



Photo: Golli. Iceland's Chief Epidemiologist Pórolfur Guðnason.

# COVID-19 in Iceland: Chief Epidemiologist Preaches Patience as Authorities Adapt to Omicron Impact

○ Jelena Ćirić   📅 January 19, 2022   📁 Society, x News

Icelandic health authorities are reviewing their pandemic response measures to adapt to the impact of the Omicron variant, the country's Chief Epidemiologist Pórolfur Guðnason stated at a briefing in Reykjavík this morning. Children are no longer required to submit to a nasal swab when they are tested for COVID-19, and authorities have loosened quarantine regulations for triple-vaccinated people. Pórolfur stated that isolation and quarantine regulations were under continuous review.

The Omicron variant now accounts for over 90% of COVID-19 infections in Iceland, the Chef Epidemiologist stated. As a result, hospitalisation rates due to COVID have dropped to 0.2-0.3%, down from around 2% when the Delta strain was dominant in Iceland. Nevertheless, Iceland's National University Hospital is experiencing strain due to the sheer number of cases. Work has begun on researching and assessing the changing nature of COVID-19 illness as a result of the Omicron variant, which will help authorities refine their response efforts.

Pórolfur stated he would likely not recommend changes to Iceland's domestic restrictions before the current restrictions are set to expire, on February 2. He emphasised the importance of proceeding slowly, as loosening restrictions too early could backfire and lead to a surge in infection rates.

*The following is a lightly-edited transcription of Iceland Review's live-tweeting of today's briefing.*

On the panel: Chief Epidemiologist Pórolfur Guðnason and Director of Civil Protection Víðir Reynisson. The special guest at today's briefing is Selma Barðdal Reynisdóttir, who will discuss how pandemic measures impact children and schools.

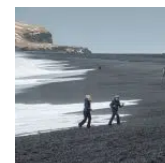
## LATEST NEWS



**First Phase of Borgarlína Project Delayed by One Year**



**New Plant to Capture Ten Times More CO2 from Atmosphere at Hellisheiði**



**Flashing Red Light to Warn of Dangerous Waves at Reynisfjara**



**Ministry Suspends Residential Development by City Airport**



**Sculpture Will Be Relocated Following Fatal Accident**

## POPULAR POSTS

- **Whaling Restarts in Iceland Following Four-Year Hiatus**
- **Road to Landmannalaugar Opens For the Summer**
- **Tourist Death in Djúpivogur, Southeast Iceland**
- **Intact Walls from an 11th Century Turf House Found in Seyðisfjörður**
- **Are there any public laundry facilities in Iceland?**
- **What kind of gun laws exist in Iceland?**

who will discuss how pandemic measures impact children and schools.

Iceland [reported](#) 1,488 domestic cases yesterday (50% in quarantine) and 93 border cases, a total case number that has only once been higher, on December 30, 2021. Hospitalisations have, however, decreased in recent days.

The briefing has begun. Viðir starts the briefing by introducing the panel and complimenting school staff and parents for their perseverance in keeping schools operating throughout the pandemic. Viðir says there is a “light at the end of the tunnel” and turns the briefing over to the Chief Epidemiologist.

Þórólfur takes over and goes over the day’s numbers. With an increase in new cases but fewer people in hospital, the Omicron variant is still dominant in Iceland, at around 90% of new cases. The hospitalisation rate among COVID-19 cases is at 0.2-0.3%. When the Delta variant was dominant, it was at 2%. COVID-19 hospitalisations fall into three groups: people with severe COVID illness; people hospitalised for other issues who contract COVID at the hospital; and people hospitalised with other diseases where it isn’t clear if they’re related to COVID or not.

The spread of COVID in Icelandic society has caused a great deal of interruption in the economy even if serious illness is now rare, Þórólfur says. Tightened restrictions took effect five days ago to temper the spread of infections. Þórólfur: we still haven’t seen success from the new restrictions, but in the past, we haven’t seen the effect of tightened restrictions until a week has passed.

If infections are around 1,000 per day, we can expect 54 hospitalisations, according to one projection model, Þórólfur says. Another model of 2,000 infections per day and a 0.3% hospitalisation rate would have around 60 people hospitalised by the end of this month. The number of community infections affects the number of people who have to be hospitalised or require intensive care. Þórólfur emphasises that projection models always have a margin of error, one of the reasons we must try to minimise the spread of infection.

Work is in progress to analyse the nature of the illnesses requiring hospitalisation to better assess which infection prevention restrictions will prove most effective in Iceland. Some modifications have already been made: children’s COVID tests no longer include nasal swabs, and quarantine regulations for those who are triple vaccinated have been relaxed.

Þórólfur addresses criticism on his recommendations to the government, noting the extensive cooperation and consultation his work involves before each assessment is made. The list of collaborators includes healthcare workers, scientists, and university researchers, as well as police and international colleagues. While we wait for the tightened restrictions to make an impact, we must ensure to minimise the number of community infections in order to protect the healthcare system, Þórólfur says.

Selma Barðdal Reynisdóttir takes over to discuss schools and children. The situation in schools varies across the country, from good to very difficult. Everyone is doing their best to keep up the daily routine for children and keep schools open. Luckily, quarantine and isolation usually only affects schools temporarily, but some have had to close for days due to infections. Staffing is a challenge in smaller municipalities, Selma says. The goal is always to keep up as much of normal services as possible, communication is key, says Selma.

Selma maintains that for children and teenagers, including her own, the biggest

threat of the pandemic is that schools will close and sports training will be cancelled, although she notes that there's a difference between the capital area and smaller towns. Voices from the capital area, where the situation in schools is tougher, have been louder than in smaller societies where there are fewer difficulties in keeping schools open.

Selma discusses her work on the surveillance team (vöktunarteymi), a helpful resource for schools, that is a ministry-run cooperative team with representatives from several educational institutions and municipalities. The team ensures oversight over the pandemic situation as it affects children, and meets regularly to keep an eye on things. Víðir takes over and agrees on the importance of this cooperative platform.

The panel opens for questions.

"Are you considering relaxing quarantine restrictions for fully vaccinated children?" Þórólfur says authorities are already making changes, such as not requiring nasal swabs for children's COVID-19 testing. He agrees the situation must be monitored daily and updates implemented regularly.

Þórólfur is asked if he is willing to reconsider his position to wait to issue new recommendations until the current regulations are set to expire on February 2. Þórólfur states that the work has already begun, with quarantines and testing

processes being revised. It's important not to move too quickly, as relaxing restrictions can backfire and lead to a surge in infections.

Þórólfur is asked about the mandatory isolation period of at least 7 days: are you considering shortening periods, relying instead on quarantine and lighter options? Þórólfur met with Nordic colleagues this morning, who he says have imposed very similar rules to Iceland, though opinions differ on whether isolation can be shortened. But this is part and parcel of the ongoing process of rethinking quarantine and isolation, Þórólfur says.

The National Hospital is working on assessing changes in the virus and associated illness, with more hospitalisations but fewer patients requiring intensive care, the hospital's challenges are changing. The change in the virus' behaviour due to the Omicron variant taking over is leading to changes in how healthcare authorities deal with the situation.

Selma is asked about remote learning. Many schools offer options for remote learning and counselling, but that adds to teachers' workload, and not all schools are able to offer it.

Þórólfur is asked if the tightened restrictions last week were an overreaction. He replies that hospital management has consistently pointed out the strain on the hospital. While some doctors have offered other opinions, healthcare authorities' message has remained consistent. Þórólfur also notes that all of Iceland's healthcare institutions are now working according to contingency plans.

Þórólfur is asked about vaccine safety, replying that the Iceland Medicine Agency issues marketing licenses after all requirements have been met. He denies accusations that the public is participating in "drug experiments". Víðir closes the briefing by restating the authorities' goals of tempering infections and protecting the healthcare system. The briefing has ended.

healthcare system. The briefing has ended.

Share article

Facebook

Twitter

RECOMMENDED POSTS

Hospital Reinstates Mask Requirements Due to Increase in COVID Cases

Increase in COVID Admissions, But Infections Much Milder

Iceland’s Chief Epidemiologist Resigns

At Least 35,000 New Apartments Needed in the Next Ten Years

President Diagnosed with COVID

Website Crashes as Tickets to Þjóðhátíð Festival Go on Sale

COVID-19 in Iceland: 10% of Imported Vaccines Sent Abroad Again

What’s the status of COVID-19 vaccination in Iceland?

COVID May Be a Factor in Elevated Number of Deaths in Early 2022



[About Us](#)  
[Privacy Policy](#)  
[Subscribe](#)  
[Events in Reykjavík](#)

