

# Public health experts warn of a winter surge in the pandemic

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12 November 2021

The Institute for Health Metrics and Evaluation (IHME) at the University of Washington has offered a sobering projection for COVID-19 as the United States heads into the winter months. The IHME warned: “[w]e see increasing evidence in the Northern Hemisphere that the expected winter surge has started to unfold. Reductions in cases, estimated infections, and hospitalizations have essentially stopped in the US, and we are starting to turn around.”

They note that aside from winter seasonality and waning immunity, the “third factor that’s fueling these winter increases is the fact that people are much less cautious than last winter, as mask use is much lower ... than a year ago. People’s mobility levels are just below the pre-COVID baseline instead of 20 to 30 percent below the pre-COVID baseline. Putting those together, we expect that despite progress on vaccination, we will see a winter surge.”

The IHME’s observation of population behavior is correct as far as it goes. But the American people did not suddenly throw caution to the wind after suffering nearly 800,000 deaths. The curtailment of mask-wearing and greatly increased public activity are a product of the demand by the American ruling class, acting through the Biden administration, state governments, political parties, the media and giant corporations, that the economy must be opened and kept open, to fuel the profit-making essential to the capitalist system.

How big will the winter pandemic surge be? IHME, in its current projection, foresees another 70,000 people will die in the coming months. The number of deaths from COVID-19 during Biden’s presidency will undoubtedly eclipse that of his predecessor. Mass death will become the new yardstick for measuring presidential terms in office.

Two months ago, Dr. Michael Osterholm, director of the Center for Infectious Disease Research and Policy at the University of Minnesota in Minneapolis and a former Biden adviser on the pandemic, speaking with Bloomberg , said, “We’re going to see hills and valleys, at least for the next several years as we get more vaccine out. That’s going to help. But the challenge is going to be: How big will the hills and valleys be, in terms of their distance? We don’t know. But I can tell you, this is a coronavirus forest fire that will not stop until it finds all the human wood it can burn.”

As the third year of the pandemic is nearing, despite the repeated hosannas that the COVID-19 vaccines have saved humanity, the sixth wave is well underway, with more than 550,000 new infections reported worldwide yesterday, more than a quarter-billion reported cases and over 5 million reported deaths in these two years with no end in sight. There is still much human material that the virus can exploit, and given the nature of SARS-CoV-2, it can do so again and again.

There have been 7.16 billion doses of COVID-19 vaccines administered globally. More than 4 billion people have received at least one dose of the vaccines, and 3.16 billion (40.5 percent) are fully vaccinated. However, with campaigns to offer all adults boosters and children the pediatric version of the COVID-19 vaccines, it will mean that masses of people in low- and middle-income countries will continue to go without.

According to Dr. Lone Simonsen, an epidemiologist, and professor of population health sciences at Roskilde University in Denmark, the longest global flu outbreak lasted five years, with two to four waves of infection. COVID-19 is not only “novel” in the sense of a new coronavirus: The shape of the pandemic itself is novel, completely different than any previously experienced,

with six separate waves in barely two years, and no sign that the infection is either weakening or subsiding.

Speaking with Bloomberg, Dr. Simonsen explained that previously held conceptions that viruses become milder in the course of a pandemic are erroneous. “Although new mutations aren’t always more severe than their predecessors,” she said, “pandemics can in fact get more deadly during the pandemic period, as the virus is adapting to its new host.”

Developments with the highly virulent Delta strain and mutating progenies refute the complacent suggestions that the vaccines will bring the pandemic to its knees as populations reach herd immunity. More than 30,000 cases of the AY.4.2, a sublineage of Delta from the UK, have been detected across more than 30 countries.

More transmissible than its ancestors, it has been classified as a variant under investigation. Virologists have observed the virus still has room to enhance these qualities and wreak havoc over the immune system of those it infects. It is possible that vaccines will not produce even a threshold immunity. Populations will be dependent on boosters to stave off infection and its accompanying risks of Long COVID and death.

Europe is in the throes of a massive surge, despite mass vaccination. According to the World Health Organization’s COVID-19 dashboard, the continent reported more cases in one week than at any other time during the pandemic. Deaths have also been climbing, with 26,877 for the week beginning on November 1, 2021. This is a 10 percent rise over the previous week. Germany, Europe’s most populous country with 67 percent of the population fully vaccinated, had a single-day high of more than 45,000 COVID cases on November 10, with cases continuing to rise.

WHO Regional Director Hans Kluge commented, “We are at another critical point of pandemic resurgence. According to one reliable projection, if we stay on this trajectory, we could see another half a million COVID-19 deaths in Europe and Central Asia by February 1 next year.”

These alarming projections are just as valid for the US, which is pursuing a reckless policy of vaccinating the population into normalcy and failing at that too. The sudden decline in cases seen during October has been followed by an abrupt upturn in just a short time. And instead of absorbing these lessons that have

repeatedly played out for the last two years—massive deaths and overwhelmed health systems—Biden has decided to open all international borders.

Yesterday, the US reported close to 100,000 COVID cases. Deaths reached nearly 1,500. Cumulatively, there have been 47.7 million cases and almost 781,000 deaths. This means one in seven persons has had a documented infection, and one in 423 has died from COVID since the pandemic began.

The seven-day average of daily cases reached a trough of 70,291 on October 25. It has since climbed to 76,769, a 9 percent rise in a little more than two weeks. The US regions experiencing a rise in cases are across the Northeast, Midwest and West. However, the recent celebrations about the decline in cases across the South will have to be put on hold as cases have plateaued. Twenty-seven states have now reported a positive 14-day change in their ledger of new cases.

In August, a study from Japan in preprint form found that the Delta variant possessed multiple mutations in its anti-N-terminal domain (NTD). The authors wrote, “All anti-NTD neutralizing antibodies failed to recognize the Delta spike, indicating that the Delta variant is completely resistant to anti-NTD neutralizing antibodies” as compared to the original strains. Such studies highlight that SARS-CoV-2 is evolving to become resistant to the current vaccines, which will have considerable ramifications to the current vaccine-only strategy being advanced.

That the virus has undergone repeated mutations is not just a “natural” property of the virus’s adaptive mechanisms. This process has been assisted from the beginning by the policies decreed by the financial oligarchs, who insisted that profit considerations should have priority over public health. They have given the virus the necessary time and scope, with hundreds of millions, and perhaps billions of human hosts, to develop and “improve” its ability to infect and to kill.



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