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## Jacobson: With relaxed CDC guidelines, what will new COVID normal look like? | Opinion

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The Centers for Disease Control and Prevention announced a new set of guidelines that significantly relaxes many of the recommendations that were put in place since the pandemic began in March 2020.

The takeaway from these relaxations is that people must decide for themselves their own risk exposure, and take precautions commensurate with their individual risk tolerance. Most people do not give such issues much attention, going about their affairs without serious thought.

For example, the CDC's COVID-19 "community levels" continue to provide county-level risks that are most informative about hospital bed availability, though it remains unclear whether anyone is paying attention to this information based on peoples' behavior. The new bottom-up individual approach ends the more top-down prevention policy that has been in place for most of the past 30 months.

The rationale behind such a shift in policy is clear. Omicron BA.5, the dominant variant circulating in the United States, has been highly contagious but more benign than previous variants, as measured by the rate of hospitalizations and deaths.

Using scarce public health resources to buy down risk against a virus that appears to cause manageable illness for the majority of the population is not good economics. This means that targeting prevention for those most vulnerable employs a risk-based strategy across the entire population.

With this shift in policy away from prevention and containment, which is now in-line with an endemic virus that must be managed individually, what is the status of the country and what are the possible implications?

► **Deaths:** Since Jan. 1, 2022, the nation has averaged just over 900 COVID-19 deaths per day. However, since the BA.5 variant has been dominant, the daily death rate has dropped to just over 400 deaths per day. Extrapolated over an entire year, this would be in line with deaths attributed to strokes or chronic lower respiratory diseases, based on 2020 statistics.

The lower death rate is attributed to a combination of widespread vaccination (particularly in vulnerable populations) and the possible benefit offered by natural immunity from prior infections. Whether current or new vaccines continue to provide such protection remains an open question.

► **Comparison to influenza mortality:** The 2017-18 influenza season had the highest number of deaths over the past four decades. With 80,000 estimated deaths over a six-month period, this translates into around 440 per day, which is in line (though on the high end) with the BA.5 variant daily death rate.

The big difference is that the influenza season is typically over a six-month period, while the COVID-19 season is year-round, which is why total deaths from COVID-19 have been so high. The one unknown is whether the death rate will remain steady, increase or decrease. Over the past three months, it has trended up from 280 to 440 deaths per day. Given that the dominance of the BA.5 variant appears to have peaked and may begin to wane, the BA.4.6 variant is poised to become the next dominant variant, and it remains to be seen what its death rate will be.

► **Long COVID:** The one factor that continues to remain a mystery is the long-term impact of long COVID. Post-COVID conditions that can impact people's health will have significant ramifications on healthcare resources.

If people are unable to work, this could create shortages in a workforce that is already stretched. Clearly, the best protection against long COVID is for individuals to not get infected or reinfected.

The decision by the CDC to relax their recommendations was inevitable, based on the data available and the impact of the BA.5 variant. This does not mean that the risk to individuals has been eliminated. To the contrary, the risk continues, and is likely to continue with each new variant, particularly for people with underlying health conditions.

Every new infection brings with it some risk of hospitalization and death. Risks of blood clots, kidney damage, stroke and dementia have been reported. The individual and population risks that come with each new variant are real and remain to be seen.

So what is the state of COVID-19 in the nation? There are many who applaud the recent CDC shift in policy. Conversely, there are some who continue to support efforts to control the virus and prevention, given its long-term impact. What most can agree with is that dismissiveness of the virus as completely benign remains a misguided and naïve position.

This is the new normal that many have been asking for. The precise trajectory that it takes will remain shrouded in uncertainty.

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