## THE HEALTHIER TEXAS SUMMIT SERIES

Presented by Blue Cross Blue Shield of Texas

August 25 at 10 am

## State of COVID-19 Across Texas



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### What is COVID 19?

- ► COVID-19 is caused by a new coronavirus. The SARS-CoV-2 virus is a betacoronavirus, like MERS-CoV and SARS-CoV. All three of these viruses have their origins in bats (animal to person spread)
- Person to person spread:
  - ▶ Between people who are in close contact with one another (within about 6 feet).
  - ► Through respiratory droplets produced when an infected person coughs, sneezes or talks.
  - ► These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
  - ► Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

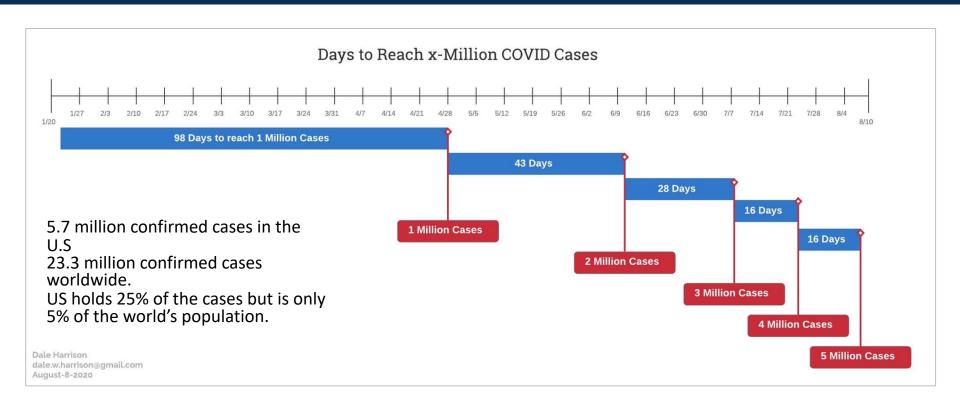
Source: Centers for Disease Control and Prevention at <a href="https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/summary.html">https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/summary.html</a>

### Symptoms of COVID 19

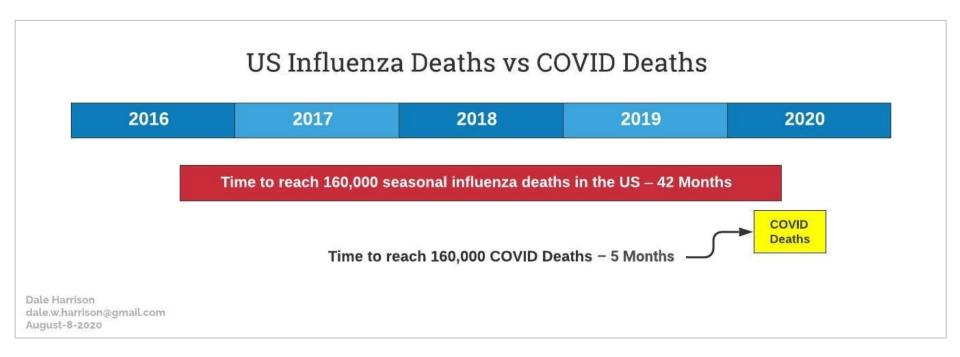
- ▶ Fever
- Cough
- Shortness of breath or difficulty breathing
- ► Chills
- Repeated shaking with chills

- ► Muscle pain
- ► Headache
- Sore throat
- New loss of taste or smell

### How long has it taken us to get here?



### COVID-19 and Influenza



### STATE OF COVID-19 IN TEXAS

- CURRENT STATE
  - COVID-19 Dashboard
  - Hot Spots, Rate of Transmission
  - Hospital Capacity

- ▶ SURVEILLANCE
  - Symptom Tracking

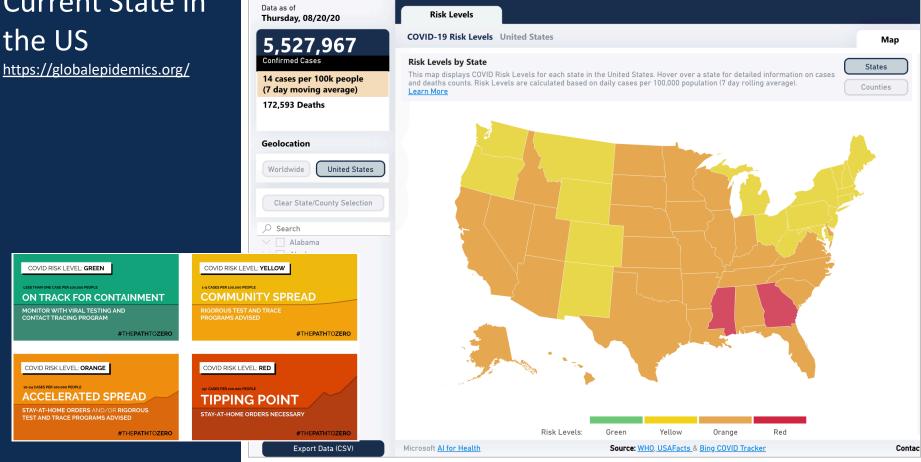
- UPCOMING CHALLENGES
  - Re-opening schools
  - ▶ Flu and COVID-19

- CALL TO ACTION
  - ► Public
  - Public health authorities
  - ► Public health researchers

### **CURRENT STATE OF COVID-19**



### **Current State in** the US

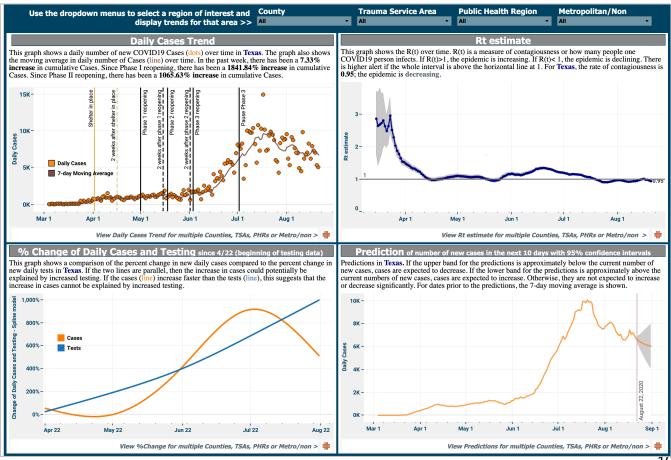


### UTHealth School of Public Health COVID-19 dashboard

- ► Collaborative effort of School of Public Health faculty and students in epidemiology, biostatistics, data sciences, and health promotion.
- ▶ Provides real-time, interactive data analytics to monitor and identify the current hot spots for COVID cases and symptoms in the state of Texas, including prediction models to assess future risk of spread.
- Provides interpretation of the findings to help public health decision making and educate the public.
- ► We will continue to build on the dashboard to house and display relevant public health resources, thus effectively informing strategic decision-making to mitigate the spread

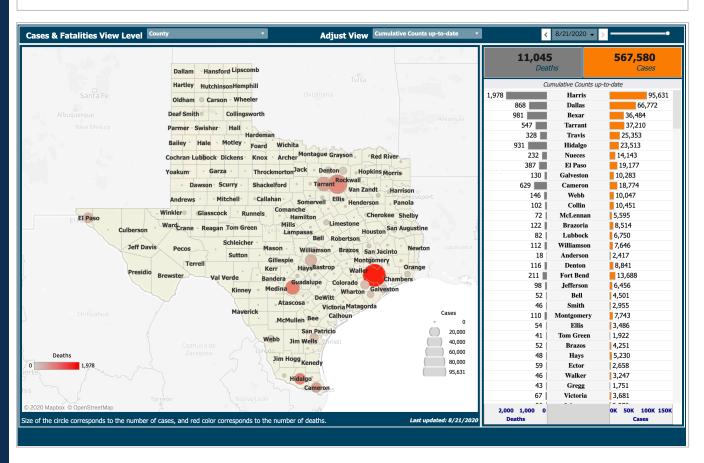
# Critical trends: Current Level of Viral Transmission (Aug 23)

#### www.texaspandemic.org



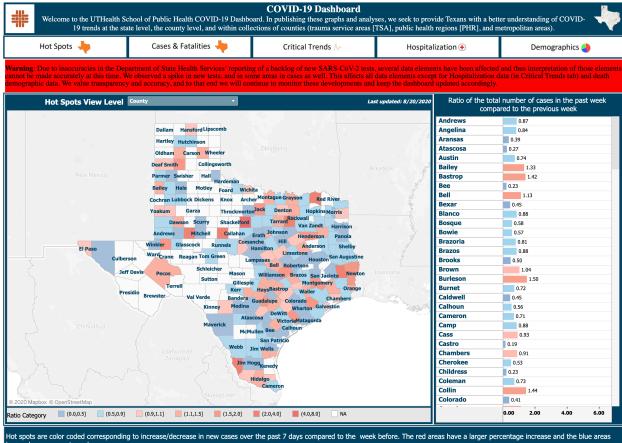
# Cases and Fatalities (Aug 23)

#### www.texaspandemic.org



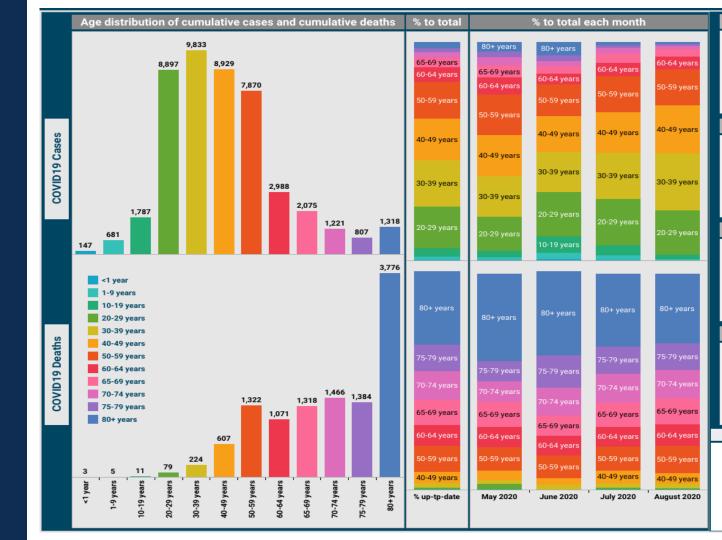
### Hot spots in Texas

#### www.texaspandemic.org

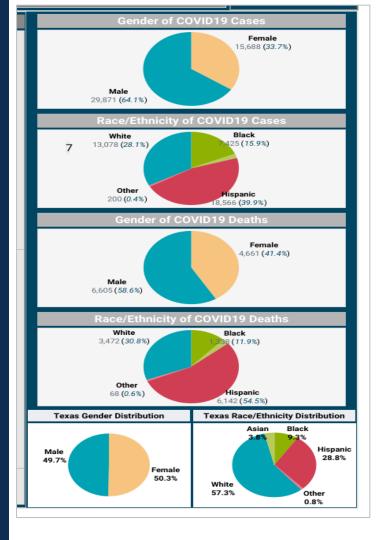


have a larger percentage decrease.

Demographics of cases and fatalities: only 8% of case demographic data available; 100% case demographics for deaths



# Case and death demographics



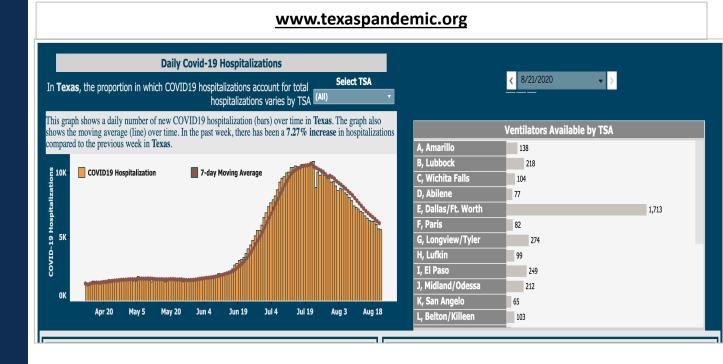
Males, Hispanics at greatest risk.

### **HOSPITAL CAPACITY**

Surge after Phase 1 re-opening

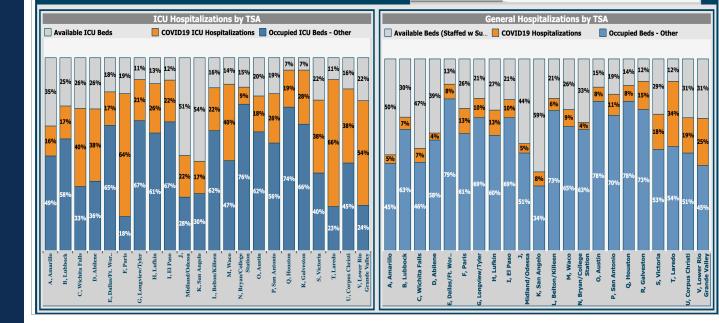


Hospital
Capacity:
7 day moving
average of
hospitalizations
and Ventilator
capacity



Hospitalizations across Texas increased rapidly after Phase 1 re-openings. Now stabilizing, albeit at levels still higher than those prior to re-opening

Hospital capacity by Trauma Service Area



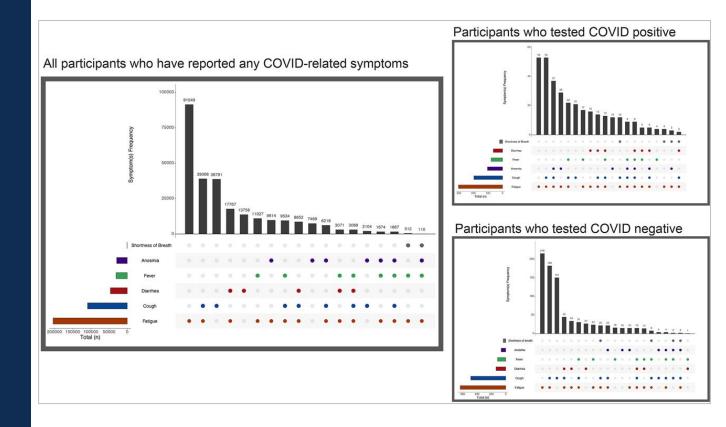
### SURVEILLANCE



# COVID 19 Symptom Tracking – Why?

- ► There is an urgent need to capture in real-time "hot spots" of COVID symptoms among people to anticipate potential increases in community transmission
- ► This is critical because of:
  - ▶ the novelty of the virus
  - ▶ the speed at which the virus spreads between contacts
  - Existing surveillance for flu-like symptoms based on health care utilization is inconsistent
- ► Useful because "hot spots" of symptoms occur almost 5-7 days prior to COVID infections (Drew et al., Science, 2020)
- ► We have an app that you can implement as part of "reopening safely" strategy.

The symptoms tracked through the app predicted COVID cases 5 to 7 days ahead of diagnosis



## COVID 19 Symptom Tracker App



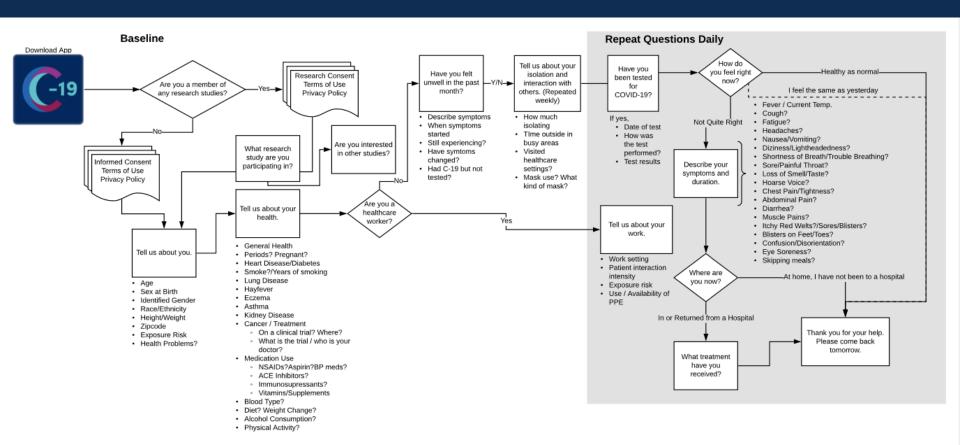
## -19 COVID Symptom Tracker

- ► Easy to use, free, secure app to track COVID 19 symptoms. Takes 1-3 minutes to complete. Includes informed consent (IRB approved). UTHealth will analyze de-identified data for Texas.
- Can be downloaded in the App store on the iphone or get it on Google Play
- ► For Apple: <a href="https://apps.apple.com/us/app/covid-symptom-tracker/id1503529611?ls=1">https://apps.apple.com/us/app/covid-symptom-tracker/id1503529611?ls=1</a>
- ► ForAndroid/Google: <a href="https://play.google.com/store/apps/">https://play.google.com/store/apps/</a> details?id=com.joinzoe.covid zoe

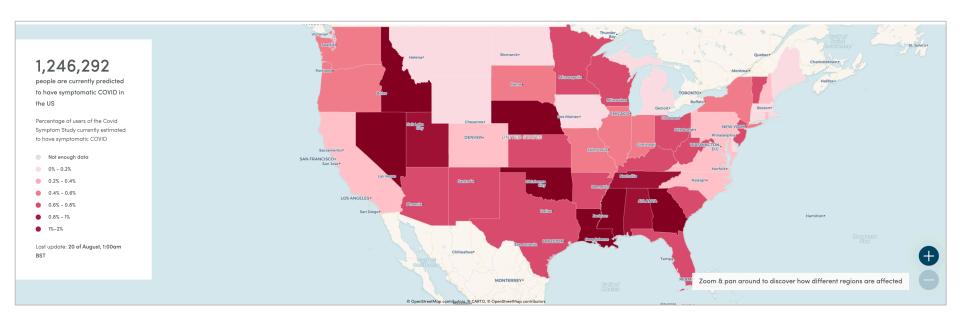
# COVID 19 Symptom Tracking – How?

- Families <u>use the app daily</u> to record symptoms for all family members, <u>even</u> if they are well.
- Increased symptomatic activity for consecutive days indicate potential increase in COVID
  - Aggregate data available at zip code, city, county level
- If many people in a zip code report increasing levels of symptoms, schools and businesses in these areas could use this information to implement additional mitigation strategies.
- ► For more information go to: <a href="https://go.uth.edu/COVIDtracker">https://go.uth.edu/COVIDtracker</a> or contact: Drs. Shreela Sharma and Bijal Bala at <a href="mailto:Shreela.V.Sharma@uth.tmc.edu">Shreela.V.Sharma@uth.tmc.edu</a> and <a href="mailto:Bijal.A.Balasubramanian@uth.tmc.edu">Bijal.A.Balasubramanian@uth.tmc.edu</a>

### **COVID Symptom App Flow Diagram**

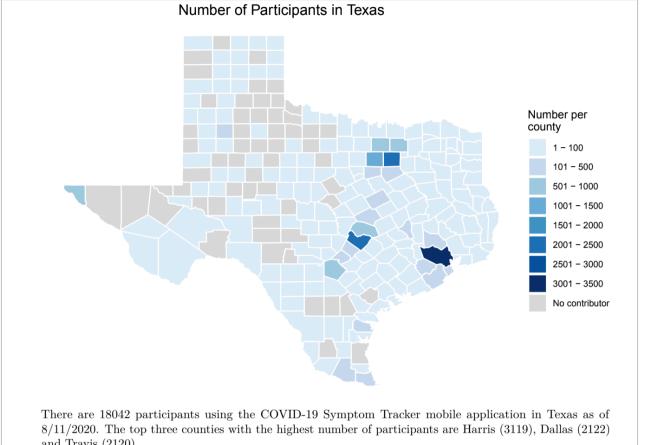


# Symptomatic COVID amongst over a million US users - the largest community monitoring of COVID in the world.



## **COVID** Symptom App Texas Users

18,042 users 64% women 14% Hispanic 3.5% Black

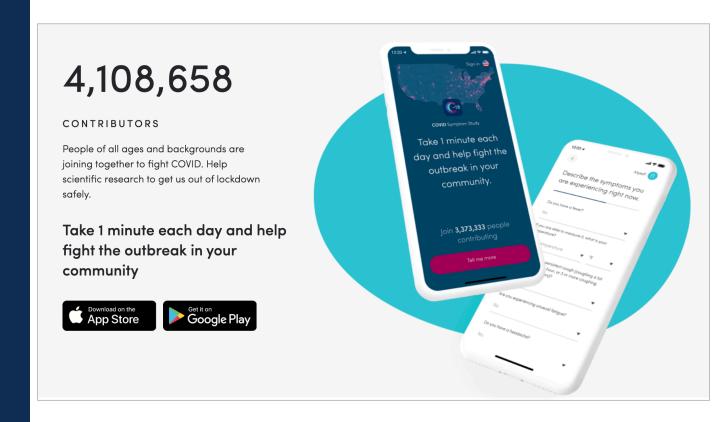


and Travis (2120).

## Challenges of Symptom Surveillance

- Challenges
  - Need rapid uptake of the app
  - Need representative populations
  - ▶ Need penetration within a zip code/region
- Strategies to Address Challenges
  - ► Leverage school networks
  - Leverage high school students to motivate families
  - ► Get buy in/participation of local health systems

## Citizen Science Approach



### UPCOMING CHALLENGES



# Re-opening Schools

- ► The number and rate of cases in children in the United States have been steadily increasing from March to July 2020
- ~ 2,600 kids under age 19 years known to be positive for coronavirus
- ► Additional up to 45% could be asymptomatic but infected and transmit to others per other studies
- ► Rate of symptomatic infection increases with increasing age of the child. Middle and high schoolers seem to have a higher likelihood of being infected and symptomatic

# Until a COVID-19 vaccine or treatment is available, prevention and mitigation will be necessary

- 1. Rule of Law: Watch for executive orders at Federal, State, and County levels
- 2. Rule of Science: Watch the 7 to 14 day moving average reductions in cases and deaths per 1000/day AND (with sufficient testing) new cases (incidence rates)
- 3. Rule of Place: Don't permit exposure
  - ► Super spreading <u>people</u>:
    - Symptom screening, testing, contact tracing
    - Physical distancing, quarantine, recovery confirmation
  - ► Super spreading <u>environments</u>:
    - High density, high contact, high traffic
    - Surface and touchpoint cleaning and disinfection (see CDC guidance)
    - Passing objects (books, paper & pens, folders, toys, sports equipment, etc)

## Planned response for school exposure/outbreaks that address closures, furloughs, cleaning, and disinfection

- 4. Rule of People: Strengthen training in personal protection actions
  - ► Encourage recommended sleep, Turn down the anxiety/stress
  - ► Ensure up to date vaccinations (including flu shot)
  - ► Social distance: with 6-foot bubbles, floor markings, desk arrangements
  - ▶ Hand washing & sanitizer stations in all rooms; Stock bathroom with soap/ & towels
  - ► Up-to-date PPE for staff; masks
- 5. Rule of Policy: Controls must be designed, implemented, monitored, and adapted
  - ▶ Distance learning, non-punitive sick/stay at home policies
  - Coordination between employer/schools, health care, and public health systems in the community
  - Maintain transparent communication between stakeholders parents, faculty and staff, health care, and public health

### Flu and COVID-19

- ► Flu season is around the corner
- ▶ Double whammy

Flu	COVID-19
Transmitted via respiratory droplets	Transmitted via respiratory droplets
Symptoms like COVID, peak 2-7 days	Symptoms like flu, peak 2-3 weeks
	Much more contagious than flu
Low fatality rate	Higher fatality rate
High risk for kids	Lower risk among kids
Vaccine and treatments available	No vaccine
Rapid, reliable test available	Inconsistent testing

### CALL TO ACTION



### Collective Responsibility

- Public
  - Wear masks
  - Physical distancing
  - Reduce movement outside the house as much as possible
  - Get vaccinated for the flu

- Public Health Authorities
  - Accurate and timely data on cases, deaths, TPR, hospitalizations at county level
  - Ramp up testing and contact tracing
  - Measure and report by race/ethnicity

- Public Health Researchers
  - Identify, implement, and evaluate strategies to:
    - Prevent spread
    - Monitor spread
    - Mitigate spread
  - Work closely with local and state public health officials

To summarize, thus far we have been playing catch up with COVID-19.

But now we need to get ahead of it. So that we can,

Detect early

Prevent the spread

Monitor over time

Make data-driven decisions for policy and planning

Prioritize – E.g. Opening schools over bars