

Dr. Delgado COVID-19 Update 08-14-20

Is the Window Closing?

The United States has a window of opportunity to beat back Covid-19 before things likely become much worse. That window is rapidly closing.

Winter is coming. Winter means cold and flu season, which is all but sure to complicate the task of figuring out who is sick with Covid-19 and who is suffering from a less threatening respiratory tract infection.

Unless Americans use the dwindling weeks between now and the onset of “indoor weather” to tamp down transmission in the country, this winter could be challenging on many fronts.

It is possible, though improbable, that some vaccines could be approved by then, thanks to historically rapid scientific work. But there is little prospect that vast numbers of Americans will be vaccinated in time to forestall whatever the winter months will bear.

Human coronaviruses, which cause many common colds, circulate year-round. Now is typically the low season for transmission. With the current prevalence nationally of Covid-19 and the inevitable rise of its concomitant cousins this fall, it portends to a concerning milieu.

Public health officials had hoped transmission of the virus would abate with the warm temperatures of summer and the tendency — heightened this year — of people to take their recreational activities outdoors. But throughout the country, people have been throwing Covid precautions to the wind, flouting public health recommendations in the process.

The best time to squash a pandemic is when the environmental characteristics slow transmission. It's your one opportunity in the year to leverage that extra assistance and get transmission rates under control.

Driving back transmission would require people to continue to make sacrifices, to accept the fact that life post-Covid cannot yet proceed as normal, not while so many people still remain vulnerable to the virus.

For many Americans, the disease has not yet touched

their lives — but the movement restrictions and other response measures certainly have. Most of the deaths have been the elderly. If more children were dying, it would likely be a far different situation.

With most K-12 school year resuming in our country — along with universities — in the next few weeks, transmission will likely take off and cases will start to climb again. At the time of the initial nationwide shut down, the U.S. had five thousand confirmed cases and almost 100 deaths related to covid. Now we stand at five million confirmed cases and over 160,000 deaths, but the clamor grows for in-person educational resumption even though no vaccine or viable treatment options are yet available.

Everyone has to work together to get cases down to more manageable levels, if the country hopes to avoid a disastrous winter. The virus is not going away until it has run its course. Cases will continue to proliferate unless transmission is further mitigated.

Update on Russian Vaccine

This week, Russian president Vladimir Putin announced

that the country had approved a coronavirus vaccine, seemingly for widespread use. But the vaccine has actually been approved only for use in a small number of citizens from vulnerable groups.

Although Putin announced that the vaccine had been approved for widespread use, the registration certificate issued by Russia's Ministry of Health actually covers only a small and initial group, including health care workers. The certificate also states that the vaccine cannot be approved for widespread use until Jan. 1, 2021, although statements by various Russian health officials seem to contradict that clause. This is all occurring prior to the phase three trial which measures clinical efficacy and safety. That is actually scheduled to start this week for the vaccine.

While inherent dangers exist to those who receive the vaccine prior to a “true” measure of its safety, the broader issue is the precedent it may set globally. Will other countries forge similar paths and prematurely inoculate its citizens based on availability? Reports are circulating that multiple countries are already in discussion with Russia to acquire its vaccine.

Can we expect Russia to be transparent as to its vaccine

response or safety? And if so, if a massive clinical failure ensues, will it increasingly dissuade those already hesitant to receive a vaccination? Phased trials are not only necessary, but scientifically proven to be the best road taken. By accelerating this process, it potentially creates more chaos when less is needed.

The Benefits of Data Exchange

Since the start of the pandemic, fast sharing of information has been a key weapon against the virus. It was the publication of the coronavirus genetic sequence in January, by Chinese scientist, that kicked off the vaccine race. With vaccine development, regardless of their point of origination, the continued sharing of data will be crucial.

As vaccines come on line, specific molecular measures beyond antibody response alone may prove to be more accurate at determining immunity and is an emerging focus of current research. If this occurs, additional vaccines to reach the market might be able to get approval based on these biomarkers alone. There will potentially not be a need to wait a year or proceed with phased trials for subsequent vaccine candidates.

Will “vaccine sovereignty” arise? Any country vaccinating its own citizens at the expense of other parts of the world seems counterproductive from a public health perspective and for any modicum of normalization. A resumption of global travel and trade will be dependent on minimizing transmission risk from those crossing borders. The sharing of data and any advances benefits all of us.

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