See You In... September? Why Public Health Folks Are Routing For a Long, Slow Epidemic

Stop the hoarding already. This is going to go on for months and months. And months.

March 13, 2020 By Mike Barr

It's nearly impossible to keep up with all the reporting on this, much of it quite impressive. Just yesterday I had shared with people a convincing paper suggesting the epidemic could peak in the U.S. in May (and that only about 13% of infections have been detected so far-- meaning that the true U.S. case load is more like 10,000, not the 1,663 being reported as of today).

This morning this excellent piece by the NYT's Nick Kristof and Stuart Thompson, working with various epidemiologists, argues for a peak in July-- with anywhere from 1M to 9M infections and between 300,000 and 1M deaths, all pretty much dependent on the measures we take today. And also whether testing is finally rolled out the way other countries, particularly South Korea, have managed to do it-- and if the arrival of warm weather does indeed slow the spread, as it has for other similar viruses. According to this modeling, it would not be until mid-September/ early October that all this will have pretty much abated for North America.

If you take their middling figures, assuming we're implementing the mass gatherings closures dutifully, we end up with 4.5M infections and 475,000 deaths. That also assumes, however, that the "widespread testing" piece begins to happen, something that thus far has defied both common sense and credulity.

Public health experts explain that 1 million (the best case scenario figure) infections over 18 months would be vastly preferable to 1 million infections over, say, 18 weeks, which would devastate an already precarious U.S. health system. Let's not even contemplate the 4 1/2, 6 and 9 million scenarios.

They note:

"Any disease model is only as good as the assumptions programmed into it, and there's so much uncertainty about the coronavirus that we shouldn't see this model as a precise prediction. One fundamental unknown is whether warmer weather will help reduce infections, as happens with the seasonal flu. If so, we could see a respite this summer, and then a resumption of cases in the fall

(that's what happened in 1918 with the Spanish flu pandemic). In addition, there are a number of treatments that are being tested and may prove helpful against the coronavirus. On the other hand, shortages of protective equipment like masks and chaos in hospitals may lead to higher death rates; the United States also has an older and thus more vulnerable population than China, from which much of the data comes. The point of a model like this is not to try to predict the future but to help people understand why we may need to change our behaviors or restrict our movements, and also to give people a sense of the sort of effect these changes can have."

Read the full article here.

At a press conference this afternoon, Governor Andrew Cuomo also spoke in terms of months and added, with something of an Angela Merkel flourish, "My guess is there are thousands and thousands of cases walking around the state of New York. Thinking you're going to escape coming into contact with this, it's not going to happen."

Still, even as the crisis worsens, Cuomo has stressed that roughly 80% of people infected with coronavirus get better on their own. Of the 421 people in the state who have tested positive to date, 50-- or 12%-- have been hospitalized.

NYC is reported to have 20,000 of the state's 53,000 hospital beds-- and 5,000 ventilators, although many are said to already being used to keep patients — including stroke victims and others — alive. NY gov noted that this number of beds would likely be insufficient, and raised the possibility of the cancellation of elective surgeries. [Overnight Friday, New York City's Health and Hospitals Corporation, operator of the largest municipal hospital system in the country, announced plans to cancel non-emergency surgeries.]

"Corona Belt"

Temperature and humidity were known to affect the spread of SARS and MERS (as well as influenza, which survives better in cold temps because of its fatty coat-- which actually degrades in warmer weather). Areas most heavily affected so far by Covid-19, researchers say, see similar average temperatures (between 41-52 F) and humidity (47-79%), mirroring laboratory conditions in which the coronavirus thrives. None of the temps in affected cities dropped below freezing, which could suggest a threshold below which the virus cannot survive.

Mapping this newly dubbed "Coronavirus belt," they note that the biggest outbreaks so far have been recorded in areas stretched along a narrow east-west corridor lying between 30 and 50 degrees of latitude, all of which share similar climate conditions and include regions such as northern Italy, Japan, Iran, South Korea, France, Germany, and the Pacific Northwest of the U.S. Based on this observation (and associated theory), researchers predict major outbreaks in the coming weeks are likely in Eastern and Central Europe, Britain, NE and Midwest US and British Columbia.

As warmer temperatures emerge the virus could die out-- or be pushed into the southern hemisphere. (Only to return once temps cool here again, argue some.)

A research paper that looked at 100 Chinese cities found that high temperature and high relative humidity significantly reduce the transmission of Covid-19.

“This result is consistent with the fact that the high temperature and high humidity significantly reduce the transmission of influenza. It indicates that the arrival of summer and rainy season in the northern hemisphere can effectively reduce the transmission of the Covid-19,” the study found.

Scientists are not yet sold there’s a link.

Four Hundred To Thirty, By Way of Seventy-Five

Finally, in a Washington state report made public this week, researchers at the Institute for Disease Modeling, the Bill & Melinda Gates Foundation and the Fred Hutchinson Cancer Research Center concluded that under the current trajectory of the virus, some 25,000 people in the Seattle area could be infected in the next four weeks, and 400 of them die. But if politicians, public health folks and the public themselves could drive down transmission rates by three quarters — primarily through social distancing — only a fraction of those illnesses would manifest-- and only 30 or so more projected to die.

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