

# US heading into latest wave of the pandemic

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For some time, reality and the rhetoric from official circles about the pandemic have been diverging. Despite the social crisis being wrought by the pandemic, there is barely any mention of the number of cases and deaths. Instead, the media's focus is on the new oral antivirals produced by Merck and Pfizer, boosters for all adults, the authorization for pediatric vaccines and, finally, the opening of borders to all international traffic.

More and more, from every venue, the mantra of endemicity and learning to live with the virus is being chanted by every political official and governmental representative with the promise that it will not be all that bad.

Take Surgeon General Vivek Murthy, who spoke on "CBS Morning" yesterday, explaining that Americans will have to learn to live with the coronavirus. In his matter-of-fact approach, he told the hosts: "As we look to the future, I think what is likely to happen is that there will be coronavirus around for some period. ... I think we can certainly learn to live with it."

Downplaying the dangers of SARS-CoV-2, he added: "Think about the common cold, for example. We have learned to live with the common cold. ... We can ultimately get COVID, I think, to a place where it's somewhere in between the cold and the flu. Yes, it's a virus that's circulating but it doesn't disrupt our way of life, doesn't prevent us from seeing the people we love, doesn't prevent our kids from being in school."

As written under the responsibilities of the Office of the Surgeon General, "The US Surgeon General is the Nation's Doctor, providing Americans with the best scientific information available on how to improve their health and reduce the risk of illness and injury." And yet, he told the American people that the virus could be taken to a more benign place than even the flu. However, the best scientific estimates are that if SARS-CoV-2 is allowed to become endemic in the US, it will

kill upward of 100,000 people each year.

The US is fast approaching 50 million reported cases of COVID-19, meaning that more than one in seven persons has had a documented infection. Almost 780,000 people have died, including more than 180,000 between the ages of 25 and 65. The Institute for Health Metrics and Evaluation (IHME) projects that the real death toll is 873,000. In raw numbers, this level of death has surpassed the death toll of the Civil War and has exceeded those who died from the Spanish flu between 1918 and 1920.

That more Americans have not died has much to do with the courage of health care workers risking their lives to save their patients and efforts made by scientists to study and share the results of their work with others to improve the odds of people surviving an infection. These gains have been made despite the concerted efforts of the Republican and Democratic parties, the unions and the financial oligarchs to reopen schools in order to force workers back into infected workplaces to ensure the economic engines are at operating at full steam.

In contradiction to the spin being spouted by the mainstream media that the US is exiting the pandemic and returning to normalcy, the curve of infections has once more begun a new ascent, with close to 75,000 new cases Wednesday, a 6 percent rise over the last 14 days. Worrisome as well is that the latest low in cases only reached an astounding 71,000 daily COVID cases. Never in the course of the pandemic in this country during the last five waves has the trough in cases been so high, an observation that Dr. Michael Osterholm made in his latest news brief update.

According to the *New York Times* tracker, the daily average of deaths is 1,251, which means that in a little more than each minute of the day yesterday, someone perished from COVID-19. The Johns Hopkins dashboard places the daily death toll up 1 percent from

the week prior, validating the rise in cases. If the US remains on the current track, another 65,000 to 70,000 people will not celebrate another new year.

In the South and Southeast, where intense summer heat has given way to more temperate weather, making it more accessible for people to be outdoors, cases have dropped sharply from their summer peaks. Presently, the virus is surging through the mountainous Western states and the Midwest, where colder temperatures are setting in. Seven-day averages from the Midwest, West and Northeast are increasing, with hospitalizations tracking these statistics. Twenty-seven states across the country have reported a rise in cases over a 14-day average.

In Colorado, where the surge in cases has been prolonged and persistent, state health officials have reinstated “crisis of standards of care,” directing resources to patients whom health care systems deem to have the best chance at survival. On Monday, the public health department declared the entire state a high-risk environment for COVID. One-third of the hospitals in the state are expecting they will be short of ICU beds. Twenty percent will be dealing with insufficient health care workers. More than 1,500 people across the state are currently hospitalized for COVID.

Meanwhile, cases are surging quickly in New Mexico, with 1,270 new cases each day on a seven-day moving average despite boasting one of the highest full vaccination rates in the country. In northwestern New Mexico, the San Juan Regional Medical Center has instituted a similar crisis standard of care while the state has diverted resources to manage the crisis.

Utah, Montana, Wyoming, Colorado and New Mexico are all averaging more than 50 new cases each day per 100,000 people. In Utah, every county except Daggett is in the red (“very high rate”), with more than 200 cases per 100,000 residents. Stephen Goldstein, a virologist at the University of Utah School of Medicine, told the *Deseret News*: “To some extent, it’s difficult to say why certain areas, I think, are having their big surges at particular times. Like, why us now and the Midwest previously, the South earlier in the summer.” An honest statement, which, coming from a virologist, highlights the complete abandonment of all commitments to public health dictums as the country is left flying in the dark.

He added: “I’m concerned that we could stay at this

pretty high level for a while. I don’t know if I would predict we’re going to see another big spike from where we are now. But even staying around this level for the next couple of months would be pretty devastating.”

Minnesota is also seeing indicators of worsening number of cases and hospitalizations. The state has seen more than 822,000 COVID-19 cases and over 9,000 deaths since March 2020. The Tuesday update of 7,173 additional cases contains data from over the weekend, making the total current as of Monday morning. The high volume of cases and insufficient staffing means that the health department cannot track their infections in a timely manner.

In a statement issued yesterday, the Minnesota Health Department said: “We are taking steps to boost staff capacity, but we anticipate this backlog will impact new case data at least through Wednesday, November 10. The marked increase in case growth is another reminder that the threat of COVID-19 remains very high in Minnesota.”

Cases in Michigan continue a climb which began in late July, with over 4,500 new cases every day on average now. Though the number of COVID-19 patients hospitalized is lower than in previous months, even these numbers are straining health systems with skeleton crews and over-utilized resources, according to the *Detroit Free Press*.



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