

Outbreak Breakdown

June 7, 2020

This weekly report is provided as an informal information resource for certain AdvaMed member work groups. Content is provided by staff and is not to be construed as conveying AdvaMed viewpoints or endorsement. AdvaMed's COVID-19 response is led by [Chris White](#), AdvaMed COVID Action Team Leader, COO & General Counsel. Newsletter contacts: [Andy Fish](#), Chief Strategy Officer and [Kristina Shultz](#), Manager, Strategy & Policy.

AdvaMed Update

MedTech Responds: Comprehensive information on AdvaMed's COVID-19 response and resources is available [here](#). A list of upcoming meetings and webinars that may be of interest to AdvaMed members is available [here](#).

Something Completely Different

[Bob and Doug made it](#) to the International Space Station (no, [not those guys](#)) and we're looking ahead to [visiting an eyeball planet](#).

Headlines

[Tulane Outbreak Daily](#)

[Johns Hopkins Daily COVID-19 Situation Reports](#)

[Here's What WHO Says Your Mask Should Have to Prevent COVID-19 Spread](#) | Ars Technica, June 6
[WHO Updates Guidance on Masks for Health Workers and the Public - Here's What You Need to Know](#) | World Economic Forum, June 5

[Coronavirus Infections Haven't Spiked Since Europe Loosened Lockdowns. There Are Many Theories About Why.](#) | Washington Post, June 5

[CDC: Some Americans Are Misusing Cleaning Products — Including Drinking Them — in Effort to Kill Coronavirus](#) | STAT News, June 5

[How the Protests Have Changed the Pandemic](#) | The New Yorker, June 4

[COVID-19 Can Last for Several Months](#) | The Atlantic, June 4

[No One Knows Why these COVID-19 Patients' Symptoms Keep Relapsing](#) | Vox, June 4

[Just 6 States Meet these Basic Criteria to Reopen and Stay Safe](#) | Vox, June 4

[Six Months of Coronavirus: Here's Some of What We've Learned](#) | New York Times, June 3

[No Evidence Hydroxychloroquine is Helpful in Preventing COVID-19, Study Finds](#) | NPR, June 3

[Genes May Leave Some People More Vulnerable to Severe COVID-19](#) | New York Times, June 3

[The Global Race for a Coronavirus Vaccine Could Lead to This Generation's Sputnik Moment](#) | Washington Post, June 3

[There Has Been an Increase in Other Causes of Deaths, Not Just Coronavirus](#) | New York Times, June 1

[Protesting Racism Versus Risking COVID-19: 'I Wouldn't Weigh These Crises Separately'](#) | NPR, June 1

[Anthony Fauci on COVID-19 Reopenings, Vaccines, and Moving at 'Warp Speed'](#) | STAT News, June 1

[U.S. and Chinese Scientists Trace Evolution of Coronaviruses in Bats](#) | New York Times, June 1

[More Than 25,000 Nursing Home Residents and 400 Staff Have Died During Pandemic, Federal Report Shows](#) | Washington Post, June 1

[Is America's Pandemic Waning or Raging? Yes.](#) | New York Times, June 1
[Eli Lilly Begins First Human Tests of an Antibody Drug Against COVID-19](#) | STAT News, June 1
[The Protests Will Spread the Coronavirus](#) | The Atlantic, June 1
[After 6 Months, Important Mysteries about Coronavirus Endure](#) | New York Times, June 1
[What do Coronavirus Racial Disparities Look Like State by State?](#) | NPR, May 30
[Coronavirus May Be a Blood Vessel Disease, Which Explains Everything](#) | Elemental, May 29
[Monkeys Snatch COVID-19 Blood Samples after Attacking Lab Worker in India](#) | CBS News, May 29

Pandemic Modeling

We have compiled [this informal guide](#) to prominent COVID-19 pandemic modeling and data visualization initiatives and are updating it from time to time. Model of the Week coverage is based on apparent media and policy relevance, as well as what we deem of interest, not on an independent assessment of the accuracy or credibility of the models discussed.

GAO Report on COVID-19 Modeling: This week, GAO released a short [document](#) explaining the field of infectious disease modeling. The report highlights the key features of mechanistic and statistical models and explains their applications and uses in forecasting COVID-19. It also notes the opportunities infectious disease models create to inform decision-making and the challenges associated with them.

Racial Disparities and COVID-19:

Ongoing protests over endemic racial disparities in the U.S. are a reminder of the grave health and health care inequities and disparities that persist for people of color. The disproportionately [high impact of COVID-19 on communities of color, and especially among Black people](#), has underscored those inequities. Nationwide, Black deaths from COVID-19 are almost two times greater than what would be expected based simply on population. At state and local levels, the disparities are even more stark. For example, in Wisconsin, 6% of all people are Black – yet Black people make up 27% of its COVID-19 deaths. This data comes from the [COVID Tracking Project](#), which has partnered with the Antiracist Research and Policy Center to track COVID-19 race and ethnicity data in the U.S.

A myriad of factors put Black people at [greater risk](#) of being exposed to, and dying from, COVID-19. Black people make up a [disproportionate number](#) of essential workers and are less able to practice social distancing. They are more likely to have underlying conditions that are known to exacerbate COVID-19. They are also less likely to be [tested](#) for COVID-19 and more likely to be [refused](#), or provided comparatively substandard, care.

The magnitude of racial disparities in COVID-19 cases and deaths cannot be fully grasped without more and better data. Almost half of the data reported on cases, and a small percentage of data reported on deaths, has [no demographic data](#) attached to it, and some states do not break their race and ethnicity data into appropriate categories that would facilitate meaningful analyses.

In response to pressure from Congress and public health institutions across the country to better address the racial disparities in COVID-19 cases and deaths, and during a time of increased national attention to racial health and justice disparities, HHS [announced](#) yesterday that it will require states to report COVID-19 demographic data. Capturing such standardized information will be vital to developing responses and interventions that seek to diminish disparities in health care, especially in COVID-19 treatment and care.

The Plugged-In Pandemic?

Digital contact tracing continues to attract media and policymaker attention and contact tracing apps are [being adopted gradually](#) at the [state level](#) in the U.S. after nationwide adoption in [a number of other countries](#), who have adopted [various approaches](#). Contact tracing apps – potentially utilizing [wearables rather than smartphones](#) – hold the promise of augmenting traditional contact tracing methods but stakeholders and legislators are raising [questions about both privacy and potential equity issues](#) associated with their use. Federal legislators have expressed concerns about appropriate privacy protections for personal health information in the context of COVID-19 pandemic response, and the [Exposure Notification Privacy Act](#) is one of the latest legislative proposals, introduced in the U. S. Senate, directed specifically at automated contact tracing apps. Among other provisions, this proposed legislation would require that enrollment in automated exposure notification apps be voluntary. Researchers have produced some estimates of the [rates of adoption that may be required](#) for contact tracing apps to be effective in reducing cases and deaths. Download [Digital Contact Tracing for Pandemic Response](#) from Johns Hopkins for a deeper dive, and stay tuned for an AdvaMed webinar on this topic.

ICYMI

State Reopenings: The New York Times continues to [monitor](#) changes in cases over time as states progress through their phases of reopening. All 50 states and the District of Columbia have reopened in some way, despite [few](#) meeting the criteria to do so. States in the Southeast, many of whom were among the first to reopen, are experiencing the fastest rise in new cases. In particular, Florida, Georgia, Alabama, and Texas are reporting record highs in daily incidence. On top of concerns about states reopening too soon, additional concerns have been raised around how the ongoing protests will [affect](#) the pandemic. Will the protests cause an increase in cases? [Probably](#). However, COVID-19 incidence is already increasing as states reopen. From a statistical standpoint, it will be impossible to later parse out what percentage of new cases were a direct result of protests or a result of reopenings and changes in peoples' behaviors.

Data on Nursing Homes Deaths: Earlier this week, CMS and CDC published [public datasets](#) containing the first official tally of the impact of COVID-19 on nursing homes in the United States. CMS' website states that more than 31,000 nursing home residents – which is more than a quarter of all COVID-19 deaths in the U.S. - have died so far as a result of the pandemic. Some have pointed out [inaccuracies](#) in the data, with the numbers in the dataset being, sometimes significantly, different than those reported by individual nursing homes. CMS and CDC have not yet responded to questions about the quality of the data.

School Reopening Framework: Researchers at the Johns Hopkins Bloomberg School of Public Health and School of Education wrote a [viewpoint in JAMA](#) discussing the need to reopen K-12 schools this fall and the challenges schools face in doing so. They propose a six-point framework for policymakers to consider when developing school reopening strategies, emphasizing the importance of effective community testing, tracing, and isolation efforts; the prioritization of on-site education for at-risk children who often rely on schools for access to food and health care; and the need for additional financial resources for schools to adequately prepare for a changed environment.

Sweden: As other European countries imposed restrictions during the early stages of the pandemic, Sweden took a notably different (and widely criticized) approach and refused to implement broad stay at home measures, keeping many businesses and schools open. Now, Sweden has one of the highest COVID-19 mortality rates per capita in the world (and much higher than its Nordic neighbors). The continued economic activity has not prevented a financial crisis, either. This week, Sweden's chief epidemiologist [admitted](#) that there was a "potential for improvement" in the country's response and acknowledged that the country failed to protect many of its citizens, especially those in nursing homes where 50% of the country's deaths have occurred.

Research Roundup

[Prevent Epidemics Weekly Science Review](#)
[Helio COVID-19 Resource Center](#)

Community Transmission: This week's CDC [Morbidity and Mortality Weekly Report](#) (MMWR) includes findings from a study on SARS-CoV-2 transmission in the U.S. showing that community transmission of SARS-CoV-2 may have started in late January, but likely not earlier.

Asymptomatic Transmission: A [review](#) shared this week in the Annals of Internal Medicine assessed 16 different studies of asymptomatic transmission and concluded that asymptomatic persons account for 40-45% of total infections. The authors note that asymptomatic persons may still endure subclinical symptoms, such as lung inflammation, that can only be detected by CT scans. They also can transmit the virus and may be able to transmit it for an extended period of time (14+ days). The authors indicate that more widespread testing is needed to identify people with asymptomatic infections.

Hydroxychloroquine: A [study](#) published Wednesday found that hydroxychloroquine does not provide protection against infection for people who have been exposed to someone with COVID-19. The randomized, double-blind, placebo-controlled trial evaluated 821 asymptomatic participants who had direct exposure to someone with COVID-19. The researchers found no significant difference in the incidence of new illness in the group receiving hydroxychloroquine compared to those receiving a placebo, indicating that hydroxychloroquine may not be an effective postexposure prophylactic.

Another study released [preliminary results](#) today showing no benefit for patients hospitalized with COVID-19. The results, which come from a randomized clinical trial conducted as part of the United Kingdom's RECOVERY Trial, showed no significant difference in mortality between the group receiving hydroxychloroquine and those receiving usual care. The trial has stopped enrollment and suspended the hydroxychloroquine arm.

Study Retractions: Two significant COVID-19 studies were retracted by the [Lancet](#) and [New England Journal of Medicine](#) this week after concerns were raised about the underlying data. One of the studies concluded that hydroxychloroquine treatment for COVID-19 was associated with increased mortality and cardiovascular risks, leading the WHO to [suspend](#) the hydroxychloroquine arm of its SOLIDARITY trial. WHO [announced](#) on June 3 that it will resume that clinical trial. The other study found that some blood pressure medications did not increase the COVID-19 and might be protective.