

## ***Make no mistake: COVID-19 infection is not a mere 'flu-like' illness***

**By John Dwyer**

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The "lockdown" strategy imposed on much of Victoria will cause psychological and financial stress for many.

Just when it looked as if Australia had control of the epidemic, an explosion of new cases has demonstrated how fragile "control" is in this context.



Victorian Premier Daniel Andrews announces fresh restrictions to reduce the spread of COVID-19. *CREDIT: GETTY IMAGES*

It is a problem being experienced by many countries: South Korea, Israel and Singapore, for example. While the restrictions are essential and should probably have been introduced a week ago, they will generate controversy.

Confronted by this situation, some economists and social scientists have argued that the economic contraction associated with lockdowns and even strict social distancing is more harmful than the sickness and deaths caused by COVID-19. They suggest that we isolate the most vulnerable "oldies" and let the rest of the community resume normal activities.

Millions would become infected but suffer a mild, "cold-like" illness or no illness at all. With their recovery, the "herd" would be immune and the virus defeated and the venerable vulnerable could then end their isolation.

The above approach needs to be rejected on both ethical and practical grounds.

To start with, we have no confidence that herd immunity is achievable. Most reports looking at antibody levels in recovered individuals suggest that antibodies are generated. However, they might not last beyond three months; and the antibodies might not be effective "neutralisers" of COVID-19.

To date, infusing antibody-containing plasma from recovered patients into the critically ill has not been encouraging.

What about the argument that exposed young will experience no symptoms or merely a mild flu-like episode?

No less an authority than US President Donald Trump assures us that 99 per cent of infections are harmless, which is hard to reconcile with the 4.6 per cent mortality rate among those diagnosed in the US.

The truth is there has been a tendency to underestimate morbidity and mortality in younger people. Many young individuals suffer mightily. Lung and kidney damage can be so severe that life-long problems can be expected.

The range of clinical presentations for COVID-19 infections is remarkable. Severe pain, hallucinations (we know COVID-19 can invade the brain) and overwhelming fatigue are common. Many reports are appearing of "recovered" patients suffering a chronic fatigue-like syndrome months afterwards. Also, increasing numbers of children experience a toxic inflammatory condition resembling Kawasaki Syndrome.

The virus can also induce blood-clotting episodes resulting in strokes and lung clots. And young people also die.

In the Brazilian disaster, 31 per cent of deaths are in individuals younger than 50. In Italy's crisis, 15 per cent were under 40.

The "let it rip" proponents should note that more than 100 Italian doctors attending COVID-19 patients died from the infection.

Also relevant is clear evidence that the virus is, not unexpectedly, mutating as it is given so many chances to multiply. Some 90 per cent of virus samples sampled have "improved" the sharpness of the spike used to cut its way into human cells. The result is an even more contagious virus.

No one should think that infection with COVID-19 is nothing to worry about.

The Melbourne outbreak of new community-acquired infections represents a serious resurgence associated with an R value of 2.5 (one person infecting 2.5 other people) the upper limit for contact tracing to be effective in squashing the infection rate.

A disturbing aspect of the emergency is the number of people refusing to be tested because of COVID-19 conspiracy theories.

In my letterbox this week was a pamphlet declaring the epidemic is a hoax; the real cause is a deficiency of Vitamin D. Others are convinced that radiation from 5G technology is to blame for "weakening" immune systems. Social media is awash with warnings about any future COVID-19 vaccine.

Did you know that wicked authorities have tiny microchips buried in the tips of nasal swabs?

The Victorian lockdown is totally warranted. Perhaps understanding that the only way to defeat this virus is to starve it of new hosts will make it more tolerable.

We now must wait nervously to see if we can quickly regain control. Our tactics are harsh but they may spare us scenarios such as the daily worsening US disaster recently described as "trying to stop a runaway train".

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