

## Our Nation Cannot Afford Pandemic Fatigue: The Continued Threat of COVID-19 Variants

Summary: Our nation is better equipped than any other to accelerate R&D that addresses the threat of a "super variant" capable of bypassing existing COVID-19 immunity, both from vaccines and previous infection. The President and Members of Congress need to act now to pass COVID-19 supplemental funding. We need to ensure the U.S. maintains its global leadership position in the development, production, and availability of COVID-19 vaccines and therapeutics to counter the ongoing threat of COVID-19 variants.

The Continued Threat of COVID-19 Variants: Our nation has reached the grim milestone of 1 million dead from COVID-19. Globally, the death toll to date is 6.26 million. Without U.S. leadership and the marshalling of public and private sector partners to achieve what was once considered impossible – the development and deployment of vaccines and therapeutics in less than a year – our nation and the world would been even worse off in terms of human and economic impact.

In an ideal world COVID-19 would be a thing of the past. But as it stands, SARS-CoV-2, and its newly emerging variants, continue to pose both a health and economic risk to our nation and the global community. The Omicron BA.1 wave in the U.S. earlier this year saw the <a href="highest daily">highest daily</a> 7-day moving average to date of cases, emergency department visits, and hospital admissions. A <a href="higher percentage of hospital beds">higher percentage of hospital beds</a> were occupied with COVID-19 patients during Omicron than in the previous two winters of this pandemic. At the peak of Omicron, children under 5 were hospitalized at approximately <a href="five-times the rate">five times the rate</a> recorded during the Delta wave.

Now, a subvariant of Omicron – BA.2.12.1 – is driving a sharp rise in COVID-19 cases across the U.S. Daily case numbers in the Northeast and Midwest <u>are higher now</u> than they were during the peak of the Delta surge last summer. During the week of May 12, <u>over 93,000</u> additional COVID-19 cases in children were reported in the U.S., an increase of about 76% from two weeks earlier.

Globally, nations are monitoring outbreaks of additional Omicron subvariants – BA.4 and BA.5. Each new subvariant poses an uncertain threat. New subvariants have demonstrated the ability to evade immunity acquired from previous infection – even previous infection with another Omicron subvariant – and from our current vaccines. Some researchers have suggested that Omicron's immune evasion abilities should classify it as a distinctly new strain of coronavirus.

How long before this virus mutates enough to render our current vaccines completely ineffective? The U.S. should treat this threat as a certainty and act now to accelerate R&D that can place our nation in a far stronger position against the unknown.



We have learned that the impact of COVID can last long after the initial virus has subsided. Up to 23 million Americans infected with SARS-CoV-2 have experienced "Long COVID," accompanied by symptoms that can be as serious as heart or kidney failure.

Further, evidence is mounting that COVID-19 infection – even when it manifests in very mild symptoms – appears to increase the risk of other serious conditions, including <u>blood clots</u>, stroke and even type 2 diabetes. Type 2 diabetes is already a major public health threat, <u>compromising functional capacity and reducing life expectancy</u> for those affected, and generating <u>hundreds of billions</u> in health care costs each year in the U.S. alone.

The impacts of new variant surges on the health care system are damaging. The stress to hospitals and health care professionals has been well documented, impacting the receipt of timely care, the ability to schedule surgeries, and the ongoing problem of staffing shortages. And rural hospitals, already facing significant financial pressures and closures leading up to the pandemic, <u>have been further stressed during COVID</u>.

If our nation does not remain on the cutting edge of R&D, we leave ourselves vulnerable to death, disability, and potential future shock waves of economic chaos disastrous to Americans and to businesses small and large across the nation.

Given the risks of inaction and considering our nation's global leadership to date in the research and development arena, the fastest path to protecting U.S. interests is to advance R&D now.

Progress has been made <u>toward a vaccine effective</u> against numerous SARS-CoV-2 variants. With further research, there is every reason to believe this vaccine would not only be effective against present and future SARS-CoV-2 variants but would also offer protection against future threats from coronaviruses broadly. Moreover, there is an opportunity to develop important new treatments (such as oral antivirals) to mitigate symptoms and prevent severe disease outcomes.

Operation Warp Speed is just one example of U.S. global leadership in the R&D arena. That unprecedented effort also speaks to the resolve of federal policymakers on both sides of the aisle to ensure Americans aren't at the back of the line of nations for needed COVID-19 supplies.

The U.S. is now grappling with how to restock needed PPE, vaccines, and COVID treatments when orders for the fall and winter months need to be made now. Coupled with the ever-present threat of variants capable of evading previous immunity, it is in our nation's best interest for Congress to pass, and for the Administration to act quickly, to ensure funding negotiated in the pending COVID-19 supplemental spending bill can help our nation stay ahead of whatever comes next with COVID-19.