COVID Model Projections

October 27, 2021

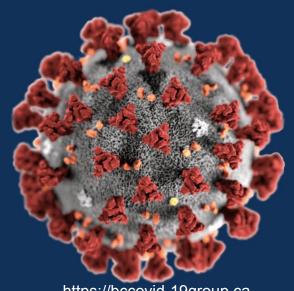
BC COVID-19 Modelling Group



About BC COVID-19 Modelling Group

The BC COVID-19 Modelling Group works on rapid response modelling of the COVID-19 pandemic, with a special focus on British Columbia and Canada.

The interdisciplinary group, working independently from Government, includes experts in epidemiology, mathematics, and data analysis from UBC, SFU, UVic, and the private sector, with support from the <u>Pacific Institute for</u> the Mathematical Sciences.



https://bccovid-19group.ca

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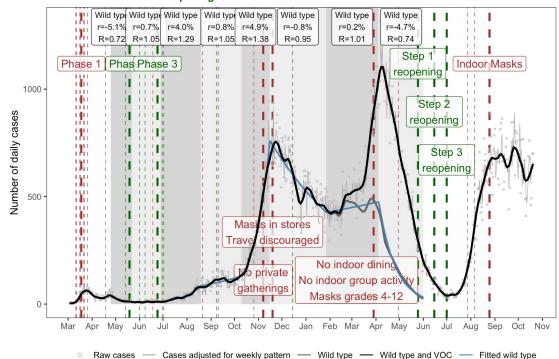
Independent and freely offered advice, using a diversity of modelling approaches.

Overview

- State of the pandemic in BC
 - Case rates are slowly declining, currently at around 600 cases per day.
- Cases among children
 - Dramatic rise in case rate among <12 year olds has reversed.
 - o Incidence remains slightly higher among <12 year olds across the province.
- Hospitalizations and ICU
- Vaccination and its impact
- Vaccine uptake
- Situation has improved in Alberta and Saskatchewan
- Most European nations are experiencing a fall resurgence.

Covid-19 daily new cases in British Columbia (up to Wed Oct 20)

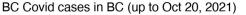
Timeline of **closure** and **reopening** events

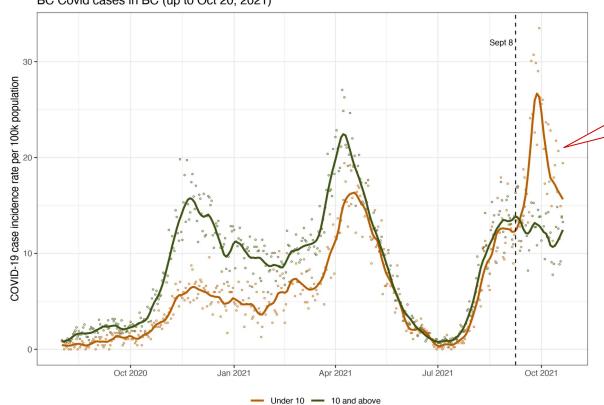


Indoor masking and localized measures in regions with high case counts (Interior and Northern Health Authorities) stabilized cases through September.

MountainMath, Data: BCCDC

Source (J. von Bergmann) Case data from BC COVID-19 Database (http://www.bccdc.ca/health-info/diseases-conditions/covid-19/data). Vertical lines give dates of public health measures (major as thick lines, minor as thin lines). Grey dots are raw case counts, grey lines is cases abused for weekly pattern, black STL trend line and blue fitted periods of constant exponential growth. *Central Okanagan – July 29: masks, August 6: restrictions on group gatherings; <a href="https://lines.com/lines





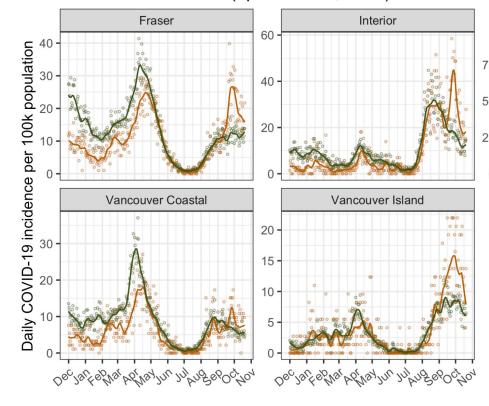
Rapid rise in <10 cases has largely reversed.

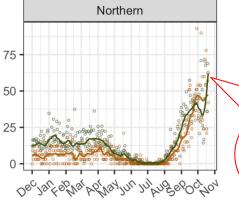
The rapid rise and fall in cases in this age group suggest more contacts at the end of summer & beginning of the school year, stabilizing afterwards.

Testing also increased, but whether increased testing was a cause or consequence of higher case rates is unclear.

MountainMath, Data: BCCDC

BC COVID-19 cases (up to Oct 20, 2021)

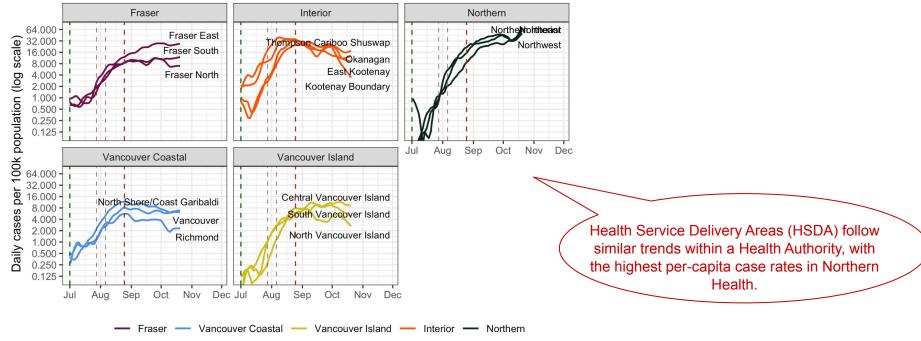




Incidence among children <10 is now similar to or slightly higher than other ages, across all HA.

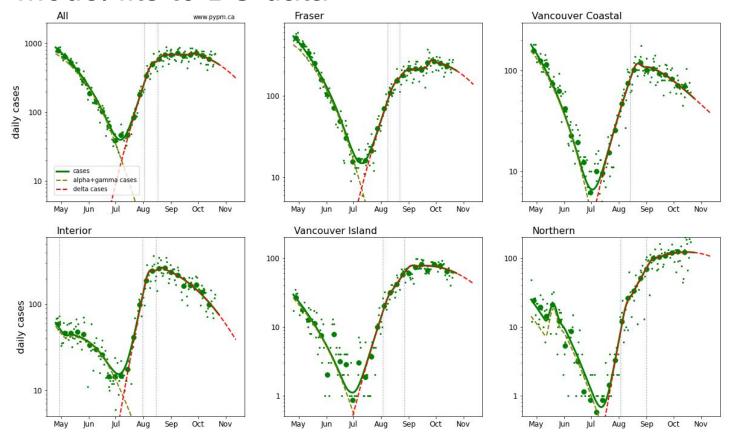
Earlier in the year, children under 10 tended to have a much lower incidence of COVID-19 (roughly half the case rate), but their unvaccinated status is placing them at higher risk of COVID-19 relative to older and more vaccinated age groups.

Covid-19 daily new cases trend lines in British Columbia (up to Wed Oct 20) Timeline of closure and reopening events



MountainMath, Data: BCCDC, BC Stats

Model fits to BC data



The measures taken in August and the public's response significantly reduced transmission.

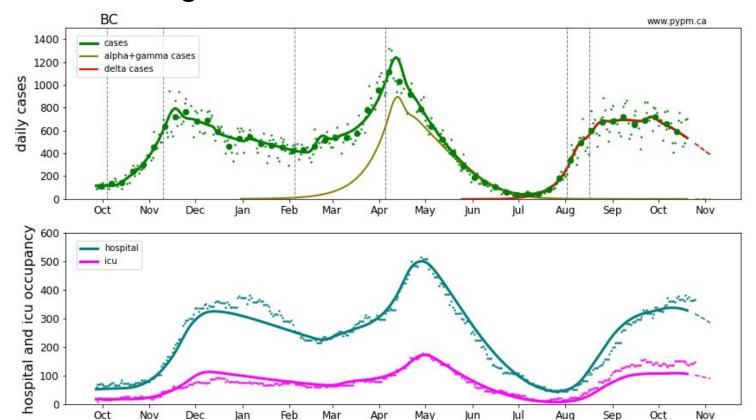
Cases in BC overall are currently declining at a rate of 2% per day.

Strongest declines are in Interior, Fraser, and Vancouver Coastal.

Fraser HA model indicates a burst of infections in early September.

Source (D. Karlen). See www.pypm.ca. These models have no age structure. Fits include past vaccination schedule. Seasonal effects, such as the increased transmission in Fall 2020, or the appearance of new variants may increase growth, additional vaccinations beyond current rates of vaccination would bring growth rates down. Vertical lines show fitted dates for transmission rate changes. The larger dots show weekly averages.

Estimating demands on health care



The COVID-19 pandemic is tracked using positive tests (cases), yielding an infection model (green curve).

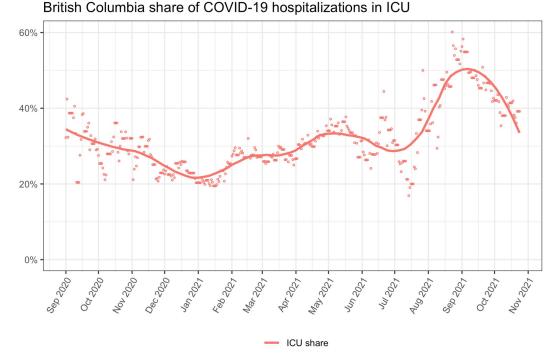
The infection model well describes past hospital occupancy.

Recent hospital and ICU occupancies exceed projections calibrated by data from the third wave.

Hospital and ICU occupancy over time

Of those patients in hospital, the recent increase of the fraction in ICU has stabilized and reverted.

Although many factors may contribute, the Delta variant that now predominates (98% of BC cases) has been found to be more severe in other jurisdictions*.



Data: BCCDC for cases, Canada Covid-19 tracker for hospital and ICU census

Source (J. von Bergmann) Case data from BC COVID-19 Database (http://www.bccdc.ca/health-info/diseases-conditions/covid-19/data). STL trend lines on linear scale. *Singapore study found that Delta was 4.9 times more likely to lead to an oxygen requirement, ICU admission, or death among unvaccinated hospitalized patients; see overview of Delta severity in CBC article.

Fully vaccinated October 16th
Fully vaccinated October 9th

Fully vaccinated October 2nd

Partially vaccinated October 16th

Partially vaccinated October 9th

Partially vaccinated October 2nd

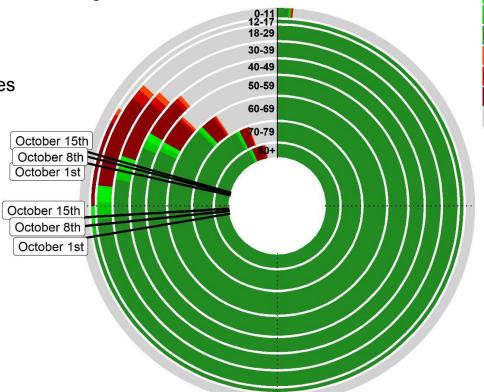
Unvaccinated

Closing the circle: Vaccination status by age

October 22nd update includes data through October 16th, 2021

Slowing progress:

The fraction of BC's entire population with one or two doses is rising, but slowly (0.3% and 0.7% increase over the past week, respectively).



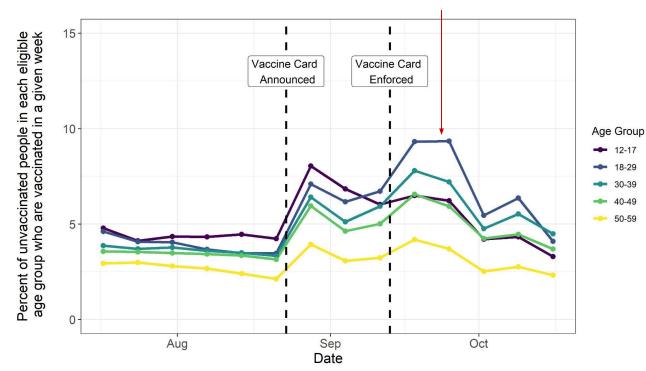
Slow movement on vaccinations in BC

Slowing progress:

Both the announcement and the enforcement of BC's vaccine card boosted the rate of vaccinations among the unvaccinated.

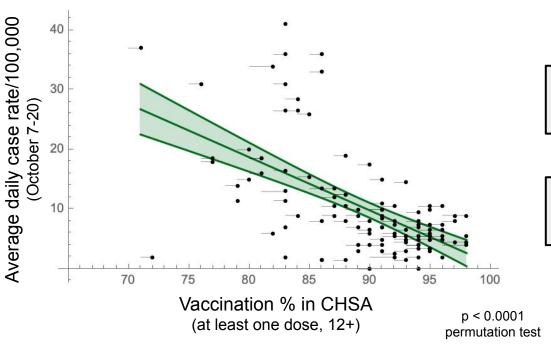
At current numbers of first dose vaccinations per week, it would take ~5 weeks to vaccinate 90% of the 18-29 age group and ~9 weeks for the 50-59 age group.

Percent of those still eligible for a first dose who are vaccinated in a given week



A pandemic of the unvaccinated: Communities at risk

We continue to see a major effect of vaccination levels across Community Health Service Areas (CHSA). For the most recent two-weeks of cases, communities with 95% of eligible people vaccinated have **4.3 times** fewer COVID-19 cases than those with 75% vaccination.

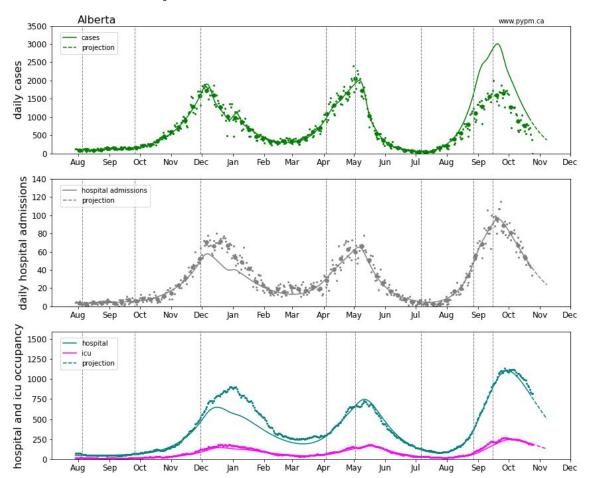


Thin lines show vaccination progress over the past two weeks.

Vaccinations protect communities, as well as protecting individuals.

http://www.getvaccinated.gov.bc.ca

Alberta update



Fits hospital admission data (grey) rather than case data.

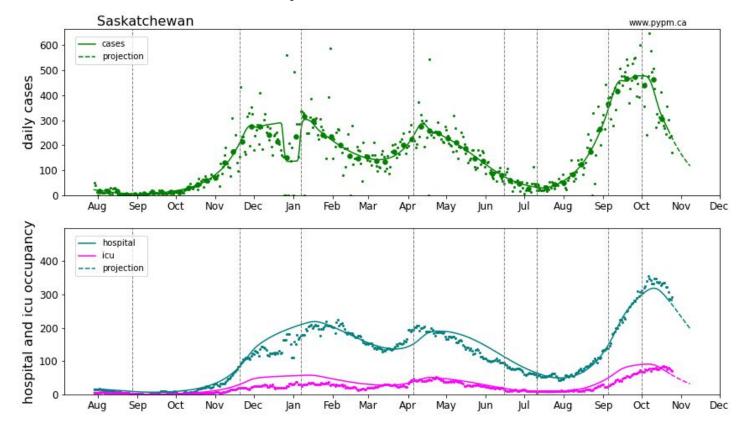
The previous report showed that case rates could no longer be relied upon to track infection rates, likely due to changes in testing practice. Hospital admission data indicated a significant reversal in growth, coinciding with measures announced on September 15.

Data from past 3 weeks confirms the turnaround.

Analysis indicates that many more infections have gone undetected since August.

Source (D. Karlen): COVID-19 Alberta Statistics, www.pvpm.ca

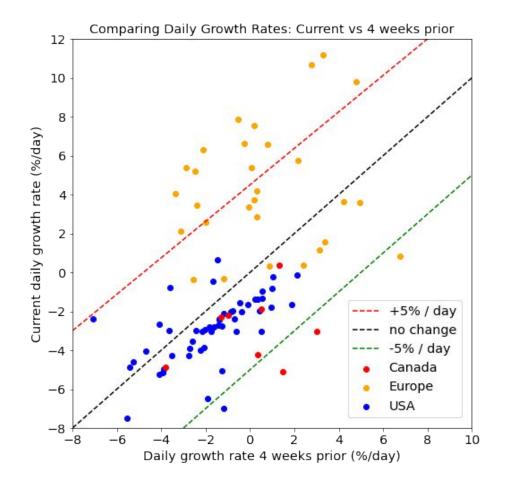
Saskatchewan update



The rapid growth in infections in August has been reversed.

Hospital occupancy is declining, as projected from the case history.

Recent trends in Canada, USA, and Europe



Over the past 4 weeks, growth rates have reduced in all Provinces and most US states.

 The daily growth rates are now typically about 2%/day less than they were a month ago, consistent with the effect of increasing immunity of the populations.

In the past few weeks, most European countries have seen dramatic increases in growth rates.

- Cases now growing 5%/day (or more) faster than they were a month ago.
- This could be due in part to seasonal changes in behaviour.
- Serves as a warning that the situation in BC could take a turn for the worse.

Key messages

State of the pandemic:

- The COVID-19 pandemic is largely stable in BC, with a slow predicted decline rate of 2% per day
- Measures in effect are preventing cases from growing but at a high daily case rate, with an average of 628 daily cases in October (averaging 500-700 daily cases in October)
- 6 at a high in at a high case stabilized
- Whistabilized through September due to masking, other public health measures and vaccination.
- Cases in children rose steeply in Fraser Health, Interior Health and Vancouver Island.
- ICU demand remains near peak levels, but hospital and ICU occupancy have begun to stabilize.
- A new analysis reveals that the number of tests performed is a multiple of the number of cases plus a constant background number. The multiplicative factor differs by Health Authority.
- Recent testing rates in ages 0-4 are higher than expected given the number of cases.

Vaccination:

- Vaccine uptake continues but at a low rate.
- Areas with high vaccination levels have lower case numbers.
- Children account for nearly 50% of the unvaccinated and are seeing rising case numbers in some health authorities in BC. Changes in transmission in children affect the cases' growth rate more than changes in other groups, because children are less vaccinated and have high contacts.
- Vaccinating children 5-11 is likely to bring benefits to children if the Pfizer vaccine is approved.
- This would have both direct benefits to children, and indirect benefits to adults.