



HEALTH ADVISORY: QUARANTINE FOR CONTACTS OF PERSONS WITH SARS-CoV-2 INFECTION Dec. 11, 2020

Background

The United States and Texas are experiencing ongoing community transmission of the novel coronavirus, SARS-CoV-2, which causes the disease COVID-19. This advisory provides guidance for healthcare providers on quarantine for contacts of persons with SARS-CoV-2 infection using symptom monitoring and diagnostic testing, and on disease reporting.

Quarantine for Contacts of Individuals with SARS-CoV-2 Infection

Public health prevention measures such as wearing masks, hand washing, and maintaining physical distancing are effective tools for reducing the spread of SARS-CoV-2 (the virus that causes COVID-19). Testing for SARS-CoV-2 is critical for rapid identification of individuals with COVID-19 and their close contacts; timely isolation and quarantine measures effectively suppress spread of COVID-19.

Isolation refers to keeping someone who is infected with the virus away from others, even in their home; while quarantine refers to keeping someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are infected, especially if they have no symptoms. Individuals in quarantine should stay home, separate themselves from others, monitor their health, and follow directions from their state or local health department.

On December 2, 2020 the CDC issued a "Scientific Brief" offering options for shortening quarantine based on local circumstances and resources¹. This has been widely characterized as "new guidance" from the CDC. The guidance from the CDC has not changed and can be found at [COVID-19: When to Quarantine | CDC](#). The guidance continues to state that for those persons who are identified as close contacts of someone known to have COVID-19, should stay home and monitor their health for 14 days. This approach has an estimated post-quarantine residual transmission risk of 0-3%.

The CDC states "**local public health authorities can determine and establish the quarantine options for their jurisdictions**"¹. The alternate strategies to shorten quarantine described in the CDC scientific brief include the following:

- Quarantine period can end on day 7 if individual is asymptomatic and has a negative test result which is collected on or after day 5.
 - This strategy has an estimated post-quarantine residual transmission risk of 5-12%.
- Quarantine period can end on day 10 if asymptomatic but not have to undergo testing.
 - This strategy has an estimated post-quarantine residual transmission of approximately 1-10%.

The CDC emphasizes that individuals must continue to self-monitor for symptoms of COVID-19 and consistently wear masks/facial coverings for the full 14-day course regardless of the quarantine strategy employed.



For Bexar County, our local health authority has determined the current CDC recommendation of a 14-day quarantine period for contacts of those exposed to COVID-19 remains the gold standard. This position is based on current local data patterns and trends. Current increasing COVID-19 case numbers, high test positivity rates, and rising hospitalizations indicate uncontrolled community spread. Shortening the quarantine period at this time in our community will likely exacerbate the concerning trajectory of current trends of infection and death.

Metro Health acknowledges that the alternate strategies presented by the CDC are in part an effort to improve compliance of quarantine measures within the public at large which can impose personal burdens that may affect physical and mental health as well as cause economic hardship, but we cannot overlook the morbidity and mortality of this highly contagious disease. The current recommended 14-day quarantine period is the most conservative regimen and should be maintained whenever possible. Compliance is particularly important for congregate settings where the calculated transmission risk is greatest.

It should be emphasized that the additional transmission risk expected with shorter regimens will be compounded if associated with less reliable testing. Studies have demonstrated rapid antigen tests are less sensitive than RT-PCR tests, particularly in asymptomatic individuals. If a shortened quarantine strategy with testing is implemented, a molecular test (e.g. RT-PCR or Nucleic Acid Amplification Test (NAAT)) would be the preferred testing modality.

In summary, the CDC continues to **endorse and support a 14-day period for quarantine** and advises that any quarantine strategy shorter than 14 days will have to be balanced with increased risk of spreading the virus. Metro Health remains committed to monitoring the current situation in our community and may revise this recommendation as COVID-19 data metrics and trends in our community improve. We must continue to practice the public health measures that have proven successful in slowing transmission of the virus, by following the 3W's: Wearing a Mask; Watching our Distance; and Washing our Hands as well as isolating when symptomatic or infected, and quarantining when exposed.

For questions or to report a suspected case, please contact:

San Antonio Metropolitan Health District
Epidemiology Program
Phone: (210) 207-8876
Fax: (210) 207-8807