# FILIPINO CHRONICLE

TIAWATIPS#1 FILIPINO NEWSPAPER

**\*APRIL 18, 2020\*** 

COVID-19 WREAKING HAVOC ON THE U.S. ECONOMY AND SMALL BUSINESSES





**CANDID PERSPECTIVES** 

WEAR THE MASK
EVEN IF TRUMP WON'T
— HERE'S WHY



**OPEN FORUM** 

This is No Time for a Minimum Wage Hike



**GLOBAL NEWS** 

AVOID TAKING IBUPROFEN FOR COVID-19 SYMPTOMS





HAWAII-FILIPINO NEWS

DR. BUENCONSEJO-LUM IS NEW ASSOCIATE
DEAN FOR ACADEMIC AFFAIRS AT JABSOM

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### **EDITORIAL**

### COVID-19 Exposes How Vulnerable Our Economy Is

OVID-19 is exposing vulnerabilities and forcing the world to reexamine truths that have been ignored. For example, scientists are discovering strong evidence that deforestation and development are linked to many of the global virus outbreaks. How? Zoonotic diseases (infections transmitted from animals to humans) are increasing as people

COVID-19 is also dispelling this idea of what is considered a strong economy. Prior to the pandemic, Americans were led to believe that the U.S. had a strong economy based off how well the financial markets were doing. Politicians also used GDP that mea-

encroach on habitats occupied by animals.

sures economic output as another indicator of a robust economy.

Americans were heading into the national elections with this notion of economic strength. But in reality, financial markets and GDP, are old benchmarks and ignore how really vulnerable most Americans are financially.

How can we truly say that just three months ago before COVID-19 we had a booming economy as millions of Americans have been living paycheck to paycheck, with very little savings that are putting millions of Americans at financial risk this very moment?

How can we truly say that just three months ago we had a booming economy as millions of Americans were not able to afford health insurance and health care, and now this set of our population must rely on government assistance should they need it during this crisis, or face financial ruin?

How can we say that just three months ago we had a booming economy as millions of Americans faced housing and food insecurity? Most people are locked in debt and struggle just to be able to access basic securities like a roof over their head and food to provide for themselves and their families.

#### **Real economic fundamentals**

Financial markets and GDP are only partial signs of a working economy – but they do not address fundamentals like gross inequality, individual savings, ability to afford health care, health wellness, mortgage debt, low wages, housing unaffordability, child care, college debt, inability to retire, rising inflation affecting cost of food and clothes, underemployment, job insecurity.

The reality is the economy was not booming prior to COVID-19.

It was working for a select group of Americans who have the luxury to not worry about their financial situation during this crisis. Now COVID-19 is bringing all these urgencies to surface.

### Other economic revelations exposed by COVID-19

COVID-19 is also revealing how valuable workers are – that workers are the true driving force of the economy. In workers' absence, the economy comes to a standstill as we are now seeing. How odd, then, that workers are paid grossly disproportionate to CEOs and top management, to a degree that workers are unable to have enough financially to get them through just a month through this crisis.

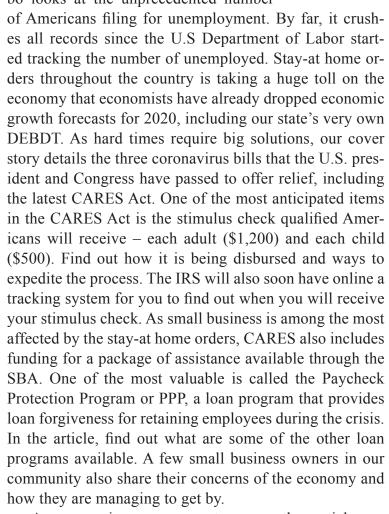
COVID-19 reveals the shortcomings of economic globalism and how valuable manufacturing was to our economy. In their absence — government has done little to keep manufacturing alive and to encourage them to stay in the U.S. — now we must rely on China to meet our needs of massive shortages in medical equipment and supplies from respirators to medical-grade protective gear.

COVID-19 shows us how dependent our economy is on small (continue on page 3)

### FROM THE PUBLISHER

ust over two months since the COVID-19 pandemic hit America's shores, our national economy is already being rolled over by a recession.

For our cover story this issue, associate editor Edwin Quinabo looks at the unprecedented number



Accompanying our cover story are other articles on COVID-19. HFC columnist Elpidio Estioko contributes "COVID-19: What to do in Times of Crisis" and HFC columnist Emil Guillermo writes "Wear the Mask Even if Trump Won't—Here's Why."

Also in this issue we are pleased to present our Community Health & Wellness 2020 supplement. We have a few articles including Dr. Lyla Cachola Prather's "Life on the Frontlines—Primary Care," Dr. Mel Ona's "Colon Health," Dr. Jon Avery Go's "Lung Health: Emphysema 101," and HFC columnist Seneca Moraleda-Puguan's "A Toddler's Letter for the Frontliners." Our second editorial deals with the mental and emotional effects of isolation brought on by the COVID-19 pandemic.

Lastly, be sure to read the latest in our news section, including the appointment of Dr. Lee Buenconsejo-Lum to Associate Dean for Academic Affairs at the John A. Burns School of Medicine (JABSOM), University of Hawaii at Manoa. Dr. Buenconsejo-Lum is a graduate of JABSOM. Also, we have news on Senator Mazie Hirono calling on the Senate to support local journalism during the COVID-19 pandemic. She said the current health crisis has made the already vital role of local news even more critical. And that they must be supported.

Thank you for supporting your community newspaper. We hope you stay safe and strong as we all go through these trying times together.

Let me close by sharing writer Vivian Greene's famous quote from her poem Dancing in the Rain: "Life isn't about waiting for the storm to pass, it's about learning how to dance in the rain." Until next issue, warmest *Aloha* and *Mabuhay*!

Chora a. Monteures-Sounds



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### **EDITORIALS**

### **Remember to Take Care of Your Mental Health During the COVID-19 Pandemic**

he acutely abrupt transition from pre-COVID-19 pandemic life to

suddenly having

to worry about

whether you can meet basic necessities such as health, finances, and food security are causing what psychologists call "collective trauma."

In addition to the sharp transition, the uncertainty of the future - how long will COVID-19 last; what would the new normal look like adds to emotional and psychological stress, and potentially could have long-term effects.

Studies on post-9/11 terrorist attacks revealed post-traumatic stress disorder (PTSD) was particularly significant among first-responders and NYC residents highly exposed to the attack and its aftermath. The general population, mostly through media accounting and images of the 9/11 attacks, were also impacted. There were higher incidences of life-changing events immediately following 9/11 – divorces, change of careers, moves to other cities. On the positive side, people report that 9/11 brought them closer to each other, strengthened their marriages and relationships with children and friends.

Considering how much more impactful the COVID-19 pandemic is, meaning that almost each and everyone of us has had to readjust to it in varying degrees, it will be interesting to see what studies show after this crisis is over.

Global panic and widespread forced isolation are new social features that will no doubt have implications. Already there are reports of higher incidences of domestic abuse caused by the pressures of stay-at home orders.

#### **Psychological** impact Of COVID-19

Cigna 2020 Loneliness Index reports that three in five Americans report a persistent sense of loneliness, a seven point jump from the previous 2018 study. Feelings of isolation and loneliness have been reported among heavy users of social media.

With online social media usage being relied upon for social connection during the COVID-19 pandemic because of mandatory social distancing, experts anticipate that

feelings of despondency and loneliness could rise.

Experts say social isolation could have a mild impact as when people feel cabin fever. But the psychological stress this pandemic is having could have extreme detrimental effects on a person's mental, emotional and even physical health.

Studies of social disconnectedness have found to raise health risks as much as smoking 15 cigarettes a day or misusing/abusing alcohol or obesity, Dr. Julianne Holt-Lunstad, a professor of psychology and neuroscience at Brigham Young University found.

"There is robust evidence that social isolation and loneliness significantly increase risk for premature mortality, and the magnitude of the risk exceeds that of many leading health indicators," Holt-¬Lunstad told the American Psychological Association in 2019.

The verdict is not out or conclusive on COVID-19's psychological long-term impact (because we're in the thick of the crisis). But during this temporary disconnectedness there are healthy ways to cope.

### Staving emotionally healthy during COVID-19

Experts suggest a few ways to keep healthy during the crisis.

\*Keep connected. Nothing beats in-person contact with our loved ones, but advanced technology can help to lessen feelings of isolation. Texting, video-chat, participating in online events can be temporary substitutes.

\*Keep informed, but don't be overwhelmed. It's important to watch the news on TV or online to know the latest on the pandemic. But it shouldn't be an all-engrossing obsession. Take time to do work and other things you'd normally be doing if it wasn't for stay-at home orders.

\*Exercise. Now is a good time as any to start an exercise routine. If you can't commit to that, take frequent walks with your dog or someone else in your household. But, of course, remember to keep distance from others in the neighborhood. It's already known

exerthat cise helps with mental health.

\*Recognize changes you might be

going through. While it's perfectly normal to show empathy and cry over the loss of life during the crisis, put a check on changes in your personality such as feelings of hopelessness (and helplessness), bursts of anger, ability to concentrate, difficulties in sleeping, changes in eating patterns, use of alcohol or other drugs, high levels of anxiety.

If suicidal ideation becomes a factor, contact a health professional immediately.

#### **Take care of yourself**

Everyone reacts to stress differently. You know yourself better than anyone else. Engage in healthy coping activities that you've relied upon all your life to get through tough times.

It's also not just about yourself. Be a good husband, wife, child, or friend and make sure everyone in your household or social circle is doing

This phrase will get overused and can be tiresome, but remember that "we're all in this together." ■



(COVID-19 Exposes....from page 2) businesses, how they employ millions of Americans and contribute to capital flow - but our tax laws disproportionately favor big corporations, many of which helped to push out of the marketplace tens of thousands of small businesses.

Like workers, small businesses are just getting by and feeling the blunt force of the crisis. Historically, in each modern recession we've had, small businesses have been most harmed and first to close. And still, yet again, the coronavirus stimulus packages disproportionately aids big corporations over small businesses.

#### **Caught flat-footed**

Besides the scientific and medical communities - who have been warning us of the possibilities of a pandemic outbreak - the world has been caught flat-footed by COVID-19.

But the fundamentals of what make an economy truly robust were never sound to begin with.

The COVID-19 happen to expose these vulnerabilities that were already there.

To say that COVID-19 is a temporary, stumbling block, and that the economy will fully recover is to be blind of the needs we must work on. What would an economic recovery look like to those who were so confident in our economy before COVID-19? To go back to where we were, to where only a small, select few benefited while others remain dependent on safety nets?

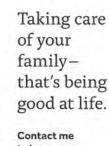
COVID-19, however disastrous it is, can at the very least, bring about a new awareness of how we see our economy and what it should look like.

There's a lot of talk about "new normal" beyond the

COVID-19. We have the power, but only through awareness, to fashion a "new normal" with truly strong economic fundamentals.

We must not, and cannot fall for the same smoke-andmirrors trick of those at the highest levels of government and corporations (including corporate media that's more wrapped up in political intrigue

than providing in-depth coverage of struggling Americans), telling us that the economy is "fine" when it really hasn't been for a very long time. ■



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### **COVER STORY**

### AMERICANS AND BUSINESSES STRUGGLING TO STAY AFLOAT DURING COVID-19 CRISIS

**By Edwin Quinabo** 

mericans are shook up and reeling over two simultaneous crisis caused by the COVID-19 pandemic -- public health and the economy. They are

also conflicted in a tug-of-war of what to do. On one side there is a desire to reopen and return to business as usual; while pulling at the other end is a reality that staying steadfast to social distancing must continue.

President Donald Trump and his conservative allies suggest that it may soon be time to get people back to work. Health experts overwhelming say it is premature, at least in the next month.

"You've got to be realistic and you've got to understand that you don't make the timeline. The virus makes the timeline," said Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases.

Even if the president did reopen the economy (and governors complied - that's a big question mark), economists are realistic in saying confidence to resume business as usual would still be shaky at best while COVID-19 is still peaking.

Economic experts also concede that until a vaccine is created or deaths-infectious rates drop dramatically -- open for business or not -- people will not suddenly be the consumers they were spending at the rates prior to the COVID-19 outbreak. Bouncing back will take time.

No one really knows how or when the double-pronged crisis will unfold. What's certain is the economy is in a deep recession; and Americans are needing all the help they can get to make it through the storm.



we work with) have temporarily closed their practice.

"The estimated gross drop of revenues is significant and profound, about 75-80 percent from norms. It's like a chain reaction. Most people are out of work. We have less patients," said Fuentes.

In hopes of surviving and making it through the crisis, many employers have furloughed employees (temporarily place their position on hold without pay) or reduced employees' work hours.

OptimalCare Rehab, LLC has resorted to both furloughing and reducing work hours for some of their employees. "Our employees can go back to work if business will be back on track. However, we expect it to be gradual," said Fuentes.

Asked how the public could help her business, she said "safety to our patients with this COVID-19 pandemic is our concern. The public can help our business by continuing to visit our facility. They can feel safe with all the safety measures (we're taking)."

She said staff wear masks and gloves at all times, wash and sanitize their hands, as well as sanitize all equipment and door knobs. She said patients and staff who could be sick are sent home as a precaution.

For Jeoffrey and Cheryl One, Structural Hawaii, Inc., a

structural & civil engineering design and consultation firm, and architectural drafting firm, Cheryl said they have experienced a few projects put on hold due to homeowners whose jobs are now uncertain. On the plus side, she said new projects have also come through because clients have been taking advantage of the low interest rate.

18. 8: 00 9:00

"We cannot ascertain at this point whether there is a significant drop in revenue, but thankfully we are holding steady at the moment. It can certainly change any day. We will see the effects of COVID-19 probably in this next month," said Cheryl.

For their second business, Keiki Care Center of Hawaii, Inc. a preschool education center located in Pearl City, it is temporarily closed due to the State DOE's directive of closing schools. But they plan to reopen as soon as Gov. David Ige gives the all-clear.

She said they are not collecting tuition during the closure and have applied for the SBA loan assistance programs. "We do still have to cover employee health insurance, rent, other insurances, etc. We bank with First Hawaiian Bank, and I am grateful that they were on the ball with rolling out the PPP loan program on April 3."

On the status of their third business Structural Builders, Hawaii, Inc. a general contracting firm, Cheryl said, "We thankfully just obtained a new bonded-project in March, and

(continue on page 5)

### **Economy on life support**

It doesn't come as a surprise that ordering residents to stay at home, avoid most non-essential business activity, restaurants, theaters, shopping (apart from groceries), traveling, most in-person services, and gatherings of groups 10 or more would dramatically hurt the economy and jobs.

In the latest jobs report (week ending March 28) an unheard-of figure of 6.6 million Americans filed for unemployment benefits, putting the total number of people out of work

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in just three weeks to more than 16 million.

For perspective, that is about 13-15 percent of the total workforce in the U.S. Just last year, unemployment rates fluctuated under the 5 percent range. It took only a few weeks of the pandemic to spike numbers of jobs loses to what normally would take years in a regular recession.

Since the federal government has been collecting data of the unemployed, the worst week in the history came in a week in September 1982 when 680,000 people claimed unemployment benefits. A close second came during the last recession a week in March 2009 with 665,000 new claims. Today's unemployment numbers crushed all previous records.

Economists say the situation could get bleaker with unemployment rising as high as 30 percent. Historically, Labor Department figures of the unemployed is underreported of what actual jobs losses are. In theory, economists' worst case prediction is that 3 out of every 10 Americans could be out of work by the end of the year.

But a new poll by Pew Research Center suggests that the country may already be there. The poll found a third of Americans have someone in their household who's been laid off or lost pay.

The latest unemployment figures from the Hawaii State Department of Labor and Industrial Relations show 53,111 Hawaii residents filed unemployment claims for the week ending in April 4.

For small-to medium and companies operating during this stay-at home period, many have reported drops in revenues and activity.

Vilma Fuentes, Doctor of Physical Therapy and Manager of OptimalCare Rehab, LLC, an outpatient physical therapy and therapeutic massage company, said their business has seen a decrease in patients by 50-80 percent that started in February. She said this month, April, has been the worst.

"Patients have been cancelling their appointments due to fear of going out. There has been a decrease in patients' referrals from doctors' offices. Some referring physicians (that

Cudiamat, owners of three businesses in Hawaii, the impact of the COVID-19 crisis has been a mixed bag. For their company

### **COVER STORY**

(from page 4)

that is keeping our crew steadily busy, and should hold us for a few months until completion."

For Keiki Care Center, all of their employees are furloughed. "For Structural Builders Hawaii, Inc., construction was deemed essential, so it is still thankfully ongoing. And for Structural Hawaii, Inc., we have identified which employees are 'essential' and have offered all employees the opportunity to adjust their schedule if they are not comfortable working full-time at this time. We definitely do not intend to lay off any workers."

Cheryl said she hopes the public understands the important role small businesses play in the economy and that they have empathy for small businesses. "If we disappear, then many jobs will disappear."

Melody Calisay, Ph.D. is the President and CEO of East West Marketing, Inc., an importer, and wholesaler of Filipino dry food products. Her businesses is doing well during this time. "Food is always considered the last frontier. This is a basic need that people will buy in time of crisis. We did good in the past two months, people are panic buying and storing food amid this COVID-19 pandemic."

She did not have to furlough any employees. Calisay said she will probably seek help from the stimulus package because she isn't sure what will happen in the next month or so. She said she likes what government is doing by providing loans to small businesses to help pay for rent, payroll, and continued operations. Calisay encourages the community to support local businesses.

### **Economic Growth Lowered**

No one knows how impactful COVID-19 will be on small businesses in the long-term, or how many will go under.

Already, the University of Hawai'I Economic Research Organization (UHERO) has sharply lowered its economic forecast for the state. A UHERO report on the COVID-19 crisis states while new infections have slowed markedly in Asia, the spreading of the virus across the entire U.S. suggests a more prolonged outbreak is in the cards. "And the longer the virus spreads, the greater the human and economic toll."

Business, Economic Development and Tourism (DBEDT) also lowered Hawaii's economic growth forecast for 2020 to 0.5 percent from the 1.2 percent projected in the 4th quarter of 2019. The forecast was revised downward mainly because of the COVID-19 outbreak.

"We face a globally driven COVID-19 event that is dynamically evolving," said DBEDT Director Mike McCartney. "We remain focused on controlling and preventing the spread in our state. At the same time we are planning for a recovery action plan when Hawaii's communities are ready and the visitors in our major markets are ready to visit. Volatility in the market will likely continue until COVID-19 becomes controlled."

On when the economy could begin to stabilize, Hawaii economist Paul Brewbaker said during a joint presentation to three REALTOR® associations on two islands, "If we get the daily (COVID-19) case counts down, we implement contact tracing, isolation, and quarantine, maybe in a year -- maybe in 18 months -- we'll reach the day when a version of herd immunity or a vaccine becomes available, But my own impression is that the state is not leading as much as following, and not following fast enough."

### **Efforts to soften the impact** of the economic fallout

Federal The Reserve stepped in once again, announcing new and expanded programs that could pump \$2.3 trillion into the economy. Wall Street reacted positively, holding steady, even as it already lost all the gains from years of a bullish market.

But investor confidence in the economy more significantly came from President Donald Trump and Congress' passage of three stimulus bills (called three phases of coronavirus assistance): the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020, the Families First Coronavirus Response Act, and most recent, the Coronavirus Aid, Relief and Economic Security Act or the CARES Act.

### PHASE 1, Coronavirus Preparedness and Response **Supplemental Appropriations** Act, 2020

CPRSAA is the first coro-The state's Department of navirus relief effort that allocates \$8.3 billion mostly to go towards coronavirus vaccine research and development. It also includes funding for medical supplies, health-care preparedness and community health cen-

### PHASE 2, The Families First Coronavirus Response

FFCRA is the second stimulus bill which primarily focuses on helping American families and workers. \$104 billion will

- paid sick leave for workers to deal with COVID-related emergencies (e.g. to self-quarantine or to get tested for the virus, or to care for an individual in self-quarantine from the
- family medical leave available to an employee who needs to care for a child whose school or place of care is closed because of COVID-19
- unemployment benefits for individuals directly affected by COVID-19. It also expands eligibility of unemployment benefits . related to COVID-19.
- free coronavirus testing

#### PHASE 3, The Coronavirus Aid, Relief and Economic **Security Act or CARES ACT**

The CARES Act allocates \$2 trillion, the largest-ever economic stimulus package in U.S. history, amounting to 10 percent of the total U.S. GDP.

The CARES Act is far more comprehensive than the two previous bills. Its main purpose is to revive the economy and stave off a deeper recession. It allocates funds for big business, small business, as well as expanding areas to groups addressed in the first two bills: individuals, state and local governments, and public health.

A few of the big ticket items in the bill includes:

\$260 billion increase in unemployment benefit spending. It enhances and expands unemployment benefits from what was covered in the previous Families First Coronavirus Response Act. For a first time, independent contractors/freelance workers/gig workers can now qualify to receive unemployment. It also adds

"We face a globally driven COVID-19 event that is dynamically evolving. We remain focused on controlling and preventing the spread in our state. At the same time we are planning for a recovery action plan when Hawaii's communities are ready and the visitors in our major markets are ready to visit. Volatility in the market will likely continue until COVID-19 becomes controlled."

> —MIKE McCartney, **DBEDT Director**

\$600 per week for four months to qualified applicants.

- 370 billion in loans to small businesses. These are for businesses with 500 or fewer employees. Loan money used to maintain payroll can be forgiven if workers stay employed through the end of June.
- 500 billion in lending programs for big businesses, cities and states. Money from the loan cannot be used to stock buybacks or CEO pay raises.
- 180 billion for public health to include 100 billion to hospitals, \$4.3 billion to the CDC, \$80 million to the FDA to expedite approval of new drugs.

### **Stimulus Check**

One of the main features of the CARES Act is direct payment of \$1,200 for each qualified adult and \$500 to each child. An adult earning less than \$75,000 a year will receive the full amount of \$1,200. Higher income earners will get less, or not be qualified.

An estimated 93.6 percent of tax filers will have a rebate, according to Garret Watson, senior policy analyst at the Tax Foundation. "And this works out to approximately 140 million households," he said.

As of the second week of April, the Treasury Department has started to process individual direct payments. Americans who have direct deposit from their 2018 and 2019 tax returns should be among the first to receive payments. Paper checks will take longer to disburse.

The Treasury will also launch a new app called "Get My Payment" to expedite payments to Americans without direct deposit.

The IRS will soon release an online tool on its website that (continue on page 15)



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### **AS I SEE IT**

By Elpidio R. Estioko



ost people all over the world are in the state of panic! Tissues are disappearing in

super markets, canned goods are being sold in volume and display rooms and storage of sacks of rice are empty. They are gone! Reason? Corona virus short-named COVID-19 the culprit!

Business Insider reported that more than 82% of all Americans have been ordered to stay at home in 33 states numbering to about 270 million people. This is the move to avoid the spread of COVID-19 and should not be construed to scare the people.

And... lately, US President Donald Trump, in a report by Reuters, warned Americans of a "painful" two weeks ahead in fighting the coronavirus, with a mounting US death toll that could stretch into the hundreds of thousands even with strict social measures.

While the President is being truthful of the facts, we can't avoid making people panic more than they are. But... why are people panick-

### **COVID-19: What to Do in Times of Crisis**

ing? Instead of putting up a more aggressive fight, people become restless and hopeless which leads to uncertainties and fear. Perhaps this is human nature, but we need to understand that life must go on! Do we really need to panic? Of course not... but this is easier said than done. Something must be done, not panic because we need to survive. We need to live and defeat the enemy! If we are panicky, we will not win the war, right!

New York Times further reported that "Two of the top doctors advising President Trump on COVID-19 warned that as many as 200,000 Americans could die during the outbreak, even with much of the country already under stay-at home orders and practicing social distancing. This is also very alarming, so we need to really be cautious of what we do and follow the government guidelines in combating the virus.

Dr. Anthony S. Fauci, director of the National Institute of Allergy and Infectious Diseases and the nation's leading infectious disease expert, said during a White House briefing that "the grim projection was based on scientific modeling, and the forecasts had convinced Mr. Trump to extend social distancing guidelines through the end of April. I think it's entirely conceivable that if we do not mitigate to the extent that we're trying to do that you could reach that

Also, Dr. Deborah L. Birx, the lead coordinator of the White House's corona virus task force, said "that without any precautionary measures, the same models projected that 1.6 million to 2.2 million Americans could die from complications of the virus." These are grim realities that we need to understand and not panic about but instead, will give us more resolve to fight the virus!

My friend former Philippine journalist and now a resident of Barrow, Alaska Romy Morales by-lined an article in FB titled: "A different kind of war with an invisible enemy" wrote – "The world now is at war. Many have already died and probably many more are going to die. People are fighting back not with high-powered guns, missiles, or even with nuclear weapons. It is fighting with a firm resolve to contain it, curb it, at least or wipe it out, the most."

Morales was right! We can't fight the enemy with panic and fear! We need "a firm resolve to contain it, curb it, at least or wipe it out, the most."

So, what do we do in times

of crisis? Don't panic... be firm and resilient in fighting the enemy!

Of course we need to strengthen our faith in God! Now everybody has a chance to pray as a family: "A family that prays together stays together," so the saying goes. Due to present uncertainty caused by the pandemic, our Almighty God, as usual, is the final recourse for us to be able to survive and battle the worsening situation. We place our trust in Him!

Jesus is calling us... but we need to believe and have faith in Him. As Pope Francis Urbi said: "Faith begins when we realize we are in need of salvation. We are not self-sufficient, by ourselves we flounder. Let's invite Jesus into the boats of our lives and hand over our fears to Him so He can conquer them. With Him on board, there will be no shipwreck. Because this is God's strength: turning to good everything that happens to us, even the bad things. He brings serenity into our storms, because with God... Life Never Dies."

Also, we need to stay home as instructed to avoid contamination and spread of the virus, especially to the senior citizens who are more

susceptible to the virus. It was reported that staying at home is the best medicine to combat the virus. I agree!

This is the face of the situation: increasing number of people affected every day, deaths from moment to moment, fear, anxiety, hope, fake news, misinformation, and uncertainty! Let's look at the other side of the coin, a flipflop of the situation and count our blessings. There must be a light at the end of the tunnel!

This is a chance for family bonding! Most Americans, including people around the world, didn't have the chance to mingle with their family on a daily basis during ordinary times, especially those who have double or triple jobs to earn a living. Now they have the opportunity to be with their family... looking for each other's back. They are facing the pandemic as a family; together they are fighting an invisible enemy and surviving with a positive note.

Don't panic, be calm! Together we fight and win the war! ■

ELPIDIO R. ESTIOKO was a veteran journalist in the Philippines and an award-winning journalist here in the US. For feedbacks, comments... please email the author at estiokoelpidio@gmail.com).

### **NEWS FEATURE**

### **Paid Leave Under Families First Coronavirus Response Act**

**By Jim Bea Sampaga** 



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REHAB SERVICES

ith

busigreatly affected due to COVID-19

pandemic, some employees are given reduced hours or even laid-off while others have no choice but to work as the country declares stayat-home orders to help reduce the transmission of the virus.

According to the US Department of Labor (DOL) website, the Families First

Coronavirus Response Act the virus, while at the same (FFCRA) will require employers to "provide their employees with paid sick leave or expanded family and medical leave for specified reasons related to COVID-19."

The FFCRA will reimburse businesses that have fewer than 500 employees for the cost of providing paid sick leave to its employees during the pandemic.

The legislation ensures that "workers are not forced to choose between their paychecks and the public health measures needed to combat

time reimbursing businesses."

According to the DOL website, the FFCRA requires employers to provide the following to their employees:

- Two weeks of paid sick leave at the employee's regular pay rate when the employee is unable to work because the employee is quarantined and/or experiencing COVID-19 symptoms
- Two weeks of paid sick leave at two-thirds of the employee's regular

(continue on page 7)

### **CANDID PERSPECTIVES**

**By Emil Guillermo** 

onald Trump says it's voluntary. But if you want to fight the virus effectively, mask up my friend. Just saw a test of the spitules that come out of your mouth and nose during a Mt. Taal like sneeze. It's gross. And if you're asymptomatic and seem fine, you may be unwittingly spreading disease.

So mask up. You want to make it past Palm Sunday to Easter and beyond.

Got to make it past this period which the surgeon general describes as "our Pearl Harbor moment."

Our sabre and shield against the pandemic will always be aggressive hand washing and social distancing. Keep at it. Wash up and have a Zoom meeting. Wash up after even.

But since the curve has not flattened, and we don't really know how many are infected (not until we test nearly everyone), we have arrived at another milestone in our covid battle: universal mask wearing.

Not like a masquerade ball mask. More therapeutic than that. (But if you're having a hard time with masks, go ahead and think about Kubrick's "Eyes Wide Shut." Make it fun).

Of course, we have a problem with masks in America.

Even as an ABA (Asian born in America), or specifically an American Filipino, I don't relate so easily. Masks? Wear the Mask Even If Trump Won't-Here's Why

Americans, like the one House

Batman has one. So do bank robbers. And the Klan. Oh, yes the Klan. The white hoodie.

In America, we like transparency. As my wife from Missouri likes to say, "Show me." Everyone else says, let's see your face.

For some reason, that's in the American DNA. We don't trust what's hidden. Unless it's the terms of service for a new app or software. Who reads that? In technology we trust, blindly.

Everything else, it's show me. In big letters.

The mask calculation is even more culturally complicated when we ask, who else wears masks in public, besides superheroes?

Asians in Asia, of course, and recent Asian immigrants who live in densely populated areas. Among Asian Americans, the mask is no big deal, commonplace and often necessary.

In places like Hong Kong, Beijing, and Tokyo—where social distance often requires a new zip code—masks are the accepted norm. At first glance, it might look like mask wearers want to protect themselves.

But really, it's done more out of concern for you, or anyone else in tight quarters, who may be within six feet.

"It's a matter of respect," said a woman I call "Akira," to protect her privacy.

When Trump's "Chinese Virus" talk infected America, Akira found herself attacked by someone she described as a "white construction worker-type in his 40s," who saw Akira's mask as the target on her face.

He was reacting to his notion of Asian stereotypes and his own xenophobia. The man rushed Akira, a Japanese American, like it was football practice, and pushed her to the ground.

Akira broke her finger, but mostly, she was in shock. She's just one of more than 1,000 cases that have been reported to a website collecting data of violent incidents against Asian Americans in the last ten days of the pandemic. Researchers tell me the list grows by 100 cases each day.

Seventy cases or 7 percent involved Filipino victims.

Overall nearly 20 percent were triggered by the mask alone. To many a symbol of Asianness

Akira, born in Japan, a New Yorker for nearly 30 years, is recovering now. She's become a statistic—an Asian American attacked during the pandemic. But she doesn't believe she's the day's most important stat—a person infected by the virus.

Still, she told me today that she continues to wear the mask in public out of respect for others.

"Here in the U.S, nobody respects others. They are all for themselves," she told me. "That is a problem."

### **Masked Americans**

So the one way to get all Americans to start wearing masks? Tell them it's about selfishly saving themselves.

Asians see it more as a sign of being a good citizen, sick or not, keeping their droplets to themselves, so as not to infect anyone else.

(NEWS FEATURE: Paid Leave....from page 6)

pay rate when the employee is unable to work because they need to care for an individual subject to quarantine or care for a child who's out of school because of school closures

 Up to additional 10 weeks of paid expanded family and medical leave at two-thirds of the employee's regular pay rate where an employee is unable to work because they need to care for a child whose school is closed because of COVID-19

Employees with reduced work hours will not be eligible to receive paid sick leave or expanded family leave. However, they can apply for unemployment insurance

benefits.

Every dollar spent by the employer on the required paid leave (and the cost of the employer's health insurance premiums during leave) will be 100% covered by a dollar-for-dollar refundable tax credit available to the employer.

For more information about FFCRA, visit dol.gov/agencies/whd/pandemic ■

Americans, like the one who attacked Akira, see being forced to wear a mask like being forced to wear seat belts. It's an affront to liberty.

It may also be seen as a debilitating symbol of someone weak or ill. America the sick. Not for the brave, proud, mask-less Americans!

But now officials in the most Asian places in America, like Los Angeles and Honolulu, have called for mask wearing as a public health matter.

If the CDC and Donald Trump say yes to masks, even simple cloth ones, we'll have to see how the majority of Americans adjusts.

"It's going to take education and communication" said Prof. Yuen Kwok-Yung, a microbiologist, physician and Chair of Infectious Diseases at Hong Kong University.

Sreenivasan's daily Covid-19 periscope broadcast, Prof. Yung called wearing a mask a "social duty" that could help cut the spread of the virus. But he said in America, it may require training, perhaps even some persuasive advertising, before forcing Americans by some "draconian measure" to wear masks.

Americans want to do things by choice, but there's no constitutional right to go mask free.

Yung said the science definitely justifies the mask.

He said we know that asymptomatic people can spread the disease unknowingly through their saliva, through microscopic droplets big and small in their breath. They infect the air, surfaces, and other people around them. A mask would prevent all that and protect others.

Mind you, we're not talking about the heavy duty N-95 masks—the ones that must go to the nurses and docs on the front lines—but cloth or regular surgical masks. Critics do warn about masks giving a false sense of security, since masks don't cover the eyes or are sometimes ill-fitting.

But as the professor knows, the science isn't masked. It's there.

Go ahead, put it on your face. It can stop the spread. It's not just an Asian thing.

Akira, undaunted by being attacked, was walking around with her mask today, like a good citizen and without fear.

"More people in New York are wearing them," she said. And maybe across America soon.

Her attacker may have been irrational, but wearing a mask is not. ■

**EMIL GUILLERMO** is a veteran journalist and commentator. He was a member of the Honolulu Advertiser editorial board. Listen to him on Apple Podcasts. Twitter @ emilamok.





### Mahilig ako sa mga numero! Tungkol ito sa 2020 Census at pondong pampubliko.

'Di ako accountant, pero gustung-gusto ko 'pag nag-a-add up ang mga numero.

Kada sampung taon, ine-aim ng census na makakuha ng tama at tumpak na bilang ng lahat ng naninirahan sa United States. Mas tumpak ang data, mas maraming oportunidad na makakatanggap ng pondong pampubliko ang ating komunidad. Iyon ay higit 675 bilyong dolyar kada taon para sa pondong pampubliko para sa mga schools, health clinics at roads.

Magre-respond ako! Kayo? Kapag sama-sama, mas may lakas, mas may pwersa!

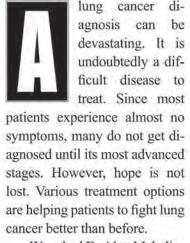
Kumpletuhin ang census sa

2020CENSUS.GOV/tl

Bigyang hugis ang inyong kinabukasan MAGSIMULA DITO> Census 2020 This content is supported by AstraZeneca.

### Stage 4 Lung Cancer Treatment – Hope for longer survival

### Treat your lung cancer based on complete diagnosis



We asked Dr Alex Makalinao, a renowned oncologist from California Hematology Oncology Medical Group, to learn about the advancements of lung cancer testing and treatment and the hope for lung cancer patients and their families.

### Can you explain how biomarker testing has affected stage 4 lung cancer patients and their treatment?

If you are diagnosed with

stage 4 lung cancer, learning about cancer's biomarkers is an important next step after an initial diagnosis. Biomarker testing looks for biological changes in genes or proteins, such as EGFR or ALK, to find out if a mutation in your genes or a particular protein may be causing your cancer to grow and spread. Doctors utilize the results gathered from testing biomarkers to evaluate your treatment options, which may include a targeted therapy. Patients diagnosed with stage 4 non-small cell lung cancer (NSCLC) may test positive for molecular and immune biomarkers at the same time. Molecular biomarkers include EGFR, ALK, BRAF, MET, ROS1, and NTRK, and immune biomarkers include PD-L1.

EGFR is a biomarker commonly found among Asian nonsmall cell lung cancer patients. Nearly 50% of Asian people with stage 4 lung adenocarcinoma (a subtype of non-small cell lung cancer) have cancer that tests positive for an EGFR biomarker. Patients with stage 4 EGFR mutation positive non-small cell lung cancer may be treated with a targeted therapy.

### What should patients know about biomarker testing and what questions should they ask their doctor?

Biomarker testing goes by many names: mutation testing, genetic testing, molecular testing, and genomic testing. Doctors may suggest biomarker testing to confirm whether you have a treatable driver mutation. There are two ways to test for biomarkers — a tissue test or a blood test. Both may be necessary to receive a full diagnosis of your cancer.

For instance, if your stage 4 NSCLC tests positive for an



EGFR biomarker, the cancer may be treated with EGFR tyrosine kinase inhibitor, a type of targeted therapy. These treatments are designed to target mutated EGFR genes, the driver that causes lung cancer to grow and spread. As a result, targeted therapies may give patients with stage 4 EGFR-mutation positive NSCLC more time without cancer growing or spreading.

### What advice would you give to a patient who has just been diagnosed with lung cancer?

Lung cancer treatment will be a long journey that requires endurance and patience. You may want to start the treatment immediately after diagnosis. However, when it comes to treating stage 4 lung cancer, I cannot emphasize enough the importance of biomarker testing if feasible, because biomarkers play a key role in treatment selection. A complete diagnosis for stage 4 lung cancer includes biomarker testing. Any patient with stage 4 lung cancer should ask their doctor if their tumor has been tested for biomarkers and, if so, what kind of biomarkers they may have.

If you are interested in learning more about lung cancer and its treatment options, you can visit www.TreatYourLungCancer, com/fil

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## Alamin kung bakit mas maraming tao sa Hawaii ang pumipili sa mga UnitedHealthcare Dual Plans.



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Datos sa mga miyembro ng Hawaii Dual ayon sa CMS noong 2/1/2020.

Nakaseguro ang mga plano sa pamamagitan ng UnitedHealthcare Insurance Company o isa sa mga kaakibat na kompanya nito, isang organisasyon ng Medicare Advantage na may kontrata sa Medicare at kontrata sa Programang Medicaid ng Estado. Ang pagpapatala sa plano ay depende sa pagka-renew ng kontrata ng plano sa Medicare.

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### **OPEN FORUM**

### This Is No Time for a Minimum-Wage Hike

By Keli'i Akina

f we want Hawaii's economy to recover from the coronavirus shutdown, we have to put aside any possibility of a minimum-wage hike.

As I write this, Hawaii is on Day Six of a statewide lockdown in response to the COVID-19 pandemic. Hotels have closed, restaurants are empty, rental cars are sitting idle in the Aloha Stadium parking lot, airline flights have been canceled, and almost 100,000 thousand laid-off workers are swamping the state unemployment office.

With time, our economy will recover. But when the conversation turns to helping those who are struggling, it's inevitable that a minimum-wage hike will be proposed.

Before the shutdown, House Bill 2541 was sailing through the Hawaii Legislature. In the name of helping working families, it proposed gradually increasing the state minimum wage to \$13 an hour by 2024.

Unfortunately, few policy-makers have stopped to look at the data on minimum-wage hikes. At best, they simply redistribute the wealth among low-income workers; at worst, they result in lower incomes as employers cut hours and families have to deal with higher costs generated by the wage hike. In other words, minimum-wage hikes are a poor tool for helping low-income workers.

A 2018 University of Washington study found that increasing Seattle's minimum wage to \$13 an hour resulted in the loss of about 5,000 jobs. Because job hours were cut by about 9%, the remaining workers averaged a pay cut of about \$125 a month.

Sam Sonson, a retired Filipino businessman in Hawaii, told me a minimum wage hike is "the worst thing that can happen" for local businesses.

"The thing they don't tell you about the minimum wage," he said, "is that it affects the small business so badly. Some of them are hanging on a cliff, and they'll just go bankrupt. And the ones who are doing OK, they just cut down the hours of their workers or lay them off."

Minimum-wage hikes can be especially bad for the restaurant industry. A 2017 study of restaurant closings in San Francisco found that increasing the minimum wage to \$13 an hour led to the death of

many mid-range restaurants. For every dollar the minimum wage went up, there was a 4 to 10% increase in the likelihood of restaurant closings.

There is never a good time to raise the minimum wage, but when businesses are trying to recover from a crisis, a wage increase can be catastrophic.

As said Jacob Vigdor said at a March 24 webinar sponsored by the Grassroot Institute of Hawaii, "In a world where everybody has a job, everybody wants a higher wage. In a world where nobody has a job, the first thing that you want is a job."

Vigdor, a professor at the University of Washington, directed the team that studied the effects of Seattle's minimum-wage increase. Asked about Hawaii, he said we don't know how long it will take for tourism — Hawaii's largest

economic sector — to recover.

"When the minimum wage is higher and you're running a business that all of a sudden takes a big hit ... your need to pare back your workforce is a lot stronger," he said.

Eventually Hawaii's lock-down will end, but our policy-makers are going to be under a lot of pressure to help those who lost their jobs and wages. Some will view increasing the minimum wage as an easy quick fix. Instead, it will harm the ability of businesses to employ workers and increase Hawaii's already-high cost of living for everyone.

If state policymakers want to revitalize our economy, they need to ease the burdens on local businesses, not add to them. This is no time for a minimum-wage hike.

**KELI'I AKINA, Ph.D.**, is president and CEO of the Grassroot Institute of Hawaii.

### **HAWAII-FILIPINO NEWS**

### Dr. Buenconsejo-Lum Appointed Associate Dean for Academic Affairs at JABSOM Director of Graduate Medical Education providing experience.

ee Buenconsejo-Lum, M.D., FAAFP is now Associate Dean for Academic Affairs at the John A. Burns School of Medicine (JABSOM), University of Hawaii at Manoa.

Prior to her appointment, Dr. Buenconsejo-Lum served as Interim Associate Dean for Academic Affairs, a position she has held since Oct. 2019. Her responsibilities include overseeing the continuum of JAB-SOM academic programs and key academic support resources that work toward producing and maintaining the physician workforce for the State.



Educational programs within the scope of the Associate Dean for Academic Affairs include the Doctor of Medicine (MD); Master of Science (MS) degree programs in Quantitative Health Sciences and Communication Sciences

es & Disorders; a Bachelor of Science (BS) degree in Medical Terminology, and the 'Imi Ho'ōla Post-Baccalaureate Program.

As the Associate Dean for Academic Affairs, Dr. Buenconsejo-Lum works closely to strengthen partnerships with health system partners, insurers, community, and UH stakeholders to ensure JAB-SOM graduates and faculty are prepared to meet the needs of a rapidly changing health-care environment.

Dr. Buenconsejo-Lum continues in her role as the Designated Institutional Official and

Director of Graduate Medical Education, providing oversight of JABSOM's 19 residency and fellowship programs.

She is a Professor of Family Medicine and Community Health and continues in her roles as the Principal Investigator for the Pacific Regional Central Cancer Registry and co-PI for the Pacific Regional Comprehensive Cancer Control Program.

Dr. Buenconsejo-Lum was born and raised on O'ahu and is a Leilehua High School graduate. She attended Stanford University for her Bachelor's of Science in Biology, graduated from JABSOM in 1994, and completed the UH Family Medicine Residency Program in 1997. She joined the JABSOM faculty in 1997.

### Hirono Calls on Senate to Support Local Journalism During COVID-19 Pandemic

enator Mazie K. Hirono joined 17 other senators to call for funding to support local journalists and media in future COVID-19 relief packages.

"Local news is in a state of crisis that has only been exacerbated by the COVID-19 pandemic. For over a decade, there has been a steady succession of local outlets closing down, reporters being laid off, production schedules cut, and resources tightened as the growth of social media and technology platforms has concentrated critical advertising revenue in the hands of a few," the Senators wrote in an open letter to Senate leadership.

"The current public health crisis has made the already vital role of local news even more critical," the Senators continued. "Some of the most important guidance for families and businesses during this crisis has been highly localized. Local journalism has been providing communities answers to critical questions, including information on where to get locally tested, hospital capacity, road closures, essential business hours of operation, and shelter-in-place orders. During this unprecedented public health crisis, people need to have access to their trusted local news outlets for this reliable and sometimes life-saving information."



### COMMUNITY HEALTH & WELLNESS 2020



By Melissa Martin, Ph.D.

BD, short for cannabidiol, is a non-psychotropic component of cannabis and hemp.

Folks, CBD oil is not a magic potion or miracle lotion. It's not the Holy Grail with healing powers. CDB is not a cure for 21st century anxiety; an anti-jittery juice. It's not the cosmetic fountain of youth. Is CBD the flavor of the month? The irrational fanfare is mind-boggling. Buyer beware—before the green stuff

### **CBD**, The Real Deal or Snake Oil

in your wallet magically disappears. Just follow the money trail. Who is getting rich off of crazed consumers? Who is conning customers? Will the nationwide boom end up being a bust? Is the hemp hype a trend that will eventually end?

CBD is not permitted in foods and beverages. Read that again. So, CBD infused honey, chocolate bars, gummies, teas, syrups, and pet treats are not approved by the FDA. Capsules, oils, tonics, salves, lotions, creams, and bath salts have not been evaluated or approved by the FDA. Read that again.

Section 12619 of the Farm Bill removes hemp-derived products from its Schedule I status under the Controlled Substances Act, but the legislation does not legalize CBD



generally. Read that again.

The FDA approved a cannabidiol-based drug called Epidiolex as a treatment for severe forms of epilepsy, representing the first government-sanctioned medical use for CBD. The federal government categorizes CBD products other than Epidiolex as a Schedule 1 drug, like heroin, according to the Drug Enforcement Administration.

There are many unanswered questions about CBD products: How much CBD is safe to consume in a day?

How does it vary depending on what form it's taken? Are there drug interactions that need to be monitored? What are the impacts to special populations, like children, the elderly, pregnant or lactating women and pets? What are the risks of long-term exposure? What are the side effects? Is it safe? What happens if you buy a bogus batch? Will CBD help one ailment, but cause another? Where's the science? The hemp plant has been on earth for myriad years, but so has poison ivy and hemlock.

The FDA put out a press release about CBD on March 05, 2020. "Over the past year, the U.S. Food and Drug Administration has embarked on a comprehensive evaluation of cannabidiol (CBD) prod-

ucts, with a focus on educating the public about the risks and unknowns of these products, gathering the science needed to better understand both these safety concerns and potential benefits to inform our regulatory approach, as well as taking steps when necessary to address products that violate the law in ways that raise a variety of public health concerns."

Yes, I am a CBD skeptic. Show me the research. Show me the studies. Show me the clinical evidence—not anecdotal stories. If CBD has a medicinal pain management purpose, I want to know. Show me the research results, instead of the money trail. ■

MELISSA MARTIN, Ph.D., is an author, columnist, educator, and therapist. She lives in Ohio. www. melissamartinchildrensauthor.com.

### PERSONAL REFLECTIONS

### A TODDLER'S LETTER FOR THE FRONTLINERS

#### **By Seneca Moraleda-Puguan**



y daughter, Callie, knows about the coronavirus that is why she could not play with

her friends outside the house. She had been asking us if she could to attend Kids Church on Sundays and go to a kids café on weekdays but all she could do for now is to play with her little brother and entertain herself by watching Peppa Pig, playing Lego, painting and coloring, and reading her books. She calls her friends and cousins online so she can share her stories. She also loves making cards for people on the frontlines and praying for them before she goes to sleep.

Here's her simple letter for the people working hard to fight the virus, heal those affected, serve the people and maintain the security so she could be safe.

Dear Frontliners.

Hi! My name is Callie. I am four years old and I live in South Korea with my mommy, daddy and little brother, Yohan. My parents said that there is a virus outside so we have to stay home. I really want to play outside with my friends but I will have to wait a little longer. Every night, I ask Jesus for so many things. One of those things is to pray for the frontliners- for the leaders, doctors, nurses, firefighters, policemen, and shopkeepers. I even pray for the animals, Peppa Pig and the mermaids.

For the leaders, it must be very hard to lead now. There are so many decisions you have to make. I pray for God to make you wise so you will help the people that you lead well. I also pray for God to protect you so you won't get sick because your people need you now.

To all the doctors, nurses and those who work in hospitals around the world, Yohan and I are very proud of you. Mommy said your job is very dangerous because you might get infected. Our family is asking God every day to protect all of you so you won't get sick. There are many sick people right now and they need you. Your family needs you too. Maybe some of you have children waiting for you at home,



I'm sure they miss hugging and kissing you like I do when daddy goes to work. When he comes home, he asks us to wait because he needs to clean himself first. It must be very hard for you and your family. Thank you for healing the sick. May God bless all of you.

To all the policemen, firefighters, military people guarding the streets, thank you, too! You are all so brave. Thank you for making sure that the people obey the rules so the virus won't spread.

To those working in shops like groceries and pharmacies, thank you. While the rest of the world is staying home, you need to work so we can still buy the things we need and life can continue.

There are so many people working together to fight this virus. My brother, Yohan and I keep you in our thoughts. Yes, all we think of is playing but before we sleep, mommy and daddy always remind us to pray for you because you are all heroes like my favorite PJ Masks. I also tell God to make the coronavirus go away so it won't hurt people anymore. I know that Jesus hears my prayers.

Daddy said the time will come that life will be back to normal. We can go out and we can visit the zoo, play with my friends, eat spaghetti in a restaurant and so much more! When that time comes, I will thank God and ask him to bless all of you who worked hard to fight the virus.

It might take a while. Mommy said we don't know yet when this will end. So please hang in there. Keep fighting. We know it's hard. We are here for you,

praying and cheering you on! Like they always say here in Korea, aja aja huwaiting!

We will continue to wash our hands, cover our mouth when coughing and stay home so you can all go home soon.

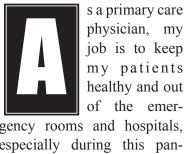
From the bottom of my heart, THANK YOU VERY MUCH FRONTLINERS!

Love, Callie

If you are reading this and you are a frontliner, thank you for your service. Thank you for laying down your life for another, for sacrificing your time with your family just so someone can go back healthy to his or her family. Thank you for enduring the lack of protective gears, the pain of losing colleagues and patients, for simply being selfless. Saying 'Thank you' will never be enough to express our gratitude to every one of you who are out in the field. Our family will continue to stay home as much as we can, give because all of you have been generous, and pray for all of you knowing that it is the most powerful weapon that we have against this virus. We are proud of you, our hero! ■

### LIFE ON THE FRONTLINES-PRIMARY CARE

By Lyla Cachola Prather, M.D.



gency rooms and hospitals, especially during this pandemic. We are a patient's first resource, and a crucial step to helping maintain balance in the medical system. The emergency room should be a patient's last resort except in a true emergency, and especially during this COVID-19 pandemic.

Many primary care practices have now implemented state-of-the-art technology to help keep their patients safe.

Telemedicine (or online consultation) allows me, as a physician, to come into the patient's home so they don't have to risk unnecessary exposure. This is especially important for people who are at high risk of developing serious complications if contracting COVID-19. These include patients who have underlying pulmonary conditions like asthma, COPD/emphysema,

or who are smokers, those that are immunocompromised due to steroid use, medications for cancer treatment or organ transplants, or patients on medications to control autoimmune conditions like rheumatoid arthritis or lupus, and those that have chronic kidney disease, diabetes, or heart disease.

The list encompasses over 75% of the patients in my practice, so it has been very important to me to utilize telemedicine to be able to serve my patients, but in a way that doesn't increase their risk of contracting COVID-19.

In a time when it is so very important to shelter in place, especially for high-risk patients, this new platform allows me to do my job, and be able to ensure my patients' medical needs are met. My staff and I come in to work every day to be here for you, so you can stay safely at home and receive the care and follow up that you need without risking potential exposure during this health crisis.

For many of my older patients, telehealth has been a surprisingly smooth transi-



tion, especially since many have described themselves as "tech-challenged." To bridge this gap, we have enlisted their children and grandchildren to help them.

It is heartwarming to see a patient's *anak* or *apo* sitting next to their *Lolo* or *Lola* during the visit. They often laugh together and give each other high-fives afterwards. This new type of family bonding and interaction has been an inadvertent and welcome benefit of this platform, as a result of the pandemic.

I want to assure everyone that if your primary care physician has requested to see you via a telemedicine visit rather than in-person, this does not mean that we care about your health less. It means that we are taking extraordinary, new measures to make sure you stay as healthy as possible, and that you have access to us despite the need to shelter in place or quarantine.

While our offices may still be open for urgent needs, our goal is to keep the healthy and high risk from being exposed, and to keep a close watch of those that are sick so we know if you can continue to safely be at home, or if you need to be evaluated further.

We have been trained to examine with all of our senses, not just by touch. There is a lot we can tell online by just hearing your voice, seeing how you look, breathe, move and respond. These actions

can tell us if you are doing fine or if you need to come in to be seen or go for testing.

Rest assured, we will ask you to come and see us, or go and get additional testing or evaluation outside your home if needed. Right now, it is important to weigh the risks associated with possible COVID-19 exposure against the medical necessity of in-person care.

These are very complex times, and we as a society are charting unknown waters. We miss seeing our patients in person, getting those hugs and hearing your laughter in our offices. We can't wait to welcome you all back to clinic on a regular basis.

But for now, unless absolutely necessary, let's work together to work around this virus, to keep us all safe. Stay home, shelter in place, minimize your exposure risk, and reach out when you need us. We are here for you.

#### DR. LYLA CACHOLA PRATH-

ER is an internal medicine doctor at Cachola Medical Clinic in Kalihi. She is the President-Elect of Philippine Medical Association of Hawaii.

### **HEALTHLINE NEWS**

### UH Scientists Suggest Novel Screening Tool for Non-Hodgkin Lymphoma in Children izu. He adds, "the of this work is to

Scientists at the University of Hawaii (UH) Mānoa have discovered a novel method of diagnosing non-Hodgkin lymphoma, a group of cancers that starts in cells called lymphocytes, which are part of the body's immune system.

Currently, there are no widely recommended screening tests at this time for non-Hodgkin lymphoma, which is usually diagnosed through invasive surgical or needle biopsies or removal of living tissue for examination. However, this study has the potential to change that paradigm by suggesting the use of Raman spectroscopy technology as an initial step to determine if and when a biopsy would be necessary.

Dr. Bruce Shiramizu, pe-

diatrician, researcher at the UH John A. Burns School of Medicine (JABSOM) and senior author of the paper describes their findings as a repurposing of technology that has been used for the Department of Defense in remotely identifying chemicals such as

explosives using a laser technique.

"We partnered with an investigator with a physics background to design a way to use a hand-held probe to identify different types of pediatric non-Hodgkin lymphoma tissues," said Dr. Shiram-

izu. He adds, "the importance of this work is to be able to use the hand-held probe as a screening or diagnostic tool for real-time assessment of a mass that might be a tumor."

According to Dr. Melissa Agsalda-Garcia, researcher at JABSOM's Hawai'i Center for Aids, "this work in characterizing malignant cells has future diagnostic implications as a non-invasive initial tissue assessment in children with potential malignancies." Agsalda-Garcia is the first-author of the paper.

This project is being supported by the St. Baldrick's Foundation, the largest private funder of childhood cancer research grants, through multiple grants totaling \$113,000. ■

### Schatz Urges Federal Government to Expand Access to Telehealth Services Health Care Program participants in Funding Year 2010

enator Brian Schatz led a bipartisan group of 26 senators in urging the Federal Communications Commission (FCC) to increase subsidies to health care providers through the Rural Health Care Program. The additional funding would ensure that providers have the resources they need to deliver

and expand telehealth services for rural communities during the coronavirus (COVID-19) pandemic.

"In this time of crisis, it is imperative we do our part to ensure the safety and security of our health care providers and patients," the senators wrote. "That is why we are writing to ask you to waive



current FCC rules and help increase access to care by increasing subsidies for Rural ipants in Funding Year 2019 during this crisis."

The coronavirus outbreak has caused an immense strain on health care providers in the United States. Telehealth offers an alternative to traditional services, allowing providers to deliver quality care to patients online without risking further spread of the virus.

### **COMMUNITY HEALTH & WELLNESS 2020**



By Mel Ona, M.D.

arch is Colorectal Cancer Awareness Month. Colorectal cancer

is the second

most lethal cancer in men and women in the United States. Imagine Aloha Stadium at capacity (50,000 seats) - that's how many people die of colorectal cancer every year! Gastroenterologist, Dr. Mel Ona, answers common questions about colorectal cancer.

### What is colorectal cancer?

Colorectal cancer is a malignant tumor in the colon (large intestine) or rectum. Cancer occurs when cells grow out of control and invade through normal body tissue and possibly spread throughout the body (metastasis).

### **What causes colorectal** cancer?

While some cancers are caused by genetic mutations that are passed through family generations, most colorectal cancers start as small pre-cancerous growths or polyps. If these pre-cancerous polyps

### COLON HEALTH

layers of the colon or rectum, then they are considered colorectal cancer.

#### What are symptoms of colorectal cancer?

Symptoms may include change in bowel habits, bleeding from the rectum, unexplained weight loss, or abdominal pain. However, you may have no symptoms particularly with early stages of colorectal cancer.

### What can I do to reduce the risk for colorectal cancer?

Stop smoking, avoid drinking excessive alcohol, lose excess body fat, be physically active, consume less processed foods, and get screened!

### When should I get screened for colorectal cancer?

If you have no symptoms and no specific risk factors such as family history of colorectal cancer, then screening is performed at age 50. If you are Black/African-American, screening is recommended at age 45. If you have specific risk factors (personal history of inflammatory bowel disease such as ulcerative colitis or Crohn disease, family history of colorectal cancer, family history of colon polyps) then you should be screened earlier.

grow and invade the deeper What are different screen-

### ing options for colorectal cancer?

- Colonoscopy every 10 years
- Immunochemical Fecal Testing (FIT) for occult blood in stool every year
- Sigmoidoscopy every 5 years with FIT every year
- FIT with stool DNA every three years
- CT colonography every five years.

### What's the best screening test for colorectal cancer?

The one that gets done!

#### How does a colonoscopy prevent colorectal cancer?

Most colorectal cancers start as polyps that grow over time. During colonoscopy, a flexible tube with a video camera is inserted into the rectum and the entire colon is carefully evaluated. We can detect precancerous polyps and remove them before they become cancer.

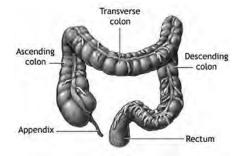
### is colonoscopy safe?

Colonoscopy is a safe procedure with complication rate of less than ½ of one percent. Adverse events may include bleeding, infection, perforation (injury), or anesthesia complications.

### Can colorectal cancer be cured?

Colorectal cancer can be treated with chemotherapy, radiation, and/or surgery. Most clinicians refer to a five-year survival statistic when discussing prognosis. If colorectal cancer is diagnosed early when the tumor is localized in the large intestine or rectum only, the five-year survival is 92%. In other words, 92% of people who are diagnosed with localized cancer (stage I) are still alive five years after initial diagnosis. Those with distant metastases (stage IV) or tumor that has traveled through the bloodstream or through lymph nodes and spread from the colon or rectum to other organs such as lung or liver have approximately 12% to 14% fiveyear survival.

I know someone who got a colonoscopy and said it was



#### painful. Is this true?

Colonoscopy is the most accurate method for detecting polyps and preventing colorectal cancer (by removing precancerous polyps). There are nearly 22 million people in the U.S. ages 50 to 75 who have not yet been screened for colorectal cancer. If you want more information about colonoscopy, please visit my YouTube channel (Dr. Mel Ona) to watch me undergo the procedure without sedation. (Spoiler alert: it was painless!) Again, the best screening test is the one that gets done! ■

DR. MEL ONA is a gastroenterologist in private practice with offices in Kapolei and Honolulu. He is a member of the Philippine Medical Associate of Hawaii and is the author of several books related to medical education and nutrition/ fitness. Website: www.DrMelOna.

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### HEALTHLINE NEWS

### **Schatz Press Vice President** to Address COVID-19 Testing **Shortfall**

enator Brian Schatz and a group of his colleagues called on Vice President Mike Pence and the Coronavirus Task Force, as well as the Federal Emergency Management Agency (FEMA), to conduct a national inventory of the coronavirus (COVID-19) diagnostic testing supply, publicly release data on testing results, and provide a detailed plan and timeline for addressing future shortages and gaps in the testing supply chain.

"Over three weeks after President Trump declared the COVID-19 outbreak a national emergency, we continue to hear from our states and Tribal Nations about the lack of supplies and testing kits to diagnose our constituents for the coronavirus," wrote Schatz and the senators. "State departments of health, hospitals, health care providers, and first responders lack the tests and equipment—including personal protective equipment (PPE), testing swabs, and reagents—needed to conduct adequate public health surveillance to contain and stop the spread of coronavirus.

The senators urged the vice president to promptly develop a national, real-time. public-facing inventory of COVID-19 diagnostic tests and results. ■



By Jon Avery Go, M.D.

mphysema is a debilitating lung disease which is a part of Chronic Obstructive Pulmonary Disease or COPD. It is characterized by persistent respiratory symp-

toms and limitation in air-

flow or obstruction that is

not fully reversible.

Estimated to affect 32 million people in the United States, COPD is the third leading cause of death in the US. In Hawaii, 4.2% of the local population is affected by the condition. It's more common in men than in women and majority of cases are found in ages 40 years old and up.

At its very core, COPD is an inflammatory condition in the lungs. Smoking and other irritants cause inflammation that leads to

### LUNG HEALTH: EMPHYSEMA 101

damage, scarring, loss of elasticity and ability of the lung airways to recoil.

In emphysema, loss of the elasticity and recoil happens in the small air sacs at the tips of the lung branches. These small air sacs are where the exchange of oxygen and carbon dioxide happens.

The damaged air sacs abnormally enlarge because of the loss of elasticity and inability to recoil, and airflow is obstructed, and the person has trouble exhaling fully. The trapped air causes hyperinflation and abnormal gas exchange making the person short of breath. It's like an old balloon that is full of air.

The old balloon has lost its elasticity and becomes stiffer so when you let the air out it does not deflate as instantaneous as a new balloon would and some of the air is trapped and leads to hyperinflation without effective gas exchange.

Smoking is the most significant risk factor in developing COPD.



First-hand and second-hand smoking both increase a person's risk. Occasionally, long term exposure to irritants like pollution, occupational and household inhaled chemicals and dust also increases risk. There is a subset of patients that have a strong genetic disposition due to an enzyme deficiency, so a family history of COPD is considered a risk factor.

Symptoms typically include chronic cough with phlegm that is worse in the morning, shortness of breath, wheezing and/or frequent respiratory infections. Many people may attribute

the cough to allergies, or the shortness of breath to aging and compensate by adjusting their day to day activi-

Diagnosis is confirmed by spirometry, a test in which the person inhales then blows long and hard into a tube and a machine

ties by doing less.

measures their lung capacity and force of exhalation.

Quitting smoking is the key to prevent disease occurrence and deter progression

Treatment to prevent exacerbations or flare ups include strict adherence to maintenance inhalers and staying up to date with pneumococcal and influenza vaccinations. Treatment during flare ups may include corticosteroids, rescue inhalers, nebulizer treatments and antibiotics. Non-pharmacologic measures especially for end stage COPD include supplemental oxygen therapy, pulmonary rehabilitation, lung volume reduction therapy and lung transplant. ■

(Solution to Crossword No. 16 | April 4, 2020)





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### **COMMUNITY CALENDAR**

28th ANNUAL FILIPINO FIESTA & 8th FLORES DE MAYO 2020 | Saturday, May 2, 2020 | 9AM - 5PM | The Fil-Com Center, Waipahu I For details, contact FilCom at 808-680-0451

MABUHI PACIFIC EXPO & SUMMIT | July 24-26, 2020 | Hawaii Convention Center I Panelists-presenters on various topics are being accepted for the Expo. For details,

contact Rose Cruz Chuma at rosechurma@mac.com

LEA SALONGA LIVE | Friday-Saturday, October 23-24, 2020; 8-10PM | Blaisdell Concert Hall, Honolulu I Filipina singer and actress Lea Salonga to serenade the Hawaii crowd in a two-night spectacular concert. Tickets \$35 and up. Visit blaisdellcenter.com for more information.

### GLOBAL NEWS

### **Avoid Taking Ibuprofen for COVID-19** Symptoms — WHO

ENEVA, Switzerland — The World Health Organization recommended Tuesday that people suffering COVID-19 symptoms avoid taking ibuprofen, after French officials warned that anti-inflammatory drugs could worsen effects of the virus.

The warning by French Health Minister Olivier Veran followed a recent study in The Lancet medical journal that hypothesised that an enzyme boosted by anti-inflammatory drugs such as ibuprofen could facilitate and worsen COVID-19 infections.

Asked about the study, WHO spokesman Christian Lindmeier told reporters in Geneva the UN health agency's experts were "looking into this to give further guidance."

"In the meantime, we recommend using rather paracetamol, and do not use ibuprofen as a self-medication. That's important," he said.

He added that if ibuprofen had been "prescribed by the healthcare professionals, then, of course, that's up to them."

His comments came after Veran sent a tweet cautioning that the use of ibuprofen and similar anti-inflammatory drugs could be "an aggravating



factor" in COVID-19 infections.

"In the case of fever, take paracetamol," he wrote.

The French minister stressed that patients already being treated with anti-inflammatory drugs should ask advice from their doctor.

Paracetamol must be taken strictly according to the recommended dose, because too much of it can damage the liver.

The COVID-19 pandemic, which has infected around 190,000 people worldwide and killed more than 7,800, causes mild symptoms in most people, but can result in pneumonia and in some cases severe illness that can lead to multiple organ failure.

Even before the pandemic, French authorities sounded the alarm over serious "infectious complications" linked to the use of ibuprofen, which is sold under various brands like Nurofen and Advil, and other anti-inflammatory drugs.

A spokesperson for British pharmaceutical company Reckitt Benckiser, which makes Nurofen, said in an email statement that the company was aware of concerns raised about "the use of steroids and non-steroidal anti-inflammatory (NSAIDs) products, including ibuprofen, for the alleviation of COVID-19 symptoms."

"Consumer safety is our number one priority," the spokesperson said, stressing that "Ibuprofen is a well-established medicine that has been used safely as a self-care fever and pain reducer, including in viral illnesses, for more than 30 years."

"We do not currently believe there is any proven scientific evidence linking over-the-counter use of ibuprofen to the aggravation of COVID-19," the statement said.

The spokesperson said Reckitt Benckiser was "engaging with the WHO, EMA (the European Medicines Agency) and other local health authorities" on the issue and would provide "any additional information or guidance necessary for the safe use of our products following any such evaluation." (www. philstar.com) ■

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### (COVER STORY: Americans and Businesses....from page 5)

helps people track the status of their stimulus check. The either a direct deposit or mailed check.

Marilou Cadiz of Ewa, a stay-at home mother, who lives with her husband and adult daughter, says she is anxious to receive her and her family's stimulus checks. "We are struggling here. My husband's work hours have been cut. We have our regular bills coming in and we need that any aid that the stimulus packages can provide. "The govmoney. Fortunately, my daughter works in the health sector and has steady work and hours. Her job will not be affected by all the layoffs at this time. We're trying to all watch our spending right now. No more buying things on the internet or ordering take outs.

"I am thankful that in our household, we still have jobs. My sister, who doesn't live with us, was furloughed from her hotel job. I worry about her. And feel sad for all the workers out there.

"If this goes on longer, the government got to give us all another stimulus check. It's good we got this help. But it's not our fault we got to stay home and cannot make money," said Cadiz.

All three bills or phases received bipartisan support. tool will let people follow the scheduled payment date for Lawmakers are considering a fourth bill or fourth phase should the COVID-19 crisis continue past June.

> Should there be a next bill, economists say more needs to be done for even smaller businesses with 10 or less employees.

> Like most small businesses, Fuentes looks forward to ernment's response to help small businesses such as Paycheck Protection Program (PPP) which is available from our local bank is valuable. PPP provides rapid funding to small businesses in the form of a forgivable loan as long the loan proceeds are utilized to cover payroll costs, most mortgage interest, rent, utility costs over the 8 week period after the loan is made, and employee and compensation levels are maintained. I hope that government will continue to help and support small businesses until the economy will stable," she said.

#### **SBA Assistance for Small Businesses Affected by** COVID-19

The SBA is offering several new temporary programs that was established by the CARES Act.

- Paycheck Protection Program or PPP, a loan program that provides loan forgiveness for retaining employees during this crisis
- EIDL Loan Advance, a loan advance that provides up to \$10,000 of economic relief to businesses that are currently experiencing temporary difficulties
- SBA Express Bridge Loans enables small businesses who currently have a business relationship with an SBA Express Lender to access up to \$25,000 quickly
- SBA Debt Relief provides a financial reprieve to small businesses during the COVID-19 pandemic

To learn how to apply for these loans, visit sba. gov.

Cadiz said, "we never expected something like this to happen. Nobody did. I don't know how long the virus problem will last. We're all just afraid for our health, but we scared because we got to make money too."

"I hope God help us all," said Cadiz.

**Possible 4th Coronavirus Assistance Bill** 



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