

**Oregon Health Authority Media Briefing, July 20, 2022**  
**Dean Sidelinger, MD, MEd, Health Officer and State Epidemiologist**

Good morning, I'm Dr. Dean Sidelinger, health officer and state epidemiologist at Oregon Health Authority. Thank you for joining us for our July update on the state's continued response to COVID-19.

Today I'll be providing information on the state's ongoing measures to safeguard and care for Oregonians as well an update on the state's ongoing efforts addressing the outbreak of hMPXV (human monkeypox virus), which was first detected in Oregon last month.

Since OHA's last update, on June 17, daily reported case counts have leveled, from a rolling seven-day average of 1,455 cases reported on June 17, to 1,400 reported on July 17. This mirrors what the Centers for Disease Control and Prevention is recording nationally. In Oregon, test positivity rose slightly from 12.6% reported the week of June 17 to 13.9% reported the week of July 17.

However, we know our reported cases are not capturing the full picture because many people are taking at-home tests and results are not reported to public health, and many others are not testing. Data in Oregon and the Pacific Northwest region, as well as data collected nationally, indicate there are continued high levels of transmission.

On July 14, the CDC reported that 21 counties in Oregon are in the CDC's high COVID-19 Community level, indicating high levels of COVID-19 and increased stress on hospitals. For counties that have entered into this category, OHA and the Oregon Department of Education have encouraged schools to continue using "layered-mitigation strategies" for education settings that are operating during the summer school season.

I'd now like to highlight latest developments on the Omicron subvariants BA.4 and in particular BA.5. Both are still spreading and are causing an increase in infection, including breakthrough cases among those already vaccinated. We are seeing this in Oregon, in other states, nationally and in other countries. OHA also believes that BA.5 has gained predominance in Oregon.

One of our best tools to track COVID-19 transmission is the wastewater surveillance system that OHA implements in collaboration with OSU in approximately 40 communities statewide. OHA monitors the spread of the virus through samples collected from sewage systems. Wastewater monitoring shows high levels of COVID-19 in our communities statewide.

This month, in conjunction with the World Athletics Championships in Eugene, from July 15 to July 24, OHA and OSU are working with Lane County Public Health and UO to conduct daily sewage monitoring in Eugene for COVID-19 and other diseases.

Now, I want to highlight hospitalization numbers.

Since our last media event a little over a month ago, the number hospitalized patients with COVID-19 in Oregon has risen, likely driven by infections linked to the predominance of BA.4 and now BA.5. Hospitals are stressed across the state due to patients with COVID-19 as well as other diseases, in conjunction with impacts on the workforce from COVID-19 as we are 2 and a half years into our battle with COVID-19.

Since our June 17 update, hospitalizations for people with COVID-19 have gradually climbed, from 309 COVID-19-positive patients reported on June 17 to 424 reported today (July 20).

The Oregon Health & Science University's modeling team led by Dr. Peter Graven, published his last forecast on July 7, which said that the number of COVID-19-positive patients in Oregon's hospitals would hit 479 patients on July 12.

While this is still well below half the number of hospitalized patients with COVID-19 illness recording during the Delta and Omicron waves, when we had nearly 1,200 patients, our health care system is still stressed, particularly in Central Oregon. We recognized the prolonged strains on our hospital systems and our healthcare workers have led to burnout and turnover.

OHA continues to track COVID-19 hospitalizations and staffed bed availability while we support our state's hospital systems. We remain in close communication with

health systems, to discuss state and local COVID-19 trends and the challenges facing our health care providers and health care personnel caring for residents. We remain ready to respond to any future surges. Keeping hospital beds available, with enough hospital staff available to care for all of us, ensures the system is ready when it's most needed, for that patient needing urgent care from a car crash, cardiac event, or other life-threatening emergency.

While we're projecting there is sufficient hospital capacity to care for everyone across the state, collective efforts taken by all of us to continue to blunt the spread of COVID-19 are important. This includes being up to date with recommended vaccinations, wearing masks in crowded indoor settings and consider changing or postponing activities that promote spread while COVID-19 rates are high. This protects those we care about most and lowers community spread — keeping those critical hospital beds available when they are needed most. Taking other steps to keep yourself safe and healthy — and out of the hospital — will help our health care system weather the current strain.

I also want to share good news, particularly about COVID-19 vaccines. The vaccines, which are widely available and free to all residents, remain remarkably effective, based on the evidence, at preventing severe disease and death. Let me repeat that, even with the new variants, whether it was Delta, the initial Omicron variant, and now the Omicron subvariants BA.4 or BA5, they're still providing significant protection against severe disease and even the likelihood of dying. This is what will keep most of us out of the hospital. Getting vaccinated and being up to date with your boosters, remains our best tool.

Just yesterday, the Centers for Disease Control and Prevention endorsed the FDA's authorization for a fourth vaccine. And last night, the Western States Scientific Safety Review Workgroup met and supported the CDC recommendation for Novavax for use in Oregon, Washington, California and Nevada.

Novavax is a two-dose vaccine that does not use mRNA technology like Moderna and Pfizer. It is also not a vector vaccine, like the Johnson & Johnson product. Novavax's COVID-19 vaccine uses what's known as protein technology, where only parts of a virus are used to stimulate the human immune system. This has been used widely for decades and around the world in vaccines for shingles, hepatitis B and the flu.

Clinical trials in 2021 showed that a two-dose series of the Novavax COVID-19 vaccine was 90.4% effective at preventing any COVID-19 illness in all adults and 100% effective in preventing moderate or severe COVID-19 illness in all adults. This data was collected before the circulation of the Omicron variants.

The Novavax vaccine will not immediately be available, but should be in Oregon and other states soon. Once supplies become available, Novavax will provide another safe way for you to protect yourself from COVID-19.

Nearly 7 in 10 Oregonians have completed their vaccination series. For those who have not had a chance to get up to date with your vaccine, including boosters, it's still the best tool, particularly for those at highest risk of preventing. You can find vaccines at clinics, pharmacies and at vaccine clinic sites.

We also want to remind older residents and adults at high risk who do get COVID-19 that the highly effective treatment called Paxlovid is available as a pill. You can find more information about Paxlovid and other treatments on OHA's COVID-19 website.

OHA strongly encourages anyone who may be at increased risk because of age and underlying health conditions make a plan how and where they can get tested and receive treatment, if they become ill. Residents who don't have a health care provider should contact their local health center or call 211.

I wanted to provide a quick update on Oregon's response to the outbreak of hMPXV, or human monkeypox virus.

As of yesterday (July 19), Oregon has identified a total of 32 presumptive and confirmed cases of hMPXV in four counties — Lane, Multnomah, Washington and Clackamas counties — all among men. There are more than 2,100 cases in 44 U.S. states and the District of Columbia and more than 14,500 confirmed cases in 70 countries that are considered to be part of the current global outbreak.

OHA is working with local public health authorities, tribes, and community partners to share information about hMPXV, the outbreak, and infection prevention strategies with people who might be at increased risk of infection. OHA also is

sharing information with clinicians about the outbreak, how to recognize and test for hMPXV illness and how to prevent spread.

Many of the infections in the current outbreak are from skin-to-skin contact, typically during sexual activity. People who have multiple partners, particularly ones they don't know or who have been in areas with larger numbers of cases, seem to be at higher risk. Many of the infections in the current outbreak have been among men who have sex with men.

As such, OHA and its partners have been doing extensive outreach to the larger LGBTQIA+ and queer community to share information on testing, prevention and treatment strategies so they can take steps to protect themselves from the virus.

OHA also is helping promote the availability of hMPXV vaccines, which are used to protect people who have known exposure to someone ill with hMPXV infection. Vaccination actually works to prevent or decrease disease even after someone was exposed.

At this time, OHA is working with its federal partners to secure doses of the hMPXV vaccine, which have remained in short supply. As more vaccine becomes available, OHA will work with its local public health, tribal, community and health care partners to encourage vaccination among those most at risk, and promote vaccine clinics, which are expected to begin over the next week.

As we head into the middle of summer, we hope you can enjoy the beauty that is found in abundance in our state — whether it's a park near your home, the coast, a favorite lake or river, or the mountains. Being outdoors with friends and family can be a great way to stay healthy.

Along with being up to date with vaccinations, all of us still can wear well-fitting masks, particularly when we may be around others in indoor settings. For individuals at high risk, or those who care for or who live with someone at high risk, wearing a mask in indoor public places offers extra protection. And wearing a mask in areas of the state seeing higher transmission provides protections to others around you.

And with that I will open it up to questions from reporters.