



San Francisco Village

**COVID - 19**  
**Research and Advisory Team:**  
**Report and Recommendations #28**  
**September 20, 2020**

**SFV Members:**  
**Barbara Kivowitz, MSW and Dr. Patricia Tsang**

This report contains a summary of the key updates on the status of Covid-19 that are more evident since our last report (June 14), along with our current recommendations for actions for SFV to consider taking. Sources include: CDC, WHO, SFDPH, CA DPH, Science Journal, Nature Journal, New England Journal of Medicine, Journal of the American Medical Association, Scripps Research Institute, Johns Hopkins Coronavirus Resource Center, UCSF Medical Grand Rounds, STAT, Institute for Health Metrics & Evaluation, the Covid Tracking Project, other clinical journals, reports from public health professionals, and news media.

## RECENT FINDINGS

### 1) AstraZeneca/Oxford trial put on pause

The news that AstraZeneca paused its clinical trials for a Covid-19 vaccine has focused attention on the company and the clinical trial process. The hold occurred after a participant in the trial developed symptoms consistent with a rare but serious spinal inflammatory disorder called transverse myelitis.

In every clinical trial, the data and safety monitoring board takes routine and prescheduled looks at the accumulated data. They are checking mainly for two things: signals of harm and evidence of effectiveness. These boards will recommend stopping a trial if they see a signal of concern or harm. They may do the same thing if they see solid evidence that people in the active arm of the trial are doing far better than those in the control arm.

The current situation with AstraZeneca involves a signal of concern. The company's first obligation is to the participants in the trial. It cannot ethically proceed with the trial if there is reason for concern, even based on the experience of one participant. AstraZeneca did exactly what it should have done. That's an important point to underscore. An episode like this can be both reassuring to the general public and unnerving. Reassuring because the company did the right thing. Unnerving because the Oxford University-AstraZeneca vaccine is among the few that are closest to the authorization finish line.

When a participant develops an illness or condition during a clinical trial, it could be linked to the agent being tested. But it also might not. Symptoms and diseases occur for many reasons. In this case, the participant's symptoms could have emerged had she not been in the trial. AstraZeneca needs to take the time to get experts who are arm's length from the company to investigate what happened and then say it's OK to proceed — or not.

The AstraZeneca trial has been given the OK to proceed in the UK and Brazil. In the US, the investigation is underway.

## **2) Coronavirus can spread on airline flights**

A CDC report states that a young woman and her sister had traveled across Europe just as the coronavirus pandemic was taking off there. When the woman left London on March 1, she had a sore throat and cough as she boarded a flight home to Vietnam, but no one noticed. By the time she got off the flight in Hanoi 10 hours later, 15 other people who had been on the plane with her were infected. In another incident, passengers on a flight from Boston to Hong Kong appear to have infected two flight attendants (genetic sequencing linked all four cases).

The report concludes that the risk for on-board transmission of SARS-CoV-2 during long flights is real and has the potential to cause COVID-19 clusters of substantial size, even in business class--like settings with spacious seating.

## **UNITED STATES**

Total cases: 6,788,343

Total deaths: 199,421

### **1) The US Centers for Disease Control and Prevention's website has updated, yet again, guidelines for testing people who do not have symptoms of coronavirus.**

The new language rolls back controversial changes made to the site last month. It once again stresses that anyone who has been in contact with an infected person should be tested for coronavirus. "Due to the significance of asymptomatic and pre-symptomatic transmission, this guidance further reinforces the need to test asymptomatic persons, including close contacts of a person with documented SARS-CoV-2 infection," it says, calling the change a clarification.

"Testing is recommended for all close contacts of persons with SARS-CoV-2 infection. Because of the potential for asymptomatic and pre-symptomatic transmission, it is important that contacts of individuals with SARS-CoV-2 infection be quickly identified and tested," the site now reads.

On August 24, the CDC site was changed to say: "If you have been in close contact (within 6 feet) of a person with a COVID-19 infection for at

least 15 minutes but do not have symptoms, you do not necessarily need a test unless you are a vulnerable individual or your health care provider or State or local public health officials recommend you take one." The move was heavily criticized by doctors and health agencies.

## CALIFORNIA

# California COVID-19 By The Numbers

September 20, 2020

Numbers as of September 19, 2020

## CALIFORNIA COVID-19 SPREAD

**778,400 (+4,265)**  
CASES

### Ages of Confirmed Cases

- 0-17: 80,069
- 18-49: 466,993
- 50-64: 147,049
- 65+: 83,379
- Unknown/Missing: 910

### Gender of Confirmed Cases

- Female: 392,944
- Male: 378,892
- Unknown/Missing: 6,564

**14,987 (+75)**

Fatalities

### Hospitalizations

Confirmed COVID-19  
**2,607/807**  
Hospitalized/in ICU

Suspected COVID-19  
**834/118**  
Hospitalized/in ICU

For county-level  
hospital data:  
[bit.ly/hospitalsca](https://bit.ly/hospitalsca)

Your actions **save lives.**

For county-level data:  
[data.chhs.ca.gov](https://data.chhs.ca.gov)

[covid19.ca.gov](https://covid19.ca.gov)



**1) With cases way down, California's decline begins to level off  
Average of 3,500 cases per day about equal to a week ago, still below  
half of peak**

## CALIFORNIA CASES

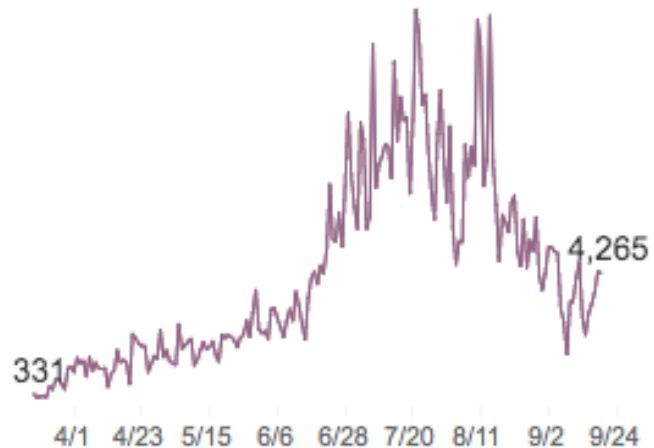
**778,400**

1 Day $\Delta$	7 Day $\Delta$	14 Day $\Delta$
+4,265	+23,477	+46,256
+0.6%	+3.1%	+6.3%

7 Day Avg.	14 Day Avg.	Weekly % Change
3,354	3,304	3.1%

US Total Cases: 6,706,374

Day-Over-Day New Cases



## CALIFORNIA DEATHS

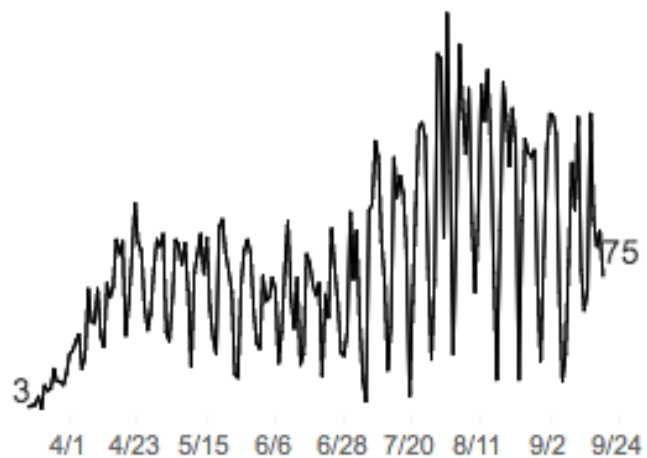
**14,987**

1 Day $\Delta$	7 Day $\Delta$	14 Day $\Delta$
+75	+658	+1,278
+0.5%	+4.6%	+9.3%

7 Day Avg.	14 Day Avg.	Weekly % Change
94	91	+6.1%

US Total Deaths: 198,099

Day-Over-Day New Deaths



After weeks of decline, California's daily coronavirus case count appears to have plateaued at about 3,500 per day — its lowest point since mid-June. After a week of little movement, the seven-day average was about 28% lower than two weeks ago and had fallen by more than half from its peak. Although there were fewer cases this week than any point

since June, there were still about 75% more than the state was reporting on average before Memorial Day.

The majority of the new cases Thursday were concentrated in Southern California, where there were a state-leading 1,123 in Los Angeles County and over 100 each in four surrounding counties. Sacramento County was second, with 301 new cases Thursday; its seven-day average hit its highest point in nearly two weeks — about 185 cases per day.

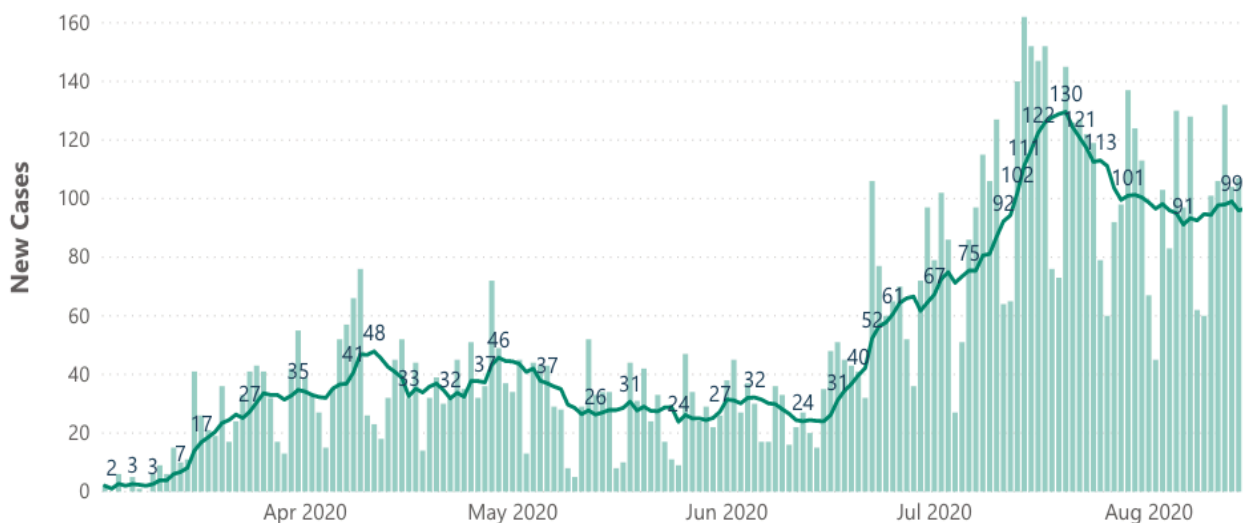
The average number of daily cases in the Bay Area was down 33% from two weeks ago to about 560 per day — fewer than half of its peak. The Bay Area had a combined 624 new cases among its 10 counties. The 457 patients hospitalized around the Bay Area Wednesday were the fewest since June 30, about a week after hospital levels first began to rise. With another 20 deaths reported Thursday, the region has now seen its first week with at least 140 reported fatalities — or an average of 20 per day. However, the date on which they occurred can vary by as much as month, for a number of reasons, primarily delays in reporting and backfilling previously unaccounted for deaths.

## SAN FRANCISCO

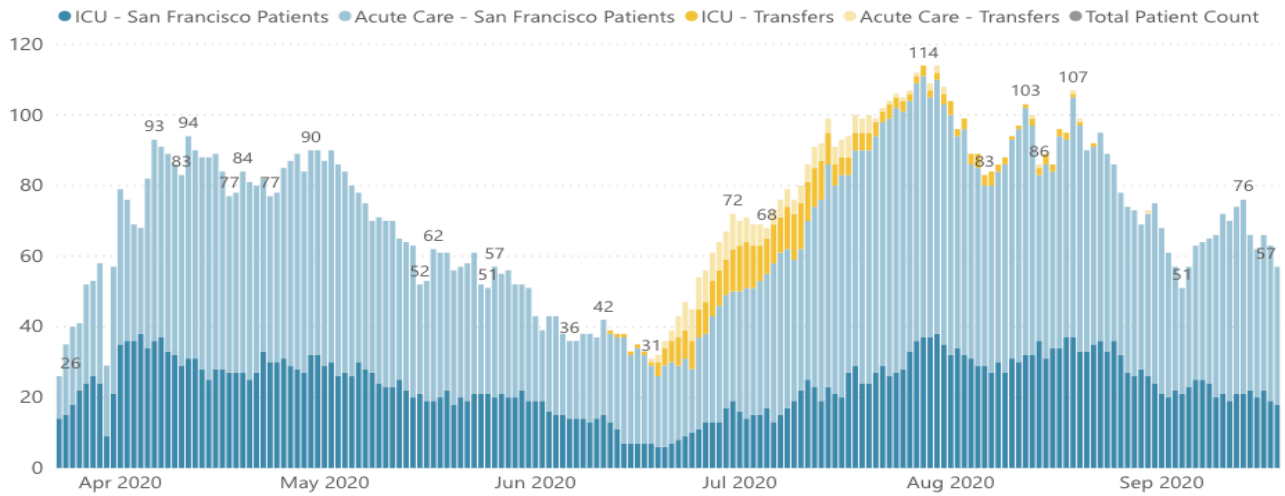
Total cases: 10,745

Total deaths: 99

Total tests collected: 465,499



### COVID-19 Patient Count



### 1) San Francisco restaurants could soon allow indoor dining

San Francisco Mayor London Breed said the city could reopen indoor dining as early as the end of this month. "We want to improve the numbers, and that involves all of us playing our role. And in fact, we're doing so. We anticipate by the end of this month, we will be in orange. We're currently in red. So we're not out of the woods. But we expect, based on the numbers, to continue to go the way that they're going, we'll be at level orange. And as a result, we will be able to open restaurants indoors at 25% capacity," she said.

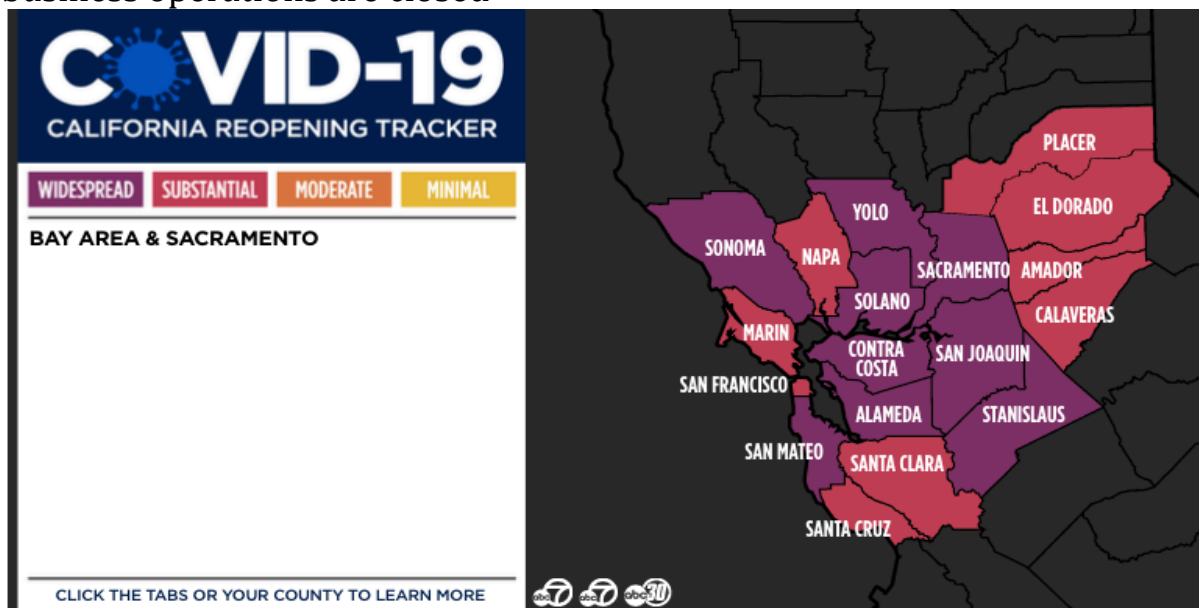
SAN FRANCISCO COUNTY REOPENING TRACKER		
✂️	HAIR SALONS	✓
🚚	OUTDOOR DINING	✓
🍽️	INDOOR DINING	✗
🏋️	GYMS	*10% capacity ✓
🎬	MOVIE THEATERS	✗
🍷	BARS	✗
🎒	SCHOOLS	*TK-6th starting 9/21 +
🚗	CURBSIDE PICKUP	✓
🛍️	IN-STORE RETAIL	✓
💅	NAIL SALONS	✓
🍷	WINERIES	✗
🙏	CHURCHES	*25% capacity ✓
🦒	ZOOS	✓
🏛️	INDOOR MUSEUMS	*Starting 9/21 +
🎵	CONCERTS	✗
🏈	LIVE SPORTS WITH FANS	✗
🍻	SOCIAL BUBBLES	✗

## 2) Color coded readiness to open classification system

Gov. Gavin Newsom announced California is moving away from the "watch list" system of tracking coronavirus trends and instead moving to a four-tier, color coded classification system that will determine which counties can move forward with reopening businesses.

There are four tiers: yellow, orange, red and purple. Yellow indicates minimal COVID-19 spread and allows for nearly all businesses to reopen indoor operations (as long as physical distancing and face covering requirements are in place). Purple means there is widespread COVID-19 transmission in the county and nearly all businesses have to keep indoor operations closed or severely limited.

San Francisco is coded red, which means that some non-essential indoor business operations are closed



## RECOMMENDATIONS

A reminder: as businesses (gyms, hair salons, restaurants) and recreational events reopen, it is important to remember that aerosol transmission is the most likely route for infection; and that crowded, prolonged, close contact, indoors, with people talking, shouting, singing can spread the virus. Masks and physical distance can mitigate, but not totally eliminate risk.