

Three Minute Read™

Insights from the Healing American Healthcare Coalition™

November 2020-1



From the Editor: More than 10 million Americans have been infected by COVID-19 as the pandemic rages out of control. The articles summarized in this issue of **TMR** highlight some of the progress made in detecting, treating, combating and preventing the virus. To access each article, click on the headline.

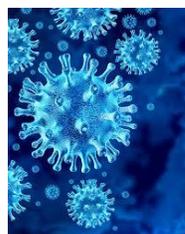


[The Best COVID Warning System? Poop and Pooled Spit, Says One Colorado School](#), by Rae Allen Michell, Kaiser Health News, 11/3/20

TMR Topline™ - With more than 23,000 undergraduates on its Fort Collins campus, Colorado State University has been more successful in combating community spread than the somewhat bigger University of Colorado at Boulder. How? By scanning the contents of undergraduates' feces extracted from 17 manholes connected to dorm buildings early each morning. The sewage review is part of a multipronged attack that includes contact tracing plus a specialized "paired pooling" form of testing saliva samples. Emerging research shows that infected people start shedding the coronavirus in their poop days before they begin shedding it from their mouths and noses. Carol Wilusz, a CSU molecular biologist, said "We can catch them before they're actually spreading the infection."

CSU also figured out how to screen saliva for less than \$20 a person compared with the \$93/test using the nose swab method. It involves pooling drool samples in a strategic way reminiscent of the children's game

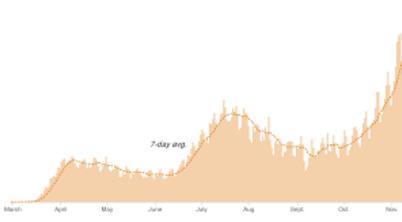
Battleship. They start with an eight-by-eight grid of saliva from 64 people, arrayed almost like a Battleship board. Each person's spit sample gets divided up and analyzed in two pools, one pool for the row it sits in and one for the column it sits in, for a grand total of 16 pools per grid. If the test containing samples in Row A and the test containing samples from Column One appear positive, that would indicate that the person whose spit is in the A-1 slot is a positive case.



[Studies show drop in COVID death rate](#), by Caitlin Owens, Axios, 10/21/20

TMR Topline™ - Two new peer-reviewed studies have confirmed a sharp drop in mortality rates among hospitalized COVID-19 patients. In one study, researchers looked at more than 5,000 hospitalizations in the [NYU Langone](#) health system between March and August. After adjusting for age and underlying conditions, patients in the study had a 25.6% chance of dying at the start of the pandemic; they now have a 7.6% chance. A study of 21,000 hospitalized cases at the Alan Turing Institute in the UK also found a similarly sharp drop in the death rate. Both studies attributed the decline to developing more standardized treatments for the virus as well as getting better at identifying when patients are at risk of blood clots or a severe immune system reaction. Wearing masks may be helping as infected individuals receive less of an initial dose of the virus.

A study released by the [CDC](#) found that hospitalized patients with COVID-19 in the Veterans Health Administration had a more than five times higher risk for in-hospital death than those suffering from the flu. The study also found that the risks for complications of COVID-19 were higher among non-Hispanic Black or African American and Hispanic patients than among non-Hispanic White patients



[As cases rise, states say they'll work with Biden on virus,](#)

Associated Press, 11/9/20

TMR Topline™ - President-Elect Joe Biden announced his [coronavirus task force](#) and has begun reaching out to governors to build consensus for a cohesive national strategy to contain the COVID-19 pandemic. New Mexico's Gov. Michelle Lujan Grisham, an early adopter of aggressive pandemic restrictions, praised Biden for "leading with science and de-politicizing the federal government's pandemic response." Idaho Gov. Brad Little wrote an opinion piece Monday imploring people to wear masks, though he said he does not have the authority to issue a statewide mandate. Utah Gov. Gary Herbert ordered a statewide mask mandate and is pausing extracurricular school activities, along with most sports and social gatherings with people outside the household.

Dr. Georges Benjamin, executive director of the American Public Health Association, said "Part of the problem with the response so far is that there really hasn't been a testing plan, and a contact tracing plan and any kind of meaningful disease containment plan that all of us understood." For example, early in the pandemic, President Trump told states that they were responsible for buying their own protective gear and they began bidding against each other for PPE. Biden is asking governors and local leaders to require mask use in public and to normalize social distancing.



[Five Questions to Ask About Pfizer's Covid-19 Vaccine,](#) by Arthur Allen, Kaiser Health News, 11/10/20

TMR Topline™ - Pfizer's mRNA based COVID -19 vaccine developed with BioNTech appears to keep nine of 10 people from getting the disease. If so, it's a breakthrough with a whole new class of vaccines. Five critical questions must be answered to be confident that this vaccine should be broadly distributed and injected:

- 1. How long will the vaccine protect patients?**
Of nearly 40,000 in the trial, 94 got ill, but Pfizer

didn't indicate how long protection will last or how often boosters might be needed.

- 2. Will it protect the most vulnerable?** The demographics of the volunteers who received the vaccine was not disclosed.
- 3. Can it be rolled out effectively?** It must be kept supercooled at -100F. Pfizer has developed a system to transport the vaccine in specially designed cases to vaccination sites but mishandling the vaccine from manufacture to patient would render it ineffective.
- 4. Could a premature announcement hurt future vaccines?** Quick approval by the FDA could make it harder for other manufacturers of vaccines to complete their studies. More trials are important as many vaccines will be needed to meet the global demand.
- 5. Could the Pfizer study expedite future vaccines?** Scientists are interested in whether those who received the vaccine but still got sick produced lower levels of antibodies than those who remained well. This would help public health officials to determine if other vaccines under production were effective without having to test them on tens of thousands of people.

Former FDA Deputy Commissioner Dr. Joshua Sharfstein said: "I hope this makes people realize that...there's hope coming, whether it's this vaccine or another."



[Dr. Fauci says COVID-19 vaccine could be widely available by April,](#) by Brittany Bowker, Boston Globe, 11/10/20

TMR Topline™ - Interviewed by Jake Tapper on CNN, Dr. Anthony Fauci stated that vaccinations have to go through a "tried and true" process of prioritization and the Pfizer vaccine could be available to everyone by April 2021. He anticipates health providers will be the highest priority for the vaccine, followed by people with "underlying comorbidities" that put them at high risk for serious infection, followed by the elderly. In an NBC interview, Dr. Fauci said "I trust Pfizer and the FDA... if they say this data is solid, then I promise I will take the vaccine and I recommend that my family take the vaccine."

TMR's Take –Much progress has been made despite the speed bumps encountered in America's scattershot response to the pandemic. Even at lower mortality rates, COVID-19 is five times deadlier than the seasonal flu, so wash your hands, wear a mask and socially distance.