

An Alternative European Perspective



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This is the second of a series of monthly reports pulling together references to European-themed issues, helping to put UK performance in perspective and pointing readers towards interesting sources.

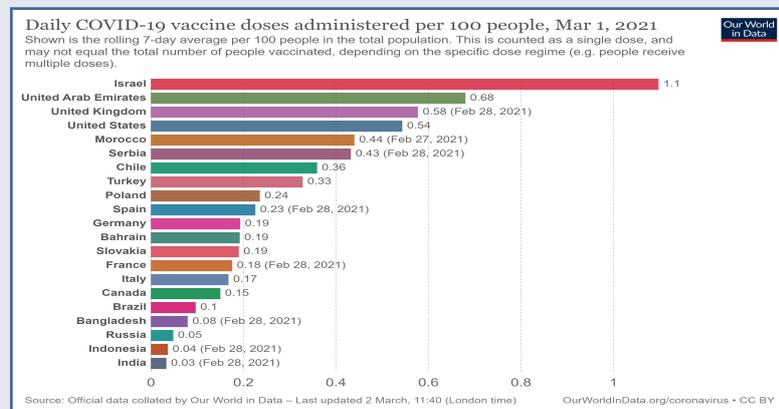
1. The vaccine controversy rumbles on – all for me and devil take the hindmost

The European vaccine embarrassment was highlighted last month ¹ and the issue continues to rumble on². It reveals again the cultural schism that has developed between the European multi-lateral way of doing things and the UK nationalist approach.

The UK appears to be following the Trump philosophy as stated in his 2018 address to the UN when he said,

the doctrine of patriotism. Around the world, responsible nations must defend against threats to sovereignty not just from global governance, but

This sums up a view that countries like the UK and the US follow their own interests rather than seeking a more co-operative approach to managing a pandemic. It culminated in Trump withdrawing funding from the WHO, ranking high in crimes to humanity while a pandemic raged. We see this reflected in the league table of nations making early headway in the vaccination of their populations.



“We reject the ideology of globalism, and we embrace

also from other, new forms of coercion and domination.”

As Roy Lilley often reminds us we reflect the people we hang out with. It has to be said however that there are differences of emphasis within the nationalist

¹ <https://files.constantcontact.com/9bc520cb001/39443bdf-f5c0-4158-b9af-7b06a53574df.pdf>

² <https://www.theguardian.com/world/commentisfree/2021/feb/14/brexit-britain-eu-covid-vaccination-fiasco>

grouping.³ Although the UK has prioritised the most vulnerable groups, other countries, including the US, have prioritised healthcare workers and in Turkey and Serbia, politicians.⁴ That being said the race to deliver effective vaccines and immunity for populations is a marathon, not a sprint.

There remain questions about the effectiveness of vaccines on new variants, the longevity of the protection granted, and the ongoing need for protection. All of these factors imply caution and for the continuation of high alerts and public health precautionary measures as

the progress to worldwide protection will be long and slow. Without worldwide protection in a globalised trade and travel regime there will always be some susceptibility to new outbreaks requiring rapid response and effective action.

Here again the difference in approach amongst nations, and groups of nations, will be a major issue. On the one hand there is a call for an international treaty to impose new obligations on states to manage public health⁵. This is supported by the EU Council and the WHO. In addition the discussion provided in the document from corporate Europe (footnote 3) shows

that some in Europe want to see more transparency and less of a soft touch approach to the pharmaceutical industry, with claims that patent protection should be withdrawn. They seem to be fighting a losing battle however⁶ with the general sentiment being of gratitude rather than resentment toward the pharmaceutical industry. Although it needs to be noted that hostility to the pharmaceutical industry is more marked in some nations (France in particular)⁷ than others and, as Mazzucato⁸ and others have pointed out, much of the industry funding was provided by the state in one form or another⁹.

Thus while the go-it-alone nationalists are looking to push their interests forward to seek advantage for their own countries, others are developing longer term strategies to secure a system to better protect the whole world. Good luck with that.

³ <https://thehill.com/opinion/healthcare/529934-bioethicist-why-uk-getting-vaccine-distribution-right-and-us-is-not>

⁴ <https://www.euronews.com/2021/02/25/covid-19-vaccinations-in-europe-which-countries-are-leading-the-way>

⁵ <https://www.bmj.com/content/372/bmj.n527>

⁶ <https://eci.ec.europa.eu/015/public/#/screen/home>

⁷ <https://journals.sagepub.com/doi/pdf/10.1177/1440783320936740>

⁸ <https://marianamazucato.com/books/the-entrepreneurial-state>

⁹ <https://canadiandimension.com/articles/view/covid-vaccines-calling-the-shots>

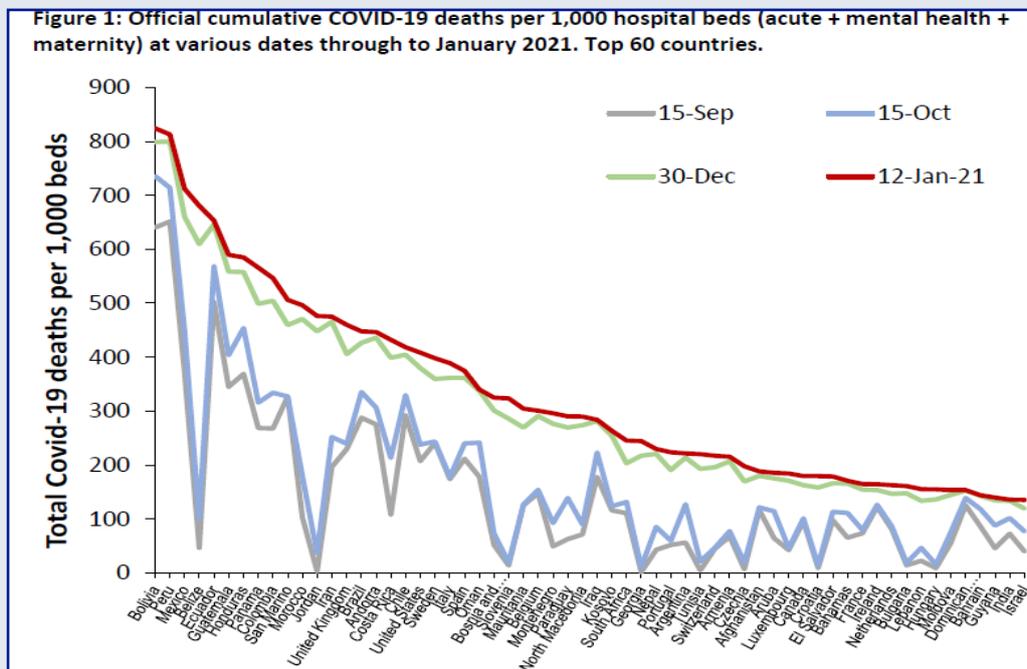
2. The elephant in the UK waiting room

The elephant in the room, while all talk is concentrated on the vaccine issue, as far as the UK is concerned, is the rapidly escalating waiting list issue¹⁰, and the impact on those non-covid related illnesses and their treatment¹¹.

This is a particular issue in the UK as other countries have managed to deal with their own waiting lists one way or another: with a greater

Although this issue is well recognised, there is very little comparative information available that would help quantify the UK position vis-à-

in discussion on the subject. The default position is that the private sector will be contracted to take up the slack in the UK.



As a proxy for how much greater the issue might be for the UK we draw attention to the work of healthcare statistician Rod Jones, a regular contributor to the Lilley eLetter, who has identified in

healthcare capacity, they have been able to maintain normal services to a much greater extent during the pandemic.

vis other European countries. Moreover, there is little willingness while the pandemic is raging to engage

the past that deaths are the biggest driver of costs in the NHS¹² and that the NHS has one of the higher ratios of

¹⁰ <https://www.dailymail.co.uk/news/article-9267835/TEN-MILLION-patients-NHS-waiting-lists-One-six-waiting-treatment.html>

¹¹ <https://www.nuffieldtrust.org.uk/research/impact-of-the-sars-cov-2-pandemic-and-associated-lockdown-measures-on-attendances-at-eds-in-english-hospitals>

¹² Jones R (2019) The nearness to death effect and why NHS pressures are going to intensify. Journal of Paramedic Practice 11(1): 28-30. <https://www.magonlinelibrary.com/doi/10.12968/jpar.2019.11.1>.

Covid deaths per 1000 beds in the world, at least amongst developed nations (See Figure 1 below). He has previously concluded that plans by STPS to further reduce NHS beds¹³

were unsoundly based and relied on capacity being created within social care that does not yet exist.

This suggests that it may be some time before the NHS returns to normal. I suspect we will be returning to these themes.

3 Update on various European commentaries

The European Centre for Disease Prevention and Control published in mid-February a risk assessment increasing the EU risk from high to very high for the general population¹⁴. A fortnightly report¹⁵ up to 25 February showed a mixed picture across the EU.

The European Health Observatory identified the risks posed by Long Covid in a report published in February 2021¹⁶. They report,

“COVID-19 can cause persistent ill-health. Around a quarter of people who have had the virus experience symptoms that continue for at least a month but one in 10 are still unwell after 12 weeks. This has been described by patient groups as ‘Long COVID’.

Our understanding of how to diagnose and manage Long COVID is still evolving but the condition can be very debilitating. It is associated with a range of overlapping symptoms including generalized chest and muscle pain, fatigue, shortness of breath, and cognitive dysfunction, and the mechanisms involved affect multiple system and include persisting inflammation, thrombosis, and autoimmunity. It can affect anyone, but women and health care workers seem to be at greater risk.”

The King’s Fund reported insights from interviews with social care leaders. The authors did not report a happy picture. Lord Bethell, the Social Care Minister in the House of Lords, told peers that “there simply is not the management or political capacity to take on a major generational reform of the entire industry in the midst of this massive epidemic”.

This does not augur well for the UK to be able to deliver northern European levels of social care to support a healthcare system running at well under the average European capacity.

¹³ Jones R (2021) Were the hospital bed reductions proposed by English Clinical Commissioning Groups (CCGs) in the Sustainability and Transformation Plans (STPs) achievable? Insights from a new model to compare international bed numbers. Intl J Health Plan Mgmt <https://doi.org/10.1002/hpm.3094>

¹⁴ <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

¹⁵ <https://www.ecdc.europa.eu/en/cases-2019-ncov-eueea>

¹⁶ <https://www.euro.who.int/en/about-us/partners/observatory/publications/policy-briefs-and-summaries/in-the-wake-of-the-pandemic-preparing-for-long-covid-2021>

The Health Service Journal has drawn attention¹⁷ to a call from Lord Darzi for a new regulatory regime balancing safety and innovation. He draws attention to the strategically important life sciences sector and the risks of Brexit and dislocation from the EU regulatory regime. He sees opportunities for the UK in lowering safety concerns.

The WHO discuss in their weekly epidemiology bulletin¹⁸ the opportunities created by Covid to boost the on-line education of Public Health.

The French newspaper Liberation has provided a very good overview¹⁹ of the comparative performance of countries close to France /UK.

The management consultants, McKinsey, have published a report²⁰ on the difficulties of the vaccine programme in the US. It is good to be reminded that the problems of administering doses of vaccines in the US do not appear to have been encountered in the UK and Europe. Although on the other hand the openness with which this report discusses distribution issues is completely lacking in both the UK and Europe.

¹⁷ <https://www.hsj.co.uk/policy-and-regulation/new-regulation-will-balance-safety-and-innovation/7029503.article>

¹⁸ <https://apps.who.int/iris/bitstream/handle/10665/339774/WER9607-eng-fre.pdf>

¹⁹ https://www.liberation.fr/societe/sante/covid-19-la-france-est-elle-plus-ou-moins-touchee-par-le-covid-que-ses-voisins-20210214_JLZUCVZFNBAR7N4VWDCHZCXHVI/

²⁰ <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/getting-shots-into-arms-how-us-states-are-addressing-the-vaccine-distribution-challenge>