KEY POINTS OF COVID-19



 Since early the outbreak in December 2019 in Hubei province, the People's Republic of China, global confirmed COVID-19 cases exceed 3.1 million with over 224,000 deaths on 30 April 2020.



- The main mode of transmission is via small droplets from the nose or mouth, secreted by an infected individual and transferred to other people by inhalation, touch or surface contamination.
- Asymptomatic and presymptomatic individuals account for a significant proportion of transmissions.



- COVID-19 can affect multiple organ systems not just the respiratory system.
- Approximately 20% of infected people develop serious or critical illness.
- People of advanced age and those with co-morbidities are at increased risk of severe illness and death.
- Currently there are no clinical data on possible long-term complications of COVID-19.



 Social distancing decreases the risk of transmission by reducing incidence of contact while enhanced hygiene reduces disease transmission, if a contact occurs.



- PCR testing is the preferred diagnostic test for a suspected case.
- The role of serology for detecting antibodies remains unclear. At this stage, antibody testing is not recommended for routine care of suspected or confirmed COVID-19 patients.
- Presence of antibodies against SARS-CoV-2 may not indicate immunity.



- COVID-19 management must minimise risk to the public and optimise the health of the athlete.
- Patients with more severe symptoms and signs should be managed in an inpatient setting.
- Early detection and contact tracing is crucial to mitigate risk of an outbreak.
- Currently there are no medications that have been shown to alter the course of the disease.



- COVID-19 has had a significant negative effect on the sport sector.
- Loss of revenue from sponsorship, gate-takings and broadcast deals has resulted in job losses and reappraisal of operational imperatives.

Refer to The Australian Institute of Sport Framework for Rebooting Sport in a COVID-19 Environment for more information.



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