

# A comparative analysis of COVID-19 and the flu highlights the immense dangers of the pandemic

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The flu and COVID-19 are very contagious respiratory infections caused by the influenza virus and SARS-COV-2 coronavirus, respectively. As respiratory viruses, they are transmitted from one infected individual to another via small, aerosolized particles during breathing or speaking/screaming/singing and by respiratory droplets. Evidence gathered throughout the pandemic has shown that the aerosol form is dominant in spreading the disease through communities, propelling the pandemic from region to region.

Aside from sharing some of the same symptoms of fever, cough, and chills, the comparison, even attempts to suggest that these two infections are the same, has been repeatedly promoted to downplay the dangers of COVID and compel workplaces and schools to open to ensure the economy is up and running. The blatant disregard for the population's health, given the calamity COVID has wrought, has been willfully criminal. However, what has also been lacking is an effort by the mainstream media to provide a more concrete scale by which people may compare COVID's havoc to understand the true seriousness of this disease.

Therefore, it would be instructive place the figures for the flu and COVID toe to toe, to comprehend the magnitude of their differences and recognize the deceit being peddled to the population.

To begin, the Centers for Disease Control and Prevention (CDC) had reported that the number of children that had died from the flu during the 2019-2020 season was one of the highest, matching that of the 2017-2018 season. In all, there were 188 pediatric flu deaths during the season that inaugurated the COVID pandemic. Eighty-one occurred in children younger than five years of age and 107 deaths among those 5 to 17. Many of them for whom information on their medical condition was known had pre-existing conditions. Reviewing the *reported* pediatric death toll for the six flu seasons from 2011 to 2020, an average of about 130 children died annually. (In the 2018-2019 flu season, 118 children reportedly died.)

If we expand our analysis to all ages, incorporating reported flu deaths from 2010 to 2020, the average number of people that died each season was around 36,000, with a high in 2017-2018 at 61,000 and a low of 12,000 in the 2011-2012 season. COVID-19, by comparison, killed well over 400,000 during its first full year in the United States, March 2020 through February 2021, more than

ten times the annual average death toll from influenza.

An astounding finding comes to light when these figures are compared to the 2020-2021 flu season that occurred from October 3, 2020, to July 24, 2021, amid the COVID pandemic. During the last flu season, more than 1.3 million flu specimens were obtained. Only 2,136 were positive for the influenza virus, a yield of 0.16 percent positivity. More so, only 748 deaths were reported. Overall, there was a 98 percent reduction in mortality, a byproduct of the meager measures to mitigate the COVID pandemic. Among children, only *one* perished. This is a remarkable reduction in the number of deaths. Arguably, the flu in the population was brought to near elimination, and an incredible achievement deemed impossible in the centuries that civilizations have suffered living with the flu.

In line with this investigation, placing the COVID pandemic in context to the flu season will be important. Using the Worldometer COVID dashboard, during the same period in the US, from October 3, 2020, to July 24, 2021, reportedly over 410,000 people perished from COVID. In other words, for every flu death, there were almost 550 COVID deaths.

According to the American Academy of Pediatrics, there have been at least 6.5 million child COVID-19 cases or 16.7 percent of all COVID cases. In all, as of November 4, 2021, 614 children have died. In the intervening months that coincide with the 2020-2021 flu season, 237 children died. The comparison to the one child that died from the flu demonstrates how much deadlier COVID has been by comparison.

In the last four months, COVID has killed 265 children. If we compare these figures to the typical flu season, COVID is twice as deadly as the flu for children. But for the population, it has been elevenfold deadlier, ranging between sevenfold to 34-fold, compared to the highs and lows in flu mortality for a particular season. In other words, even for the youngest children, who are most resistant to the worst effects of COVID, the coronavirus kills many more than the flu, and it has even more horrific secondary effects, such as Long COVID, for which there is no real influenza equivalent.

During the initial foray with the pandemic, as noted by *Business Insider*, Figure 3 below breaks out the mortality for a typical flu season vs. COVID-19 deaths in the US by age brackets, highlighting the dangers of COVID for all age ranges. These types

of analysis, for the most part, have ceased in the press.

And these figures must recall the repeated waves of infections that have left health care systems in many regions pushing them to the brink of collapse with resources like medicinal oxygen running critically low in many facilities. Some states even had to ration care to those deemed most likely to survive their infection.

Anecdotally, the categories of “mild” to “moderate” COVID were anything but minor in their effects on patients. They typically suffered a severe bout of infection with significant shortness of breath, severe coughs, profound fatigue, chills, and high fevers, that could last for several weeks. A considerable number also went on to develop Long COVID, including depression and brain fog. Untold millions will face the prospect of developing chronic diseases as a consequence of long-term complications to their organs from their initial COVID infection.

Certainly, other comparisons need to be made.

According to the CDC, during the 2019-2020 flu season (largely pre-COVID), 51.8 percent of people ages six months and older got a flu vaccine. Despite the target of 70 percent set by the Department of Health and Human Services in 2010, this was the highest level since the 2009-2010 flu season.

By and large, for children six months to 17 years, 63.8 percent received the flu shot, while among adults, only 48.4 percent were inoculated. The flu vaccine’s effectiveness reduces the risk of flu illness by 40 to 60 percent if the vaccines are well-matched to the circulating flu viruses. By comparison, approximately 50 percent of the US population had been fully vaccinated against SARS-CoV-2 by the end of July 2021. COVID vaccines have proven to be more than 90 percent effective. However, a more recent appreciation for waning immunity means that the population will depend on repeat (booster) vaccinations to maintain some immunity against the virus.

The influenza virus is endemic in human populations. Though the efficacy of the vaccines is dependent on predicting the strain of the virus for a given season, they afford those who receive them some level of protection. Given the mutations of the virus, however, and the limited take-up of vaccinations, the level of immunity is entirely insufficient to deprive the virus of a sufficient number of hosts to fuel its spread, so that it dies out (the actual meaning of herd immunity).

SARS-CoV-2 is a novel coronavirus, meaning that when it emerged into human populations, no one had ever been exposed to it, and therefore no immunity against it existed, and every human being was a potential host. However, very efficacious vaccines have been developed quickly, and nearly 60 percent of the US population has now been fully vaccinated. And yet, since taking office, the Biden administration has pursued the same policies against COVID that his predecessor had enacted—profits over life. Another 350,000 have succumbed since Biden took the oath swearing to defend the Constitution.

The US is now facing another winter surge in new cases of COVID-19 as the pandemic spreads into the upper Midwest and Northeast. Given the widespread abandonment of masking and other protective measures, and the mass return to schools, which reduced influenza to near-zero last year, there are now warnings from health experts of a possible *twindemic* of flu and COVID.

This means that a harsh flu season, as experienced in the 2017-2018 season, combined with the uncontrolled spread of COVID could have catastrophic implications to health systems that have been repeatedly deluged by floods of patients throughout the pandemic.

A report in *The Economist* from October 2021, “How the world learns to live with COVID-19,” states that the influenza virus, “one of the most dangerous endemic diseases,” kills between 290,000 to 650,000 people every year worldwide, in particular the elderly. Dr. Trevor Bedford, a professor of biostatistics and bioinformatics at Fred Hutch, explained that in the *next few years*, SARS-CoV-2 would cause annual deaths in America from 50,000 to 100,000 while the flu kills about 12,000 to 60,000. Extrapolating from these miserable estimates means millions worldwide could die each year from these pathogens combined.

In concluding the comparison between the flu and COVID, it is worth reviewing COVID mortality in countries that implemented elimination strategies to the pandemic.

China, thus far, has sustained 4,636 deaths, nearly all of them during the first few months of the pandemic, before it was fully understood. New Zealand has registered only 33 deaths. Life expectancy actually climbed for the tiny island nation in 2020, in contrast to most of the world. Until May of 2021, Taiwan had seen only 14 deaths. A sudden surge in cases over the summer and fall led to more than 800 deaths, although the figures have stabilized after efforts were taken to control the rise of infections. Until July 2021, Vietnam had approximately 225 deaths. Norway has experienced only 950 deaths.

The United States has reported 783,439 deaths, 100 times the total number of deaths in all the above-mentioned countries, with estimates that another 60,000 people will die before the New Year.

Tragically, in Vietnam, the Stalinist government in recent months has adopted a US-style strategy of “learning to live with the virus.” Since July, the COVID death toll has jumped from 225 to over 23,000, with a million cases.

These statistics unequivocally demonstrate that appropriate public health measures and strict mitigation measures could have saved hundreds of thousands of lives, in the US and around the world, even before the development of the vaccines, which can now be deployed to assist with elimination measures.

Instead, the reckless policies the capitalist countries have implemented to ensure no infringements are made on the extraction of surplus value have only created the conditions ripe for the continued mutation of the virus. The attempt to dismiss the dangers of the virus and claim, like the fascistic president of Brazil, Jair Bolsonaro, that it is “just a little flu,” only plays into the hands of the most reactionary demands of the financial oligarchs. Only an elimination strategy can help stem the further loss of life. This, however, requires a political mobilization of the working class against the ruling elites.



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