

Joint Committee on Health, 15th September 2021 – NPHE Update on COVID-19

Opening Statement of Dr Tony Holohan, Chief Medical Officer, DOH

I thank the Chair and members of the committee for the invitation to update them on our COVID-19 response. I am joined today by Deputy Chief Medical Officer Dr Ronan Glynn and Professor Philip Nolan, the Chair of our modelling group. I will provide an update on the current epidemiological situation, the impact that our Vaccination Programme is having on the risk profile of the disease, and recent developments regarding further easing of public health restrictions. I also have a short slide set with me today and I can take members through that if it is of value in better describing the current epidemiological situation.

The last eighteen months has seen a considerable burden placed on individuals, communities, and society as a whole. I wish to thank the public for their solidarity to date and their continued efforts to help stop the spread of COVID-19. I also wish to extend my sympathies to those who have lost loved ones to COVID-19 despite our collective best efforts.

The epidemiological situation in Ireland at present indicates high incidence with an uncertain trajectory. While incidence in those aged 19-24 and 13-18 years has fallen in recent weeks, we have noted an increase in testing rates and confirmed cases in those aged 5 to 12 years. This trend, and in particular the impact of the return to school and the opening of the third level sector, will continue to be monitored closely over the coming weeks.

The total number of confirmed cases of COVID-19 in hospital has begun to reduce and the total number of confirmed cases in ICU has stabilised recently. There continues to be low mortality relative to the number of COVID-19 cases. While the majority of infections are occurring largely in the young, unvaccinated population, the current force of infection is resulting in a significant number of infections in older, vaccinated people. At the same time, the number of outbreaks notified in settings with vulnerable populations, such as Nursing Homes, has increased in recent weeks and this is being closely monitored.

Ireland's COVID-19 Vaccination Programme continues to make significant progress. As of 14th of September 88% of those aged 16 years and over are now fully vaccinated, with 90% having received at least one dose (includes partially vaccinated and J&J). Vaccine uptake and completion has been very high in all age groups (ranging from 81% completion in those aged 16-49 years, through to 95% completion in those aged 50-69, to an almost universal vaccination, in those aged 70 and over. However, vaccination has been offered to younger people relatively recently, and many younger cohorts have yet to receive their second dose. Those aged 16-29 years, given their high levels of social contact and partial vaccination, have the potential to sustain a large wave of infection until such time as this cohort achieves very high levels of immunity. Fortunately, uptake in younger cohorts has been very high.

COVID-19 vaccines are providing very effective protection from severe illness and have fundamentally changed the risk profile of this disease. This will facilitate a transition in our approach to managing the pandemic over the medium term, entailing a shift from a focus on regulation and population-wide restrictions to one based on public health advice which will facilitate the exercise of personal judgment and personal protective behaviours.

However, notwithstanding the great benefits that vaccines have brought, it is likely that the Delta variant will continue to circulate extensively over the coming months, particularly among individuals

who have not yet been vaccinated or those who have not been sufficiently protected through vaccination.

In the context of this highly transmissible variant, it is unlikely that vaccination alone, even at the high levels of vaccine coverage that we have now achieved, will bring the effective reproduction number below 1 such that we will achieve suppression of the disease. This means that through this coming autumn and winter, possibly in the face of high levels of infection, we will remain dependent upon public understanding and buy-in to the basic public health measures in order to minimise opportunities for this virus to transmit. Therefore, there will be an ongoing requirement for:

- clear guidance and communication for the public on the evolving disease profile and the strategies they can take to mitigate risk;
- a focus on the importance of rapid self-isolation if symptomatic;
- a partnership approach between employers and employees to ensure that the importance of self-isolating when symptomatic is understood, communicated and facilitated;
- sector-specific measures to ensure safe environments, including formal requirements for mask wearing in healthcare settings, indoor retail, and public transport;
- robust public health surveillance and response capacities, including testing, contact tracing, surveillance and sequencing capacities for COVID-19.

Throughout the pandemic, focus has remained on protecting those most vulnerable to the severe impacts of COVID-19 and on protecting health and social care, education, and childcare services, and these must continue to be prioritised.

The continued burden of COVID-19 and the significant backlog of non-COVID care, due to both the demand for COVID care in the early part of this year and the recent ransomware attack, means that our health and social care system, and in particular our hospital system, remains in a challenging position. Should COVID-19 admissions begin to increase once again, this will place additional pressure on the hospital system and will have a significant impact on the delivery of non-COVID care.

We cannot predict with certainty the future trajectory of the disease and, consequently, we cannot fully rule out the possibility that the reintroduction of measures may be required in the future. We must continue to ensure our response is agile and flexible, with an ability to pivot rapidly and respond to any emerging threat.