

As Omicron variant takes root in New England and US

Massachusetts hospitals overwhelmed with COVID-19 surge

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As winter weather sets in, Massachusetts is in the midst of a significant surge in COVID-19 cases and hospitalizations. Hospitals, hit with a “perfect storm” of rising COVID-19 cases, delayed care and staffing shortages, are overwhelmed across the state, and Republican Governor Charlie Baker has asked hospitals to reduce “certain non-essential, elective services and procedures” by 50 percent by Wednesday.

Baker has also said that Massachusetts may join several other states—including the New England states of New Hampshire and Maine as well as neighboring New York—in calling in the National Guard to assist in hospitals.

The *Boston Globe* has noted that COVID-19 case numbers this year have tracked numbers last year with uncanny similarity from the end of October through early December. For example, the seven-day average for December 3, 2020, was 4,462 cases per day, whereas this year it was 4,303. In both years, new cases began moving upward significantly at the end of October, dipped slightly around Thanksgiving, and then skyrocketed after the holiday.

If this trend continues, one can expect cases to stay alarmingly high through the end of the year, when the reported figures will drop due to decreased testing, and then spike again after New Year’s Day.

Several public health experts told the *Globe* that it appears that, in terms of cases, the benefits of vaccination are being “balanced out” by the spread of the Delta variant, the reopening of schools, increasing social mixing, waning immunity and reduced indoor masking. Brigham and Women’s Hospital infectious disease physician Dr. Scott Dryden-Peterson said, “The benefits of widespread vaccination are apparently being

offset by the added risk of a more infectious virus and more time spent together without masks.”

Boston University epidemiology and global health professor Matthew Fox told the *Globe*, “To a certain extent, waves follow a very similar pattern,” but noted that there is a “bit of a coincidence” in the numbers lining up so exactly between the years.

While hospitalizations and deaths are rising more slowly than cases in 2021 compared to 2020, the “decoupling” of cases and hospitalizations long hoped for—that rises in cases would not necessarily mean a rise in hospitalizations—was “not as much as we would like to see,” in the words of Tufts Medical Center Hospital epidemiologist Dr. Shira Doron.

There were 1,115 COVID-19 hospitalizations in Massachusetts on December 7, 2021 (a seven-day average). For the same day in 2020, there were 1,413.

A similar decrease—that is, significant but certainly not enough to justify last month’s claims by politicians and the media that the pandemic was essentially over—is seen in deaths, with a seven-day average of 18 deaths on December 3, 2021, compared to 40 on the same day last year.

Massachusetts is the US state with the second-highest rate of vaccination, following only Vermont in terms of doses administered per capita. Over 70 percent is fully vaccinated and many have already received third doses commonly known as boosters. Despite the uptake in vaccines, which has decreased the number of people hospitalized due to COVID-19, hospitals are still overwhelmed under the strain of the current wave.

The Baker administration estimates that the state’s capacity has decreased by 500–1,000 hospital beds, including intensive care unit (ICU) beds, largely due to

a “critical staffing shortage.” After nearly two years of working under pandemic crisis conditions, health care workers are exhausted and burnt out, with many leaving the profession. Others have contracted COVID-19 due to inadequate personal protective equipment (PPE), some of whom have died and others of whom are dealing with long-term repercussions.

This has led to a wave of struggles nationally and internationally, including the nurses strike at Saint Vincent Hospital in Worcester. The strike of hundreds of nurses, which began in March and is by far the longest nurses strike in state history, continues despite the isolation imposed on the workers by the Massachusetts Nurses Association, which has done nothing to oppose Tenet Healthcare’s hiring of scabs as permanent replacements for the experienced nurses on strike.

Under the pressure of the current conditions, the Massachusetts Department of Public Health issued guidance “granting hospitals flexibility on ICU nursing staff ratios, as well as guidance permitting hospitals to create capacity in ‘alternate spaces,’” in the words of the *Globe*.

This creates a situation where the increase in COVID-19 hospitalizations, while less extreme than last year, is combining with a staffing shortage and urgently needed care that has been delayed for everything from broken bones and hip replacements to suicidal ideation to tax hospitals and health care workers to an extent not seen in months.

A week ago, UMass Memorial Health in Worcester “ran out of ICU beds,” according to chief executive Dr. Eric Dickson. “That’s as bad as I’ve ever seen it.”

Steve Walsh, chief executive of the Massachusetts Health & Hospital Association, said, “We are preparing for one of the largest, if not the largest, census we’ve ever had in hospitals after the new year.”

Mass General Brigham, the largest health system in the state, began canceling surgeries even prior to Baker’s order.

The above horrors are playing out due to the Delta variant of SARS-CoV-2, which has been the dominant variant worldwide since the summer. However, the new Omicron variant, which was first detected in southern Africa, has spread rapidly around the world. Evidence so far indicates that Omicron is much more transmissible than Delta and partially evades immunity

provided by vaccines or prior infection, and will likely become the dominant variant globally over the coming weeks and months.

Some have prematurely proclaimed that Omicron is milder than Delta, based on preliminary data. Even if that turns out to be true, simply by virtue of spreading more rapidly than Delta, Omicron could take far more lives. For comparison, the SARS-CoV-1 virus, which caused the severe acute respiratory syndrome (SARS) outbreak of 2003, had an estimated infection fatality rate of 9 percent and killed about 8,000 people. Estimates vary for the infection fatality rate of SARS-CoV-2, the related virus that causes COVID-19, but are generally less than 1 percent. Despite being one-tenth as lethal on an individual level, COVID-19 has killed more than 800,000 in the United States alone, and well over 5 million globally, according to official figures.

Omicron has already been detected in 30 states, according to the Centers for Disease Control and Prevention (CDC), including Massachusetts and neighboring New York and Connecticut. Rhode Island announced its first Omicron case Saturday, of a woman who was fully vaccinated and had recently been in New York.



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