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## Editorial

## Airborne precautions are needed against COVID-19



World Health Organization stated the outbreak to be a Public Health Emergency of International Concern on 30 January 2020. WHO recognized it as a pandemic on 11 March 2020. WHO declared that COVID-19 virus is transmitted between people through respiratory droplets and contact routes. Now, WHO added the new comment that respiratory infections can be transmitted through droplets with  $<5 \mu\text{m}$  in diameter, they are referred to as droplet nuclei which is called airborne infection [1]. Based on the past lesson of SARS and MERS, WHO clearly stated and achieved that airborne precautions should be applied when performing aerosol-generating procedures [2]. WHO should have known the behavior of droplets such that fine droplets between 1–5 micrometers can remain airborne for several hours in still air [3]. In other words, WHO sent the wrong message to the world on protections against respiratory droplets infections.

With or without a mask, the aerosol study showed that exhaled mouth breathing produces more droplets than coughing [4]. The new study shows that the Sars-CoV-2 virus could survive in droplets for up to three hours after being coughed out into the air [5]. In other words, the smaller droplets, for the longer hours Sars-CoV-2 virus could survive. CDC clearly stated in “How is SARS spread?” that it is possible that SARS-CoV might be spread more broadly through the air (airborne spread) or by other ways that are not now known [6]. We need airborne precautions against COVID-19 [7].

There is no fund in this research. This manuscript has not been published and is not under consideration for publication elsewhere. The author has no conflict of interest. The research does not involve human participants and/or animals. This paper is nothing to do

with informed consent. The author has read the manuscript and has approved this submission.

**Conflict of interest**

None.

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30 April 2020