

## COVID Update May 16, 2021

## Some wonderful things are happening related to COVID-19:

- The number of new COVID-19 cases in NH is the lowest in 7 months (139 new cases yesterday).
- It is warmer out and more people are socially active outside.
- All 3 COVID vaccines continue to be extraordinarily effective in preventing hospitalization, severe illness, and death from COVID-19 (95% to 97%).
- Fully vaccinated people do not appear to shed virus to cause unvaccinated people to get infected.
- Everyone 12 years of age and older now has the opportunity to be vaccinated.
- The state has made it easier to get a vaccine by adding walk-in clinics (no appointment needed).

Because COVID-19 cases and deaths are falling in most states and because we have learned a lot about COVID over the past year, the CDC has **relaxed mask guidance for** *FULLY VACCINATED* **individuals.** What is fully vaccinated? It means it has been at least 2 weeks since you received your final vaccine dose. This guidance <u>does not</u> apply to unvaccinated people or those who are only partially vaccinated (have had only 1 dose or are less than 2 weeks after their final vaccine dose).

As a reminder, even vaccinated individuals must cover their faces and physically distance when:

- visiting doctors' offices, hospitals or long-term care facilities like nursing homes.
- traveling by bus, plane, train or other modes of public transportation.
- going to transportation hubs like airports and bus stations.
- visiting prisons, jails or homeless shelters.

While I'm always excited to report great news and to move forward, as your health officer and a physician, I need to present context around this new mask guidance. As of today:

- 37% of people in our nation have been fully vaccinated (all individuals, not just those eligible to receive the vaccine).
- 63% of people in our nation have NOT been fully vaccinated.
- 50% of people in our nation have received at least one dose of the vaccine.
- Among other more transmissible variants, a case of the B1.617.2 variant has been documented in York County. This is the variant at least partly responsible for driving the massive second wave of COVID in India.

## Why should "we" care about these numbers if we are fully vaccinated?

As we make our own decisions based on full understanding of personal level of calculated risk, here are some things we all need to consider:

**Contracting COVID after vaccination:** As I said above, our current 3 vaccines are very effective at preventing severe disease, hospitalization, and death from COVID-19 but not perfect. There have been and will continue to be breakthrough cases (illness that happens in fully vaccinated people). Though almost no one who develops COVID after being vaccinated will have severely symptomatic disease, require hospitalization, or die, there are other things to consider.

**Long-term COVID:** About 30% of people (or 1 in 3) who contract COVID develop longer-term symptoms. These "long-COVID" or "long-haul" symptoms are usually, but not always, neurologic: increased anxiety, depression, brain fog, memory deficits, vertigo, disabling fatigue, and shortness of breath.

Some people have such bad vertigo that they can't drive or read. Others have fatigue to the point they can't walk to the post office. Some may get short of breath after speaking only a sentence. Some people get better in a month or after a few months, but for others, it lingers. Long-term symptoms don't just happen to severely ill, elderly, immunocompromised, or hospitalized people. Long-haul COVID happens to young people, those with intact immune systems, and those with asymptomatic disease.

WE DO NOT KNOW yet if a fully vaccinated person who tests positive for COVID (breakthrough COVID) is at risk for long-term symptoms. COVID hasn't been with us long enough to fully understand it but experts are working on it.

For our neighbors in New Castle: We do not know who has been able to have the vaccine, for whom it is not an option, or for whom it does not prevent COVID very well. For example, a person with a solid organ transplant needs medicines to suppress his or her immune system, which is the very thing that the vaccine relies on to protect against COVID. Both with and without the vaccine, people who have organ transplants are at increased risk of COVID and severe COVID. The overall COVID mortality rate for solid organ transplant recipients is approximately 55% Those who take immune-suppressing medications for reasons other than solid organ transplant also are somewhat more at risk related to COVID.

If everyone who has not been vaccinated wears masks appropriately (anytime you are indoors, in a crowded situation, or within 6 feet of others who may not be vaccinated), the above is not an issue. However, only 37% of people are fully vaccinated. It is my observation lately that more that 37% of people have shed their masks. This will be less of an issue as more people are vaccinated, which should be a priority for everyone who qualifies (which is anyone older than 12).

**COVID and Variants in context:** We hear about variants a lot. What are they? Why do we care? What does increased transmissibility mean? Why is COVID different than the flu? How do I prevent getting a variant?

What is a variant? Variants (mutated viruses) happen all the time in nature. Some variants are more transmissible and cause more severe disease. Others are less transmissible: these variants



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tend to die out. More variants occur when there are more virus copies and more active cases. With the number of COVID cases in the world being high, we can expect to see more variants. Experts are keeping an eye on how well our current vaccines work against these variants.

Why should I care about variants? Here is an analogy that helps us understand why we need to pay attention to variants. Imagine a robber (the coronavirus) trying to get into a house (our bodies) and steal something (our health). Initially, the robber is akin to an inexperienced young person trying to break into a house with a bobby pin. A lot of times, the robber gives up. Or, if the robber does get in, he or she may be so surprised that the bobby pin worked, that he or she can't decide what item in the home is worth the most, so the robber just causes some minor damage (less severe disease). But remember, even early on, thousands of people died from COVID.

Variants that are more transmissible are like an experienced robber who brings along a locksmith. You just need one locksmith to get in, and now the robber is more efficient at stealing your health (more severe disease).

Now, we put an alarm system on the house - a vaccine. There are many types of alarm systems with different mechanisms and different levels of effectiveness and there are different types of vaccines. Some have not even made it to market yet.

Why is the B1.617.2 variant of interest? Currently, the B1.617.2 variant appears to be more transmissible, cause more severe illness, and it MAY (the jury is still out on this) be somewhat able to avoid pre-existing immunity from either prior infection and/or vaccination. This means it may know how to at least partly disable our alarm system in our bodies (immunity from vaccination).

Why is COVID different and more serious than the flu? In short, it is more transmissible, it is infectious before someone knows he or she has it (if that person knows at all), it has a higher hospitalization and death rate, and importantly, can cause long-haul COVID-19 in a significant number of people.

How do I prevent getting a variant? In public health, our goal is to decrease worldwide coronavirus transmission rates through vaccination, mask wearing, and social distancing so that serious variants do not occur or spread. The way to minimize your chances of getting COVID-19, even after vaccination, is to continue to practice social mitigation policies - masks, social distancing, handwashing, spending more time outdoors in settings in which you do not know who is vaccinated. If everyone in your group is vaccinated, have a blast without masks. But if you don't know, make the calculation regarding risk for yourself and others before you throw away your mask. And remember, local areas and businesses can have mask mandates that supersede CDC guidance. Portsmouth still has a mask mandate.

What does this mean for New Castle? Most people in our town are excellent and considerate neighbors. However, even the most considerate people can forget or be confused by guidance or can be so giddy about places opening up and getting rid of masks that they forget risks for themselves or others.

Every person can decide what risk he or she is taking for himself or herself, but at this point, given how few people are fully vaccinated (I can't find what percentage of people in our town have been fully vaccinated), we as individuals should not make the risk decision for others. In other words, I have a duty to allow ALL people to make their own risk decisions.

Front-line workers in our town (and neighboring towns) whose livelihood depends on their jobs should also be able to decide their risks for themselves, not just the residents. Workers in our town do not have the right to ask people if they have been vaccinated, nor do they have the requirement to disclose whether or not they have been able to have a protective vaccine. Not all of our buildings are well ventilated, and that has a huge effect on potential virus transmission.

Thus, I am strongly recommending that residents and non-residents wear masks when entering public buildings such as town hall, the library/Macomber room, and the gym area. I request you follow whatever updated guidance the post office develops. I believe and hope that all people will choose to follow this guidance while so few are fully vaccinated, and that you understand that this will change once we see a higher percentage of people vaccinated (I don't know what number that is at this point), when we know more about possible reinfection after vaccination, and if that causes such a high percentage of long-haul symptoms.

By getting vaccinated and following community mitigation measures and wearing masks in our town buildings you have the opportunity to potentially save a life. Please be kind to your neighbors. I strongly believe people here will do the right thing, and I would still vastly prefer to avoid mask mandates - especially now as things are improving so rapidly.

Yours in Health,

Kathy Hollister, MD Deputy Health Officer

Email: healthofficer@newcastlenh.org