



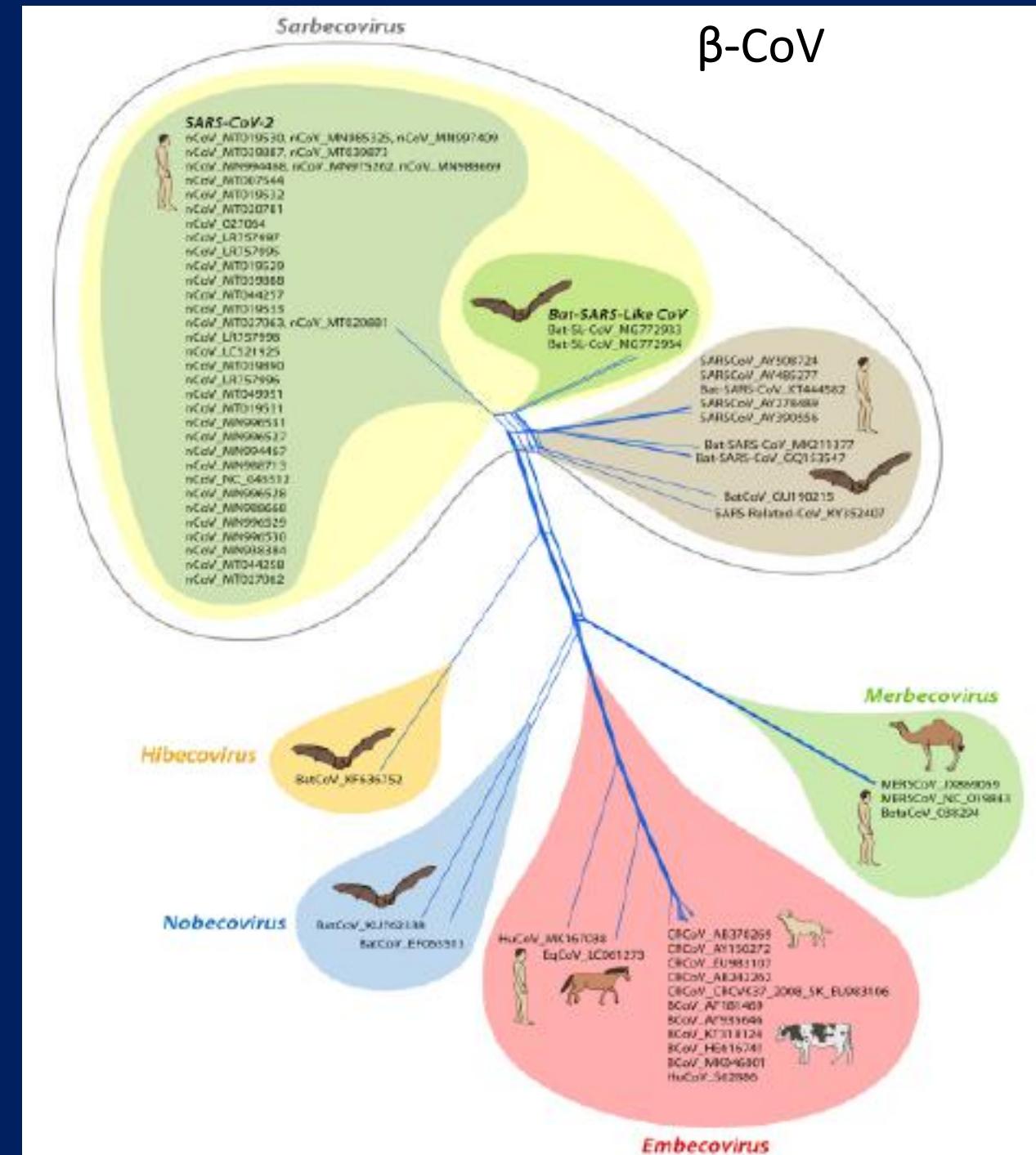
Wira Widjaya L, dr, MKedKlin, SpMK
Dosen Mikrobiologi-Fakultas Kedokteran
Universitas Ciputra Surabaya

INTRODUCTION

- 1960 : Virus Corona pertama kali diisolasi
- 2003 : kasus pneumonia akibat SARS-CoV dari China
- 2012 : kasus pneumonia akibat MERS-CoV di Arab Saudi
- 2019 : wabah pneumonia akibat virus Corona baru (nCoV19)
- 30 Januari 2020 : WHO menyatakan sebagai kegawatan dalam bidang Kesehatan Publik
- 11 Februari : COVID-19 akibat SARS-CoV 2
- 11 Maret 2020 : COVID-19 berstatus pandemic global (WHO)

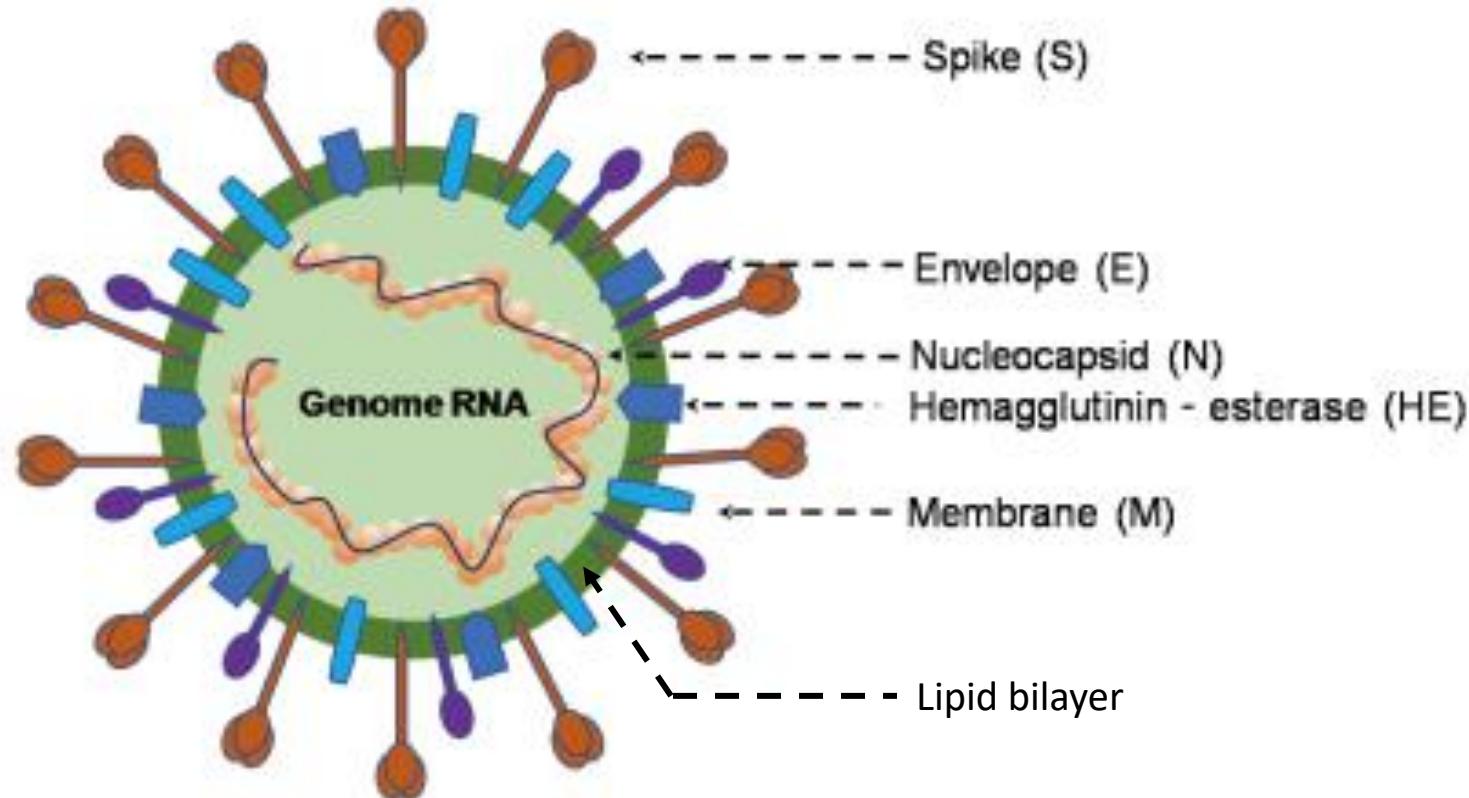
VIROLOGI SARS-COV 2

- Family : Coronaviridae
- Subfamily : Orthocoronavirinae
- Genus : α , β , δ dan γ -coronavirus

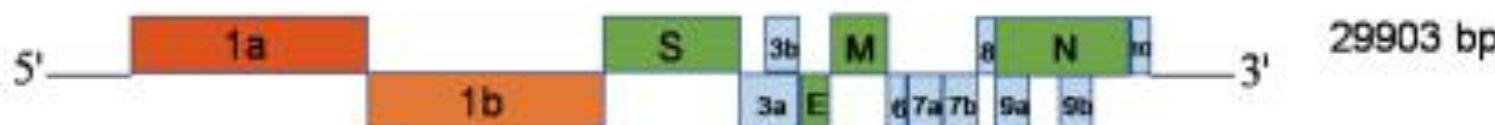


Struktur Virus SARS-CoV-2

Ukuran partikel SARS-CoV-2 = 120-160 nm



Gen-gen identifikasi SARS-CoV-2



Name	Cases - cumulative total	Cases - newly reported in last 24 hours	Deaths - cumulative total	Deaths - newly reported in last 24 hours	Transmission Classification
Global	103,362,039	403,263	2,244,713	12,120	
Indonesia	1,099,687 	10,379	30,581	304	Community transmission
Philippines	528,853 	1,581	10,874	67	Community transmission
Malaysia	222,628 	3,455	791	21	Clusters of cases
Singapore	59,584	19	29	0	Sporadic cases
Thailand	21,249	795	79	0	Clusters of cases
Viet Nam	1,891	40	35	0	Clusters of cases
Cambodia	466	0	0	0	Sporadic cases
Brunei Darussalam	180	0	3	0	Sporadic cases
Lao People's De...	44	0	0	0	Sporadic cases

Sumber : covid19.who.int (03 Feb 2021)

1,111,671

TERKONFIRMASI

+11,984 Kasus

175,236

KASUS AKTIF

15.8% dari Terkonfirmasi

905,665

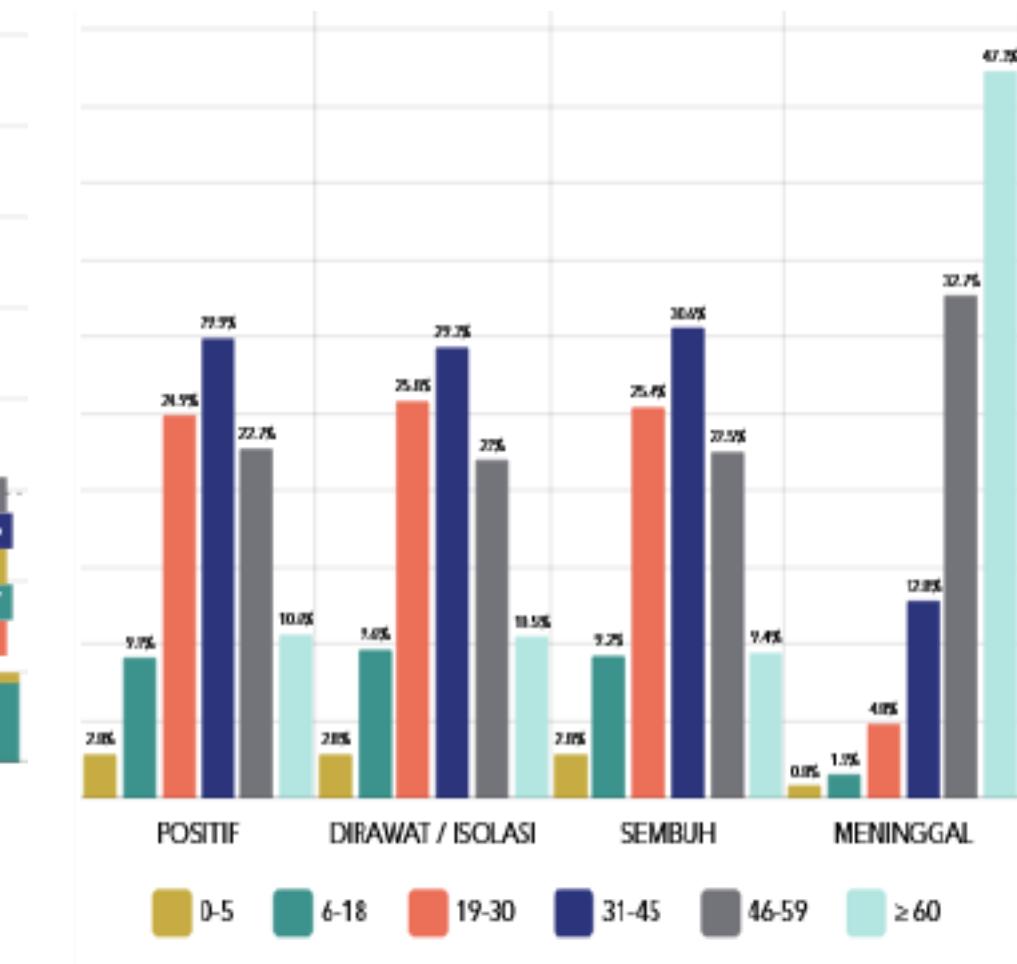
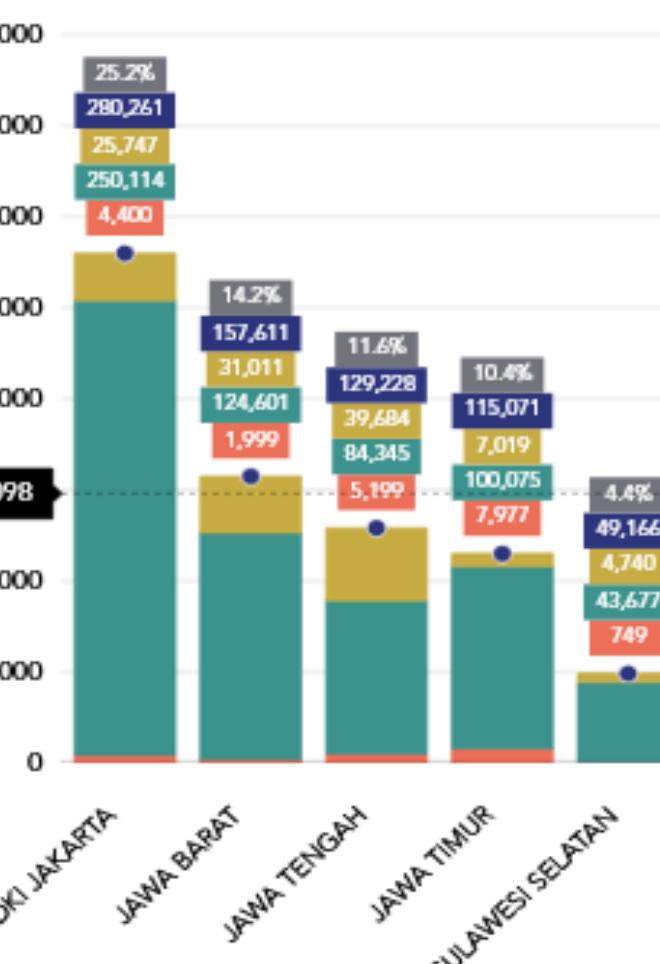
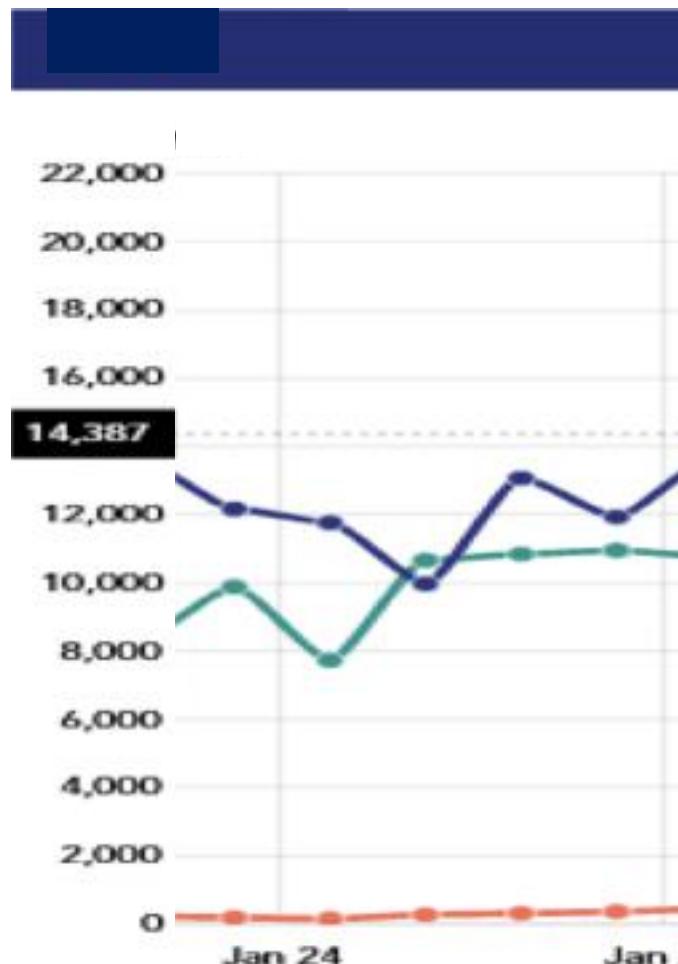
SEMBUH

81.5% dari Terkonfirmasi

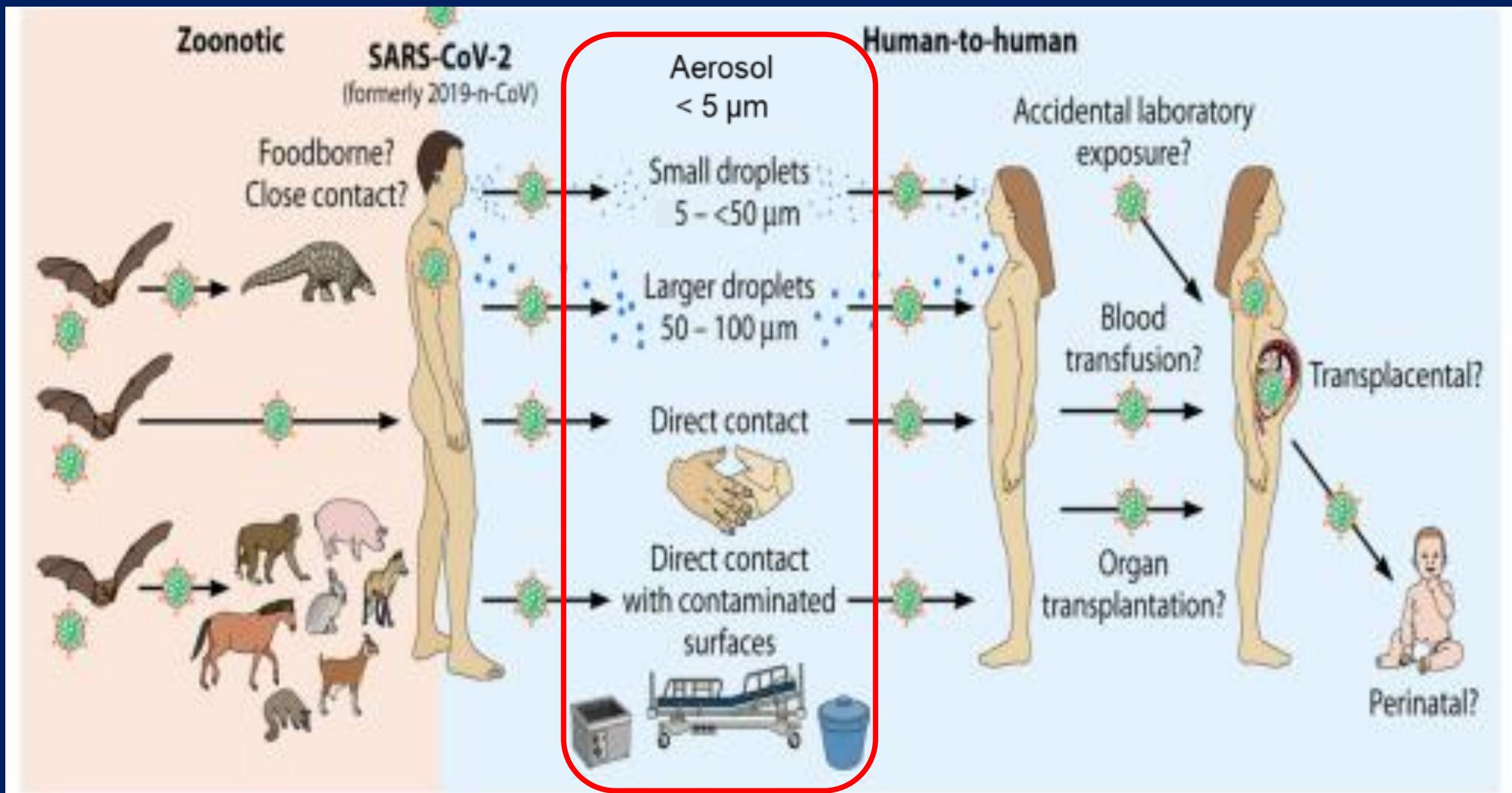
30,770

MENINGGAL

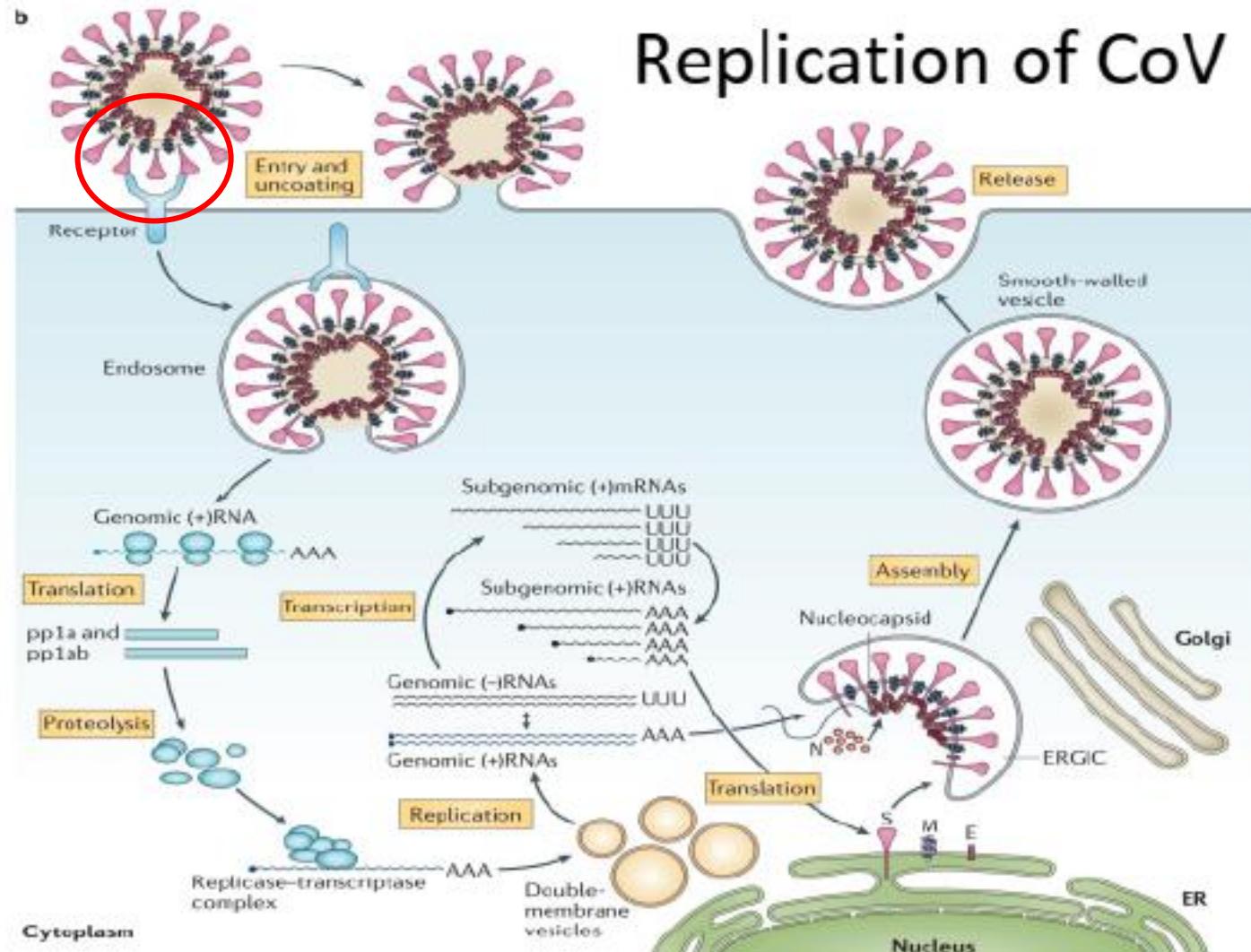
2.8% dari Terkonfirmasi



METODE TRANSMISI SARS-COV-2 HUMAN TO HUMAN



PATOGENESIS COVID-19



Reseptor : ACE-2



Dijumpai di epitel:

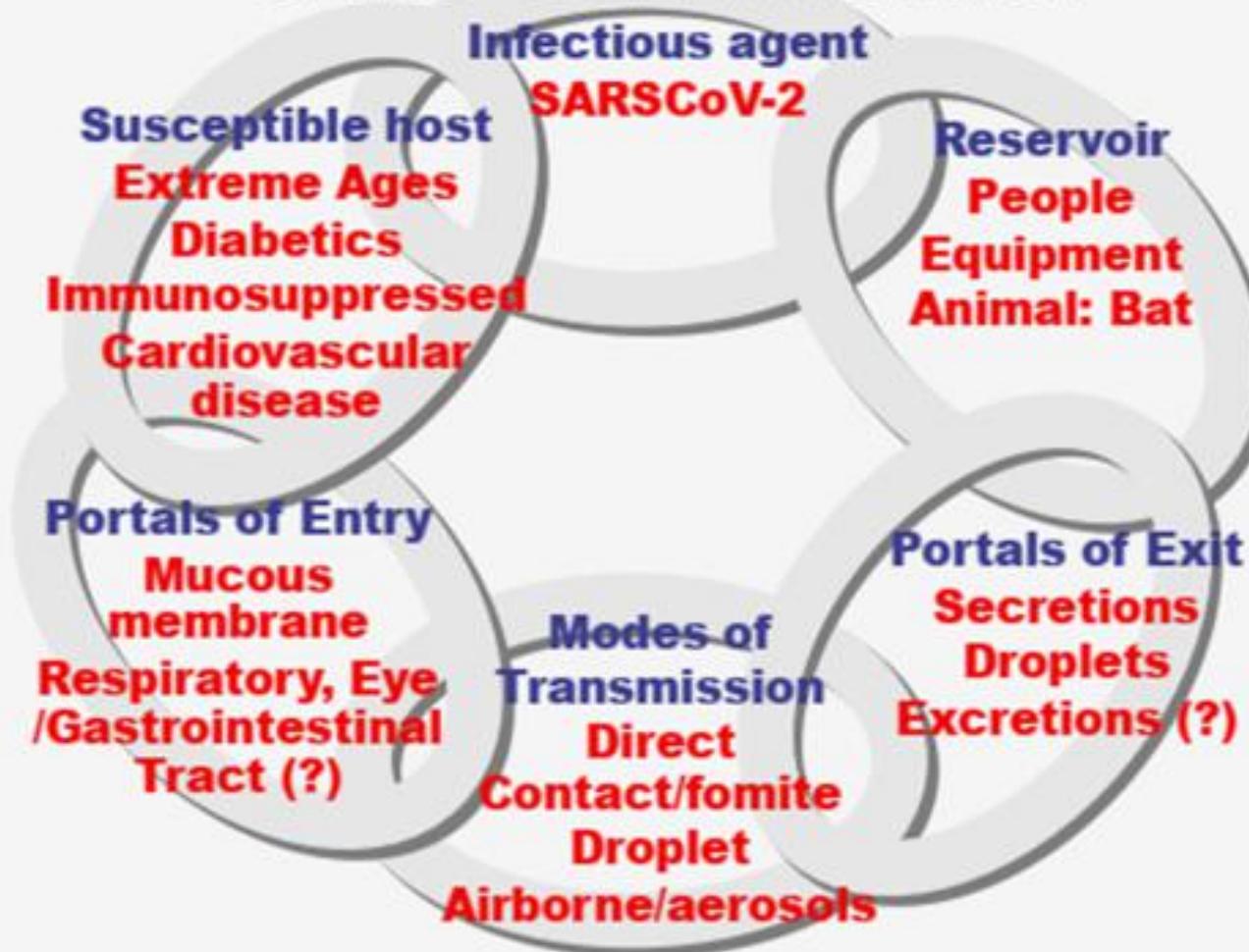
- Mukosa hidung, mulut, nasofaring dan nasolarинг
- Pembuluh darah
- Alveolar paru-paru (>>>)
- Otot jantung *
- Usus *
- Ginjal *
- Kandung kemih *

GEJALA COVID-19



Dapat muncul dalam 2-14 hari setelah terpapar SARS-CoV-2

The Six Component Chain of SARS-CoV-2 Infection



Know your enemy and know yourself and you can fight a hundred battles without disaster

-Sun Tsu-

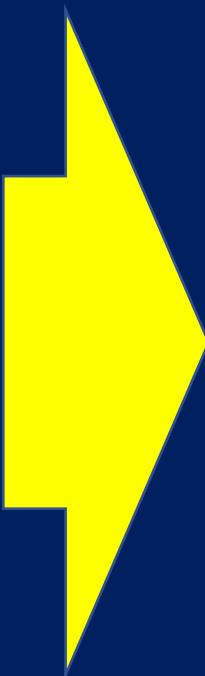
Manajemen Covid-19

- Terapi → mekanisme patofisiologi belum jelas
- Imunisasi → dalam proses pengembangan (akhir 2020 ???)
- Pencegahan transmisi :
 1. Masker
 2. Hand hygiene
 3. Physical distancing & social distancing
 4. Environment hygiene and sanitation
 5. Ventilasi udara dalam ruangan

Pencegahan transmisi

3 M

- Menggunakan masker
- Mencuci tangan
- Menjaga jarak



5 M

- Menggunakan masker
- Mencuci tangan
- Menjaga jarak
- Menghindari kerumunan
- Menjaga imunitas

Identifying airborne transmission as the dominant route for the spread of COVID-19

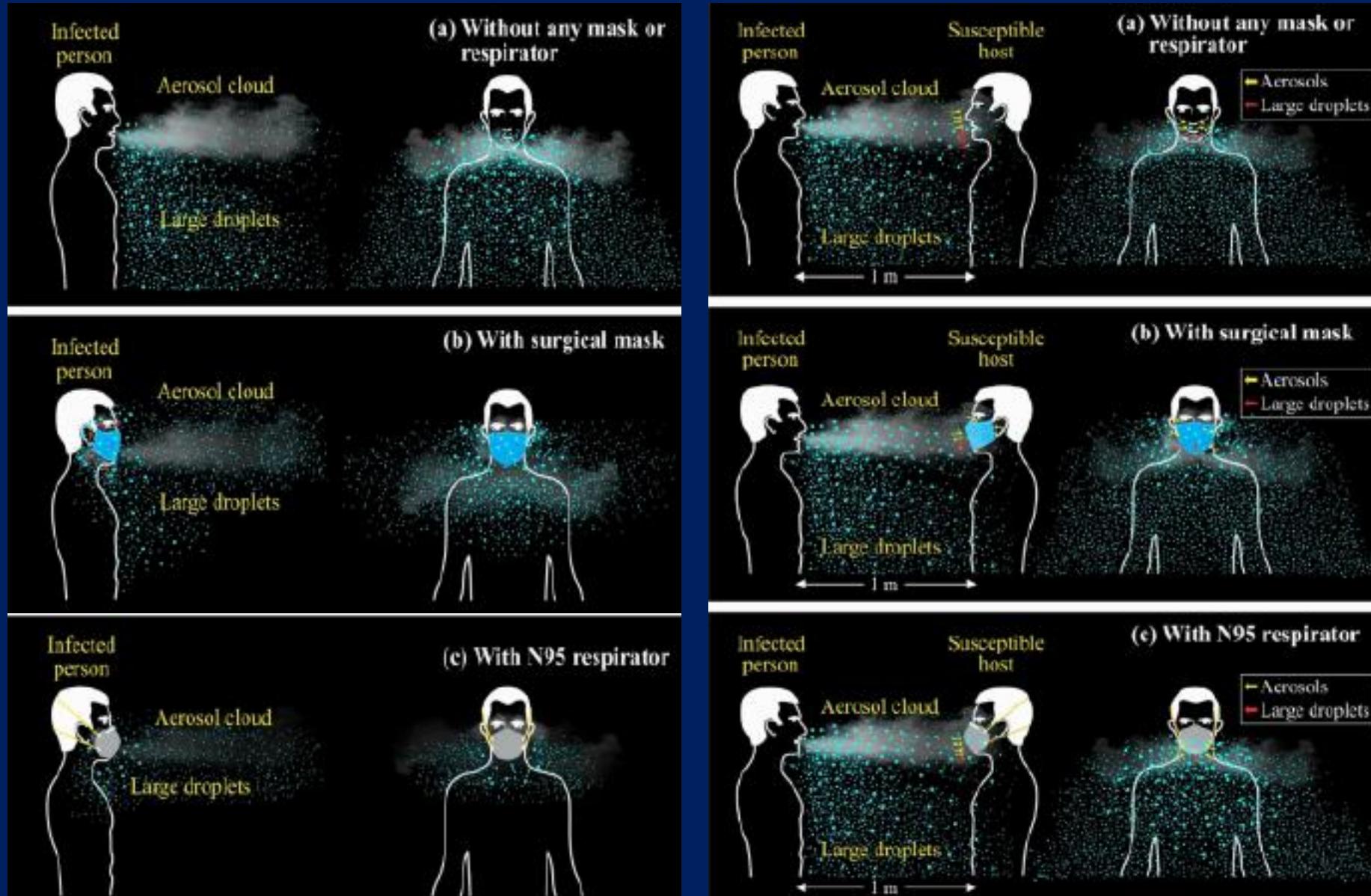
Renyi Zhang^{a,b,1}, Yixin Li^b, Annie L. Zhang^c, Yuan Wang^d, and Mario J. Molina^{a,1}

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KENAPA HARUS MASKER ???

pandemic, including widely adopted social distancing and mandated face covering. However, assessing the effectiveness of those intervention practices hinges on the understanding of virus transmission, which remains uncertain. Here we show that **airborne transmission is highly virulent and represents the dominant route to spread the disease**. By analyzing the trend and mitigation measures in Wuhan, China, Italy, and New York City, from January 23 to May 9, 2020, we illustrate that the impacts of mitigation measures are discernable from the trends of the pandemic. Our analysis reveals that the difference with and without mandated face covering represents the determinant in shaping the pandemic trends in the three epicenters. This protective measure alone significantly reduced the number of infections, that is, by over 78,000 in Italy from April 6 to May 9 and over 66,000 in New York City from April 17 to May 9. Other mitigation measures, such as **social distancing implemented in the United States, are insufficient** by themselves in protecting the public. We conclude that **wearing of face masks in public corresponds to the most effective means to prevent interhuman transmission**, and this inexpensive practice, in conjunction with **simultaneous social distancing, quarantine, and contact tracing**, represents the most likely fighting opportunity to stop the COVID-19 pandemic. Our work also highlights the fact that sound science is essential in decision-making for the current and future public health pandemics

Skema Efektivitas Masker dalam Pencegahan Covid-19



Syarat Masker Kain

- BSN (2020): SNI 89104:2020 Tekstil-masker dari kain
- 3 tipe masker : tipe A (penggunaan umum)
 - tipe B (penggunaan filtrasi bakteri)
 - tipe C (penggunaan filtrasi partikel)
- Efisiensi filtrasi tergantung kerapatan kain, jenis serat dan anyaman → filtrasi 0,7%-60% (tergantung jumlah lapisan)
- Masker berbahan kain tenun/rajutan terdiri minimal 2 lapis
- Tidak dipakai lebih dari 4 jam
- Keuntungan : reuseable

ETIKA Batuk & Bersin



Tutupi Mulut & Hidung

1

Gunakan tisu atau siku bagian dalam, jangan tutupi dengan telapak tangan



Bersihkan Kontaminasi 2

Buang tisu dan bersihkan benda yang tercemar percikan bersin atau batuk



Cuci Tangan 3

Lebih sering cuci tangan dengan sabun dan air mengalir selama minimal 20 detik.



Jangan Sentuh Wajah 4

Tangan dapat membawa virus dan masuk melalui mata, hidung, dan mulut



Psychochemical properties SARS-CoV-2

Inactivated by :

- > UV light
- > Heated at 56°C 30 min
- > Disinfectants : **KENAPA CUCI TANGAN ???**
 - Diethyl ether
 - Ethanol 75%
 - Peracetic acid
 - Chloroform

Stable on :

- * Plastic
- * Stainless steel
- * Dry or wet condition or acidic environment

CUCI TANGAN

- SARS-CoV-2 mudah hancur oleh **sabun dan bahan antiseptik**
- Cuci tangan menggunakan **sabun dan air mengalir** selama **40-60 detik**
- Cuci tangan menggunakan **hand sanitizer** selama **20-30 detik**
- Kapan **HARUS cuci tangan** ? → **SESERING MUNGKIN**
 - > Sebelum dan sesudah menyentuh sesuatu
 - > Sebelum dan sesudah menyentuh wajah
 - > Sesudah menutup mulut/ hidung saat batuk / bersin
- Kapan **HARUS** menggunakan sabun & air mengalir ?
 - Bila tangan terlihat kotor atau terasa lengket
 - Sesudah 10x mencuci tangan menggunakan hand sanitizer

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

- Duration of the handwash (steps 2-7): 15-20 seconds
Duration of the entire procedure: 40-60 seconds



Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



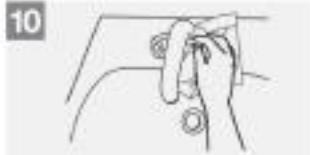
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.

How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

- Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



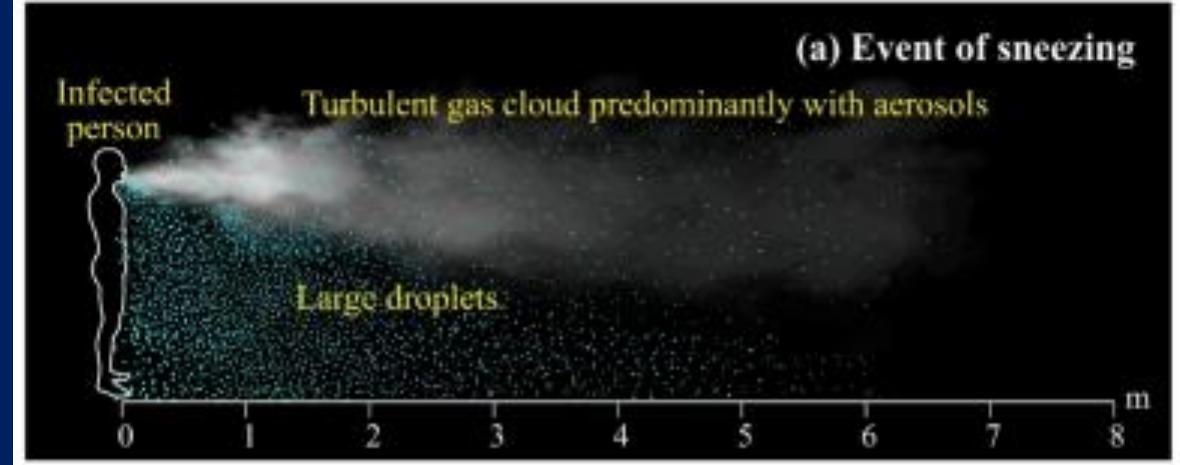
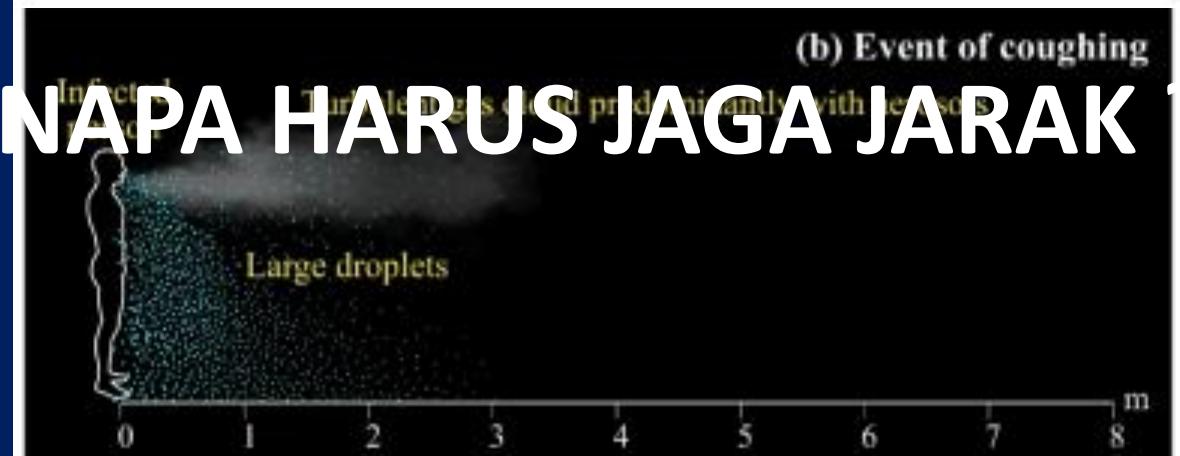
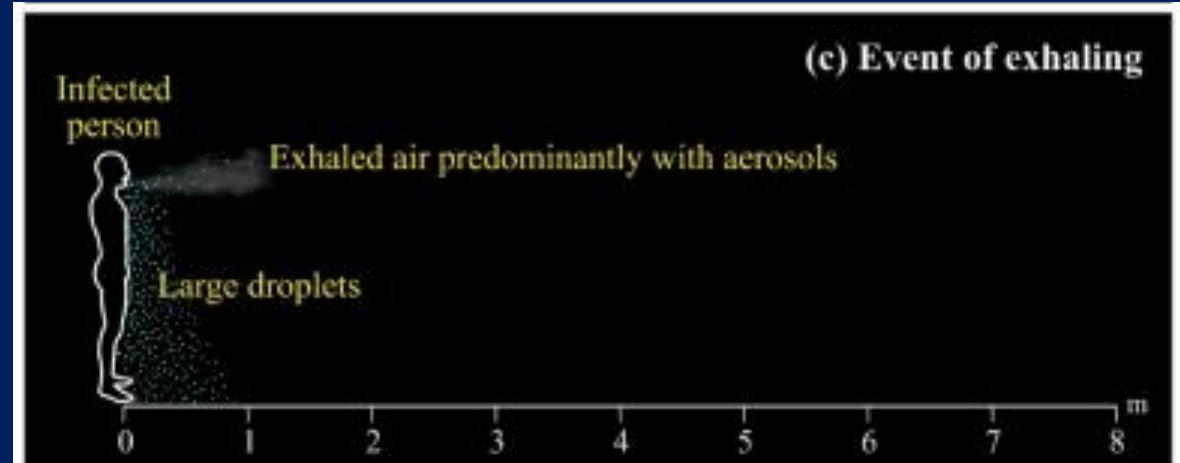
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Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

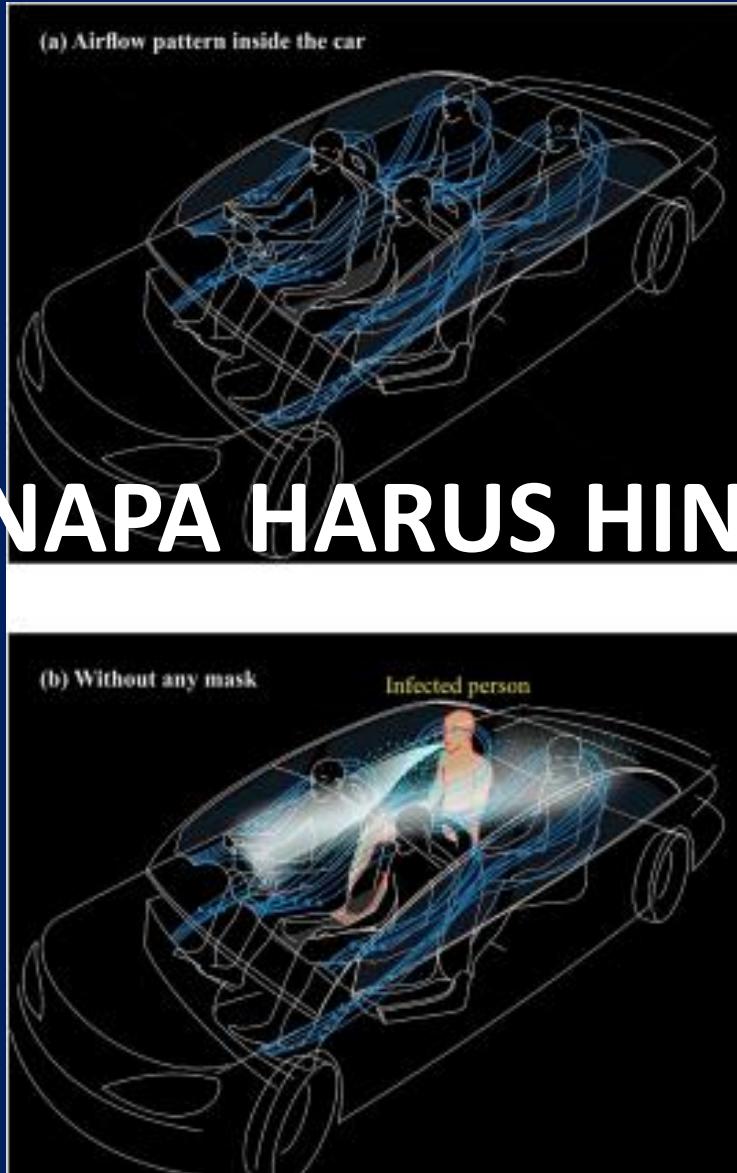


Once dry, your hands are safe.



KENAPA HARUS JAGA JARAK ???

Skema Model Transmisi SARS-COV-2 Indoor



KENAPA HARUS HINDARI KERUMUNAN???



MANA ME

SIS



???



Nutrisi dan Pola makan

- Nutrisi dan pola makan mengatur keseimbangan microbiome saluran cerna dan homeostasis system immune
- Protein
- Asam lemak esensial (omega-3 dan omega-6)
- Vitamin (vitamin B6, B12, asam folat, C dan D)
- Mineral (Zn, Cu, Fe dan Se)
- Prebiotic dan probiotic

Pola makan sehat di pandemic :

- Buat perencanaan menu makanan
- Prioritaskan penggunaan bahan segar
- Makan makanan olahan rumah
- Batasi asupan garam, gula dan lemak
- Konsumsi cukup serat
- Jaga keseimbangan cairan tubuh
- Hindari konsumsi alcohol dan minuman mengandung kafein

Physical exercise as a tool to help the immune system against COVID-19: an integrative review of the current literature

Matheus Pelinski da Silveira,¹ Kimberly Kamila da Silva Fagundes,¹ Matheus Ribeiro Bizuti,¹ Édina Starck,¹

Renata Calciolari Rossi,² and Débora Tavares de Resende e Silva³

Abstract

Go to:

Acute viral respiratory infections are the main infectious disease in the world. In 2020, a new disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), coronavirus disease 2019 (COVID-19), became a global pandemic. The immune response to the virus depends on factors such as genetics, age and physical state, and its main input receptor is the angiotensin-converting enzyme 2. The practice of physical exercises acts as a modulator of the immune system. During and after physical exercise, pro- and anti-inflammatory cytokines are released, lymphocyte circulation increases, as well as cell recruitment. Such practice has an effect on the lower incidence, intensity of symptoms and mortality in viral infections observed in people who practice physical activity regularly, and its correct execution must be considered to avoid damage. The initial response is given mainly by type I interferons (IFN-I), which drive the action macrophages and lymphocytes, followed by lymphocyte action. A suppression of the IFN-I response has been noted in COVID-19. Severe conditions have been associated with storms of pro-inflammatory cytokines and lymphopenia, as well as circulatory changes and virus dispersion to other organs. The practice of physical activities strengthens the immune system, suggesting a benefit in the response to viral communicable diseases. Thus, regular practice of adequate intensity is suggested as an auxiliary tool in strengthening and preparing the immune system for COVID-19. Further studies are needed to associate physical exercise with SARS-CoV-2 infection.

Keywords: COVID-19, Exercise, Immune system, Coronavirus

Aktivitas Fisik

- WHO : 150 menit latihan fisik sedang atau 75 menit latihan fisik berat dalam 1 minggu
- Lakukan latihan fisik singkat dan berkala
- Mengikuti online exercise class
- Jangan meninggalkan aktifitas/kegiatan harian rutin
- Istirahat cukup

Knee to elbow



Squats



Side knee lifts



Touch one knee to your elbow. Hold for 10 seconds, and repeat up to 5 times. This exercise should increase your heart and breathing rates.



Touch your knee with your elbow, lifting the knee to the side, alternating sides. Find your own pace. Try to perform this for 1–2 minutes, rest for 30–60 seconds, and repeat up to 5 times. This exercise should increase your heart and breathing rates.

Chest opener



Place your feet at hip-width apart, toes pointing outwards. Bend the knees slightly and sit back on your heels (keep the heels on the ground). Bend and stretch the torso forward (as far as you can go without straining), hold for 20–30 seconds. This exercise strengthens the chest and shoulders.

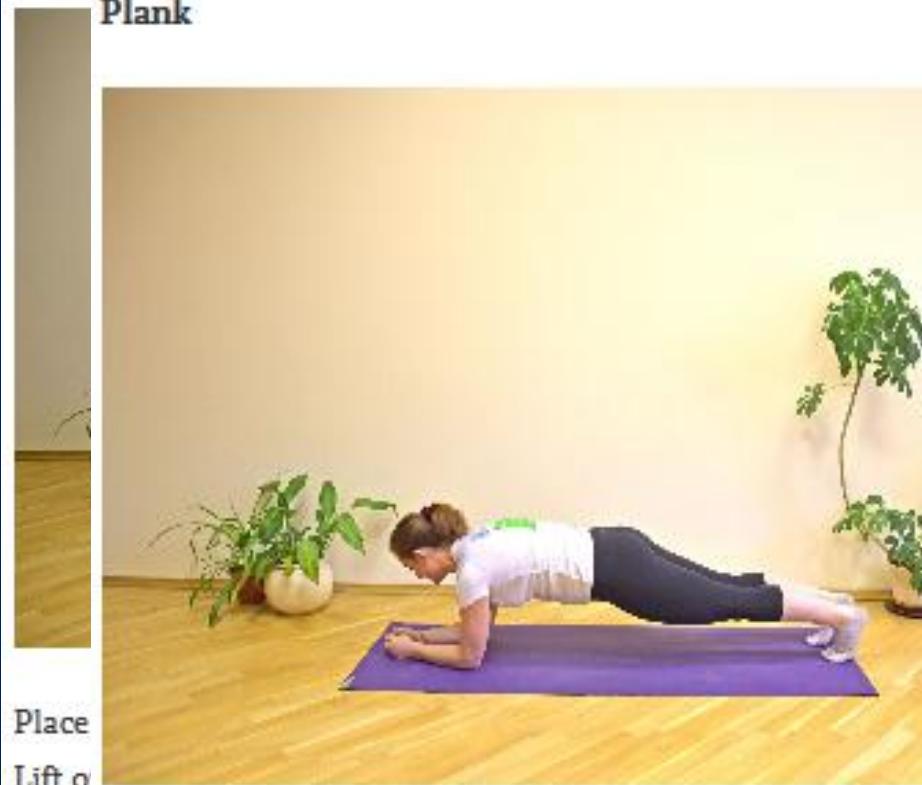


Interlace your fingers behind your back. Stretch your arms and open your chest forward. Hold this position for 20–30 seconds (or more). This position stretches your chest and shoulders.

Back extensions

Superman

Plank



Place

Lift o

Perfo

and r Support your forearms firmly on the ground, with the elbow directly under the shoulders. Keep the hips at the level of the head. Hold for 10–15 seconds (or more, if possible), rest for 30–60 seconds, and repeat up to 5 times. This exercise strengthens your belly, arms and back.

Chair dips



Hold onto the seat of a chair, with your feet about half a meter away from the chair. Bend your arms as you lower your hips to the ground, then straighten the arms. Perform this exercise 10–15 times (or more), rest for 30–60 seconds, and repeat up to 5 times. This exercise strengthens your triceps.

- Faktor lingkungan mempengaruhi viabilitas mikroorganisme airborne : **suhu, kelembaban, radiasi sinar matahari** dan **ventilasi ruangan**

Relationships of viral payloads with environmental parameters.

Environmental Parameter	Synthesized information	Reference
Daily minimum temperature with lagged effect of 5–7 days	Inverse relationship with numbers of daily SARS-CoV cases in Beijing and Hong Kong	Bi et al. (2007)
Air temperature at 4 °C and relative humidity (< 20% or > 80%)	Higher survival of payloads of transmissible gastroenteritis and mouse hepatitis viruses for extended days on surfaces in indoor environment	Casanova et al. (2010)
Temperatures of 22–25 °C and relative humidity of 40–50%	Higher survival rates of SARS-CoV on smooth surfaces simulating typical air-conditioned environments	Chan et al. (2011)
Temperature at 38 °C, and relative humidity > 95%	Loss of viability of SARS-CoV, simulating tropical climates	Chan et al. (2011)
Lower air temperatures (6 °C) and lower relative humidity (30%) than at higher relative humidity	Greater survival of coronaviruses in surfaces	Ijaz et al. (1985); Kim et al. (2007)
Lower air temperatures (6 °C)	Enhanced viral survival	Harper (1961)
Inadequate indoor ventilation With > 12 air changes per hour (ACH) (e.g., equivalent to > 80 L/s for a 24 m ³ -room) and controlled direction of airflow Negative pressure of > 2.5 Pa, an airflow having a difference between the exhaust to supply > 125 cfm (56 L/s), clean-to-dirty airflow, > 12 ACH for a new building, and > 6 ACH in existing buildings for an old building, and exhaust to the outside, or a HEPA-filter if room air is recirculated	Enhanced infection risk of SARS-CoV in makeshift hospitals Low risk of infectivity of viral diseases in an airborne precaution room Low risk of infectivity in an airborne infection isolation room	WHO (2009) AIA (2001); Mayhall (2004); Wenzel (2003); WHO (2007) CDC (2003)

JAGA DIRI dan KELUARGA Anda dari Virus Corona dengan **GERMAS**

(Gerakan Masyarakat Hidup Sehat)

Caranya:



- Makan dengan gizi yang seimbang



- Rajin olahraga dan istirahat cukup



- Cuci tangan pakai sabun



- Jaga kebersihan lingkungan



- Gunakan masker bila batuk atau tutup mulut dengan lengan atas bagian dalam



- Minum air mineral 8 gelas/hari



- Tidak merokok



- Makan makanan yang dimasak sempurna dan jangan makan daging dari hewan yang berpotensi menularkan



- Bila demam dan sesak nafas segera ke fasilitas kesehatan

- Jangan lupa berdoa

VAKSINASI

detikHealth > Berita Detikhealth > Detail Artikel

Senin, 07 Des 2020 17:45 WIB

Vaksin Corona Sudah Sampai di Indonesia, Ini Asal Negara dan Tingkat Keampuhannya

Nafilah Sri Sagita K - detikHealth

detikHealth > Berita Detikhealth > Detail Artikel

Senin, 25 Jan 2021 09:00 WIB

Indonesia Mulai Vaksinasi COVID-19, Menkes: Malaysia Ngomel Belum Dapat

Khadijah Nur Azizah - detikHealth

Sinovac: Brazil results show Chinese vaccine 50.4% effective

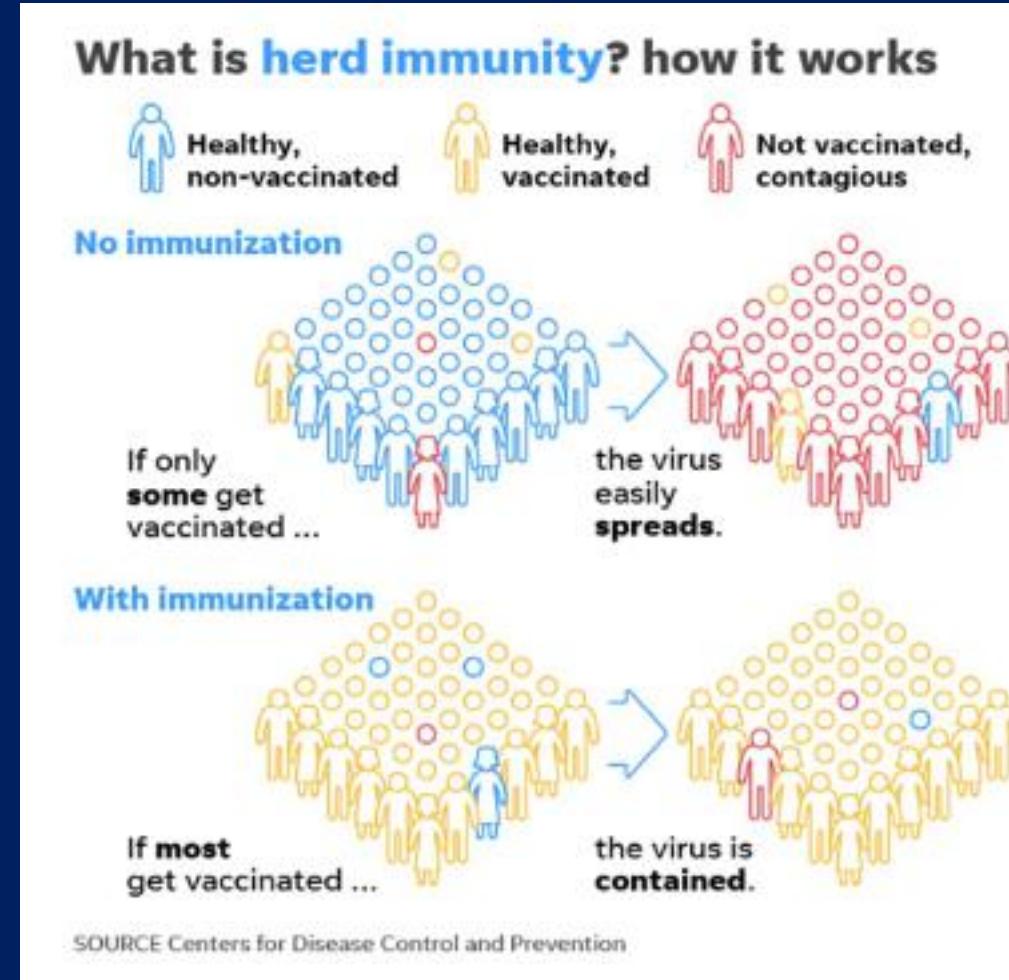
Sabtu, 23 Jan 2021 18:45 WIB

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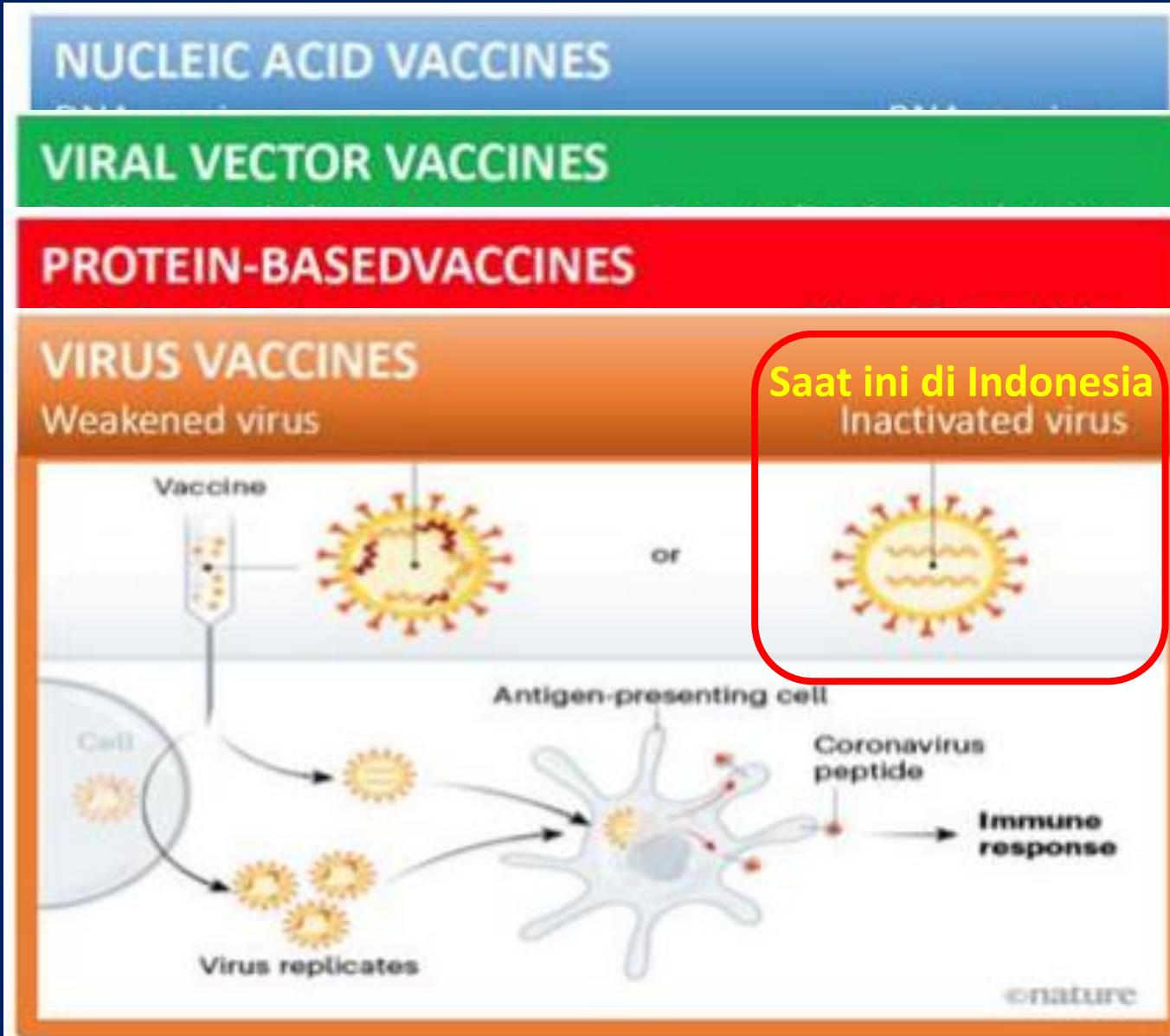
Kondisi Terkini 7 Relawan Vaksin Sinovac Bandung yang Positif COVID-19

Achmad Reyhan Dwianto - detikHealth

- Tujuan vaksinasi : membentuk *herd immunity* bila timbul kekebalan pada > 70% komunitas



JENIS VAKSIN COVID-19



Merangsang system immune adaptif membentuk antibody spesifik (selular dan humorai) terhadap target virus

....VAKSINASI

HAL YANG VAKSINASI

- KIPI (Kejadian) dan
- Pembentukan memerlukan dan
- Lamanya dan
- Vaksinasi dan



PENUTUP

- Pemahaman tentang metode transmisi COVID-19 akan melindungi Anda dan keluarga di rumah
- Perlu peningkatan kewaspadaan paparan akibat perilaku di lingkungan di luar rumah
- Penerapan protocol kesehatan dengan disiplin dan baik di semua lingkungan di luar rumah
- Mengubah mindset dan perilaku di era New Normal
- Vaksinasi bukan jawaban utama untuk terhindar COVID-19



TERIMA
KASIH