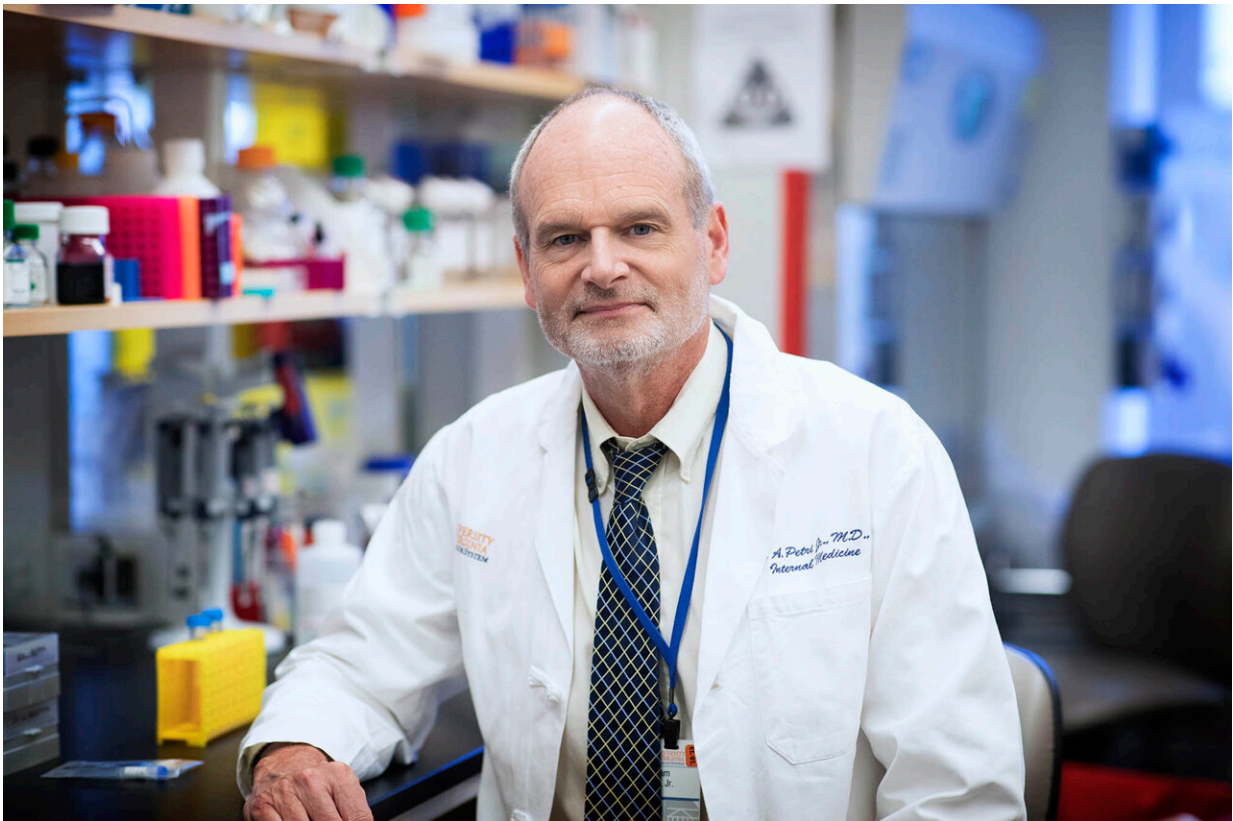


Infectious disease expert offers recommendations for holiday travel

November 19 2021, by Lucie Rutherford



Dr. William Petri is vice chair for research in the UVA Department of Medicine and a chaired professor of infectious disease and international health. Credit: Dan Addison, University Communications

At this time last year, demand for holiday travel saw a steep decline,

with train ticket sales down by 20% and the Transportation Security Administration reporting airport traffic as less than half of the numbers seen in 2019.

As the [holiday season](#) comes back on the horizon this year, it is clear that progress has been made. In late November of 2020, COVID vaccine shipments to the states were still a few weeks out. Fast-forward to today, and 445 million vaccines have been administered in the U.S. Almost 60% of the U.S. population is fully vaccinated, and an additional 31.5 million have received a booster.

With Thanksgiving now a week away and the rest of the holiday season to follow closely behind, UVA Today checked in with a UVA infectious diseases expert to understand what is expected heading into the gathering season. Dr. William Petri, vice chair for research in the UVA Department of Medicine and a chaired professor of infectious disease and [international health](#), offered insights, comparisons and recommendations on how to proceed.

Q. Do health experts expect COVID cases to surge again this holiday season?

A. Yes, but I have invited my [adult children](#), who are all vaccinated, to travel home to see us! This is the opposite advice that I gave them last year at this time—which was the right decision then, as holiday travel last year resulted in the highest number of COVID-19 infections of the entire pandemic, peaking at 300,000 new cases in one day on Jan. 8.

Today, new infections, while declining or stable in Virginia, are beginning to creep up in the mountain states and northern U.S. It seems likely that we will see regional increases or surges in infections, but nothing like the nationwide problem last holiday season.

Q. Will case numbers be worse than anything we've seen previously?

A. No. Last year at this time, no one was vaccinated. Now 80% of Americans age 12 and older have received at least one vaccination. Vaccines are decreasing the chance of infection by six-fold, and of dying from COVID-19 by 12-fold. Now with 5- to 11-year-old children getting the vaccine, we are in a much, much better position, thus my invitation to my children to travel.

Q. Last winter, there were issues in differentiating COVID and the seasonal flu. Are there better methods in place this season to diagnose the two viruses separately?

A. Yes. I am caring for patients at the UVA Hospital this week, and we are testing everyone with cold- or flu-like symptoms for flu, COVID-19 and respiratory syncytial virus, since these can all have the same symptoms. It is worth mentioning here the importance of vaccination for flu for everyone 6 months of age and older, as this saves lives.

A side note is that this year there was no winter epidemic of influenza, an unprecedented event. It is thought that the record-low number of influenza cases was due to all of the efforts to mitigate COVID-19, including decreased travel, social distancing and mask-wearing, as well as a record number of influenza vaccinations. As we approach the 2022 flu season (generally from January to March of each year in the Northern Hemisphere), it is unknown how much flu we will have.

Q. Is it likely that hospitals will get pushed to near capacity again?

A. Not at a nationwide level. There however may be regions or localities where, due to low vaccination rates, a holiday surge is severe enough that this does occur.

The highest-risk group for hospitalization due to COVID-19, those 65 years of age and older, is fortunately also the most-vaccinated group, and this will go a long way to prevent demand exceeding capacity at hospitals. It is important to keep in mind that someone who is 80 years old is 700-fold more likely to die from COVID than someone who is 18 to 40 years old.

Q. Do five- to 11-year-olds still pose a health threat, since many will not receive their second dose until early- to mid-December?

A. No. One dose of the Pfizer vaccine in the 5- to 11-year- old age group is more than 90% effective at prevention of COVID-19 by one week after vaccination. This was shown in the phase 2/3 efficacy data submitted by Pfizer to the FDA for [emergency use authorization] approval on Oct. 26.

Q. Many Americans have been able to get booster shots of COVID vaccines this fall. Does this allow them to travel and visit family without much worry?

A. Yes. The booster shots for the COVID-19 vaccines have been shown to increase the levels of anti-spike neutralizing antibodies as much as 20-fold, thereby closing the gap on waning effectiveness of the primary vaccine series. Even without a booster, vaccinated individuals were 12-fold less likely to die from COVID-19 during the most recent delta variant surge. So, as we have all heard, and is true, vaccinated individuals

can return to a near-pre-pandemic style of life!

Q. What recommendations do you have for people as they travel and gather this holiday season?

A. One can enjoy indoor family gatherings safely if everyone has been vaccinated and everyone exercises common sense (i.e. does not attend if they have symptoms that could be COVID-19, such as a cough or cold).

Under-5-year-old children who cannot yet be vaccinated may pose a risk of asymptomatic transmission if they are exposed to the virus in settings such as day care or preschool. One approach would be to have them tested prior to the family gathering. This would be prudent if other family members are at increased risk (for example, grandparents due to their age, or someone with a serious underlying medical condition). Remember that the best way to protect under-5 children right now is to surround them with vaccinated family members.

Provided by University of Virginia

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