

Mira Irons, MD, on the impact on vaccine distribution due to weather conditions

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Featured topic and speakers

In today's COVID-19 Update, Mira Irons, MD, AMA's chief health and science officer, reviews COVID-19 numbers and trending topics related to the pandemic over the past week. Also covering 500,000 deaths in the U.S., disruption to vaccine distribution due to weather conditions and the FDA's recommendations on vaccine development concerning variants.

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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 latest news about COVID-19 with AMA's chief health and science officer, Dr. Mira Irons, in Chicago. I'm Todd Unger, AMA's chief experience officer in Chicago. Dr. Irons, today is a sad milestone. We have crossed a threshold that I didn't think we would see. 500,000 deaths from COVID-19. Can you share some perspective on that number?

Dr. Irons: As you say, Todd, it really is a grim milestone. Never thought I'd see this. I don't think any of us thought we would see this. Just to give you some perspective, a month ago, January 19th, we were talking about the grim milestone of 400,000 deaths. And it's been roughly one year since the first

known coronavirus-related death was reported in the U.S. No other country has counted so many deaths in the pandemic. More Americans have died from COVID-19 than on the battlefields of World War I, World War II and the Vietnam War combined. The impact is a bit different depending on where you are in the country. If you look at the U.S. as a whole, about one in 670 Americans has died of it. That percentage is higher in many areas. New York City, we're looking at a figure of about one in 295 people. L.A. County, one in 500 people. And in Lamb County, Texas, one in 163 people.

Few public health experts predicted we'd see a death toll of this magnitude. You might remember going back to the White House press briefing on March 31st when Dr. Fauci and Dr. Birx announced what we thought then was a stunning projection, that as many as 240,000 Americans might die from this. And here we are less than a year later, the virus has killed more than twice that number. However, this really sad milestone does come at a hopeful moment. New virus cases are down sharply. Deaths are slowing, and vaccines are steadily being administered. Over the past week, there's been an average of 66,393 cases per day, and although that's a decrease of 44% from the average two weeks ago, that's still a lot of new cases per day. And so, while I think we can look at that in a positive way, we still need to double down and know that we're in a serious pandemic.

Unger: Yes. We had Dr. Tom Frieden, the former director of the CDC, on the COVID-19 Update on Friday. And he mentioned, it seems we've come inured to these numbers. You mentioned before we never thought we would see even 250,000. Now, we're at 500,000, and even that caseload a day, at almost 67,000. One of the things I asked him is, what is that case load where the American public health infrastructure can do its job in terms of contact tracing and everything else? And his number was 15,000.

Dr. Irons: Right.

Unger: Which is stunningly low in comparison to what we've been seeing.

Dr. Irons: Yeah, absolutely. I think you need to have a low enough community spread across the country in order to be able to follow up on these cases and to contact trace. But if you have high levels of community spread, then it's more likely that the virus will be transmitted from one person to the next.

Unger: Yes. His counsel, when we looked at the positivity rates and just level here in Cook County, where Chicago is, his interpretation was, "It's not safe to do all those things or to pull back." So we have to do recognize that even though the numbers have fallen, it's still at an extremely high level.

Dr. Irons: Absolutely.

Unger: So if you look at on a state-by-state basis, are you seeing any trends emerging on where we are right now?

Dr. Irons: Yeah. And I think the trends that we're seeing now is that as a Friday, the 11 states with the highest rates of recent cases, all border the Atlantic Ocean. New York and New Jersey are adding cases at rates that are higher than any state, except South Carolina. Though case numbers have fallen somewhat in South Carolina, the Spartanburg, Gaffney and Orangeburg areas still have some of the worst outbreaks in the country. And highly infectious variants continue to emerge across the country, potentially undermining some of the progress of the last month. And even though the federal government through the CDC is ramping up tracking efforts for these variants with genomic surveillance, the pervasiveness of those variants still remains largely unclear. We're just getting a handle on this now.

Unger: So it becomes even more pressure for the vaccine rollout to gain traction. Can you talk about what we're seeing in terms of the latest findings on the vaccines and particularly on the effects of the variant?

Dr. Irons: So I think that a few new studies have come out and all of these are on preprint servers right now. I haven't seen anything peer-reviewed that suggests that one shot of a vaccine can greatly amplify the antibody levels in those who have recovered from the coronavirus, almost like a booster in those that have already had it. And so I think we're going to hear a little more about that in the coming months. I can say that the CDC and ACIP have now taken that up, at least publicly. We have heard from both the FDA and the CDC that, at least the two dose vaccines the large clinical trials that we have, have studied two doses. So that deviating from that without a lot of evidence is still difficult, and we'll see where the discussion goes and we'll see what the peer-reviewed literature shows on this.

The new vaccine news this week is that the Johnson & Johnson vaccine, which is a single dose vaccine on an adenoviral effect platform, is being discussed at the FDA on Friday. The External Advisory Committee is meeting to discuss that application for EUA. The documents for that meeting generally become public and are posted on the FDA website two days ahead of time. So we should have more information and more data that we can review on Wednesday. The meeting is all day on Friday, and then we would expect that ACIP, which is the CDC external advisory committee, will likely meet over the weekend and into the early part of next week if they use the same procedure that they used for the prior two vaccines.

Unger: Well, it seemed like our vaccine distribution efforts were cranking up. We'd reached levels of about 1.7 million vaccines per week. But then it seems like Mother Nature dealt us a little blow last week.

Dr. Irons: Absolutely. As if supply doesn't continue to be a problem, the weather-related delays really hit the country hard in terms of distribution. The White House estimated that the weather had created a backlog of six million doses. Andy Slavitt, a White House pandemic advisor, said at a news conference on Friday morning that those doses represented about three days' worth of shipping delays and the bad weather slowed two vaccine shipping hubs, a FedEx center in Memphis and a

UPS site in Louisville. And FEMA said that more than 2000 vaccine sites were in areas with power outages last week. Shipping delays were reported in multiple states.

Obviously, everyone's heard about how hard things have been in Texas. But in Texas, where millions of residents lost power during the past week's powerful storm, state health officials said that hundreds of thousands of first and second doses that were supposed to be delivered were still waiting to be shipped. So if you look at the numbers this week, the CDC reported on Saturday that more than 61 million doses had been administered, including about 42.8 million people who received at least one dose, and about 17.9 million people who have been fully vaccinated.

Unger: Excellent. Well, this week, the FDA also released some recommendations for vaccine development in response to the variants, which you mentioned earlier. Can you tell us more about that?

Dr. Irons: Sure. So, on Monday, the FDA released some information to help guide vaccine developers who are developing, who are tweaking their vaccines to have better efficacy against future variants. One of the questions that has come up is whether any change to the vaccines that are currently used will have to go through the same large trials that have gotten us to this point. And what the FDA said was that the developers would not need to conduct lengthy randomized control trials to evaluate vaccines that have been adapted to target new variants. So what the recommendations are calling for are small trials, more like what's required for the annual flu vaccine, would greatly accelerate the review process at a time when scientists are increasingly becoming anxious about how the variants might slow or reverse progress. That guidance was part of a slate of new documents the agency released on Monday, including others addressing how antibody treatments and diagnostic tests might need to be retooled to respond to virus variants.

Unger: Well, that's good news. I remember when Dr. Paul Offit was on here several weeks ago. We asked him that question about, how long does it take to adjust for these kinds of variants? And he said, "The actual process of doing that is rather short. It's the production and distribution part that's the hard part." And if you don't have to go back through these large scale tests, that's good news as well.

Dr. Irons: Yep.

Unger: Well, finally, are there any key messages that the AMA would like people to know this week?

Dr. Irons: There are two. So last Thursday, leading business and nonprofit organizations, including the AMA, launched the Health Action Alliance to strengthen and accelerate the business community's response to COVID-19. This alliance will empower a network of businesses to improve the health of employees and communities by promoting COVID-19 prevention in vaccine education and strengthen public health infrastructure to be better prepared in the future. The alliance will also work to advance health equity by addressing the needs of disproportionately affected communities. And on Sunday, in

response to the passing of half a million COVID-19 deaths, the AMA, AHA and ANA urge the public to continue wearing masks, practicing physical distancing and washing hands, as well as obtaining a vaccine when the time comes.

To read from the statement, In just three months, the number of Americans who have died of COVID-19 has doubled. We urge you to remain vigilant in taking precautions to limit the spread of COVID-19. With new, more contagious variants of the virus circulating through the U.S., now's not the time to let your guard down and scale back on the measures that we know will work to prevent further illness and deaths, wearing masks, practicing physical distancing and washing hands. There's also hope for the future as millions of people across the country are getting vaccinated and additional vaccines are on the way. We encourage everyone to get the COVID-19 vaccine when it's your turn.

Unger: Absolutely. Well, thank you so much, Dr. Irons, for this week's update. We'll be back with another COVID-19 Update segment tomorrow. In the meantime, for resources on COVID-19 visit ama-assn.org/COVID-19. Thanks for listening. Please take care.

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