

<https://www.nytimes.com/live/2022/02/19/world/covid-19-tests-cases-vaccine>

Feb. 19, 2022 Updated

Feb. 20, 2022, 11:50 a.m. ET 1 hour ago

1 hour ago

Daily Covid Briefing

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Biden extends the national pandemic emergency first declared in March 2020.

- The Omicron wave accounts for many more U.S. deaths than Delta's.
- A Covid pill from Merck showed more promise in reducing the risk of hospitalization in a recent study.
- The Canadian police cleared truckers from the center of Ottawa, making 170 arrests.
- South Korea reports over 100,000 daily cases amid an Omicron surge that shows no sign of peaking.
- New York says it won't enforce a booster shot mandate for health care workers.
- The U.S. surgeon general and his family have Covid, a reminder of Omicron's stealthy threat.
- Peek inside the Times Sunday Magazine at the future of work.

Biden extends the national pandemic emergency first declared in March 2020.



Image



A nurse administers a coronavirus test on Friday in Hagerstown, Md.Credit...Kenny Holston for The New York Times

By Vimal Patel

President Biden said on Friday that he would extend the national emergency that was first declared in March 2020 in response to the coronavirus pandemic. The additional authority had been set to expire on March 1.

The decision, contained in [a letter from Mr. Biden to Congress](#) that the White House made public, comes as a wave of coronavirus cases driven by the highly transmissible Omicron variant recedes in the United States, and many states and localities [ease pandemic restrictions](#).

But the pandemic is taking a continuing toll on the country. As of Friday, more than 75,000 Americans were hospitalized with the virus. Deaths, which lag case counts by as much as several weeks, [are increasing in 14 states](#), and remain at almost 2,300 a day nationally.

“The Covid-19 pandemic continues to cause significant risk to the public health and safety of the nation,” Mr. Biden wrote in the letter. “More than 900,000 people in this nation have perished from the disease, and it is essential to continue to combat and respond to Covid-19 with the full capacity and capability of the federal government.”

A national emergency conveys special powers. It frees the federal government from abiding by some legal constraints, allowing it to spend additional money and more easily take certain actions.

The pandemic emergency would have expired had Mr. Biden not alerted Congress of his intention to extend it.

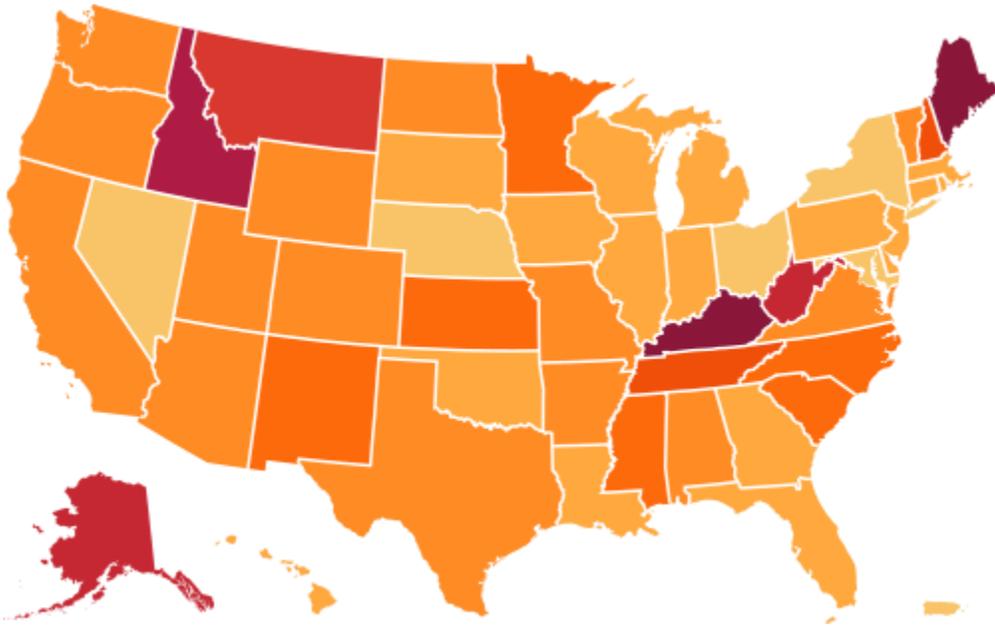
President Donald J. Trump [first declared](#) the pandemic a national emergency on March 13, 2020. Mr. Trump said that extra measures were needed to combat the virus, which at that time was known to have infected 1,645 people in the United States — a number that now exceeds 78 million.

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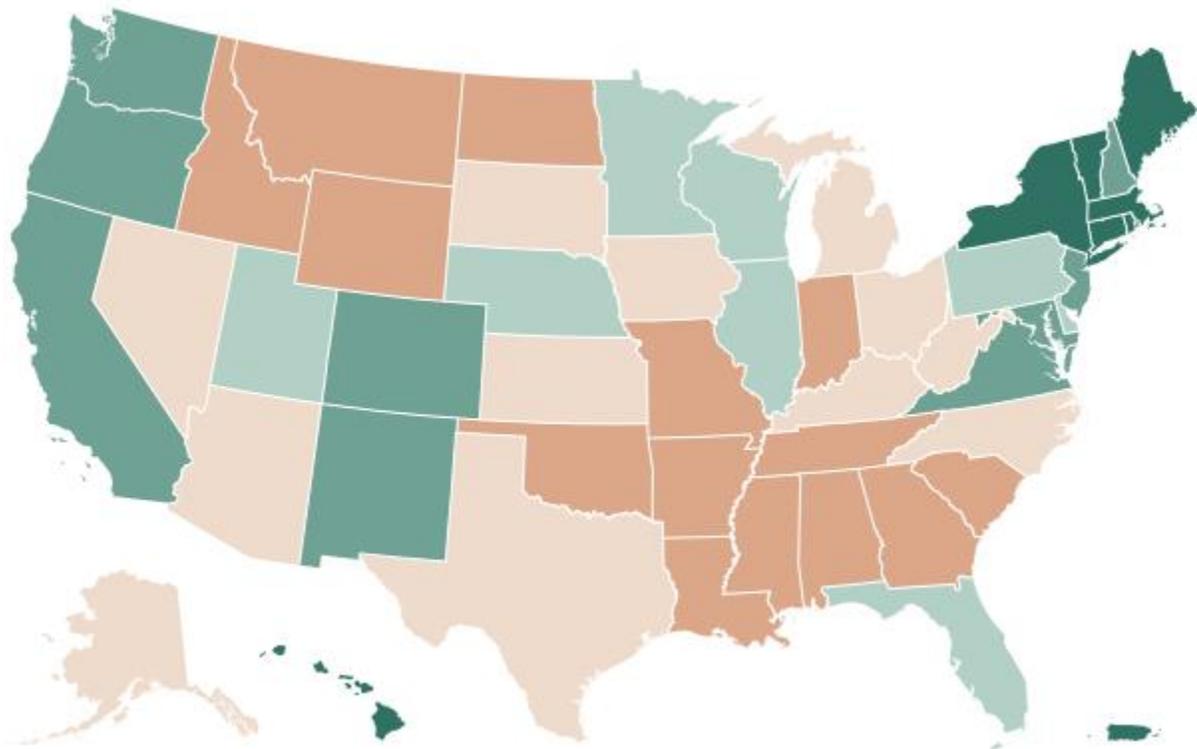
Tracking the Coronavirus >

	United States	Avg. on Feb. 19	14-day change
New cases	106,696		-65%
New deaths	2,253		-13%
	World	Avg. on Feb. 19	14-day change
	1,827,317		-38%
	10,114		-6%

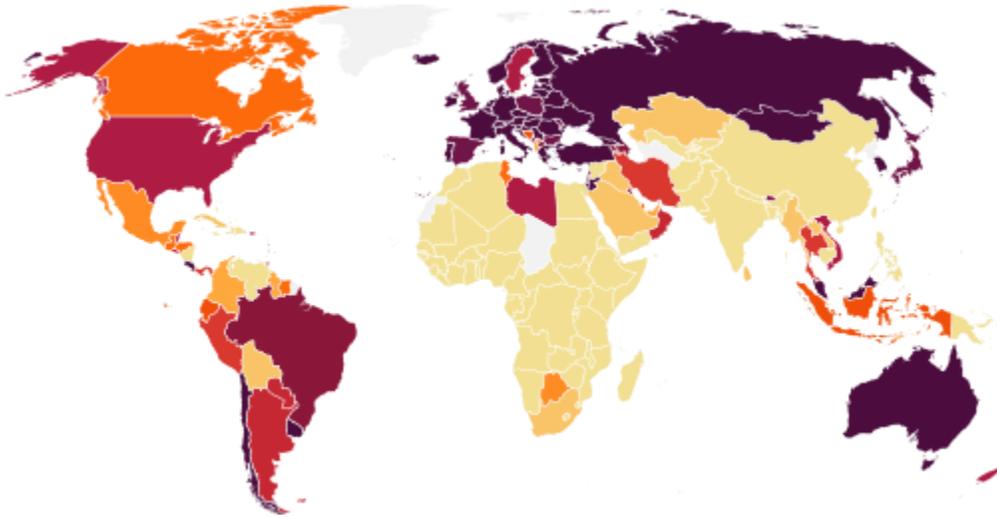
U.S. hot spots >



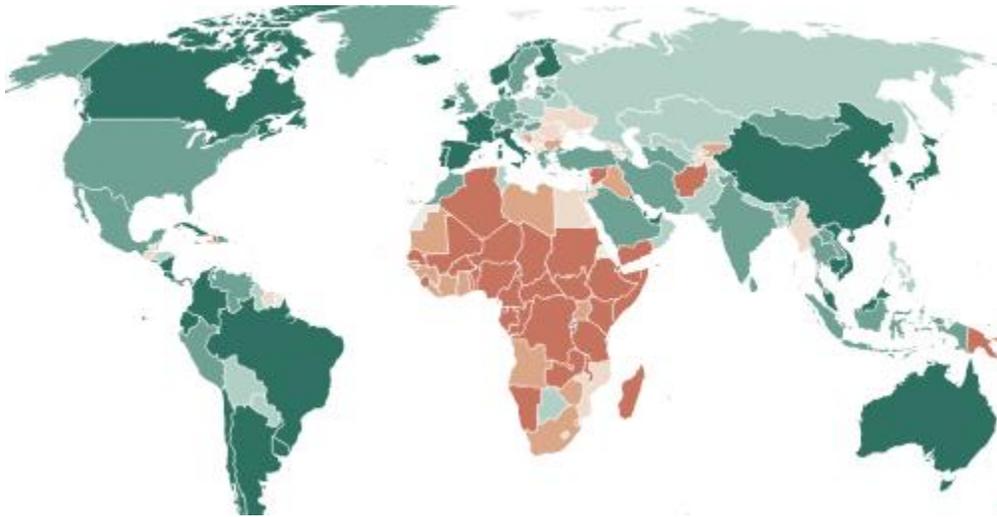
Vaccinations >



Global hot spots ›



Global vaccinations ›



High cases

- [Maine](#)
- [Ky.](#)
- [Idaho](#)

High hospitalizations

- [W.Va.](#)
- [Ky.](#)
- [Ala.](#)

More trackers

- [County lookup](#)
- [Mask rules](#)

The Omicron wave accounts for many more U.S. deaths than Delta's.



Image



Bryan Hofilena, a registered nurse, attaching a “Covid patient” sticker to the body bag of a patient who died of Covid at Providence Holy Cross Medical Center in Los Angeles in December. Credit...Jae C. Hong/Associated Press



By **Maggie Astor**

The Omicron wave is breaking, but deaths, which lag cases by as much as several weeks, have surpassed the numbers from the Delta wave and are still increasing in much of the country.

In 14 states, the average daily death toll is higher now than it was two weeks ago. They are Alabama, Alaska, Arkansas, California, Georgia, Hawaii, Idaho, Kentucky, Maine, Oklahoma, Tennessee, Texas, Utah, and West Virginia.

Since Nov. 24, when South Africa first reported the Omicron variant to the World Health Organization, the United States has confirmed more than 30,163,600 new infections and more than 154,750 new deaths. (While the U.S. did not initially identify any Omicron cases within its borders until Dec. 1, the Centers for Disease Control and Prevention [has since confirmed](#) that the variant was in the country at least a week earlier.)

By comparison, from Aug. 1 to Oct. 31, a similar duration covering the worst of the Delta surge in the United States, the country confirmed 10,917,590 new infections and 132,616 new deaths.

United States Coronavirus Deaths

All time Last 90 days

Feb. 2020

Mar.

Apr.

May

Jun.

Jul.

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb. 2021

Mar.

Apr.
May
Jun.
Jul.
Aug.
Sept.
Oct.
Nov.
Dec.
Jan.
Feb. 2022
7-day average
1,000
2,000
3,000 deaths

Source: State and local health agencies. Daily cases are the number of new cases reported each day. The seven-day average is the average of the most recent seven days of data. · Holiday interruptions to testing and data reporting may affect case and death trends.

That makes the official case count about 176 percent higher during the Omicron wave than in the equivalent-length Delta period. (The true case count is higher still, because, more so than during the Delta wave, many people have been using at-home tests whose results are not included in government statistics.) The death toll during the Omicron wave is about 17 percent higher so far than the death toll in the Delta wave.

On one hand, the gap between the increase in cases and the increase in deaths reflects Omicron's [somewhat lower virulence](#) compared with previous variants, as well as that Omicron is far more likely to cause breakthrough infections in vaccinated people, who are far less likely to die from it than unvaccinated people. Deaths also remain lower than in last winter's surge, before vaccines were widely available: 233,102 deaths were reported from Nov. 24, 2020, to Feb. 18, 2021, compared with 154,757 from Nov. 24, 2021, to Feb. 18, 2022.

But the painful absolute numbers — more than 150,000 Americans dead who would otherwise have lived — underscore the country's continuing vulnerability. Many disabled or chronically ill people [remain at high risk](#) even after vaccination. And when the number of infections is as astronomical as 30 million, even a tiny death rate will mean a catastrophic death count.

Nationally, deaths have begun to decline and are down 13 percent from two weeks ago. But an average of about 2,300 people — more than the death toll of Hurricane Katrina — are still dying every day.

Sarah Cahalan contributed reporting.

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A Covid pill from Merck showed more promise in reducing the risk of hospitalization in a recent study.



Image



Merck's antiviral Covid treatment, molnupiravir. Credit...Merck
By Vimal Patel

The antiviral pill molnupiravir reduced the risk of Covid-19 hospitalization by 65 percent in [a new study](#) by Indian researchers that offered stronger results than previous research about the drug's effectiveness.

The study, led by a researcher at the Chennai Antiviral Research and Treatment Clinical Research Site, split 1,218 Indian adults infected with the coronavirus and experiencing mild symptoms into comparably sized groups.

Only 1.5 percent of the group that received the pill required hospitalization, compared with 4.3 percent of the group that didn't receive the pill.

A study last year by Merck, which developed the pill with the help of Ridgeback Biotherapeutics, found that the drug reduced the risk of hospitalization by 30 percent.

The previous study had several differences that make comparison difficult, Dr. Eliav Barr, senior vice president of Merck Research Laboratories, said in an interview on Saturday.

Participants in the Merck study were at high risk of developing complications after a Covid-19 diagnosis, Dr. Barr said. The study also was conducted globally and included patients with both mild and moderate infections. The Indian study didn't target patients at high risk.

Still, “there are a lot of similarities in the studies,” he said. “Both studies show reductions in hospitalization. Both studies show reduction in viral load, that is, the amount of virus you can detect in the nose, from before to after treatment. And both studies had substantial improvement in symptom resolution.”

Antiviral pills like molnupiravir and Pfizer’s Paxlovid have the potential to reach more people than the antibody treatments that are being widely used in the United States for high-risk Covid-19 patients. Since the start of the pandemic, [scientists have hoped](#) for convenient treatments that could be prescribed by any doctor and picked up at a local drugstore.

The Food and Drug Administration in December [authorized molnupiravir for emergency use](#) by certain adults who were at high risk. The drug is available by prescription only and should be started within five days of symptoms, the F.D.A. said, adding that it’s not a substitute for vaccination.

Merck’s pill works by introducing errors into the virus’s genes to stop it from replicating, which has raised concerns about the risk that it could cause reproductive harm. The risk is hypothetical, and Merck says it has not been borne out in its studies.

The F.D.A. said that women who were pregnant should generally not take the pills, but that there could be exceptions. The agency said that women who may become pregnant should use contraception while taking the pills and for at least four days after. The male partners of women who could become pregnant should use contraception while taking the pills and for at least three months after, the agency said.

Some scientists have also raised concerns that the pills could in theory cause the virus to mutate in a way that does not stop it from replicating but instead leads to the emergence of a new variant.

Demand for the Merck pill has been weak in the United States because of the low reported efficacy and the safety concerns.

Until the availability of antiviral drugs, patients who wanted treatment for Covid-19 needed to go to a facility to get an infusion or injection, Dr. Barr said.

“That’s a pretty substantive barrier to being able to get treatment,” he said. “And it’s a barrier that’s more likely to be disproportionately high in patients with the least access to health care.”

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The Canadian police cleared truckers from the center of Ottawa, making 170 arrests.

Video

0:52 Canadian Police Arrest Dozens at Ottawa Protest

Officers in riot gear pushed to regain the area around the Parliament building in Ottawa, where demonstrations have roiled the nation's capital for weeks and parked trucks have blocked the city's downtown core. CreditCredit...Ian Willms for The New York Times



By **Natalie Kitroeff** and **Sarah Maslin Nir**

OTTAWA — Police officers on Saturday cleared out the central area of a sprawling demonstration in Ottawa, moving from truck to truck and arresting protesters as they continued to subdue the occupation that has disrupted the Canadian capital for weeks.

Starting about 10 a.m., police advanced on trucks that had been parked on Wellington Street, the thoroughfare in front of the Parliament building, drawing guns on some vehicles and banging on doors as they searched for any people inside. They arrested several as other demonstrators shouted “Shame on you!” from nearby. In the heart of the main encampment on Saturday, the police pushed people back with batons and irritant spray and made more arrests.

One demonstrator, David Paisley, a HVAC technician who has spent the protest broadcasting updates from a fishing shack on the back of a flatbed truck known as “the shed,” described the moment an officer entered the vehicle to arrest him.

“He had a big military rifle, he pointed right at my chest, he yelled at me to get down, on the ground,” said Mr. Paisley, 33, who captured the moment of his arrest on a [recorded livestream](#). “It was like a movie scene.”

A recording played in French and English, as the police advanced. “You must leave,” it said. “Anyone found in the zone will be arrested.”

The police operation appeared to be a final salvo in the government's belated effort to break up the occupation. In recent weeks, the demonstrations, which began with truckers rallying against vaccine mandates, have attracted a variety of protesters airing grievances about pandemic restrictions, claims of government overreach and Prime Minister Justin Trudeau's stewardship of the country.

By midmorning, police had cleared the demonstrators from what had been the occupation's core, Wellington Street, and set up barricades. The Ottawa Police said that as of Saturday evening, 170 people had been arrested and that 46 vehicles had been removed. The police declined to discuss their tactics, but [in a tweet](#) on Saturday, they asked the public to stop calling emergency phone lines “to express displeasure about the

police action” to end the protest, noting that making unnecessary calls to 911 was a crime.

While significantly throttled, the protest was not completely disbanded. As police pushed demonstrators away from Parliament, some congregated on side streets while police warned that there were children in the crowd. “We are seeing young children being brought to the front of the police operation,” the Ottawa police said on Twitter. “This is dangerous and it is putting the children at risk.”

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South Korea reports over 100,000 daily cases amid an Omicron surge that shows no sign of peaking.



Image



Medical workers taking nasal swab samples from visitors at a Covid-19 testing center in Seoul on Friday, after South Korea's daily coronavirus caseload surpassed 100,000 for the first time. Credit...Jung Yeon-Je/Agence France-Presse — Getty Images



By Jin Yu Young

South Korea reported more than 100,000 new daily coronavirus cases for the first time on Friday, then topped that threshold again on Saturday, amid the continuing surge driven by the Omicron variant.

The government reported 109,831 new cases on Friday and 102,211 on Saturday; the total from Friday is the nation's newest record for cases in a single day of the pandemic. The country has seen a [253 percent](#) increase in average daily cases over the past two weeks, according to the Our World in Data project at Oxford University, and average daily deaths are rising again.

"We don't know when the peak will be," said Lee Ki-il, a senior health official, at a live briefing on Friday. He assured that the medical infrastructure was able to meet the

demand, as the number of critically ill patients had been relatively low considering the spike in daily cases. Still, the government expects the number of patients to reach up to 170,000 new cases a day later this month.

Even though the Omicron surge has shown no sign of slowing down, authorities agreed to ease one restriction after much pushback from restaurants and stores. Starting Saturday, businesses will be allowed to stay open until 10 p.m., an hour extension from the 9 p.m. closing time that had been in place for the past few weeks. Social gatherings are still capped at six people.

South Korea Coronavirus Cases

All time Last 90 days

Feb. 2020

Mar.

Apr.

May

Jun.

Jul.

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb. 2021

Mar.

Apr.

May

Jun.

Jul.

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb. 2022

7-day average

20,000

40,000

60,000

80,000 cases

Source: Center for Systems Science and Engineering (CSSE) at Johns Hopkins University. The daily average is calculated with data that was reported in the last seven days.

South Korea Coronavirus Deaths

All time Last 90 days

Feb. 2020

Mar.

Apr.

May
Jun.
Jul.
Aug.
Sept.
Oct.
Nov.
Dec.
Jan.
Feb. 2021
Mar.
Apr.
May
Jun.
Jul.
Aug.
Sept.
Oct.
Nov.
Dec.
Jan.
Feb. 2022
7-day average
20
40
60 deaths

Source: Center for Systems Science and Engineering (CSSE) at Johns Hopkins University. The daily average is calculated with data that was reported in the last seven days.

Mr. Lee added that the Omicron wave was a “short-term crisis.” South Korea has been trying to live with the virus and has never gone into a full lockdown. As the Omicron surge has intensified, the government has had to change its approach.

In January, the government implemented a new testing system in which only people in high-risk groups — those over 60 or with underlying health issues — could receive P.C.R. tests. The P.C.R. tests are considered the gold standard for detecting the coronavirus, but they take much longer to deliver a result. Everyone else is left to rely on rapid tests, the kind found at local pharmacies. But that has led to a shortage on store shelves, leading the government to restrict purchases to a maximum of five at a time. Online sales of self-testing kits are prohibited.

More recently, South Korea has also begun to ask patients who test positive to simply look after themselves at home, while the country redirects resources to those who are most vulnerable.

Some experts are skeptical of the new approach, saying these developments in fighting the virus are [“tantamount to letting the virus spread.”](#)

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New York says it won't enforce a booster shot mandate for health care workers.



Image



Shyrel Ritter, a certified nursing assistant at the Hebrew Home in Riverdale, N.Y., receiving a Covid-19 booster shot in late September. Credit...Seth Wenig/Associated Press



By **Maggie Astor**

The New York State health commissioner announced on Friday that the state would not enforce a booster-shot requirement that had been scheduled to take effect for health care workers on Monday.

The decision was an acknowledgment that too many workers were refusing boosters for the state's health care system to continue functioning normally with the mandate in place. Three-quarters have "received or are willing to receive their booster," said the commissioner, Dr. Mary T. Bassett, but the state cannot afford to lose the other 25 percent.

"The reality is that not enough health care workers will be boosted by next week's requirement in order to avoid substantial staffing issues in our already overstressed

health care system,” Dr. Bassett said [in a statement on Friday](#). “That is why we are announcing additional efforts to work closely with health care facilities and ensure that our health care work force is up-to-date on their doses.”

She said New York officials continued to view booster shots as “critical tools to keep both health care workers and their patients safe,” and the statement said officials would reassess in three months.

New York Coronavirus Cases

All time Last 90 days

Mar. 2020

Apr.

May

Jun.

Jul.

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb.

Mar. 2021

Apr.

May

Jun.

Jul.

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb.

7-day average

20,000

40,000

60,000 cases

Source: State and local health agencies. Daily cases are the number of new cases reported each day. The seven-day average is the average of the most recent seven days of data.

While overall booster uptake among New York’s health care workers is 75 percent, the numbers vary widely among types of health care workers. For instance, according to the New York State Department of Health, 95 percent of hospice workers report that they have been or are planning to be boosted, but only 51 percent of nursing home workers say the same.

Health care workers are still required to have received their initial vaccination series under a mandate that took effect last year. Some workers challenged that requirement based on religious objections, but the Supreme Court [declined to block it](#).

Separately, New York City [fired about 1,400 public employees](#) this week — less than 1 percent of the city’s work force — for not complying with a mandate requiring at least one dose of a coronavirus vaccine. The Supreme Court [also declined](#) to block that mandate.

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Here’s where you need to wear a mask in New York.



Image



Though a state mask or proof of vaccination requirement was rolled back, masks are still required in many settings in New York City, including on the subway. Credit... Gabby Jones for The New York Times



By Lola Fadulu

As the Omicron surge subsides in many parts of the country, state and local officials, including in New York, [have begun to roll back mask mandates](#).

Coronavirus cases in New York City have dropped 62 percent over the past two weeks, and hospitalizations have decreased 48 percent, [according to federal data](#). Around 77 percent of all residents are fully vaccinated.

The Centers for Disease Control and Prevention and city Health Department officials continue to recommend everyone over age 2 wear masks in indoor public spaces in New York and most of the rest of the country.

But as mandates continue to get rolled back, it can be hard to know where exactly masks are still required. Here's an overview of the masking rules currently in place in New York City.

Do I need a mask to ride the subway?

Yes. The federal government [requires masks](#) to be worn on planes, trains and other forms of public transportation. The city also [requires](#) masks in all public transportation settings, including taxis and car services.

Do I need a mask at indoor restaurants, gyms or entertainment venues?

It depends. The city recommends that everyone wear masks in indoor public spaces, but businesses are allowed to set their own mask policies.

Other rules: The [city's health department](#) requires restaurants, gyms and entertainment venues to ask for proof of vaccination, under a policy known as Key to N.Y.C. People ages 5 and up must show proof of having received two doses of a Covid-19 vaccine, unless they received the single-dose Johnson & Johnson vaccine.

Do I need a mask to see Broadway shows?

Yes.

Other rules: Most Off-Broadway and other smaller theaters have chosen to require masks as well. Theatergoers must also be vaccinated, under the Key to N.Y.C. policy. Some theaters are requiring patrons to have received booster shots, so check the policies before you head out to see a show.

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The U.S. surgeon general and his family have Covid, a reminder of Omicron's stealthy threat.



Image



Dr. Vivek H. Murthy, the U.S. surgeon general, at the White House in July. “When you’ve been as safe as you can, getting Covid-19 can be frustrating and disappointing,” he said on Friday. Credit...Doug Mills/The New York Times



By **Adeel Hassan**

Dr. Vivek H. Murthy, the U.S. surgeon general, and his family have tested positive for the coronavirus. Dr. Murthy said Friday that he and his wife had mild symptoms.

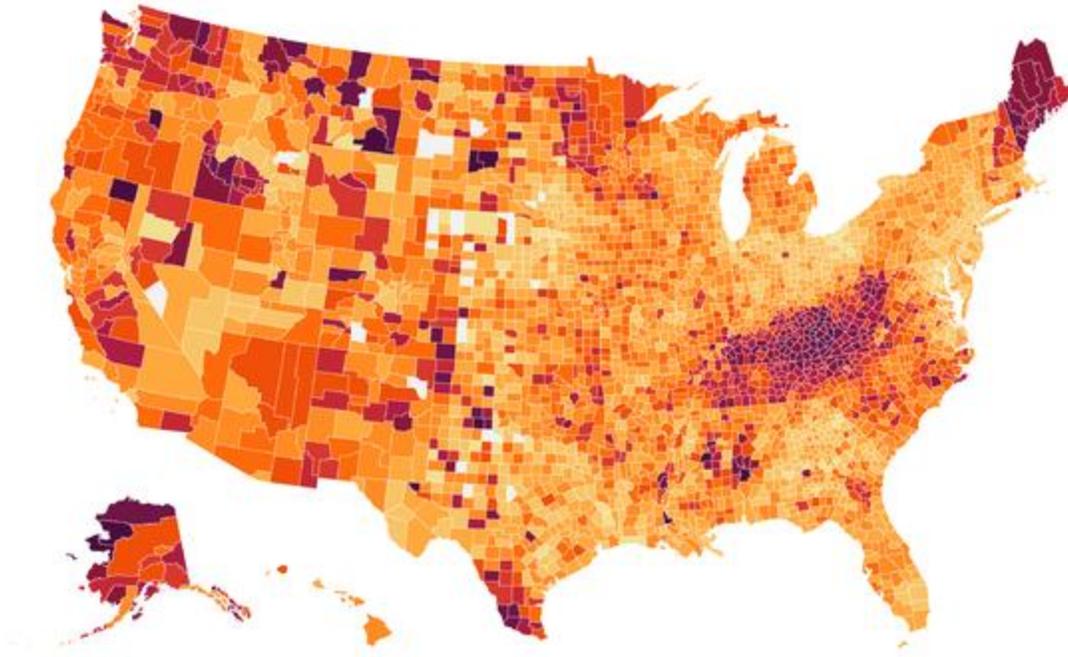
He had muscle aches, chills and a sore throat, he [said on Twitter](#), while his wife had a headache and fatigue. He said that his 5-year-old son had a low-grade fever, and that his 4-year-old daughter, who tested positive over the weekend, was improving.

He expressed the same frustration that parents share every day when their children get sick, knowing they are having to expose themselves while comforting their loved ones. But it was a choice he said he and his wife would make again.

“When you’ve been as safe as you can, getting Covid-19 can be frustrating and disappointing,” Dr. Murthy wrote. “I’ve felt that. It can also be a source of shame. Many people assume you must have been careless to get sick. Our safety measures reduce risk, but they can’t eliminate risk. Nothing can.”

That one of the leading U.S. government authorities on public health and his family have been infected with the virus underscores how extraordinarily transmissible the Omicron variant is, and just how accurate the forecast for the variant was.

Even though new case numbers in many places have come back down to what they were before the latest surge, the average daily infections from Omicron in the U.S. is more than 100,000 and the average daily deaths is more than 2,300. And it does this while appearing to cause less severe illness than its predecessors.



Coronavirus in the U.S.: Latest Map and Case Count

Track Covid-19 in your area, and get the latest state and county data on cases, deaths, hospitalizations, tests and vaccinations.

Omicron has infected untold millions, and might well have infected many more that were not tested. At the same time, tens of millions of people remain vulnerable.

Health officials had estimated in 2020 that vaccinating about 70 percent of the population might get the country past the herd immunity threshold, meaning the coronavirus would become a far less significant threat. The United States is approaching that level, with 65 percent of the population fully vaccinated and 76 percent having had one dose.

But waning immunity, new variants and people who choose to remain unvaccinated have helped make herd immunity, and the idea that the virus could be stopped, into a relic of the early pandemic. But the population's immunity against the virus will remain imperfect, for a variety of reasons, and it is unlikely that the coronavirus [will ever disappear](#), many scientists now say.

Dr. Murthy used himself as an example to remind people of the threat Omicron continues to pose.

“So if you’ve done everything you can and gotten Covid-19 anyway, don’t beat yourself up,” he wrote. “A lot of us are doing the best we can. And let’s not assume those who get sick are careless. We don’t know people’s circumstances. They may not be able to protect themselves the way we can.”

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Peek inside the Times Sunday Magazine at the future of work.



Image



Credit...Illustration by María Jesús Contreras

By The New York Times

In the Sunday Magazine's The Future of Work Issue this weekend, Noreen Malone on the age of anti-ambition and the impact of 25 million people leaving their jobs; portraits of pandemic parenting from Hannah Whitaker; Maggie Jones on how flight attendant jobs became a nightmare; Lauren Hilgers on how the demand for traveling nurses — of which some assignments paid more than \$10,000 a week — came from every corner; and more.

THE PANDEMIC AND THE OFFICE

Read [the Sunday Magazine's issue on The Future of Work](#), which covers topics like pandemic parenting and the Great Resignation.

New York City plans to remove the homeless from the subway to boost ridership after a pandemic drop.



Image



Police officers in May 2020 escorting a homeless man from a subway car at the end of the 2 train line in the Bronx. Credit... Hilary Swift for The New York Times

By [Andy Newman](#), [Dana Rubinstein](#) and [Michael Gold](#)

Mayor Eric Adams and Gov. Kathy Hochul announced on Friday an aggressive plan to deploy police officers and mental-health workers into New York City's subway, pledging to remove more than 1,000 homeless people who shelter there regularly, some of whom have contributed to escalating violence and harassment in the system.

Starting Monday, the officials said, there will be a zero-tolerance policy — enforced by the hundreds of officers who already patrol the system — for people sleeping sprawled across train seats or in stations, or for other violations of the subway's often flouted [rules of conduct](#), including littering, unruly behavior and lingering in a station for over an hour.

Dozens of mental-health professionals with the power to order the involuntary hospitalization of people who they deem a danger to themselves or others will be added to outreach teams systemwide.

“No more just doing whatever you want,” Mr. Adams said at a news conference at a Lower Manhattan subway station. “Those days are over. Swipe your MetroCard, ride the system, get off at your destination. That’s what this administration is saying.”

The [plan](#), which is aimed at ending the decades-old practice of people using the nation's busiest transit system for shelter, comes as a spike in violent crime in the system, including several high-profile shoving incidents, has made public safety a paramount concern for many riders, with some saying it has [caused them to avoid the subway](#).

Since plummeting at the onset of the pandemic, [ridership has been slow to rebound](#), recently reaching just over half of its prepandemic levels, and the system faces a perilous financial future. The subway's long-term viability depends on more commuters returning.

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[New C.D.C. data show a pandemic increase in E.R. visits by teenage girls with mental health issues.](#)



Image



During the pandemic, emergency rooms across the country reported an increase in visits from teenage girls dealing with eating and other disorders, including anxiety, depression

and stress, according to new data from the CDC.Credit...Tom Brenner for The New York Times

By Matt Richtel

During the pandemic, emergency rooms across the country reported an increase in visits from teenage girls dealing with eating and other disorders, including anxiety, depression and stress, according to [new data from the Centers for Disease Control and Prevention](#).

The report provides new detail about the kinds of mental health issues affecting a generation of adolescents.

Mental health experts hypothesize that the pandemic prompted some youth to feel isolated, lonely and out-of-control. Some coped by seeking to have control over their own behavior, said Emily Pluhar, a pediatric psychologist at Boston Children's Hospital and instructor at Harvard Medical School.

"You take a very vulnerable group and put on a global pandemic," she said. "The eating disorders are out of control."

In the C.D.C. study, the agency said that the proportion of eating disorder visits doubled among teenage girls, set off by pandemic-related risk factors, like the "lack of structure in daily routine, emotional distress and changes in food availability."

The agency said that the increase in tic disorders was "atypical," as these disorders often present earlier, and are more common in boys. But the C.D.C., [reinforcing speculation from other clinicians and researchers](#), said that some teenage girls may be developing tics after seeing the phenomenon spread widely on social media, notably on TikTok.

"Stress of the pandemic or exposure to severe tics, highlighted on social media platforms, might be associated with increases in visits with tics and tic-like behavior among adolescent females," the C.D.C. wrote.

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After a year of challenges, the latest Covid data offer New York doses of optimism.



Image



“Now, after two years of struggle, we are on the brink of a recovery that offers us a once-in-a-generation opportunity to make real change on a grand scale,” Eric Adams, mayor of New York City, said recently. Credit...John Taggart for The New York Times

By Esha Ray

In February 2021, New York City was enduring another wave in the pandemic. The city was reporting an average of [roughly 4,000 coronavirus cases per day](#), one of the highest daily caseloads in the country at the time; vaccine eligibility had not yet expanded to all adult New Yorkers; and at least one more contagious variant was starting to spread, threatening what progress the city had made on the virus.

A year later, the city is emerging from an enormous wave, driven by the highly transmissible Omicron variant, [when testing lines stretched for hours](#) and [the city’s hospital system strained, but did not break](#).

But much has evolved since early 2021 — for the better. [About 76 percent](#) of New York City residents are now fully vaccinated, with about 85 percent having received at least one dose. And [a glance at the numbers shows](#) that despite this January recording the most known number of cases in any month of the pandemic, the city seems to have made it through the latest wave far faster than it did the previous one. (During the devastating first wave of the coronavirus in the spring of 2020, [testing was scarce](#), leaving many cases unreported.)

New data released on Friday provided further evidence that the Omicron wave was tapering off: Officials [reported a seven-day daily average of 989 cases](#) on that day, the first time that cases slipped below 1,000 since before the Omicron spike began late last year.

Mayor Eric Adams [struck an optimistic tone](#) about the trajectory of the pandemic on Wednesday while announcing his preliminary budget for the 2023 fiscal year. “We have survived a global pandemic and an economic crisis that has threatened decades of progress,” he said. “Now, after two years of struggle, we are on the brink of a recovery that offers us a once-in-a-generation opportunity to make real change on a grand scale.”

he continued decline in cases prompted Gov. Kathy Hochul to [drop a statewide policy that had required masks or proof of full vaccination](#) indoors. [Masks are still required in a number of places in New York City, however](#).

On Saturday, she announced a state milestone to rival New York City’s: The statewide positivity rate [dropped to 1.72 percent on Friday](#), going below 2 percent for the first time since Omicron emerged. It was also the lowest rate since Oct. 23, the governor said.

“As we continue to see hospitalizations and cases decrease, I want to thank New Yorkers who have been doing their part to keep each other safe,” Ms. Hochul said in a statement.

She added: “As New York continues to build back from the pandemic, I want to remind everyone how critically important it is to use the tools at our disposal and get vaccinated and boosted to ensure we continue our incredible progress as we head into the spring.”

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