



Llywodraeth Cymru  
Welsh Government

ATISN 15867

18 January 2022

Dear

### **ATISN 15867 – Omicron variant**

Thank you for your request to the Welsh Government for information under the Freedom of Information Act (2000) received on 23 December 2021 relating to the Omicron variant. Please accept our apologies for the delay. You requested the following:

*In his address on 22nd December, the First Minister stated that evidence shows that the Omicron covid strain is only less severe if the infected person has already had Covid.*

*Please can you provide the evidence source for that?*

### **Our Response**

The statement from the First Minister is below, as recorded on 22 December ([link](#)):

*“The detail that i have seen suggests that if you have already been infected by coronavirus it may be that omicron will not be as severe as the first time you are infected. If you're getting it for the first time, there's no evidence that it is any less severe than any of the earlier variants.”*

As a result of the rapidly developing situation regarding Omicron there was still uncertainty when this statement was given and this was captured in the response, which was based on the most up to date evidence available at the time. In particular it should be noted it should be noted that severity of illness and risk of hospitalisation are two linked but separate measures of the impact of the Omicron variant.

The evidence you have requested is in the public domain and is therefore exempt under Section 21 of the Freedom of Information Act (2000) – information readily accessible to the applicant by other means. The information requested can be found at the links listed below:

[22 December 2021 Risk assessment for SARS-CoV-2 variant: Omicron VOC-21NOV-01 \(B.1.1.529\) \(publishing.service.gov.uk\)](#)

*Infection Severity – Green (Low Confidence)*

## **Reduction in the relative risk of hospitalisation but NO data on severity in hospital or death**

Three UK analyses support a moderate reduction in the relative risk of hospitalisation for a person detected as a case of Omicron, compared to Delta. This is also consistent with data from South Africa. These analyses are preliminary because of the small numbers of Omicron cases currently in hospital and the limited spread of Omicron into older age groups as yet. There is insufficient data to comment on severity of illness once in hospital or mortality.

Available data suggests that the observed reduction in risk in the UK is likely to be partly a reduction in intrinsic severity of the virus and partly to protection provided by prior infection. We cannot confidently quantify the relative contributions of these 2 factors at present. Even at the reduced hospitalisation risk observed, the combined growth advantage and immune evasion properties of Omicron have the potential to lead to very high numbers of admissions to hospital.

### [Report 50 - Hospitalisation risk for Omicron cases in England | Faculty of Medicine | Imperial College London - 22 December 2021](#)

**Page 10-** High historical attack rates (and observed reinfection rates with Omicron) means it is necessary to correct hazard ratio to accurately quantify intrinsic differences in severity between Omicron and Delta, and to assess the protection afforded by past infection. We developed a method for making such correction and hence derive adjusted estimates which account for reinfection under ascertainment. The resulting adjustments are moderate (typically less than an increase of 0.2 in the HR for Omicron vs Delta and a reduction of approximately 0.1 in the HR for reinfections vs primary infections) but significant for evaluating severity overall. Using a hospital stay of 1+ days as the endpoint, the adjusted estimate of the relative risk of reinfections versus primary cases is 0.31, a 69% reduction in hospitalisation risk (Table 2).

### [Severity of Omicron variant of concern and vaccine effectiveness against symptomatic diseases.pdf \(ed.ac.uk\) - 22 December 2021](#)

**Page 11 -** A key gap in the evidence base has been the absence of data on severity of disease associated with Omicron, which has led to a number of governments beginning to re-impose social restrictions. The very limited data available from South Africa indicate that Omicron is associated with reduced risk of severe disease.[21] It is however difficult to make inferences to countries with different population age structures and lower levels of natural immunity (as is the case in the UK). Our data should now reduce the uncertainty in at least one key parameter used to model the impact of the growth of Omicron can be plugged. The reduced severity may also have implications for isolation rules that are in the UK also contributing to the closing down of society as ever-increasing numbers of people get [sic] infected and need to isolate threatening the viability of essential services such as the NHS and public transport. A further piece of information from the study is the proportion of cases identified as possible reinfections which need to be factored into modelling output.

The combination of increased risk of transmission and immune evasion of Omicron mean that any advantage in reduced hospitalisation could potentially be exceeded by increased rates of infection in the community. Incorporation of the risks of hospitalisation within modelling output will however allow balanced views by policymakers regarding the speed, range, nature and duration of societal measures that otherwise would be needed to control the risk of spread of infection for the expected proportion of cases to be hospitalised.

[Early assessment of the clinical severity of the SARS-CoV-2 Omicron variant in South Africa | medRxiv - 21 December 2021](#)

**Page 3-** *Early analyses suggest a reduced risk of hospitalisation among SGTF-infected individuals when compared to non-SGTF infected individuals in the same time period. Once hospitalised, risk of severe disease was similar for SGTF- and non-SGTF infected individuals, while SGTF-infected individuals had a reduced risk of severe disease when compared to earlier Delta-infected individuals. Some of this reduction [sic] is likely a result of high population immunity.*

## Next Steps

The request you sent me contains personal information about you - for example, your name and address. The Welsh Government will be the data processor for this information and, in accordance with the General Data Protection Regulation, it will be processed in order to fulfil our public task and meet our legal obligations under the Act to provide you with a response.

We will only use this personal information to deal with your request and any matters which arise as a result of it. We will keep your personal information and all other information relating to your request for three years from the date on which your request is finally closed. Your personal information will then be disposed of securely.

Under data protection legislation, you have the right:

- to be informed of the personal data we hold about you and to access it
- to require us to rectify inaccuracies in that data
- to (in certain circumstances) object to or restrict processing
- for (in certain circumstances) your data to be 'erased'
- to (in certain circumstances) data portability
- to lodge a complaint with the Information Commissioner's Office (ICO) who is our independent regulator for data protection

For further information about the information which the Welsh Government holds and its use, or if you wish to exercise your rights under the GDPR, please see contact details below:

Data Protection Officer  
Welsh Government  
Cathays Park  
CARDIFF  
CF10 3NQ  
Email: [DataProtectionOfficer@gov.wales](mailto:DataProtectionOfficer@gov.wales)

If you are dissatisfied with the Welsh Government's handling of your request, you can ask for an internal review within 40 working days of the date of this response. Requests for an internal review should be addressed to the Welsh Government's Freedom of Information Officer at:

Information Rights Unit,

Welsh Government,  
Cathays Park,  
Cardiff,  
CF10 3NQ  
Email: [Freedom.ofinformation@gov.wales](mailto:Freedom.ofinformation@gov.wales)

Please remember to quote the ATISN reference number above.

You also have the right to complain to the Information Commissioner. The Information Commissioner can be contacted at:

Information Commissioner's Office,  
Wycliffe House,  
Water Lane,  
Wilmslow,  
Cheshire,  
SK9 5AF

However, please note that the Commissioner will not normally investigate a complaint until it has been through our own internal review process

Yours sincerely,