

## The Corona Voyage

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Navigating uncharted dangerous waters calls for prudence and level-headedness, not poorly judged sudden turns. This applies to the coronavirus pandemic as well.



Photo: Einar Nilsen

There is a great deal that we do not know: When will the first vaccines appear, how effective will they be and for how long will the immunity last? Overconfidence is one thing this situation does not call for. The paradox is that in complex, uncertain situations we tend to seek the seductively safe harbours offered by the overconfidence of those with simple answers.

This has rarely been more evident than during this pandemic. In April 2020 I wrote that it has made otherwise level-headed editors uncritically turn their columns into an arena for self-styled experts on the 'true nature' of the virus and 'the only sensible way' to control it (1). In recent months we have certainly seen an array of self-assured experts grabbing the spotlight, one after the other.

The latest in this series of overconfident simple answers comes from the Great Barrington Declaration (2). The idea appears to be ingenious in all its simplicity: By letting the virus rip through the young and healthy population while protecting those who are at highest risk of complications and death, the numbers who develop natural immunity will gradually become so large that herd immunity will protect the most vulnerable (2). In other words, we would save the vulnerable while also saving the economy and the rest of us would generally be free to resume life as normal.

## «No countries have successfully managed to protect their high-risk groups during periods of widespread infection»

The declaration arose from a meeting held at the premises of, and paid for by, the American Institute for Economic Research, a libertarian think-tank associated with climate change denial, among other things (3, 4). More than 11 000 scientists and 32 000 medical practitioners are supposed to have signed the petition (2). However, the signatories were free to define themselves as 'medical practitioner' or 'scientist', and *The Independent* newspaper has revealed that the list (which is no longer available on the website) includes a number of fake names like Dr. Person Fakename and Professor Notaf Uckingclue (5).

One of the declaration's key points is the new concept of *focused protection* (2), which is all about ring-fencing the most vulnerable in society by isolating them as much as possible. Apart from a few examples (such as frequent testing of healthcare staff and allowing the elderly to meet up with family members outdoors) the petition does not explain the specifics of focused protection or precisely who the ring-fencing should include.

The intense media interest in this radically simple solution has given rise to a flood of opposing voices from more moderate medical quarters. One of the first to appear was a counter-petition referred to as the John Snow Memorandum (6), which calls the Barrington supporters' strategy 'a dangerous fallacy' and 'distractions that undermine an effective response' (6). The American immunologist and infection control expert Anthony Fauci has called the Barrington Declaration 'ridiculous' (4). The World Health Organization's secretary general has confirmed, with an air of incredulity, that it is nothing short of unethical to allow the unchecked spread of a dangerous virus that we do not yet fully understand (7). Here in Norway immunologist Stig Frøland and

others have voiced their opposition and referred to the declaration as 'an irresponsible gamble with people's lives and health at stake' (8). All are of the opinion that the limited scientific evidence is clear: Controlling the spread of the virus is the best way to protect society and the economy until safe and efficacious vaccines are in place.

## «We need to be on our guard against being seduced by simple, overconfident solutions»

Supporters of the declaration have no empirical evidence to back up their theories: No countries have successfully managed to protect their high-risk groups during periods of widespread infection. In country after country high rates of infection go hand in hand with high numbers of deaths. This is not for lack of trying. When there is widespread asymptomatic infection in the population, it is unlikely that it will be possible to prevent the contagion from entering the many institutions that provide care for the vulnerable, even with an intensive testing strategy in place. Besides, in this context the vulnerable are a highly heterogenous group, of which only a minority are institutionalised. Most of them move freely among those of us who are at low risk but carry the infection. How these vulnerable people are meant to be protected by means of the ill-defined measure of *focused protection*, remains unclear in the extreme. Furthermore, our knowledge of herd immunity is far from exhaustive. At what level does it kick in? How effective is the natural immunity, and how long will it last?

It remains the case that nobody knows what the best strategy for handling the pandemic might be. This is why we need to be on our guard against being seduced by simple, overconfident solutions. We have no choice but to navigate with caution. Limited and uncorroborated scientific evidence must constantly be weighed up against economic, political and ethical considerations. This requires transparent decision-making and broad public debate. When navigating uncharted dangerous waters we need to constantly adjust our course, with prudence and level-headedness. There is no room for erratic and poorly judged sudden turns, for we cannot risk running this ship aground.

## **LITERATURE**

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