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PRIMARY COLOUR

Helen Salisbury: The persistence of covid

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Figures from the Office for National Statistics for the week ending 12 March showed that one in 20 people in England had covid-19, one in 25 in Wales, and one in 14 in Scotland and Northern Ireland.¹

Unsurprisingly, this level of infection is putting pressure on general practice as we scramble to arrange cover for absent colleagues. Many people who are triple jabbed and have managed to dodge the virus for two years are finally succumbing. The majority will be back at work after 10 days or so—I've yet to meet anyone who's had a negative lateral flow test on day 5 or 6. For most it will be no more than an unpleasant one or two weeks, laced with guilt about letting their colleagues down. But for some it will be a prelude to many months of fatigue, breathlessness, reduced exercise tolerance, and cognitive impairment.^{2 3}

Vaccines are the best protection against hospital admission and death, but we shouldn't forget that currently only 60% of the UK population have been boosted, and 20% (mostly children) remain completely unvaccinated.⁴ The effect of the first round of boosters is beginning to wane, and we're gearing up to give another top-up dose to the most vulnerable people.

Clearly, vaccines can't do all of the work in ending this pandemic. Some commentators hoped that herd immunity would be the answer but, since many people are getting reinfected with each new variant, the strategy of tolerating widespread infection has turned out to be as ineffective as it is dangerous. Any figures we do have about reinfections are likely to be underestimates, as repeat positive tests within 90 days are not included.

So, what's the government doing in the face of this seventh wave of covid? Mask mandates and self-isolation have been abandoned, classrooms remain unventilated, and it's almost impossible to access a lateral flow test to check whether you're infected. A tweet by the Department for Education from 18 March states that childminders may continue to use their home to look after children if a member of their household has covid.⁵

I wasn't surprised to hear a friend react to this state of affairs by suggesting, "They're trying to kill us—or at least, they don't mind if we die. Maybe not all of us, but the old and the vulnerable." And in bleaker moments, I find myself wondering whether those in power realise that Darwin's "survival of the fittest" was in fact a description of evolutionary biology, not a prescription for healthcare policy.

In my own surgery we're wearing FFP2 masks routinely and opening windows wide to change the

air after each consultation, hoping to prevent transmission of the virus from one patient to the next. But covid won't be solved by healthcare alone. We need the government to do more than pretend that it's no longer a threat, as it's clear that talking about the pandemic in the past tense won't make it magically disappear.

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