

Ongoing COVID-19 surge heralds another winter of death

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Another winter of death is now unfolding in the United States and across the Northern Hemisphere as the JN.1 variant of the coronavirus continues to surge globally. Wastewater data from the United States released Tuesday indicate that upwards of 2 million people are now being infected with COVID-19 each day, amid the second-biggest wave of mass infection since the pandemic began, eclipsed only by the initial wave of the Omicron variant during the winter of 2021-22.

There are now reports on social media of hospitals being slammed with COVID patients across the US, Canada and Europe. At a growing number of hospitals, waiting rooms are overflowing, emergency rooms and ICUs are at or near capacity, and ambulances are being turned away or forced to wait for hours to drop off their patients.

According to official figures, COVID-19 hospitalizations in Charlotte, North Carolina are now at their highest levels of the entire pandemic. In Toronto, Dr. Michael Howlett, president of the Canadian Association of Emergency Physicians, told *City News*, “I’ve worked in emergency departments since 1987, and it’s by far the worst it’s ever been. It’s not even close.” He added, “We’ve got people dying in waiting rooms because we don’t have a place to put them. People being resuscitated on an ambulance stretcher or a floor.”

Dr. Joseph Khabbaza, a pulmonary and critical care specialist at the Cleveland Clinic, told the *Today Show* website: “The current strain right now seems to be packing a meaner punch than the prior strains. Some features of the current circulating strain probably (make it) a little bit more virulent and pathogenic, making people sicker than prior (variants).”

Indeed, two recent studies indicate that JN.1 more efficiently infects cells in the lower lung, a trait that existed in pre-Omicron strains which were considered more deadly. One study from researchers in Germany and

France noted that BA.2.86, the variant nicknamed “Pirola” from which JN.1 evolved, “has regained a trait characteristic of early SARS-CoV-2 lineages: robust lung cell entry. The variant might constitute an elevated health threat as compared to previous Omicron sublineages.”

The toll on human life from the ongoing wave of mass infection is enormous. It is estimated that one-third of the American population, or over 100 million human beings, will contract COVID-19 during just the current wave. This will likely result in tens of thousands of deaths, many of which will not be properly logged due to the dismantling of COVID-19 testing and data reporting systems in the US. When *The Economist* last updated its tracker of excess deaths on November 18—before the JN.1 wave began—the cumulative death toll stood at 27.4 million, and nearly 5,000 people were continuing to die each day worldwide.

The current wave will also induce further mass suffering from Long COVID, which has been well known since 2020 to cause a multitude of lingering and often debilitating effects. Just last week, a pre-print study was published in *Nature Portfolio* showing that COVID-19 infection can cause brain damage akin to aging 20 years. The consequences are mental deficits that induce depression, reduced ability to handle intense emotions, lowered attention span, and impaired ability to retain information.

Other research indicates that the virus can attack the heart, the immune system, digestion and essentially every other critical bodily function. The initial symptoms of COVID-19 might resemble those of the flu, but the reality is that the virus can affect nearly every organ in the body and can do so for years after the initial infection. While vaccination slightly reduces the risks of Long COVID, the full impact of the virus will be felt for generations.

The latest winter wave of infections and hospitalizations takes place just eight months after the World Health

Organization (WHO) and the Biden administration ended their COVID-19 public health emergency (PHE) declarations without any scientific justification. This initiated the wholesale scrapping of all official response to the pandemic, giving the virus free rein to infect the entire global population *ad infinitum*.

A virtual blackout of any mention of the coronavirus in the corporate media accompanied the swan song of official reporting. From then on, if illnesses at hospitals or among public figures were referenced at all, it was always with the euphemism “respiratory illness.” The words COVID, coronavirus and pandemic have been all but blacklisted, and the facts about the dangers of the disease have been actively suppressed.

Summarizing the cumulative results of this global assault on public health, the WSWS International Editorial Board wrote in its New Year 2024 statement:

All facts and data surrounding the present state of the pandemic are concealed from the global population, which has instead been subjected to unending lies, gaslighting and propaganda, now shrouded in a veil of silence. There is a systematic cover-up of the real gravity of the crisis, enforced by the government, the corporations, the media and the trade union bureaucracies. Official policy has devolved into simply ignoring, denying and falsifying the reality of the pandemic, no matter what the consequences, as millions are sickened and thousands die globally every day.

In response to the latest wastewater data, there have only been a handful of news articles, most of which have sought to downplay the severity of the current wave and largely ignored the deepening crisis in hospitals.

The official blackout has given rise to an extraordinary contradiction in social life. The reality of mass infection means that everyone knows a friend, neighbor, family member or coworker who is currently or was recently sick, or even hospitalized or killed, by COVID-19. Yet the unrelenting pressure to dismiss the danger of the pandemic means that shopping centers, supermarkets, workplaces and even doctor’s offices and hospitals are full of people not taking the basic and simple precaution of masking to protect themselves. Every visit outside one’s home carries the risk of being infected, with unknown long-term consequences.

As the pandemic enters its fifth year, it is critical to draw the lessons of this world historical experience. The past four years have demonstrated unequivocally that capitalist governments are both unwilling and incapable of fighting this disease. Their primary concern has always been to ensure the unabated accumulation of profits by corporations, no matter the cost in human lives and health.

The real solution to the coronavirus is not to ignore it, but to develop a campaign of elimination and eradication of the virus worldwide. To do so requires the implementation of mask mandates, mass testing and contact tracing, as well as the installation of updated ventilation systems and the safe deployment of Far-UVC technology to halt the spread of the virus. The resources for this global public health program must be expropriated from the banks and financial institutions, which are responsible for the mass suffering wrought by the pandemic.

All of these measures cut directly across the profit motive and the real disease of society: capitalism. As such, the struggle against the coronavirus is not primarily medical or scientific, but political and social. The international working class must be educated on the real dangers of the pandemic and mobilized to simultaneously stop the spread of the disease and put an end to the underlying social order that propagates mass death. This must be developed as a revolutionary struggle to establish world socialism.



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