

different stage or might have different characteristics so that's what we're trying to do and Chris will say more about the details of where we are as of

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now thanks Patrick Chris in addition to what Patrick's just said I think that

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it's important to remember that both the NHS and public health professionals already doing a very large number of

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things and those are steadily changing as this epidemic goes on so we started

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off very heavily concentrating on geographical issues looking at fevers

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and other symptoms in people who'd come from areas where the outbreak had begun

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and then when it how it seeded out including most recently to Italy but as

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time is going on for the NHS for our public health colleagues we're moving more and more to looking at people who

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have never left the UK to check that they might have coronavirus and if they

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do that they can be treated and isolated properly and the key at this stage remains to find early cases to isolate

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them and where appropriate to follow their contacts we'll be making one additional change on the health side

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tomorrow at the moment we are screening everybody who's in intensive care for coronavirus if they have symptoms that

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are compatible with coronaviruses so if they have a very bad pneumonia and we'll be extending that out now as from

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tomorrow to everybody who has a significant enough pneumonia or other respiratory tract infection to get into

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hospital at all so that's a that's a medical advance move forward but I think

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what we're moving now to is a phase when we will be having to ask members of the general public to do different things

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than they would normally do but I would repeat the point that the PM and Patrick

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have just said it is important on this it's not just a matter of what you do it

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is also a matter of when you do it because anything we do we've got to be able to sustain once you've started

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these things we will have to continue through the peak and that is for a period of time and there is a risk if we

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go too early people were understandably get fatigue and it'll be difficult to sustain this overtime so getting the

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timing right is absolutely critical to making this work at the moment the

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things that we are doing which are appropriate for any other significant respiratory tract infection are also

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appropriate for the currently very small number of coronavirus cases we have in

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the UK so those would include washing your hands with soap and water as the Prime Minister has said it includes

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covering your mouth when you cough or Smith sneeze and disposing of tissues as everybody knows it also would include

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what anybody would get is advice from their GP which is if you've got a very serious respiratory tract infection

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you're sneezing everywhere and high fever you've got a runny nose if you phoned up your GP they would say

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stay at home don't infect elderly people don't infect your workmates this is no

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different from anything else you would normally we would normally would advise at this time of year and remember in

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terms perspective in an average year about 8,000 people a year die of flu it

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is very important we do this for all respiratory tract infections and as with coronavirus those who are older and

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those who have pre-existing health conditions are a greater risk but we're now going to be moving into a position

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where at the moment as patrick said the ratio between people you've got

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coronavirus in the UK and other significant respiratory tract infections

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is very very low that is going to shift over time for two reasons one of which is the modelling shows that the actual

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amount of coronavirus is steadily going to increase and we're expecting the numbers to increase initially slowly but

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really quite fast after a while you have to catch it before the upswing begins and secondly the other causes of coughs

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and colds that are seasonal this time of year are the tail end of the period of maximum activity in the UK so the ratios

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