

EDITORIAL: Waiting in the dark

Rob Rose | Financial Mail | 1 April 2021

Reading the letter Discovery CEO Adrian Gore sent to 3-m medical aid members this weekend, it's easy to imagine the Covid vaccine shambles playing out differently. Today, more than 250 000 South Africans have had shots, a rate of about 0.4 per 100 people - which means we trail all our emerging market peers.

And the vaccines we did get - the Oxford/AstraZeneca jab - we promptly ditched (prematurely and without proper explanation, say experts) and sold to other African countries.

Had Gore, or the private sector, been in charge of vaccines from the get-go, chances are it wouldn't be such a slow grind. You can (rightly) accuse Discovery of many things, but poor management isn't one of them. Gore said Discovery has spent a "substantial amount" on setting up 20 "large vaccination centres" across the country, while 500 people have been seconded to this project. From May 1, he said, Discovery will be ready to "vaccinate 3-million adult beneficiaries of Discovery-administered schemes quickly and efficiently, with the capacity to vaccinate 50 000 people per day, pending vaccine supply". Those words - "pending vaccine supply" - are the sticking point. Manufacturers won't deal directly with companies, only with countries, so the speed at which any population is vaccinated is hostage to how well prepared that country is.

And SA's government has been decidedly off the pace. This week, President Cyril Ramaphosa admitted that "we have lost a little bit of time" but said even countries in Europe are battling to get vaccines. He also said, to much fanfare, that SA will get 30-m doses of the Johnson & Johnson vaccine made by Aspen - but he didn't say by when.

Ramaphosa is being coy. There is no country in Europe, except Belarus and North Macedonia, that is as far behind as SA. The upshot is that while you'd want all SA's high-risk groups - those older than 60 or with co-morbidities - to have been vaccinated by mid-winter in June, it won't happen.

Ryan Noach, CEO of Discovery Health, said that while his company will be ready to vaccinate by May 1, they "really don't know" when they will get stock. They hope that by the middle of winter, they will have already vaccinated our 550 000 high-risk members, but it really just does depend on when the vaccines arrive, and how much the government allocates to the private sector. Noach said that "we would have liked this to be happening far sooner, but it hasn't worked out this way".

The government hopes to have vaccinated all "high-risk" groups by October (Gore said he will "push hard" to get this done sooner), and to have 29-m adults jabbed (enough for herd immunity) by the end of the year.

But, given the vaccine crunch, was SA not too hasty in saying "no thanks" to the AstraZeneca vaccine? Six of SA's top scientists certainly think so. These six - Francois Venter, Shabir Madhi, Marc Mendelson, Jeremy Nel, Alex van den Heever and Mosa Moshabela - have written a lacerating critique of the government's vaccine plan in the latest SA Medical Journal. Speaking of the AstraZeneca decision, they write: "SA has squandered the opportunity to protect at least 500 000 of its most vulnerable citizens before the next resurgence, with massive healthcare and economic cost." The result is that SA is "ill-prepared for mitigating a third wave". It is not as if those doctors are on the scientific fringe either: most have been or remain on Health Minister Zweli Mkhize's ministerial advisory committee (MAC). So, when they argue that the decision to ditch AstraZeneca not only contradicts World Health Organisation (WHO) recommendations, but also "vaccine science", they know what they're talking about.

Lack of transparency

Interestingly, Noach said Discovery didn't ask the government if it could buy these vaccines. He said the MAC took a view on the efficacy of that vaccine, and Discovery respected that. One reason for this, Noach said, is that there aren't any studies on whether it's safe to give people two different

vaccines - say, AstraZeneca now, and Moderna later. But Madhi and his colleagues argue that though the AstraZeneca jab offers less protection for “mild to moderate” Covid, the data suggests “it will be sufficiently effective in stopping the endpoints we care most about - hospitalisation and death”. Where that vaccine has been used, “mortality in vaccinated populations has plummeted”, including in the UK, which has also seen a more infectious and virulent variant. They said it was irresponsible to pass up the opportunity to reduce the number of deaths in the absence of alternative vaccines. But there is another critical point. Unlike Gore, who almost overcommunicates, Mkhize and the government have been relatively mute.

As the scientists say, Mkhize has released none of the “advisories” or rationales from the MAC that led to the AstraZeneca decision. None of the debate about vaccine choices has been public. Not only should any government leader be explaining how something so important has been decided, but it is this sort of poor transparency that fuels wild conspiracies.

A year into the pandemic, it is a lesson you would expect the government would have learnt by now.