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Devastating COVID-19 surge in Okinawa exposes lies that the pandemic is over

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A devastating surge of COVID-19 infections and hospitalizations is now ripping through the island of Okinawa in Japan. It is the worst COVID-19 wave that the island has experienced, with hospitalization rates now at 48.39 per hospital, surpassing the previous peak reached in January 2023.

One hospital worker recently told the Okinawa Times, “Even after contacting seven or eight hospitals, we are still unable to find a place to admit patients. The situation is not so much a medical crisis as a collapse of the system.”

This alarming development, which raises the possibility that a new and far more dangerous variant could be spreading in Okinawa, has gone entirely unreported by all media outlets outside of Japan. It was only brought to the world’s attention through a series of widely-shared tweets by Dr. Hiroshi Yasuda, a professor at the University of Hiroshima’s Research Institute for Radiation Biology and Medicine.

Extrapolating on Okinawa’s latest COVID-19 data report, which found that there were an estimated 12,260 infections for the week of June 26 to July 2, Dr. Yasuda noted, “As the population of Okinawa is about 1.4M, the weekly number above is equivalent to about 1 million patients in Japan and nearly 3 million patients in the United States.”

The same data report shows that 1,130 people are presently hospitalized with COVID-19 in Okinawa. Extrapolated to the US population, this would be the equivalent of roughly 257,000 COVID-19 hospitalizations, dwarfing the US peak of roughly 155,000 reached on January 19, 2022, during the first Omicron surge.

Okinawa is Japan’s poorest island and home to a largely working class population. It is also the site of most of US imperialism’s military bases in Japan, which are widely resented by locals and were previously linked to major COVID-19 outbreaks in Okinawa.

There is almost no COVID-19 genomic sequencing done in Okinawa, and therefore it is unclear which variant or variants are fueling the ongoing wave. The only available data on variants is a June 24 tweet from an unverified source, believed to be from a doctor who works in the COVID-19 ward of one of Okinawa’s largest hospitals. The data showed the following as the dominant Omicron subvariants in Okinawa for the week of June 5-12: XBB.1.9.1 (31.1 percent), XBB.1.5 (24.4 percent), XBB.1.16 (15.6 percent) and XBB.2.3 (11.1 percent).

According to the most recent nationwide data, the dominant variants in Japan as a whole from June 5-19 were Omicron XBB, XBB.1.5 and XBB.1.16, which collectively accounted for 87 percent of sequenced cases.

Given this limited available data, one cannot know for certain whether the present surge in Okinawa is the product of a new variant that is either more infectious, immune-evasive, pathogenic or some combination of the three. However, this is entirely possible, and the precautionary principle dictates that a globally coordinated response to address this crisis must begin immediately. Massive resources must be allocated to investigate the medical situation in Okinawa, genetically sequence as many cases as possible and safely treat all affected patients.

The objective developments in Okinawa and their broader global context expose the premature and unscientific character of the announcement by the World Health Organization (WHO) ending the public health emergency (PHE) for COVID-19 on May 5, as well as the unrelenting propaganda from capitalist politicians and the corporate media falsely claiming that the pandemic is over.

In fact, the ongoing COVID-19 surge in Okinawa takes place two months after the Japanese government of Prime Minister Fumio Kishida officially downgraded COVID-19 from a Class 2 to a Class 5 disease, equivalent to the seasonal flu. This decision was made on May 8, three days after the WHO ended the PHE (Public Health Emergency). It prompted the ending of all remaining mitigation measures in Japan, including five-day isolation requirements for infected patients, undoubtedly contributing to the present surge in Okinawa. While many people still wear masks in Japan, they are often surgical masks, which are largely ineffective in protecting against airborne transmission.

The same process has unfolded globally, with virtually every world government seizing upon the WHO’s decision to end their own PHEs and lift whatever limited mitigation measures and data tracking were still in place. As a result, global society is now wholly unprepared for the evolution of more dangerous variants and future waves of the pandemic.
The Biden administration in the US, which behind the scenes undoubtedly pressured the WHO to lift the PHE, has epitomized this process. After Biden ended the PHE in the US on May 11, the Centers for Disease Control and Prevention (CDC) abruptly stopped reporting COVID-19 infections altogether. The White House COVID-19 Response Team headed by Ashish Jha was quietly disbanded, and CDC Director Rochelle Walensky resigned from her position, following in the footsteps of Anthony Fauci, who resigned last December.

Throughout the past two months, the American corporate media—the most subservient in the world—has dutifully accepted the lies of the Biden administration that COVID-19 has magically disappeared. They have played the most instrumental role in this propaganda campaign by dropping all reporting on the pandemic, effectively disarming the population to the ongoing dangers. Any articles that do appear in the *New York Times*, *Washington Post* or other outlets typically refer to the pandemic in the past tense.

Due to the scrapping of COVID-19 testing and data reporting in the US and throughout most of the world, global society is now flying blind into an ongoing pandemic.

Despite their limitations, estimates of excess deaths and wastewater surveillance prove that COVID-19 continues to spread at a high level and cause thousands of needless deaths each day, while likely debilitating millions more with Long COVID each week.

The US wastewater tracker Biobot indicates that while viral transmission has declined since January, it remains far higher than troughs between waves in 2020 and 2021. Using this data, infectious disease modeler @JPWeiland calculated that at present a staggering roughly 200,000 people are being infected with COVID-19 in the US each day, or roughly one in every 1,650 Americans.

The only reliable global tracker of excess deaths from *The Economist* estimated that in the first week of July there were still 11,300 daily excess deaths attributable to the pandemic. Their cumulative total now estimates that there have been 24 million excess deaths globally, more than triple the official COVID-19 death toll of 6.9 million.

In a recent talk at the annual American Society for Virology conference, evolutionary biologist Trevor Bedford spoke on the rapid clip at which SARS-CoV-2 continues to evolve. He stated that the virus is “evolving just as fast as it was in 2021, evolving about two-and-a-half times faster than influenza H3N2, which we need to update our vaccines to every year or two, and is not really showing signs of slowing down.”

In the coming weeks, it will become apparent whether or not the variant causing the surge in Okinawa marks a qualitatively more dangerous variant which reverberates globally. Whether or not this transpires, this experience must be taken as a sharp warning. The way this has unfolded is precisely how such a scenario would unfold, with virtually no reporting whatsoever and people left to fend for themselves as billions are infected, hospitals inundated and morgues unable to process the deceased.

In a highly significant interview with the World Socialist Web Site last month, biologist Arijit Chakravarty outlined these very dangers. Throughout the pandemic, the research team led by Chakravarty has continuously been proven correct in its analyses and projections. Characterizing the present policy as essentially having “no plan” and being entirely reactive, Chakravarty stressed:

> In that kind of reactive strategy what will happen is billions will be infected before we realize something is wrong. And that’s too late to do anything about it. So not only is the pandemic very much not over, but by creating the impression that the pandemic is over in the face of rampant viral spread and continuing rapid viral evolution, we are essentially sticking our chin out and asking the virus to do its worst.

He then made the following stark warning:

> I can’t predict the outcome of the next wave. I can’t predict the outcome of the next five waves. But, at the rate that we are going, a prediction can be made with a high degree of certainty that something bad will happen sooner than later along these lines. Keep this pandemic running for another five years, and you’ll face a debacle on a scale that you haven’t yet seen. That’s a given. It can only get worse if you don’t want to do anything about it.

It is essential that the international working class understand the continued threat posed by COVID-19 and build a global movement, in unity with scientists and progressive layers of the middle class, fighting for the principles of public health.

The world capitalist system has proven itself wholly incapable of resolving this pandemic and preventing other existential threats of nuclear war, climate change and future pandemics. Only through international socialist revolution and the rebuilding of society based on economic planning can these and all other social problems confronting mankind be addressed.