Mississippi hospitals overwhelmed by surge in COVID-19 cases

Benjamin Mateus 15 December 2020

Last week, amidst the growing number of COVID-19 cases in Mississippi, Republican Governor Tate Reeves tweeted, "Please be extra cautious and mindful during this time. In the meantime, the best tool is the same: Wear a mask. Avoid crowds. Be smart. Protect loved ones."

Despite admonishing the public on the surge in new infections that have seen intensive care units (ICUs) reach full capacity, Mississippi Today reported that Reeves is planning several Christmas parties at the governor's mansion during the holiday season.

The governor's executive order to curb the tide of COVID-19 infections issued last week restricts social gatherings to no more than 10 people indoors and no more than 50 people outdoors. While the order includes a mask mandate for all schools statewide, Reeves has resisted issuing a general statewide directive.

How people working in factories and busy warehouses will comply with these orders is a moot point. These measures are aimed at deflecting all responsibility for the mounting social crisis onto the backs of workers who are forced to brave dangerous conditions. Meanwhile, the soirees that include state House and Senate members are proceeding as they customarily have in the past, and without masks.

Since early November, the pandemic has been surging again throughout the state, as cases began rising in a natural response to school openings that practically threw the door wide open for the virus. The seven-day average has peaked at over 2,000 cases per day. Daily fatalities have also been climbing, lagging by three to four weeks. The present spike in cases has been attributed to the Thanksgiving period.

Dr. Thomas Dobbs, the State Health Officer, tweeted December 11, "9.8 percent of COVID cases end up in the hospital. Mississippi ICUs are full and many

hospitalizations on the way. Beginning next Tuesday, elective surgeries that require hospitalizations must be delayed statewide." Up to mid-November, the proportion of COVID-19 cases nationally that resulted in hospitalization stood at 3.5 percent. This has been declining more recently because as hospitals are filling up, fewer people are being admitted and those admitted tend to be more critically ill.

However, according to Dr. Dobbs, the situation in Mississippi, with 9.8 percent of cases ending in hospitalization, would indicate that the patient population is in poorer health. To confirm this observation, we calculated the crude fatality rate in Mississippi due to COVID-19 and compared it to the national rate.

The current estimate of the death lag to cases has been placed at between two and eight weeks by the Harvard Center for Population and Development Studies working paper series, which looked at the statistics from January through July. Our estimate places this at around four weeks in the fall/winter period. For Mississippi, the crude fatality case rate stands at 2.9 percent, while it is 2 percent for the United States. The dire situation in the state can be traced to extreme levels of poverty and attendant poor health.

The median household income in Mississippi is the lowest among the 50 states. It stands just under \$45,000, far less than the national median annual income of almost \$62,000. According to the Centers for Disease Control and Prevention (CDC), Mississippi leads in nearly every major category in cause of death compared to other states, which include heart, Alzheimer's, and kidney disease. The state ranks second in cancers, stroke, diabetes, pneumonia, and infections. Obstetric statistics are abysmal, ranking first in preterm deliveries, low birth weight, and cesarean

deliveries. The obesity rate is just above 40 percent. Life expectancy stands at 74.4 years of age, the lowest in the 50 states.

The Mississippi State Department of Health has confirmed there are more than 300 patients in ICU beds across the state. According to the *Clarion-Ledger*, there has been no bed availability for intensive care patients in the Jackson metro area for several weeks. At the University of Mississippi Medical Center's School of Medicine, Marc Rolph, executive director for communications and marketing, confirmed that 13 people were waiting for an ICU bed in their network.

The staffing shortages have been vexing. Liz Sharlot, director of communications for the health department, said, "There are staffing shortages around the state that is for certain, like we may have enough ventilators, but we may not have enough staff to operate those ventilators. So, it's a combination. There's a lack of staff, a lack of hospital space."

So far, there have been close to 180,000 cases, with a 69 percent rise over the last two weeks. Deaths have reached 4,200, with an 83 percent increase in the same period. Hospitalizations now stand at 1,264, with a 20 percent increase over the preceding 14 days. In a November 24 letter to Governor Reeves, four health care providers pleaded, "The upcoming winter is going to be difficult for Mississippians. We know that wearing masks will help us continue to grow our economy, allow kids to remain in school, parents to go work. and most importantly, protect to Mississippians from this deadly virus. Physicians from across Mississippi ask that you reinstitute a statewide mask mandate."

The Pfizer coronavirus vaccine is now being distributed to the states. Mississippi will receive only 25,000 doses in mid-December and another 25,000 two weeks later. While the federal government is providing the vaccine and supplies, states will have to find the billions in funding to support the initiative, including the hiring of medical workers, providing outreach programs, and establishing vaccine clinics.

On November 2, Memorial Hospital at Gulfport President and CEO Kent Nicaud held a fundraiser for Governor Reeves at his 11,000 square-foot home, according to TV station WLOX. The CEO defended his violation of state restrictions, explaining guests were very conscious of the situation and "were spread out."

The state funding required for these vaccines will be lucrative deals for local health systems. One can speculate this fundraiser will serve to channel countless millions in state funds to the hospital chains while schools and other state initiatives are starved of funding.



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