

covid has seasons, but is not "seasonal"

by bowerbird intelligentleman
(a twitter thread in august 2024)

<http://www.twitter.com/bbirdiman>

the cdc finally admitted covid goes year-round.
that's a big deal because up to now the cdc
pretended covid is a winter respiratory disease.

Summary

What CDC knows

In the United States, respiratory virus illnesses typically peak during the fall and winter. These peaks are due to several factors, including human behaviors and environmental conditions that can affect the ability of viruses to survive and spread.

Since the start of the COVID-19 pandemic, infections with SARS-CoV-2, the virus that causes COVID-19, have peaked during the winter and also surged at other times of the year. These periodic surges are due in part to the emergence of new variants and decreasing immunity from previous infections and vaccinations. Because the evolution of new variants remains unpredictable, SARS-CoV-2 is not a typical "winter" respiratory virus.

since covid appeared, the cdc has treated it
as a "seasonal" disease. it has been one of the
most basic (mis)understandings the cdc has had.

in this thread, i show you that was wrong, and
cdc had more than enough evidence to know it.
it is a long thread, since i have lots to show.

if you would rather read the thread on the web
instead of here on twitter, you can find it here:
<http://zenmagiclove.com/covid-seasonal.html>

of if you would rather read the thread as a .pdf instead of here on the web, it's available here:
<http://zenmagiclove.com/covid-seasonal.pdf>

in epidemiology-speak, a "seasonal" disease is one that's most prevalent for a couple months (generally cold-weather, november to february).

after this high prevalence, a "seasonal" disease largely disappears for the rest of that year; thus it might be absent for roughly 8 months.

so when the cdc deemed covid "seasonal", the dishonest implication of that term was that covid would largely disappear for most of the year.

the inference the cdc wanted americans to draw is that we had to fret about covid in winter, but could forget about it the rest of the time.

the problem with that is that scads of people saw that covid was not "largely disappearing" for "most of the year". it was here, constantly.

and again, the cdc has maintained that charade for four full years of the covid experience, so this has been an ongoing sore-point for many.

so this is a big deal, that the cdc admitted covid isn't "seasonal". it finally relented to those who'd called out its dishonesty all along.

the cdc made this announcement quietly, mounting that webpage on july 3rd, 2024, so burying it from the press on the eve of a 4-day weekend.

Summary

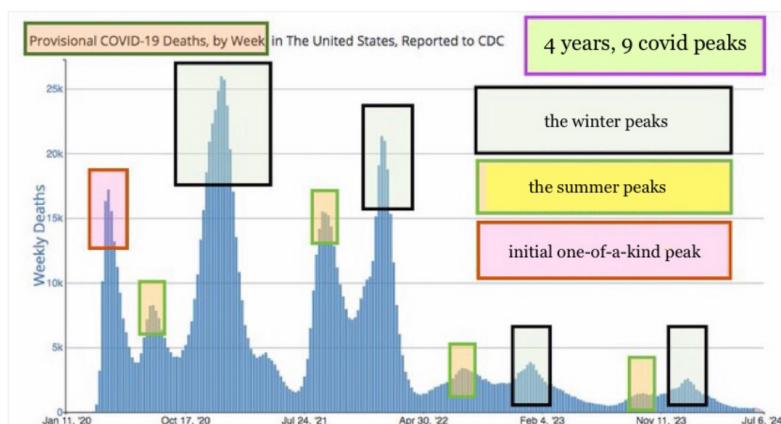
What CDC knows

In the United States, respiratory virus illnesses typically peak during the fall and winter. These peaks are due to several factors, including human behaviors and environmental conditions that can affect the ability of viruses to survive and spread.

Since the start of the COVID-19 pandemic, infections with SARS-CoV-2, the virus that causes COVID-19, have peaked during the winter and also surged at other times of the year. These periodic surges are due in part to the emergence of new variants and decreasing immunity from previous infections and vaccinations. Because the evolution of new variants remains unpredictable, SARS-CoV-2 is not a typical "winter" respiratory virus.

it is only now, 4 years into covid, that the cdc admits something that has been very obvious if it had only looked at one of its own graphs.

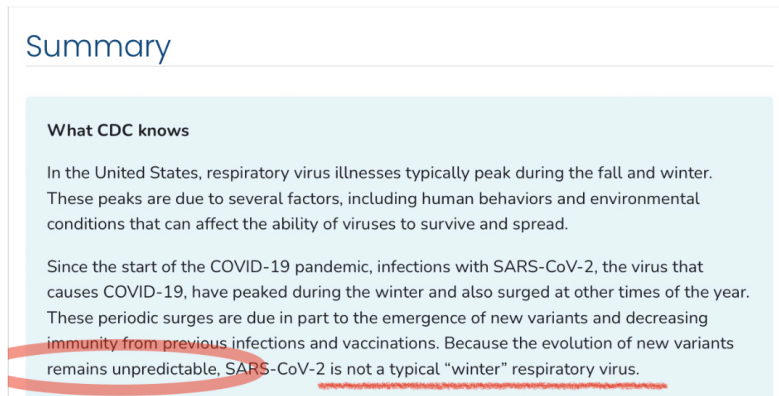
for all 4 years of covid, the cdc deaths graph shows 2 peaks per year, plainly visible to all: one in the summers, the other in the winters.



(i'll be using cdc graphs on covid deaths here in the thread, even though deaths are an unduly limited way to assess damages done by covid.)

(but i use cdc death graphs because they are one of the only constant measures kept. others (cases, hospitalizations) have been turned off.)

thus now calling covid an "unpredictable" virus is just a different way to gaslight us, since there are indeed spikes, that come in seasons.



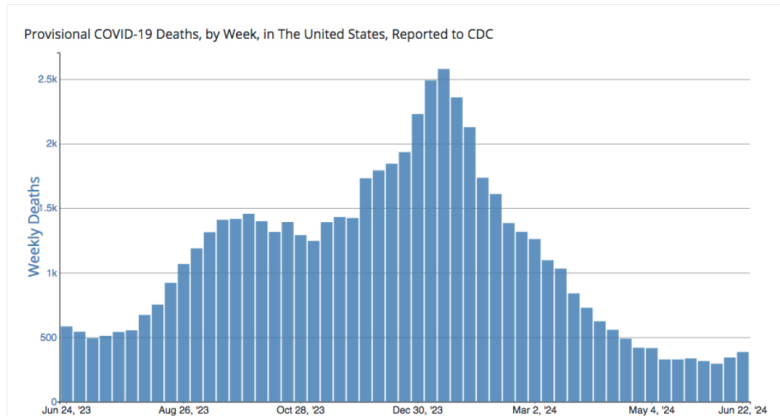
we have covid surges in both winter and summer. (and no, in case you wondered, that doesn't mean covid is "seasonal", as typically defined.)

for those of us trying to surf the covid waves, it's useful to have a good grasp of them, and after 4 years of them, we can see the pattern.

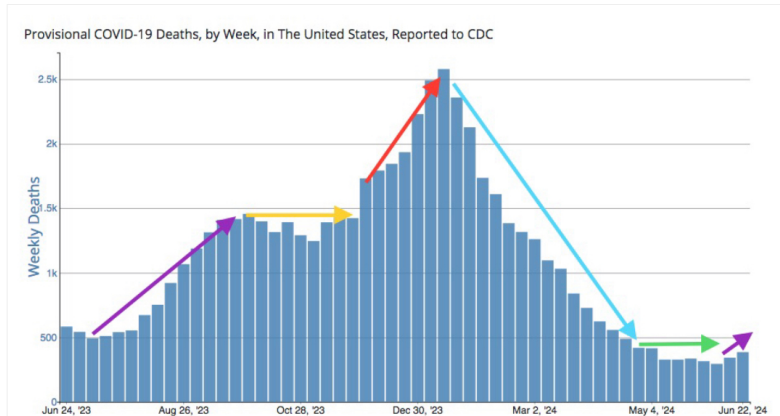
indeed, one quite specific pattern emerges. as with anything in nature, there is variability. but this pattern is robust, and remarkably so.

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it is basically one big wave per year,
or might as well be.
to show this wave,
i'll use a graph of the last 365 days,
as it does a fine job.

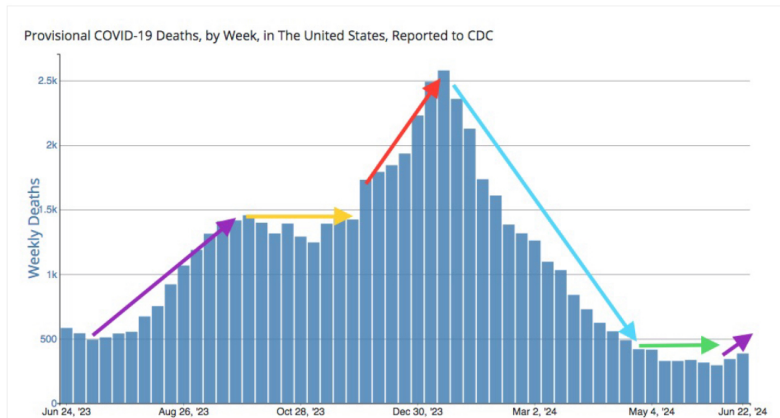


this wave starts on the 4th of July (purple),
sits on a plateau for 2 months in fall (yellow),
then rises up to a peak in mid-january (red).

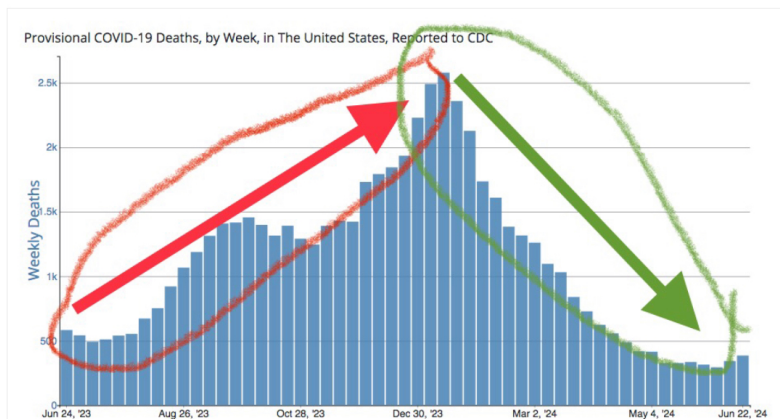


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after hitting that annual mid-January peak, the wave declines in winter and spring (cyan), and levels at its trough at spring's end (green).

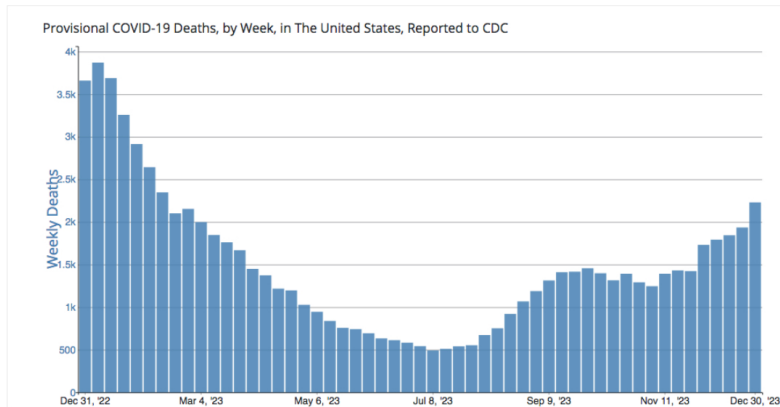


thus, we have our wave, from start to finish. the rise is July through January, the second half the year. the decline is half the next year.

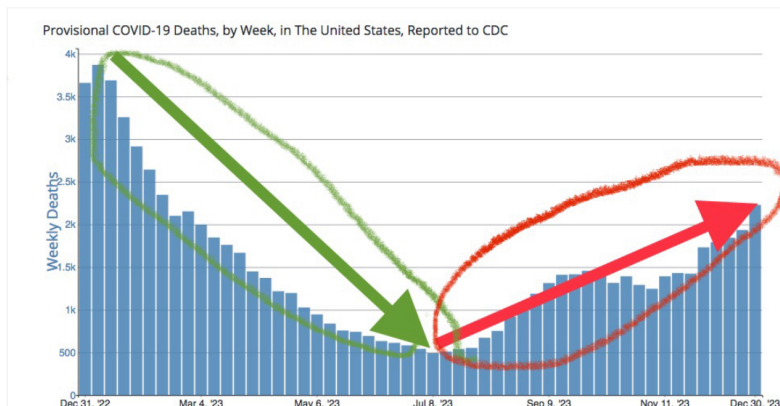


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i'll show you covid has this pattern each year (albeit at different levels) but we will start by looking at the data for calendar year 2023.

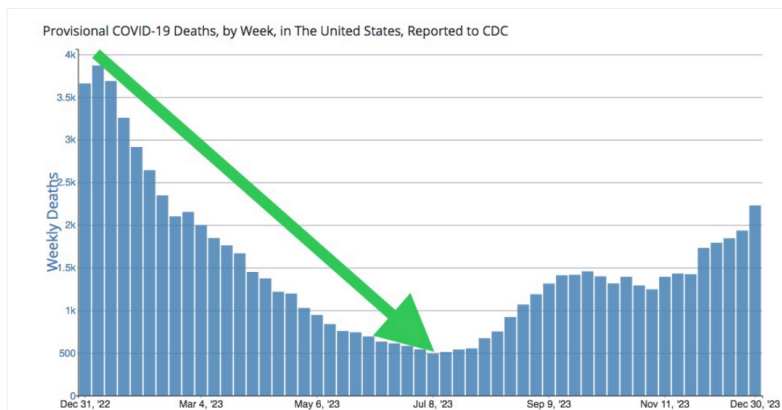


(we're looking at the data from january 2023 though december 2023, so we get the last half of one wave and the first half of the next wave.)



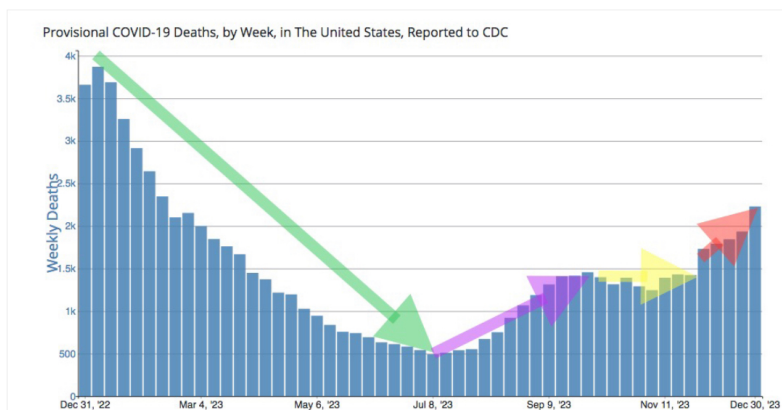
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you see the peak, on 1/7/23.
then the decline, afterward, is steady and fast;
uninterrupted, it's easy to see,
down to the trough on 7/8/23.



the decline of the wave is very straightforward.
the deaths per week go down week after week,
from peak to trough. it's quite uncomplicated.

the next yearly wave starts in summer.
its peak will come next winter, but the rise to it
isn't as steady as the decline from the last peak.



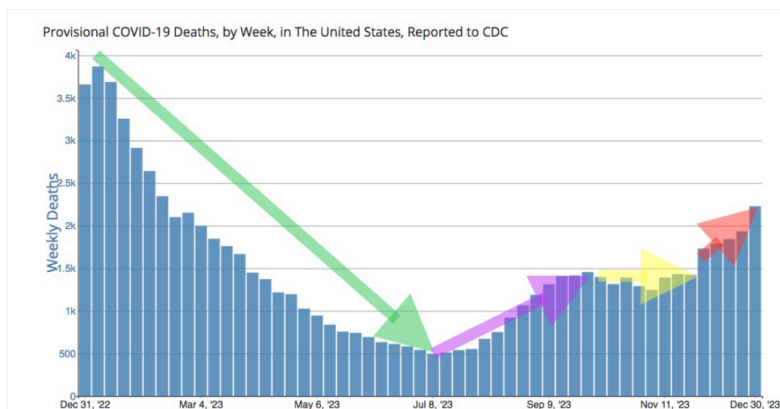
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the start of the yearly wave is always
a surge beginning in summer.
and the wave's peak always results from
a surge that comes in late-fall.

you might be asking yourself why i talk about
"one yearly wave" at the same time i talk about
"two surges" and "two spikes" and "two peaks".

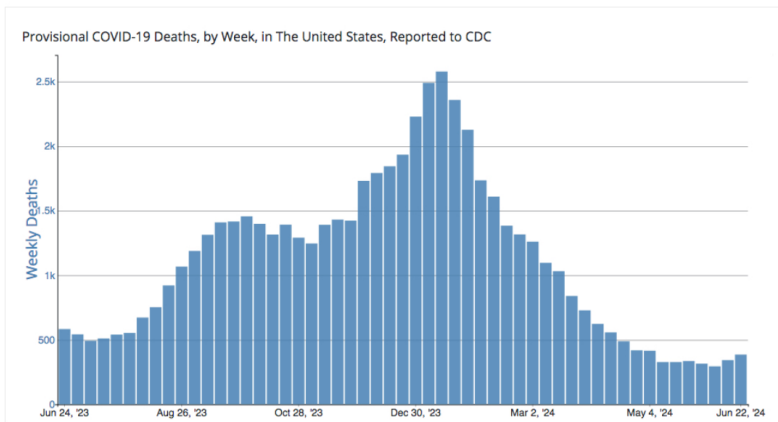
the answer is easy:
yes, there are 2 yearly surges:
summer and winter,
but the summer surge never declines back
to the level it starts from.

indeed, as this data here for 2023 shows you,
sometimes the summer spike does not decline
back at all. it sits flat on a plateau for months.

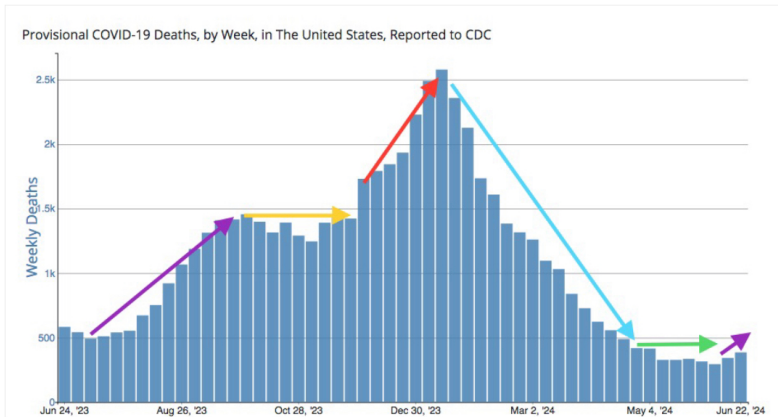


this means that the winter surge
always starts from a much higher level
than the summer surge.
which is part of the reason it peaks highest.

we can see this by looking, again, at the data starting in summer 2023 and continuing for 366 (leap-year) days until the end of spring 2024.

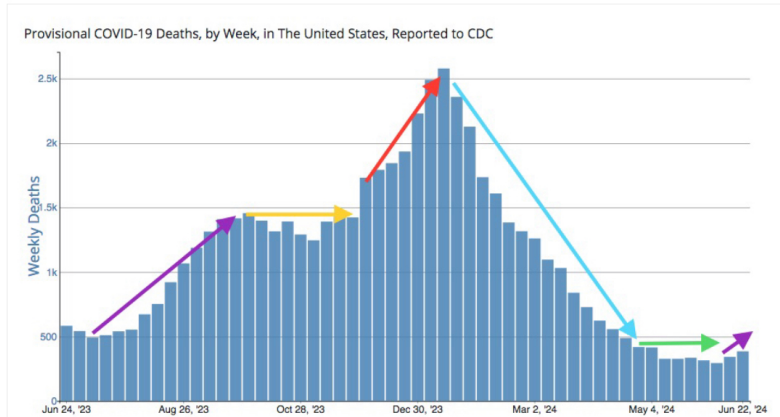


here you see the yearly wave nicely highlighted. it rises from the 2023 trough (7/8/23), to its peak (1/13/24), to the 2024 trough (6/8/24).

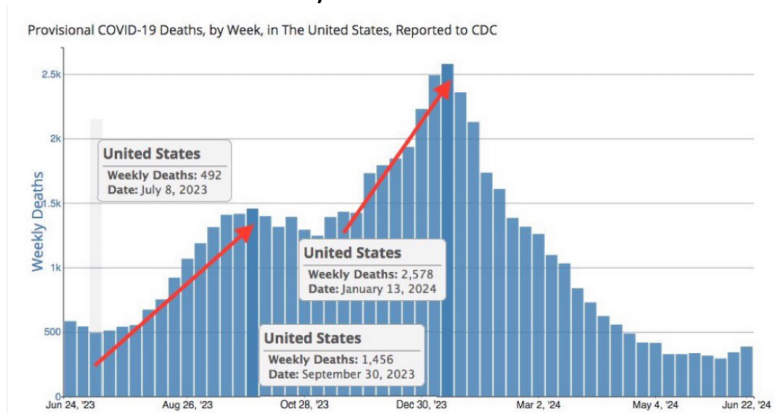


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but between the spike at the start of summer and the spike in late fall, we have that plateau in fall for two months (october and november).

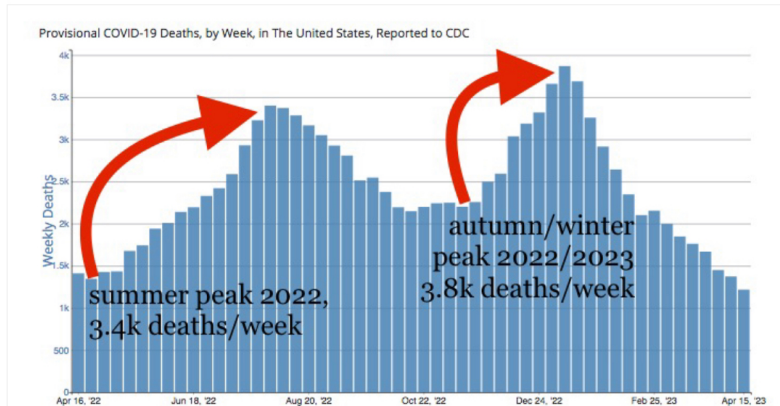


some people think the summer surge is smaller. not always. in 2023, the summer surge rose from ~5k to ~15k deaths; autumn went ~15k to ~25k.



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in 2022, the summer surge was a similar size (nearly exactly) to the fall surge that followed. (because that summer surge did decline back.)

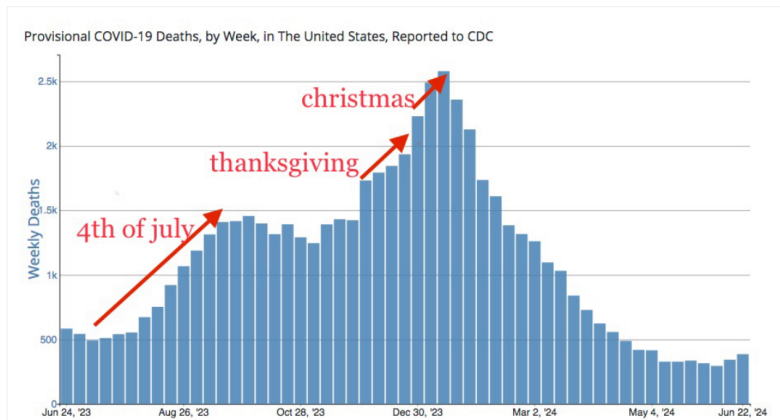


so one more wrinkle:
we have one (1) yearly wave,
composed of two (2) annual surges,
which are the result of
three (3) superspreader events.

there are 3 yearly covid
superspreaders in the u.s.
the first is the 4th of july.
the second one is thanksgiving.
and the last is christmas.

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the first is the primary source of
the summer surge. always.
and the last two are the genesis of
the fall surge. always. we can count on it.



it comes as no surprise that these occasions
are three of the biggest travel holidays in the u.s.
and are associated with family gatherings.

when folks gather from various locations and
socialize freely and comfortably with each other,
it maximizes the damage any sick can inflict.

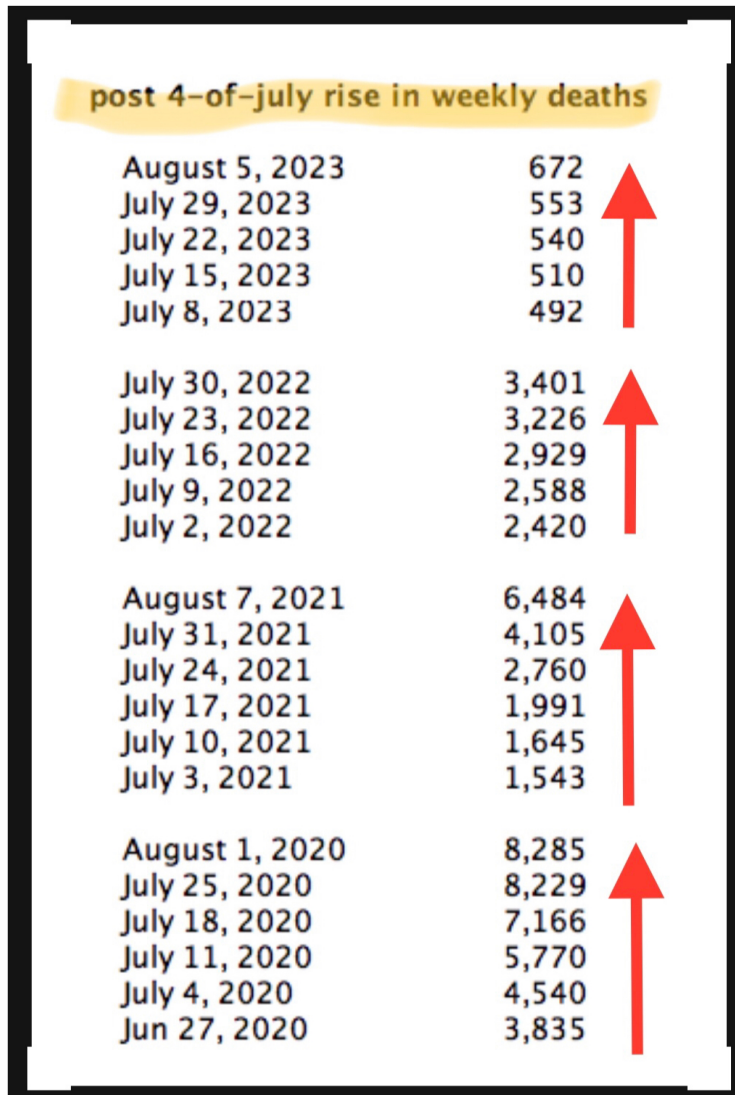
when you have family events, everybody knows
everybody else, so everybody interacts closely,
and even one ill person might infect everybody.

this is why events like marriages or funerals
are superspreaders, because close interactions
happen, even between people who live far apart.

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then of course you have the airports to navigate:
baggage-check, t.s.a., and the plane itself,
crammed for hours next to unmasked strangers.

the 4th of july produces the summer surge.
every week in july, after the 4th of july,
shows increased weekly deaths.
every week. every year.



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that's cdc data for covid deaths in july
for every year since 2020.
(the 2024 data hasn't come in yet.)
every single week shows an increase.

every week in july, after the 4th,
your number of covid deaths for that week
increases over the week before it.
that is a surge. every year.

of course we know intuitively that
the 4th of july is a superspreader.
but here we see evidence for it,
unequivocally exhibited in the data.

the summer surge is amazingly predictable.
yet it seems to take many people by surprise.
every year they're just amazed covid is still here.

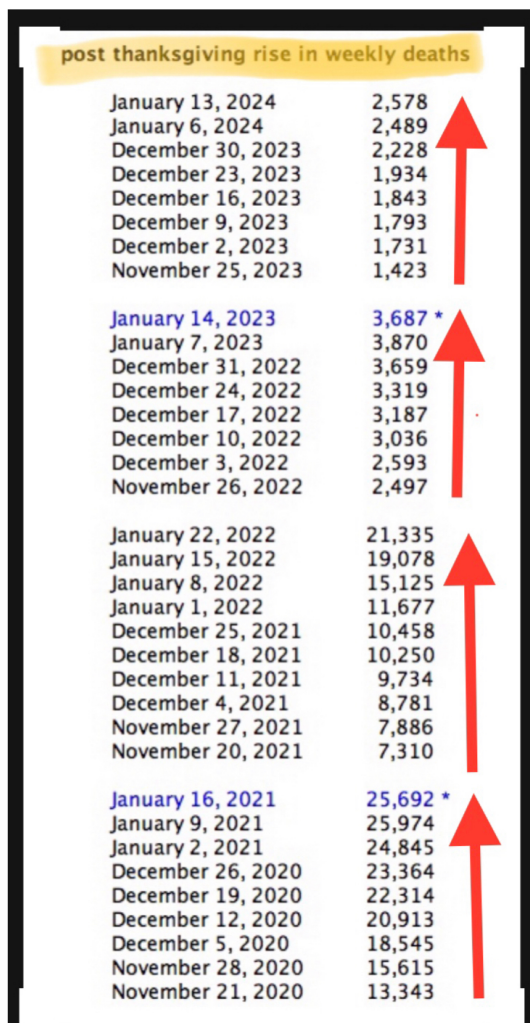
the 4th of july is 2 weeks after summer starts.
the summer surge will often last all summer,
until fall starts, toward the end of september.

the summer surge typically reaches a plateau
lasting through october and most of november,
until the 4th thursday in november, thanksgiving.

thanksgiving, a big weekend family gathering,
is the second dependable covid superspreader;
you can bet on a spike in covid deaths after it.

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indeed, just like the rise after the 4th of july, every week from thanksgiving to christmas has seen a rise in deaths every year since 2020.

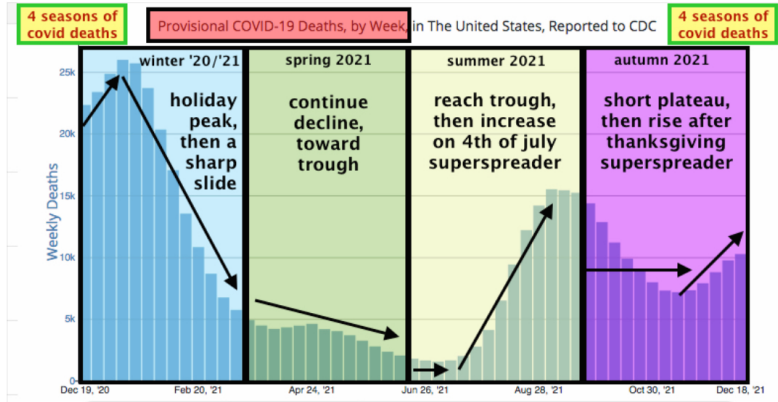


and if the thanksgiving weekend starts a wave, we know quite well a long holiday period from pre-christmas to post-new year will prolong it.

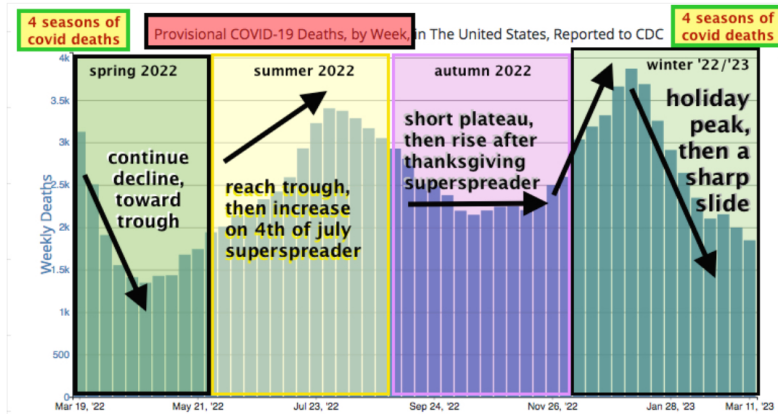
and yes of course it does. the spike continues for 2-3 weeks after christmas up to its peak; it's so regular you can set the calendar by it.

you saw it every year.
covid deaths rose each week in july after
the 4th of july, and again each week
from thanksgiving through mid-january.

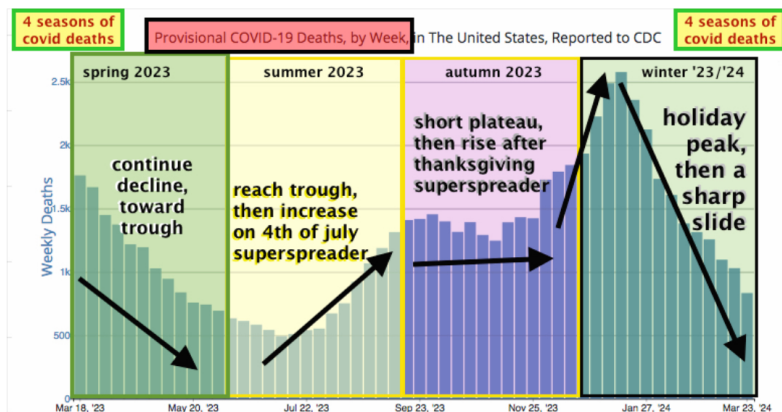
i told you i would show you that this pattern
presents itself in every year of the pandemic,
so here is the data for the 2021 calendar year.



and here it is for 2022. again, a sharp decline,
to the annual trough, then the summer surge
starting the next wave, a plateau, then a peak.



and here is the season-based 2023 breakdown.
 (seasons are a nice way to split up the year, but aren't too different from the calendar year.)



the other aspect is the winter/spring decline.
 it is easy to see on the graphs, so no surprise that the data also supports it unequivocally.

== weekly deaths, spring, 2024 ==		== weekly deaths, spring, 2022 ==	
June 22, 2024	351	June 18, 2022	2,194
June 15, 2024	327	June 11, 2022	2,139
June 8, 2024	290	June 4, 2022	2,007
June 1, 2024	313	May 28, 2022	1,940
May 25, 2024	333	May 21, 2022	1,742
May 18, 2024	327	May 14, 2022	1,676
May 11, 2024	326	May 7, 2022	1,433
May 4, 2024	413	April 30, 2022	1,426
April 27, 2024	416	April 23, 2022	1,345
April 20, 2024	487	April 16, 2022	1,410
April 13, 2024	556	April 9, 2022	1,552
April 6, 2024	623	April 2, 2022	1,908
March 30, 2024	727	March 26, 2022	2,505
March 23, 2024	838	March 19, 2022	3,125
== weekly deaths, spring, 2023 ==		== weekly deaths, spring, 2021 ==	
June 24, 2023	583	June 26, 2021	1,635
June 17, 2023	612	June 19, 2021	1,776
June 10, 2023	633	June 12, 2021	2,035
June 3, 2023	693	June 5, 2021	2,347
May 27, 2023	742	May 29, 2021	2,770
May 20, 2023	757	May 22, 2021	3,238
May 13, 2023	838	May 15, 2021	3,678
May 6, 2023	945	May 8, 2021	4,006
April 29, 2023	1,027	May 1, 2021	4,165
April 22, 2023	1,195	April 24, 2021	4,601
April 15, 2023	1,217	April 17, 2021	4,450
April 8, 2023	1,373	April 10, 2021	4,313
April 1, 2023	1,449	April 3, 2021	4,197
March 25, 2023	1,668	March 27, 2021	4,461
March 18, 2023	1,761	March 20, 2021	4,893

what we see is that the pattern has been repeated throughout the entire pandemic, right up to the summer surge we're now experiencing today.

what is important for us to remember is that these are not equinox/solstice "seasons" per se. they have nothing to do with cold/hot weather.

(this is not to say that cold weather does not contribute to transmission. but it is clearly not the sole factor, or even the most crucial.)

these are "holiday seasons", human events where people-gathering is a vital component. these are dates we know are coming, and exactly when.

this pattern has manifested itself clearly in every single one of the 4 years of covid, and it is high time for the cdc to stop ignoring it.

so, i'll repeat, to call covid "unpredictable" is an attempt by the cdc to dodge responsibility for the fact they've botched their job here.

Summary

What CDC knows

In the United States, respiratory virus illnesses typically peak during the fall and winter. These peaks are due to several factors, including human behaviors and environmental conditions that can affect the ability of viruses to survive and spread.

Since the start of the COVID-19 pandemic, infections with SARS-CoV-2, the virus that causes COVID-19, have peaked during the winter and also surged at other times of the year. These periodic surges are due in part to the emergence of new variants and decreasing immunity from previous infections and vaccinations. Because the evolution of new variants remains unpredictable, SARS-CoV-2 is not a typical "winter" respiratory virus.

(it is disingenuous to blame the summer surge on "new variants" or "decreasing immunity" too, because those factors are present year-round.)

covid has laid down a solid pattern which is extremely predictable, and linked to actions that are entirely within our abilities to control.

can we tell people that they shouldn't gather on the 4th of july, thanksgiving, and christmas? maybe. maybe not. but we can do other things.

first, we can (and we should) inform them that their gatherings have consequences which are completely predictable, and quite discomfoting.

we need to make these surges salient to people, put them in the spotlight, make people confront the reality, the senseless repetitive cycle.

second, we can (and we should) put in place measures to help mitigate those consequences. the best time to stop a spike is before it starts.

mandating masks in airports on busy travel days is common sense, and a properly-informed public would support such a rule if it is enforced.

(polling as recent as one from last month shows that a majority of people support mask mandates; we want action to stop the endless surges.)

again, the time to stop a spike is at its start.
we know that the 4th of july always creates a
summer surge, so that is when we can stop it.

and we know that thanksgiving and christmas
also cause a big spike. it's not "winter" per se.
(january is usually just as cold as december.)

the fact that the annual peak, yearly, always
arrives 2-3 weeks after the christmas holiday
is a testament that our behavior is responsible.

it is the humans gathering that causes spikes.
our superspreaders cause big infection chains.
even if we did not know it, the data tells us.

the notion that we can't do anything to stop
these waves of the covid roller-coaster is simply
ridiculous. we can do something. and we must.

most of all we've gotta slap some sense into
the cdc. it's abdicated its responsibilities and
does little more than gaslight the public now.

even when the cdc actually tries to "come clear"
on some issue, they cannot make a clean break.
this "seasonal" confession is far too messy.

there are other problems with its webpages,
and we should mention them, briefly, before we
end this thread, to let the cdc know we see them.

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for example, the cdc used its other webpages to propagate its droplet dogma, instead of the more scientifically-validated airborne approach.

The image is a screenshot of the CDC's 'Core Prevention Strategies' page. It features a title 'Core Prevention Strategies' and a sub-header 'CDC recommends that all people use core prevention strategies to protect themselves and others from COVID-19:'. Below this is a list of strategies. The first strategy, 'Practice good hygiene (practices that improve cleanliness)', is highlighted with a red rectangular box. A red arrow points from this box to the text 'a reference to hand-washing' written in red. Other strategies include 'Take steps for cleaner air', 'When you are sick:' (with sub-points on precautions and seeking care), and 'Additional Prevention Strategies' (with sub-points on wearing a mask and testing for COVID-19). The text 'Wearing a mask' is circled in purple.

Core Prevention Strategies

CDC recommends that all people use core prevention strategies to protect themselves and others from COVID-19:

- Stay up to date with [COVID-19 vaccines](#).
 - Although vaccinated people sometimes get infected with the virus that causes COVID-19, staying up to date on COVID-19 vaccines significantly lowers the risk of getting very sick, being hospitalized, or dying from COVID-19.
- Practice good [hygiene](#) (practices that improve cleanliness)
- Take [steps for cleaner air](#)

When you are sick:

- Use [precautions to prevent spread](#), including staying home and away from others (including people you live with who are not sick) if you have respiratory symptoms.
 - Learn when you can [go back to your normal activities](#).
- Seek health care promptly for [testing](#), and/or [treatment](#) if you have [risk factors for severe illness](#). Treatment may help lower your risk of severe illness, but it needs to be started within a few days of when your symptoms begin.

Additional Prevention Strategies

In addition, there are other prevention strategies that you can choose to further protect yourself and others.

- [Wearing a mask](#) and [putting distance between yourself and others](#) can help lower the risk of COVID-19 transmission.
- [Testing for COVID-19](#) can help you decide what to do next, like getting [treatment](#) to reduce your risk of severe illness and [taking steps](#) to lower your chances of spreading COVID-19 to others.

the "hygiene" mention (i.e., hand-washing) is an implicit reference to the droplet philosophy; its presence here is an embarrassing anomaly.

and facemasks have been relegated to an "additional strategies" mention, not the "core prevention" they should have for an airborne disease.

finally the cdc webpage makes reference to "respiratory illnesses" but scientific consensus is now that covid is more of a vascular disease.

Summary

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Since the start of the COVID-19 pandemic, infections with SARS-CoV-2, the virus that causes COVID-19, have peaked during the winter and also surged at other times of the year. These periodic surges are due in part to the emergence of new variants and decreasing immunity from previous infections and vaccinations. Because the evolution of new variants remains unpredictable, SARS-CoV-2 is not a typical "winter" respiratory virus.

so, again, to promulgate such an outdated and limited view of covid's wide-ranging effects on the body is an embarrassment to public health.

so there are still problems with the cdc approach to covid, 4 years in, as seen on its webpages, but let's cheer this victory on "seasonal".
