Letter to the Community: June 18, 2021

Hello Thurston County! We are continuing to see our community COVID-19 transmission rates gradually decline. Today our transmission rates are 102.1 cases per 100K over 14 days per the <u>Risk Assessment</u> <u>Dashboard</u>. I received several questions this week, so let's dive right in and get started.

If 51.8% of eligible people in Thurston County are fully vaccinated, where is COVID-19 transmission happening? Is our county too open? Are unvaccinated people letting down their guard too much? Or are these cases happening in congregate settings or private homes and gatherings?

Recently, we have seen significant transmission within households, workplaces and between people who are close contacts of a person with COVID-19 (less than six feet for a cumulative 15 minutes or more over 24 hours). The vast majority of these new cases were not fully vaccinated (two weeks after completion of a COVID-19 series). Most individuals seeking testing in this past week reported they got tested because either they had COVID-19 symptoms, or a close contact tested positive for COVID-19. A few people reported testing because a close contact had symptoms, or because they were instructed to do so by a health care provider, public health department, or an employer.

What we are seeing is that vaccines are highly effective at preventing COVID-19 illness and transmission. I am recommending that everyone who is eligible to receive a COVID-19 vaccine, get vaccinated. COVID-19 vaccines are available in pharmacies, from health care providers, and throughout the county. Thurston County Public Health and Social Services is holding a vaccination clinic inside the Capital Mall, seven days a week except where noted. If you need to find a COVID-19 vaccine location, please visit: https://vaccinelocator.doh.wa.gov/.

I have a question about contact tracing and what information, if any, is shared beyond affected individuals. For example, if a child in a swim class tested positive for COVID-19, would the public health department notify pools or the public about this route of transmission. Would any changes in pool operation be required?

Great question! When a case is identified the Thurston County Public Health Department asks questions to determine who their close contacts are (less than six feet for a cumulative 15 minutes or more over 24 hours). If a case was in a class or team setting, we contact the facility to determine who else might be identified as a close contact at that site and ascertain what COVID-19 prevention measures are currently being followed. We then call the identified close contacts to let them know they need to quarantine and be tested themselves for COVID-19. If there is evidence of transmission within a group (two or more cases within 14 days with an epidemiological link) we may ask that all members of a group get tested and in certain cases, we may have the group not gather for 14 days to prevent further spread.

Swimming has been designated by the Washington Interscholastic Activities Association (WIAA) as a low contact sport. There is minimal risk when people are in the water. The risk of transmission occurs when people are outside the pool, either congregating at the edge of the pool or in the locker rooms.

What can you tell me about the COVID-19 variants?

On June 15, 2021, the Centers for Disease Control and Prevention (CDC) elevated the B 1.617.2 variant commonly known as the delta variant first identified in India in December 2020 from a variant of interest to a variant of concern due to its increased transmissibility. We are still learning about the impacts of this variant on disease severity. The good news is that there is some evidence that currently

available vaccines are effective in protecting against this variant. You can learn more about a recent study about the efficacy of the Pfizer COVID-19 vaccine against the delta variant here: https://www.nature.com/articles/s41586-021-03693-y.

From May 22, 2021 to June 5, 2021, the CDC estimates that nationwide:

- 65.5% of new cases are caused by the B.1.1.7 variant also known as the UK variant
- 11.6 % by the P.1 variant or Brazil variant
- 9.9% by the B.1.617.2 or the delta variant

For this same time period, in region 10 which includes Washington State along with Alaska, Idaho, and Oregon:

- 61.8% of cases are caused by B.1.1.7
- 18.7% are caused by P1
- 4.5% are caused by B.1.617.2

This information can be found on the CDC website at: <u>https://covid.cdc.gov/covid-data-tracker/#variant-proportions</u>.

In Washington State the most commonly sequenced variant is the B.1.1.7 variant with 54.2% of sequences followed by 16.4% of the P1 or gamma variant and 6 % of sequenced variants are B.1.617. Statewide there is some evidence that the P1 or gamma variant may be associated with increased hospitalizations and vaccine breakthrough infections. This is being closely monitored by the Washington State Department of Health.

We know from the Washington State Department of Health <u>SARS-CoV-2 Sequencing and Variants Report</u> that in Thurston County five variants of concern have been isolated including the B.1.1.7 variant, B.1.351 variant, B.1.427 variant, B.1.429 variant and the P1 variant. No samples with the B.1.617 variant have been isolated in Thurston County residents to date. Throughout the county and throughout the state, we are seeing more highly transmissible strains of COVID-19, so it essential that you continue to take precautions. The most proactive thing you can do is get vaccinated! If you have not yet been vaccinated, continue to wear a mask in indoor public spaces and maintain six feet or more of distance between yourself and non-household members.

Thank you for your questions this week. If you have a public health question that you would like answered please email <u>tcphss.pio@co.thurston.wa.us</u>.

Wishing you the best of health,

Dimyana Abdelmalek, MD. MPH Health Officer, Thurston County