Covid-19, a still unpredictable future that invites us to stay alert

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Will we ever get rid of Covid-19? This question comes up periodically. After 30 months of pandemic, it reveals that a feeling of general fatigue has replaced the anguish of the first waves. Thus, two governmental decisions were welcomed with relief by the population: the suspension of the vaccination pass and the mask-wearing lifting indoors from March 14, 2022, then in public transports from May 16. However, these measures were obviously too early as an epidemic resurgence started again in early March: the 6th wave, linked to the emergence of the Omicron BA.2 sub-variant, more contagious than its predecessor BA.1. Three months later, the same scenario was repeated with the replacement of the Omicron BA.2 sub-variant by the BA.4 and BA.5 sub-variants, triggering the current 7th wave.

At the beginning of this summer, it is clear that the barrier measures are relaxed overall, that diagnostic tests are carried out less often and that vaccination is stagnating.

In a context of political transition, the government has preferred to give priority to recommendations and to call for individual responsibility rather than to impose new constraints, especially for mask-wearing.

Vaccination coverage has stopped progressing since the vaccination pass is no longer required. The recommendations [1,2] for a second booster dose after a delay of 3 months from the age of 80, or after 6 months for 60-79 old, were only followed by 37.1% and 28.5% of eligible persons, respectively; many of them felt protected by a Covid infection contracted during the 6th wave, while others preferred to wait for second generation vaccines to be marketed.

The evolution of the pandemic over the next few months remains completely unpredictable. Modelling attempts are becoming increasingly hazardous with the disparity in immune status, due to the number of past infections and vaccine doses received, and the uncertainties regarding the phylogenetic evolution of SARS-CoV-2. The Centaure BA.2.75 sub-variant, derived from the Omicron BA.2 sub-variant, was detected in India in early May and has since spread to several countries around the world; it is provisionally classified as “under surveillance” by WHO but the speed of its spread could make it the agent of a new epidemic wave.

Although the occupancy rate of critical care beds by Covid patients is still less than 25%, its daily growth raises fears of episodes of hospital saturation during the summer or in the autumn.

In this very uncertain situation, where case-by-case measures are proving both unpopular and ineffective, the French National Academy of Medicine recommends to redefine a control strategy with two main objectives: (1) to avoid hospital overload, (2) to prevent the probable 8th wave in September. Therefore, it recommends in particular:
- to rapidly increase the vaccination coverage rates of people at risk of severe forms according to the recommended schedule [1,2], without forgetting people aged under 60 and carrying co-morbidities;

- to maintain continuous surveillance of circulating SARS-CoV-2 clones to detect early the emergence of new variants;

- to remind public opinion, through regular information messages, that the pandemic is not over, that it may jeopardize the start of the school year in September and that barrier measures and the wearing of masks should be reinstated, especially in public transport.
