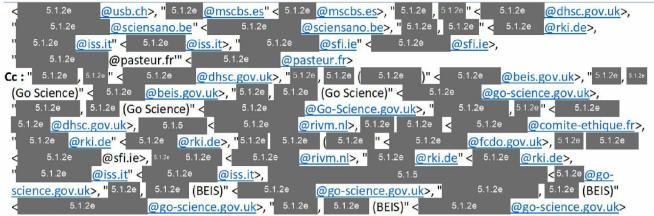
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5.1.2e
                                       @rivm.nl]
To:
From:
Sent:
          Mon 3/1/2021 8:18:20 PM
Subject:
          RE: Modeling on variants and vaccines, and study on risk factors for SQARS-CoV-2 infection
Received:
                    Mon 3/1/2021 8:18:20 PM
 Niemand, dan wordt er niet deelgenomen... heb je een suggestie?
 From: 5.1.2e 1 5.1.2e <
                                        @rivm.nl>
Sent: maandag 1 maart 2021 21:02
To: 5.1.2e | 5.1.2e | 6.1.2e | @rivm.nl>
Subject: RE: Modeling on variants and vaccines, and study on risk factors for SQARS-CoV-2 infection
 Dank!
 Als 5.1.2e niet kan wie gaat er dan als vervanger?
 From: 5.1.2e | 5.1.2e | 5.1.2e
Sent: maandag 1 maart 2021 20:58
To: 5.1.2e 1 5.1.2e < 5.1.2e
                                  @rivm.nl>
Subject: FW: Modeling on variants and vaccines, and study on risk factors for SQARS-CoV-2 infection
 En deze ook weer ter info
 From: 5.1.2e 5.1.2e <
                                5.1.2e
                                           @pasteur.fr>
Sent: maandag 1 maart 2021 19:02
To: 5.1.2e , 5.1.2e (5.1.2e 5.1.2e ) <
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                                        @go-science.gov.uk>;
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 5.1.2e (BEIS) <
                     5.1.2e
                                @go-science.gov.uk>
Subject: Modeling on variants and vaccines, and study on risk factors for SQARS-CoV-2 infection
 Dear all,
 Please find attached the modeling paper from the team of 5.1.2e on the race between variants and vaccines. Also
 attached is the report of our study on factors associated with acute SARS-CoV-2 infection in France (update after four months).
 The report is in French, but with many graphs and tables which I think will be easy to follow for many of you. These documents are
 not confidential and can be distributed.
 I remember 5.1.2e mentioned a modeling work on vaccines in Belgium. Would be great to have access to it, and on any similar
 work performed by other teams.
 Kind regards,
 De: "5.1.2e , 5.1.2e (5.1.2e )" < 5.1.2e
                                               @go-science.gov.uk>
Date: mercredi 24 février 2021 à 14:00
À:
                                                       @comite-ethique.fr>, "
                                                                                               @rivm.nl"
                  @rivm.nl>, " 5.1.2e 5.1.2e (IfU, GWH" <
                                                                                              5.1.2e
                                                                           @ethz.ch>,
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Objet: RE: European Science Advisers Call 24 February: Readout

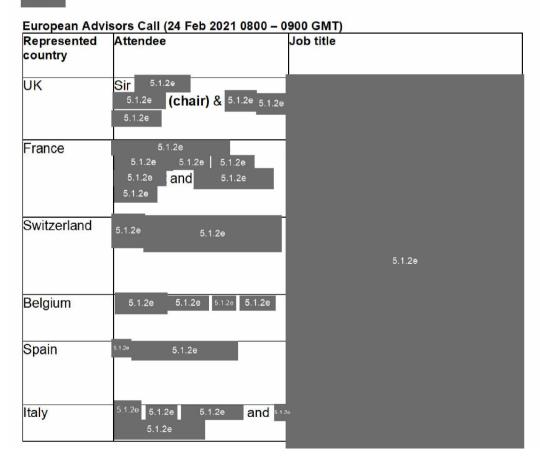
## Dear all.

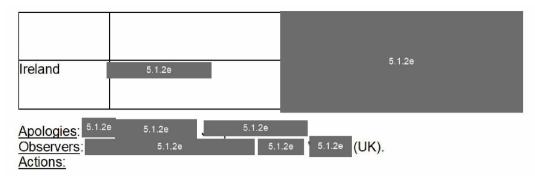
Thank you for attending the call this morning, please see below a readout. As promised on the call, please see attached the UK Government's Roadmap. The link to the full set of documentation for the Roadmap can also be found here.

We will be in touch confirming the next call. In the meantime if you have suggestions for topics to be discussed during the next call please do let us know.

## Best wishes,

## 5.1.2e





- UK to share the Government Roadmap [see attached].
- 5.1.2e to share information relating to the Irish expert group on ventilation, in due course.
- Suggested topics for next meeting to be passed to UK GCSA Private Office.

## Key points:

**UK** – Rates continue to go down. Currently not easy to see effect of vaccines. AZ analysis in Scotland on the over-70s highlighted substantial vaccines efficacy (note observational data). Government Roadmap launched with an emphasis on it being data driven. Opening schools on 08 March. Risk modelling shows this may take R over 1, and data will be available in 4 weeks time. Schools will continue to employ physical separation, testing (all students and teachers in secondary schools will be tested twice a week. Mask will now be worn in classrooms in secondary schools, but there is some scepticism it will work. Every modelled scenario sees increase in numbers at this stage.

**Belgium** – Situation in Belgium is stable. Numbers going up slightly but not sure if it is a fluctuation or the beginning of an increase. Worry over ICU occupancy which is increasing. Not sure of reason could be higher prevalence of UK variant or threshold for ICU admissions may be lower due to more capacity. After a 1 week holiday, schools opened again. Modelling has shown that whatever relaxation measures take place would lead to risk and a significant third wave. Only slight relaxation possible in March, from April it will be better. Hairdressers open will soon open along with non-medical contacts. Pubs/restaurants are closed. Shop are open. There are several curfews in place.

**France** – Comparable to Belgium. Progressive increase in numbers of patients in ICU, and anticipate a difficult period between 10-15 March. 50-60% of cases are the UK variant. Implemented more restrictive measures in Nice, which are the first regional restrictions. Have noticed competition between UK and SA variant (speculation). Reopening of schools after winter holidays – not decided yet.

**Switzerland** – Numbers have been lower (1000 cases per day). Rate of increase of UK variant has slowed down. Release measures announced – but there is a fear it is too early. Discussions on restaurants reopening in March but the modelling doesn't support that.

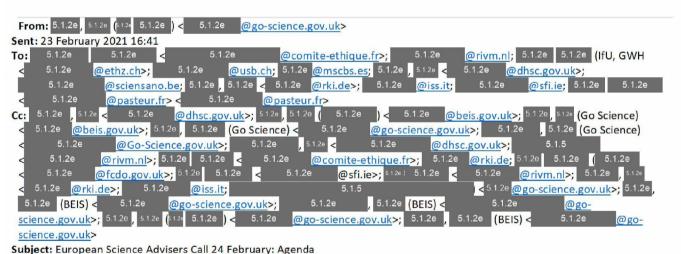
**Spain** – Releasing measures as there are some signs of decrease. Expect 150-200 cases per 100k in 14 days. Forecasting that if not careful may have a fourth wave. Schools have always opened. Transmission in schools hasn't been amongst the highest groups, with strict control measures in 450K classrooms. Only ever had to close 1% of them. Implementing different measures across age groups e.g. 0-7 years if cases occur, all go home, older children control measures limited to close contacts. Masks for 7 years and up. UK variant is increasing with close to 50% of samples. Some older variants that were displaced by UK variant are retuning. Lots of pressure to reduce control measures, but also other groups concerned releasing too fast.. Huge regional variation in prevalence which makes it difficult to apply national measures. Strong control measures on the islands are working, but when it is seen to work the relaxation of measures is too quick.

Italy – Measuring a slight increase in number of new cases. Big difference between regions. Northern Italy - 400-100K in 7 days, less in south. Trying to sequence all variants and expect results in March. Seeing spread of Brazil variant in central Italy, and have a cluster of the S. African variant in South Tirol. UK variant is spreading all over Italy. Brazil was the first variant – now seeing competition with UK variant. Schools are open and masks being worn. Timetables have been changed to ensure staggered start times and more transport put on to get children to school in a socially distanced matter. Other measures in place (e.g. restaurants open midday and close at 1800). Modelling is showing March is at risk. Increasing capability to sequence.

Ireland – UK variant is dominant 90%. Hospitality unlikely to open until August. Phased reopening of schools from next week which will be staggered. Priority is primary schools and leavers taking exams. Pupils will have a choice for grades from teachers or taking their exams. Rapid testing taking place to look at asymptomatic cases and also looking at ventilation. Vaccination levels low (3-5%) due to supply. Disease has spiked highly and then came down and has now plateaued. Focus on trying to shut international non-essential travel with big fines offered. A lot of introduction happening through international travel. Ventilation work is looking at use of CO2 monitors as a surrogate, measures in meat plants (e.g. completely new ventilation systems, wearing masks, organising work areas, rapid testing) and assessing big retrofit programme to reduce CO2 emissions which need to be relooked at to ensure they also lessen disease transmissibility. Looking at drawing across principles from foot and mouth to improve testing capacity.

**Therapeutics** – France focussing on treatments for elderly / immunocompromised ahead of mass vaccination. Looking at treatments (cocktail of monoclonal antibodies) they can give in the first three days which require a short 2 hour hospitalisation. France also has 2 lab studies looking at cross-neutralisation of the UK/S African variants.





Subject. European Science Advisers Can 24 rebruary. Agenda

Dear all.

Please see attached the agenda for tomorrow's European Science Advisers call at 0800 GMT / 0900 CET.

Best wishes,



5.1.2e