



UPDATE: COVID-19 OCTOBER '21 EDITION

CLC ADULT FORUM: OCTOBER 3, 2021

DAVID WETHERHOLD MD

CLC IN PERSON GATHERING TASK FORCE

CHIEF MEDICAL INFORMATION OFFICER, SCRIPPS HEALTH

SENIOR CONSULTANT INTERNAL MEDICINE, SCRIPPS CLINIC MEDICAL GROUP



COVID-19'S DESTRUCTIVE PATH

- World
 - 219,000,000 cases & 4,500,000 deaths
- United States
 - 43,000,000 cases & 688,000 deaths
- California
 - 4,700,000 cases & 69,000 deaths
- San Diego
 - 355,000 cases & 4,054 deaths

WALL STREET JOURNAL

Covid's Hidden Toll: One Million Children Who Lost Parents

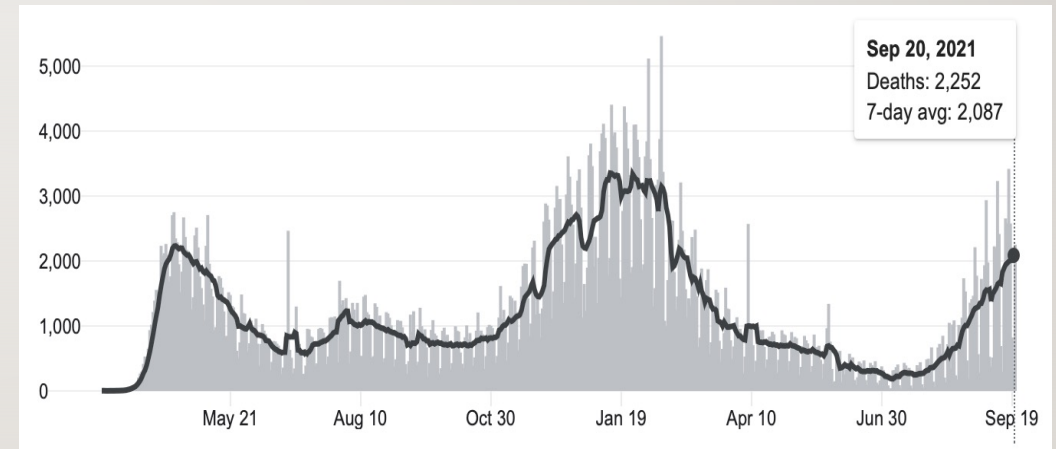
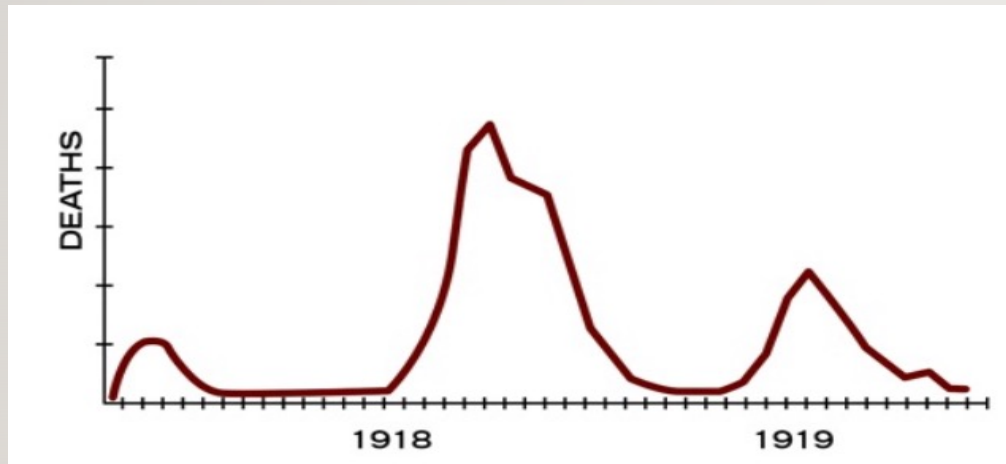
As virus claims primary caregivers, grandparents and aunts step in to care for kids; 'I've had to become their mom'

- Latin America hardest hit
 - 8% global population
 - 33% of Covid-19 deaths
-
- 1 of every 100 children in Peru lost primary parent
 - Mexico 120,000 children lost a parent
 - 40,000 children in the United States have lost at least 1 parent

1918 PANDEMIC VS 2020 PANDEMIC

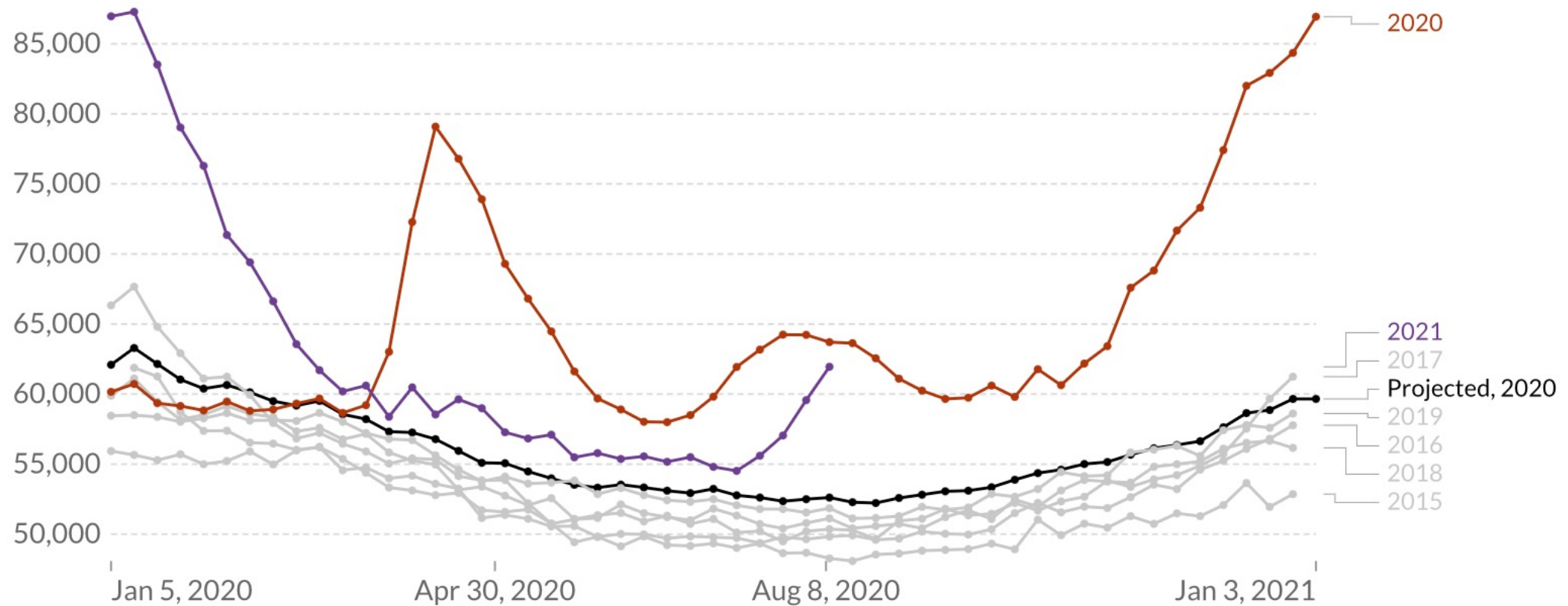
1918 DEATHS – 675,000 – 1 IN 150 AMERICANS

2020 DEATHS – 700,000 – 1 IN 500 AMERICANS



COVID DEATHS FAR EXCEED EXPECTED DEATHS LIFE EXPECTANCY DOWN 1.5 YEARS TO 77.3*

* Biggest drop since WWII



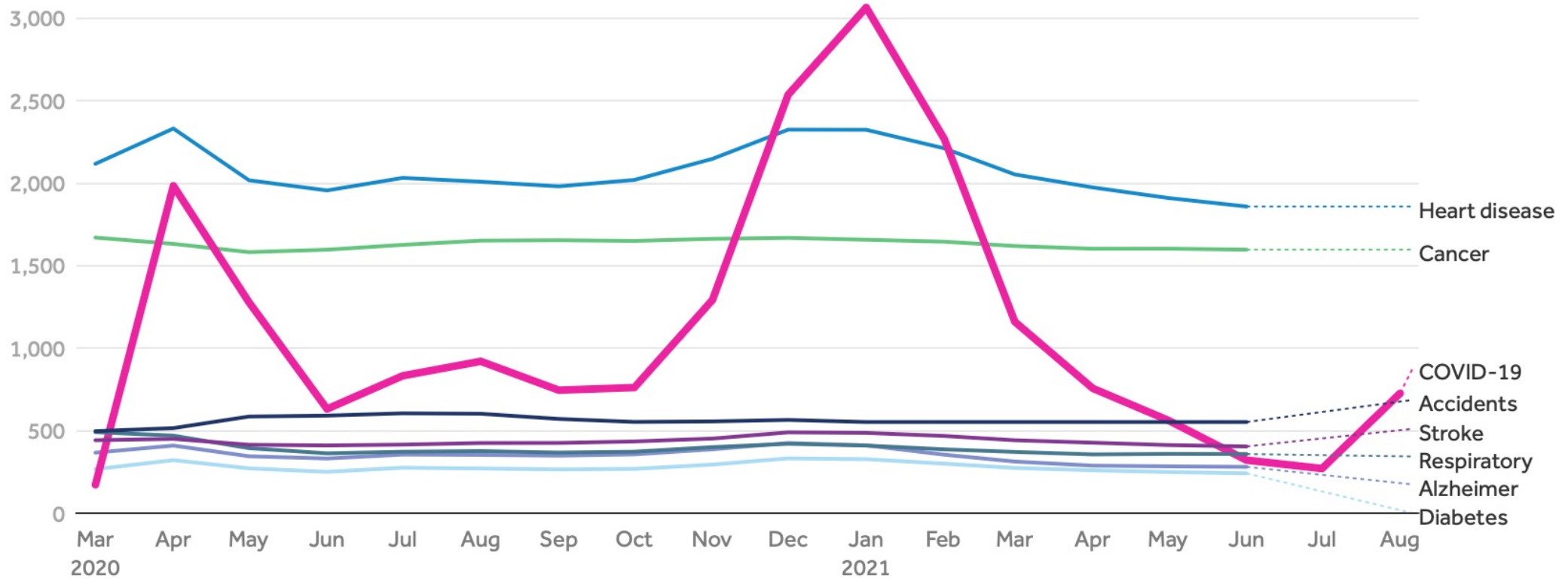
Source: Human Mortality Database (2021), World Mortality Dataset (2021)

Note: Comparisons across countries are affected by differences in the completeness of death reporting. Details can be found at our Excess Mortality page.

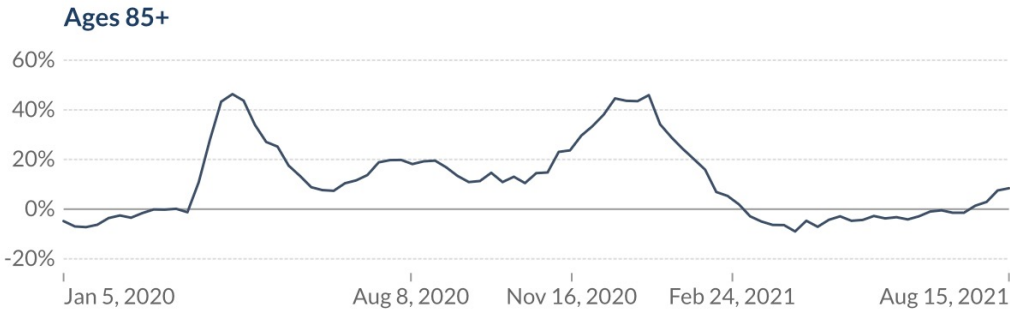
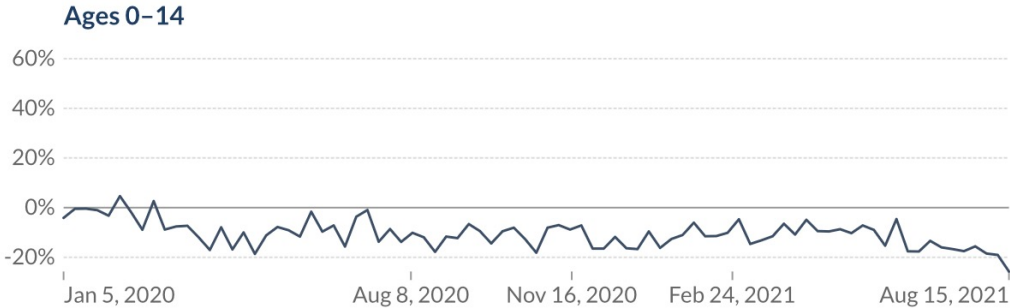
OurWorldInData.org/coronavirus • CC BY

COVID-19 DEATHS COMPARED TO OTHER CAUSES

Average daily deaths in the United States, by cause (March 2020 - August 2021)



EXCESS MORTALITY BY AGE GROUPS



Ages	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	All ages
Jan '21	11	6	4	2	2	1	1	1	1	1	1
Feb '21	13	7	5	4	4	3	3	2	1	2	1
Mar '21	15	8	6	6	5	4	3	3	3	5	3
Apr '21	7	7	6	6	5	4	3	3	3	5	3
May '21	11	9	5	6	5	4	3	3	5	6	3
Jun '21	15	12	7	6	5	4	4	5	7	7	6

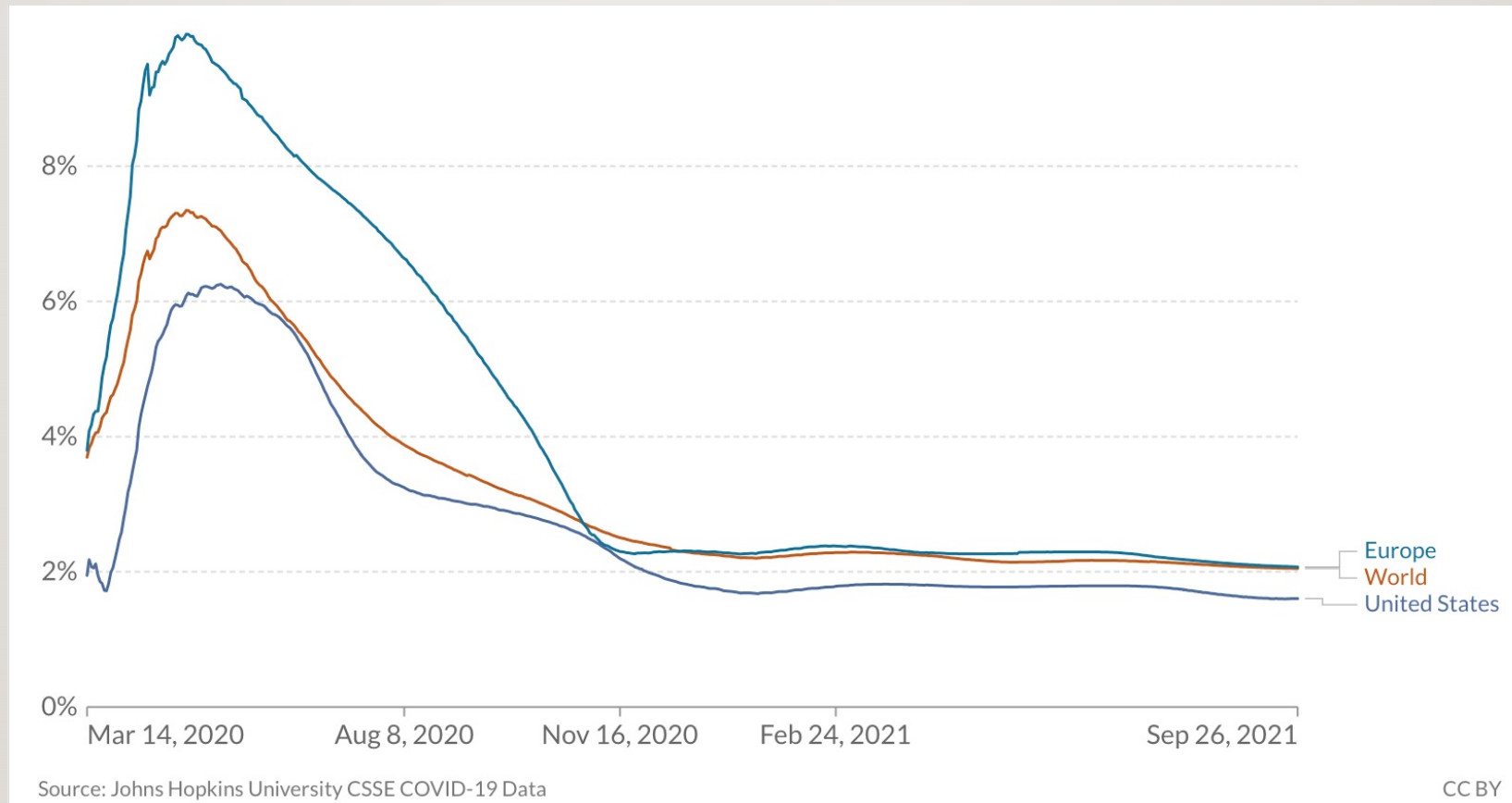
COVID-19 DEATHS UNDERREPORTED IN MOST AREAS

COUNTRY / CITY	TIME PERIOD	COVID-19 DEATHS	EXCESS DEATHS	EXCESS DEATHS PER 100K PEOPLE	
Peru	Mar 22nd 2020-Sep 4th 2021	198,450	194,570		593
Bulgaria	Apr 19th 2020-Aug 28th 2021	18,690	36,510		525
North Macedonia	Mar 31st 2020-Jun 29th 2021	5,480	10,470		504
Russia	Mar 31st 2020-Jul 30th 2021	155,940	652,070		446
Serbia	Mar 31st 2020-Jul 30th 2021	7,100	30,810		445
Moldova	Mar 31st 2020-May 30th 2021	6,100	11,050		419
Lithuania	May 24th 2020-Aug 28th 2021	4,490	11,510		412
South Africa	Apr 11th 2020-Sep 3rd 2021	83,320	234,980		394
Paraguay	Jul 31st 2020-Jul 30th 2021	14,930	16,310		390
Mexico	Mar 29th 2020-Aug 7th 2021	244,400	485,980		386
Ecuador	Mar 22nd 2020-Aug 28th 2021	23,430	64,980		367
Belarus	Mar 31st 2020-Mar 30th 2021	2,250	33,690		358
Albania	May 31st 2020-Jun 29th 2021	2,420	10,090		354
Bolivia	Mar 31st 2020-Jun 29th 2021	16,760	40,200		352
Romania	Mar 29th 2020-Jul 24th 2021	34,220	65,250		338
Czech Republic	Mar 29th 2020-Jul 31st 2021	30,360	35,100		328
Poland	Mar 29th 2020-Aug 14th 2021	75,280	124,370		324
Slovakia	Sep 27th 2020-Jul 17th 2021	12,480	17,360		318
Montenegro	Jul 26th 2020-Apr 24th 2021	1,420	1,910		306

28 ->

Bosnia and Herzegovina	Mar 31st 2020-Mar 30th 2021	6,590	10,050		304
Hungary	Apr 5th 2020-Aug 14th 2021	30,000	28,200		289
Brazil	Feb 29th 2020-Jul 30th 2021	556,370	600,150		286
Colombia	Apr 5th 2020-Jul 10th 2021	112,790	135,850		270
Croatia	Apr 19th 2020-Jul 31st 2021	8,220	10,800		266
Ukraine	Mar 31st 2020-Jun 29th 2021	54,560	102,770		247
Kazakhstan	May 31st 2020-Jun 29th 2021	7,720	46,020		246
Italy	Mar 1st 2020-Jun 26th 2021	127,440	148,560		246
United States	Mar 7th 2020-Aug 20th 2021	613,860	788,900		241
Kosovo	Jun 30th 2020-Jun 29th 2021	2,210	4,260		227
Latvia	Oct 18th 2020-Aug 21st 2021	2,520	4,100		215
Spain	Mar 8th 2020-Aug 28th 2021	83,980	101,950		215
Portugal	Mar 22nd 2020-Aug 28th 2021	17,710	21,530		209
Egypt	Mar 31st 2020-May 30th 2021	15,050	194,260		194
Slovenia	Apr 5th 2020-Aug 21st 2021	4,410	3,970		189
Chile	Apr 5th 2020-Aug 21st 2021	36,620	33,010		188
Britain	Mar 13th 2020-Aug 12th 2021	131,110	121,510		179
Estonia	Apr 26th 2020-Sep 4th 2021	1,250	2,270		171
Belgium	Mar 15th 2020-Aug 21st 2021	25,320	19,270		169

TREATING COVID-19 HAS IMPROVED

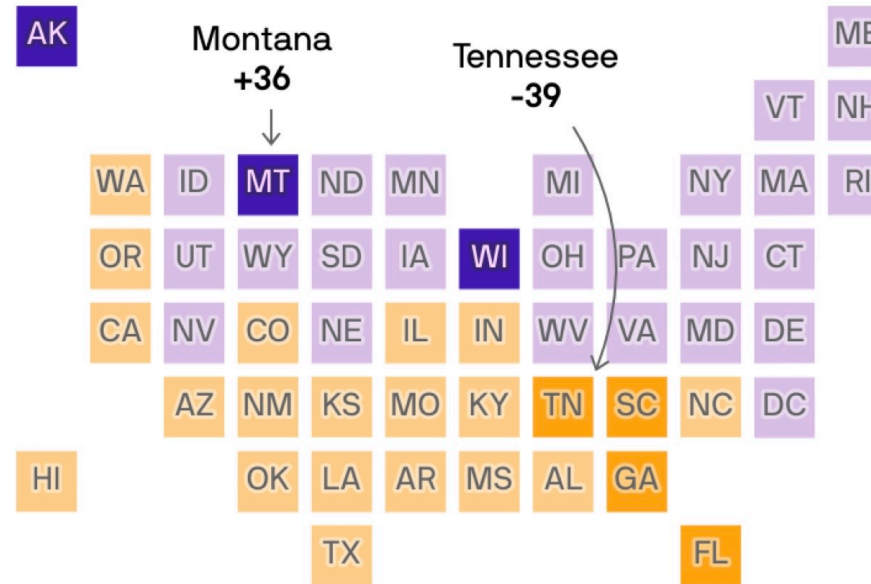


NATIONAL CHANGES IN COVID-19 NEW CASES

Change in COVID-19 cases per 100k
people in the last two weeks

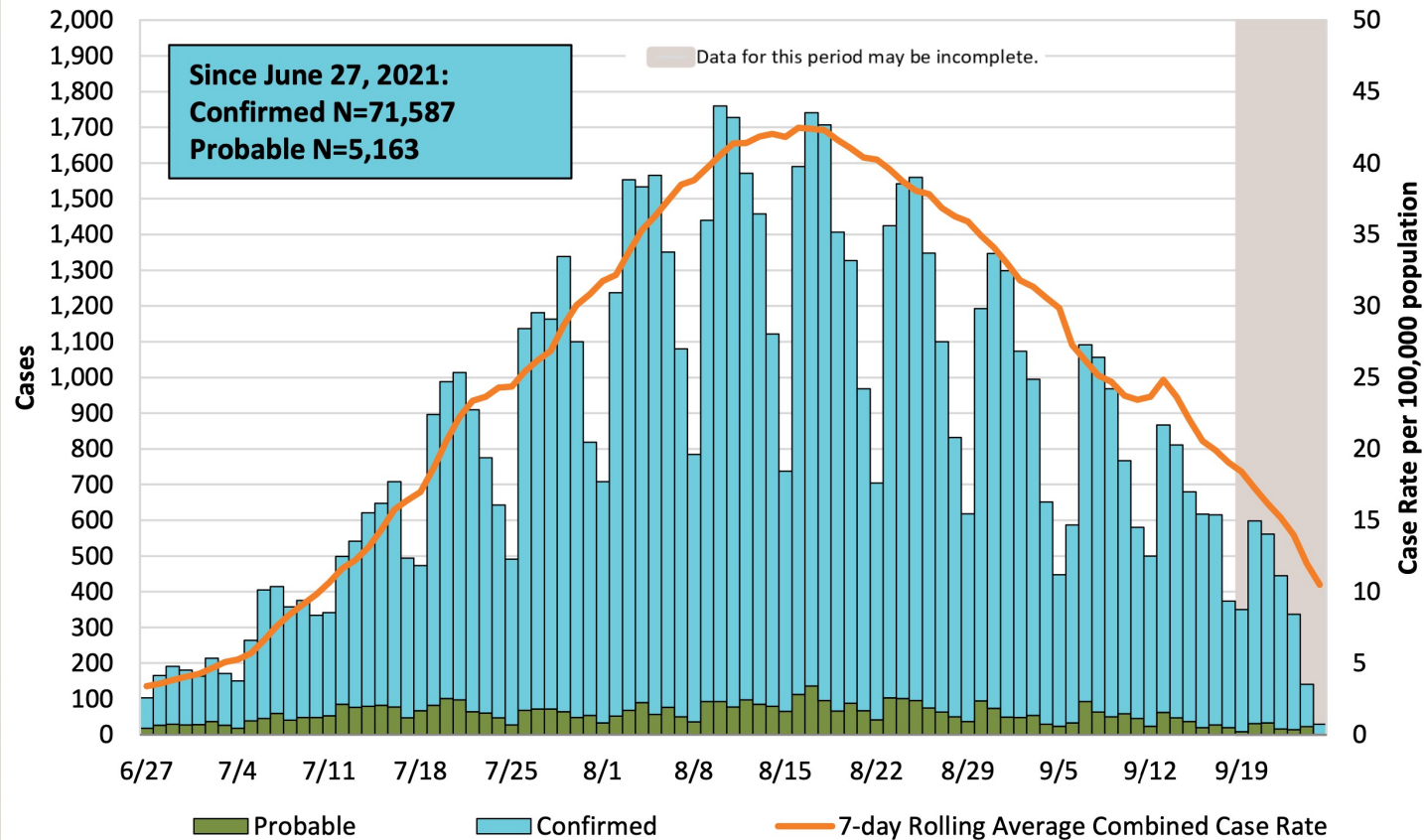
Sept. 8, 2021 to Sept. 21, 2021

Change in average number of cases per 100,000 people

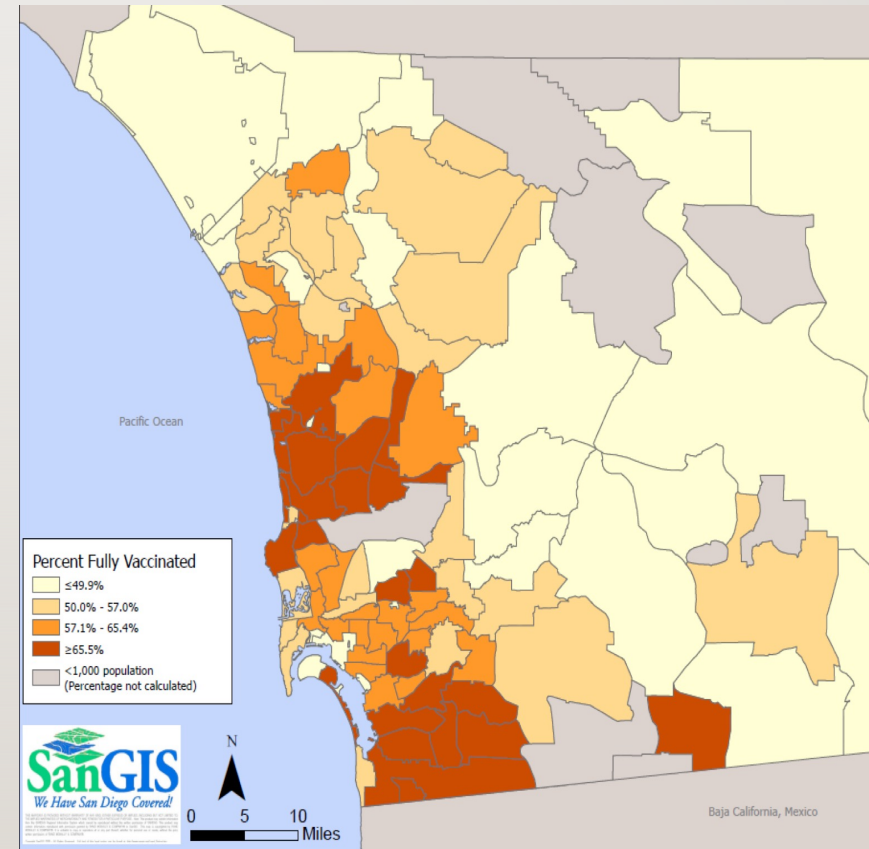
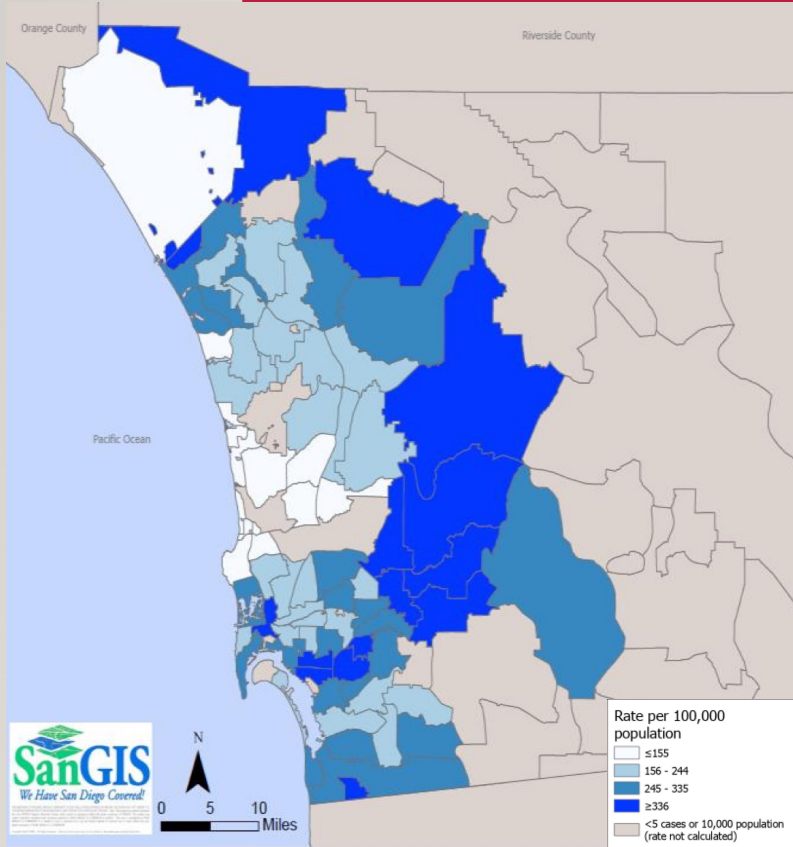


SAN DIEGO TODAY – DELTA (OR 3RD) SURGE WANING

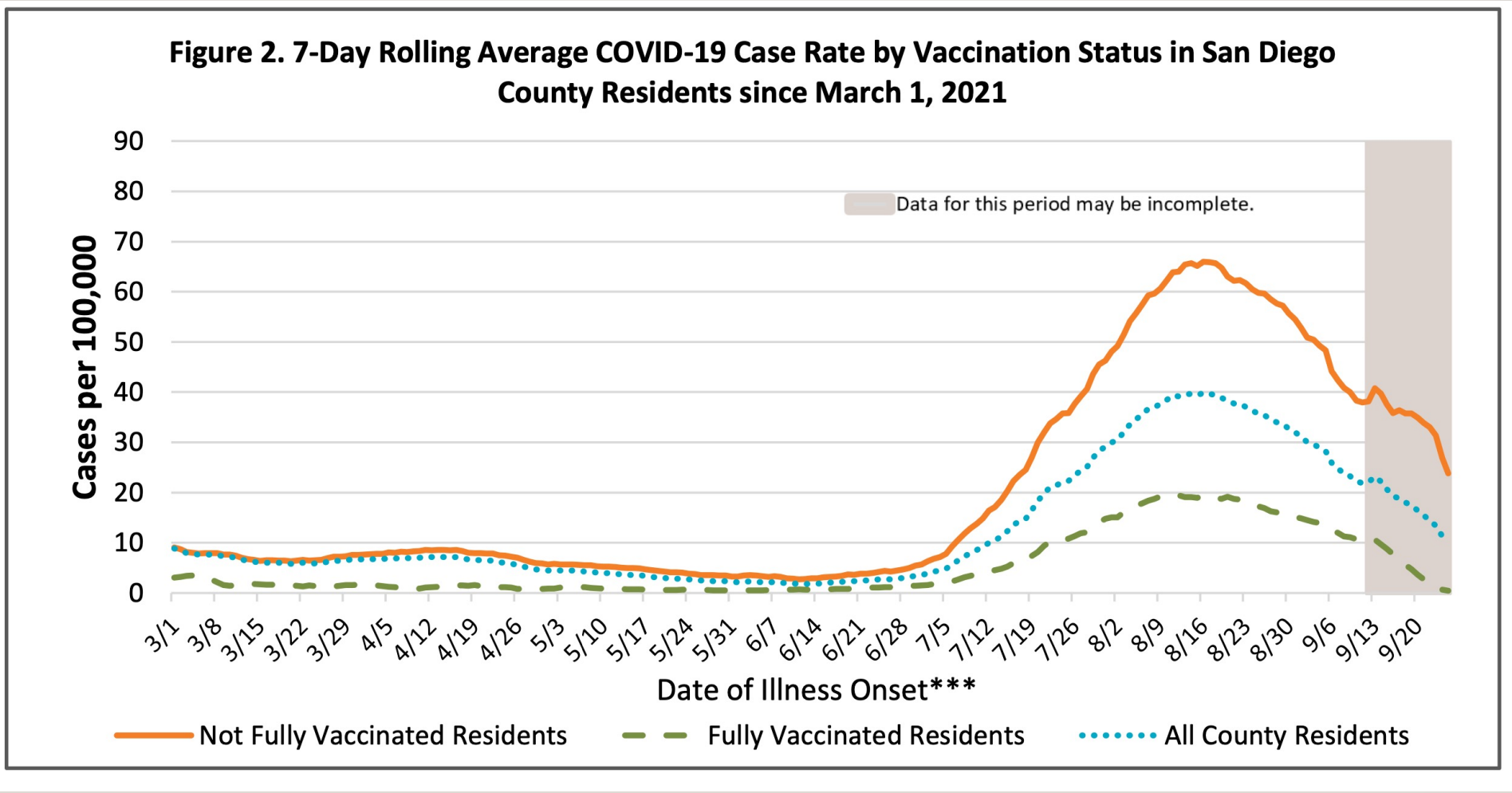
Figure 1. COVID-19 Confirmed and Probable Cases and 7-Day Rolling Average Case Rate by Date of Illness Onset*, San Diego County Residents, N=76,750



WHERE ARE CASES HAPPENING IN SD COMPARED TO VACCINATION STATUS?

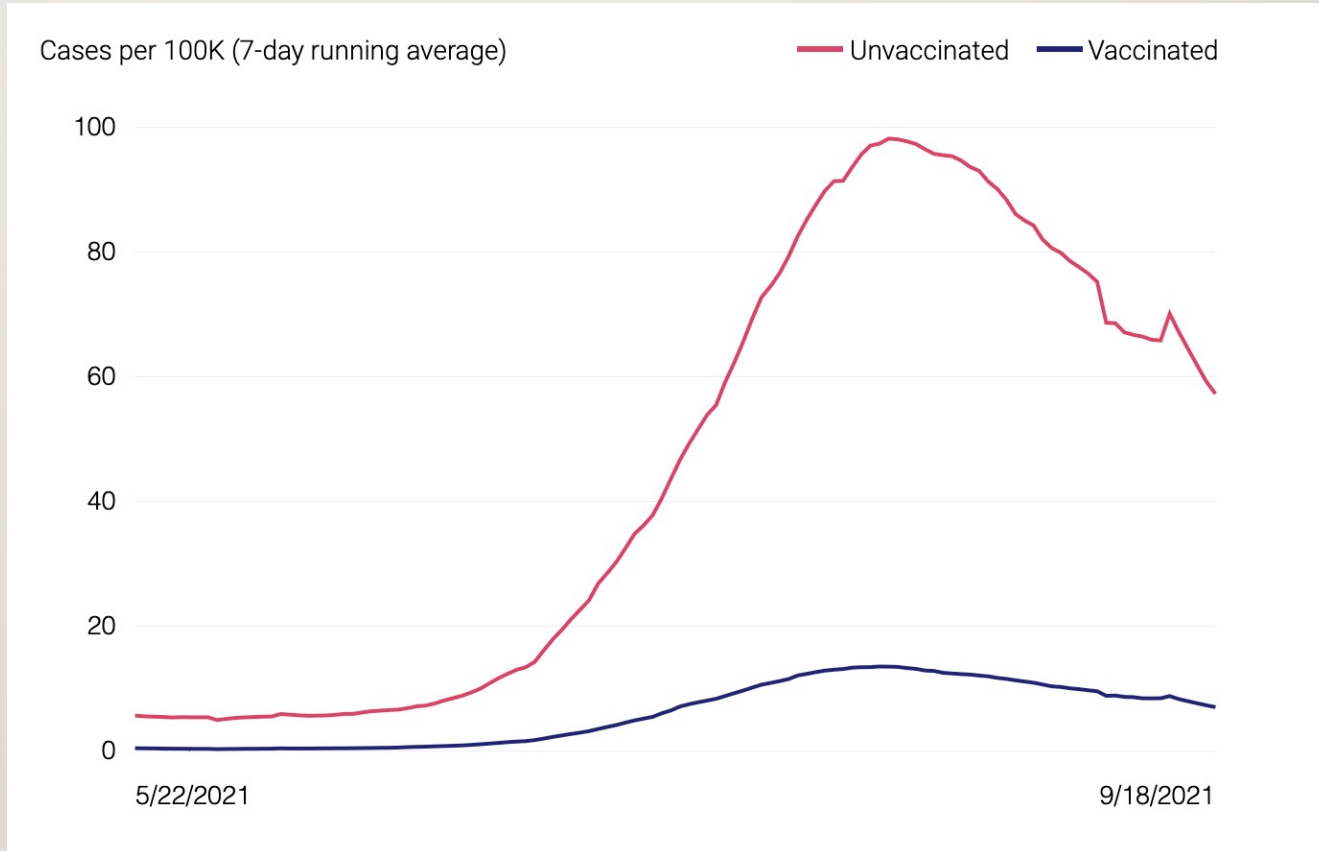


SAN DIEGO – UNVACCINATED 4 TIMES MORE INFECTIONS

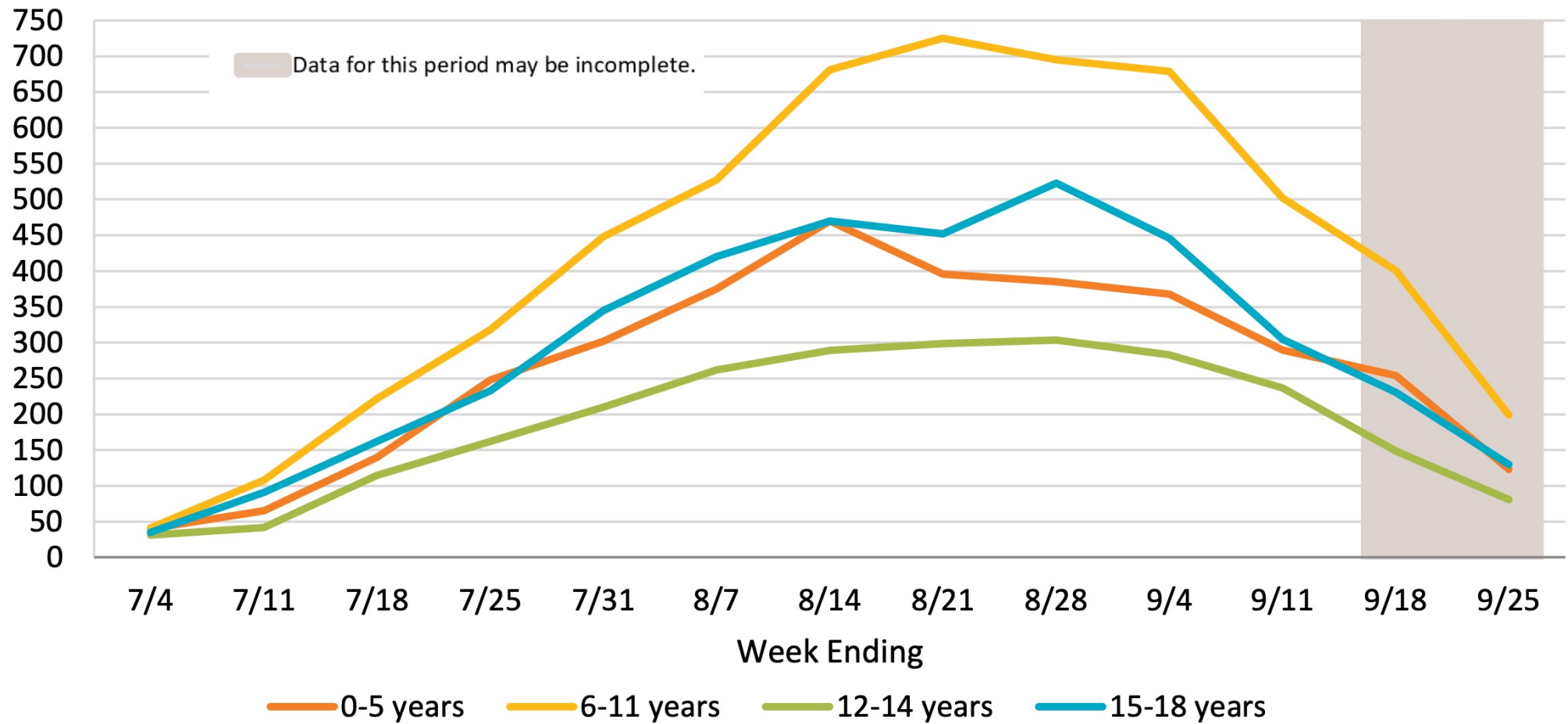


VACCINATION PREVENTING COVID-19 INFECTION

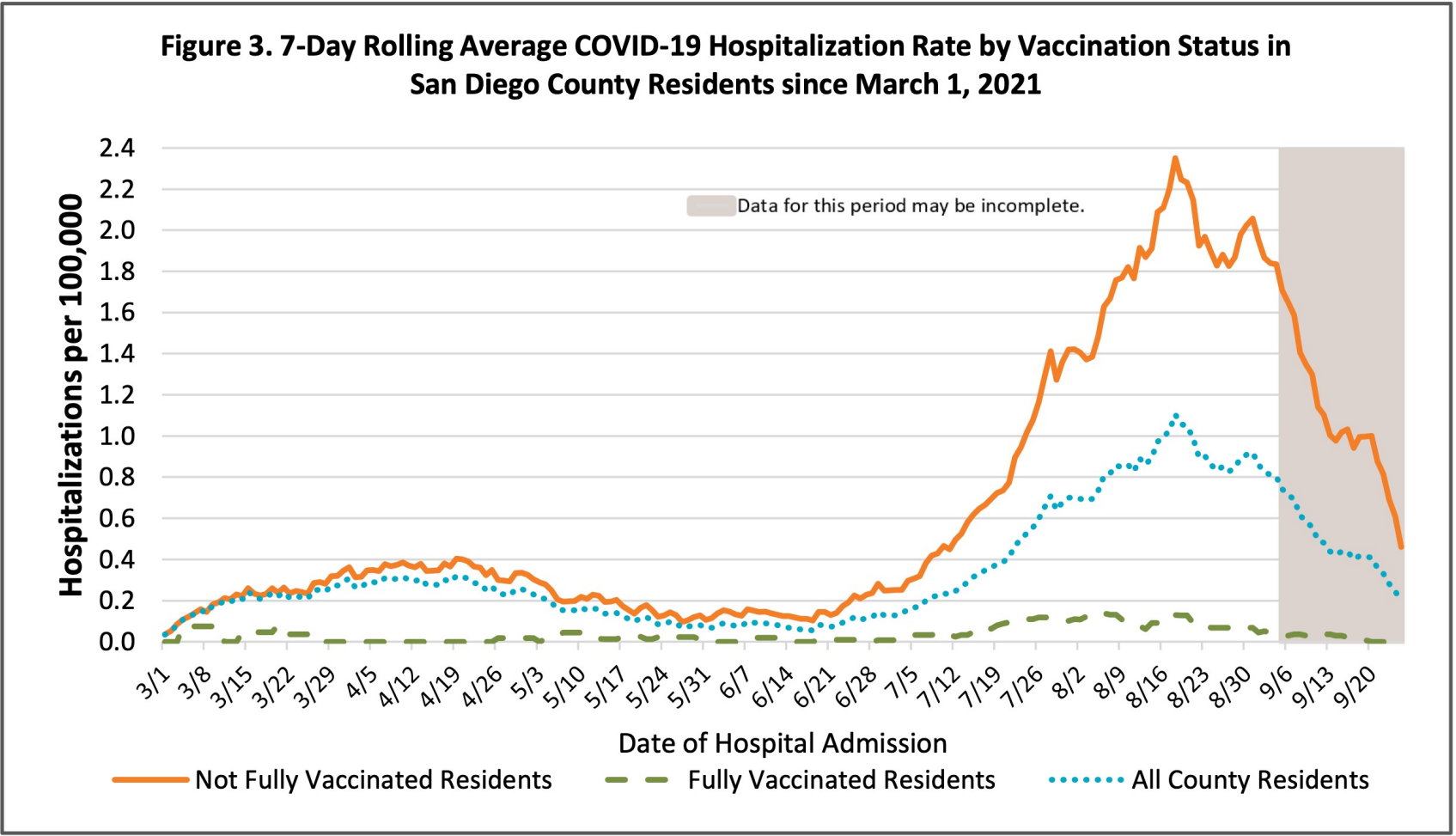
US DATA



CASES IN CHILDREN IN SCHOOL SETTINGS

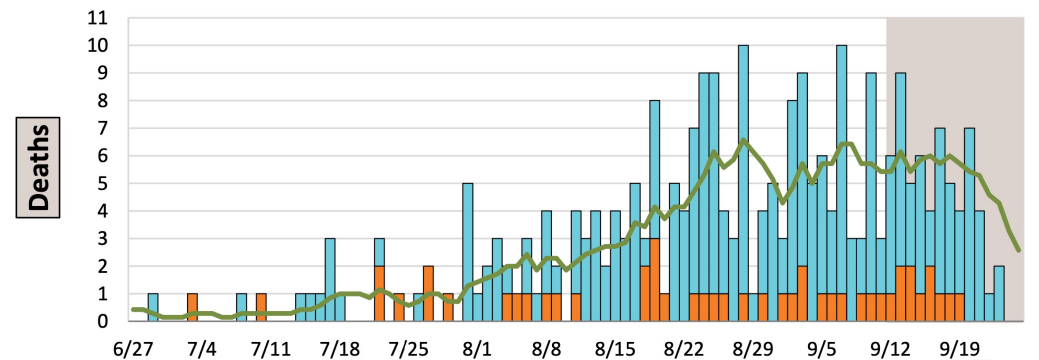
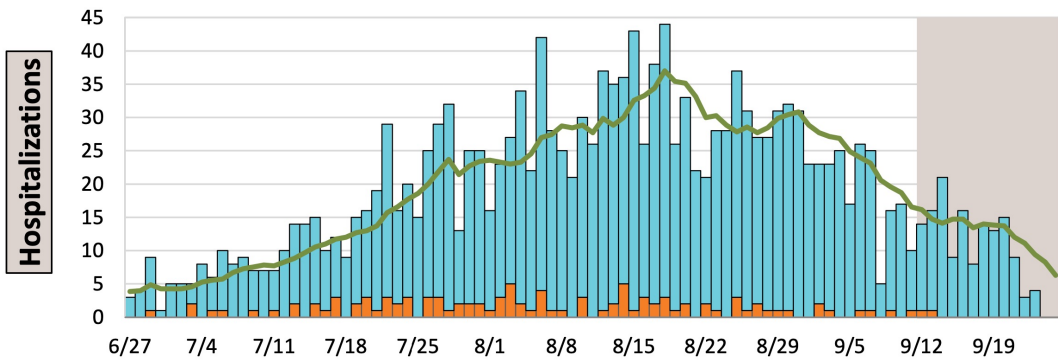
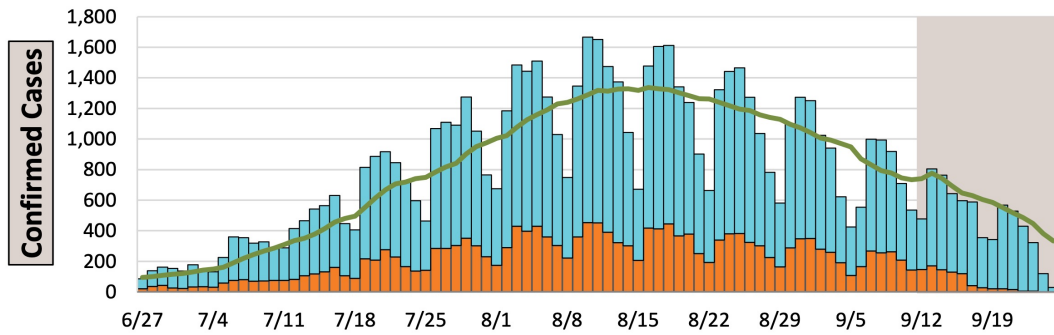


UNVACCINATED 46X MORE LIKELY TO BE HOSPITALIZED



VACCINATED VS UNVACCINATED VISUALS

Fully Vaccinated Not Fully Vaccinated 7-day Rolling Average



OUTCOMES VACCINATED VS UNVACCINATED

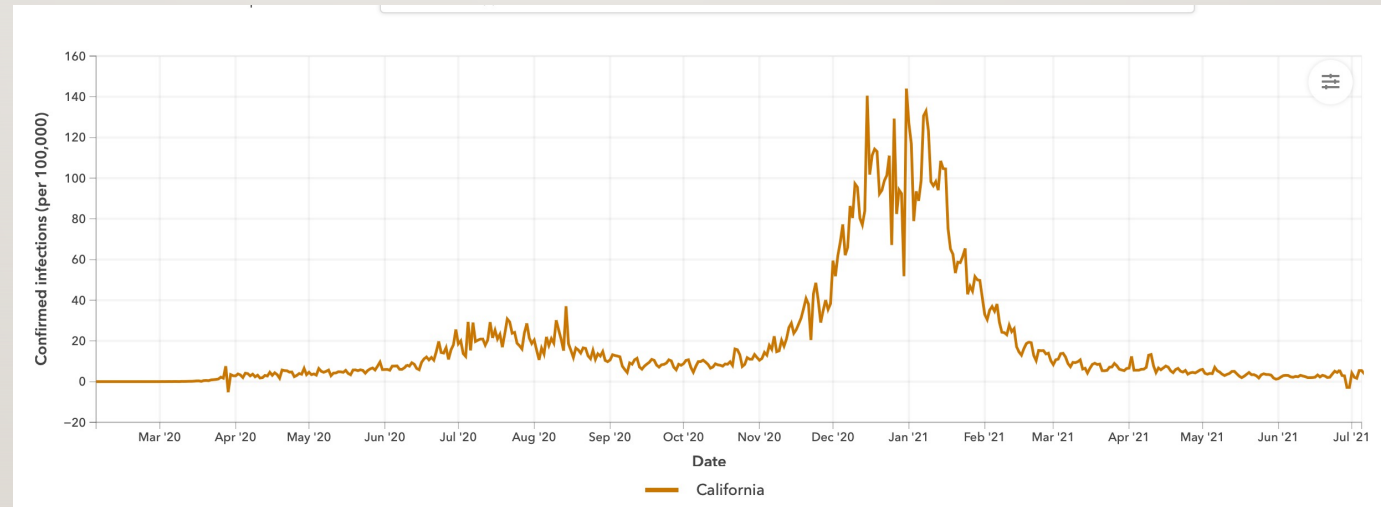
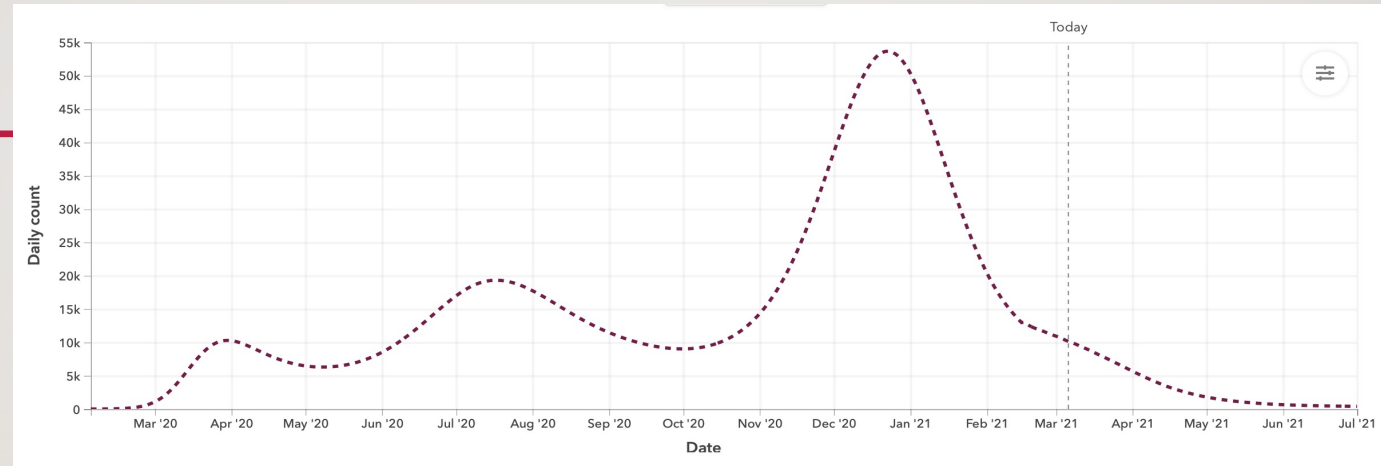
Since Jan. 1, 2021		Not Fully Vaccinated*		Fully Vaccinated**		All Cases
	Total Confirmed Cases*	159,801	89.1%	19,500	10.9%	179,301
	Hospitalizations	6,905	98.1%	131	1.9%	7,036
	Deaths	1,450	96.6%	51	3.4%	1,501
	Age of Confirmed Cases					
	Median Age (Years)	32		42		33
	Age Range (Years)	0-100+		12-100+		0-100+

Last 30 Days (8/30/2021 – 9/28/2021)		Not Fully Vaccinated*		Fully Vaccinated**		All Cases
	Total Confirmed Cases*	15,272	79.0%	4,066	21.0%	19,338
	Hospitalizations	370	97.9%	8	2.1%	378
	Deaths	30	83.3%	6	16.7%	36
	Age of Confirmed Cases					
	Median Age (Years)	30		43		33
	Age Range (Years)	0 – 100+		12 – 100+		0-100+

COST OF UNVACCINATED BEYOND LIVES

	June 2021	July 2021	August 2021	Total
New hospital admissions of adult patients with confirmed COVID-19	60,000	125,000	345,000	530,000
Estimated share of adults hospitalized with COVID-19 who were unvaccinated	86%	86%	86%	86%
Estimated number of unvaccinated adults hospitalized for COVID-19	51,000	108,000	297,000	456,000
Estimated share of hospitalizations primarily for COVID-19	75%	75%	75%	75%
Estimated number of unvaccinated adults hospitalized primarily for COVID-19	39,000	81,000	222,000	342,000
Estimated share of unvaccinated hospitalizations for COVID-19 that were preventable	84%	84%	84%	84%
Estimated number of preventable COVID-19 hospitalizations	32,000	68,000	187,000	287,000
Approximate cost per COVID-related hospital admission	\$20,000	\$20,000	\$20,000	\$20,000
Estimated preventable cost for unvaccinated COVID-related adult hospitalizations	\$0.6 Billion	\$1.4 Billion	\$3.7 Billion	\$5.7 Billion

PREDICTIVE MODELS – WHAT WAS PREDICTED IN MARCH



SAN DIEGO NEXT MONTH PREDICTION

California County Hospitalization Forecasts

Select a county to see how modeled number of hospitalizations compare with actual numbers to date and with the number of licensed hospital beds (black box).

San Diego

Current Daily Hospitalizations:

375 | 6,509

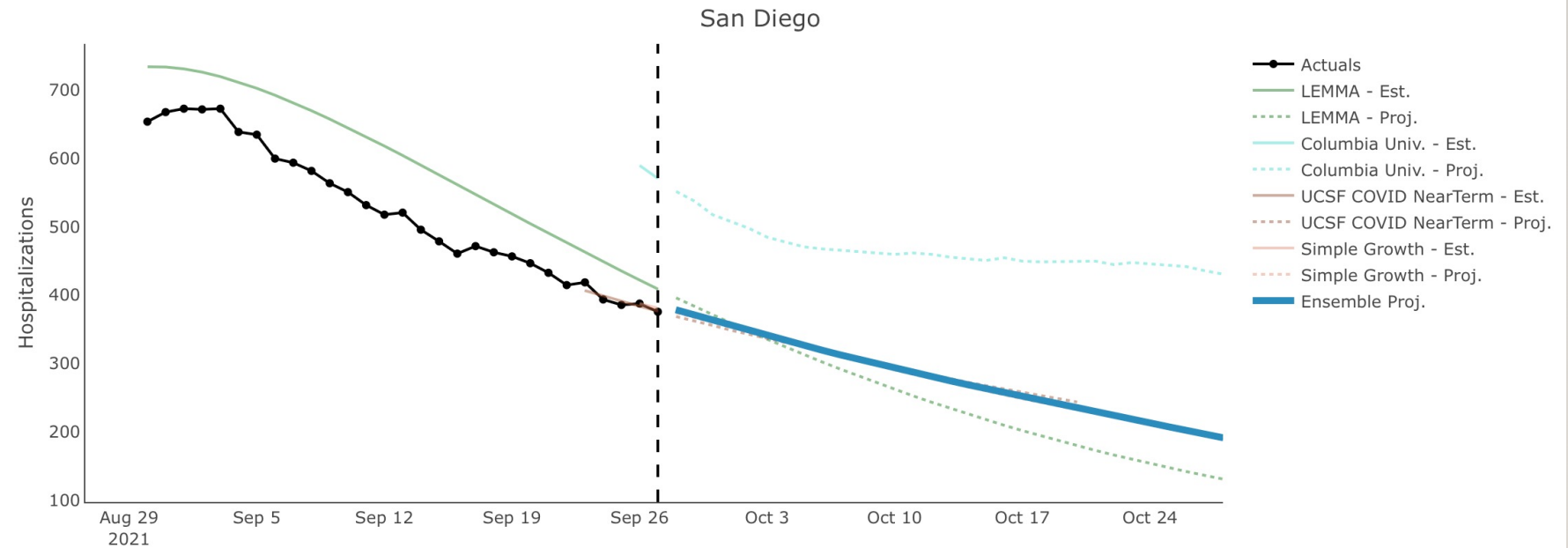
Actuals | Total Beds : 2021-09-27

Projected Daily Total:

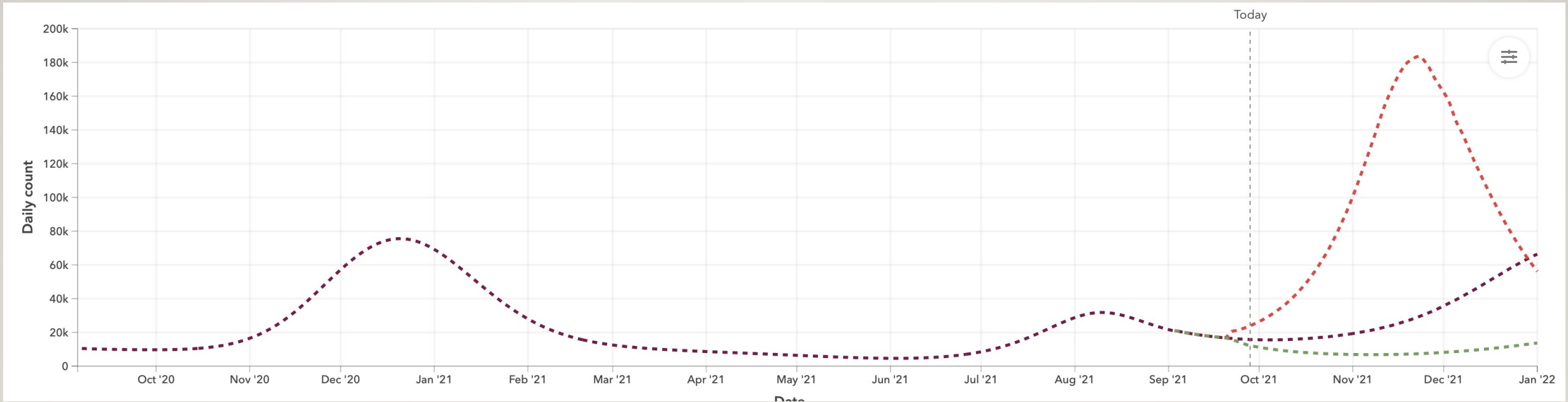
191

Ensemble Forecast through 2021-10-28

Download County Hospital Forecasts



WORST & BEST CASE PREDICTIONS THROUGH END OF YEAR



DELTA AND MU WON'T BE THE LAST VARIANTS

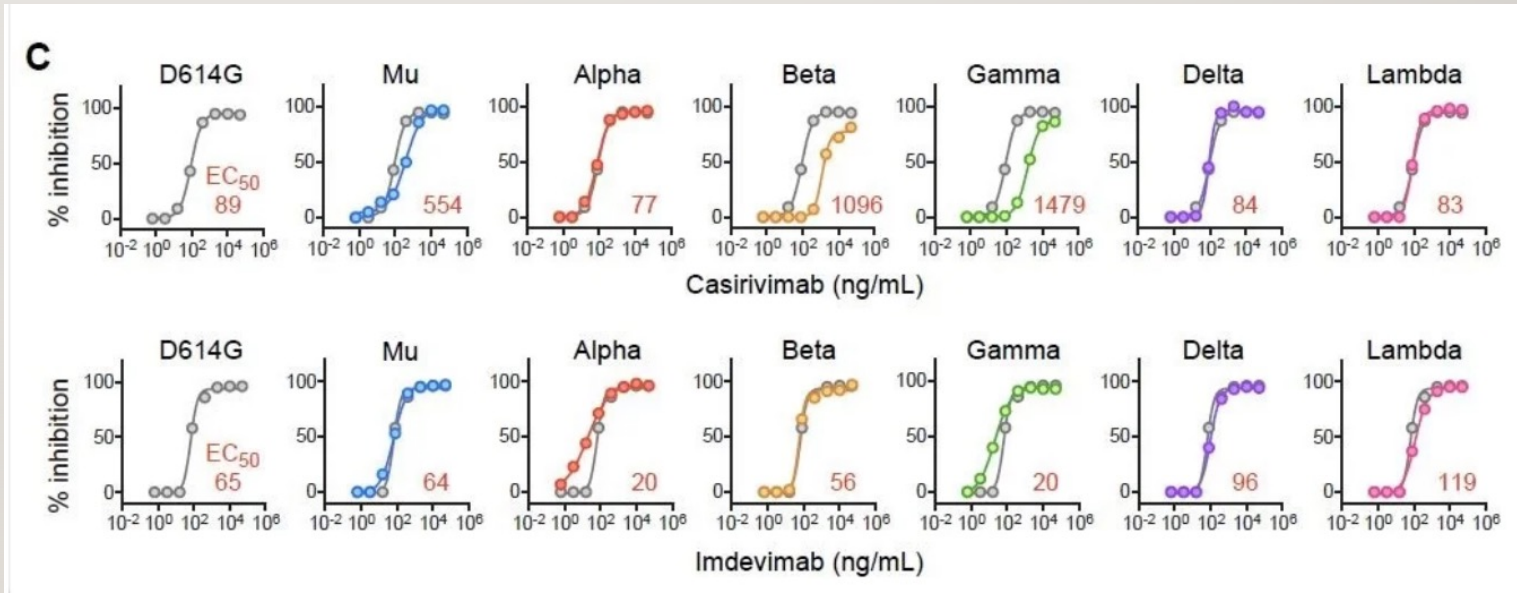
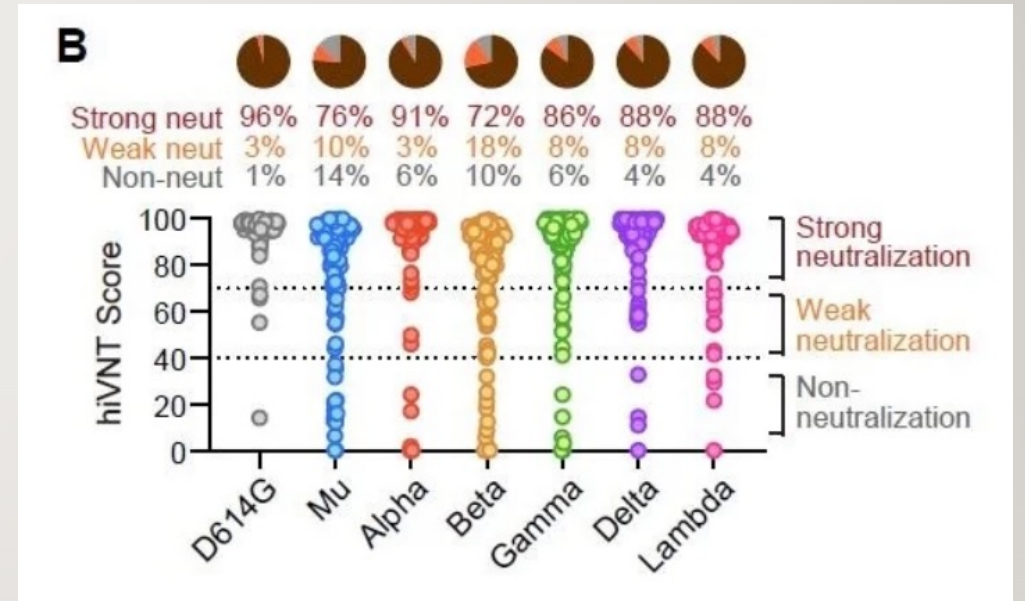
- Birth of Mu variant may have gone like this
 - In India, a person who was immunocompromised developed Covid-19.
 - Patient was slow to clear virus due to his impaired immune system
 - As the virus replicated, an error in the genetic translation occurred
 - Most mutations are detrimental and that copy of the virus fails to survive
 - However, this mutated virus spread through the host faster becoming dominant in the host
 - Host goes out in public or infects someone in their household with the new strain
 - Faster transmission of the new mutated virus (almost twice) spreads quicker than original virus, displacing the original virus as the dominant strain
- Thousands of strains have been identified, It is just a matter of time until a worse one comes along, perhaps truly vaccine resistant.
- Stopping transmission with known variants is best way to prevent the doomsday mutation – and the best way to do that now is vaccination, masks, and appropriate isolation.

MU VARIANT

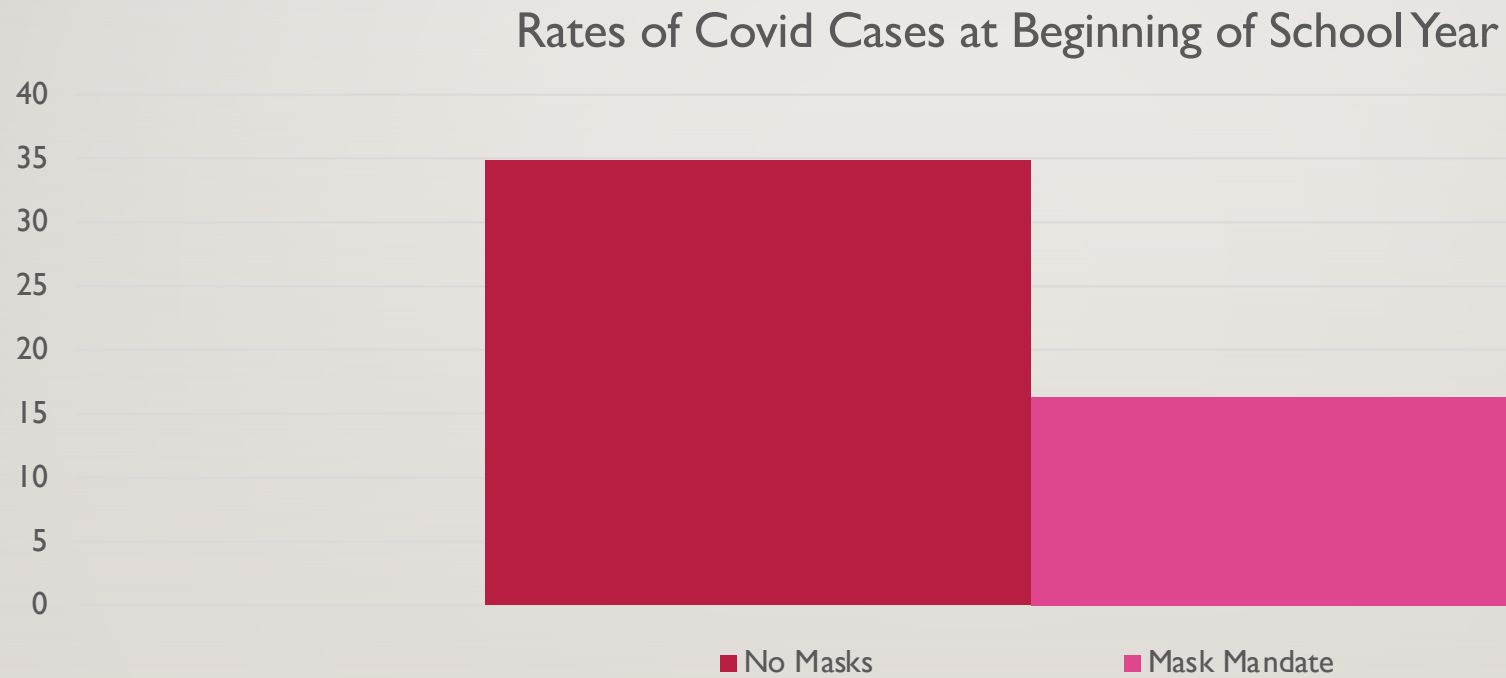
- Identified in Columbia in January 2021

- B.1.621

- Pfizer 76% effective
- Monoclonal antibody infusion – effectively neutralized variant



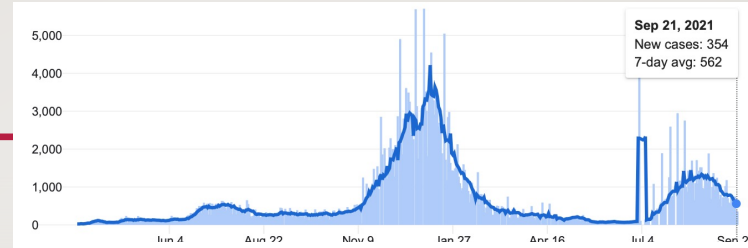
MASKS



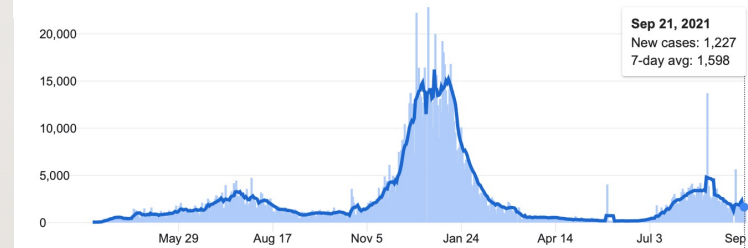
26

CALIFORNIA EXPERIENCE – MASK MANDATES VS NONE

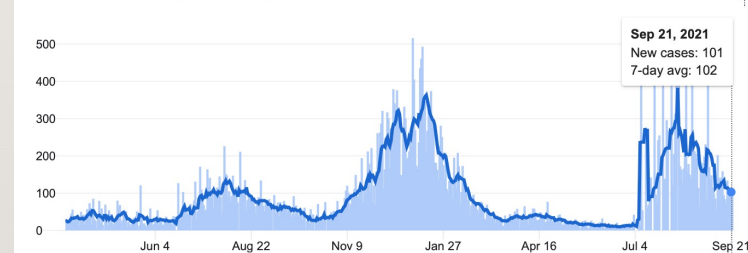
SD - no mask



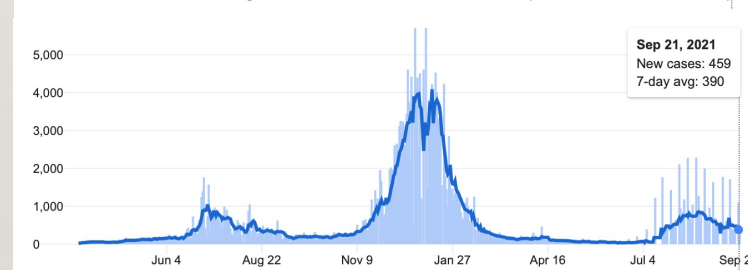
LA - mask



SF - mask



Orange - no mask



MASKS

- Masks work
- Vaccine > N95 > surgical mask > cloth mask
- Unvaccinated – besides getting vaccinated – wear masks indoors and in crowds at all times
- Vaccinated – during high rates of community spread, wearing masks indoors supported due to increased rate of breakthrough and reduced but still potential spread to others in case of breakthrough

SURFACE TRANSMISSION

- The risk of getting covid-19 from contaminated surface is low – estimated to be 1:10,000
- Covid-19 can live on surfaces for up to 3 days, but risk is considered minimal if area is ventilated and wiped down after 24 hours
- Surface Covid-19 reduced wearing masks indoors, along along with ventilation
- Be smart, keep surfaces clean and disinfected, but focus on reducing respiratory droplets

ADDITIONAL DOSES AND BOOSTER VACCINES

- Additional Pfizer or Moderna dose for immunocompromised patients at least 28 days after second dose. Continue same manufacturer, no mix and match.
- Booster for those that received Pfizer Covid-19
 - 65 and older or residents in long term care settings
 - 18 and older with underlying medical high risk medical conditions (cancer, diabetes, lung disease, heart disease). (50 to 65 should, 18 to 49 may)
 - 18 and older in job with increased risk of exposure
- Recommendations for Moderna and J&J booster expected soon and to be similar to Pfizer

COVID-19 TREATMENTS

- Regeneron for unvaccinated and breakthrough infections – given early in infection non-hospitalized patients
 - Reduces risk of hospitalization and death, reduces symptomatic time, and reduces viral load
- In hospitalized patients requiring O2 Dexamethasone plus Remdesivir is standard
- Oral Antivirals
 - Merck asking for Emergency Use Authorization of Molnupiravir
 - 50% decrease in need for hospitalization, 100% decrease in deaths
 - Pfizer and Appili also developing SARS-CoV-2 antiviral – not as far along in trials

WHAT'S THE STORY WITH UNPROVEN TREATMENTS?

- Hydroxychloroquine – early in Covid reports that hydroxychloroquine inhibited SARS coronavirus infection in cells
 - Cell cultures \neq Human response
 - Multiple studies since have shown no added benefit in human trials
- Ivermectin – studies showed in inhibit replication of SARS-CoV-2 in high concentrations
 - Concentrations required are far higher than can be given to humans without toxicity
 - At non-toxic dosing for humans, Ivermectin has not been shown to have any benefit
 - Toxicity related morbidity from ivermectin overdoses have far exceeded anything seen with vaccines

SUMMARY AND PREDICTIONS

- We are on the downswing of San Diego's third major surge of Covid-19, latest due to Delta variant and inadequate vaccination levels
- Getting children 5 and older vaccinated, getting boosters for those vaccinated early and with underlying conditions, continuing to expand total vaccination and the new oral therapies are our best chance to prevent another huge surge over the winter.
- If we let our guard down, we will most certainly have a 4th surge and could be even larger than last winter's surge. New strains are an unknown variable.
- SARS-CoV-2 is still in epidemic/pandemic mode. Will eventually settle into endemic
 - Covid-19 is with us for the long term. Booster vaccination and improved treatments will be key in the future