

December 27, 2020

COVID-19 Year-in-Review: The First 6 Months

By the Editors

Dear Readers,

At the end of each year, we typically share with you a list of our most-read stories from the past 12 months. This year — not surprisingly — all of those stories were about COVID-19, so we've opted for a different approach. Below, we offer you a COVID-19 timeline of sorts. We've chosen one story each month from January through June that we think gives a sense of how the pandemic unfolded. We'll deliver the second half of the timeline to you tomorrow.

January: On Jan. 8, the CDC issued a health advisory regarding at least 59 cases of pneumonia of unknown etiology in Wuhan, China. The agency requested that U.S. clinicians ask patients with severe respiratory disease about any recent travel to the city. The first U.S. case was confirmed on Jan. 21.

February: The 2019 novel coronavirus was officially named severe acute respiratory syndrome coronavirus 2 — or SARS-CoV-2 — by the International Committee on Taxonomy of Viruses. At the same time, the World Health Organization (WHO) gave a name to the illness caused by SARS-CoV-2 — COVID-19.

March: On Mar. 11, the World Health Organization declared the COVID-19 outbreak a global pandemic. Over the prior 2 weeks, the number of cases outside China increased 13-fold and the number of countries with cases increased threefold. U.S. cases surpassed 1000, with 29 deaths.

April: A committee of the National Academies of Sciences, Engineering, and Medicine said SARS-CoV-2 may be aerosolized "from normal breathing." They said that "the presence of viral RNA in air droplets and aerosols indicates the possibility of viral transmission via these routes." Days later, the CDC advised Americans over age 2 years to wear cloth face coverings "in public settings where other social distancing measures are difficult to maintain."

May: More data emerged on the frequency of asymptomatic SARS-CoV-2 infection, with over 80% of cases being asymptomatic in one study. And in the *New England Journal of Medicine*, researchers reported that Black adults were at particularly high risk for severe COVID-19.

June: Researchers reported that dexamethasone improved survival in patients with COVID-19, making it the first drug to show such an effect. Infectious disease specialist Dr. Paul Sax made a case for why this should be practice-changing, even before the results were published in a peer-reviewed journal: "Aside from those patients for whom corticosteroids would be contraindicated, it's hard to imagine not offering dexamethasone — today — to a person with COVID-19 that requires supplemental oxygen or ventilatory support. *They might live longer!*"

Follow the links below to take a closer look at these stories.

LINK(S):

[CDC: Clinicians Should Be Aware of Pneumonia of Unknown Origin \(January\)](#) (Free)

[Novel Coronavirus Officially Named \(February\)](#) (Free)

[WHO Declares COVID-19 a Pandemic \(March\)](#) (Free)

[SARS-CoV-2 May Be Transmissible Via "Normal Breathing"; Cloth Face Coverings Advised \(April\)](#) (Free)

[COVID-19: Asymptomatic Infection / Stay-at-Home Orders / Racial Differences / Remdesivir Treatment Duration \(May\)](#) (Free)

[COVID-19: Steroid Lowered Mortality / Rural America / Potential Drug-Drug Interaction \(June\)](#) (Free)

[Dr. Paul Sax's post on dexamethasone](#) (Free)

[NEJM Journal Watch COVID-19 page](#) (Free)

[NEJM COVID-19 page](#) (Free)