

## Chris Taggart

---

**From:** Liz Hibala <lizhibala@me.com>  
**Sent:** Tuesday, July 21, 2020 3:00 PM  
**To:** Ravalli County Commissioners Office; Greg Chilcott; Chris A. Hoffman; Jeff Burrows; chief@cityofhamilton.net  
**Subject:** [EXTERNAL] CDC/NEJM studies

Thank you for your reasonable approach in Ravalli county to the state wide mask mandate.

As information and recommendations have changed throughout the last several months I have come across information from the CDC as well as the New England Journal of Medicine that has been enlightening as to the ineffectiveness of masks. For your information I've attached pertinent passages and website links.

Again, thank you for your hard work.  
Liz Hibala

~~~~~  
~~~~~  
“Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings—Personal Protective and Environmental Measures.” Published in: “Emerging Infectious Diseases, Vol.26, No. 5, May 2020.” (That journal is published by the CDC.)

“Here, we review the evidence base on the effectiveness of nonpharmaceutical personal protective measures and environmental hygiene measures in non-healthcare settings and discuss their potential inclusion in pandemic plans. Although mechanistic studies [\*] support the potential effect of hand hygiene or face masks, evidence from 14 randomized controlled trials of these measures did not support a substantial effect on transmission of laboratory-confirmed influenza. We similarly found limited evidence on the effectiveness of improved hygiene and environmental cleaning.”

Here are quotes from pages 970-972 of the review: “In our systematic review, we identified 10 RCTs [randomized controlled trials] that reported estimates of the effectiveness of face masks in reducing laboratory-confirmed influenza virus infections in the community from literature published during 1946–July 27, 2018. In pooled analysis, we found no significant reduction in influenza transmission with the use of face masks...”

“Disposable medical masks (also known as surgical masks) are loose-fitting devices that were designed to be worn by medical personnel to protect accidental contamination of patient wounds, and to protect the wearer against splashes or sprays of bodily fluids... There is limited evidence for their effectiveness in preventing influenza virus transmission either when worn by the infected person for source control or when worn by uninfected persons to reduce exposure. Our systematic review found no significant effect of face masks on transmission of laboratory-confirmed influenza.”

“In this review, we did not find evidence to support a protective effect of personal protective measures or environmental measures in reducing influenza transmission.”

“We did not find evidence that surgical-type face masks are effective in reducing laboratory-confirmed

influenza transmission, either when worn by infected persons (source control) or by persons in the general community to reduce their susceptibility...”

[https://wwwnc.cdc.gov/eid/article/26/5/19-0994\\_article](https://wwwnc.cdc.gov/eid/article/26/5/19-0994_article)

"We know that wearing a mask outside health care facilities offers little, if any, protection from infection. Public health authorities define a significant exposure to Covid-19 as face-to-face contact within 6 feet with a patient with symptomatic Covid-19 that is sustained for at least a few minutes (and some say more than 10 minutes or even 30 minutes). The chance of catching Covid-19 from a passing interaction in a public space is therefore minimal. In many cases, the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.

The calculus may be different, however, in health care settings. First and foremost, a mask is a core component of the personal protective equipment (PPE) clinicians need when caring for symptomatic patients with respiratory viral infections, in conjunction with gown, gloves, and eye protection. Masking in this context is already part of routine operations for most hospitals. What is less clear is whether a mask offers any further protection in health care settings in which the wearer has no direct interactions with symptomatic patients. There are two scenarios in which there may be possible benefits.”

<https://www.nejm.org/doi/full/10.1056/NEJMp2006372>

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. If you believe the email to be malicious and/or phishing email, please use the **Phish Alert** button.