

Responding to Compulsory Dispositions in the Republic of Korea

There may be instances where you feel uncomfortable cooperating with compulsory dispositions. This may happen when compulsory dispositions are forced upon you abruptly or when you feel that they may violate your human rights. Many people felt this way when the Korean government forced them to take COVID-19 tests. The problem is often that the public officials who enforce compulsory dispositions hardly understand, and in some cases have never even read, the laws they are attempting to enforce. As a result, they often do not perform administrative procedures correctly, often neglecting certain parts of the law or going beyond the scope of the law. In some cases, they may even break the law themselves while trying to enforce it. By knowing the law, citizens can protect themselves from becoming victims of wrongly performed compulsory dispositions. This document offers one approach to responding to compulsory dispositions for infectious diseases, particularly COVID-19 testing. The procedures described here could easily be adapted to many other types of compulsory dispositions. As a citizen, it is important to read the law, know your rights, and ensure that public officials follow the law to the letter.

DISCLAIMER: THIS DOCUMENT ONLY PROVIDES AN OPINION AND IS NOT LEGAL ADVICE. THIS APPROACH HAS NOT BEEN TESTED AND PROVIDES NO GUARANTEES WHATSOEVER. THIS APPROACH MUST BE USED UNDER ONE'S OWN RESPONSIBILITY AND AT ONE'S OWN RISK.

STEP 1. When initially approached by a public official, say to the public official that you are ready to cooperate, but, as a citizen who has a concern for human rights, you would like to follow due process in accordance with the Infectious Disease Control and Prevention Act (IDCPA) and the Administrative Procedures Act (APA).

- i. Request the contact information of the public officials (names, phone numbers, affiliation, supervisor name, and supervisor phone number)
- ii. Ask them if they are familiar with the IDCPA and APA.
- iii. Ask them if they understand the rights and interests of citizens under these laws.
- iv. Ask them if they have been enforcing their compulsory dispositions in compliance with these laws.
- v. Ask them if they agree to comply with the provisions of these laws in their dealings with you.

If the public official answers “No” to any of these questions, then state that such failure is non-compliance with the law and a violation of citizens’ rights under the law. Request their compliance or ask to speak with their supervisor. Do not move onto **STEP 2** until obtaining a basic understanding that this compulsory disposition must be enforced in compliance with the IDCPA and APA.

STEP 2. Say that you first need to confirm your status under the IDCPA. In particular, if you are being approached as a “probable patient of an infectious disease,” “pathogen carrier,” or “person suspected of contracting an infectious disease” as defined, respectively, in Paragraph 14, Paragraph 15, and Paragraph 15-2 of Article 2 of the IDCPA, say that you would like to

confirm such status in accordance with the corresponding provisions of the IDCPA. This requires the following:

- i. Confirmation that the alleged infectious person has a positive laboratory test result in conformity with Article 16-2 and Article 42 of the IDCPA. Ensure that the laboratory test corresponds to the particular variant in question. In the case of COVID-19, what variant does the infectious person have? Was the laboratory test designed for this particular variant?
- ii. Confirmation of close proximity with the infectious person (within 2 meters according to the rules of social distancing), such as CCTV footage, or confirmation of close proximity with viral particles at the location of concern.

- a. If there is an objection to this, then say that Article 6 of the IDCPA and Article 5 and Paragraph 1 of Article 21 of the APA afford citizens the right to this information. Say that personal information can be redacted, but you need to see the laboratory test result and CCTV footage to help you confirm your status under the IDCPA.
- b. If the public official says that the provision of such information can be omitted because the compulsory disposition is an “urgent disposition” pursuant to Paragraph 4 of Article 21 of the APA or Article 13 of the Enforcement Decree of the Administrative Procedures Act (EDAPA), say that the public official’s appeal to urgency is based on the presumption of having jurisdiction. In contrast, you are trying to confirm whether or not the public official has jurisdiction at all. In other words, you are trying to confirm whether or not the compulsory disposition actually applies to you, and until that fact is established, the provisions regarding urgent dispositions in the APA and EDAPA have no force. Say that once you confirm your status under the law as one of the persons described in Paragraph 14, Paragraph 15, or Paragraph 15-2 of Article 2 of the IDCPA, you will promptly undergo the compulsory disposition.
- c. Say that you will voluntarily stay at home and wait for the public official to get the information necessary to confirm your status under the IDCPA. (Do not say that you will quarantine; otherwise, you will be giving your consent to the compulsory disposition without being furnished confirmation that the disposition actually applies to you.)
- d. If you think the public official might try to force you to undergo the compulsory disposition without providing the requested information (perhaps under the threat of violence), try to disengage the situation by moving onto **STEP 3**. (In a worst case situation, call the police and the supervisor of the public official. Say that the public official is acting beyond the scope of his authority and that you feel threatened. When the police and supervisor arrive, go back to **STEP 1**.)

STEP 3. Say that while you wait to receive the requested information, you would like to confirm the type of laboratory test used in the compulsory disposition. In other words, what type of laboratory test is being used to make medical diagnosis?

- i. Ask the public official to tell you what type of laboratory test was used on the infectious person. If the public official says it was PCR (polymerase chain reaction) or RT-PCR (reverse

transcription polymerase chain reaction) (hereinafter collectively referred to as “PCR”) move onto **STEP 4**. If the public official doesn’t know or refuses to tell you, move onto the next item (ii).

ii. Ask the public official to tell you what type of laboratory test will be used during this compulsory disposition. If the public official says it is PCR, move onto **STEP 4**. If the public official doesn’t know or refuses to tell you, request the presence of their supervisor immediately, as there is no excuse for not knowing or withholding such basic information. Do not proceed at all until you are told the type of laboratory test.

iii. If the public official says anything other than PCR, move onto **STEP 5**.

STEP 4. Say that PCR laboratory tests do not comply with Article 16-2 and Article 42 of IDCPA due to their inability to confirm the actual pathogen and their inability to confirm infectiousness. (PCR tests can only detect RNA assumed to belong to the virus. RNA is not a pathogen. A viral pathogen consists consists of not only genetic material, such as RNA, but also proteins. RT-PCR tests cannot detect protein. Therefore, RT-PCR cannot confirm the actual pathogen. Also, the detected genetic material is only a few percent of the entire genome of the alleged virus.)

Say that the following manufacturers and authorities have made statements that indicate that PCR tests are not compliant with the law:

- i. Statements by test manufacturers SD Biosensor (Standard M NCoV) and Seegene (Allplex TM) indicating non-compliance
- ii. Statement by Park Wanbom of Seoul University COVID-19 Committee indicating non-compliance
- iii. Statement by Oh Myonddon of Seoul University Hospital Department of Internal Medicine indicating non-compliance
- iv. Statement by Jeong Eun-kyeong from the Korea Disease Control and Prevention Agency (KDCA) indicating non-compliance
- v. Statement by Kwon Junok from the Korea Disease Control and Prevention Agency (KDCA) indicating non-compliance
- vi. Statement by the Sweden Public Health Agency indicating non-compliance

(The statements corresponding to items i-vi above are provided on the following pages.)

It may be surprising that the COVID-19 test kit makers and government officials actually made statements that indicate that the tests are not compliant with the law, but this did indeed happen several times. And as Item vi reveals, these admissions were not limited to the Korean government, but include statements by foreign governments and the WHO*.

Move onto **STEP 6**.

STEP 5. It is highly unlikely that the public official will be using a laboratory test other than PCR, but just in case, other types of tests are also non-compliant for the following reasons:

i. If the public official says it is a NAAT (nucleic acid amplification test), then it is either a PCR test or a test that uses a similar method as PCR, so go back to **STEP 4** and replace the word “PCR” with “NAAT.”

ii. If the public official says it is an antigen test, then it is non-compliant for reasons similar to PCR, so go back to **STEP 4**. The difference between PCR and antigen is that a PCR test detects only genetic material, whereas an antigen test detects only proteins. A virus consists of both genetic material and proteins, so neither test is capable of detecting the actual pathogen. Similar to PCR, an antigen test cannot confirm infectiousness.

iii. If the public official says it is an antibody test, then say that antibody tests are not compliant with the law because they cannot confirm the pathogen or infectiousness. In fact, antibody tests are used to detect proteins (such as IgM and IgG) that start to be created by the immune system several days after the onset of an infectious disease. These antibodies peak weeks after onset of infection and can persist for months. This means that antibodies cannot tell us if a person is currently infectious or not.

iv. If the public official says it is a viral culture test, say that a viral culture test can take several weeks to show results, so it is an inappropriate test method for urgent situations that require immediate results. Furthermore, viral culture tests are not compliant with the law because they cannot confirm the pathogen or infectiousness, but only show cytopathic effects (CPE) in cells cultured with a slew of impure materials (rather than with purified virus). Also, even when CPE is found, it is impossible to say with certainty what caused the CPE. The CPE could be due to the addition of antibiotics to the cell cultures. The CPE could be due to the induced stress on the specimen in an environment that takes place outside of the body. The CPE could be due to endogenous processes within the cells. The CPE could be due to viruses other than COVID-19 (officially, SARS-CoV-2). This means that viral culture tests cannot confirm infectiousness. Moreover, because the cell culture contains numerous substances besides the alleged virus, it is impossible to confirm the pathogen even when looking at it under an electron microscope. It has the potential to contain countless other viruses (both harmless and pathogenic ones), and endogenously produced extracellular vesicles, such as exosomes, that are approximately the same size, shape, and density as COVID-19.

v. The only other possible test would be a CT scan of the lungs, but CT scans are expensive and expose the recipient to radiation, so they are not practical. Also, they are incapable of confirming the actual pathogen or infectiousness. They only reveal lesions that could be due to reasons other than COVID-19, and which could persist for many months after recovering from sickness.

STEP 6. Say that before proceeding with the compulsory disposition (investigation, medical diagnosis, testing, quarantine, etc.), the alleged infectious person will first need to be tested with a compliant laboratory test to confirm the pathogen and its infectiousness. If the laboratory test result is positive, and if the public official can demonstrate that you were in close proximity with the infectious person, then agree to undergo the compulsory disposition with the compliant laboratory test.

The truth is that there are no compliant laboratory tests available. PCR, antigen, antibody, and viral culture tests, as well as CT scans, all fail to comply with the law, as explained above. This

means that it will be impossible for the government to proceed with the compulsory disposition lawfully without your consent. Simply stand on your rights if you do not want to undergo the compulsory disposition.

(As long as the government continues to depend on laboratory tests as the gold standard for confirming infectiousness, it will continue to remain non-compliant with its own laws. The only true gold standard for diagnosing infectious diseases (such as the common cold, influenza, and coronavirus) is the presentation of symptoms of illness. If a person is presenting symptoms of illness, then we can say with confidence that the person is sick. In contrast to this common sense approach, the concept of “asymptomatic illness” and “asymptomatic transmission” that can only be detected with a laboratory test is not only unscientific, unreliable, and unlawful for reasons not limited to those described above, but it is the reason the world was plunged into the dystopian nightmare that persisted throughout the period of COVID-19 hysteria. If more resources were given to people who were actually sick, instead of spending vast amounts of time, money, and labor terrorizing citizens and young children in the hunt for “asymptomatic carriers,” it seems highly probable that more lives could have been saved.)

STEP 7 (Emergencies only). If, at any time, public officials force you into detention (quarantine or isolation), despite their failing to comply with the law, immediately claim Habeas Corpus pursuant to Paragraph 10 of Article 42 of the IDCPA. Also, to the extent that you are not physically forced through an act of violence, do not consent to any part of the compulsory disposition.

*Link (English only):

<https://www.who.int/news-room/commentaries/detail/criteria-for-releasing-covid-19-patients-from-isolation>

감염병의 예방 및 관리에 관한 법률 (약칭: 감염병예방법)

[시행 2021. 10. 19.] [법률 제18507호, 2021. 10. 19., 일부개정]

<https://www.law.go.kr/LSW/eng/lawEngBodyCompareInfoP.do?lsNm=%EA%B0%90%EC%97%BC%EB%B3%91%EC%9D%98%20%EC%98%88%EB%B0%A9%20%EB%B0%8F%20%EA%B4%80%EB%A6%AC%EC%97%90%20%EA%B4%80%ED%95%9C%20%EB%B2%95%EB%A5%A0&lsId=001792&efYd=20250731&lsiSeq=259527&gubun=EngLs&ancYnChk=undefined>

Article 6 (Rights and obligations of citizens)

(2) Each citizen shall have the right to know information on the situation of the outbreak of infectious diseases and the prevention and control of infectious diseases and how to cope therewith, and the State and local governments shall promptly disclose the relevant information.

Article 16-2 (Institutions for confirming pathogens of infectious diseases)

(1) Any of the following institutions (hereinafter referred to as "institution for confirming infectious pathogens") may confirm infectious pathogens through laboratory testing, etc.

Article 42 (Compulsory dispositions with respect to infectious diseases)

(2)-3. Infection inspection

행정절차법

[시행 2020. 6. 11.] [법률 제16778호, 2019. 12. 10., 일부개정]

<https://www.law.go.kr/LSW/eng/lawEngBodyCompareInfoP.do?lsNm=%ED%96%89%EC%A0%95%EC%A0%88%EC%B0%A8%EB%B2%95&lsid=001362&efYd=20220712&lsiSeq=239291&gubun=EngLs&ancYnChk=undefined>

Article 5 (Transparency)

(3) Administrative authorities shall fully provide the other parties to administrative actions with relevant information.

Article 21 (Prior Notice of Disposition)

(1) Where an administrative authority renders a disposition that imposes duties on parties to the disposition or restricts their rights or interests, it shall notify such parties, etc. in advance the following:

1. The title of the disposition;
2. The full names or titles of the parties and their addresses;
3. The factual grounds for the disposition, and the contents of, and legal basis for, the disposition;
4. The meaning that the parties, etc. may submit their opinions on the matters specified in subparagraph 3, and the processing method where no opinions are submitted;
5. The name and address of the agency to which opinions may be submitted;
6. Deadline for submitting opinions;
7. Other necessary matters.

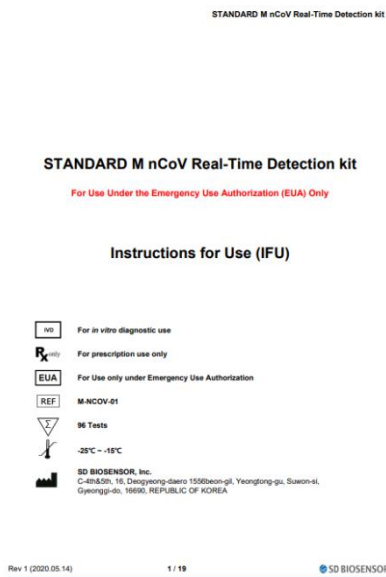
Article 27 (Submission of Opinions)

(1) Parties, etc. may submit their opinions regarding dispositions to the competent administrative authorities in writing, orally, or by means of information and communications networks, before such dispositions are rendered.

(2) Where submitting opinions under paragraph (1), parties, etc. may attach evidentiary data, etc. supporting their arguments.

(3) Where parties, etc. submit their opinions by oral statement, the administrative authorities shall record in writing the major points of the statement and the names of those who made the statement.

(4) Where parties, etc. fail to submit their opinions within the deadline without good cause, they shall be deemed to have no opinions.



SD BIOSENSOR

STANDARD M nCoV Real-Time Detection kit

<https://www.fda.gov/media/137302/download>

Nucleic acid may persist even after the virus is no longer viable.

Nucleic acid may persist even after the virus is no longer viable.

Syndrome (MERS) and more serious diseases such as acute respiratory syndrome (SARS). This kit is helpful for the auxiliary diagnosis of SARS-CoV-2 infection. The test results are for clinical reference only and cannot be used as a basis for confirming or excluding cases alone.

This kit is helpful for

the auxiliary diagnosis of coronavirus infection. The test results are for clinical reference only and cannot be used as a basis for confirming or excluding cases

alone.



Allplex™ 2019-nCoV Assay

Seegene

Allplex 2019-nCoV Assay

<https://www.fda.gov/media/137178/download>

Allplex™ 2019-nCoV Assay
(version 2.2; April 15th, 2021)

(Cat no. RP10250X / RP10252W)

Instructions for Use

For *in vitro* diagnostic use
For Emergency Use Authorization Only
Prescription Use only

 Seegene

Detection of viral RNA may not indicate the presence of infectious virus or that 2019-nCoV is the causative agent for clinical symptoms.

Detection of viral RNA may not indicate the presence of the infectious virus or that 2019-nCoV is the causative agent for clinical symptoms.

SNU Responds to COVID-19



홈 연구 영상 대응 매뉴얼 및 공지 언론보도 학술행사 연구진 카드뉴스

ENG

연구

Medical Science

코로나-19 확진자가 재감염될 수 있는가?

2020.07.31.



박완범 교수
서울의대 코로나19과학위원회 위원
서울의대 감염내과



Wan-beom Park
COVID-19 Science Committee, Seoul National University
Department of Infectious Diseases, Seoul National University College of
Medicine
<https://www.snu.ac.kr/coronavirus/research?md=v&bbsidx=128818>

On April 18 of this year, at the regular briefing of the Central Quarantine Countermeasures Headquarters, it was reported that there were a total of 163 re-positive cases nationwide that were again declared positive after COVID-19 quarantine was lifted, or 2.1% of those who were released from quarantine. However, experts believe that these positive cases are not reinfections. The reasons are as follows. **First, the current testing method for diagnosing Covid-19 is not to detect the virus particle itself, but to detect the virus's RNA gene by real-time polymerase chain reaction (real-time PCR). Therefore, the test can be positive even if there is only genetic residue without a replicating virus.**



Myung-don Oh, Chairman of the Central Clinical Committee

<https://www.yna.co.kr/view/AKR20200429095700017>

Professor Oh explained that in South Korea, PCR tests that amplify and detect the genes of this virus are used to diagnose COVID-19, and that **the cases of re-positivity are due to technical limitations inherent in PCR tests.**

He added that **PCR testing cannot distinguish whether a virus is alive or dead, and that if the amount of viral genetic material contained in epithelial cells is small, the reliability of the test results decreases.**



정은경 "산발적 감염 계속되는 건 무증상 감염자

2020.06.19 17:05

0 | 19일 중앙방역대책본부 브리핑



정은경 질병관리본부 중앙방역대책본부장 브리핑을 진행하고 있다. 유튜브 화면 캡처

Eun-kyung Jeong, Head of Central Quarantine Countermeasures Headquarters

<https://www.dongascience.com/news.php?idx=37594>

Director Eun-kyung Jeong said “Currently, the World Health Organization (WHO) and the U.S. Centers for Disease Control and Prevention (CDC) have changed the quarantine release standards, and **because dead virus fragments remain positive for a long time**, it is considered inappropriate to set the quarantine release standards through PCR only”. “In Korea, a revision is being made using supporting data that link and analyze virus culture tests and PCR results”.

.....



Jun-wook Kwon, Deputy Director of the Central Quarantine Countermeasures Headquarters

<https://www.youtube.com/watch?v=ZouJk1LqP2k>

Many clinical experts believe that one of the possibilities is that fragments remaining in some non-infectious or low-infectious viruses appear during the amplification process of real-time RT-PCR.



Publicerat material

Sök publikationer

Borttagna publikationer +

Kundtjänst och köpvillkor

Remisser och yttranden +

Konferensdokumentation

Föreskrifter och allmänna råd +

Utblick folkhälsa +

E-utbildningar

Vägledning om kriterier för bedömning av smittfrihet vid covid-19

Folkhälsomyndigheten har tagit fram nationella kriterier för bedömning av smittfrihet vid covid-19.

PCR-tekniken som används i test för att påvisa virus kan inte skilja på virus med förmåga att infektera celler och virus som oskadiggjorts av immunförsvaret och därför kan man inte använda dessa test för att avgöra om någon är smittsam eller inte. RNA från virus kan ofta påvisas i veckor (bland månader) efter insjuknandet men innebär inte att man fortfarande är smittsam. Det finns också flera vetenskapliga studier som talar för att smittsamheten vid covid-19 är som störst i början av sjukdomsperioden.

De rekommenderade kriterierna för bedömning av smittfrihet grundar sig därför på stabil klinisk förbättring med feberfrihet i minst två dygn och att det gått minst sju dagar sedan symptomen började. För de som haft mera uttalade symptom gäller minst 14 dagar sedan insjuknandet och för de allra sjukaste, individuell bedömning av behandlande läkare.

Kriterierna har tagits fram i samarbete med företrädare för specialtetsföreningarna inom infektionsmedicin, klinisk mikrobiologi, hygien och smittskydd. Dessa har senast diskuterats i gruppen vid möte 19 april 2021 med anledning av de nya virusvarianterna. Bedömningen blev då att ingen uppdatering behövdes. Rekommendationerna kommer att uppdateras allteftersom ny kunskap om smittsamhet vid covid-19 tillkommer.

Öppna publikationen

Las publikation

Beställ

Denna publikation finns ej för beställning.

<https://www.folkhalsomyndigheten.se/publicerat-material/publikationsarkiv/v/vagledning-om-kriterier-for-bedomning-av-smittfrihet-vid-covid-19/>

Information on criteria for assessing COVID-19 infection

The Swedish Public Health Agency has developed national criteria for assessing whether a person is infected with COVID-19.

PCR techniques used in tests to detect viruses cannot distinguish between viruses that can infect cell cultures and viruses that have been inactivated by the immune system, so these tests cannot be used to confirm infection. RNA from the virus can be detected for weeks (sometimes months) after infection, but that doesn't mean a person is still infectious. In addition, several scientific studies have shown that COVID-19 is most infectious in the early stages of the outbreak.

KOREAN ORIGINALS

감염병의 예방 및 관리에 관한 법률 (약칭: 감염병예방법)

[시행 2021. 10. 19.] [법률 제18507호, 2021. 10. 19., 일부개정]

<https://www.law.go.kr/법령/감염병의예방및관리에관한법률>

제 6 조(국민의 권리와 의무)

② 국민은 감염병 발생 상황, 감염병 예방 및 관리 등에 관한 정보와 대응방법을 알 권리가 있고, 국가와 지방자치단체는 신속하게 정보를 공개하여야 한다.

제 16 조의 2 (감염병병원체 확인기관)

① 다음 각 호의 기관(이하 “감염병병원체 확인기관”이라 한다)은 실험실 검사 등을 통하여 감염병병원체를 확인할 수 있다.

제 42 조(감염병에 관한 강제처분)

②-3. 감염 여부 검사

행정절차법

[시행 2020. 6. 11.] [법률 제16778호, 2019. 12. 10., 일부개정]

<https://www.law.go.kr/법령/행정절차법>

제 5 조(투명성)

③ 행정청은 상대방에게 행정작용과 관련된 정보를 충분히 제공하여야 한다.

제 21 조(처분의 사전 통지)

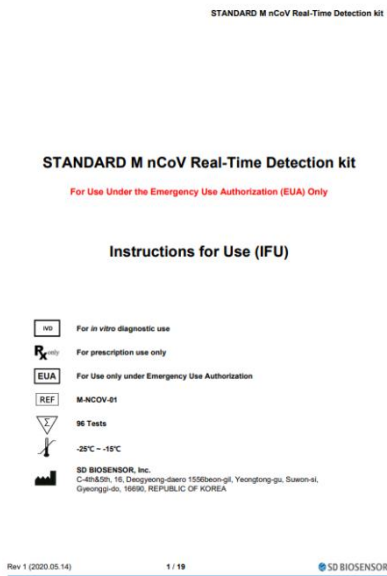
① 행정청은 당사자에게 의무를 부과하거나 권익을 제한하는 처분을 하는 경우에는 미리 다음 각 호의 사항을 당사자등에게 통지하여야 한다.

1. 처분의 제목
2. 당사자의 성명 또는 명칭과 주소
3. 처분하려는 원인이 되는 사실과 처분의 내용 및 법적 근거
4. 제 3 호에 대하여 의견을 제출할 수 있다는 뜻과 의견을 제출하지 아니하는 경우의 처리방법
5. 의견제출기관의 명칭과 주소
6. 의견제출기한
7. 그 밖에 필요한 사항

제 27 조(의견제출)

① 당사자등은 처분 전에 그 처분의 관할 행정청에 서면이나 말로 또는 정보통신망을 이용하여 의견제출을 할 수 있다.

- ② 당사자들은 제 1 항에 따라 의견제출을 하는 경우 그 주장을 입증하기 위한 증거자료 등을 첨부할 수 있다.
- ③ 행정청은 당사자들이 말로 의견제출을 하였을 때에는 서면으로 그 진술의 요지와 진술자를 기록하여야 한다.
- ④ 당사자들이 정당한 이유 없이 의견제출기한까지 의견제출을 하지 아니한 경우에는 의견이 없는 것으로 본다.



에스디바이오센서 SD BIOSENSOR

STANDARD M nCoV Real-Time Detection kit

<https://www.fda.gov/media/137302/download>

Nucleic acid may persist even after the virus is no longer viable.

바이러스가 더 이상 생존할 수 없는 경우에도 핵산은 지속될 수 있습니다.

Syndrome (MERS) and more serious diseases such as acute respiratory syndrome (SARS). This kit is helpful for the auxiliary diagnosis of SARS-CoV-2 infection. The test results are for clinical reference only and cannot be used as a basis for confirming or excluding cases alone.

이 키트는 SARS-CoV-2 감염의 보조 진단에 도움이 됩니다. 검사결과는 단지 임상 참조용이며, 이 검사만으로는 감염여부를 확인하거나 배제하는데 사용할 수 없습니다.



Allplex™ 2019-nCoV Assay

씨젠 Seegene

Allplex 2019-nCoV Assay

<https://www.fda.gov/media/137178/download>

**Allplex™ 2019-nCoV Assay
(version 2.2; April 15th, 2021)**

(Cat no. RP10250X / RP10252W)

Instructions for Use

For *in vitro* diagnostic use
For Emergency Use Authorization Only
Prescription Use only



Detection of viral RNA may not indicate the presence of infectious virus or that 2019-nCoV is the causative agent for clinical symptoms.

바이러스 RNA 의 검출은 감염성 바이러스의 존재를 나타내지 않을 수 있다. 또한 바이러스 RNA 의 검출은 SARS-CoV-2 가 임상 증상의 원인이 되는 것을 나타내지 않을 수 있다.

SNU Responds to COVID-19



서울대학교

홈 연구 영상 대응 매뉴얼 및 공지 언론보도 학술행사 연구진 카드뉴스

END

연구

Medical Science

코로나-19 확진자가 재감염될 수 있는가?

2020.07.31.



박완범 교수
서울의대 코로나19 과학위원회 위원
서울의대 감염내과



박완범 교수

서울의대 코로나 19 과학위원회 위원

서울의대 감염내과

<https://www.snu.ac.kr/coronavirus/research?md=v&bbsidx=128818>

금년 4월 18일 중앙방역대책본부 정례 브리핑에서 코로나 19 격리해제 후 다시 양성으로 판정된 재양성 사례는 전국적으로 총 163건이며, 격리해제자의 2.1% 수준인 것으로 보고하였다. 하지만, 전문가들은 이러한 재양성 사례는 재감염은 아닌 것으로 판단하고 있다. 그 이유는 다음과 같다. 첫째, 현재 코비드-19 진단을 위한 검사 방법은 바이러스 입자 자체를 검출하는 것이 아니고 바이러스의 RNA 유전자를 실시간 중합효소 연쇄반응(real-time PCR)으로 검출하는 것이다. 따라서 증식 가능한 바이러스 없이 유전자 찌꺼기만 있어도 검사는 양성으로 나올 수 있다.



오명돈 중앙임상위원장이

<https://www.yna.co.kr/view/AKR20200429095700017>

오 위원장은 "국내에서는 코로나 19 진단을 위해 이 바이러스의 유전자를 증폭해 검출하는 'PCR' 검사를 이용하는데, 재양성 사례는 PCR 검사에 내재한 기술적인 한계 때문"이라고 설명했다.

그는 "PCR 검사로는 바이러스가 살아있는지, 죽어있는지를 구분할 수 없는 데다, 상피세포 속에 들어있는 바이러스 유전물질의 양이 적으면 검사 결과의 신뢰도가 낮아진다"고 부연했다.



정은경 "산발적 감염 계속되는 건 무증상 감염자

2020.06.19 17:05

0 | 19일 중앙방역대책본부 브리핑

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정은경 질병관리본부 중앙방역대책본부장 브리핑을 진행하고 있다. 유튜브 화면 캡처

정은경 중앙방역대책본부장

<https://www.dongascience.com/news.php?idx=37594>

정은경 본부장은 “현재 세계보건기구(WHO)와 미국 질병통제예방센터(CDC) 등이 격리해제 기준을 변경했는데, **죽은 바이러스 조각들이 오랫동안 양성으로 나오기 때문에** PCR 만으로 격리해제 기준을 정하는 것은 적절성이 떨어진다고 보고 있기 때문”이라며 “국내에서도 바이러스 배양 검사와 PCR 결과를 연계 분석한 근거자료를 갖고 개정안을 만들고 있다”고 밝혔다.





권준욱 중앙방역대책본부 부본부장

<https://www.youtube.com/watch?v=ZouJk1LqP2k>

많은 임상 전문가들은 가능성의 하나로 감염력은 없거나 떨어지는 어떤 바이러스에 남아있는 조각들이 리얼 타임 RT-PCR의 증폭과정에서 나타나는 것 아니겠냐.





Publicerat material

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Borttagna publikationer +

Kundtjänst och köpvillkor

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Konferensdokumentation

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Vägledning om kriterier för bedömning av smittfrihet vid covid-19

Folkhälsomyndigheten har tagit fram nationella kriterier för bedömning av smittfrihet vid covid-19.

PCR-tekniken som används i test för att påvisa virus kan inte skilja på virus med förmåga att infektera celler och virus som oskadiggjorts av immunförsvaret och därför kan man inte använda dessa test för att avgöra om någon är smittsam eller inte. RNA från virus kan ofta påvisas i veckor (bland månader) efter insjuknandet men innebär inte att man fortfarande är smittsam. Det finns också flera vetenskapliga studier som talar för att smittsamheten vid covid-19 är som störst i början av sjukdomsperioden.

De rekommenderade kriterierna för bedömning av smittfrihet grundar sig därför på stabil klinisk förbättring med feberfrihet i minst två dygn och att det gått minst sju dagar sedan symptomen började. För de som haft mera uttalade symptom gäller minst 14 dagar sedan insjuknandet och för de allra sjukaste, individuell bedömning av behandlande läkare.

Kriterierna har tagits fram i samarbete med företrädare för specialtidsföreningarna inom infektionsmedicin, klinisk mikrobiologi, hygien och smittskydd. Dessa har senast diskuterats i gruppen vid möte 19 april 2021 med anledning av de nya virusvarianterna. Bedömningen blev då att ingen uppdatering behövdes. Rekommendationerna kommer att uppdateras allteftersom ny kunskap om smittsamhet vid covid-19 tillkommer.

Öppna publikationen

Läs publikation

Beställ

Denna publikation finns ej för beställning.

<https://www.folkhalsomyndigheten.se/publicerat-material/publikationsarkiv/v/vagledning-om-kriterier-for-bedomning-av-smittfrihet-vid-covid-19/>

코로나 19 감염 여부 평가 기준 안내

스웨덴 공중보건국은 코로나 19 감염 여부를 평가하기 위한 국가 기준을 개발했습니다.

바이러스를 검출하기 위한 검사에 사용되는 PCR 기술은 세포 배양을 감염시킬 수 있는 바이러스와 면역 체계에 의해 비활성화된 바이러스를 구별할 수 없으므로 이러한 검사를 사용하여 감염 여부를 확인할 수 없습니다. 바이러스의 RNA 는 감염 후 몇 주(때로는 몇 달) 동안 검출될 수 있지만 사람이 여전히 감염성이 있다는 의미는 아닙니다. 또한 코로나 19 의 감염성은 발병 초기에 가장 높다는 여러 과학적 연구 결과가 있습니다.