

'Tripledemic' surge of RSV, flu and COVID is on the decline

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You can remove the term "tripledeemic" from your vocabulary—for now.

As [respiratory viruses](#) ticked upward in late November, health officials

braced for what they called a "triple-demic" of RSV, flu and COVID-19 cases leading to widespread infection, causing a flood of patients to hospitals and leading to hours-long wait times.

That winter surge represented a respiratory virus peak, and experts say cases are now declining. Nationally, the week ending Jan. 14 saw 72,119 total respiratory cases, down from 235,850 the week of Dec. 3, when cases peaked.

COVID-19 dashboards showed a slight uptick in infections and hospitalizations in November and December, the same time flu and RSV were surging, and patients were visiting hospitals with respiratory complaints. Preliminary data for January shows COVID-related deaths have dipped.

"In the past month or two, we've seen a fairly steady decline in the number of children positive for various viruses," said Dr. Raymond Pitetti, chief of pediatric emergency medicine at the University of Pittsburgh Medical Center Children's Hospital. Data from the Centers for Disease Control and Prevention shows that, nationwide, infants and school-age kids were hit hard by this respiratory virus peak, specifically flu and RSV.

"We've been able to manage ER volume by adding resources" like staffing ICU units and recommending patients with mild flu and RSV symptoms see their primary care providers instead, he said. "The decline in RSV in the community has helped us tremendously."

Dr. Don Whiting, chief medical officer for Allegheny Health Network, said many of the COVID-19 cases caught in his network's hospitals have been a result of "secondary diagnoses," wherein patients check in for other reasons like surgery or diabetes and test positive for the virus. "They're not necessarily symptomatic," he said. "People are surprised."

This can be partially attributed to omicron variants causing generally milder infections, although recent research shows there's still a risk of developing long-COVID.

Flu arrived early this season with higher-than-normal cases, hospitalizations and deaths. Some [health officials](#) are bracing for a [second wave](#)—as is typical, because the two main flu strains, Influenza A and B, peak at different times.

"I am expecting an influenza B season sometime in the next month," Pitetti said. "But there's no way to predict what the spike will look like."

Alexander Sundermann, an infectious disease epidemiologist at the University of Pittsburgh School of Medicine and assistant professor of infectious diseases with a Ph.D. in epidemiology, said a second flu wave is possible but not guaranteed: The early flu peak with more flu cases than previous years may have protected against that.

"It's hard to say what's going to happen," he said. "But we are going to keep monitoring for it." Sundermann said they'll keep observing trends to make the best recommendations.

Those recommendations right now include much of the usual: staying home if you feel sick, washing your hands, getting vaccinated and masking in crowded places if preferred.

"If you're going to be in a crowded environment with a lot of people, it's certainly reasonable to mask," Whiting said.

The World Health Organization, in a Q&A last updated Jan. 13, stated that people in public should wear a mask "when in a crowded, enclosed or poorly ventilation (sic) area (eg. you are unable to maintain distance)," or "if you have any doubts regarding the quality of ventilation."

Additionally, people who are immunocompromised should wear them, as well as people who live in places with low vaccine uptake.

A new CDC report exploring reasons for not getting vaccinated found that many people simply didn't know the bivalent booster was available, or that they were eligible. The bivalent booster provides protection against emerging omicron subvariants and severe illness. According to the Food and Drug Administration, the Moderna bivalent booster is available:

- To people ages 6 months to 5 years of age who have received their primary Moderna series two months ago or longer.
- To people 6 years and up, two months or more after any authorized COVID-19 vaccine.

The Pfizer bivalent booster is available:

- To people aged 5 years and up, two months or more after any authorized COVID-19 vaccine.

Pitetti reassured that "the vaccine is incredibly safe, no matter what you read on social media."

And if you're using an at-home antigen test to detect a possible COVID-19 infection, Sundermann advised that a negative test might mean it's not positive yet. Antigen tests are not as sensitive as PCR tests and require a higher viral load to detect presence of the virus. It could also be possible that mild symptoms are reflective of a different virus: like flu or RSV.

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