

COVID-19 – The Ever Changing Global Context

The following is a detailed outline of remarks Richard provided as an introduction to a discussion of COVID-19 in New Mexico for the League of Women Voters in Los Alamos County, New Mexico on March 18, 2021.

The Global Scene

As you know, I believe that the health of anyone, anywhere, is the health of everyone, everywhere. I would suggest that if we are to control COVID in the US, the world community will have to ensure that COVID is brought down to much lower levels universally.

In looking at the global scene, I would like to divide the situation into two parts, those that bode well for our “return to some semblance of normalcy” and those that may constrain our “return to some semblance of normalcy.”

Let's start with the good news

The countries in East and Southeast Asia that aimed to suppress the virus have continued to stay on top of it – This includes: New Zealand, Australia, China, Taiwan, S. Korea, Vietnam, Thailand, Singapore, and Hong Kong and Japan to a certain extent. Their aim remains to completely suppress the virus.

In about 50 countries, the rate of new infections is low and staying low

Data on Africa is iffy, but it still looks like large parts of Africa have not yet been highly affected

The vaccine roll out has gone relatively well in terms of share of the population vaccinated with at least one dose in the US, UK, Israel, Serbia, the UAE, and Chile.

COVAX, the global mechanism for getting vaccines to LMICs was able to get the first of its vaccines out 83 days after the first vaccines in HICs. In historical context this is remarkable, even if the numbers remain small.

More vaccine doses are being produced

More vaccines are nearing approval

The FDA approved Pfizer, Moderna, and J and J vaccines appear to be able to varying degrees prevent moderate and severe disease against all of the variants so far, except for AZ and the S. Africa variant

Widespread vaccination in Israel appears to be contributing to a significant decline in new cases and the latest evidence suggests they probably new prevent infection

The US has returned to WHO, is donating to COVAX, and may purchase vaccines on behalf of some LMICs

However, the bad news is substantial

Globally, cases are up 15% in the last two weeks, although deaths are down

20 countries still have more than 40 cases per day per 100,000 people and two countries, Estonia and the Czech Republic are over 100 cases per day per 100,000

The situation in Brazil appears to be spinning “out of control”

In many countries in Europe and S. America the rate of new infections is going up again, with significant increases on top of relatively high rates, for example, in France, Italy, and the Netherlands

Hospitals are again being overwhelmed in a number of countries

The vaccine roll out has gone much slower than planned in the EU

130 countries have not started vaccinating

We are learning more and more about long-COVID as a real and potentially very costly problem

New Variants of Concern are emerging regularly

Many countries have temporarily stopped using the Astra Zeneca vaccine while they explore any link with blood clots in around 40 people who were vaccinated. This will delay the roll-out and may cause a loss of trust in the vaccine.

It looks like 20%+ in a range of HICs who are eligible for the vaccine say they won't take it

Vaccine nationalism is alive and thriving in a very ugly way

Implications of the Global COVID Scene for US Action

We need to act like we are in the second inning of a ball game, not like the game is over. Michael Osterholm says we need to act like we are in a whole ball game – because of the variants and simultaneous reopening.

We need to act now as if the disease was going to become endemic, even as we continue to fight it

We need to dramatically strengthen public health at all levels of the US

We need to implement sound public health measures as rates of new infections fall, including testing, contact tracing, and isolation in much more effective ways than earlier – we should not let vaccination be our only approach. We also need to better track variants and improve data systems.

We need to prepare now for the next pandemic and use some of the measures to strengthen our response to this pandemic

We need to continue to incentivize the development of better therapeutics

We need to continue to enable more production of the existing vaccines, the production of boosters, and the production of new and better vaccines, that are cheap, easy to store, and can be used easily everywhere

