



Health Watch USAsm Newsletter

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With COVID-19 variants lurking, we must prepare for the worst

"We do not have an available booster for the next variant. One of the problems is that there are several different ones and unlike the flu, last year's virus did not go away. Comparing the length of protection an infection with SARS or MERS affords is not applicable to COVID-19 with the immune escape variants. The evolutionary success of mutations is dependent upon increasing transmissibility or allowing the virus to escape immunity. SARS-CoV-2 (the virus which causes COVID-19) is doing both. In the case of the United States, we (need to) expand genomic testing of immune escape variants to early on detect community spread, and for all to receive vaccines to the wild type virus to boost their immunity to a level which will prevent disease, hopefully even mild to moderate disease, by the immune escape variants. We have the knowledge to avoid another devastation by this virus. Simply become vaccinated." [References](#) Courier Journal. June 3, 2021. <https://www.courier-journal.com/story/opinion/2021/06/03/with-covid-immune-escape-variants-lurking-prepare-for-worst/7507261002/>

Kentucky COVID-19 restrictions end Friday, signaling hope and a return to normalcy for many

"Dr. Kevin Kavanagh, a retired Somerset physician and chairman of Health Watch USA, a non-profit patient advocacy organization. Kavanagh is particularly concerned about the spread of variants, or mutations, of COVID-19, that tend to spread among unvaccinated populations and are more contagious and possibly, more dangerous.

A variant from the explosion of cases in India, known as the Delta variant, has surfaced in the United States in increasing numbers, but because of limited testing and analysis, it's not clear how widespread it is, he said. "We don't know where the Indian variant is or isn't," he said. "We are flying blind and if you're flying blind, I tend not to want to get on the plane."

Kavanagh thinks officials should go more slowly in easing requirements such as mask-wearing until a greater percentage of the population is vaccinated. "They are exceedingly safe vaccines that are highly effective," he said." Courier Journal. June 11, 2021.

<https://www.courier-journal.com/story/news/local/2021/06/11/kentucky-mask-mandate-expected-to-end-signaling-hope/7604229002/>



We Might Ignore the Delta Variant, but It's Not Ignoring the U.S.

"It has been two weeks since Infection Control Today® sounded the alarm that the Delta variant (B1617.2, Double Mutation Indian Variant) was spreading rapidly

in the United States. On June 15, the Centers for Disease Control and Prevention (CDC) issued a warning regarding the variant and declared it a "variant of concern." As Australia and Singapore have adopted a zero tolerance to COVID-19, closing down sectors of the country with even 2 or 3 cases, we have adopted a wait-and-see policy, largely ignoring the potential dangers posed by these new variants. And there is now a Delta Plus variant (AY.1 & AY.2) which has emerged in India which is more resistant to monoclonal antibodies, including antibody cocktails and has also entered the United States. For now, I would strongly advise every person (even those who have had COVID-19) to be fully vaccinated to boost one's immunity to the highest possible level and wear masks when indoors in poorly ventilated buildings. It is far too soon to be fully reopening our society." [References](https://www.infectioncontroltoday.com/view/we-might-ignore-the-delta-variant-but-it-s-not-ignoring-the-u-s-)
Infection Control Today. June 21, 2021. <https://www.infectioncontroltoday.com/view/we-might-ignore-the-delta-variant-but-it-s-not-ignoring-the-u-s->

Not Quite Over Yet: COVID-19 Variants on Rise in the U.S.

As long as the immune escape variants are on the rise in the U.S. and less than half of our population is fully vaccinated, the best advice is to continue public health strategies. Similar to the U.K., this could be a regional advisement, but unfortunately, we are not sequencing nearly enough infections to accurately track the spread of these variants. And above all, we need to have everyone become vaccinated. That is the best way to stop the spread of the virus and help mitigate the possibility of a truly vaccine evading mutation from occurring. [References](https://www.infectioncontroltoday.com/view/not-quite-over-yet-covid-19-variants-on-rise-in-the-u-s-)
Infection Control Today. June 7, 2021. <https://www.infectioncontroltoday.com/view/not-quite-over-yet-covid-19-variants-on-rise-in-the-u-s->

As Delta Variant Rises, Hospital Suspends 178 Employees for Not Getting Vaccinated Against COVID-19.

"Contacted this morning by ICT®, Kavanagh expressed concern with how the CDC's going about informing the public about the COVID-19 variants. "The CDC's government webpage on variants still lags behind the CDC/NIH funded Scripps research site of outbreak.info," Kavanagh said. "Even today the Delta Variant was not included in the CDC Website Table Listing Variants of Concern and state specific data on this variant is absent. The latest data which you can obtain by a mouse over on the bar graph lists the prevalence of the Delta Variant as 2.5%. This is much less than the data in the NPR story of over 6% and less than the outbreak.info listing of 19%." There's little doubt as to which side of the Houston Methodist Hospital debate Kavanagh comes down on. The headline for an article published on the ICT® website on April 22 sums it up: "Viewpoint: Health Care Professionals—Get Vaccinated or Get Out." In it, Kavanagh wrote that "if you work in a health care facility, you need to be vaccinated against SARS-CoV-2. If you choose not to become vaccinated, then you should choose not to be working in a health care setting." " Infection Control Today. June 9, 2021. <https://www.infectioncontroltoday.com/view/as-delta-variant-rises-hospital-suspends-178-employees-for-not-getting-covid-vaccinated>

It's Not Over: As Delta Variant Preys on the Unvaccinated, Long COVID Settles In.

Then there's the risk posed by long COVID. Kevin Kavanagh, MD, a member of Infection Control Today®'s Editorial Advisory Board, told ICT® in a Q&A in January that "one of the things that's really frustrated me with this epidemic and pandemic is that people are totally focused on dying.... But in actuality, the disabilities are much, much more concerning because that is even affecting the young people." Other health care experts have begun to echo Kavanagh's concerns. Infection Control Today. June 25, 2021.

<https://www.infectioncontrolday.com/view/it-s-not-over-as-delta-variant-preys-on-the-unvaccinated-long-covid-settles-in>

Health Watch USA - Presentations



COVID-19: India In Crisis -- Vineeta Gupta, MD, JD.

Dr. Vineeta Gupta describes the conditions in India and the socioeconomic challenges which inhibit the pandemics control. The impact of the Delta (B1617.2) Variant on India and the United States is also discussed. Health Watch USA meeting. June 9, 2021.

<https://youtu.be/vsOj76yBH9g>

Heightened Action on Delta Variant is Needed - CDC Public Comment.

Dr. Kevin Kavanagh from Health Watch USAsm stresses the importance of having real-time accurate reporting of the COVID-19 immune escape variants. We also need to be genomic sequencing more specimens and should be reporting state-specific data to help safeguard the public. The CDC should classify the Delta variant, as a variant of concern. The CDC's main site should have easy to access and the most up to date data available in the world. Advisories regarding both the Indian Variant and the P.1 Brazilian or Gamma Variant need to be made. Public Comment Before the CDC HICPAC Committee. June 3, 2021. [Download Comment Letter https://youtu.be/KVYt4PyQuZw](https://youtu.be/KVYt4PyQuZw)

Radio / Podcasts

COVID-19: Delta Plus Variant (AY.2) in the USA

Dr. Kevin Kavanagh from Health Watch USAsm discusses the spreading of the Delta Variant in the United States. The Delta Variant is over twice as infectious as the wild type of virus and affects both the young and old. It is several iterations away from last year's virus so you need to have your immunity as high as possible. This means getting both doses of the mRNA vaccine and if you had COVID-19 last year, you still need to become vaccinated. The vaccines are reported to be 90% effective in preventing hospitalizations but one also needs to continue to follow public health advice since one

can develop long COVID with even mild to moderate infections. A new study from Oxford, England has described anatomical changes in the CNS caused by COVID-19. A new Delta Variant, the Delta Plus Variant (AY.2) has also entered the United States. It may be able to evade the immunity more but it is unknown if it will be able to effectively spread in the community. The bottom line, get fully vaccinated and continue to follow public health advice. Jack Pattie Show. June 21, 2021.

(5:50) <https://youtu.be/CgfAhZ5vW60>

COVID-19: Delta Variant Is Spreading & Its Dangers Ignored By Many

Dr. Kevin Kavanagh from Health Watch USAsm discusses the dangers imposed by the Delta Variant and how it is rapidly spreading in the United States. The United States is falling behind other countries in its approach to controlling COVID-19. The United Kingdom, despite having a third of the deaths per capita than the United States, is delaying reopening. The mRNA vaccines are 90% effective (if you receive both doses) against the Delta Variant. Vaccines provide both personal and community protection. Unfortunately, the low vaccination rates in the United States are preventing effective community protection and the stopping of viral spread. Misinformation is also rampant, such as children not spreading the virus. In Germany, it is mandatory that all school age children are tested twice a week for COVID-19. Jack Pattie Show. WVLK AM. June 18, 2021. (12:13) <https://youtu.be/5cWCdgTP52E>

COVID-19: Indian (Delta) Variant Is Here !!

Dr. Kevin Kavanagh from Health Watch USAsm discusses the new data from the WHO which found the Indian (double mutation) variant to have increased from 1% to 7% of genomic sequenced samples in the United States. The CDC is mitigating the information about this virus and has not declared it a virus of "concern". However, the increasing prevalence of the Indian Variant in the United States makes it imperative for everyone, including those with a previous infection from the wild type virus, to become vaccinated. The most up to date data is WHO data from <https://outbreak.info/> Jack Pattie Show. June 2, 2021. (6:47). <https://youtu.be/37FY7wcnWxk>

COVID-19: The Fauci E-Mails, Masks & Wuhan Lab

Dr. Kevin Kavanagh from Health Watch USAsm discusses the changing guidance and science of wearing masks along with the growing concerns of the Wuhan Lab. Spread of disease was usually viewed in a dichotomy of being either large droplets or very small aerosols (less than 5 microns). We now know this is a continuum, and the size of particles which spread COVID-19 appear to be between 10 to 100 microns which are small droplets which can aerosolize. Thus, a well constructed well fitted cloth mask will give some protection. Other topics include:

- 0:00 Health Watch USA's International COVID-19 Infectious Disease Webinar.
- 1:44 Dr. Fauci and the science behind the recommendations regarding the use of masks.
- 4:38 The Wuhan Lab as a possible source of the virus.
- 9:16 Myocarditis and COVID-19 Vaccines
- 11:15 A Patient With Long COVID.
- 12:57 Indian and other escape variants in the USA.

The website: <https://outbreak.info/> and the strategies the United Kingdom is using with the Indian Variant.

-- 14:40 Why those who have had COVID-19 should still be vaccinated. Jack Pattie Show. WVLK AM 590. June 4, 2021. (4:31) <https://youtu.be/pMFiDEO1bSo>

COVID-19 Articles of Interest

Nearly all Kentuckians who got COVID-19 in the last month were not vaccinated.

More specifically, 99.92% of all Kentuckians who've tested positive for the virus over the last four weeks were not vaccinated. "That's functionally 100%," Dr Stack said alongside Gov. Andy Beshear during a weekly state briefing.

Additionally, 99% of people hospitalized with the virus weren't vaccinated, and neither were 93.1% of the people who died from the virus over the last month.

<https://www.msn.com/en-us/health/medical/nearly-all-kentuckians-who-got-covid-19-in-the-last-month-were-not-vaccinated/ar-AALphlM>

Faced With the Delta Variant, Remember: Vaccinations, Not Vaccines, Save Lives

"The researchers reported that despite reporting 56% seropositivity in February 2021, Delhi could not prevent a massive fourth wave in the region. This was due to a higher effective reproductive number – 2.0 for the delta variant v. 1.2 for the alpha variant – and lower neutralising ability of the immunoglobulin G antibodies against the virus's spike protein." <https://science.thewire.in/health/faced-with-the-delta-variant-remember-vaccinations-not-vaccines-save-lives/>

Dangerous Delta COVID-19 Variant Infecting Vaccinated Adults In Israel

Of more than 100 daily cases amid an outbreak of the delta variant, half were children younger than 16., The Wall Street Journal reported Friday. Most of them hadn't yet been vaccinated, according to Dr. Ran Balicer, head of of a COVID-19 advisory advisor panel on COVID-19 for the Israeli government. But half of the adults infected had been fully vaccinated with the Pfizer vaccine, Balicer said. About 90% of the new infections in Israel were likely caused by the delta variant, the Journal reported.

The World Health Organization on Friday also warned everyone, even those fully vaccinated, to "play it safe" and continue to wear a mask and maintain social distancing in light of the large numbers of people who remain unvaccinated and the emergence of the delta variant, which it called the "most transmissible" form of the coronavirus identified to date.

https://www.huffpost.com/entry/covid-19-delta-infecting-vaccinated-in-israel_n_60d6661ce4b066ff5aba8faa

The Doctor Who Eliminated Smallpox Says COVID-19 Is Here to Stay

Larry Brilliant: "Boy, I wish we could reach herd immunity. But there's a number of reasons why we can't. First and foremost, a virus that infects multiple species, animals and humans, and a virus that has multiple new variants, each one having the potential to reinfect people, is sort of disqualified from being a candidate to be eradicated."

<https://www.msn.com/en-us/news/world/the-doctor-who-eliminated-smallpox-says-covid-19-is-here-to-stay/ar-AAKZDYd>



COVID-19 Lessons Learned: A Global Perspective

Health Watch USAsm & Massachusetts Nurses Association

Conference Videos are Now Available. Continuing Educational Credits through Southern Kentucky AHEC. For more information on continuing education go to www.healthconference.org

COVID-19: Introduction To Suppression Strategies

Dr. Kevin Kavanagh from Health Watch USAsm discusses strategies used by many countries including exclusion, elimination, suppression, and mitigation; along with the disruptive influences of misinformation and false hopes for herd immunity. YouTube Video: <https://youtu.be/Ej98j5WiGUw>

COVID-19: Lessons Learned in Australia

Professor Imogen Mitchell, Clinical Director of the Australian Capital Territory COVID-19 Response, discusses lessons learned in Australia. To date there are 910 deaths from COVID-19. If the United States did as well, adjusted for population, we would have lost less than 13,000 individuals. Australia is a federated nation, early on the State and Territories formed a national governing committee, guided by scientists, to formulate and direct the nation's COVID-19 response. Strategies included a zero tolerance for cases with cities imposing lockdowns, masking, physical distancing, along with strong testing and contact tracing for as few as 1 or 2 cases. Travel restrictions and 14-day quarantine were imposed on those entering the country and travel between State and territories was restricted during outbreaks. YouTube Video: <https://youtu.be/UpFrw3Wdbmw>

COVID-19: Lessons Learned in Singapore

Dr. Matthias Maiwald, Adjunct Associate Professor at the Department of Microbiology & Senior Consultant in Microbiology, National University of Singapore, discusses the COVID-19 response in Singapore. Strategies used were social distancing, mask wearing, and the closing of schools and non-essential businesses during a full lock-down. In addition, contact tracing was facilitated by phone app reporting of contacts in Singapore's population. Outbreaks occurred in migrant workers' dorms, and other outbreaks were associated with the airport, a hospital and a shopping mall. At hospitals, all patients were tested for SARS-CoV-2 upon admission and staff were tested every two weeks, if vaccinated; and once a week, if not vaccinated. An important observation was that during the full lock-down, infectious diseases caused by many other respiratory viruses all but disappeared. Rhinoviruses and enteroviruses reappeared 13 weeks after the end of lock-down, later adenoviruses reappeared. However, influenza stayed at a very low level well into 2021. This is a testament as to how effective the transmission of SARS-CoV-2 is in comparison to other respiratory viruses, and how difficult it will be to eradicate it around the world. YouTube Video: <https://youtu.be/-WPQv9ghTy0>

COVID-19: Lessons Learned in Kenya

Dr. Paul Yonga discusses lessons learned in Kenya. Kenya adopted a suppression strategy guided by a newly formed National Emergency Response Committee. The country utilized regional and localized lockdowns, mandatory masking, curfews and social distancing. Barriers included stigmatization of the disease, large political rallies and a lack of vaccines, the latter of which inhibited the long term effectiveness of a suppression strategy. There was also poor working conditions for frontline workers and healthcare staff, including a lack of PPE and pay shortages. Currently, Kenya is expecting another wave, possibly driven by the Delta Variant which comprises 90% of sequenced cases in some regions. YouTube Video: <https://youtu.be/oTOFJiLYa2Q>

COVID-19: India In Crisis -- Vineeta Gupta, MD, JD

Dr. Vineeta Gupta describes the conditions in India and the socioeconomic challenges which inhibit the pandemics control. The impact of the Delta (B1617.2) Variant on India and the United States is also discussed. <https://youtu.be/pxiuS3r4eJM>

COVID-19: Lessons Learned in Spain

Dr. Jesús Rodríguez-Baño, MD, PhD from University Hospital Virgen Macarena, University of Sevilla discusses Spain's COVID-19 response. Spain is a federated nation. The country underwent three waves. During the first wave a national emergency was declared and a hard lockdown was enacted. In the second and third waves regional governments guided the response. During these waves there were limits on gatherings and universal masking was mandated. Spain did not have a well developed anti-vaccination movement as was seen in other European countries. However, the COVID-19 response became politicized during the second and third waves, a phenomenon seen in several other countries, including the United States. There was also intense discussion over the use of the AstraZeneca vaccine. Politics and economics took the lead in some of the decisions instead of healthcare, but everyone agreed there needs to be a balance in every decision taken. YouTube Video: <https://youtu.be/pWuu10Gg7ro>

COVID-19: Lessons Learned in Germany

Dr. Sebastian Hoehl presents on COVID-19 lessons learned in Germany. Dr. Hoehl was one of the first to recognize that asymptomatic spread is a major contributor to the SARS-CoV-2 pandemic. In his presentation he discusses strategies used by Germany to quell COVID-19 surges and the importance of frequent testing in the opening of schools. He also discusses the social disparities of COVID-19 and how it targets and disproportionately affects the socially disadvantaged. YouTube Video: https://youtu.be/_9is03QomGI

COVID-19: Lessons Learned In The United Kingdom

Dr. Stephanie Dancer provides an extensive description of how SARS-CoV-2 spreads and the importance of aerosolization. COVID-19 clusters at NHS Lanarkshire, Scotland, was caused by spread from the community, and was transmitted in hospitals by both patients and staff. Corrective measures included the use of masks, opening of windows and minimizing the risks in bathrooms and of toilet plumes. Air exchanges in most hospitals were deficient. They were improved to six complete air exchanges per hour for general wards and ten for bathrooms. Proper building ventilation is of utmost importance in controlling respiratory pathogens. YouTube Video: <https://youtu.be/sMW3wUWUboA>

COVID-19: Lessons Learned in the United States

Dr. Kevin Kavanagh from Health Watch USA(sm) discusses how the United States has viewed and dealt with COVID-19. Barriers to true acceptance are exemplified by Kubler-Ross stages of grief: Denial, Anger, Bargaining, Depression and Final Acceptance. The role of foreign adversaries and misinformation is discussed and how this is preventing true acceptance of COVID-19 and an effective pandemic response. YouTube Video: <https://youtu.be/eV8lBv7ADU4>

COVID-19: Comments Regarding Variants

Dr. Kevin Kavanagh Discusses COVID-19 Variants

1. The Delta Variant detected in The United States & the need for more genomic sequencing to detect community spread.
2. Mutations and Variants can be tracked on the websites.
<https://nextstrain.org/> and <https://outbreak.info/>
3. How Variants are named and How The Spanish Flu Got its Name.
4. Almost all nations in almost all pandemics mitigate the severity and extent of disease and deaths.

YouTube Video: <https://youtu.be/U9Xs6JizJSE>



COVID-19: Veteran Administration's Fourth Mission

Acting Deputy Secretary Carolyn Clancy and Under Secretary Dr. Beth Taylor discusses the Veteran Administration's fourth mission to aid and support state and local health care systems in times of pandemics and other health emergencies. The presentation details the Veterans Administration activities to support health care systems during the COVID-19 pandemic along with lessons learned during the reassignment of resources and staff to support the United States' pandemic response. YouTube Video: <https://youtu.be/oBtNJeoNW2k>

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