

# As it happened: South Korea's deadly Omicron

The touted promise of a milder virus is fading by the day so far into Korea's omicron jour



Emergency care team at Seoul Medical Center prepares for a patient's arrival on March 27. (Yonhap)

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**SEOUL** – South Korea retreated from its pandemic response strategy known as “test, trace, treat” on transformed into a more flu-like disease. Omicron’s emergence called for a new strategy “attuned to and a departure from the earlier ways of handling the pandemic, health officials have said.

The touted promise of a milder virus is fading by the day so far into Korea's omicron journey with the new variant killing and hospitalizing more people than any of its predecessors.

"This omicron wave is different from the delta wave, I don't think the case numbers are a cause for concern. Omicron's fatality rate is low, at one fifth of delta's and about half of omicron infections are completely symptomless."

[Jan. 27 MBC radio interview](#)

"The big surge is a necessary process of transitioning to an endemic phase, and the omicron variant works to our advantage as this process unfolds."

[Feb. 21 closed-door briefing](#)

"In the mid- to long run, the spread of the omicron, whose fatality rate is drastically lower than delta's, can be seen as an aiding factor for recovery of normal life." [Feb. 23 press briefing](#)

"The case fatality rate from the last four weeks is below 0.1 percent. So far the short-term case fatality rate is similar to that of the seasonal flu."

[March 15 press briefing](#)

"While case numbers continue to grow, based on the hospitalization and death rates, the outbreak seems to be within our health care system capacities. And once we're past the peak of this omicron wave, we will be able to move closer to normal life." [March 23 press briefing](#)

Source: Ministry of Health and Welfare

Ministry of Health and Welfare spokesperson Son Young-rae

## 'Omicron will set us free'

The omicron plan kicked off nationwide two days after the variant's share of weekly analyzed cases of the country did away with most measures to control the outbreak and manage patients.

Contact tracing came to an end, and the isolation period for people with COVID-19 was cut to seven days. Eventually, quarantine requirements for close contacts were scrapped. Access to resources like polio vaccines was reserved primarily for people 60 and older.

This policy shift at the dawn of the omicron age was guided by the notion that a surge led by the omicron variant would usher in an endemic stage.

“This isn’t like delta,” Ministry of Health and Welfare spokesperson Son Young-rae explained during a

“While cases may increase for the time being, I believe that our response system will be able to minimize the harm to people to “trust the science that public health authorities provide, and don’t panic over the numbers

He said omicron was only one-fifth as deadly as the previously dominant delta variant — an estimate — and believed to cause less harm.

Among people younger than 60, omicron’s fatality rate was “nearly zero percent.” All in all, omicron was less deadly than seasonal flu, he said, although for unvaccinated and older adults, it was a different story.

Still dangerous for some but mild and flu-like for most, omicron warranted “targeted protection of high-risk

Two months after the plan was implemented, Korea is witnessing some of the highest new infection rates. On March 23 that this was “inevitable.” “It had to happen at one point or another,” he said. He said omicron would be rewarded with possible progression toward the goal of normal life.

Dr. Jung Jae-hun, COVID-19 advisor to the prime minister, said in a Facebook post on Jan. 20 that the surge in this pandemic, and a period during which we make a fundamental transition in our society’s structure. On Feb. 4, he said, “After we can confirm the peak of the wave is past, we can begin to pursue an exit strategy.

“We’re nearing the final chapter of our journey that has gone on for more than two years,” he said. “I think that is close to being the last.”

## Great Barrington Declaration’s omicron revival

The rationale for the omicron plan is that the intensive social distancing of the delta days is “no longer necessary,” Health Ministry spokesperson on March 2. And as omicron is milder, doing so would pose little threat to the economy.

Similarly, Jeong Eun-kyeong, commissioner of the Korea Disease Control and Prevention Agency, said that there has been substantial exposure in the community due to omicron’s high transmissibility, controlling the spread will have significant limits.”

But the focus on social distancing eclipses what health officials should do without having to ask people to isolate. Isolation of the early pandemic days, according to public health professor Dr. Oh Ju-hwan of Seoul National University.

By using social distancing as a “blanket term” for pandemic control measures, health officials sold people the idea of sacrifice freedoms to contain the virus, he said. “The narrative that social distancing is the only appropriate response is an excuse for authorities to do less of what they ought to be doing.”

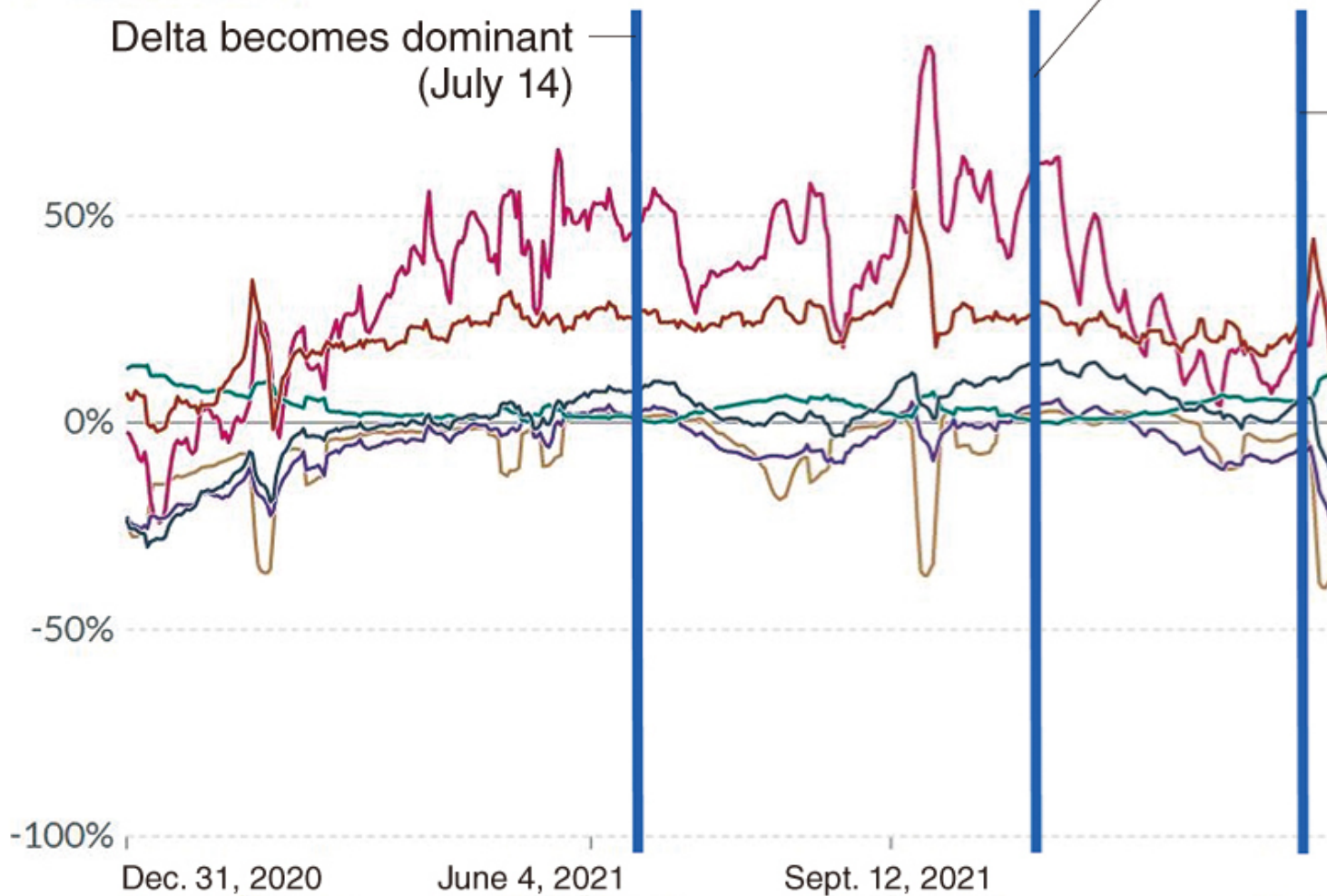


With omicron's rise, first to be abandoned were measures that exact the most administrative burden that Korea had prided itself on, he said. While quick to remove the no-cost testing-for-all policy and distancing restrictions, though eased, for the public. The cap on the size of personal gatherings and though they are anticipated to be removed soon.

## How did the number of visitors change during the pandemic in South Korea? (from 2021 on)

This data shows how community movement in specific locations has changed relative to the period before the pandemic.

⇌ Change country



Source: Google COVID-19 Community Mobility Trends – Last updated 30 March 2022, 16:14 (London time)

Note: It's not recommended to compare levels across countries; local differences in categories could be misleading.

(Our World in Data)

Google mobility trends shows movements have been on a decline in Korea after omicron took over. Retail and recreation facilities especially have fallen considerably compared to when the delta variant was dominant in early 2021.

“When cases soar and hospitals fill up, people exercise caution voluntarily,” Oh said. “The mobility drop seeing now is not in fact attributable to the lack of social distancing, as some officials and experts suggested.”

Although health officials like to emphasize the pains of social distancing, and how they are no longer making efforts to test and trace cases and grasp the true scale of the outbreak, he said.

Active tracing was also crucial to “monitor variants, as letting the virus run amok in the community would be a disaster.”

Oh said the omicron response strategy of naturally infecting kids, and hybrid infecting adults while staying close to the Great Barrington Declaration from the first year of the pandemic. The declaration argued for focusing on letting those not considered to be at-risk live near-normal lives.

Unlike when the declaration was penned, now there are vaccines and treatments. But evidence is still unclear whether immunity through omicron infection will offer reliable protection against the next variant outbreaks, he said.

“If natural immunity is indeed superior, then contracting a mild disease would be considered a blessing. But if immunity from a combination of vaccination and natural infection is at best an assumption at this point, it’s a gamble.”

In fact, data pointing to the contrary is emerging. A study published March 17 in the journal Cell said omicron is less immunogenic than delta, thus providing reduced protection against reinfection or infection from future variants. The study said reinfection with the COVID-19 virus “occurs regularly, and can amount to a significant population of reinfections “may become substantial for health systems,” it said.

“Korea is plowing through with the omicron plan at the cost of record deaths and hospitalizations or protective levels of immunity will be established in the community that will allow us to return to normal life,” he said.

“But if we’re wrong — and there’s a high chance we just might be — then so many people would have suffered damage.”

## **Koreans dying more than ever in omicron wave**

Omicron’s impact on fatality trends is clear. Since omicron’s dominance, it took 54 days for the total deaths to double, from 6,712 total deaths on Jan. 28 to 13,432 total deaths on March 22.

The one-day high of 469 COVID-19 deaths reached on March 23 — which translates to about 6 deaths per 100,000 per day rolling average — is higher than deaths seen in many other developed economies at the height of their omicron wave peaked at 4 deaths per 1 million on Jan. 18, and Australia’s at 3 per 1 million on Jan. 29. But as the worst of omicron is likely still to come.

While the official death toll is already staggering, it is important to remember the actual number of c Lee Jong-koo, a former Korea Centers for Disease Control and Prevention chief.

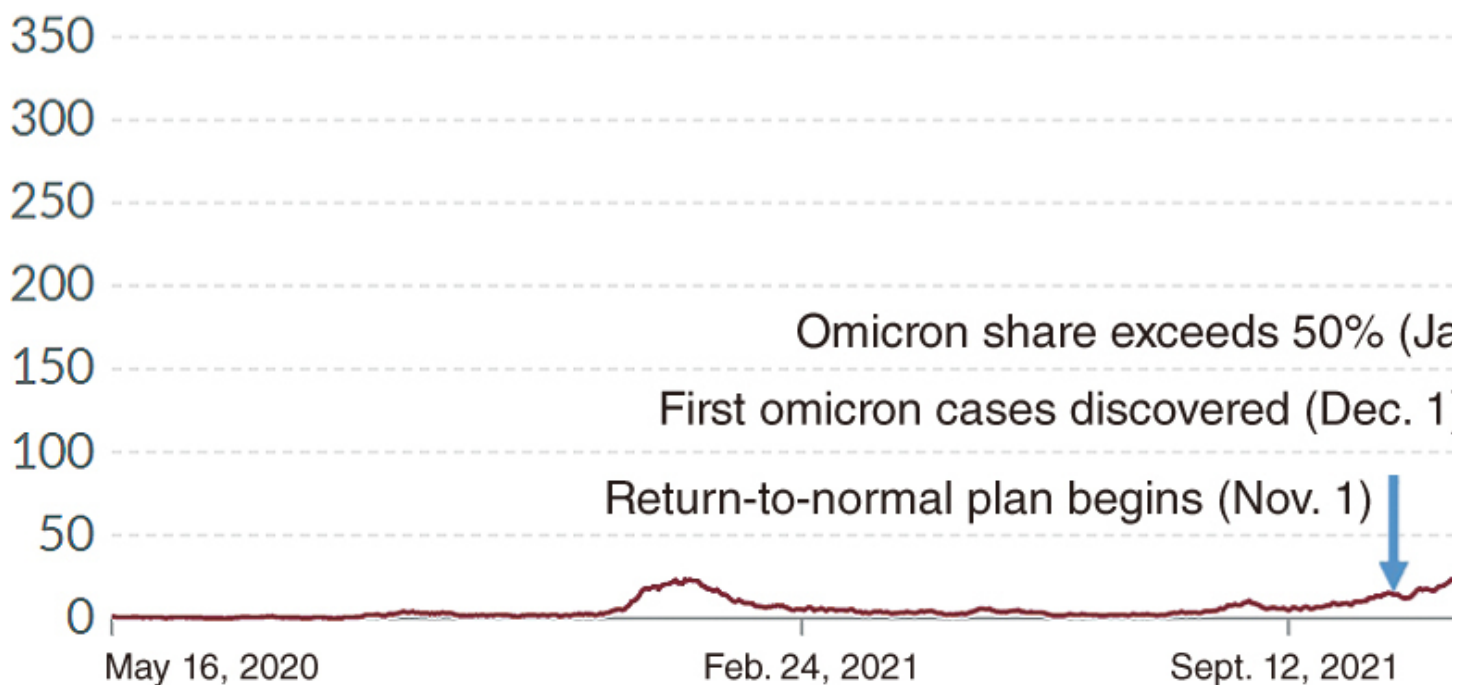
Lee, who headed the national health protection agency through the H1N1 flu pandemic in 2009, said immunity strategy," which "has no basis on science and evidence." "No one has explicitly admitted th and this is backfiring with terrible consequences," he said.

More than 350 people in Korea have died each day over the past week. The 8,172 deaths registered known 16,230 deaths accumulated since the beginning of the pandemic.

## Daily confirmed COVID-19 deaths in South K

7-day rolling average. Due to varying protocols and challenges in the attribut of death, the number of confirmed deaths may not accurately represent the t deaths caused by COVID-19.

[+ Add country](#)



Source: Johns Hopkins University CSSE COVID-19 Data

Note: The rolling average is the average across seven days – the confirmed deaths on th previous six days. For example, the value for 27th March is the average over the 21st to

(Our World in Data)

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"Never had so many people died from an infectious disease in one day," Lee said.

As the omicron wave overwhelms hospitals, people who would have lived under normal circumstances without access to care, he said. "This is what we call 'excess' deaths."

Statistics Korea noted in its March 14 report that since September last year, monthly deaths "have crossed levels of the three preceding years."

The increase in extra deaths was particularly stark in older people. At the height of a post-reopening mortality rate rose by 18 percent in people ages 65-84 and by 21 percent in those older compared to the same month in 2018-2020.

The Korea Disease Control and Prevention Agency, formerly the Korea CDC, reports that more than 1,000 people died in people 60 or older.

The rate at which omicron is killing older people could lead to a fall in the country's average age by several years, said professor Dr. Kim Woo-joo of Korea University. "It's like living through a senicidal nightmare," he said.

Kim said the reduced severity of omicron was offset by its ability to spread and sicken so many people.

"Omicron wave's absolute toll is not being considered in the policy decisions, with the fixture on its cost," he said. "But fathom this. Even if the possibility of dying from omicron is 10 times lower, if 10 times more people are infected, the damages will cancel out whatever benefits of the milder severity."

In the last decade the winter flu at its worst killed about 720 people a year, according to Statistics Korea. Influenza centers from 1991 to 2001, said the true figure is probably closer to 2,000 to 3,000. Still, in 2018-2020, it managed to kill 3,661 people.

As deaths pile up, crematoriums and funeral homes across the country are struggling to keep pace. In the first two weeks of March an average of 1,100 bodies were cremated each day, which is about 391 higher than the same month in 2018-2020. The unprecedented rise in the deceased awaiting cremation led to the Hangeul Funeral Home on March 16 to extend their operating hours.

"From how I see it, nothing justifies 300 to 400 people dying every day with morgues running out of space. We don't know if this is going to be the last of the virus," Kim of Korea University said.

Chief infectious disease specialist Dr. Eom Joong-sik of Gachon University Medical Center, a state-designated infectious hospital recently ordered extra morgue refrigerators. "The omicron wave is by far the worst we've experienced. In previous comparisons we're forgetting the rates we're seeing now is a result of masking, population density and lack of experience with flu."

## Like waves at the beach

Dr. Jerome Kim, the director-general of the International Vaccine Institute, warned against thinking t

“Health officials should realize it is difficult to turn the dial back. They should not raise expectations,”

“We have to think of this in dynamic, not static — like the flu — annual terms. This is more like waves: one be more infectious and a tad more serious? Possibly. Or equally severe? Possibly. Not like the flu

From countries hit earlier by omicron it is evident that reinfection “within two months is possible, or the flu.

“Omicron and its ‘spawn’ BA.2, recombinants and more variants are able to reinfect those who were the hospital to use up 1,100 ICU beds. Also, not like the flu. Europe is resurging after the omicron wave subvariant is taking over from the original omicron. Also not like the flu.”

He said even after the omicron wave recedes, Korea would still be left with a large enough susceptible wave within a few months because of the quickly waning immunity and the virus’s tendency to reinfect

“If 25 percent of the Korean population ends up being infected, that still leaves 75 percent to become omicron appears, or gets reintroduced from a country that has it three to four months from now,” h

“While natural infection and vaccination may prevent bad outcomes like death, it may not prevent ei

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