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To date, the United States has witnessed more than 356,000 deaths over the past eleven months of the pandemic—by far the highest total for any country worldwide. Here is what 15 medical experts told us what could come next.

by Ethen Kim Lieser

With nearly 78,000 deaths, December was the deadliest month of the ongoing coronavirus pandemic in the United States.

How will January fare? It appears that more misery is in the offing as the nation's top health officials have warned that even more people will likely die this month despite vaccine campaigns ramping up in many states.

According to data compiled by Johns Hopkins University, the United States over the past week has averaged roughly twenty-six hundred coronavirus-related deaths each day—meaning that nearly two Americans fall victim to the virus every minute.

During that period, Arizona, Tennessee, and South Carolina registered the most new cases per capita, while Kansas, Wyoming, and New Mexico were the hardest hit in terms of most deaths per capita.

To date, the United States has witnessed more than 356,000 deaths over the past eleven months of the pandemic—by far the highest total for any country worldwide.

Moreover, the coronavirus was likely the third leading cause of death in the United States in 2020, behind only heart disease and cancer, according to statisticians at the U.S. Centers for Disease Control and Prevention.

From the provisional data, the agency estimated that there were between 316,252 and 431,792 excess deaths last year, adding that “death certificate data through that point show over 301,000 deaths involving COVID-19, which would likely place it third among leading causes of death.”

Those figures are indeed downright frightening, but will this troubling trend continue well into 2021? To get this important answer, the *National Interest* reached out to fifteen medical experts across the United States. Here is what they had to say.

Dr. Lee Riley, Professor and Chair of the Division of Infectious Disease and Vaccinology at the University of California, Berkeley

“The overall mortality from COVID-19 is estimated to be around 1 percent in the United States, so if we indeed end up with 250,000 to 300,000 cases per day, the daily number of deaths could increase by up to (more than) 3,000 per day.”

Dr. Daniel J. Van Durme, Chief Medical Officer of the Florida State University COVID Program and Senior Associate Dean for Clinical and Community Affairs

“Hard to predict how high the number of deaths will go, but as we see a surge in cases in the coming days, we will certainly see a surge in deaths in the weeks that follow. I would be deeply saddened, but not surprised, to see daily death rates in the 3,000 to 4,000 range.”

Dr. Jill Foster, Pediatric Infectious Disease Physician at the University of Minnesota Medical School and M Health Fairview

“The number of deaths is like Russian roulette with a variable number of cylinders loaded. How many hospital beds are available and staffed, how many individuals are competing for them, how infectious is the virus, how many individuals are ‘bulletproof’? None of these factors are currently going in the right direction, so the numbers do not have a maximum yet. We continue to have regional shortages of healthcare resources—both personnel and materiel. If a more infectious form of the virus becomes predominant, there will be more people ill and needing treatment. The current age-specific

mortality rate for all ages is 699/million, but in those over eighty-five, it is 10,700/million, so even a small shift in those who are getting sick towards the more vulnerable will cause rates to skyrocket even more. Short of major change in people's behaviors so that the rates go down, a vaccine providing immune protection is the best hope for bringing both total cases and mortality down."

Dr. Glen P. Mays, Chair and Professor in the Department of Health Systems, Management and Policy in the Colorado School of Public Health at University of Colorado Anschutz

"Trends in deaths tend to lag behind trends in cases by several weeks. If the case volume truly has begun to flatten out over the past several weeks nationally, then we can expect deaths to do the same in the coming weeks. Hopefully, this means that the high-water mark in deaths for this winter season has already been reached, if we can maintain high levels of compliance with control measures. But even if this flattens out to 1,500 deaths per day, we will still have a tragically high mortality rate on our hands and a leading killer of Americans."

Dr. Joe K. Gerald, Associate Professor of Public Health Policy and Management at the University of Arizona

"Trends in COVID-19 fatalities will ... follow those of COVID-19 cases. Therefore, this number is likely to continue to increase for the coming weeks as well and will not peak until two to three weeks after cases peak. The number of Americans dying from COVID-19 is a national tragedy, as many of these deaths were preventable had more effective mitigation policies been in effect and more Americans complied with them. It will be one of the worse public health failures of this century."

Dr. Prathit Kulkarni, Assistant Professor of Medicine-Infectious Disease at Baylor College of Medicine

“If there were about 2,500 deaths per day for one month even, that would be about 75,000 deaths in a month. It is quite possible that we could have a significant number of deaths in January, February, and March. I am hopeful these numbers will decline over time as more people receive the vaccine. Our treatment strategies for COVID-19 have improved over the last several months, but if the total number of new cases remains high, even if proportionally the mortality rate is lower, still the absolute number of deaths could be quite high.”

Dr. Dean Winslow, Infectious Disease Specialist at Stanford Health Care

“I am afraid we will continue to see cases rise until at least 75 percent of the U.S. population is immune (by either vaccination or natural infection). Our rollout of vaccines has been very slow in the U.S. It is very important we strictly adhere to mask-wearing in public, avoid indoor gatherings, and unnecessary travel in the U.S. with cases exploding. ... Just doing the math, this is 14,000 to 21,000 deaths per week.”

Dr. Wes Van Voorhis, Professor of Allergy and Infectious Diseases at the University of Washington School of Medicine and Director of the Center for Emerging and Re-Emerging Infectious Diseases

“The Institute for Health Metrics and Evaluation (IHME) estimates the number right now is 3,480 deaths a day. They estimate that with current mandates, the number will go as high as 3,886 a day in late January. If current mandates are eased, they estimate the death rate per day could go as high as 5,500 a day in early March. Note that peaks in COVID-19 deaths generally come a couple of weeks later than infection peaks, because of the prolonged time of severe COVID-19 after the initial infection. ... This is without taking into account holiday travel or the new, more transmissible mutant strains. So, the numbers could get greater than the IHME has predicted.”

Dr. Cindy Prins, Clinical Associate Professor of Epidemiology at the University of Florida

“My general thought about 2,000 to 3,000 deaths per day (from) COVID-19 is that this is a devastating daily loss of life in our country. If that many people died each day in plane crashes, then we would see people refusing to get on planes. Yet, even with 2,000 to 3,000 people dying from COVID-19 per day, we still see people who are not taking precautions that are known to prevent COVID-19 transmission. That’s very disheartening.”

Dr. Cathy McCarty, Professor and Genetic Epidemiologist at the University of Minnesota Medical School, Duluth Campus

“I do not have a guess at the highest number that we could reach. Again, I am concerned because of the new variant that is spreading. Thankfully, it does not appear to be associated with higher death rates, but again, because it is much more infectious, we would expect to see higher numbers of cases and deaths if we don't get it under control.”

Dr. Matthew Abeln, Physician at Allina Health

“A significant number of the deaths we are seeing on a daily basis are tragically avoidable. Our country’s lack of a coordinated federal response is extremely unfortunate, and the insatiable libertarian streak in American culture is counterproductive during a pandemic, as we have seen over and over as people flout basic, simple public health measures in the name of having their ‘freedoms’ tread upon. All of this is magnified by the incessant politicization of the pandemic. It’s painful to watch, and it’s particularly painful to watch my patients and family members die, arguably unnecessarily. There were 818 cases in Taiwan in 2020 with just seven deaths to give some perspective on what is possible with a sane response.”

Dr. William G. Carlos, Associate Professor of Clinical Medicine at Indiana University School of Medicine

“The death number will follow cases and even more importantly, hospitalizations. We are finding patients who require hospitalization and, in particular, intensive care admissions have long hospital stays. Many are on life supportive measures for weeks before death. Therefore, I would expect the daily death count to keep increasing as we are seeing peaks of hospitalizations currently. Some places are at or near ICU capacity, such as in California and Alabama.”

Dr. Perry N. Halkitis, Dean of the Rutgers School of Public Health

“Of course, there will be a rise in deaths. First, we have detected up to 400,000 cases in a single day on January 3. If we assume a death rate of 1 to 2 percent, then 4,000 to 8,000 of those people will die. Death rates will also likely be exacerbated by the inability of hospitals to accommodate the sick.”

Dr. Pavitra Roychoudhury, Instructor in the Department of Laboratory Medicine and Pathology at the University of Washington

“The case numbers are grim, and I think they likely represent the effects of gatherings over the holidays, since cases lag events, and deaths lag cases. ... Intuitively, we usually expect numbers to stabilize slightly after the holiday effect has passed. However, this may be complicated by the slower than expected rollout of vaccines as well as the arrival and spread of the (new) variant, which is thought to be more transmissible than other circulating variants.”

Dr. Jason Keonin, Physician and Surgeon at Northwest Iowa Surgeons PC

“I would expect (the death rate) to rise after the holidays, but it’s also possible in the next few months that we might see the vaccine start to have a positive effect on the incidence and prevalence of COVID, so hopefully, we do

see some improvement. Those are staggering numbers, probably preventable but that ship has sailed already. Not sure what the ceiling for that number could be.”

Ethen Kim Lieser is a Minneapolis-based Science and Tech Editor who has held posts at Google, The Korea Herald, Lincoln Journal Star, AsianWeek, and Arirang TV. Follow or contact him on LinkedIn.

Image: Reuters

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