



# Efforts to return to a normal society

Jong-Koo Lee 

COVID-19 Committee, National Academy of Medicine of Korea, Seoul, Korea

Every year, people in the Republic of Korea have traditionally worn masks during the winter due to influenza and fine air particulate matter. However, with the outbreak of coronavirus disease 2019 (COVID-19), mandatory mask-wearing regulations were introduced. As the country now moves into the restoration stage, it is necessary to revise these guidelines. Recently, most non-pharmaceutical intervention measures in the Republic of Korea have been relaxed, and the mandatory use of indoor face masks is being reviewed. This requirement was somewhat confusing, as it differed from World Health Organization (WHO) guidelines due to shortages of supply in the early stages of the pandemic. However, the presence of asymptomatic infections and the possibility of air transmission led to mandatory mask use being implemented. Mask use was promoted when a legal requirement to wear masks was introduced due to concerns about the spread of infectious disease (Infectious Disease Control and Prevention Act, revised on August 12, 2020).

As the vaccination uptake rate, including booster shots, increased and the number of patients decreased, the mandatory outdoor mask requirement was abolished on September 26, 2022. However, wearing masks indoors, such as on buses, taxis, ships, aircraft, and in buildings, is still recommended [1]. This is due to the recent increase in the number of patients and severely ill patients, as well as the low vaccination uptake rate among high-risk groups. The trends in outbreak response are being reviewed step by step, but measures are generally promoted and viewed as desirable based on medical and public health precautions rather than compulsion. Even before the COVID-19 pandemic, mask-wearing was recommended during influenza epidemics. Currently, an influenza epidemic is being reported after a 3-year absence due to the COVID-19 pandemic. The rate of influenza-like illness has increased from 30.3 to 41.9 compared to last week, and the respiratory virus detection rate has also increased to 83.3%, so it is reasonable to recommend wearing masks as a basic health measure [2].

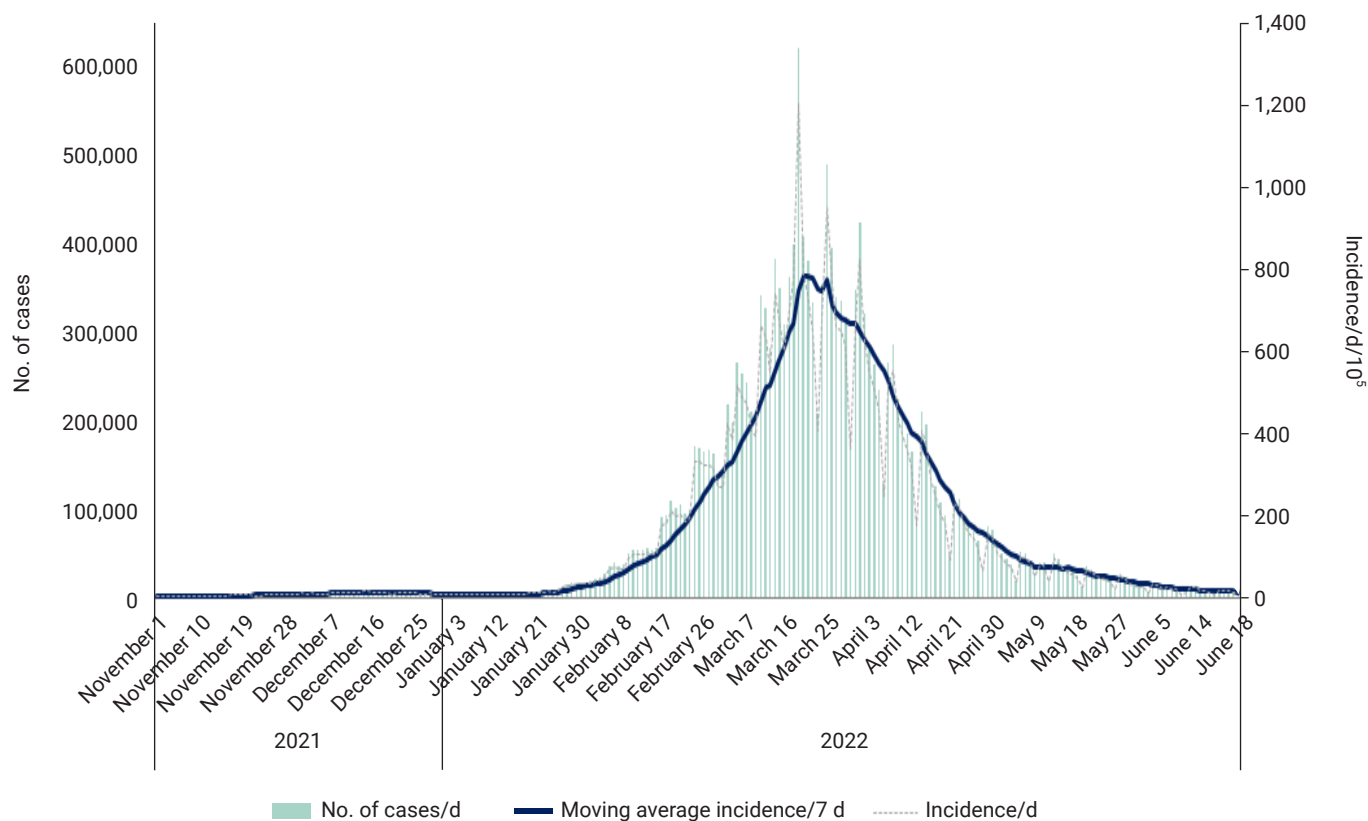
In addition, while China's zero-COVID policy has suppressed the Omicron epidemic, it is expected that the spread of the Omicron variant will significantly increase with the relaxation of these policies. It is difficult to obtain accurate statistics from China, but it is believed that more than 1/3 of the population in Korea was infected in the last Omicron epidemic from 4th week to 22th week (Figure 1) [3], and a similar situation is likely to occur in China. However, it is important to consider the possibility that a new variant may emerge and cause a local epidemic, potentially becoming the source of a global pandemic. Most quarantine measures have already been lifted, such as the cancellation of quarantine measures for entrants (on June 8, 2022), the cancellation of the requirement for negative test certification (on September 3, 2022), and the cancellation of the requirement for polymerase chain reaction (PCR) tests after

Received: December 28, 2022

Accepted: December 28, 2022

**Corresponding author:**

Jong-Koo Lee  
COVID-19 Committee, National  
Academy of Medicine of Korea,  
601 Soho Building, 70-15,  
Ihwajang-gil, Jongno-gu, Seoul  
03088, Korea  
E-mail: docmohw@snu.ac.kr



**Figure 1.** Confirmed cases and incidence rate (November 1, 21–June 18, 2022).  
 Reprinted from Korea Disease Control and Prevention Agency [3].

entry (on October 1, 2022) [4]. It is particularly important to mitigate the impact of the situation in China on Korea by strengthening fever screening tests for entrants, ensuring prompt PCR confirmation for symptomatic patients, and conducting virus sequencing tests, as it is difficult to obtain accurate information about the outbreak in China and it would not be easy to decide whether or not to go back to September.

At the end of November 2022, a ministerial meeting of the Global Health Security Agenda (GHSA) was held in Seoul, Republic of Korea. This was the second ministerial-level meeting since the Middle East respiratory syndrome outbreak in 2015, and the Minister emphasized that the country has been successfully addressing the threat of COVID-19 by strengthening its ability to respond to infectious diseases through the GHSA and active international cooperation. Twenty-seven countries, 10 international organizations, and 27 embassies participated and shared best practices. The meeting discussed the third vision for the next 5 years until 2028, which includes the full implementation of the International Health Regulations and the strengthening

of technological capabilities at the national level. In particular, the Joint External Evaluation, the Global Health Security index, and the Fiscal Intervention Fund were mentioned as important achievements during the previous 2 periods. These efforts are timely in order to overcome COVID-19 and respond to new infectious diseases that may arise in the future [5]. However, above and beyond its coordinating role in addressing on-site problems, international cooperation also plays an important role in emergency relief for vulnerable populations, universal healthcare, and improving the healthcare system. As the COVID-19 situation improves, these topics will be more actively discussed and our coordinating role by New Seoul Declaration will grow accordingly.

In conclusion, it is natural to restore society to normal after the COVID-19 pandemic. Improving mask-wearing guidelines is also a step towards a more normal society. However, as the global public health crisis stage of the WHO remains unmitigated and the potential risk cannot be fully evaluated due to inadequate reporting of the outbreak in China to the international community, the importance of measures for high-risk individuals and the role of vaccines

is underestimated. It will be necessary to gradually ease restrictions based on evidence in order to avoid giving false messages such as “the pandemic is over.” At the same time, we need to be prepared for the possibility of a new outbreak, such as “Disease X.”

## Notes

### Ethics Approval

Not applicable.

### Conflicts of Interest

The author has no conflicts of interest to declare.

### Funding

None.

## References

1. Korea Disease Control and Prevention Agency (KDCA). September 23, 2022 news briefing. Guideline for use of face masking [Internet]. Cheongju: KDCA; 2022 [cited 2022 Dec 24]. Available from: [https://www.kdca.go.kr/board/board.es?mid=a20501020000&bid=0015&list\\_no=720760&cg\\_code=C01&act=view&nPage=19](https://www.kdca.go.kr/board/board.es?mid=a20501020000&bid=0015&list_no=720760&cg_code=C01&act=view&nPage=19). Korean.
2. Korea Disease Control and Prevention Agency. Statistics of selected infectious diseases. Public Health Wkly Rep 2022;15 Suppl:P-15-51-S1-34. Korean.
3. Korea Disease Control and Prevention Agency (KDCA). June 21, 2022 news briefing. New cases of COVID-19 continue to decrease over the past 13 weeks [Internet]. Cheongju: KDCA; 2022 [cited 2022 Dec 24]. Available from: [https://www.kdca.go.kr/board/board.es?mid=a20501000000&bid=0015&list\\_no=719898&cg\\_code=&act=view&nPage=44](https://www.kdca.go.kr/board/board.es?mid=a20501000000&bid=0015&list_no=719898&cg_code=&act=view&nPage=44). Korean.
4. Korea Disease Control and Prevention Agency (KDCA). COVID-19 quarantine guideline (Korean version 14-2) [Internet]. Cheongju: KDCA; 2022 [cited 2022 Dec 24]. Available from: <http://nqs.kdca.go.kr/nqs/quaStation/incheon.do?gubun=notice&fromMainYn=Y&ctx=I1&contentid=241579>. Korean.
5. Korea Disease Control and Prevention Agency (KDCA). November 30, 2022 news briefing. New Seoul Declaration of GHSA Ministerial Meeting [Internet]. Cheongju: KDCA; 2022 [cited 2022 Dec 24]. Available from: [https://www.kdca.go.kr/board/board.es?mid=a20501010000&bid=0015&act=view&list\\_no=721292](https://www.kdca.go.kr/board/board.es?mid=a20501010000&bid=0015&act=view&list_no=721292). Korean.