

CDC Releases New Data; 6% of Total Deaths are from Coronavirus Only

uncoverdc.com/2020/08/31/cdc-releases-new-data-6-of-total-deaths-are-from-coronavirus-only

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The Centers for Disease Control and Prevention ([CDC](https://www.cdc.gov)) updated their website last week and disclosed out of the 161,392 deaths in the CDC database, just six percent (6%), about 9,700 deaths, were attributed to the coronavirus alone. According to the CDC, the other 94 percent had an average of 2.6 additional conditions or causes of deaths, such as heart disease, diabetes, and sepsis.

The following is the top underlying medical conditions linked to coronavirus deaths according to CDC:

- Influenza and pneumonia
- Respiratory failure
- Hypertensive disease
- Diabetes
- Vascular and unspecified dementia
- Cardiac Arrest
- Heart failure
- Renal failure
- Intentional and unintentional injury, poisoning and other adverse events
- Other medical conditions

Dr. David B Samadi MD, urologic oncology expert, and robotic surgeon commented on the CDC news via Twitter. *“As a men’s health expert, many men have been affected by COVID-19. The CDC today revealed that only 6% of COVID deaths were in patients without existing comorbidities. 94% of the deaths were in cases with pre-existing conditions. This affects the entire public.”*

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— Dr. David Samadi, MD (@drdavidsamadi) August 30, 2020

“For 6% of the deaths, COVID-19 was the only cause mentioned,” the CDC stated in its report, under the heading ‘Comorbidity’. “For deaths with conditions or causes in addition to COVID-19, on average, there were 2.6 additional conditions or causes per death.”

The CDC report also explains that *“they are based on death certificates, which are the most reliable source of data and contain information not available anywhere else, including comorbid conditions, race and ethnicity, and place of death.”* The CDC defines comorbidity as having *“more than one disease or condition ... present in the same person at the same time. Conditions described as comorbidities are often chronic or long-term conditions. Other names to describe comorbid conditions are coexisting or co-occurring conditions and sometimes also ‘multimorbidity’ or ‘multiple chronic conditions’.”*

Table 3. Conditions contributing to deaths involving coronavirus disease 2019 (COVID-19), by age group, United States. Week ending 2/1/2020 to 8/22/2020.*

Updated August 26, 2020

Conditions contributing to deaths where COVID-19 was listed on the death certificate	ICD-10 codes	Number of Conditions								
		All ages	0-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75-84 years	85 years and over
Total COVID-19 deaths ¹ , as of 8/22/2020	U071	161,262	330	1,241	2,228	8,501	29,295	34,334	42,587	50,967
Respiratory diseases										
Influenza and pneumonia	J09-J18	68,004	111	564	1,428	3,967	9,438	15,389	18,116	18,989
Chronic lower respiratory diseases	J40-J47	12,780	24	59	129	402	1,486	2,262	4,235	4,071
Adult respiratory distress syndrome	J80	21,899	99	231	612	1,795	3,777	5,757	5,317	4,348
Respiratory failure	J96	54,803	99	481	1,016	2,981	7,208	12,691	15,100	15,364
Respiratory arrest	R09.2	3,282	6	21	64	160	302	807	891	1,111
Other diseases of the respiratory system	J30-J34, J20-J28, J60-J70, J81-J86, J90-J95, J97-J99, U04	5,864	18	45	113	287	708	1,193	1,531	1,769
Circulatory diseases										
Hypertensive diseases	I10-I15	25,272	14	88	447	1,529	4,227	7,791	9,679	11,568
Ischemic heart disease	I20-I25	18,103	2	22	90	403	1,856	3,695	5,481	6,755
Ischemic heart disease	I20-I25	18,103	2	22	90	403	1,856	3,695	5,481	6,755
Cardiac arrest	I48	29,210	45	186	470	1,324	2,903	4,500	5,080	5,620
Cardiac arrhythmia	I44, I45, I47-I49	9,812	9	22	58	221	799	1,748	2,873	4,172
Heart failure	I50	19,582	4	40	82	272	887	1,809	2,913	4,555
Cerebrovascular diseases	I60-I69	7,653	7	23	80	268	871	1,704	2,237	2,481
Other diseases of the circulatory system	I70-I79, I80-I83, I85, I87, I89, I90-I99	8,748	39	98	209	504	1,120	1,828	2,157	2,679
Sepsis	A40-A41	14,053	31	136	345	1,225	2,484	3,803	3,536	2,700
Malignant neoplasms	C00-C97	7,415	24	31	90	277	1,006	1,932	2,250	1,825
Diabetes	E10-E14	25,926	41	168	585	1,767	4,242	6,926	8,912	9,216
Obesity	E60-E69	5,814	79	272	690	1,817	1,899	1,817	895	285
Alzheimer disease	I30	5,908	0	0	0	0	2	50	372	1,627
Vascular and unspecified dementia	F01, F03	18,487	0	0	2	20	283	1,713	5,489	11,070
Renal failure	N17-N19	12,082	14	110	287	808	2,001	3,477	3,597	3,286
Intentional and unintentional injury, poisoning and other adverse events	S00-T88, W00-W29, I80-I84, I85-I89, Y10-Y36, Y40-Y89, U01-U03	5,133	36	124	176	302	609	1,009	1,220	1,861
All other conditions and causes (residual)	A00-A09, A42-A46, D00-D01, I19-I24, E70-E80, I80, I82, I90-I99, G20-G24, G30-G34, I00-I09, I20-I29, J00-J09, J20-J29, J30-J34, J40-J49, J60-J69, J80-J89, J90-J99, K00-K99, L00-L99, M00-M99, N00-N99, O00-O99, P00-P99, Q00-Q99, R00-R99, S00-S99, T00-T99, U00-U99, V00-V99, W00-W99, X00-X99, Y00-Y99, Z00-Z99	77,980	251	700	1,552	4,795	19,487	18,194	20,356	22,294

Table 3. Conditions contributing to deaths involving coronavirus disease 2019 (COVID-19), by age group, United States. Week ending 2/1/2020 to 8/22/2020.* (Courtesy: CDC)

The Washington Examiner reported they received a statement on Thursday from the CDC Director Robert Redfield where he said, *“testing may be considered for all close contacts of confirmed or probable COVID-19 patients.”* The statement continued, *“Testing is meant to drive actions and achieve specific public health objectives.”*

Everyone who needs a COVID-19 test can get a test. Everyone who wants a test does not necessarily need a test. The key is to engage the needed public health community in the decision with the appropriate follow-up action.”

The report added, “Research has indicated that asymptomatic individuals can transmit the virus to more vulnerable groups, such as the elderly or people with existing health conditions. Until Monday’s changes, the official CDC recommendations were that all people should get tested, even without showing symptoms. Redfield added Thursday that anyone who has been in contact with a confirmed or probable COVID-19 patient should consult a healthcare provider ‘to determine if [a] test is needed’.”

The CDC’s guidelines, Redfield said, were agreed upon by every health expert in the White House coronavirus task force. Admiral Brett Giroir, the task force testing coordinator, also told reporters Wednesday that experts such as Dr. Anthony Fauci, the government’s top infectious disease doctor, discussed and agreed on the guidelines.