CORONAVIRUS IN THE UK

Covid-19: Medical MPs in the pandemic

MPs with medical training have been in a unique position to shape government health policy over the past year. Tom Moberly hears how the pandemic has influenced their discussions with constituents and colleagues.

Tom Moberly UK editor

For the 10 members of the current UK parliament with medical training, knowing the front line, as well as the policy landscape that’s key to helping it, has been eye opening and exhausting.

“Because I’m a doctor, often people will come to me,” says Philippa Whitford, Scottish National Party MP for Central Ayrshire and a breast surgeon. Even though health is devolved, constituents still direct queries to her. Her team saw a sharp rise from around 150 emails a day to 500 at the start of the pandemic.

Many are from constituents confused by the situation, wanting her to explain aspects of the pandemic and the response. The initial surge became more manageable after the first lockdown started “when everyone knew the rules and knew what was happening,” says Whitford. But once the furlough scheme started to wind down she received a lot of “distressed” messages from people being made redundant. She continues to face daily queries about the latest guidance.

Luke Evans, Conservative MP for Bosworth and a GP, says he gets a lot of emails about lockdown—whether it should be tighter, or in place at all—and “they’re in equal measure on either side” he says.

“People will quote statistics and conspiracy theories,” says James Davies, Conservative MP for Vale of Clwyd and a GP. “The number of conspiracy theories is vast. It’s pretty wearing. If you want to be thorough and try to get the scientific perspective across, it can be very frustrating.”

Helping to follow the science

The feeling that you have to “respond in a scientific way, in a way that other colleagues aren’t perhaps able to do,” and to a population polarised on the response to the pandemic, has put the MPs who have had medical training in a privileged, if difficult, position, says Davies.

And it’s not just constituents. Davies says he has also been approached by fellow MPs about his medical background. “I’ve had parliamentary colleagues come to me and ask what I think about tier 3 restrictions being imposed on their constituency, for instance, and I do my best to give a balanced opinion.”

“But opinions are only as good as the data and evidence on which they are based—and, because it is such a rapidly changing picture, and there are new data every day, it is not always easy,” he says. “I’ve had to do a lot of digging, using my scientific background, to try to get to the bottom of what’s going on. For instance, when there’s been a rise in the number of cases, what is the underlying reason for that, what settings are involved, and so forth.”

Rosena Allin-Khan, Labour MP for Tooting and an emergency medicine doctor, says she’s been asked a lot about immunity, particularly at the beginning of the pandemic. “I would also often be asked to decipher some of the things that were spoken about at the press briefings, as well as receiving various thoughts and opinions on the vaccines,” she says.

“There was a lot of discussion about long covid at one point—questions about what I’d seen, what I thought. I’ve had a lot of questions about vitamin D, too, and obviously some of the conspiracy theories.”

Davies sees digging into the data as an important part of his role as one of the doctors in parliament. “I feel a duty as someone who has a medical background to question what’s being done in terms of ensuring that restrictions are sufficient to control the virus—but also that they’re legitimate and not overzealous,” he says. “That requires the right questioning to determine why certain measures have been selected and whether they’re based on valid evidence.”

Value

For Dan Poulter, Conservative MP for Central Suffolk and North Ipswich and a mental health doctor, the pandemic has underscored the value of having people with clinical experience in parliament. “I feel a duty as someone who has had medical training to question what’s happening in terms of ensuring that restrictions are sufficient to control the virus—but also that they’re legitimate and not overzealous,” he says. “And it’s not just constituents. Davies says he has also been approached by fellow MPs about his medical background.”

Allin-Khan says she has frequently been asked whether her clinical experience reflects what they have been hearing from elsewhere about matters such as personal protective equipment, the mental health of NHS and care workers, and the disproportionate impact on minority groups.
Evans believes that covid-19 has made the role of doctors in parliament particularly important, as they have been able to bring their experience to bear in the response to the pandemic. “There are practical things that will make a difference. I know that, if my political career ended tomorrow, I’ve achieved X, Y, and Z, and that’s really fulfilling,” he says.

He cites syringe drivers in care homes as one matter he has been able to flag. “I was worried that everyone was talking about getting ventilators, but not many were thinking about the care sector and people whose ceiling of treatment means they were never going into hospital. The government responded and did a review and we got the law temporarily changed on morphine prescribing.”

“It's a bit like in general practice when you get a patient who understands that their cholesterol is high and they are borderline diabetic, and they take all the dietary advice, go to the gym, and come back and their risk factors have dropped significantly,” he says. “You get that reward of knowing that someone's listened to what you said and taken it on board and that they're going to benefit.”

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