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**COVID
IS NOT
OVER**

BY THE PEOPLE'S HEALTH EDUCATION PROGRAM

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easy. It demands no accountability for the ways those have rejected fact and reason. Yet there are people in your lives who have never stopped following safety guidelines, wearing a mask, and protecting their health and your health. **We want to see you alive in 30 years.** We want to see you persist in the struggle. We want to see you resist the nihilistic acceptance of illness, death and constant grief as the standard of life. We can only live on to fight another day if we're able to protect the health and safety of oppressed people everywhere.

Combating liberalism can look like taking a breath and recognizing the ways you've allowed state-sanctioned violence to pervade into your communities. The people will thank you, even if they don't all understand just yet. Solidarity with community can start with putting on a mask in the presence of your loved ones and guide them as to why you have started to care again. And with that first step, we will welcome you back without shame, fold you in, **if you'll have us.**

In revolutionary love and solidarity,

THE PEOPLE'S HEALTH EDUCATION PROGRAM



espouse in order to form false unity and claim diversity. We must remember Mao's assertion that "Liberalism is extremely harmful in a revolutionary collective. It is a corrosive which eats away unity, undermines cohesion, causes apathy and creates dissension." To be in solidarity with your community means duty, sacrifice, and listening to the demands of those most vulnerable among us.

When we can allow ourselves to embrace slowness and take the time to look at the vast landscape of suffering that has been inflicted upon us, we must also acknowledge that our current lifestyles are **antithetical to the future we're working towards.** As Mao Tse-tung wrote in Combat Liberalism, "To see someone harming the interests of the masses and yet not feel indignant, or dissuade or stop him or reason with him, but to allow him to continue" is a type of liberalism.

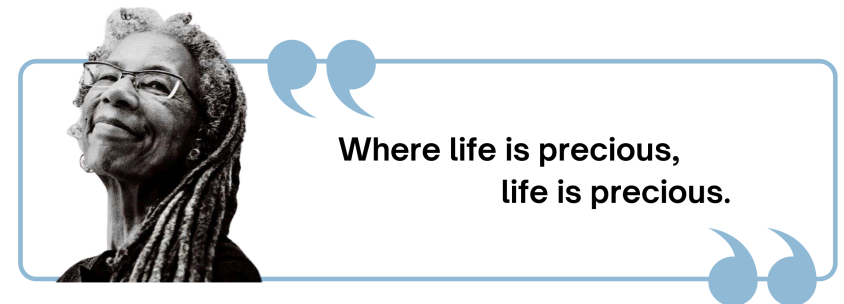
The mass unmasking wave has caused irreparable harm, and we cannot allow that to continue. How can we say we prioritize community care if that care doesn't include the health and safety of vulnerable communities? How do we intend to wage war on capitalist elites if we all grow weak and fatigued from never-ending re-infections?

The eleventh and final principle type of liberalism Mao Tse-tung concluded was "To be aware of one's own mistakes and yet make no attempt to correct them, taking a liberal attitude towards oneself." To allow liberalism to win is

This is a **love letter** to all our friends, comrades, neighbors, lovers, coworkers, family members, and fellow inhabitants of this city we call "new york" (and beyond these imposed borders).

We write this COVID safety guide because **we give a fuck** about the people we share space with.

We write this out of deep love for the people and for life, because as Ruth Wilson Gilmore tells us,



We must treat each other's lives as precious by taking the precautions necessary to keep ourselves and each other safe from COVID, because **the pandemic isn't over.**

In a highly individualistic country where the government has long since abandoned its people for the sake of making profit, where the mainstream narrative has put the onus onto the individual to make a choice—mask or no mask, you do you—we owe it to each other to keep ourselves and one another safe.

We owe it to the youth, our children, and our children's children, who are already inheriting an earth that is actively being killed by capitalists, and who will bear the brunt of both the pandemic and the ever evolving climate crisis, the consequences of which we cannot yet fully see.

We owe it to our elders, who have lived through the HIV epidemic, and to our disabled loved ones, whose lives are seen as **disposable** from the eyes of the state and society.

It has been three years since the COVID-19 pandemic began, and in these three years at least **1.1 million people** in the so-called "united states" have died from the deadly virus. As per a recent study, an estimated 15 to 20 million people have died worldwide.

Hundreds of millions more have developed long COVID, a debilitating chronic illness, the effects of which we simply do not yet fully understand.

It is not a coincidence that we have not been able to collectively mourn the deaths of millions and the disablement of millions more. It is not a coincidence that the public health emergency ended, and shortly after the CDC made recommendations on improving indoor ventilation systems in schools.



of us have seen our communities shrink, grow tired and get sicker. For marginalized people across the world, each day has been doused in distress by the capitalist elites who are waiting for us to **eagerly march into our own coffins.**

Sometimes, there are no words left to say. But, we implore all of us to replace silence with screaming, sobbing, the sounds of grief. We deserve to feel devastated. We deserve to stop pedaling on through labyrinths of productivity and distraction. We deserve time to feel the pain we've been conditioned to fear feeling.

Hope requires grief. If we can't mourn what has been taken from us, **how can we begin to imagine what we can give to each other?** How can we appreciate mourning when this

grief is needless? How do we learn from this mourning when our sorrow is relentless? Mourning in grief requires gentle or sharp release, yet there is no release when our mourning persists. We want grief to be profound and not just a solitary experience we've been forced to adapt to and tolerate. In grief, we can connect to others. Grief remembers joy in our relationships and our humanity, and delivers ourselves to the purpose we live. Everyone deserves not only bare minimum safety, but also joy, depth, and community throughout their lives.

You can make the choice to stop abandoning the communities that you want to have solidarity with. Community is not just a word that liberal institutions

IN CONCLUSION

Liberalism stems from petty-bourgeois selfishness, it places personal interests first and the interests of the revolution second, and this gives rise to ideological, political and organizational liberalism.

Mao Tse-tung



We want to end this zine by forging a space that has often been denied to us and almost demolished altogether by the talons of capitalist productivity.

We need to grieve.

We have lived in a dire health crisis for far too long. Mourning has become a perfunctory ritual expected to take place in the margins of our days. Genocide reduces lives to statistics for us to inhale without complication; yet, so many

The state wants everyone to forget the trauma of early 2020, when the majority of people stayed at home while essential workers worked in person. It is to their benefit that we all forget and go back to business as usual, but **we refuse to forget** the lives of those who could have been saved if the government had responded appropriately to the global health emergency.

We refuse to accept the genocidal violence of organized abandonment and systemic neglect. We refuse to abandon our fellow human beings during a mass disabling event, because **no one is disposable.**

The very same government that tells us that COVID is over is the same one that created the conditions under which Jordan Neely was murdered. It's the same one that has done nothing for Flint, Michigan, which has not had clean water for the last 9 years.

This is the same government that spends tax dollars on the military and policing/surveillance instead of investing in public housing, free healthcare, public access to healthy food and clean water, access to green space and clean air, access to a good education, etc. This is the same government that wants to house migrants on Rikers island instead of giving them actual houses.

ALL POWER TO THE PEOPLE!

We must expose the government's inactions to protect the people from COVID-19 as extractive abandonment—purposefully leaving us scrambling for basic resources necessary for survival, so that when we inevitably become sicker and sicker the healthcare industry can profit off our disabled bodies.

We must recognize our humanity, recognize that a better world is possible, and that in order for us to get what we deserve—a life free from the shackles of fascist capitalist imperialism—we must “do what must be done” and do so “by any means necessary.”

If you no longer take COVID precautions or aren't involved in organizing around COVID consciousness, I'd like to leave you with a final question: if we don't trust the government because they surveil, impoverish, kill, and imprison us, why are we trusting them when they say that the pandemic is over?

Reina Sultan

This is the same one that knew the dangerous effects of climate change yet did nothing but support the fossil fuel industry. This is the same one that is attacking our right to safe abortions and waging a war against trans people. The state is already slowly killing us in so many insidious ways, and we cannot let COVID be another way they kill us. It is up to us to take care of each other, because we are all we have, but



We are all that we need.

The life of a single human being is worth millions of times more than all the property of the richest man on earth.

Che Guevara



This is the money model of disablement—a concept first articulated by Marta Russell—in action. Russel explains that “... persons who do not offer a body which will enhance profitmaking as laborers are used to shore up US capitalism by other means.” This is organized abandonment, a term coined by Ruth Wilson Gilmore, which is “the deliberate manipulation and disproportionate dispossession of resources from Black, Brown, Indigenous, disabled, and poor communities, rendering them more vulnerable to adverse health.”

Disabled people, i.e. people “who are deemed to be surplus[,] are rendered excess by the systems of capitalist production and have been consequently framed as a drain or burden on society. But the surplus population has become an essential component of capitalist society, with many industries built on the maintenance, supervision, surveillance, policing, data extraction, confinement, study, cure, measurement, treatment, extermination, housing, transportation, and care of the surplus. In this way, those discarded as non-valuable life are maintained as a source of extraction and profit for capital.

This rather hypocritical stance—the surplus are at once nothing and everything to capitalism—is an essential contradiction. Liat Ben-Moshe identifies this characteristic through the intersection of disability and incarceration: ‘Surplus populations are spun into gold. Disability is commodified through [a] matrix of incarceration (prisons, hospitals, nursing homes).’ Jasbir Puar, in *The Right to Maim*: ‘Debilitation and the production of disability are in fact biopolitical ends unto themselves... Maiming is a source of value extraction from populations that would otherwise be disposable.’”

THE TRUTH ABOUT COVID

#1: COVID is airborne and spreads like smoke.

It comes in through your respiratory system, but often spreads to other systems in your body. Most people get COVID by breathing in air that contains tiny aerosols that can linger in the air for hours.

COVID has a
5 TO 10X
higher death
rate than
the flu.

#2: COVID is not like the flu.

Although the seasonal flu spreads globally like COVID-19, the mortality rate for the flu is much lower. Multiple reinfections within a season are unlikely for the flu (once you have natural immunity, you won't be re-infected during the same season), whereas you can be re-infected with SARS-CoV-2 since there are so many different variants in circulation and each variant does not necessarily confer immunity to another.

treatments. Biden refuses to risk reinfection because he fully understands the devastating, and potentially deadly, consequences of COVID-19, yet he repealed nationwide COVID safety measures, indicating that these precious COVID resources should only go to the elite, not the general public.

Make no mistake, the policy choices of the Trump and Biden administration have resulted in an immense number of preventable deaths. Their motives had nothing to do with science or safety; it was about pushing people back to in-person work to continue consolidating profit in the hands of the ruling class. Workers were forced into extremely dangerous conditions under threat of losing insurance coverage during a pandemic. Rather than encouraging non-pharmaceutical interventions (such as universal masking and better indoor ventilation) to prevent COVID surges, the government instead is allowing pharmaceutical companies to seize on this opportunity to profit off our illness.

For example, Jeff Zients, the previous White House Coronavirus Coordinator and the current Chief of Staff, was delegated the power to invoke the Defense Production Act. Despite this, he let the market dictate the supply and cost of PPE rather than ramping up production and supplying the people with the necessary equipment. This is a pattern that we have seen in the past and we know this is a tool of the medical industrial complex. The continued worship of the free market has left workers bereft of protective measures, subsequently generating many COVID variants. With each new variant, the protection of outdated immunization lessens.

The bourgeois government is incentivized to allow mass deaths and disablement because the medical industrial complex—pharmaceutical industry, healthcare conglomerates, insurance companies, etc—is just as capable of extracting profit from our disabled bodies as industry is from our labor.

#3: COVID is a vascular disease.

This means that it affects the blood vessels in your body, causing inflammation and damage to the vascular system. This can lead to a range of complications, including blood clots, organ damage, and increased risk of cardiovascular problems. Your vascular system connects all parts of your body, meaning that COVID can harm essentially any system in your body.

#4: COVID continues to kill.

Since the pandemic began, there have been almost 7 million reported COVID-19 deaths worldwide. This is likely an underestimate, as many COVID deaths have gone unreported and uncounted. Estimates taking into account under reporting (using excess death calculations) place the true toll at closer to 15 to 20 million, or even more. Hundreds of people are still dying from COVID every week in the u.s. COVID is a leading cause of death in children and young people.

Globally, 1 person dies of COVID EVERY 3 MINUTES

6

A CRITIQUE OF CAPITALISM

The current administration has been more preoccupied with managing people's perception of the virus than managing the virus itself, echoing their predecessors whom they claim to have delivered us from. Corporate media, which was quick and accurate in criticizing Trump's mishandling of the pandemic, turned a blind eye as COVID-19 cases and deaths rose under Biden. It aided in manufacturing the narrative that we must learn to "live with the virus," and that mask usage, physical distancing, and other public health measures are only for the risk-averse. Not only is this narrative false, it is eugenics in action.

Both Democrats and Republicans are complicit in this violence, because both are mere puppets monopolized by the ruling class.

At the Detroit Auto Show in September 2022, Biden said, "The pandemic is over. We still have a problem with COVID. We're still doing a lotta work on it. It's-- but the pandemic is over. if you notice, no one's wearing masks. Everybody seems to be in pretty good shape." However, his actions spoke to the contrary. When Biden visited Richard Montgomery High School to give a speech, they installed a state of the art ventilation system in the gym.

During a press briefing that took place on July 18, 2023, Press Secretary Karine Jean-Pierre said, "So, as you know, we have testing protocols . . . anytime somebody meets with the President. So I can tell you that anybody who meets with the President does indeed get tested." Despite having access to the best doctors and

#5: COVID is a mass disabling event.

Long COVID is a common outcome after a COVID infection, especially repeat infections, and encompasses various persisting symptoms. You might seem to "recover" from the acute infection and then get sick again. There is no guarantee on when or if people with Long COVID will recover.

#6: Long COVID can affect anyone,

even adults and children without pre-existing conditions—even if vaccinated. The more times you get COVID, the more damage is done and the more at risk you are for serious disease, Long COVID, and death. Long COVID has no cure and is a serious disability affecting millions of people, affecting their quality of life and forcing people out of work.

There is a 1 in 4 chance of getting Long COVID and/or suffering long-term organ damage each time you are infected with COVID. Every week, 25,000 people develop long COVID. 40,000,000 in the u.s. already suffer from long COVID.

**65 MILLION
PEOPLE**

**worldwide
have Long
COVID**

#7: Data on COVID is now unreliable and incomplete.

Governments have cut back on COVID reporting and research for a long time now. This means that we have fewer and fewer comprehensive data sources, especially real-time sources.

Long COVID symptoms include:



- “We must make a distinction between the enemy and ourselves, and we must not adopt an antagonistic stand towards comrades and treat them as we would the enemy. In speaking up, one must have an ardent desire to protect the cause of the people and raise their political consciousness, and there must be no ridiculing or attacking in one’s approach.”
- Consider using anecdotes, asking questions, and including facts you’ve learned from this zine.**

For example, you are at work wearing a mask and a coworker says to you,

“You still wear masks? I thought COVID was over”

You might say,

“COVID isn’t over just because the public health emergency ended—we still see COVID in the wastewater. I still wear a mask because I got COVID & it was awful so I don’t want to get it again. Have you ever gotten COVID?”

If they answer **yes**, you can ask them what their experience was like, and then explain that repeat COVID infections increase the risk for serious complications including problems with the heart, lungs, brain, and all other parts of the body.

Recognize that change takes time, that multiple conversations might be required in order for someone to change their behaviors. Be patient. Give yourself and your comrades/friends /coworkers /neighbors/family members/lovers/grace.

#5

Talk to people about COVID safety.

Have conversations with your loved ones. Grab a comrade and go door to door canvassing in your neighborhood. Print copies of this zine and bring masks to give to your community. Check out the guide “How To Talk To Loved Ones About COVID” available here:



When talking to someone about COVID safety, be sure to meet them where they are and recognize their humanity. Remember that they, like everyone else, have been bombarded with ruling class propaganda that normalizes eugenics so that they can extract profits off our sick bodies. Lead with your heart, and let science guide your talking points.

Consider the following quotes from Mao:

- “Communists must use the democratic method of persuasion and education when working among the laboring people and must on no account resort to commandism or coercion.”
- “Our comrades must understand that ideological remolding involves long-term, patient and painstaking work, and they must not attempt to change people's ideology, which has been shaped over decades of life, by giving a few lectures or by holding a few meetings. Persuasion, not compulsion, is the only way to convince them. Compulsion will never result in convincing them. To try to convince them by force simply won't work. This kind of method is permissible in dealing with the enemy, but absolutely impermissible in dealing with comrades or friends.”

#8: Masks make a difference.

The purpose of masking is to keep the concentration of viral particles in the air low. For this reason, one way masking is not as effective as universal masking. If the concentration of viral particles in the air is high, then one runs a higher risk of infection than if the concentration is low. This is precisely why a masked person is unfortunately still at risk of infection - because people around them are not masking so they are taking in more viral particles.

You can protect yourself and the people around you by masking up. Cloth masks have been found to reduce exposure to respiratory viruses by 60 percent, surgical masks by 76 percent and N95 masks by 99 percent. A mask should cover both your nose and mouth, otherwise, it is not effective.

We know this is a lot of information, and we are grateful that you are taking the time to learn more about individual and collective COVID safety.

Read on to learn about common COVID myths, health impacts, NYC COVID resources, and more!

COVID MYTHS

Have you heard these common COVID myths? We debunk the most pervasive lies about the pandemic below:

"NO ONE IS MASKING ANYMORE"

People are still masking! A 2023 poll found **21% of Americans**

still mask most or all of the time, and 48% are continuing to mask in public on at least some occasions. If you are thinking: "well, I don't see anyone masking!", remember that those with COVID cautious practices often visit public spaces at calculated times in order to avoid crowds. For example, individuals might avoid peak busy hours at the grocery by going right when it opens, or they might not be going to stores altogether due to the high risk nature if they have pre-existing health conditions.

Wearing a medical-grade mask (i.e. KN 95) continues to provide **substantial protection**, even if those around you are unmasked. Spaces without mandated indoor masking put everyone at risk, but particularly folks who are at higher risk.

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#2

Sign the letter from National Nurses United to the CDC and HICPAC

to demand "they fully recognize aerosol transmission of SARS-CoV-2 and other respiratory pathogens."



#3

Check out the Urgency of Equity Toolkit from the People's CDC to advocate for COVID-19 safety in schools.



#4

Do a local mask distribution in your neighborhood.

Distribute this zine along with the masks to help educate your neighbors on the importance of taking COVID precautions. Request free masks from Project N95 here.



Printable version of this zine available here.



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TAKE ACTION

As communists aiming to wage a total revolution, we understand the limitations of legal and legislative advocacy.

Begging our oppressors – the ruling class – to stop oppressing

us can only go so far. Focusing solely on legislative reform limits our potential for real, tangible, transformative change. This strategy can be a starting point for politicizing the masses, but it cannot be the only strategy that we use. It can be a means through which we bring the apolitical masses into the struggle; it can be their introduction to political work, but we cannot stop there– we must build dual power. We must build people power, because the people and the people alone are the motive force in the making of world history. We must use as many tactics and strategies as we can to bring about real change.

#1

Join the campaign to mandate masks in healthcare.



Masks are no longer required in healthcare settings in NY state or anywhere else in the so-called “united states”. Take action today by contacting local and state officials, as well as hospital administrators, to demand that they reinstate a mask mandate. Join the campaign by scanning this code.

This section was heavily inspired by the influential writing of "How to Talk to Your Loved Ones About COVID". Read more here



In 2020, people were very accurately criticizing Trump for saying, "If we stop testing right now, we'd have very few cases". So, unsurprisingly, the dismantling of public testing infrastructure under Biden and the shift to at-home rapid testing has resulted in a **significant undercounting and underreporting** of positive COVID cases and related deaths (including those from Long COVID complications).

While mainstream media has reported on the latest surge (Summer 2023), they aren't typically a reliable source and there have been multiple surges that they haven't reported on. Testing COVID levels in wastewater is now the best remaining measure for assessing COVID risk, and it continues to show **high levels of the virus are widespread**. Staying informed about wastewater data outside of media coverage is one of the best ways to prepare for surges.

"COVID DEATHS AND CASES ARE LOW"

"ONLY HIGH-RISK PEOPLE ARE AFFECTED BY COVID"

Firstly, even if this was true our elderly, high-risk, disabled community members **are not disposable-** their lives are worth protecting and claiming otherwise is a eugenicist stance. It is a myth perpetuated by capitalism which would have us believe a person's worth and relatedly their expendability is predicated on their ability to engage in labor. People currently in excellent health or younger in age are closer to being disabled or high-risk than we have been told to believe.

Secondly, anyone who has had COVID should consider themselves immunocompromised. Fighting off COVID does not strengthen our immune response, because COVID attacks the immune system and impacts its ability to fight off future infections. Our immune systems are weakened **every time we are infected.**

The truth is that many who have died or been disabled by (long) COVID had no previous health concerns. You may be at low risk before your first infection, but repeated re-infection **exponentially increases the risk** of damage to your body. COVID complications include serious harm to the functioning of every organ, including the heart, brain, and GI system.

"I'VE ALREADY GOTTEN COVID AND WAS FINE"

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Visit the following Instagram accounts to learn more about COVID safety and resources beyond NYC:

- Long COVID Justice @longcovidjustice
- COVID Safe Campus @covid safecampus
- Mask Bloc 614 @maskbloc614
- Mask Bloc ABC @maskblocabq
- Mask4Mask Nashville @nashmask4mask
- NJ COVID Safe @njcovid safe
- Masking Appalachia @maskingappalachia
- The People's PPE @peoplesppe
- The People's CDC @peoplescdc
- COVID Isn't Over @covidisntover
- Philly Mask Bloc @phillymaskbloc
- Lost History & COVID Advocacy @lost_history_of_disease
- Strategies for High Impact @highimpactstrategy
- COVID Is Not Over New Hampshire @covidisnotovernh_
- Queer and Trans COVID Safety Celebrated @qcovid safetayarea
- Fight COVID NOLA @fightcovidnola
- COVID Advocacy Initiative & Mandate Masks US @covid_advocacy
- Death Panel @deathpanel_

RESOURCES BEYOND NYC

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NYC COVID RESOURCES

THAT'S US!



@peopleshealth
educationprogram



@covidsolidaritynyc



@comunidadprimero



@bedstuystrong



@comeforever_



@covidadvocacyny

Visit the above Instagram accounts to learn more about
COVID safety and NYC-specific resources!

"COVID IS
MILDER NOW"

"I'M
VAXXED"

Officials claiming that we are completely COVID safe with a vaccine-only strategy displays a total lack of understanding of how the vaccine works and the conditions under which vaccine efficacies were initially determined. The high efficacies pharmaceutical companies were initially claiming were determined when there were several public health measures in place, including masking, limited occupancy, and other restrictions on indoor gatherings. Unrestrained spread of the virus leads to the emergence of new variants, **rendering our existing vaccines less effective.** Newer COVID strains are just as severe as older variants. Even if a newer strain is considered less deadly, it can be more transmissible which can ultimately lead to more deaths overall.

Vaccines also **do not prevent you from getting sick or spreading COVID:** they **reduce your chances of ending up dead** or in the hospital. We must continue to employ other methods of protection to keep ourselves and our communities safe. The newer COVID strains may appear to be milder because fewer people are dying compared to the start of the pandemic, but this can be attributed to the sheer number of people with comorbidities that lost their lives during the early COVID waves. Fewer people are dying presently because so many of our most at-risk members of society have already died from COVID. **Our government has subsequently abandoned** remaining at-risk individuals, who have been forced to take their safety into their own hands as the world prematurely "moves on" from the ongoing pandemic.

You have likely heard the phrase, "We just need to reach herd immunity and things can go back to normal." For the first two years of the pandemic, it seemed that reaching herd immunity was the objective. The problem, however, was **herd immunity was never going to be possible** with the nature of this virus. Unlike polio or measles, SARS-CoV-2 turned out to be more reactive to selective pressure which meant that the high levels of infection ironically served to give rise to many more variants that were even better at evading immune response.

A virus is under constant pressure to mutate to evade immune detection, but it doesn't do it in a vacuum, it needs a host. Once in a host, the virus will replicate until it is neutralized by the immune system. The longer it can reproduce unchecked, the higher the chances of it acquiring mutations. If any of those mutations, or combination of mutations is advantageous to the virus, then that mutant will end up in circulation. That's if we continue to serve as hosts, something we can try to prevent by masking. And if we do get infected, we can at least try to stop that chain of transmission with us by isolating while sick (if possible), testing frequently, and, yes, masking.

The reason why we have so many COVID variants is because **we have allowed for the virus to spread rampantly** because our government repealed mask mandates, dismantled COVID testing infrastructure, and repealed all other protective measures early on. We do not have to give in to the defeatist stance that COVID will eventually infect every person on the planet. We can keep our communities safe by maintaining COVID practices. Wearing a mask, testing regularly, and staying informed can help save lives.

"WE HAVE REACHED HERD IMMUNITY"

14

The People's CDC recommends using multiple layers of protection to make it less likely for COVID to spread. These layers include:

COVID SAFETY

#1 Improving indoor air quality by opening windows to increase ventilation, and using portable air purifying units with HEPA filters. Ideally, you should open windows on different walls for cross ventilation.

Scan this code for instructions on how to make a DIY air purifier!



#2 Wearing a well-fitting, high quality mask that covers both the mouth and nose.

#3 Increasing physical distance. Reducing time spent close to others indoors.

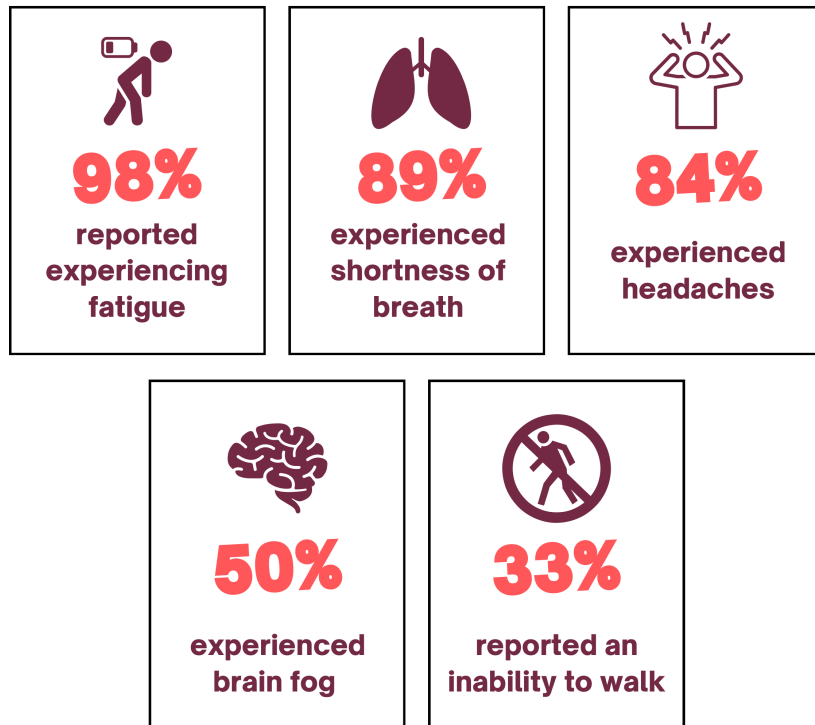
#5 Limiting the number of people you are around.

#6 Getting your vaccine and boosters, which helps decrease your risk of death and other health issues if you do catch COVID.

#7 Testing to learn if someone has COVID, even if they don't feel sick, so they know to isolate and to seek treatment.

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Of the 536 long COVID patients recruited for the study,



Participants with evidence of organ impairment from blood or MRI assessment received another multi-organ MRI body scan six months later. The scans revealed a small decline in patients experiencing organ impairment in at least two organs, from 29% to 27% (97 and 88 out of 331, respectively). The study also revealed an improvement in their long COVID symptoms between 6 and 12 months – severe breathlessness dropped from 36% to 28% of patients, cognitive dysfunction from 48% to 38%, and poor health-related quality of life from 55% to 42%.

COVID HEALTH IMPACTS

In April 2023 WHO Director-General Dr. Tedros Adhanom Ghebreyesus reported:



Hundreds of millions of people will need longer-term care.

As of August 7, 2023, the CDC reports:

15.4% OF ADULTS
in the u.s.
experience
Long COVID

While the consequences of long COVID remain to be fully uncovered, one thing is clear: it is imperative to take all the precautions necessary to prevent SARS-CoV-2 infections and reinfections.

Using the US Veterans Health Administration (VHA) health database, researchers compared more than 150,000 US veterans who survived the first 30 days of COVID-19

and two uninfected control groups – from a group of over 5 million people who have used the VHA medical system during the pandemic and a similarly sized group that used the system before the pandemic in 2017. They then estimated the risk of a set of 20 different cardiovascular outcomes one-year post-acute infection. The study found that relative to the uninfected control groups, people who had recovered from COVID-19 exhibited increased risk for multiple cardiovascular problems one year after infection.

Another study published in Nov 2022, examined the health risks of repeat SARS-CoV-2 infections.



Researchers first identified nearly 520,000 VHA users with at least one positive SARS-CoV-2 test between March 1, 2020, and April 6, 2022. Of these participants, 40,947 were reinfected between June 1, 2020, and June 25, 2022. The one infection and reinfection groups were compared to a noninfected control group of more than 5.3 million people who did not test positive for SARS-CoV-2 infection.

Researchers found, compared to people with no reinfection, those who are infected with SARS-CoV-2 two or more times are:



The increased risk of death, hospitalization and all other health outcomes was observed regardless of vaccination status. The study also showed that risks increased with every infection. In other words: 2 infections is worse than 1, 3 infections is worse than 2, and so on.

Most recently, an observational study conducted in the UK and published in February 2023, found that as many as 6 in 10 people with long COVID had organ impairment in at least one organ six months out from their initial COVID diagnosis. Importantly, only 13% of patients had symptoms severe enough to require hospitalization at the time of active SARS-CoV-2 infection – meaning most patients had ‘mild COVID’ at the time of infection.