

8 December 2020

BRIEF19

A daily review of covid-19 research and policy

RESEARCH BRIEFING

Was covid-19 in the United States prior to January 19th?

Until now, the first officially recognized case of covid-19 in the US was thought to have been diagnosed on January 19th, despite ongoing suspicion that SARS-CoV-2 could have been present here well beforehand.

A new study in [*Clinical Infectious Diseases*](#) offers some significant evidence to back up the theory that some low level of disease was circulating in parts of the US prior to that date. Researchers examined over 7,000 routine blood donations collected by the American Red Cross between mid-December of 2019 and mid-January of 2020. The samples, which were collected across nine states (CA, CT, IA, MA, MI, OR, RI, WA, WI), were tested for SARS-CoV-2 antibodies against the “spike” protein (the characteristic binding protein found on the SARS-CoV-2 molecule).

Of the 7,389 samples tested, 106 were positive for the antibody, or 1.4 percent of the samples. Out of these 106, 90 samples were available for additional testing, of which 84 demonstrated the ability to confer immunity. Positive samples were found in each of the nine states. The earliest cases were from the December 13-16 sample group in California, Oregon and Washington. This evidence strongly suggests that covid-19 was present in the US *prior* to January 19. Nevertheless, we still know that widespread transmission did not occur until February, as no notable clusters of unusual respiratory illnesses were reported, suggesting that these early cases were likely asymptomatic or mild, and that transmission was minimal.

We often hear stories of people who “got very sick” in December and January who are convinced that they contracted covid-19. This study shows that this is technically possible. But while 1.4 percent of 7,389 samples is actually an unexpectedly high number of infections to have been detected on US soil prior to January 19th, the likelihood is that most of these cases were asymptomatic. After all, giving blood while sick is not permitted, and most blood donors are young and healthy. If there had been 1.4 percent prevalence among older persons with more medical comorbidities, the US outbreak would have been patently obvious in December and January. Because it was not, we can assume that most of these early cases were clinically irrelevant. In reality, most people who “got very sick” in December and January likely had another virus, such as influenza, RSV, or a myriad of other flu-like illnesses. In fact, they very well made have had one of a number of other coronaviruses, which can cause similar symptoms to seasonal influenza. But it’s unlikely that they had *the novel* coronavirus.

—*Christopher Sampson, MD, FACEP*

POLICY BRIEFING

President-Elect Biden announces Becerra as pick to lead HHS. Who is he and why does Donald Trump dislike him so much?

California Attorney General Xavier Becerra has been tapped by President-Elect Joe Biden's to be the next Secretary of Health and Human Services (HHS), a role that would be at once novel and familiar to him. Despite never having worked in healthcare before, his acumen has garnered him significant praise from health policy leaders given his past work. Notably, he first helped steer the Affordable Care Act (ACA) in 2009 and 2010 as a member of the House of Representatives and his commitment to protecting the ACA has continued since. This past November, he argued for the preservation of the ACA before the Supreme Court in *California v. Texas*, with particular attention paid to covid-19 constituting a pre-existing condition.

In addition to the expected ongoing work defending the ACA as the HSS Secretary, Becerra will work on the administration's response to covid-19. Last month he again outlined the importance of the ACA: "covid-19 has made one thing undeniable; we must safeguard the Affordable Care Act—lives depend on it." His record in the healthcare sphere has been widely recognized, as he was called, "perhaps the biggest thorn in President Trump's side on the ACA, reproductive health and immigrant rights," by Larry Levitt, Executive Vice President of the Kaiser Family Foundation.

In addition to Becerra's healthcare policy background, he has proven an outspoken opponent of the Trump administration's immigration agenda. In light of the covid-19 pandemic, he also [called on](#) the Trump Administration to release immigrants without significant criminal histories from detention centers, to prioritize those in poor health and to take other affirmative steps so as to reduce the spread of covid-19 in immigrant detention facilities.

Of particular note, Becerra would be making history as the first Hispanic/Latinx HHS Secretary if confirmed. This equity milestone is further underscored by the fact that the Hispanic/Latinx community has been disproportionately affected by the covid-19 pandemic. His voice and representation would be a welcome advocate to the Biden-Harris cabinet.

—Miranda Yaver, PhD

Dr. Rochelle Walensky named Centers for Disease Control and Prevention Director

It's unusual to personally know someone nominated for a position as lofty as the Director of the United States Centers for Disease Control and Prevention. But over the last six months I've had the chance to get to know President-elect Biden's nominee for CDC director, Dr. Rochelle Walensky via [research](#) that I led and that she supervised. I can tell you all that she's an academic powerhouse and a down-to-Earth person who is great to work with.

The politics of running the CDC will be an enormous challenge. But Dr. Walensky's appointment signals that science, expertise, and data-driven policies will once again be at the forefront of our nation's preeminent public health agency. —Jeremy Samuel Faust, MD MS