

Israel was a leader in the COVID vaccination race, so why are cases spiraling there?

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Israel has been one of the focal points of the pandemic in 2021 owing to its rapid rollout of COVID-19 vaccines. By late February, authorities had administered at least one dose to 50% of the population, with much of Israel's immunization program using Pfizer vaccines.

Society then in effect reopened across the summer of 2021. However,



since then Israel has reported significant outbreaks, with over <u>10,000</u> <u>confirmed</u> new cases being recorded each day in early September.

A main part of the problem has been vaccine coverage. After its fast start, Israel's rollout slowed. There have not been any clear interruptions to vaccine supply, so factors such as hesitancy or access to healthcare may have been an issue. For example, there's evidence of <u>uptake being</u> <u>lower</u> among Arab and ultra-Orthodox Jewish groups.

The <u>share of the population</u> having received one dose increased from 50% in February to only 68% in September. Children aged 12–15 have been <u>included in the rollout</u> since June 2021, yet despite this, currently only 62% of the population have had two doses.

This has left Israel <u>behind many</u> other countries in terms of coverage, including the UK. Having around 30% of the Israeli population completely unvaccinated means that there's approximately 2.7 million people who are potentially susceptible to infection and illness.

There are <u>also concerns</u> that the immunity offered by the Pfizer vaccines may be waning over time, although much of <u>the research</u> on this is still at an early stage (meaning it is still awaiting review by other scientists). Israel's hospital data is, though, showing that vaccinated people are susceptible to infection. Recent reports suggest that <u>nearly 60%</u> of hospitalisations are in the fully vaccinated.

However, as experts have <u>suggested</u>, these figures don't necessarily mean that vaccines have lost their effectiveness. The same sort of trend has been seen in the UK, and may simply reflect the fact that the elderly are more likely to be vaccinated while also being more susceptible to disease—factors which combine to inflate COVID-19 cases and deaths among the vaccinated.



A further factor is the more transmissible delta variant, which has now taken hold in Israel. This form of the virus is <u>driving the</u> current series of outbreaks, and its greater ability to spread may partially explain the rise in cases too.

Easing too early?

The other big part of the problem has been Israel ending its restrictions. Dr. Asher Salmon, director of the Department for International Relations at Israel's ministry of health, <u>suggested in July</u> that Israel "may have lifted restrictions too early."

It's the latest in a long line of examples showing how community transmission can be easily sustained when national policy encourages the mixing of susceptible people with no or few restrictions in place. The tragic consequences of relaxing restrictions in India shows how devastating it can be when decision-making goes awry.

The <u>COVID-19 Stringency Index</u> created by Our World in Data is a composite measure of the strictness of the COVID-19 containment policies in each country around the world. As of August 28 2021, Israel's restrictions score was 45.4, far less strict than New Zealand, where outbreaks continue to be limited in scope (96.3), but comparable with the UK (44.0), which is reporting around <u>30,000 new cases</u> per day.

Time to hit the boosters

Countries watched the initial vaccine rollout in Israel, gauging the vaccines' impact and using this information to inform their own immunization campaigns. Amid <u>concerns about</u> waning immunity, there are once again reasons to observe what happens next in Israel, as it is now implementing a booster program, giving third doses of vaccines.



In terms of the effectiveness of boosters, <u>early reports</u> are encouraging. In those receiving a booster, the risk of a confirmed coronavirus infection appears to decrease 11-fold relative to individuals who have received two doses. However, the relevant study is <u>still in preprint</u>, so its findings have yet to be formally reviewed.

The use of boosters is controversial. There have been <u>continuous calls</u> for higher-income countries to share their vaccine stockpiles with lowerincome ones. This has not yet happened to any great extent. As of early September, <u>only 5.4%</u> of the African continent has received at least one dose of any COVID-19 vaccine.

The World Health Organization has called for a moratorium on booster shots until at least the end of September, but it seems unlikely any country will be altering their policies accordingly—including Israel.

Israel's vaccine rollout, overall, has arguably been implemented very successfully. But the country is also an example of what can happen when restrictions are relaxed too quickly. What it shows is that all countries—regardless of their current <u>vaccine</u> status—need to maintain longer-term plans for how to minimize the impact of COVID-19, during this current pandemic and beyond when controlling smaller outbreaks.

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