

# CORONAVIRUS COMMENTARY

## JUNE 25, 2020

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These are the COVID-19 infection and death numbers in different cities in early May and in June.<sup>1</sup>

CORONAVIRUS STATISTICS								
CITY	POPULATION	INFECTED	INFECTED PER CAPITA	RELATIVE TO NEW YORK	DEATHS	DEATHS PER CAPITA	RELATIVE TO NEW YORK	PERCENT CHINESE
New York	8,398,000	211,670	0.0252	100.0%	22,236	0.002648	100.0%	6%
Los Angeles	3,990,000	79,676	0.0200	79.2%	3,066	0.000768	29.0%	2%
San Francisco	883,000	3,057	0.0035	13.7%	47	0.000053	2.0%	21%
Honolulu	337,000	551	0.0016	6.5%	11	0.000033	1.2%	5%
Numbers as of: June 20, 2020								

CORONAVIRUS STATISTICS								
CITY	POPULATION	INFECTED	INFECTED PER CAPITA	RELATIVE TO NEW YORK	DEATHS	DEATHS PER CAPITA	RELATIVE TO NEW YORK	PERCENT CHINESE
New York	8,398,000	175,000	0.0208	100.0%	19,000	0.00226	100.0%	6%
Los Angeles	3,990,000	26,000	0.0065	31.3%	1,200	0.00030	13.3%	2%
San Francisco	883,000	1,200	0.0014	6.5%	29	0.00003	1.5%	21%
Honolulu	337,000	400	0.0012	5.7%	11	0.00003	1.4%	5%
Numbers as of 5/6/2020								

Why is there such a difference in the numbers in the large cities. One of the aspects of the COVID-19 outbreak on the Diamond Princess cruise ship was that 50% of the positive cases had no symptoms.<sup>2</sup> A recent article stated that before martial law was imposed in Wuhan, China about 5 million (many of whom were already infected) left Wuhan thus contributing to spreading the virus.<sup>3</sup> I am assuming there is more travel of Chinese nationals and U.S. citizens of Chinese descent between the U.S. and China from the west coast cities relative to New York City. San Francisco has significantly less infections and deaths relative to Los Angeles because of the higher percentage of Chinese in San Francisco. Infections and deaths in Honolulu is even smaller because they, presumably, have even more travel between the two countries. If infected asymptomatic Chinese nationals traveled to the U.S. in late 2019 and early 2020, then a greater percentage of the population on the west coast had some level of herd immunity which held down the infections and the death rate.

It will take at least six months for us to determine the financial hit to the economy that these stay-at-home orders caused. Future research will show which financial burden was worse, the medical impact if we had not had the stay-at-home orders or the economic impact of the stay-at-home orders. I believe the economic impact of the stay-at-home orders will be worse. When the government is involved the cure is usually worse than the disease.

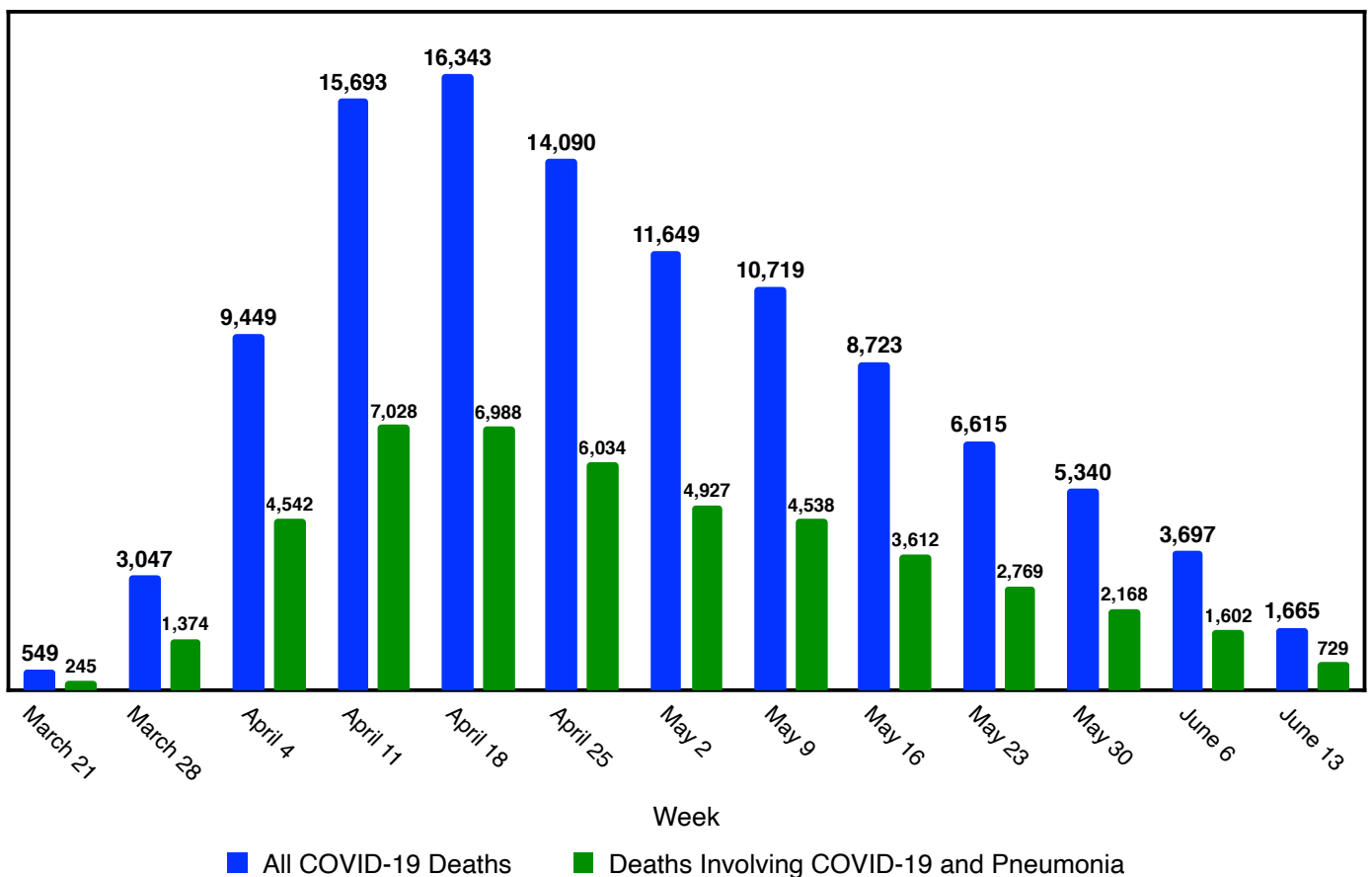
The new ICD-10 code for COVID-19 is U07.1.<sup>4</sup> In a National Center for Health Statistics publication dated April 2020 on the guidance for certifying deaths due to COVID-19, the recommendations for listing COVID-19 as an underlying cause of death was revised.<sup>5</sup> This is their guidance on “presumed” COVID-19 deaths.

“In cases where a definite diagnosis of COVID-19 cannot be made, but it is suspected or likely (e.g., the circumstances are compelling within a reasonable degree of certainty), it is acceptable to report COVID-19 on a death certificate as “probable” or “presumed.” In these instances, certifiers should use their best clinical judgement in determining if a COVID-19 infection was likely. However, please note that testing for COVID-19 should be conducted whenever possible.”

Are the number of deaths due to COVID-19 overestimated? There are numerous reports of just that.<sup>6</sup>

Figure A shows the COVID-19 deaths (as of 6/25/20) by week.<sup>7</sup> This includes deaths where COVID-19 and pneumonia were listed as the cause of death. In a Lancet article researchers found evidence of direct viral infection of the endothelial cell and diffuse endothelial inflammation and cell death in the airways in the lungs.<sup>8</sup> COVID-19 severely affects the lungs and if you have an underlying respiratory condition like chronic obstructive pulmonary disease (COPD) then the virus will be even deadlier. It is not surprising that it is associated with pneumonia.

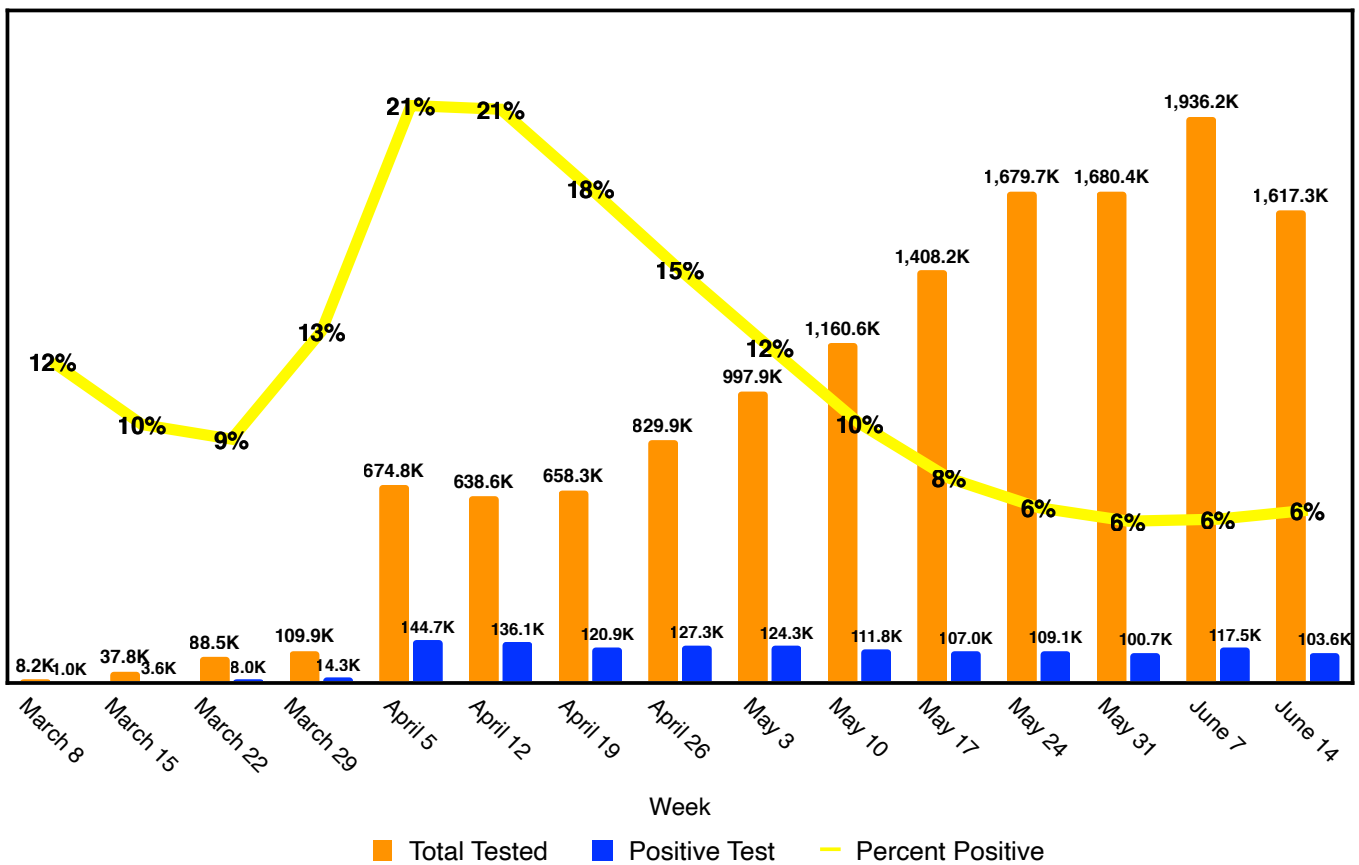
FIGURE A COVID-19 DEATHS



Even with that association were all of the deaths involving COVID-19 and pneumonia due to COVID-19? Was there another virus or a bacteria that caused the pneumonia that caused the death? How many of these deaths were “presumed” COVID-19 deaths? Only the future will show.

Figure B is a graph of the number of people tested for active COVID-19 (as of 6/21/20) and the percentage of positive tests indicating they had COVID-19 at the time of testing.<sup>9</sup> Initially the testing was limited to those that had symptoms. In April the majority (79%) of individuals with symptoms that were tested did not have the virus. In April commercial labs started testing. By May the commercial labs were performing 75% of all the testing. This allowed testing to be opened up to include individuals without symptoms. By the middle of May the percentage of positive tests has decreased and plateaued at 6%. In the latest week published, the number tested has started to decrease.

**FIGURE B** **COVID-19 TESTING**



So why are we still acting like this is 100% fatal Ebola virus? It is time for the country to get back to the previous normal, not the “new normal.” The concept of “flattening the curve” was to keep intensive care units (ICU) at hospitals from becoming overrun. Even in New York City, which was hit the hardest of any metropolitan area, the ICUs were not overrun.

To put this man-made economic disaster behind us we need to achieve herd immunity as a nation. An excellent article previously published on the Association of American Physicians and Surgeons website describes herd immunity.<sup>10</sup> We need to get back to the real normal, get rid of the masks and the social distancing, let all of the workers get back to work, and let the kids go back to school. The medical experts initial prediction was 2.2 million deaths in the United States. The actual deaths will be about 20 times lower. So much for the “experts.” The media has daily reports of locations of someone that tested positive. This tactic is nothing but fear mongering and the media needs to cease that practice immediately. It’s time for good citizens to start pushing back. We need to reclaim our country.

## Sources:

<sup>1</sup> <https://corona.help/country/united-states>

<sup>2</sup> [https://www.researchgate.net/publication/339893491\\_Estimating\\_the\\_asymptomatic\\_proportion\\_of\\_coronavirus\\_disease\\_2019\\_COVID-19\\_cases\\_on\\_board\\_the\\_Diamond\\_Princess\\_cruise\\_ship\\_Yokohama\\_Japan\\_2020](https://www.researchgate.net/publication/339893491_Estimating_the_asymptomatic_proportion_of_coronavirus_disease_2019_COVID-19_cases_on_board_the_Diamond_Princess_cruise_ship_Yokohama_Japan_2020)

<sup>3</sup> <https://academic.oup.com/jtm/article/27/2/taaa020/5735321?searchresult=1>

<sup>4</sup> <https://www.cdc.gov/nchs/data/nvss/coronavirus/Alert-2-New-ICD-code-introduced-for-COVID-19-deaths.pdf>

<sup>5</sup> <https://www.cdc.gov/nchs/data/nvss/vsrg/vsrg03-508.pdf>

<sup>6</sup> [https://www.realclearpolitics.com/articles/2020/05/29/us\\_covid-19\\_death\\_toll\\_is\\_inflated.html](https://www.realclearpolitics.com/articles/2020/05/29/us_covid-19_death_toll_is_inflated.html)

<sup>7</sup> <https://www.cdc.gov/nchs/nvss/vsrr/covid19/index.htm>

<sup>8</sup> [https://doi.org/10.1016/S0140-6736\(20\)30937-5](https://doi.org/10.1016/S0140-6736(20)30937-5)

<sup>9</sup> <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/06192020/public-health-lab.html> and <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/06192020/clinical-labs.html> and <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/06192020/commercial-labs.html>

<sup>10</sup> <https://aapsonline.org/coronavirus-covid-19-public-health-apocalypse-or-anti-american/>