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Caution, vaccines, testing: the only way forward

Fiona Godlee editor in chief

The world was already deeply divided before the pandemic, but covid has cruelly deepened the divisions (doi:10.1136/bmj.n1783).¹ From the start it was clear that people in deprived or ethnic minority communities were at greater risk of contracting and dying from covid, because of their work, housing, or poorer underlying health. They have also been harder hit by the economic impact of lockdowns. Research published this week shows that people with learning difficulties are at greater risk of covid related hospital admission and death (doi:10.1136/bmj.n1592; doi:10.1136/bmj.n1701).²³ And the "digital gold rush" to provide health information and care online has left many poorer, older, and disabled people behind (doi:10.1136/bmj.n1732).⁴

The UK government's decision to drop almost all covid restrictions next week will only worsen these inequities. The decision is at odds with medical advice and mathematical realities (doi:10.1136/bmj.n1751;

https://blogs.bmj.com/bmj/2021/07/13/kit-yates-the-dangers-of-allowing-exponential-growth). ⁵ ⁶ Cases are rising exponentially despite the current measures and will inevitably rise more steeply when these are lifted, with resultant increases in hospital admissions, long covid, and deaths. A weary NHS, grateful no doubt for the George Cross (doi:10.1136/bmj.n1775) but actually needing a pay rise

(doi:10.1136/bmj.n1754), will bear the brunt, as will the growing lists of patients unable to get the routine care they need (doi:10.1136/bmj.n1762).⁷⁻⁹

What then should we do? First, we must hope that most of us won't follow our political leaders' dereliction of duty in throwing caution to the wind (doi:10.1136/bmj.n1768), but their confused messaging is already undermining efforts to contain the virus

(https://blogs.bmj.com/bmj/2021/07/13/how-government-messaging-is-undermining-the-covid-19-response). 10 11

Second, the drive to vaccinate all adults must be stepped up

(https://blogs.bmj.com/bmj/2021/07/09/where-are-we-with-covid-19-vaccination-in-the-united-king-dom). Some countries are resorting to incentives (doi:10.1136/bmj.n1737), and many have also extended vaccination to children, but not yet the UK. Arguments against vaccinating children are that the benefits to children themselves don't outweigh the risks, that worldwide there are populations in much greater need (doi:10.1136/bmj.n1687), and that sharing vaccines across the world is the only way to suppress new variants (doi:10.1136/bmj.n1544). But the arguments in favour begin to sound more convincing: that side effects in children are extremely rare while the harms from covid are less so, and that the global need for vaccines should be met by

demands for vaccine patents to be waived (doi:10.1136/bmj.n1687).14

Our third crucial bulwark against a devastating third

wave is testing. The UK has been so dogged in pursuing its flawed approach that a change in policy now seems unlikely. But hints that the NHS will stop providing free lateral flow tests $(doi:10.1136/bmj.n1760)^{16}$ raise the possibility that the government is seeking to quietly move away from this costly and ill conceived programme—how much better if the money had been invested in rebuilding our public health infrastructure. Apart from the rapid tests being used in contravention of both the manufacturer's instruction and the guidance of the Medicines and Healthcare Products Regulatory Agency (https://blogs.bmj.com/bmj/2021/07/11/whyall-the-secrecy-around-innova-lateral-flow-tests), 17 testing is only as good as what people do with the results. Data from Liverpool confirm that people in deprived communities were less likely to come forward for testing for fear of having to self isolate and losing their jobs. They were also more likely to test positive (doi:10.1136/bmj.n1637; doi:10.1136/bmj.n1741).1819

We need targeted testing, contact tracing, and proper support for self-isolation. Without these seemingly obvious traditional public health steps, the pandemic will continue to worsen our longstanding social divides.

- Marmot M, Allen J. Sajid Javid must promote health across government. BMJ 2021;374:n1783.
- Williamson EJ, McDonald HI, Bhaskaran K, etal. Risks of covid-19 hospital admission and death for people with learning disability: population based cohort study using the OpenSAFELY platform. BMJ 2021;374:n1592.
- Courtenay K, Cooper V. Covid 19: People with learning disabilities are highly vulnerable. BMJ 2021;374:n1701.
- 4 Armstrong S. Universal access to the digital NHS—but only if you have a smartphone. BMJ 2021;374:n1732.
- Wise J. Covid-19: Ending all restrictions in England on 19 July "dangerous and premature," say experts. *BMJ* 2021;374:n1751. doi: 10.1136/bmj.n1751 pmid: 34244245
- Yates K. The dangers of allowing exponential growth. BMJ Opinion. 13 Jul 2021. https://blogs.bmj.com/bmj/2021/07/13/kit-yates-the-dangers-of-allowing-exponential-growth.
- 7 Rimmer A. Sixty seconds on . . . the George Cross. *BMJ* 2021;374:n1775. doi: 10.1136/bmj.n1775 pmid: 34253539
- 8 Mathew R. Rammya Mathew: It's not about the money, money, money. BMJ 2021;374:n1754doi: 10.1136/bmj.n1754.
- 9 Mahase E. Covid-19: Doctors warn of "disconnect" between NHS pressure and lifting of restrictions. *BMJ* 2021;374:n1762. doi: 10.1136/bmj.n1762 pmid: 34253541
- Salisbury H. Helen Salisbury: How's your appetite for risk? BMJ 2021;374:n1768doi: 10.1136/bmj.n1768.
- 1 Reicher S. How government messaging is undermining the covid-19 response. BMJ Opinion. 13 Jul 2021. https://blogs.bmj.com/bmj/2021/07/13/how-government-messaging-is-undermining-the-covid-19-response.
- Majeed A, Hodes S, Stanley S. Where are we with covid-19 vaccination in the United Kingdom? BMJ Opinion. 9 Jul 2021. https://blogs.bmj.com/bmj/2021/07/09/where-are-we-with-covid-19-vaccination-in-the-united-kingdom.

EDITOR'S CHOICE

- 13 Tinari S, Riva C. Donuts, drugs, booze, and guns: what governments are offering people to take covid-19 vaccines. BMJ 2021;374:n1737doi: 10.1136/bmj.n1737.
- Wilkinson D, Finlay I, Pollard AJ, Forsberg L, Skelton A. Should we delay covid-19 vaccination in children? BMJ 2021;374:n1687. doi: 10.1136/bmj.n1687 pmid: 34244181
- Bhutta ZA, Siddiqi S, Hafeez A, etal. Beyond the numbers: understanding the diversity of covid-19 epidemiology and response in South Asia. *BMJ* 2021;373:n1544. doi: 10.1136/bmj.n1544 pmid: 34172460
- Torjesen I. Covid-19: Free rapid testing may end once most adults are fully vaccinated. BMJ 2021;374:n1760. doi: 10.1136/bmj.n1760 pmid: 34244290
- Pollock AM, Roderick P. Why all the secrecy around Innova lateral flow tests? BMJ Opinion. 11 Jul 2021. https://blogs.bmj.com/bmj/2021/07/11/why-all-the-secrecy-around-innova-lateral-flow-tests
- 18 García-Fiñana M, Hughes DM, Cheyne CP, etal. Performance of the Innova SARS-CoV-2 antigen rapid lateral flow test in the Liverpool asymptomatic testing pilot: population based cohort study. BMJ 2021;374:n1637. doi: 10.1136/bmj.n1637 pmid: 34230058
- 19 Wise J. Covid-19: Rapid testing cuts cases in pilot but questions remain over use of lateral flow tests. BMJ 2021;374:n1741. doi: 10.1136/bmj.n1741 pmid: 34244210

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