Mira Irons, MD, reviews COVID variants and the latest on vaccines

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Featured topic and speakers

In today’s COVID-19 Update, Mira Irons, MD, AMA’s chief health and science officer, covers COVID-19 variants and the latest on vaccines. She also reviews COVID-19 numbers and trending topics related to the pandemic over the past week.

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Speakers

- Mira Irons, MD, chief health and science officer, AMA

Transcript

Unger: Hello, this is the American Medical Association’s COVID-19 update. Today we have our weekly look at the numbers, trends, and the latest news about COVID-19 with AMA’s Chief Health Science Officer Dr. Mira Irons in Chicago. I’m Todd Unger, AMA’s chief experience officer also in Chicago. Dr. Irons, let’s begin with the numbers. A bit of a different story this week. Can you go over the overall situation with the numbers and what’s happening across the country?

Dr. Irons: Absolutely. So we do see some movement in the numbers, but just to start, as we always do, current confirmed cases, 26,188,409. Remember most people say we need to multiply that by seven to eight for people who have actually had COVID. And the deaths from COVID as of this morning, 441,336. I think it’s important to just focus on that figure. I think it was just like two to three weeks ago that we were talking about 400,000 deaths. So it’s just... I worry that we’re becoming somewhat immune to these numbers and it’s important to just acknowledge, to acknowledge those...
On the good side, over the past week, there's been an average of a decrease in new cases per day, about 33% from the average two weeks earlier. The reports of new cases have reached their lowest level since mid November. Forty eight states are reporting sustained declines. And on Saturday, there were 133,746 new cases reported. You might remember a few weeks ago, we were talking about numbers around 200,000. However, we're still seeing an average of more than 3,000 coronavirus deaths per day throughout the month of January. We know that the death rate occurs about five to six weeks potentially after new cases are diagnosed. So there is that lag. But it's important to remember that even with the declines we've seen, which are good news, most communities still remain at an extremely high risk of contracting the virus.

Unger: So we are still in a pretty critical situation and we would expect that the number of deaths to continue at a pretty astronomical level then for several weeks at least.

Dr. Irons: Yeah.

Unger: There are a number of different trends that we're seeing this week, not the least of which are around the word "variance." Why don't we start by talking about that? What are you hearing on the variant front?

Dr. Irons: Well, there's a lot of discussion occurring with three variants in particular, especially the U.K. variant that we've been hearing a lot about. It is more highly transmissible, and that translates into the fact that it could take less virus and less time in the same room with an infected person for someone to become infected themselves. Hundreds of cases of the variant first detected in Great Britain have been found. Currently as of this morning, 32 states in the United States and 46 countries worldwide. Dr. Fauci has been quoted as predicting that the U.K. variant might become the dominant strain in the U.S. by March. Other public health officials over the weekend have been on the news shows saying that this could lead to a spring surge, if people don't continue to protect themselves and use the public health measures that we're talking about.

Dr. Irons: There is a lot of talk about the South African and the Brazilian variant. The Brazilian variant has been reported in the United States last week in Minnesota and health officials in South Carolina last Thursday said that they detected two cases of the South African variant and it's also been reported in Maryland. While Moderna and Pfizer vaccines appear to be protective against the new variants, they may be somewhat less effective against the one found in South Africa, but still have adequate neutralizing antibody levels from what we are hearing. However, we're still waiting on more data.

Unger: So just more reasons not to become complacent since those variants are found in there. A lot of the words coming out of ... in Brazil and particularly in Manaus indicate that that variant is particularly contagious. So a lot of pressure obviously to continue to make progress on the vaccine

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front. What are you hearing about the news on the rollout?

**Dr. Irons:** So the CDC said on Sunday about 24 million people have received at least one dose of a COVID vaccine, including about 5.3 million who have been fully vaccinated. The federal government has developed just short of 50 million doses to states, territories and federal agencies, and providers are administering about 1.3 million doses per day on average. As you know, President Biden has promised to administer 100 million vaccines by his 100th day in the office, and recently suggested that the nation could soon reach an average of 1.5 million shots per day. It isn't smooth, hasn't been smooth getting here, but it appears that we are doing better at getting shots in arms. And at least from the company's standpoint, we're starting to see some media statements on vaccine efficacy from the Novavax U.K. trial and also from the J&J U.S. trial. So we should be hearing more data on that in the weeks to come.

**Unger:** What are the details on Novavax in terms of timing? Any thoughts there?

**Dr. Irons:** So, it's interesting Novavax, they reported preliminary results of their U.K. phase three trial and reported 89.3% efficacy against the primary endpoint of symptomatic COVID infection for the U.K. variant. They also have a U.S. trial ongoing and they've randomized 16,000 of their 30,000 goal in the U.S. So that's a media report from the company. It's important to see the data as we would when submitted to the FDA. The J&J update media released on Friday indicated that it was 72% effective against the primary endpoint in the U.S., 66% globally, but more importantly, 80% effective against severe disease. It uses a human adenovirus vector. It is a one shot. It's the only one shot vaccine and also has more favorable storage. We may get, at least from media reports, we may begin to see, we may see a possible application for FDA authorization soon.

**Unger:** That would be fantastic. I do just want to add that the AMA is taking a deeper dive into some of the issues related to vaccines to make sure that physicians have the information that they need. Our AMA president, Dr. Susan Bailey, spoke to Dr. Peter Marks from the FDA on Friday, and you can view that conversation on AMA's YouTube channel. And Dr. Bailey will be on the COVID update tomorrow to give us some highlights. I'll also be talking to Dr. Paul Offit, a noted vaccine expert on the COVID update later this week as well. Turning to misinformation, is there any news that needs to be cleared up this week Dr. Irons?

**Dr. Irons:** As the focus really continues on what we can do to contain the spread while people are waiting their turn to get the vaccine, we're hearing a lot about masks. And this idea of whether two masks is the new mask is something we're seeing more often. I think it started with the inauguration, where we saw people that are double masking. I think the important thing to say is that the FDA has not updated its guidance, and as physicians, we want to take our recommendations where we'll cut down unacceptability, which is something we really can't afford right now.

The bottom line right now is we should be thinking about the type of exposure people would have. Is it a longer exposure in a poorly ventilated space? We should be thinking about the quality of our masks.
Are they double layer masks? But really importantly, we should be thinking about the fit of the masks. They really need to be tight around the face with no gaps out of the side and also at the top. I can't tell you how many times I tell people to cover their noses when I see them masked. So what physicians should consider telling patients is the best mask is a well-fitted two or three layer mask, or keep the masks you're using a double mask when you go to the store or find yourself spending time with people outside your household.

**Unger:** Good advice. Finally, we have a lot of statements coming out of the AMA this week. Can you hit the highlights please?

**Dr. Irons:** Sure. Four statements last week. On the 26th, we issued a statement supporting the nomination of Dr. Rachel Levine for HHS assistant secretary, issued three statements in support of Biden administration actions. First, the plan to advance racial equity, next, the effort to expand insurance coverage, and then finally, applauding the Biden administration's action on the Title X gag rule.

**Unger:** Excellent. Well, thank you so much again for being here, Dr. Irons, and for the update. Don't forget to check out our interview with Dr. Peter Marks on AMA's YouTube channel and the other COVID updates we'll have on the vaccine front this week. That's it for today's COVID-19 update. We'll be back soon with another. In the meantime, for additional information on COVID, go to ama-assn.org/covid-19. Thanks for joining us. Please take care.

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