

**To:** 5.1.2e <5.1.2e@rivm.nl>  
**Cc:** 5.1.2e <5.1.2e@rivm.nl>  
**From:** 5.1.2e  
**Sent:** Mon 1/4/2021 2:59:45 PM  
**Subject:** RE: presentation about COVID burden of disease and vaccination for a meeting tomorrow morning  
**Received:** Mon 1/4/2021 2:59:46 PM

Hi,

Hmm, ok the DALY/100k by age-group data you used only includes tested persons; the DALY/100k by occupation category plot was derived from seroprevalence and/or case ascertainment, adjusted for the estimated proportion symptomatic. I think the best way to compare an occupation category to an age-group is for me to produce a new plot for the latter that is also using the same method.

There is still the outstanding issue of those elderly people who died of COVID-19 but who had never been tested and so don't appear in OSIRIS; that would mean the actual difference between HCW & eg. 75-79 yr olds would be larger.

Wordt vervolgd!

5.1.2e

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**From:** 5.1.2e <5.1.2e@rivm.nl>  
**Sent:** maandag 4 januari 2021 15:51  
**To:** 5.1.2e <5.1.2e@rivm.nl>  
**Cc:** 5.1.2e <5.1.2e@rivm.nl>  
**Subject:** RE: presentation about COVID burden of disease and vaccination for a meeting tomorrow morning

Hi, what did I mean? Perhaps I was thinking that most of the health care workers were tested and would be included in the estimate of DALY per 100 000 for health care workers; few of the 75-80 year olds were tested and they would not be included in the estimate of DALY per 100 000 for the 75-80 age group. So the actual difference might be larger between health care workers and 75-80 year olds than comparing the two figures would suggest. Not sure, just guessing here. Does it make sense?

Best

5.1.2e

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**From:** 5.1.2e <5.1.2e@rivm.nl>  
**Sent:** maandag 4 januari 2021 15:47  
**To:** 5.1.2e <5.1.2e@rivm.nl>  
**Cc:** 5.1.2e <5.1.2e@rivm.nl>  
**Subject:** RE: presentation about COVID burden of disease and vaccination for a meeting tomorrow morning

Hi,

No plans for publication from my side at least; I think this work would make more of a contribution once the risk of long term complications could be included in the burden.

What did you mean by 'the difference with the DALY per 100 000 by profession is likely an underestimate' ? Oh, is that because the DALY per age-group values you used to calculate DALY/100k exclude symptomatic-but-not-notified positives? Such an underestimate will be small, because YLD is only a tiny contributor to burden.

I can easily produce a figure showing DALY/100k per age-group that will be comparable to the figure by profession, if this is useful for your response.  
Geen moeite om mee te denken :)

Groeten 5.1.2e

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**From:** 5.1.2e <5.1.2e@rivm.nl>  
**Sent:** maandag 4 januari 2021 15:36  
**To:** 5.1.2e <5.1.2e@rivm.nl>  
**Cc:** 5.1.2e <5.1.2e@rivm.nl>  
**Subject:** RE: presentation about COVID burden of disease and vaccination for a meeting tomorrow morning

Thanks 5.1.2e

An update would be most welcome. Are you thinking of writing it up for publication?

Your report was very useful, and because of this it becomes clear that for communication purpose such a DALY per 100 000 by age plot would be most welcome. Also a brief discussion that the difference with the DALY per 100 000 by profession is likely an underestimate (right?) would help.

I am writing a draft response for the health council and OMT with these figures, would you like to think along? I will send it asap.

Best

5.1.2e

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**From:** 5.1.2e <5.1.2e@rivm.nl>

**Sent:** maandag 4 januari 2021 14:25

**To:** 5.1.2e <5.1.2e@rivm.nl>

**Cc:** 5.1.2e <5.1.2e@rivm.nl>

**Subject:** RE: presentation about COVID burden of disease and vaccination for a meeting tomorrow morning

Hi,

I think the comparison was ok. I realise I hadn't included a DALY per 100,000 by age-group plot in the 'by-occupation' report - I'll add to next version. Hester has requested - now that PICO3 data are available - to replace the cumulative incidence values currently crudely estimated using ascertainment data from England. This I'll also do, and think about updating the estimates per occupation category/age-group until end Dec 2020.

Greetings

5.1.2e

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**From:** 5.1.2e <5.1.2e@rivm.nl>

**Sent:** zondag 3 januari 2021 16:57

**To:** 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>; 5.1.2e <5.1.2e@rivm.nl>

**Subject:** presentation about COVID burden of disease and vaccination for a meeting tomorrow morning

Dear all,

Attached is a presentation for a meeting tomorrow at 9:00 about the COVID burden of disease and vaccination, which is made up out of existing presentations.

I have recalculated the burden of disease by age to get a measure of burden of disease per 100 K (using 20201104\_data\_fig\_burden.xlsx and data from Statline), such that we can compare the burden of disease per age group with the burden of disease per profession (slides 18,19). It is not entirely fair, since the data in the excel file is over a different period and calculated differently, but the difference in order of magnitude is robust to that. Does this make sense? If any of you happens to check email on a Sunday evening, and can let me know your thoughts before Monday 9:00 it would be great. All other remarks more than welcome .

Best

5.1.2e