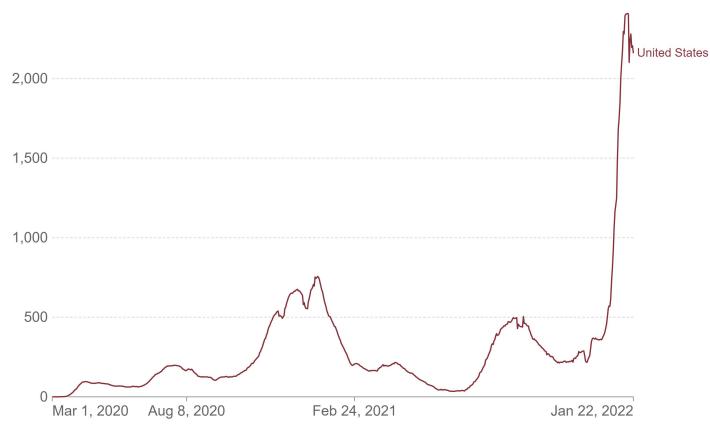


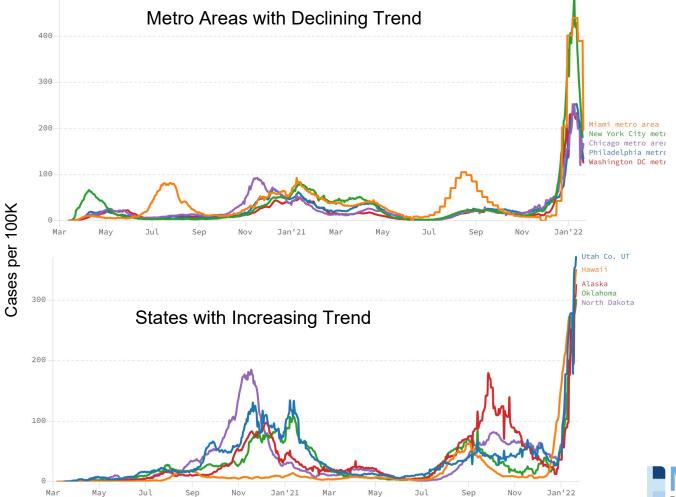
Daily new confirmed COVID-19 cases per million people



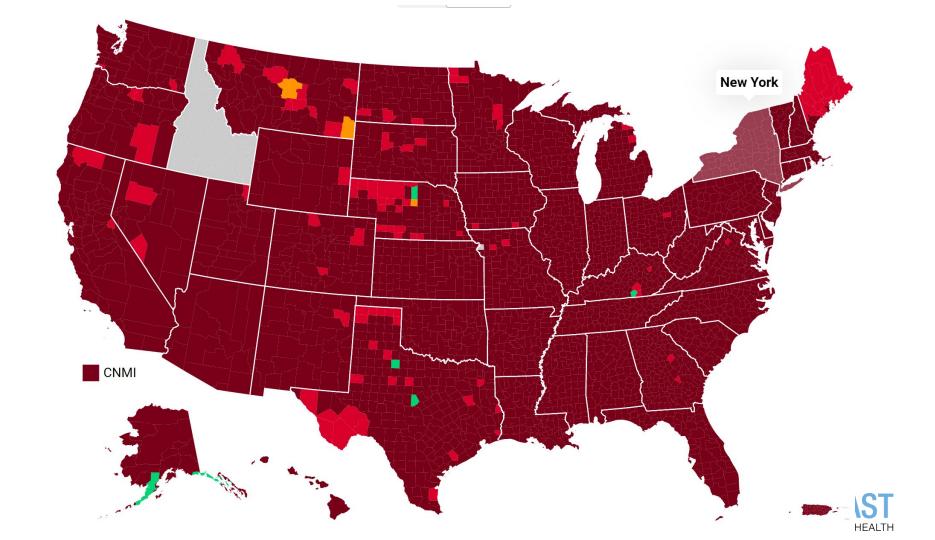
7-day rolling average. Due to limited testing, the number of confirmed cases is lower than the true number of infections.

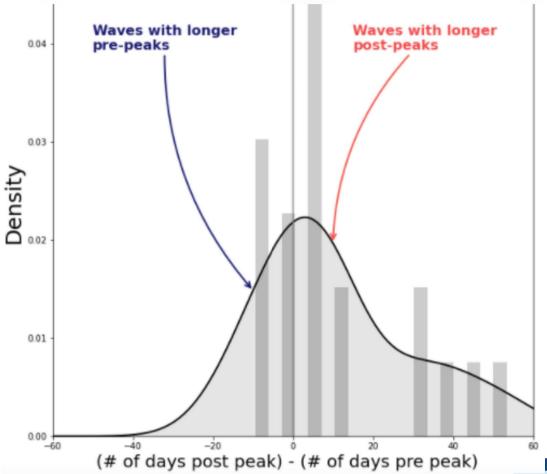








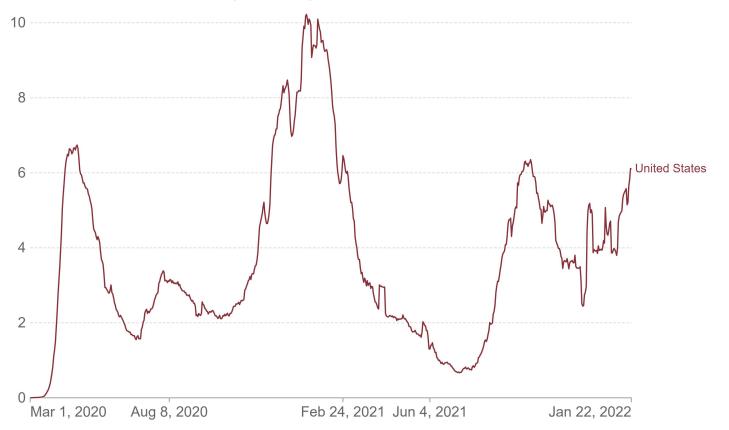




Daily new confirmed COVID-19 deaths per million people

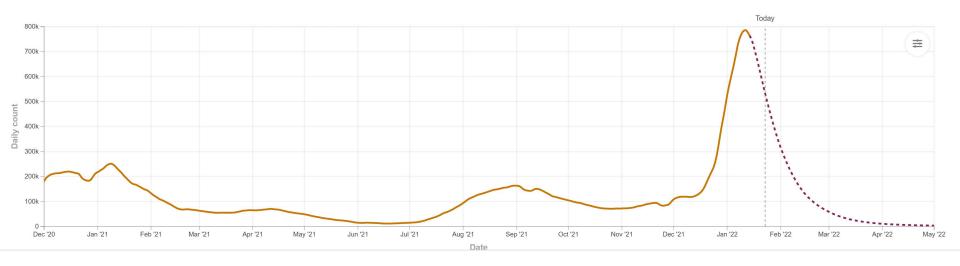


7-day rolling average. For some countries the number of confirmed deaths is much lower than the true number of deaths. This is because of limited testing and challenges in the attribution of the cause of death.



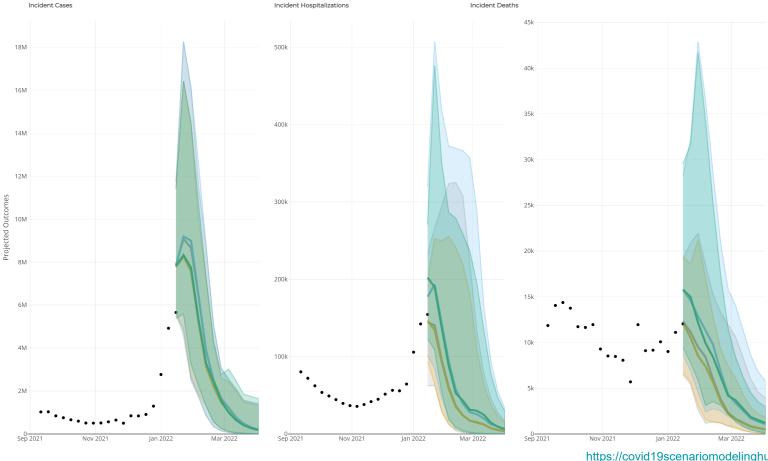


Prediction Daily Cases Per 100K



https://covid19.healthdata.org/united-states-of-america?view=infections-testing&tab=trend&test=positive_tests





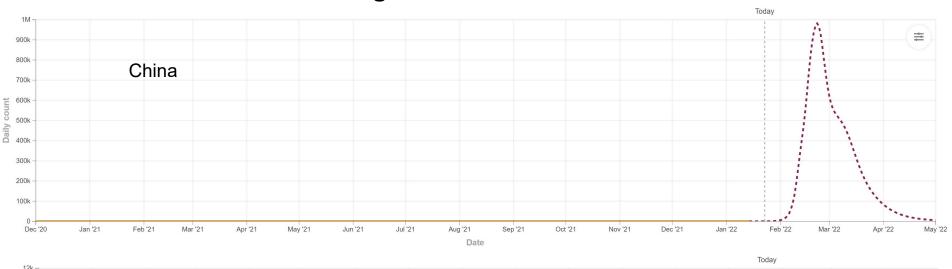
https://covid19scenariomodelinghub.org/viz.html

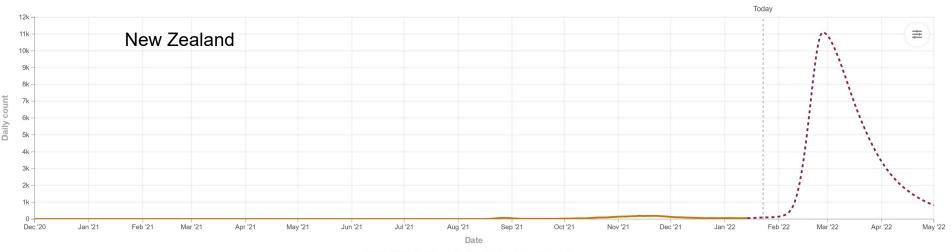
Global View

Estimated

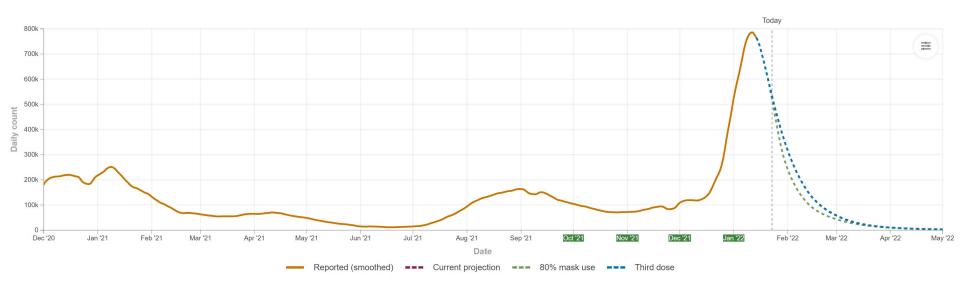
- 125M cases per day
- 50% of the world will have been infected with omicron between the end of November 2021 and the end of March 2022
- Asymptomatic infections is much higher for omicron, perhaps as high as 80–90%
- Many hospitalizations are admitted for other reasons beside COVID
 - Note still require infection control resources
- The omicron wave appears to crest in 3–5 weeks after the exponential increase in reported cases begins
 - It is expected that the omicron peak will occur in most countries between now and the second week of February 2022

Countries with Zero COVID Strategies





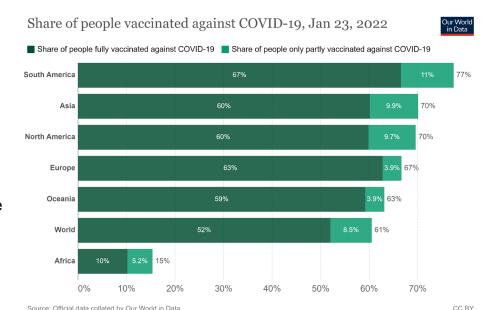
Masks and boosters





What are facts?

- An unpredictable virus which will continue to mutate
- Vaccines are effective but....
 - Only 52% of the world's population fully vaccinated
 - High income countries are 14x more vaccinated than low income
 - Sinopharm vaccines, Sputnik & others are less effective than the mRNA vaccines
 - Zero-COVID countries yet to have their Omicron wave
 - Ongoing infections = more mutations
 - Animal reservoirs



Source: Official data collated by Our World in Data Note: Alternative definitions of a full vaccination, e.g. having been infected with SARS-CoV-2 and having 1 dose of a 2-dose protocol, are ignored to maximize comparability between countries.

We can't predict when the next variant of concern will show up or if one that can outcompete Omicron will happen

BUSINESS GROUP ON HEALTH

Tools in our toolbox

We have many tools:

- Vaccines that keep most people out of hospital and the morgue
- Boosters that boost immunity
- Antivirals
- Rapid Antigen testing
- Effective masks
- Other controls e.g., ventilation, sequencing, wastewater surveillance

But:

- Immunity from vaccination, boosters and infection wane
- Antivirals require early diagnosis and availability
- Rapid Antigen testing miss some infections with omicron early on in an infection
- Masks only work if worn/worn correctly



Action for now

- While the tools are not perfect, they do have an impact – so use them:
 - Promote, encourage or mandate
 vaccinations still the best defense
 - High-quality masks when community rates are high and in high-risk situations
 - Testing make it widely available and affordable
 - Access to antiviral Rx for those at risk



The tools will get better!

What we will know this year

- March Omicron specific vaccines
- ✓ April antiviral supply
- ✓ June vaccines for infants
- July how much protection the Omicron wave is providing
- October global vaccination rate milestone
- ✓ November re-boosting the most vulnerable



Upcoming NEBGH virtual events:

- Jan. 31 Monday COVID-19 Update w/ Dr. Mark
- Feb. 10 Software to Treat Disease: Prescription Digital Therapeutics
- Mar. 22 Prevention and Support for Substance Use Struggles