opportunities to provide healthy finger foods that help your senior feel more independent. Think sliced frittata, which can be eaten like pizza, versus scrambled eggs. When it comes to getting dressed, opt for Velcro if zippers and buttons have become difficult. Another good trick? Tie loops of string around the ends of zippers so they're easier to grab.
- **Don't be surprised by negative feelings:** Caring for someone can be an emotional rollercoaster. Even the calmest person can experience a range of negative emotions. The best way to handle them is to acknowledge that they are a natural reaction to stress. If these feelings persist, reach out to local caregiving support groups, a family physician or therapist for help.
- **Consider home care as a partner:** Professional home care services can complement the care you provide, helping ease its emotional and physical toll while offering you peace of mind.

While selecting senior home care services is something to be proud of, family members often feel guilt over the decision. Conflicted emotions are normal. However, knowing that the decision will make you better equipped to care for everyone can help you move past feelings of guilt.

Home healthcare has emerged as a powerful option for families seeking a better way to care for their senior loved ones. Not only does it provide medical and personal care for seniors, it can nurture their independence by allowing them to remain at home, all while providing respite care for family members from the daily routine of caregiving.

Be sure to look for care that offers a whole-person approach, such as Interim HealthCare's HomeLife Enrichment standard of care, where caregivers look beyond a diagnosis so that every patient is treated as an individual with unique needs and desires. To learn more, visit [interimhealthcare.com](http://interimhealthcare.com).

More caregiving tips can be found at [interimhealthcare.com/blog](http://interimhealthcare.com/blog).

Serving as a family caregiver is challenging. But there are ways to make life easier and more fulfilling for both you and your loved one. - (StatePoint)







# Coronavirus and Alzheimer's:

## What Family Caregivers Need to Know

The COVID-19 pandemic threatens the health of millions in this country and around the world, but the novel coronavirus presents unique challenges for more than 5 million Americans living with Alzheimer's and more than 16 million family members and friends serving as their caregivers.

"Public health strategies aimed at limiting contact with others are nearly impossible for people living with Alzheimer's and other dementias who rely on family caregivers and others to live their daily lives," says Beth Kallmyer, vice president, care and support, Alzheimer's Association. "This reality affects these individuals across all settings, including home, adult day services, residential and assisted living facilities and nursing homes."

To help family caregivers navigate the complex COVID-19 environment, the Alzheimer's Association is offering additional guidance to families, including:

- Foster safe hygiene habits. People living with Alzheimer's and other dementias may forget to wash their hands or follow other precautions to ensure safe hygiene. Caregivers are encouraged to be extra vigilant in helping individuals practice safe hygiene.
- Monitor sudden or sustained behavior changes. People living with Alzheimer's and other dementias may not be able to communicate if they are feeling bad or showing early symptoms of illness. Caregivers should monitor family members closely and respond quickly to any signs of distress, discomfort or increased confusion. These signs do not necessarily indicate a serious condition like COVID-19, but it's important to determine

the underlying cause.

- Prepare for potential changes in care and support. As public health containment strategies for COVID-19 escalate, families need to anticipate that less help may be available. It's important for families to anticipate these changes and make plans for filling gaps in caregiving.

- Be calm and create a nurturing environment. The current COVID-19 pandemic is creating added anxiety for everyone. Do your best to remain calm, particularly in your interactions with family members living with dementia. These individuals often take their cues from the people around them. Creating a calm environment will help them feel safe and protected.

- Play gatekeeper with outside caregivers and guests. Carefully monitor who is coming into the home to ensure all who enter are healthy. Be proactive in asking outside caregivers and guests about their current health status and make sure they are not experiencing any early or recent symptoms of illness.

- Ask residential care facilities about communication policies. To protect the health of residents, many facilities are restricting access to outside visitors. Ask the facility about alternative communication methods during the crisis, including phone calls, video chats or emails. If your family member is unable to engage in calls or video chats, ask the facility how you can connect with staff to get health updates.

For more information, visit [alz.org](https://www.alz.org), the website of the Alzheimer's Association or call its free 24/7 Helpline at 800-272-3900.

Many primary caregivers are not good about asking for help even as care responsibilities escalate. It's important for family members and friends to be proactive during the current crisis in asking caregivers how they can help. – (StatePoint)





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# Be Prepared for COVID-19:

## Create a household plan of action

- ✓ Talk with the people who need to be included in your plan. Meet with household members, other relatives, and friends to discuss what to do if a COVID-19 outbreak occurs in your community and what the needs of each person will be.
- ✓ Plan ways to care for those who might be at greater risk for serious complications. There is limited information about who may be at risk for severe complications from COVID-19 illness. From the data that are available for COVID-19 patients, and from data for related coronaviruses such as SARS-CoV and MERS-CoV, it is possible that older adults and persons who have underlying chronic medical conditions may be at risk for more serious complications. Early data suggest older people are more likely to have serious COVID-19 illness. If you or your household members are at increased

risk for COVID-19 complications, please consult with your health care provider for more information about monitoring your health for symptoms suggestive of COVID-19. CDC will recommend actions to help keep people at high risk for complications healthy if a COVID-19 outbreak occurs in your community.

- ✓ Get to know your neighbors. Talk with your neighbors about emergency planning. If your neighborhood has a website or social media page, consider joining it to maintain access to neighbors, information, and resources.
- ✓ Identify aid organizations in your community. Create a list of local organizations that you and your household can contact in the event you need access to information, health care services, support, and resources. Consider including organizations

that provide mental health or counseling services, food, and other supplies.

- ✓ Create an emergency contact list. Ensure your household has a current list of emergency contacts for family, friends, neighbors, carpool drivers, health care providers, teachers, employers, the local public health department, and other community resources.
- ✓ Choose a room in your home that can be used to separate sick household members from those who are healthy. Identify a separate bathroom for the sick person to use, if possible. Plan to clean these rooms, as needed, when someone is sick. Learn how to care for someone with COVID-19 at home.





# COVID-19

## and High-Risk Groups

### WHAT YOU NEED TO KNOW

By Mason Miranda  
Mesothelioma.com

In the ongoing Coronavirus pandemic, thousands of new cases are being diagnosed daily. While new information and research is rapidly evolving around COVID-19, the CDC has identified key groups of people who are at the highest risk to develop the more severe consequences of COVID-19. The elderly population, individuals with preexisting medical conditions such as respiratory illnesses, diabetes, and those who are immunocompromised need to take extra precautions to stay safe during this time.

#### Chronic Respiratory Illnesses

Chronic respiratory diseases (CRDs) are diseases of the airways and other parts of the lung. Some of the most common include asthma, chronic obstructive pulmonary disease (COPD), lung cancer, cystic fibrosis, and occupational lung diseases. When a patient's immune system has been suppressed by lung disease, it's no longer able to activate its natural defenses that would fight back against the virus. Patients are more likely to have minor symptoms develop into life-threatening conditions like pneumonia, in other words, the body may not respond to pathogens in the same way that occurs in those with healthy immune systems.

Because COVID-19 is a virus that targets the lining of the lungs, people who have any sort of respiratory condition need to be especially vigilant about monitoring their health during this time. For many with lung conditions, symptoms such as coughing, shortness of breath, and chest tightness are normal. However, if patients feel that they're experiencing effects that deviate from their traditional ailments, it's imperative that they



communicate with their family and medical professionals.

#### Cancer Patients

Due to changes in the immune system that control their body's defense systems, people with cancer may have a higher risk of infection. Active cancer treatments, such as chemotherapy, is the time period where patients are most susceptible to being immunocompromised. Patients who are undergoing regimine are presumably at higher risk than those who are in remission, although it's still advised that both groups of patients follow the safety protocols distributed by health organizations like the CDC.

Instead of traveling for treatment and appointments, there has been a push for telemedicine to be incorporated further into patients' routine. Creating a remote kit for patients that has the proper devices and resources allows health professionals to monitor health updates in

real time. Similarly, scheduling routine check-ins with doctors takes the pressure off immunocompromised individuals having to leave their home.

One example of recent telehealth success has been the U.S. Veteran Affairs initiative to ensure veterans receive proper health care and treatment when ill. In 2019 alone, more than 900,000 individuals were able to utilize VA telemedicine resources to connect with health professionals. This is transforming how veterans receive care, and with the ongoing medical pandemic, can provide comfort for patients knowing they won't have to go outside for treatment. For veterans who are disproportionately affected by diseases such as mesothelioma, asbestosis, and lung cancer, having readily-available virtual-access to specialists and providers can be life saving. By instantly providing feedback and health updates through telemedicine, at-risk veterans can limit their exposure and remain in good health.

#### Diabetes

Currently, there is not enough data to show whether people with diabetes are more likely to get COVID-19 than the general population. However, early data from the Chinese Centers for Disease Control indicated patients with underlying conditions are more likely to succumb to the virus. The study revealed that patients who had diabetes accounted for 7.3% of fatalities. Due to fluctuations in their blood sugar, diabetics are more susceptible for viral infection creating serious health challenges when being treated for illnesses. With more than 34 million Americans living with diabetes in the US alone, this leaves a huge group of people who may be more vulnerable to facing the deadly repercussions of COVID-19.

If individuals with diabetes effectively manage their condition, the risk of getting severely sick from COVID-19 is predicted to be about the same as the general public. People with diabetes have been advised to isolate themselves to prevent exposure risks,— ensuring that they're well stocked with supplies to manage blood sugar, insulin, and any related necessities. This will not only help patients stay safe, but mitigate frequent trips by caretaker to public spaces for supplies where they could contract the infection.

#### Preserving Health

While the COVID-19 threat is prevalent to everyone during this time, it's important for individuals who are more susceptible to the fatal side of this virus to stay well. By following recommended protocols that can halt the spread of COVID-19, at-risk groups can remain safer and have more peace of mind during the following months.





# DTE

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## DTE ANNOUNCES ADDITIONAL PANDEMIC ASSISTANCE.

During this coronavirus crisis, DTE Energy is already taking steps to protect our customers:

- The Senior Winter Protection Program end date is automatically extended through May 3rd, without any additional action required on your part.
- We have extended service protection for low income customers through April 30. Additional assistance may be available with DTE's Low Income Self-Sufficiency Plan (LSP). To be eligible, you must have a State Emergency Relief (SER) funds approval.
- Customers who are exposed, infected or quarantined by COVID-19 (including influenza) are now eligible for a 30-day medical hold on their accounts.
- And remember, if you encounter a DTE employee, please help us maintain social distancing of at least six feet and avoid physical contact so we may all stay safe.

Let DTE help. If you find yourself facing financial or medical hardship due to the pandemic, **please call 1.800.477.4747 or visit [dteenergy.com/covid19](https://dteenergy.com/covid19)**, where you'll find links to additional information.