

SARS-CoV-2 hotspots in NYC: Risk of city-wide resurgence and impact of policies

October 22, 2020

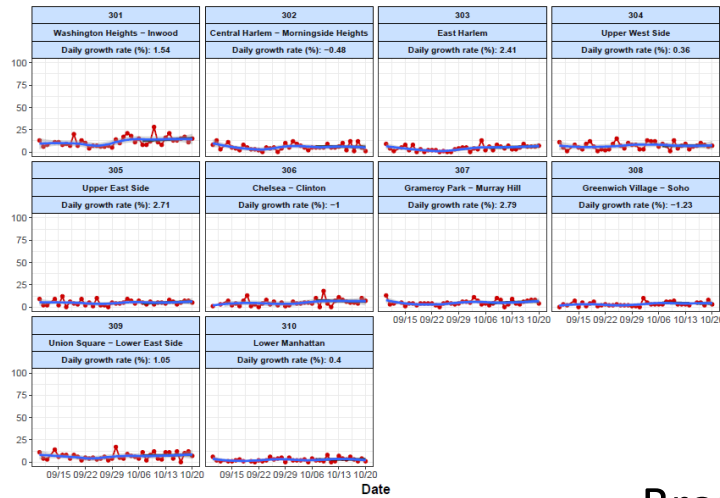
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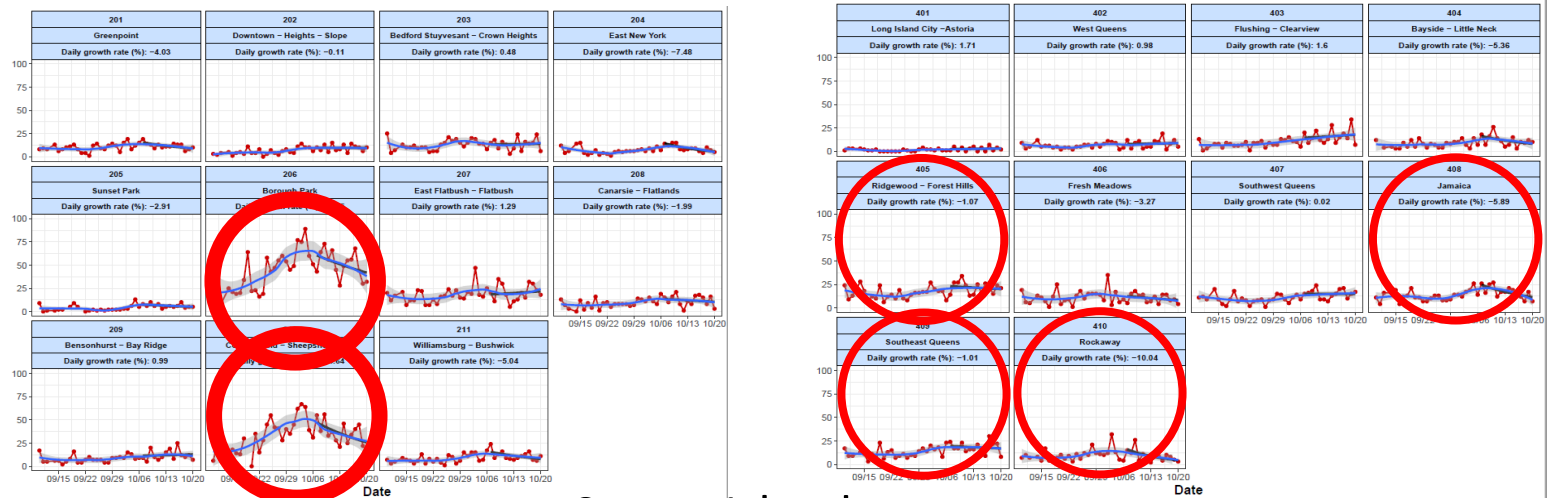


Exponential growth in cases has abated in neighborhoods with hotspots, but cases remain elevated above summer levels

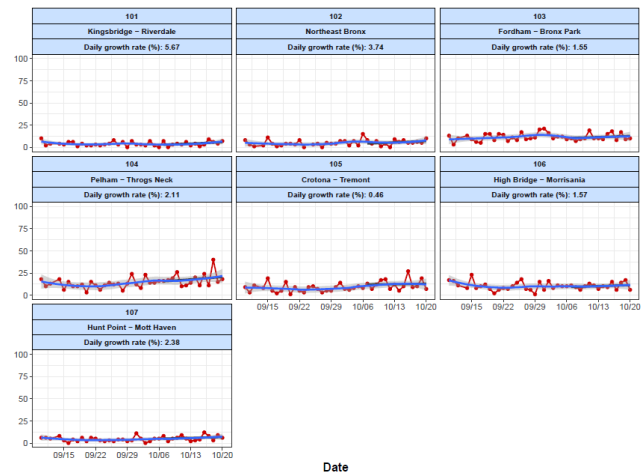
Manhattan



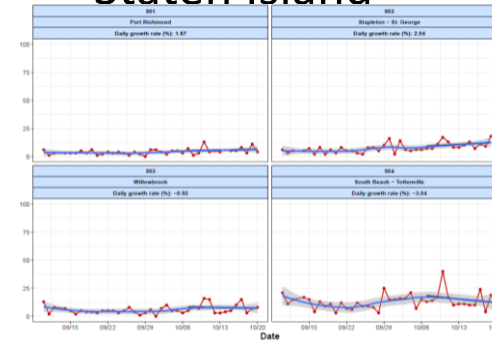
Queens



Bronx

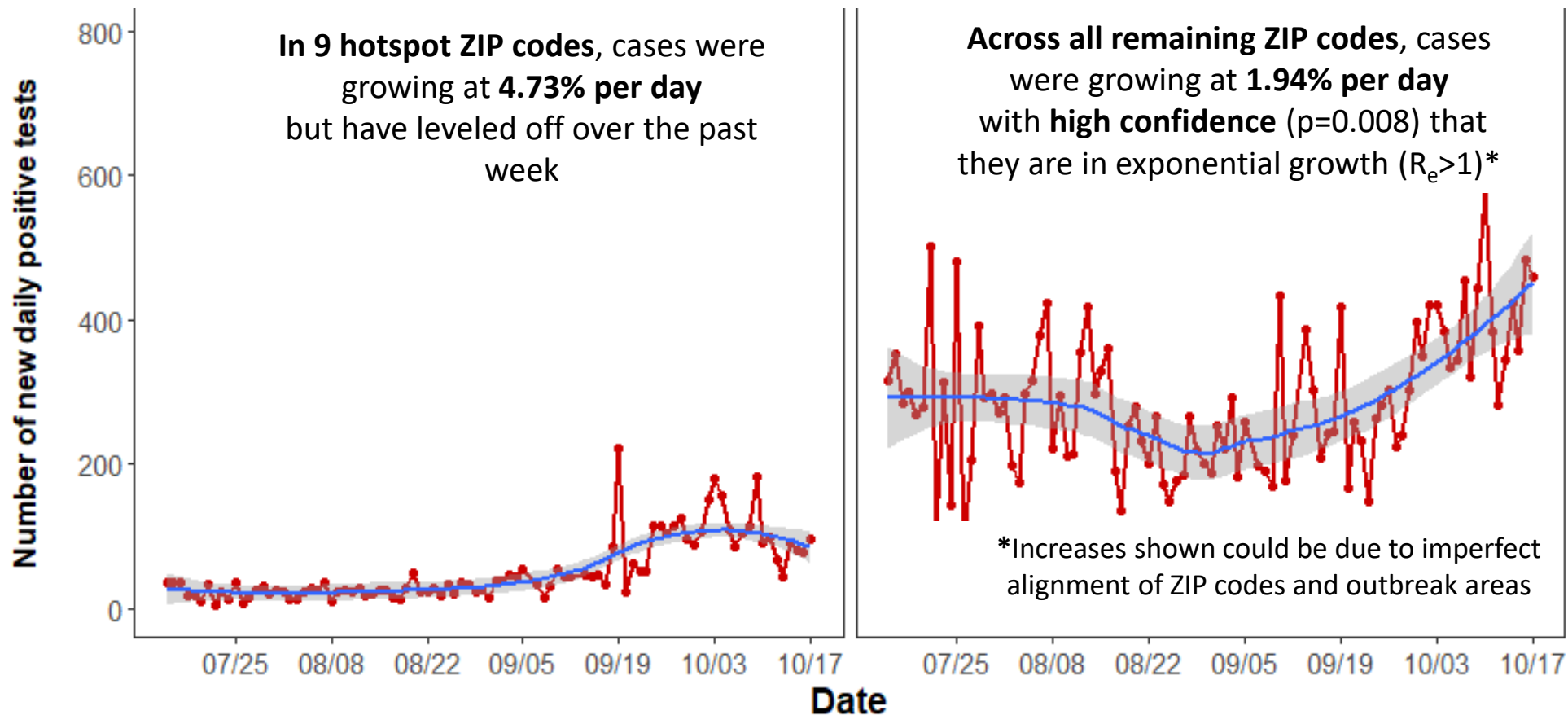


Staten Island



Unclear whether entire city is primed for exponential growth

- City-wide cases growing at 1.9% per day
- Pattern is distinct from summer ups and downs
- R_e could increase to autumn weather, waning immunity, social/work/education activities

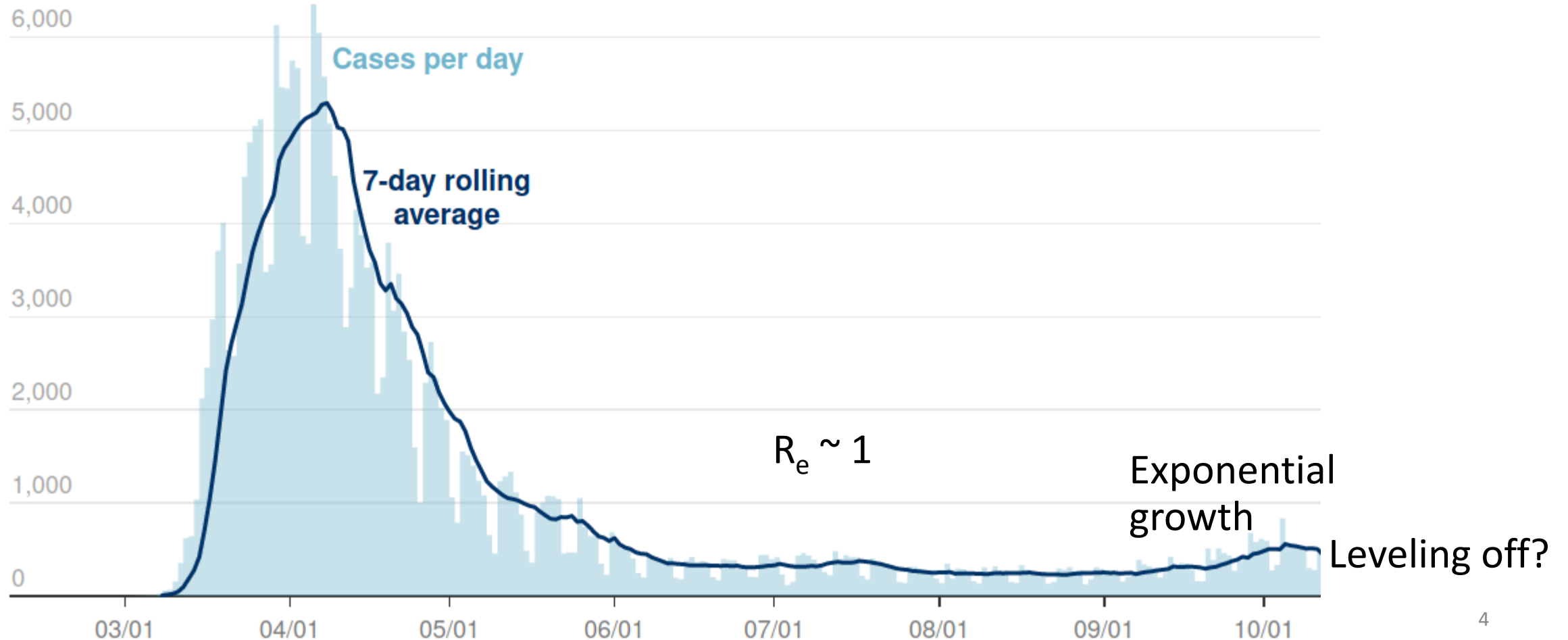


Probability of a transient uptick consistent with summer, when excluding 9 hotspot ZIP codes:

Date	Probability*
2020-10-11	0.018
2020-10-12	0.293
2020-10-13	0.208
2020-10-14	0.030
2020-10-15	0.141
2020-10-16	0.129
2020-10-17	0.008

Second wave, blip, or new setpoint?

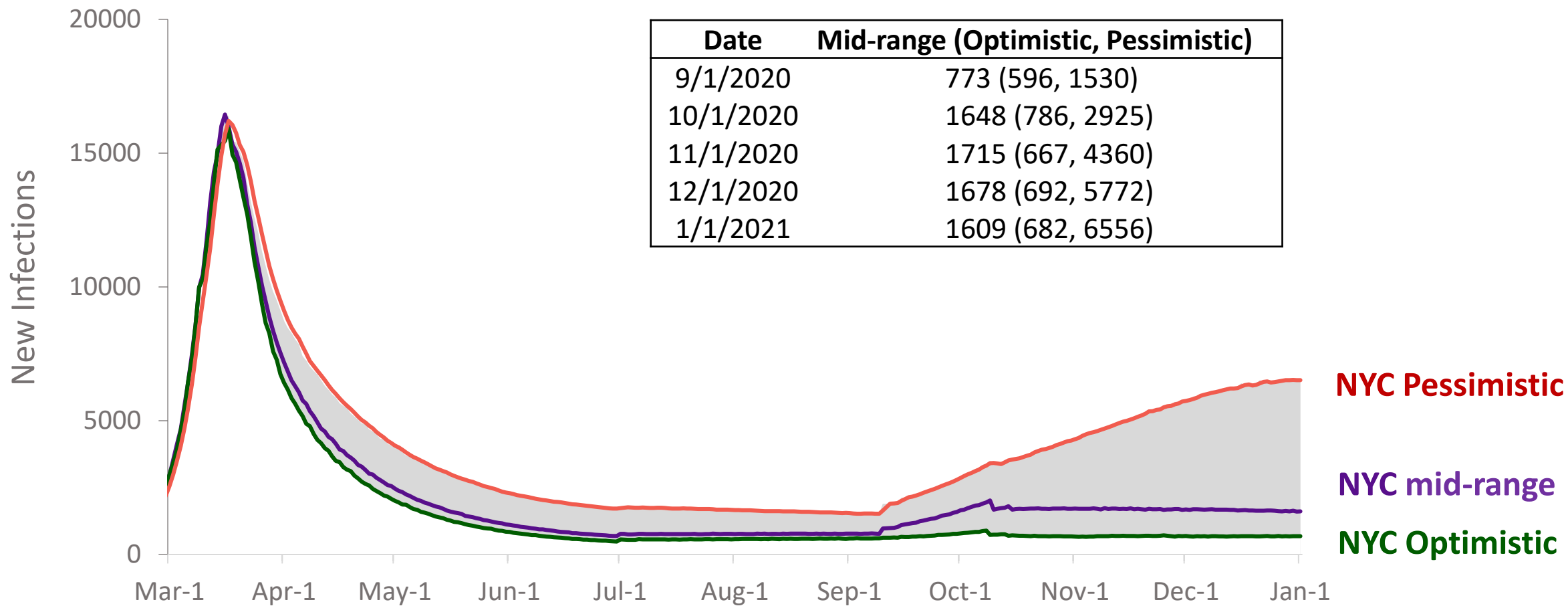
- Increase in NYC cases may be leveling off at a higher setpoint
- Optimistic outlook: hotspots decline to previous baseline
- Pessimistic outlook: entire city primed for outbreaks, exponential growth



Model scenarios to examine today

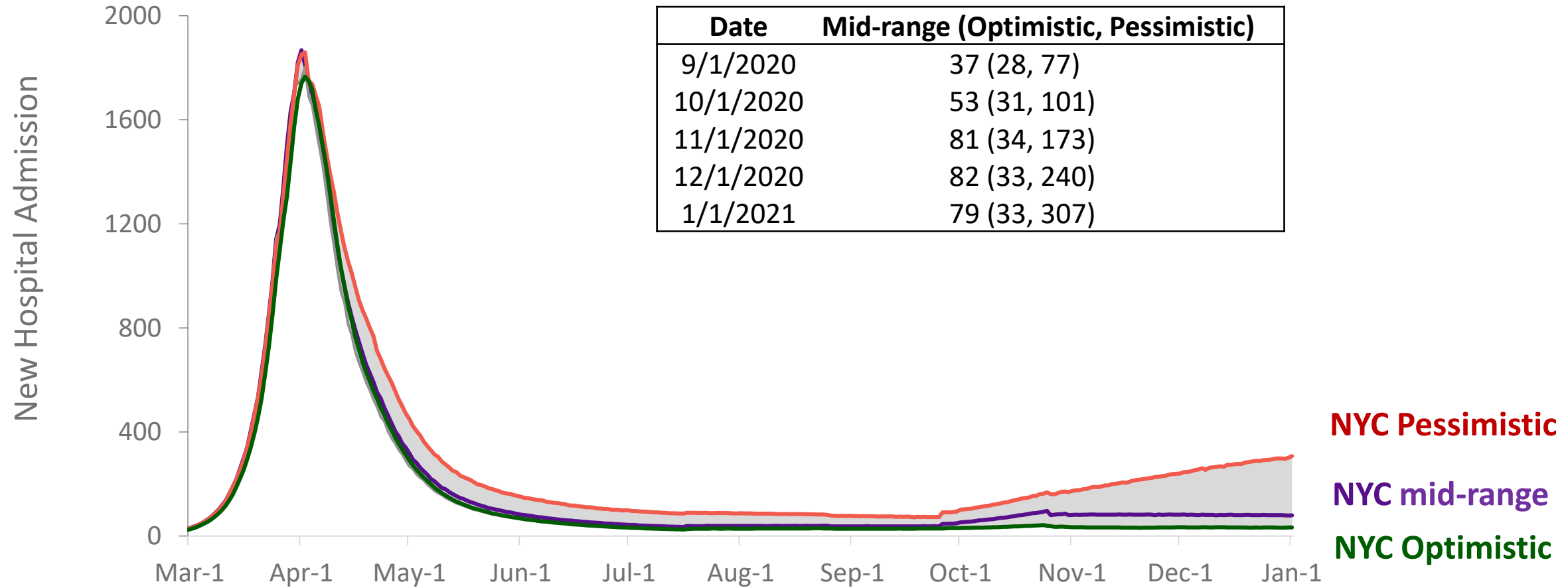
- Middle scenario
 - Uses model's best fit to hospitalization, ICU, and deaths data
 - Assumes infections grew exponentially in hotspots and city-wide starting Sept 10th, but stopped growing on Oct 9th, establishing a new setpoint with $R_e \approx 1$
- Optimistic scenario
 - Uses model's fit to the lower bound on hospitalization, ICU, and deaths
 - Assumes cases grew exponentially only in hotspots, and then hotspots were extinguished by policy
- Pessimistic scenario
 - Uses model's fit to the upper bound on hospitalization, ICU, and deaths
 - Assumes infections will continue to grow exponentially in hotspots and city-wide

NYC Daily New Infections



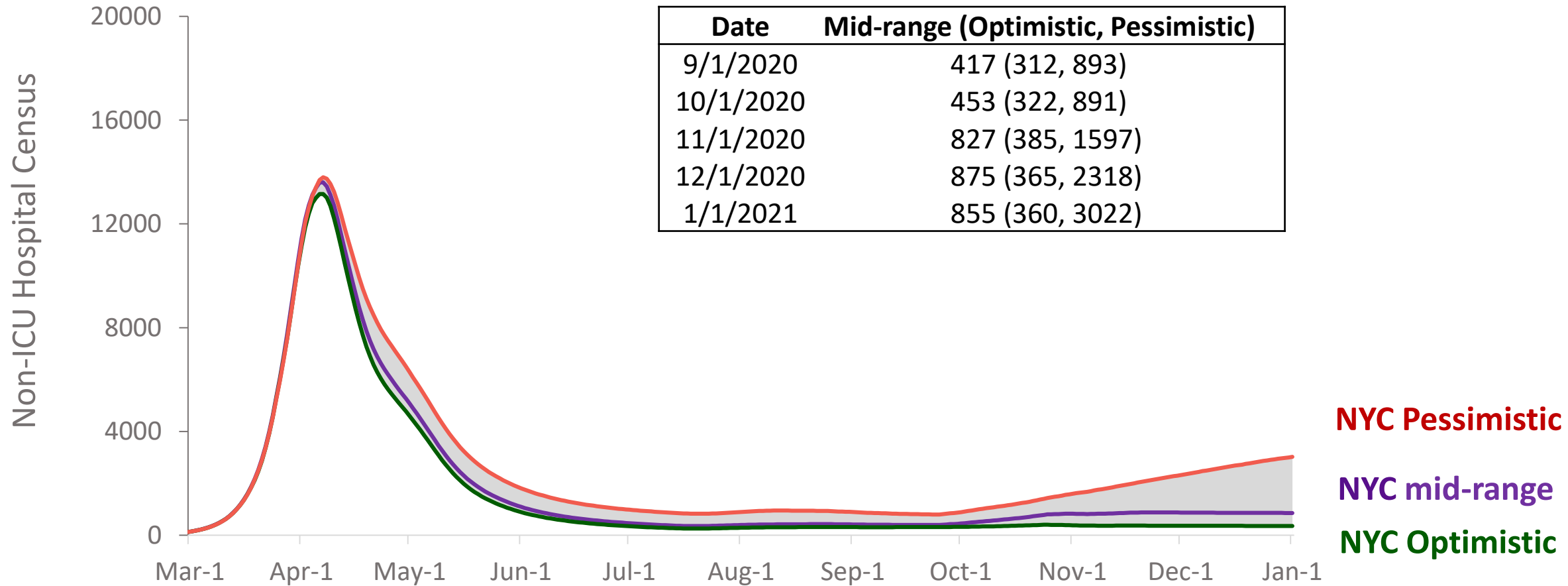
R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

NYC New COVID Daily Hospital Admission



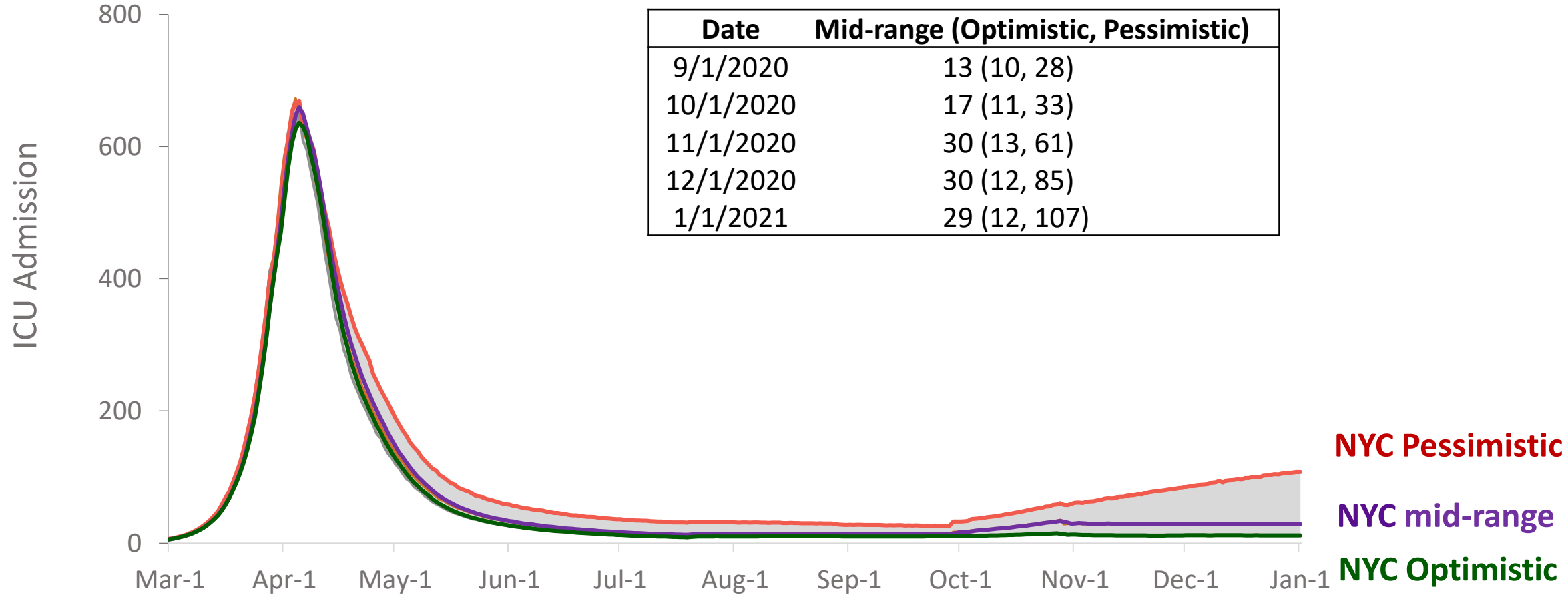
R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

NYC Non-ICU COVID Hospital Census



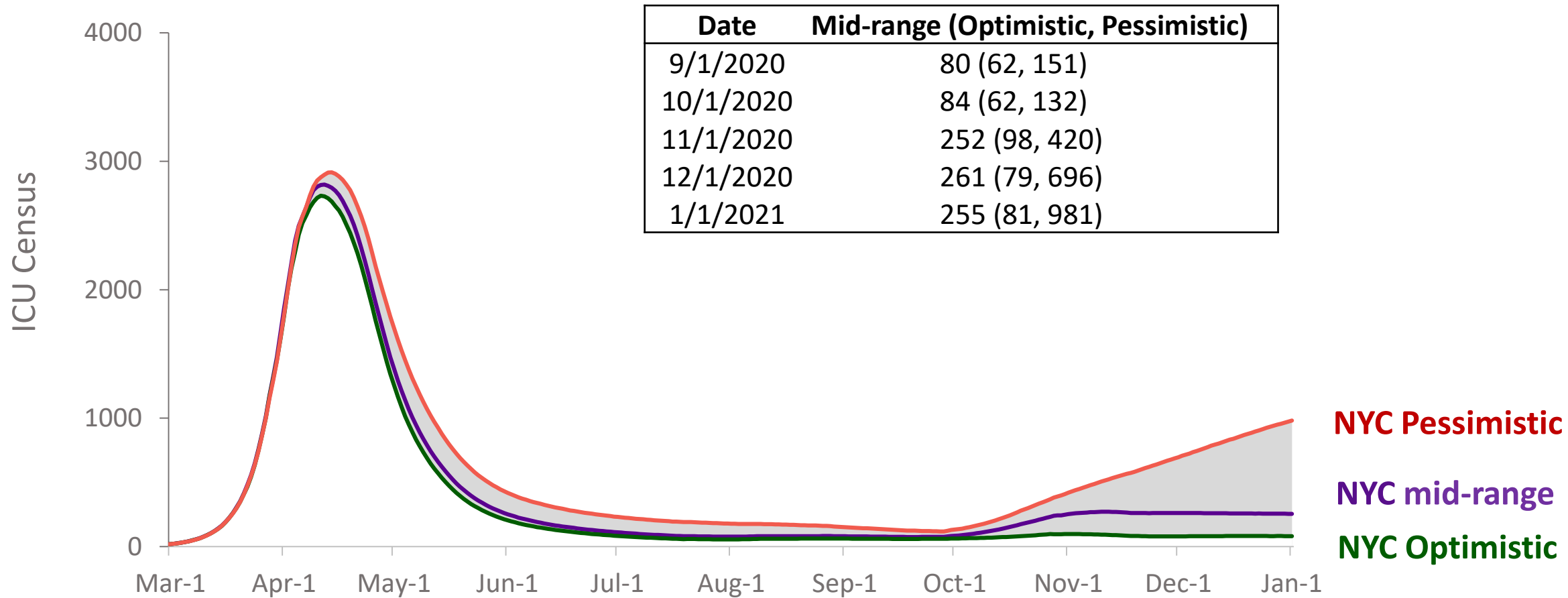
R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

NYC ICU COVID Admission



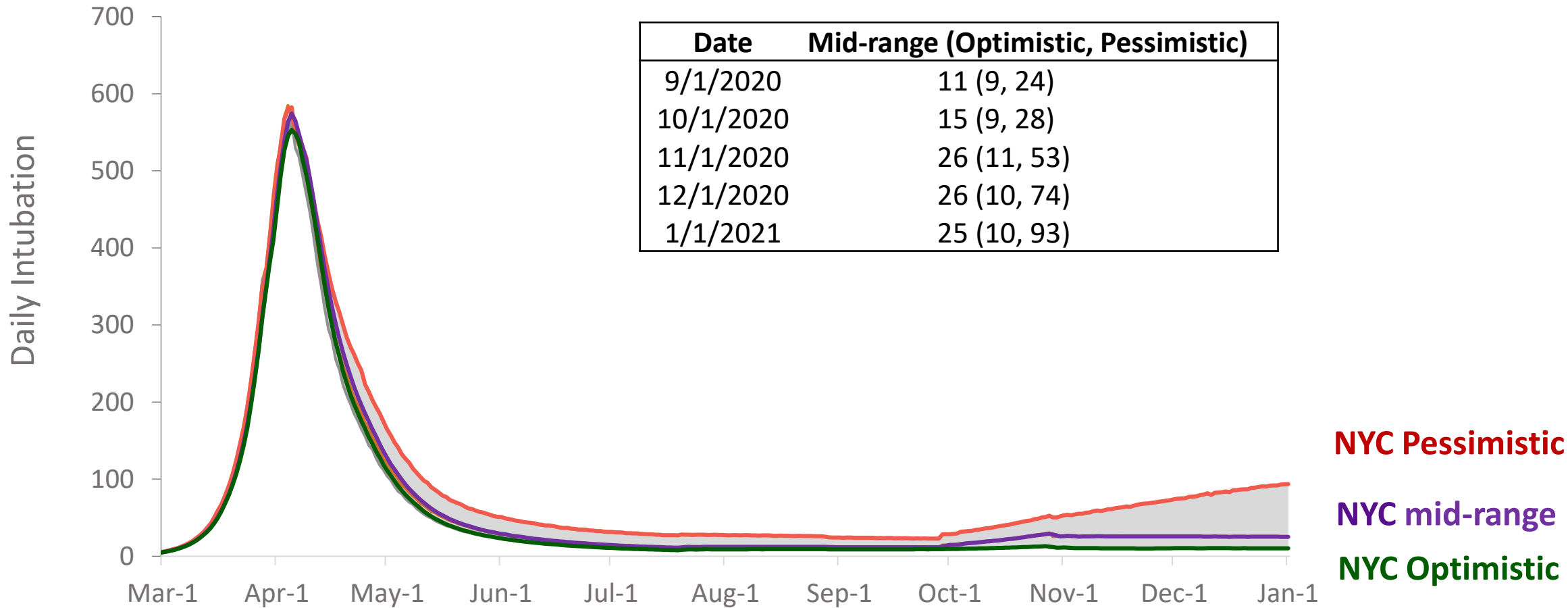
R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

NYC ICU COVID Census



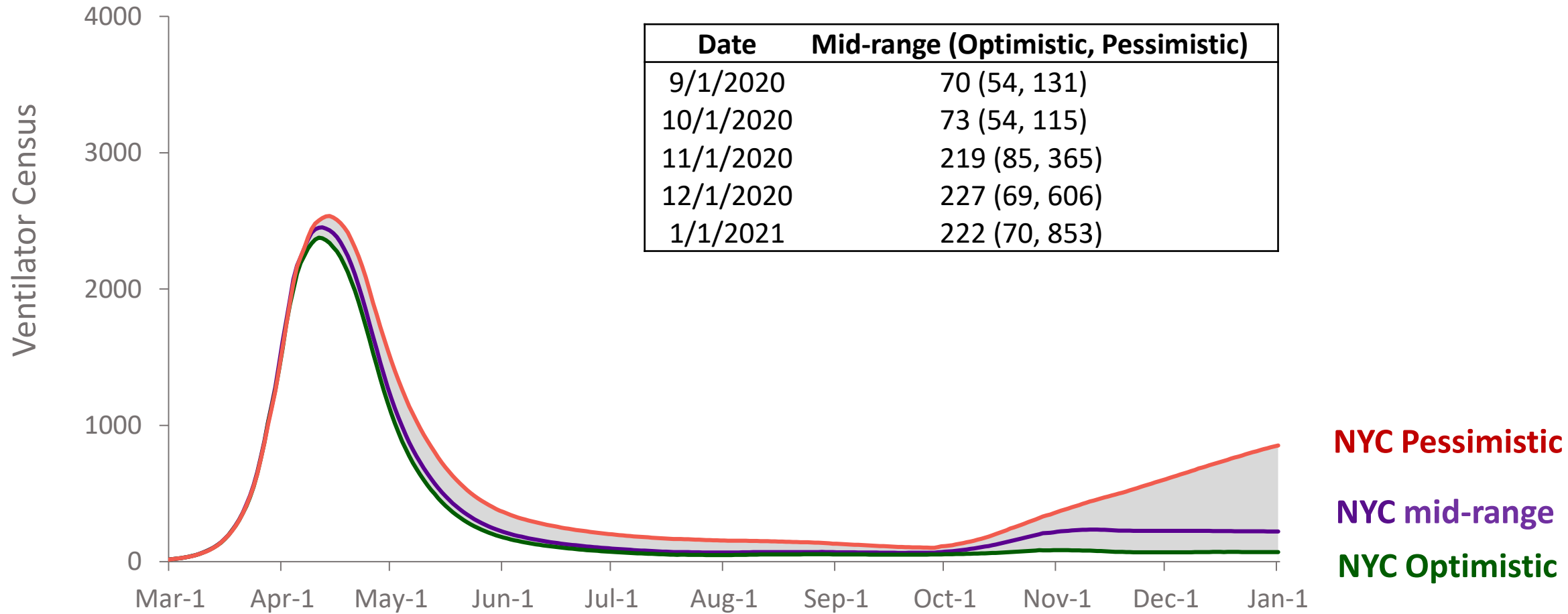
R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

NYC Daily Intubation



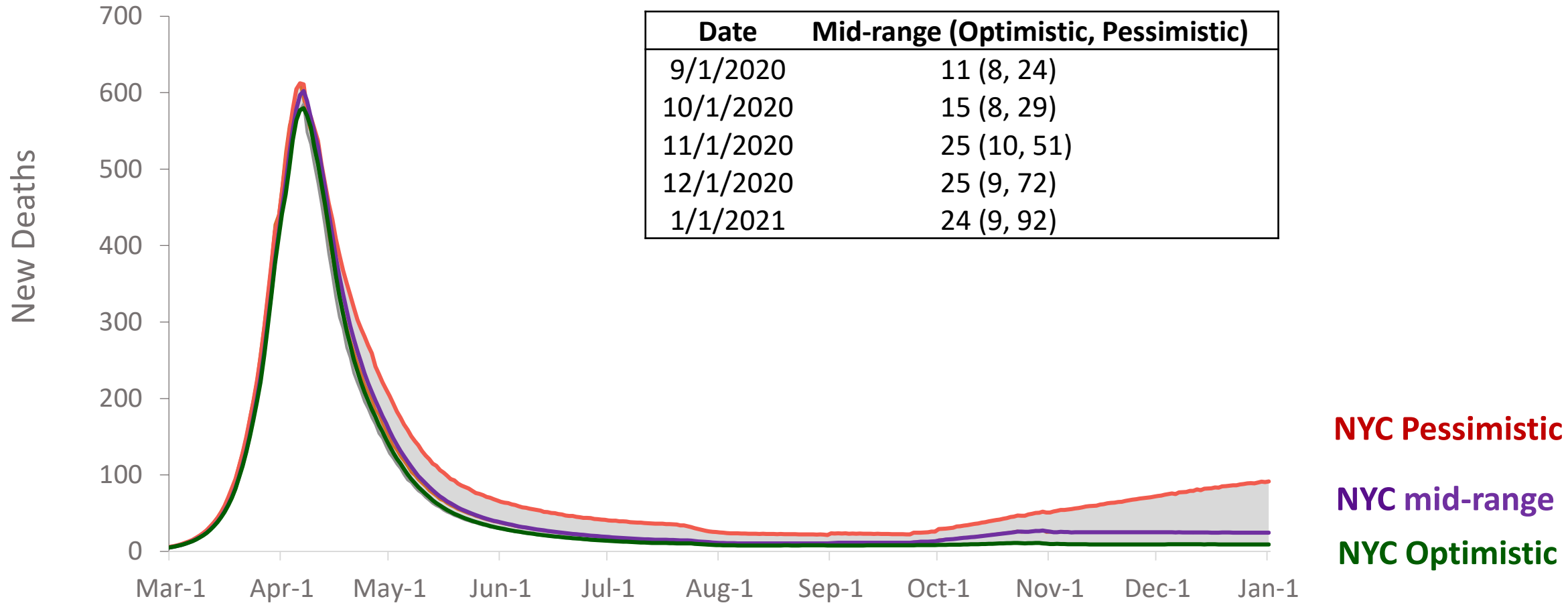
R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

NYC Ventilator Census



R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

NYC New Daily COVID Deaths



R_e represents the current effective reproduction number of the epidemic. NYC mid-range represents R_e remains ~ 1 , inferred from NYC mobility data together with NYC COVID data.

Conclusions

- Upticks in recent weeks are distinct from transient upticks seen throughout the summer.
- Sept-Oct growth in cases was confined to specific neighborhoods.
- Exponential growth appears to have abated, unless testing has declined.
- If hotspots can achieve summer-level R_e , the epidemic will stabilize at a higher level.
- If hotspots adhere to precautions with $R_e < 1$, there will be only transient increases in SARS-CoV-2 in hotspots and city-wide, soon declining to pre-hotspot levels.
- If $R_e > 1$ due to changes such as weather and school/work/social habits, outbreaks will become increasingly common, with epidemic growth expected on average.
- No scenario has a second wave that is as severe as the first wave by end of 2020.