Latest COVID-19 surge deepens across Europe and globally, fueled by Omicron BA.4 and BA.5

Benjamin Mateus
1 July 2022

At a press conference Wednesday, amid the latest global surge of COVID-19 infections, World Health Organization (WHO) Director-General Dr. Tedros Adhanom Ghebreyesus cautioned that “our ability to track the virus is under threat as reporting and genomic sequences are declining, meaning it is harder to track Omicron and analyze future emerging threats.” This warning was issued under conditions where the highly infectious and immune-resistant Omicron BA.4 and BA.5 subvariants have become dominant globally and account for 55 percent of all international samples.

According to Our World in Data, the global seven-day rolling average of daily new cases is approaching 750,000, almost 60 percent above the lows seen in the first week of June. Cases are rising in four of six WHO regions of the globe—Europe, the Americas (including a 24.6 percent surge in South America), Southeast Asia and Eastern Mediterranean, and Europe, which is seeing the fastest growth in this period.

In the week ending June 20, 4.5 million new cases were officially registered, a 23 percent rise from the previous week. COVID-19 deaths for the same week rose by over 9,000, a more than 8 percent increase and the first substantial jump since the peaks in early February.

The new surge in cases must be viewed in the context of the systemic and near-universal dismantling of all COVID-19 surveillance and data reporting, meaning that these figures represent significant undercounts. In every country where COVID-19 infections are surging, test positivity rates are also soaring. In mid-June, more than 41 percent of all COVID-19 tests in Germany were positive, while in France that figure is over 22 percent. Similar skyrocketing test positivity rates can be seen across Europe.

The new surge in cases must be viewed in the context of the systemic and near-universal dismantling of all COVID-19 surveillance and data reporting, meaning that these figures represent significant undercounts. In every country where COVID-19 infections are surging, test positivity rates are also soaring. In mid-June, more than 41 percent of all COVID-19 tests in Germany were positive, while in France that figure is over 22 percent. Similar skyrocketing test positivity rates can be seen across Europe.

The surge is expected to deepen in the coming weeks and persist throughout the summer, as the tourist season is in full swing. Speaking with Agence France-Presse (AFP), WHO Europe Regional Director Dr. Hans Kluge stated this week, “As countries across the European region have lifted the social measures that were previously in place, the virus will transmit at high levels over the summer. This virus won’t go away just because countries stop looking for it. It’s still spreading, it’s still changing, and it’s still taking lives.”

These comments are an about-face for Kluge, who welcomed the first Omicron wave in January as a supposed harbinger of permanent immunity for the population. On January 24, 2022, he said, “It’s plausible that the region is moving towards a kind of pandemic endgame. We anticipate that there will be a period of quiet before COVID-19 may come back towards the end of the year but not necessarily the pandemic coming back.”

The 53 countries representing the WHO European region are now averaging nearly 500,000 official daily new cases, accounting for a significant majority of current global infections, up from 150,000 daily infections in late May. Austria, Cyprus, France, Germany, Greece, Luxembourg and Portugal have recently seen the highest case rates. Weekly deaths from COVID-19 across Europe now stand at roughly 2,500, comparable to figures registered in the summer of 2020 before vaccines were available.

The current developments in Greece starkly exemplify what is unfolding across Europe and will soon transpire in every other country that has allowed the virus to spread uncontrolled. Last Monday, the National Organization for Public Health (EODY) reported nearly 7,700 COVID-19 cases, double the daily cases seen at the beginning of June. The next day, EODY said cases had exploded with more than 20,000 infections, with the seven-day rolling average reaching over 13,000. Of these, approximately 15 percent represent reinfections.

The EODY also noted that there were 16 more COVID-related deaths, with 95 patients in intensive care units. These are mostly the elderly over 70, and many have multiple underlying medical conditions predisposing them to severe manifestations. The trend in deaths across Greece is climbing once again, even though more than 71 percent of the population is fully vaccinated. The elderly and debilitated will suffer most from these surges and reinfections, as their waning immunity to the virus places them at greater risk than other demographics.

Similarly, the United Kingdom is experiencing another wave of infections and hospitalizations. Official new cases are up 34 percent from the prior week. According to the Office for National Statistics (ONS), one in 30 people is now infected with COVID-19. Their data estimates that around 1.8 million people
were infected despite 98 percent of the population having antibodies either from previous vaccination or infection. Scotland has been hit the hardest in the current surge.

The seven-day average of people hospitalized for COVID in the UK has reached close to 7,400, a 45 percent increase over the lows reached in early June. The current trend in admissions will soon approach the highs seen during the Delta wave.

Virologist Dr. Stephen Griffin, an associate medical professor at Leeds University, told the Financial Times, “Vaccines reduce severe disease, and waves such as this do not cause the same spikes in hospitalizations as we saw, for example, with the Alpha variants. However, the constant bombardment of waves we are seeing does cause a clinical impact that is not to be underestimated.”

Indeed, the clinical impact of Long COVID, or post-acute sequelae of COVID-19 (PASC), is mounting with each new wave of infections. This will have untold consequences on the population’s overall health, since the complex interaction between the virus and the various organ systems, including the brain and neurological systems, will accumulate.

The repeated mantra that the coronavirus only causes mild disease is increasingly belied by objective reality, in which mass infections and long-term debilitation have profoundly destabilized the global economy and led to mounting labor shortages internationally. The most visible manifestation of this at present is the huge number of flight cancellations due to staffing shortages at airports and airlines. The aviation consultancy Cirium reported that June, the start of summer season in Europe, saw 7,870 flights canceled for departures from the UK, Germany, France, Italy and Spain alone.

In the US, the Centers for Disease Control and Prevention (CDC) announced Wednesday that BA.4 (15.7 percent) and BA.5 (36.6 percent) now dominate all other variants across the country. This will likely cause another surge of infections in the coming weeks, the seven-day average of daily new cases having plateaued at just over 100,000. The positivity rate in the US has reached nearly 14 percent, while since mid-April hospitalizations have more than doubled to 33,600 admissions on average. Over the past two weeks, COVID-19-related deaths have risen by nearly 50 percent to 380 per day, while estimates of daily excess deaths attributable to the pandemic now stand at 660 per day in the US.

On Tuesday, an expert committee advised the FDA that COVID-19 booster shots should be updated to reflect the circulating subvariants. As the New York Times carefully said, “The panel’s vote paves the way for the FDA to push manufacturers to make reformulated boosters in time for the Biden administration to offer them later this year, before an expected winter surge,” which coincides with the mid-term elections.

Moderna executives told the FDA panel that the vaccine manufacturer would not be able to produce Omicron-specific vaccines until late October or early November, while Pfizer pledges to have such vaccines ready by early October. FDA regulators shared their concerns that by the time such a vaccine specifically tailored to BA.4 and BA.5 is developed, it will already be outdated. This underscores the fact that chasing the virus through a vaccine-only strategy is a futile game.

Infectious disease specialist Dr. Mark Sawyer from the UC San Diego School of Medicine told the Times, “We’re all troubled by the steady erosion of immune protection. We’re going to be behind the eight ball if we wait longer.” He added that “right now the critical thing is the manufacturers need to know what to put into their vaccine. Over the coming months, I think we’ll get a sense, and there’ll be plenty of time for debate over who is most appropriate for boosters.”

However, potential BA.4/BA.5-specific boosters and next generation therapies require funding for the Biden administration to bid with suppliers. White House COVID-19 response coordinator Dr. Ashish Jha said on Wednesday: “There are new generations of treatments that are coming online, companies that are making them with some very promising data. [However,] the US government and no one in the US is negotiating with these companies for these treatments because we don’t have the resources.” Yet, there are ample resources to fund the US-NATO proxy in Ukraine against nuclear-armed Russia, and as President Joe Biden reiterated Thursday, to do so for “as long as it takes.”

Additionally, funding and research into pan-coronavirus and intranasal vaccines are urgently needed. However, these must be coordinated through a strategy that also ensures non-pharmaceutical measures are taken to end the perpetual community transmission of the virus and prevent the development of newer coronavirus strains. These treatments must be prioritized for health care workers and patients at long-term care facilities, the elderly, and essential workers, while infrastructure for air quality and ventilation needs to be urgently undertaken.

There is no political tendency outside of the International Committee of the Fourth International (ICFI) calling for a coordinated strategy to eliminate the coronavirus globally, which would prevent the needless death and debilitation of millions more people.

In a critical video published this week, Evan Blake, a WSWS writer and coordinator of the Global Workers’ Inquest into the COVID-19 Pandemic, offers a clear and concise outline of the current surge of the pandemic and what must be done to stop it. We urge all of our readers to share this video as widely as possible at your workplaces and across social media, and to take up its call to build a mass international movement to end the pandemic.

© World Socialist Web Site