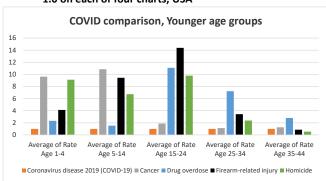
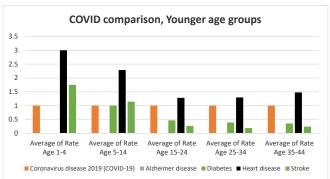
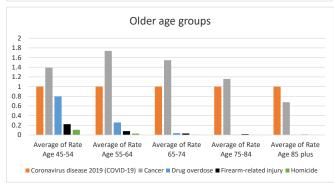
#### Common causes of death, normalized to COVID. Pre-Covid: 1Q2017 thru 1Q2020, Post-Covid 2Q2020 thru 1Q2021, USA

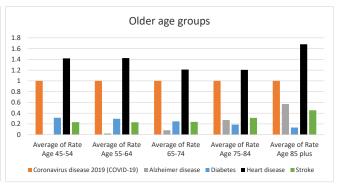


# Relative effect of COVID on various age groups, and compared to cause of death. These are all relative to COVID, which is 1.0 on each of four charts, USA

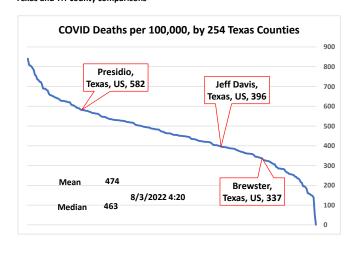


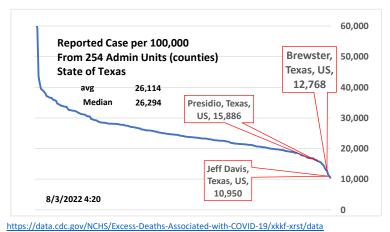


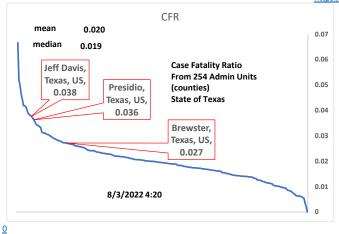


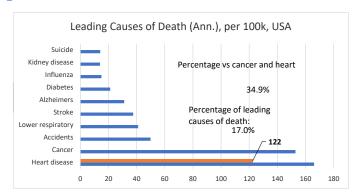


## Texas and Tri-county comparisons



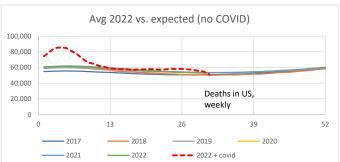


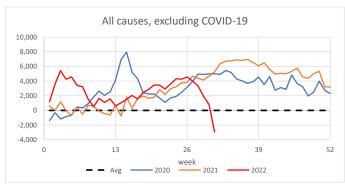


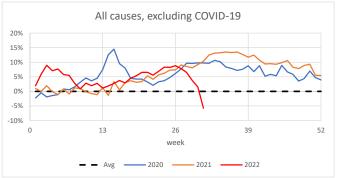


#### Average and Excess Deaths:









#### Provisional COVID-19 Death Counts by Sex, Age, and State 300,000 rsq = 0.993,000,000 250,000 2,500,000 200,000 2,000,000 10-Aug-22 of COVID-150.000 1,500,000 100.000 1.000.000 50,000 500.000 Under 1-4 5-14 15-24 25-34 35-44 45-54 55-64 50-64 65-74 75-84 85 1 year years and over Since 2020, ☐ Sum of COVID-19 Deaths ☐ Sum of Total Deaths inclusive

	Under 65 Over 65			
All	26.0%	74.0%		
COVID-19	25.5%	74.5%		

#### Conditions Contributing to COVID-19 Deaths, by State and Age, Provisional 2020-2022

This dataset shows health conditions and contributing causes mentioned in conjunction with deaths involving coronavirus disease 2019 (COVID-19) by age group and jurisdiction of occurrence. 2020-2022 data are provisional.

#### **False Positives Demonstration**

t

Use 0.19% as estimated daily incidence

Prevalence estimated as avg. infected period of 2 weeks X incidence

revalence estimated as a grant medical period of 2 weeks x modernee					
95%	95% accuracy of test			0.19% X 14 = 2.660%	
	Positive	Negative		<u>Sensitivity</u>	
test pos	2.527%	4.867%	7.39%	Probability of detection	
test neg	0.133%	92.473%	92.61%	where condition exists	
	2.660%	97.340%	100.00%	True + / (True + & False -)	
				95%	
False pos. is more than	half of total	positives.		Specificity	
TRUE +	2.527%/7.3	19%	34.2%	Probability of not detecting where	
FALSE +	4.867%/7.3	19%	65.8%	condition doesn't exist	
Total			100.00%	True - / (True - & False +)	
				95%	

Example only; sensitivity and specifity not necessarily equal.

### USA Excess Deaths, 2020 (from CDC data):

Annualized on 52 weeks			
	All Cause	All Cause, excl. CV19	CV19
3 yr average before 2020	859:100,000	859:100,000	-
2020	1016:100,000	905:100,000	-
Diff.	157:100,000	46:100,000	111:100,000

29% of All-Cause excess deaths are non-CV19

#### USA Excess Deaths, 2021 (from CDC data):

Annualized on 52 weeks			
	All Cause	All Cause, excl. CV19	CV19
3 yr average before 2020	859:100,000	859:100,000	-
2021	1052:100,000	909:100,000	-
Diff.	193:100,000	50:100,000	143:100,000

26% of All-Cause excess deaths are non-CV19

#### USA Excess Deaths to date (2022, from CDC data):

	esh Excess Deutils to dute (2022) from eDe duta).				
	Week 31	All Cause	All Cause, excl. CV19	CV19	
3	yr average before 2020	518:100,000	518:100,000	-	
	2022	600:100,000	541:100,000	-	
	Diff.	82:100.000	23:100.000	59:100.000	

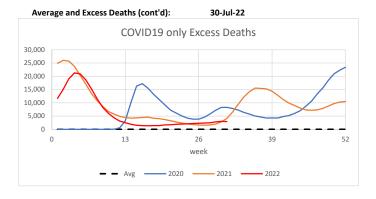
Linear Year Projection

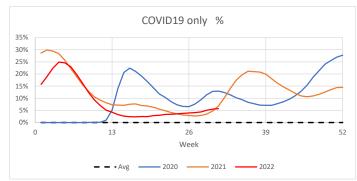
28% of All-Cause excess deaths not CV19

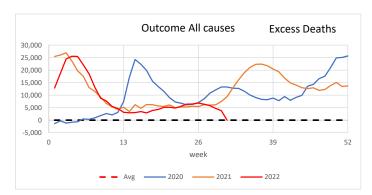
99:100,000

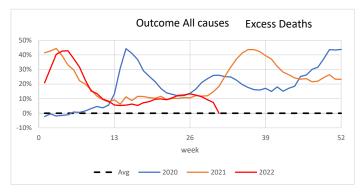
https://data.cdc.gov/NCHS/Excess-Deaths-Associated-with-COVID-19/xkkf-xrst/data

Total, latest update	432:100,000	119:100,000	313:100,000
Annualized	168:100,000	46:100,000	122:100,000





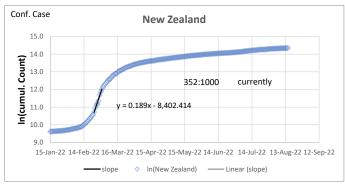


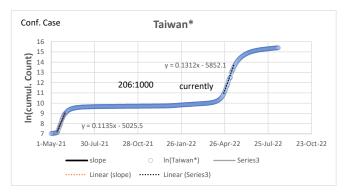


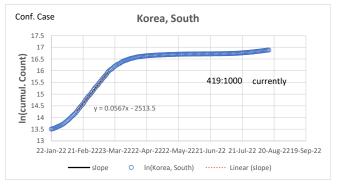
(CDC started updating this again 02 July 2022)

Data in recent weeks are incomplete. Only 60% of death records are submitted to NCHS within 10 days of the date of death, and completeness varies by jurisdiction. Data are not weighted and counts are likely underreported.

### Recent exponential growth examples:







#### Vaccinations and cumulative outcomes:



(Feb 2021 picked because that's about when vaccines became available)



https://healthdata.gov/Health/COVID-19-Community-Profile-Report/gaxm-d9w9
https://github.com/CSSEGISandData/COVID-19/blob/master/csse covid 19 daily reports us/03-29-2022.csv