

The hidden COVID-19 wave and the destruction of public health

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In recent weeks it has become clear that the United States, as well as Italy, Japan, Britain, Spain and other countries throughout the world are undergoing a significant new surge of the COVID-19 pandemic. This is taking place with virtually no public awareness, reporting in the corporate media or communication from government officials.

As schools reopen globally in the coming weeks after summer or winter break, hundreds of millions of children will be packed into overcrowded, poorly ventilated classrooms, deepening the current wave while society remains totally unprepared.

The following data points for the US demonstrate the reality of the ongoing surge:

- Over the past six weeks, the amount of SARS-CoV-2 in wastewater has risen by 114 percent, according to Biobot Analytics. Infectious disease modeler JP Weiland estimates that this translates to roughly 419,000 Americans now being infected with COVID-19 each day and roughly 4.2 million Americans in total currently infected with the virus.

- CDC data shows that over the past month COVID-19 hospitalizations have climbed from 6,450 to 9,056 admissions per week, an increase of 40 percent.

- The Walgreens COVID-19 index now shows a nationwide positivity rate of 44.7 percent, the highest rate since the start of the pandemic. While testing is down dramatically, this elevated figure is a clear sign that a surge is underway. Southern and Southwestern states like Florida, Alabama, Texas, New Mexico, Nevada and California are most impacted, likely due to the heat wave driving people indoors, with test positivity rates above 50 percent in each state.

Scientists are forced to estimate the spread of COVID-19 by sampling wastewater and tracking hospitalizations because the federal government has stopped counting the number of COVID-19 cases.

This is the first wave of the pandemic since the World Health Organization (WHO) and the Biden administration ended their COVID-19 public health emergency (PHE) declarations in early May, which prompted the Centers for Disease Control and Prevention (CDC) and other health agencies globally to stop reporting COVID-19 infections altogether.

The total lack of data has been accompanied by a media blackout. With no data or reporting, the public largely gets its information about the spread of COVID-19 on the basis of how many people they know who are ill.

Some of the most basic facets of public health—testing, contact tracing and reporting of disease outbreaks—have been systematically dismantled.

Testing, treatments and vaccines are being completely privatized and sold at marked-up prices that are unaffordable for the vast majority of the population. Under the private market, updated vaccines will not be available in the US until October at the earliest—well after the current surge—and later or never throughout the rest of the world.

Whatever limited media coverage or official statements are made on the present wave of the pandemic, they all seek to downplay its significance. In particular, there is a concerted effort to ignore the scientifically proven aftereffects of COVID-19 infections, including prolonged symptoms known as Long COVID and increased risk of medical emergencies, such as heart attacks and strokes, which are rarely recorded as official COVID-19 deaths.

Among the most alarming recent findings include:

- A preprint study published in June found that SARS-CoV-2 can attack the vagus nerve, potentially the source of many Long COVID neurological symptoms, as well as shortness of breath.

- COVID-19 infection has been linked to increased risk of heart attack for all ages. A study published last September found a staggering 30 percent increase in heart

attacks among those between 25 and 44 years old during the first two years of the pandemic. Dr. Susan Cheng, a co-author of the study, remarked, “Young people are obviously not really supposed to die of heart attack. They’re not really supposed to have heart attacks at all.”

• A review published last month in *Nature* estimated that roughly “400 million individuals globally are in need of support for Long COVID.” The authors concluded, “The oncoming burden of Long COVID faced by patients, health-care providers, governments and economies is so large as to be unfathomable.”

Multiple studies have shown that all the risks associated with COVID-19 infections are compounded with each reinfection. In fact, one of the most concerning features of the current surge is that it is taking place under conditions in which virtually the entire population has either previously been infected with COVID-19 or is fully vaccinated. In other words, over 400,000 Americans and millions more globally are presently suffering breakthrough infections or reinfections each day.

Meanwhile, viral evolution continues unabated, with SARS-CoV-2 changing constantly by finding more innovative ways to replicate throughout the global population. The present wave of the pandemic is being driven in part by the Omicron EG.5 variant, nicknamed “Eris” by scientists. It accounts for over 35 percent of all sequenced cases globally and is now the most prevalent variant in the US and other countries. It is a descendent of the Omicron XBB recombinant variants, which have been dominant globally since last winter.

One of the key mutations of Eris is attributable to the use of monoclonal antibodies, as predicted by scientists months ago. Scientists are now monitoring another mutation, with the combination of both mutations showing increased immune-evasion and producing more severe infections. This combination, referred to as “FLip,” is most prevalent in Spain and Brazil, with the former seeing a rapid spike in cases in recent weeks.

Noted immunologist Yunlong Richard Cao recently explained that the recent evolutionary change “is a very smart move by the virus.” He predicted that this winter there will be further mutations that allow the virus to more easily infect those who have been vaccinated.

These developments raise significant concerns about the future trajectory of the pandemic. In effect, global society is being forced to accept the premise that a dangerous, highly transmissible and rapidly evolving coronavirus will kill millions each year and must simply be endured. Never before in modern history has there been such a level of

sheer indifference to what continues to be a huge public health disaster.

As bad as the response was in 2020, at that time governments were forced to implement limited public health measures. Now, in the worst case scenario in which a far more dangerous variant evolves with total immune-escape, a higher fatality ratio and greater infectivity, one must assume that the response of world governments would be to do nothing. The capitalists are determined to never go back to the prior era of public health.

While trillions are squandered on war and bank bailouts, virtually no funding whatsoever is allocated to public health or social infrastructure necessary to prevent disease transmission, treat affected patients or develop more advanced vaccines and therapeutics. The trade union bureaucracies, firmly integrated into the capitalist state, play the essential role in suppressing the class struggle, allowing the corporations to get away with social murder.

The international working class cannot accept this dire scenario. In every school, factory, warehouse and other workplace, workers must form rank-and-file safety committees to take up the struggle in defense of the health and well-being of workers and society as a whole. Public health and sanitation are among the most critical social gains won by the working class through bitter struggle and are now being clawed back by the capitalists and their politicians globally.

The International Workers Alliance of Rank-and-File Committees (IWA-RFC), formed in 2021 in part to organize a working class movement to stop the pandemic, continues to lead this struggle and fight for all forms of workplace safety. As the global crisis of capitalism deepens, it is all the more vital that the IWA-RFC be built as the center of opposition for the international working class against the pandemic and war, and to secure inflation-busting wage increases and all the social rights of the working class.



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