



# Healthcare workers with COVID-19 in Mexico

To the Editor:

I read with interest the recently published report by SIDDQUI *et al.* [1], which described the characteristics and outcomes of health and social care workers testing positive for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in the Tayside region of Scotland.

Healthcare workers (HCWs) are at risk for SARS-CoV-2 infection [1, 2]. The best way for HCWs to prevent infection with SARS-CoV-2 is through training and demonstrated competency in putting on and removing, also known as donning and doffing, personal protective equipment (PPE) [3]. In early April 2020, 22 073 cases of coronavirus disease 2019 (COVID-19) among HCWs in 52 countries were reported to the World Health Organization [4]. This brief report highlights the risks facing frontline HCWs.

As of 28 June 2020, a cumulative total of 9 843 073 confirmed cases of COVID-19 have been reported worldwide [5]. As of this time, there have been 208 392 total confirmed cases of COVID-19, including 25 779 resultant deaths, in Mexico [5]. A total of 46 013 (22.08%) Mexican HCWs have been infected with SARS-CoV-2. Most of them were between 30 and 54 years old. Among HCWs with COVID-19, 42 332 (92%) were not hospitalised, 1 693 (3.67%) were in critical condition, and 234 required endotracheal intubation and invasive mechanical ventilation [6, 7].

In Mexico, 92% of affected HCWs had mild or moderate COVID-19, supporting the findings of SIDDQUI *et al.* [1]. The case fatality rate of COVID-19 in HCWs based on all cases reported by the Mexican Secretariat of Health was 1.48% (683/46 013) [6, 7], as compared with an overall COVID-19 case fatality rate of 15.26% (25 096/162 379) (difference 13.78%, 95% CI 13.57–13.98%;  $p < 0.001$ ).

PPE alone does not effectively protect patients and healthcare personnel. The way to ensure safe PPE use is through consistent and correct use reinforced by repeated training and practice. Finally, Mexican HCWs could have acquired SARS-CoV-2 infection at work through direct or indirect contact with infected patients, and HCWs could be exposed to infected family members, and colleagues, or live in an area with active community transmission [2, 8].

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**Healthcare workers can be infected in the community, and in interactions with colleagues; therefore, such infections are not always the result of acquisition from infected patients** <https://bit.ly/30opbTk>

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