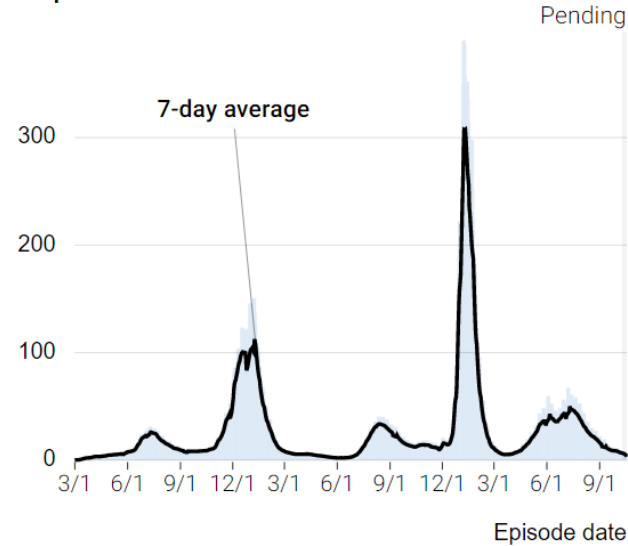
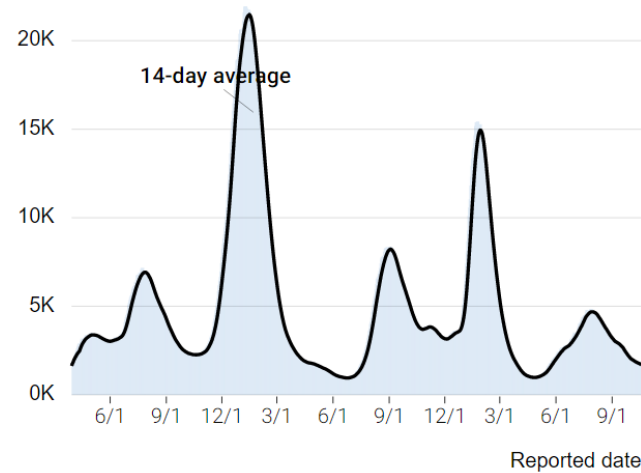


Testing Taskforce: New California COVID-19 cases, hospitalizations and deaths

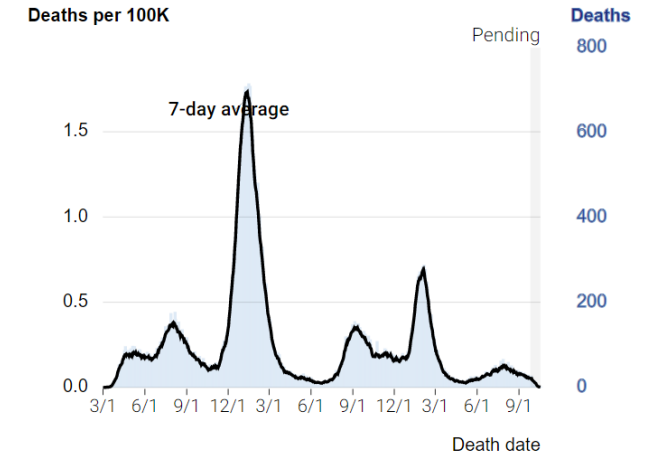
Cases per 100K



14 day average Hospitalizations



7 day Average Deaths



Average test positivity past 7 days 4.4%, Down 0.1% from last week

Cases have fallen from the peak, test positivity remains moderately high

14 day average hospitalizations have declined but are about 1.6 times the previous low level

7 day average deaths remain at low levels.

For the week ending 10/22, 93% of molecular tests resulted in less than 24 hours and 98% of tests resulted in less than 48 hours.

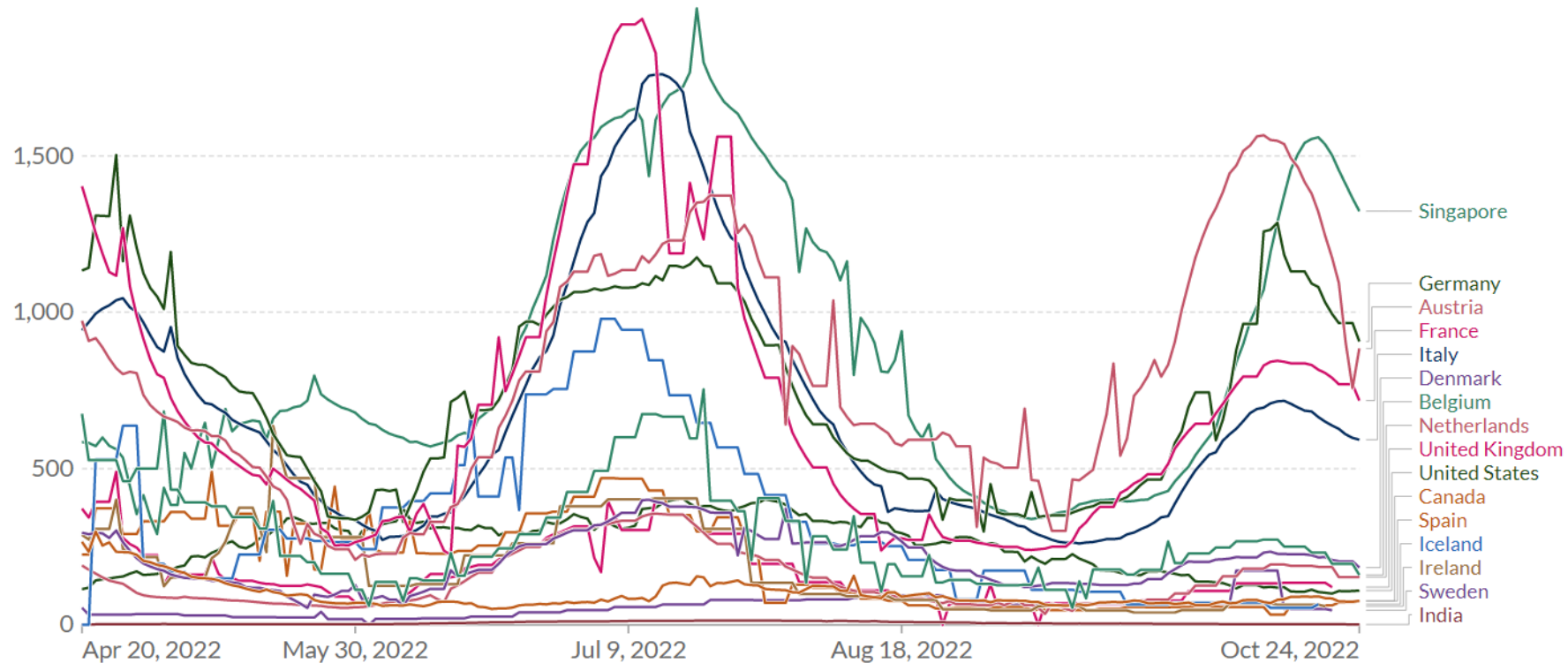
Oct 20 2022 with data as of Oct 18, 2022.

<https://covid19.ca.gov/state-dashboard/> <https://testing.covid19.ca.gov/>
COVID-19 Cases Dashboard v2.0 - CA Open Data | Tableau Pub

Daily new confirmed COVID-19 cases per million people

7-day rolling average. Due to limited testing, the number of confirmed cases is lower than the true number of infections.

LINEAR LOG



Source: Johns Hopkins University CSSE COVID-19 Data

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COVID-19 cases are beginning to plateau and start to fall in Europe and Singapore from high levels.

High levels of cases in Europe have often preceded rising cases in the US.

Waning pop. immunity likely contributed to rise of cases in addition to new immune evasive variants

BQ.1 and XBB

Highlighting the importance of booster vaccination

Variant update

- BA.5: US 62.2%, California 71.6%
- Decline in BA.5 as other variants emerge.
- Emerging variants have immune evasive properties affecting use of monoclonal antibodies
- Cases across the US are stable and at low levels, but hospitalizations are beginning to rise
- In the US there has been a rise in deaths to ~400-500/day up from a prior baseline of ~250/day.

BF.7, BQ.1, BQ1.1, XBB

- BF.7 (BA.5.2.1.7),
 - US: 6.7%
 - California 5.7%, cases are rising, Growth advantage 10-15% over BA.5
- BQ.1 (daughter of BA.5)
 - 15% growth advantage over BA.5, first reported in the UK
 - Cases have now plateaued in Europe after a period of exponential growth
 - Has immune evasive mutations impairing use of monoclonal antibodies (Evusheld and Bebtelovimab)
 - US 9.5%, California 8.1%
 - BQ.1.1 – US 7.2%, California 5.5%, In New York BQ.1.1 and BQ.1 represent approximately 28% of sequenced cases and this is growing week over week. However overall cases of COVID-19 are not rising in New York currently although hospitalizations are rising.
- XBB – XBB is a daughter of BA.2 and has mutations that prompt immune evasion. Responsible for surge in cases that has now plateaued and has led to a rise hospitalizations in Singapore. Singapore has a high percentage of people (78%) that have received 3 doses of a COVID-19 vaccine which has likely prevented an even higher number of people from getting hospitalized.

BA.2.75 and BA.2.75.2

- First detected in India, cases of BA2.75 are rising there, and it is outcompeting BA5
- BA.2.75 has multiple mutations in the spike protein of the virus which may increase infectivity and may evade the immune system. Estimated 5% growth advantage over BA.5
- Daughter strain BA.2.75.2 has a 10% growth advantage and is emerging in California
 - Resistance to Bebtelovimab and Evusheld
- BA.2.75 California: 1.9% of sequenced cases, US 1.3%, no big changes to growth
- BA.2.75.2 California: 1.8% of sequenced cases, US 1.6%

Convergent mutations in different strains

- Noticing similar mutations in the emerging strains across lineages that confer fitness advantage

[California Nowcast for variants: CalCAT](#)

CDC Nowcast for variants: <https://covid.cdc.gov/covid-data-tracker/#variant-proportions>

Paxlovid Resistance Currently Not Seen

- Currently we are **NOT** seeing signs of mutations in SARS-CoV-2 likely to impact the effectiveness of Paxlovid
- We are monitoring the genomic sequencing data for known Paxlovid resistance mutations