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New clinics aid virus ‘long-haulers’

Facilities focus on effects that could linger after infection

By Jennfer Peltz
Associated Press

NEW YORK — COVID-19 came early for Catherine Busa, and it never really left. The 54-year-old New York City school secretary didn’t have any underlying health problems when she caught the coronavirus in March, and she recovered at her home in the borough of Queens. But some symptoms lingered: fatigue she never experienced during years of rising at 5 a.m. for work; pain, especially in her hands and wrists; an altered sense of taste and smell that made food unappealing; and a welling depression. After eight months of suffering, she made her way to Jamaica Hospital Medical Center — to a clinic specifically for post-COVID-19 care. “I felt myself in kind of a hole, and I couldn’t look on the bright side,” Busa said. She did not feel helped by visits to other doctors. But it was different at the clinic. “They validated the way I felt,” she said. “That has helped me push through everything I’m fighting.” The clinic is one of dozens of such facilities that have cropped up around the U.S. to address a puzzling aspect of COVID-19 — the effects that can stubbornly afflict some people weeks or months after the infection itself has subsided. The programs’ approaches vary, but they share the goal of trying to comprehend, treat and give credence to patients who cannot get free of the virus that has infected more than 24 million Americans and killed more than 415,000 nationwide. “We know this is real,” said Dr. Alan Roth, who oversees the Jamaica Hospital clinic. He has been grappling with body pain,

fatigue and “brain fog” characterized by occasional forgetfulness since his own relatively mild bout with COVID-19 in March. Like so much else in the pandemic, the scientific picture of so-called long-haulers is still developing. It’s not clear how prevalent long-term problems are or why some patients keep suffering while others do not. Current indications are that up to 30% of patients continue to have significant problems that intrude on daily life two to three weeks after testing positive. Perhaps as many as 10% are still afflicted three to six months later, according to Dr. Wesley Self, a Vanderbilt University emergency physician and researcher who co-wrote a July report from the Centers for Disease Control and Prevention. Doctors have known for months that intensive care patients can face extended recoveries. But many COVID-19 long-haulers were never critically ill. At the University of Texas Medical Branch’s post-COVID-19 clinic in Clear Lake, patients range in age from 23 to 90. Half were never hospitalized, said the clinic’s director, Dr. Justin Seashore. “They were told they should be feeling better, and they didn’t,” he said. Instead, they were left with fatigue, shortness of breath, anxiety, depression, difficulty concentrating or other problems they did not have before. Some were told they would have to be on oxygen for the rest of their lives. A highlight has been helping many of them get off it through treatment that can include respiratory therapy, occupational therapy, mental health check-ins and more, Seashore said. Long-term COVID-19 care has been launched in settings ranging from big research hospitals like New York’s Mount Sinai, which has over 1,600 patients, to



Catherine Busa walks around her neighborhood Jan. 13 in the Queens borough of New York as part of her recovery from COVID-19. SETH WENIG/AP

St. John’s Well Child and Family Center, a network of community clinics in south Los Angeles. Rather than focusing specifically on patients who still feel sick, St. John’s aims to schedule a physical exam, a behavioral health visit and monthly follow-ups with everyone who tests positive at one of its clinics, CEO Jim Mangia said. Nearly 1,000 patients have come in for exams. There’s no proven cure for long-term COVID-19 problems. But clinics aim to offer relief, not least by giving patients somewhere to turn if their usual doctor can’t help. “We wanted to create a place that patients could get answers or feel heard,” even if there are still unanswered questions, said Dr. Denyse Lutchmansingh, the clinical lead physician at Yale Medicine’s Post-COVID Recovery Program. At the Jamaica Hospital program, patients get mental health assessments, a lung specialist’s attention and physical exams that delve deeper than most into their lifestyles, personal circumstances and sources of stress.

Several hundred people have been treated so far, Roth said. The idea is to help patients “build their own healing capacity,” said Dr. Wayne Jonas, former director of the National Institutes of Health’s Office of Alternative Medicine. He is now with the Samueli Foundation, a California-based nonprofit that works with the hospital on marrying alternative ideas with conventional medicine. The long-haulers get exercise and diet plans and group or individual mental health sessions. Recommendations for supplements, breathing exercises and meditation are also likely. That’s in addition to any prescriptions, referrals or primary care follow-ups deemed necessary. “We’re not just saying, ‘It’s all in your head, and we’re going to throw herbs and spices at you,’” Roth said. With no tidy, proven answer for the complex of symptoms, “we do a common-sense approach and take the best of what’s out there to treat these people.”

PUBLIC AUCTION
Tools & Shop Equipment • Construction Equipment • New Tile Flooring

Sat., January 30, 11 AM, 1801 W. 1st St. (SR46), Sanford, FL
Tools & Shop Equipment: HEM horizontal band saw, pallet racking, drill presses, saws, tool/parts, cabinets, air compressors, down draft tables, auto equipment, Snap-On & MAC tools and much more. Construction Equipment: 2005 JCB 520 telehandler, Multi Quip & Wacker plate compactors-generators-trash pumps, concrete cutters and much more. Tile Flooring: Great selection of new tile flooring in a wide variety of colors-sizes & designs, 1,000's of sq.ft. available. Make plans to attend.
Inspection: Fri., 1/29 9am-5pm & 9am day of sale. Terms: cash, cashier check, MC®, Visa®, Disc®, 13% BP. 3% disc. for cash or cashier check. Removal: Sat. 1/30 until 5pm, Mon. 2/1 - Wed. 2/3 8am-5pm.

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Dr. Joel R. Garcia will no longer be practicing with Orlando Health Medical Group, Inc. d/b/a Orlando Health Heart & Vascular Institute, effective January 15, 2021. All patient records are maintained at Orlando Health Heart & Vascular Institute, 1222 S. Orange Avenue, 4th floor, Orlando, Florida 32806. For inquiries, please call (321) 841-6444.

World remains deep in crisis 1 year after Wuhan lockdown

By Brian Melley
Associated Press

A year to the day after the Chinese city of Wuhan went into lockdown to contain a virus that had already escaped, President Joe Biden began putting into effect a new war plan for fighting the outbreak in the U.S., Germany topped 50,000 deaths, and Britain closed in on 100,000. The anniversary of the lockdown Saturday came as more contagious variants of the coronavirus spread and efforts to vaccinate people against COVID-19 have been frustrated by disarray and limited supplies in some places. The scourge has killed over 2 million people worldwide. In the U.S., which has the world’s highest death toll at over 415,000, Dr. Anthony Fauci said a lack of candor about the threat under President Donald Trump probably cost lives. Fauci, who was sidelined by Trump, is now the chief medical adviser to Biden in an ambitious effort to conquer the virus. He told CNN that the Trump administration delayed getting sound scientific advice to the country. “When you start talking about things that make no sense medically and no sense scientifically, that clearly is not helpful,” he said. Biden signed a series of executive orders Thursday to mount a more centralized attack on the virus and has vowed to vaccinate 100 million people in his first 100 days, a number some public health experts say is not ambitious enough. Dr. Eric Topol, head of the Scripps Research Translational Institute, said the U.S. should aim to vaccinate 2.5 million a day. “This was already an emergency,” Topol said, but with more contagious mutations of the virus circulating, “it became an emergency to



Residents burn paper offerings late Friday in Wuhan, China, for a relative who died from COVID-19. NG HAN GUAN/AP

the fourth power.” In Britain, where a more transmissible variant of the virus is raging, the death toll passed 97,000, the highest in Europe. And the government’s chief scientific adviser warned that the mutated version might be deadlier than the original. Patrick Vallance cautioned that more research is needed but that the evidence suggests that the variant might kill 13 or 14 people out of every 1,000 infected, compared with 10 in 1,000 from the original. Last week, Germany extended its lockdown until Feb. 14 amid concern about the mutant viruses. Some nations are imposing or considering new travel restrictions for the same reason. France said it will require a negative test from travelers arriving from other European Union countries starting Sunday. Canada said it may force visitors to quarantine in a hotel at their own expense upon arrival. In another apparent setback, AstraZeneca said it will ship fewer doses of its vaccine than anticipated to the 27-country EU because of supply chain problems. The 76-day Wuhan lockdown began a year ago with a

notice sent to people’s smartphones at 2 a.m. announcing the airport and train and bus stations would shut at 10 a.m. It eventually was expanded to most of the rest of Hubei province, affecting 56 million people. By the time of the lockdown, the virus had spread well beyond China’s borders. Wuhan has largely returned to normal. The rollout of shots in the U.S. has been marked by delays, confusion and, in recent days, complaints of vaccine shortages and inadequate deliveries from the federal government as states ramp up their vaccination drives to include senior citizens as well as teachers, police and other groups. Biden pledged to set up Federal Emergency Management Agency mass vaccination sites, but some states said they need more doses of the vaccine, not more people or locations to administer them. “We stand ready, willing and able to handle it,” Florida Gov. Ron DeSantis said. “Trying to find FEMA set up sites, first of all, that would take like 30 days. It’s not necessary in Florida. I would take all that energy and I would put that toward more supply of the vaccine.”

NOTICE OF PUBLIC HEARING

The Orange County Board of County Commissioners will conduct a public hearing on Tuesday, January 26, 2021, at 2:00 p.m., or as soon thereafter as possible, in the County Commissioners’ Chambers, First Floor, Orange County Administration Center, 201 South Rosalind Avenue, Orlando, Florida, to consider recognition of encumbrance rollovers, grant rollovers, fund balance adjustments, capital improvement adjustments, and to make other necessary adjustments.

All interested parties are invited to attend and be heard. If you have any questions regarding the public hearing, please contact the Orange County Office of Management and Budget, 407-836-7390.

Any person wishing to appeal any decision made by the Orange County Board of County Commissioners at this meeting will need a record of the proceedings. For that purpose, such person may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

In accordance with the Americans with Disabilities Act (ADA), if any person with a disability as defined by the ADA needs special accommodations to participate in this proceeding, he or she should contact the Orange County Communications Division at 407-836-5328, no later than two (2) business days prior to the proceeding.

Fund Balance Amendment:
Sources:

Fund Balance	\$(31,614,798)
Interfund Transfers	(7,400,283)
Miscellaneous Revenue	175,862,325
Total Sources	\$136,847,244

Uses:

Personal Services	\$(7,856,751)
Operating Expenses	24,510,365
Capital Outlay	2,460,765
Debt Services	7,000,000
Reserves	164,315,874
Interfund Transfers	(7,400,283)
Miscellaneous	(46,182,726)
Total Uses	\$136,847,244

Encumbrance Rollovers:
Sources:

Fund Balance	\$213,761,595
Total Sources	\$213,761,595

Uses:

Operating Expenses	\$68,725,049
Capital Outlay	128,220,770
Grants	16,356,848
Other	458,928
Total Uses	\$213,761,595

Grant Rollovers:
Sources:

Intergovernmental Revenue	\$115,036,941
Grant Income	5,177,092
Non-Revenue	100,091,601
Total Sources	\$220,305,634

Uses:

Personal Services	\$22,295,448
Operating Expenses	94,128,641
Capital Outlay	48,886,928
Grants	52,878,553
Other	2,116,064
Total Uses	\$220,305,634

Capital Improvements Adjustments:
Uses:

CIP Projects	\$44,959,156
Capital Outlay	2,659,242
Provision for Rebudgets	(56,168,302)
Reserves	8,549,904
Total Uses	\$0

To obtain a complete detail listing of fund balance adjustments, encumbrance rollovers, grant rollovers, and capital improvement adjustments, please contact the Office of Management and Budget at 407-836-7390.