

Rising COVID hospitalizations confirm that US summer surge is underway

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Consistent with the *World Socialist Web Site's* (WSWS) warnings of a summer surge of COVID infections as evidenced by wastewater levels of SARS-CoV-2, the Centers for Disease Control and Prevention (CDC) reported this week that hospitalizations due to infections with the coronavirus were up by more than 10 percent across the country.

These have also been substantiated by the rise in emergency room visits for COVID-19 from 0.49 percent of all visits in June to 0.73 percent of all visits presently, an increase of nearly 50 percent. In absolute numbers, for the week of July 15, 2023, COVID-19 admissions had risen to 7,109 from 6,444 the week prior, an increase of 11 percent.

Although these levels remain far below last year's at this time, during the second eruption of Omicron infections, when hospital admissions had reached more than 44,000 per week, estimates suggest that current rates will triple by late August, thus reaching half the peak of last summer.

The evidence for the surge has been corroborated by the rise in the positivity rate in PCR testing which has climbed from 4.1 percent last month to 6.3 percent in July. One must assume these figures underrepresent the real magnitude of infections as most people rely on home RAT tests, which are far less accurate, or have abandoned testing altogether.

Even the World Health Organization (WHO) has acknowledged that "some countries continue to report high burdens of COVID-19, including increases in newly reported cases and, more importantly, increase in hospitalizations and deaths—the latter of which are considered more reliable indicators given the reductions in testing." The international health agency noted that globally, over 836,000 new COVID-19 cases and over 4,500 deaths were reported in the last 28 days (June 19

to July 16, 2023).

The WHO also acknowledged that COVID-19 "remains a major threat." The agency added, "[We] continue to urge governments to maintain, not dismantle, their established COVID-19 infrastructure. It is crucial to sustain surveillance and reporting, variant tracking, early clinical care provision, administration of vaccine boosters to high-risk groups, improvements in ventilation and regular communication."

Although the issuance of these warnings is appropriate and necessary, one must ask how after the sudden and abrupt declaration of the end of COVID-19 emergency measures in the first week of May 2023, is any government likely to heed the WHO's cautionary remarks?

To say that the virus never got the memo is not intended to trivialize the pandemic. It is to assert that in the face of a rapidly evolving and highly infectious respiratory pathogen, the declaration of an end to the pandemic has meant not an actual conclusion of the ongoing calamity, but that every measure, however meager, that had previously been undertaken to mitigate or eliminate the virus has now been terminated.

The declaration of an official end to the pandemic is really a declaration of an end to any effort at bringing the coronavirus under any semblance of control. In fact, there was ample evidence that the current summer surge was building even before these meaningless declarations had been made. The timing of the announcement was determined months ahead of time so that it would coincide with the usual spring lull in infections, and urge the population to regard the coronavirus as no longer dangerous, but rather akin to just a "little flu."

Meanwhile, one in 10 people can expect to develop

Long COVID after an Omicron infection, regardless of its severity or their age. And repeat infections, regardless of severity, predispose to long-term health consequences, morbidity and higher risk of mortality. The consequences include heart attacks, irregular heart rhythms, blood-clotting events, strokes, and an assortment of ailments like metabolic derangements and neurological dysfunction. Among children, evidence has shown that the risk of diabetes grows and injuries to their neurological systems are considerable.

Rather than declaring the end to the pandemic, the WHO and every other country facing the potential consequences of letting the virus rip through their population, should be investing in new technologies in HVAC and filtration, Far-UVC ultraviolet disinfection and SARS-CoV-2 detectors.

Conceivably, the breakthrough invention from researchers at Washington University in St. Louis, who designed a SARS-CoV-2 detector that can sense as few as seven to 35 viral particles per liter of air within five minutes, could be rapidly manufactured and deployed if sufficient dollars were directed to installing them in schools, hospitals and public spaces. Such devices would go far in eliminating infections in indoor spaces, but not a word from the White House has been forthcoming on this achievement.

Currently, the WHO is tracking two variants of interest—XBB.1.5 and XBB.1.16. The fall COVID vaccines will be based on the former strain, although it now only represents 12 percent of all tracked variants, compared to 80 percent in mid-April.

There are also seven other variants that are under monitoring (VUM) and include BA.2.75, CH.1.1, XBB, XBB.1.9.1, XBB.1.9.2, XBB.2.3, and EG.5. The last-named is making headway in the US, accounting for more than 11 percent. This particular variant was added to the WHO's VUM just last week. It is a descendent of XBB.1.9.2, having an additional mutation called F456L on its spike protein, which appears to increase the variant's infectivity.

Despite the death of more than 1.1 million Americans during the pandemic, rather than taking a proper accounting of the impact that ending the emergency measures would have, the Biden administration has dealt further blows to a public health infrastructure that had already fallen into a decrepit state before the pandemic.

Not only do these developments continue to raise the alarms on the national response to the COVID pandemic, a recent study by Harvard Law School and New York University has found new sources for future pandemics. The two institutions conducted a comprehensive analysis of animal commerce and found that animal industries in the US pose serious risks in that area. They also concluded that the government lacks any comprehensive strategy to address such a threat, meaning the country's pandemic preparedness capacity is woefully lacking.

Ann Linder, lead author of the report and Associate Director of Policy & Research with the Brooks McCormick Jr. Animal Law & Policy Program at Harvard Law School, noted, "COVID has infected more than 100 million Americans and killed over a million of them. But the next pandemic may be far worse and might happen sooner than we think. The stakes are simply too high for the problem to be ignored."

The US imports more than 220 million wild animals per year and most enter without health checks or disease testing, according to the report. In 2022, the country processed over 10 billion livestock, with slaughterhouses inspection being cursory. Given the number of inspectors that are assigned, each one would have to examine 600 animals per hour for signs of disease. Additionally, the US is the largest global producer of pigs and poultry, animals known to harbor previous pandemic influenzas.

Instead of addressing the current and future infectious diseases that threaten the entire social edifice, the White House and the legion of corporate politicians are hell-bent on promoting war with Russia and China, and devoting the scientific, technical and industrial resources of the United States to more effective weaponry. Such resources, if applied systematically, could eliminate COVID-19 and other disease threats in the United States and worldwide.



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