

As 8th wave of mass infection finally recedes

# Over 1,000 Americans have died of COVID-19 each week since August 26

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26 March 2024

According to national wastewater data on SARS-CoV-2 levels updated Monday by Biobot Analytics, COVID levels have continued to decline across the country coming off the massive winter surge of cases.

Although the 8th wave of infections—the second largest in the over four years of the ongoing pandemic—is concluding, evidence indicates that the trough of infections is settling at higher levels than in previous pandemic years. According to Dr. Michael Hoerger and colleagues from Tulane University, the spring wave may begin as soon as mid- to late-April. This is not surprising given the recent guidance set forth by the Centers for Disease Control and Prevention (CDC) that it is safe to return to work while being infected and contagious.

Presently, JN.1, JN.1.13, and JN.1.18 account for 97.8 percent of all sequenced variants reported to the CDC. Approximately 10,700 people were admitted to hospitals due to COVID-19 between March 10 and March 16, 2024.

The latest provisional data from the CDC indicates that at least 1,036 people died of COVID-19 during the week ending March 2, which would mean that for 28 consecutive weeks since August 26, more than 1,000 people died from a preventable infection. In total, the CDC estimates there have been roughly 1,185,000 COVID-19 deaths in the US, but reliable estimates of excess deaths attributable to the pandemic place the real figure at over 1.4 million.

The complete silence on the present state of the pandemic and the ongoing dangers facing the global population is not surprising. It has been the coordinated response between governments and public health agencies from the beginning of the pandemic to, in stepwise fashion, normalize illnesses and deaths from COVID-19 and to drive out all public discussions on the catastrophic impacts that the prioritization of profits over lives has had worldwide.

The last four years have seen an unprecedented transfer of wealth into the pockets of the richest, while laying waste to nearly 30 million people. Indeed, while well over 1 million Americans have died of COVID-19, the number of

billionaires rose from 614 to 737 with an 87.6 percent increase in their combined wealth, reaching an unprecedented \$5.529 trillion.

As epidemiologist Dr. Ellie Murray of Boston University aptly stated on Twitter/X in response to the anti-public health guidance by the CDC on March 5, 2024, “With nearly as many hospitalizations in January 2024 as in January 2023, it’s clear that COVID is not growing milder and it’s not fading away. The real question, then, is not whether COVID is still a pandemic, but how much COVID illness and death are we willing to accept?”

For the financial oligarchs, the sky is the limit given their massive financial windfall. Since most of those who suffer fatal consequences from their COVID-19 infections are the elderly or those with significant co-morbidities, the “Forever COVID” policy functions as a form of passive eugenics and is in line with the fascistic mentality that is becoming all too common among the ruling elites.

According to Mike Hoerger’s recent estimates based on current wastewater levels of SARS-CoV-2, there are approximately 444,000 daily COVID-19 infections, or a rate of one in 108 people who are actively infectious. Of these, Hoerger estimates that between 22,000 to 89,000 people will go on to develop Long COVID each day, based on prevalence estimates ranging from 5-20 percent. Studies that emphasize the lower ranges are usually indicative of people who are experiencing severe and “enduring” Long COVID symptoms, while those suggesting a higher prevalence after acute COVID-19 may experience many disruptive symptoms that last several months before making a partial or complete recovery.

Clearly, there is much that remains to be elucidated about Long COVID, a complex disease that now afflicts an estimated hundreds of millions of people worldwide. However, the policy of “Forever COVID” also implies minimizing the impact this chronic debilitating condition has on the population. One cannot compare COVID-19 to the flu

and at the same time speak about the harrowing impact the disease has on the human body.

Hoerger and colleagues, however, caution that their estimates cannot predict the long-term harms that may come with COVID, and strongly urge the population to take all precautions against infections despite the attempts by Biden and CDC to put the pandemic in their rearview mirrors. They write,

If infections increase the risk of cancer or cardiovascular disease substantially and with increasing risk over 10 to 30 years, that is not captured well by these metrics. The metrics also do not encompass the 1.2 to 1.8 million Americans who have died of COVID-19. Future models may incorporate estimates of mortality.

This point was made all too real. In an article published in *Bloomberg* last month, the authors found that between 2020 and 2022, using CDC data, approximately a quarter-million more Americans over the age of 35 died from cardiovascular disease than historical trends would have predicted. They also found that “in 2023, age-adjusted stroke mortality was almost five percent above pre-pandemic levels ... while rates from deaths related to hypertensive heart disease, rhythm abnormalities, blood clots, diabetes and kidney failure were 15 to 28 percent higher.” The American Heart Association has predicted the cost of heart disease to exceed \$1.1 trillion by 2035.

In such objective context, one must ask what is the aim of the policy of “Forever COVID” if the result is the mass debilitation of the population? This begs a follow-on question: given the abandonment of all mitigation efforts, what levels of COVID-19 infections can the world face over the next several years?

According to Hoerger and colleagues, who have looked into historic annual trends (page 9 of linked document), they have discerned three waves per year. As the report clarifies, “It is not really a forecast, but merely a summary of historical data [using Biobot data]. To the extent the median provides a reasonable approximation of the future, it is a useful starting point for a gift-level forecast.” Hoerger’s four-week forecast suggests that by April 22, 2024, wastewater levels will be up 6 percent and daily COVID-19 cases will rise to 470,000.

After each massive winter wave, trends note a small spring peak by the beginning of May followed by the summer/fall wave that will crest in late August. The massive winter wave will begin in mid-October and peak during the New Year.

Due to the complete abrogation of all basic public health principles to prevent the spread of disease and the lackluster uptake of the vaccines, the rates and incidence of infections will solely be dependent on the population’s waning immunity after an infection. Given the recent persistence of high levels of transmission during February, the historical data may be a conservative roadmap for what can be expected. What is clear is that the widespread nature of infections will give the definition of “endemic disease” an unprecedented quality in which society can expect perpetual rates of mass infection and debilitation, with persistently high rates of death.

In a recent publication in the journal *Annual Review of Public Health* on the state of US public health, the authors noted that between the 2009 recession and the onset of the COVID-19 pandemic, the US public health workforce had lost 40,000 jobs (16 percent decline) and for the most part has not recovered even during the pandemic.

However, the contraction in the workforce had been well underway since the 1970s. The correlation between the rightward shift in the political establishment over the last several decades with the increased financialization of every aspect of life has meant the piecemeal ending of all social programs that had provided the working class a modicum of upward mobility.

The pandemic, rather than igniting a mass mobilization of resources to protect life and well-being, has inured the financial aristocracy to mass death and disease and transformed public health as a mechanism to buttress the diktats of the state. In conjunction with COVID-19, the recent spike in national cases of measles and syphilis are just additional objective verification of the demise of public health under capitalism. In fact, the COVID-19 pandemic itself, predicted by many in the years before, was a byproduct of the capitalist subordination of public health to private profit.

With the despised presidential campaigns of Joe Biden and Donald Trump, who are chiefly responsible for the deaths of more than 1 million Americans under their tenures, more than just the virus in the air. Mass consciousness has been deeply affected by the social crime of the ongoing pandemic. The working class must assimilate these lessons and fashion a cogent response through the building of a revolutionary movement that centers the fight for a socialist public health program.



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