

# Rising COVID hospitalizations, new variants have Americans on edge

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A new COVID-19 surge is underway, with seasonal changes and new

variants fueling an increase in hospitalizations and deaths.

A new omicron [variant](#), named Eris, has become dominant in the United States amid signs that an even more highly evolved COVID variant called BA.2.86 is starting to spread across America.

However, experts say the public should react to this latest surge not with fear, but with a healthy appreciation for the risk that the virus poses to some people.

"No one should panic about the new variants," said [Dr. Steven Gordon](#), chief of infectious disease at the Cleveland Clinic. "While cases are increasing, overall hospitalizations are lower than what we have seen at other points of the pandemic."

"Most people have at least some immunity due to either vaccination or infection—or both—so we have been seeing less severe illness and hospitalization due to COVID," Gordon added. "However, your level of concern may also depend on your risk. Those who are immunocompromised or live with someone who is immunocompromised will want to be more cautious."

There were 12,613 hospital admissions for COVID-19 between Aug. 6 and 12, a 21.6% increase in the most recent week, according to the U.S. Centers for Disease Control and Prevention. Further, about 1.7% of COVID-19 infections the week of Aug. 19 resulted in death, a 21.4% increase over the prior week.

At least some of the current surge can be chalked up to COVID's seasonal nature, said [Dr. Amesh Adalja](#), a senior scholar with the Johns Hopkins Center for Health Security in Baltimore.

"This uptick happens every summer and may have to do with people

moving indoors to avoid heat, where transmission is more efficient," Adalja said.

[Dr. William Schaffner](#), a professor of preventive medicine and infectious diseases at the Vanderbilt University School of Medicine in Nashville, Tenn., agreed.

"It's been quite warm outdoors, which means that we go indoors and enjoy the [air conditioning](#), which means that people have been congregating," Schaffner said. "And of course, Americans have been traveling a great deal, and just the hurly burly of travel exposes you to a lot of people. And folks have been generally traveling mask-free. It's pretty unusual to see someone wearing a mask at the present time."

## **New variants spur new cases**

As it stands, the Eris variant of COVID-19 is following its family history, Schaffner said.

"The variants are, if you will, children and grandchildren of omicron. They're part of that general family. And as such, they share a couple of characteristics," he explained.

Like earlier omicron strains, the Eris variant is quite contagious, Schaffner said. But it also doesn't appear to produce severe illness, and it also is hampered by the immunity people have gained from vaccines.

"The data, particularly regarding Eris, is that the vaccines are going to be as protective as they were before in preventing serious disease," Schaffner said. "BA.2.86 is so new that at least the CDC is being cautious. They're saying we'll have to wait to see. They don't anticipate that it's going to be any more severe, but they're just waiting and seeing about that."

BA.2.86 has been detected as part of regular COVID screening of U.S. wastewater, but at this point it hasn't become competitive with other COVID-19 variants, the CDC says.

The concern is that BA.2.86 has more than 30 gene changes compared to its ancestor BA.2. That could mean that the virus has found a way to evolve around immune protections to either become more contagious or cause more [severe illness](#).

Still, the emergence of new variants isn't on its own cause for alarm, Adalja said.

"There will always be new variants emerging—that's how evolution works in an efficiently spreading respiratory virus," Adalja said.

"Increasingly, the virus has lost the ability to cause severe disease due to the levels of immunity in the population, coupled with antiviral therapy."

However, waning immunity might also play a role in the latest surge, the experts said. Many people either haven't gotten all the recommended COVID vaccinations or have not been infected recently.

Only 28% of adults 18 and older are completely up-to-date with their COVID shots, the CDC says.

## **New booster shot should help**

"We have not been very vaccine-friendly. We've been vaccine-indifferent recently. And I think we would be well advised to gin up our energy and reach out and get these vaccines, both the flu and the COVID booster, this fall," Schaffner said.

Luckily, a new vaccine booster will be available by the fall, along with an announcement of who should get it, experts said.

"Given it is expected to be a better match for circulating strains of the virus, I would recommend waiting for that vaccine," Gordon said.

But there are some cases in which someone might want to go ahead and get the booster that's now available, if they haven't already, Schaffner added.

"If I were a 72-year-old with some [high blood pressure](#) and diabetes and a bit overweight and I haven't gotten the current booster and I'm going on a trip to visit my relatives next week, I would get the current booster and then again in October get the new one," Schaffner said.

"Many other people might choose to be cautious now and when the booster becomes available, take advantage of it," Schaffner added. "But that has a lot to do with how prevention-oriented you are."

So is it time to pull a mask out of whatever drawer it lies in, and put it to use? Again, that depends on the risk COVID-19 poses to a person and those closest to them.

"It all depends on each individual person's risk tolerance. Masking behavior is not one-size-fits-all," Adalja said.

Some places can be expected to adopt masking every cold and flu season, like hospitals and medical clinics, Gordon said.

And people who are at high risk, particularly those with [chronic conditions](#), might want to avoid getting into enclosed spaces with lots of people and pull their masks out of retirement, Schaffner said. "We have to give this virus its due respect. We have to note that it is a nasty virus. It can put healthy people and particularly people in high-risk groups into the hospital still, and make them seriously ill."

**More information:** Yale School of Medicine has more about the [Eris variant](#).

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