Rise in sudden deaths among young people with “mild” COVID-19 points to urgent need to end the pandemic

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More than two-and-a-half years into the SARS-CoV-2 pandemic, evidence of the long-term consequences of infection and reinfection from the virus is beginning to emerge. There is an increase in sudden deaths from heart attacks and strokes among young people infected with what the Centers for Disease Control and Prevention (CDC) refers to as “mild” cases of COVID-19.

The CDC defines “mild” infections as those in which individuals have various signs and symptoms of COVID-19—such as fever, cough, sore throat, malaise, headache, muscle pain, nausea and vomiting, diarrhea, loss of taste and smell—but who do not have shortness of breath, dyspnea, or abnormal chest imaging.

While the Biden administration, the CDC and governments around the world write off what they consider mild cases of COVID-19, it is becoming apparent that the aftereffects of even “mild” illness or sequelae can lead to hospitalization and long-term issues. This can take the form of Long COVID—a set of chronic health issues for months, years or possibly a lifetime—as well as sudden death in otherwise relatively healthy people.

While many scientists and medical professionals are beginning to sound the alarm, the full scope of the COVID-19 sequelae is not taken seriously, as governments around the world instead push for the dropping of public health measures aimed at containing the virus, allowing it to run rampant and develop further immune-evading mutations. As a result, concerned citizens are attempting to track alarming Long COVID symptoms and increasing sudden deaths.

One such individual, Jess, or @MeetJess on Twitter, spoke to the WSWS about twitter threads she has put together that compile dozens of recent sudden deaths of primarily younger people and a number of athletes. These threads have been widely shared with numerous commenters who have themselves noted that they have loved ones in the prime of their lives who have unexpectedly died.

“I’m an advocate but I’m also a concerned citizen,” Jess states. “I’m not a doctor or a scientist, that’s why I want to make it very clear. I started these threads just to make people pay a little bit more attention. Also, I’m a parent, so I’m also concerned for the future of my child, whom I’ve kept home now since the pandemic has started. Additionally, I do work with seniors, mostly in the dementia and Alzheimer’s field … so I’ve always been very passionate about the rights of everybody and providing care to everybody, not just a certain population.”

She continued, “People were dying from sudden deaths before COVID, but not at this rate and not at these ages. The studies are clear that a COVID infection will increase your chances and put you at risk for stroke and cardiovascular issues. It’s a known fact, there’s scientific studies and I always post studies within each of my threads.

“When we talk about athletes, I think what we’re seeing is that a lot of these athletes that had their COVID infection ‘milestones’ are exercising 10 days later or five days later because they feel great. They’re pushing themselves and we see stories of scientific studies showing that the more you push yourself the more you put yourself at risk for long COVID, for arrhythmias and for other heart conditions.”

A few of the reports that Jess has shared on her twitter account include:

• Twenty-one-year-old Chloe Franklin from the UK, who died suddenly in February 2020 after visiting her GP for a persistent cough and difficulty breathing. The young twin was placed on a ventilator and never recovered; she died several days later from sepsis and a massive stroke.

• On October 10, 44-year-old Giovanna Fabrica, a teacher in Villa Bartolomea, Italy, collapsed and died in front of her students. According to the school, the teacher had not suffered from any illness prior to her collapse.

• On September 7, in the Nellore district of India, 13-year-old student Sheikh Shaheeda suddenly collapsed and died from cardiac arrest after standing up to answer a question from the teacher.

While these tragedies cannot be linked definitively to COVID-19, the increase of sudden deaths among often young and relatively healthy people points to the urgent need to dedicate funding and the world’s best scientific minds to the study of COVID-19 sequelae. These sudden deaths also throw a wrench into the conception that COVID-19 poses only a “mild”

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risk to the population.

Existing research suggests that long-term risks of COVID-19 infection include strokes, heart attacks and organ damage, all of which could be behind the phenomenon of sudden deaths.

One study published in *Nature* in May 2022 looked at more than 30,000 vaccinated patients. It found that patients who had experienced COVID-19 breakthrough infections prior to Omicron had a higher risk of death and debilitating Long COVID symptoms involving multiple organs (lungs, heart, kidney, brain and others) when compared to controls without evidence of SARS-CoV-2 infection. This remained true when compared to seasonal flu, dispelling claims in the mainstream media that COVID-19 is no more harmful than the flu.

COVID-19 has also been shown to negatively impact the cardiovascular system. A peer reviewed study published in *Nature* in February 2022 titled "Long-term cardiovascular outcomes of COVID-19" found that individuals with COVID-19 infections, along with other side effects, developed an increased risk of developing cardiovascular disease. Researchers used a national health care database, studying a cohort of 153,760 people. In addition, the researchers used two separate control groups, each with over 5 million people.

Their research showed that the risk of developing cardiovascular disease increases by 60 percent in the first year after acute COVID infection, with approximately 4.5 percent more people developing these conditions. For major adverse cardiovascular events, the absolute increased risk was 2.3 percent. Although these risks were considerable for patients admitted to hospitals with severe COVID infections, even patients with mild disease had significantly increased cardiovascular outcomes.

In addition, previous scientific findings before the COVID-19 pandemic may suggest that gene abnormalities make some people more susceptible to the development of myocarditis, a rare type of heart inflammation. As a result, some experts hypothesize that after contracting COVID-19, those individuals may be at higher risk of developing worsening heart damage that could lead to sudden cardiac deaths among young people.

Emerging studies are also showing that strokes are occurring at higher rates among young people who have been infected with COVID-19. A large research study published in the American Heart Association's journal *Stroke* examined 432 patients from 136 research institutions in 32 countries. Their data showed an increased incidence of ischemic stroke in young patients compared to pre-pandemic levels.

Of the patients who suffered a stroke, more than one-third of those studied were under the age of 55 and less than a quarter did not have the expected risk factors such as smoking, diabetes and hypertension. Significantly, some of the patients who suffered stroke symptoms and presented to emergency departments were asymptomatic for COVID-19, debunking the myth that mild or asymptomatic infections do not carry any risk.

It appears that no age group is immune from the dangers of COVID-19 and even so-called mild and asymptomatic cases can result in long-term illness and organ damage that can lead to debilitation and death. Vaccination also does not prevent the development of Long COVID, further highlighting the great social crime being carried out against the world's population as the ruling class allows the virus to run rampant, pushing the false narrative of a vaccine-only strategy that includes only a fraction of the world's population.

The ruling class policy of mass infection has allowed the virus to continue to mutate and become more deadly and immune-evasive. Dangerous new variants, such as BQ.1.1 and XBB, have created a growing wave of infections unlike anything seen since the start of the pandemic, concerning many scientists and medical professionals. These variants are the direct result of the unhindered spread of COVID-19, which allowed the Omicron variant to develop hundreds of immune-evading mutations.

As a result, infections and reinfections are expected to continue to rise sharply, killing hundreds of thousands and debilitating scores more. Some of those who appear to recover from "mild" infections may find themselves hospitalized or dead weeks to months later.

Capitalism and policies of the ruling elite have led to the deaths of 6,545,561 worldwide. While billions face the threat of infection and its possible debilitating after-effects, the US and its capitalist allies spend untold billions on the US-NATO proxy war in Ukraine while scientific research and strategies to fight the pandemic are starved for funds.

It is urgent that the working class respond with a coordinated campaign to put an end to these policies of mass infection and death. The fight to end the pandemic requires organization and coordination of the working class on a world scale to stop the pandemic, end imperialist war and rebuild society on socialist foundations.

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