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Light in the darkness

ARE BREAN

are.brean@tidsskriftet.no
Are Brean, Editor-in-Chief of the Journal of the Norwegian Medical Association. He has a PhD and is a specialist in neurology.

The pandemic has changed the world. There is more inequality and injustice. But there is also some light ahead.

Photo: Einar Nilsen

Two years have now passed since the previously unknown SARS-CoV-2 respiratory virus was first diagnosed in Wuhan, China. Before the end of the year, nearly 50 million people across the globe had been infected and 1.5 million had died (1), health services the world over were on their knees and the world economy had slumped.

It is also one year since the results of the first vaccine trials were published. Since then, more than eight billion vaccine doses have been administered to 55 % of the global population, but only to 6 % of the population in low-income countries (2). Two years on from the start of the pandemic, the number of people infected by the virus has surpassed 260 million and the death toll is more than 5.2 million (3).

To date, 1.5 million people have died in Europe alone (4). COVID-19 has become the leading cause of death in Europe, and up to 700 000 further coronavirus-related deaths are expected on our continent by March 2022 (4). The burden on the health services does not appear to have abated as we thought it would a few months ago: during the upcoming winter season, the World Health Organization foresees 'high or extreme' pressure on intensive-care units in 49 of the 53 European countries (4).

Two years into the pandemic, and well into the fourth wave of infection, we know more about what works than we did during the first wave, and one might therefore assume that the various national strategies to mitigate increasing infection rates had been harmonised. However, that is not the case. The various national approaches to handling the first cases of the Omicron variant in late November 2021 serve as a good illustration. Norway introduced a strict testing regime and ten days of quarantine for all travellers arriving from countries in Southern Africa. Sweden encouraged travellers to take a test, but without any form of control or obligation being imposed (5). Other European countries acted even more resolutely than the two Nordic neighbours, and introduced an immediate ban on entry.

> ***«The 'every country for itself' mindset has magnified the already existing health and economic inequality in Europe and the world in general»***

Within Europe, as in the rest of the world, the different responses to the pandemic have, from the very beginning, highlighted how the administrative boundaries between regions and nations are artificial in terms of how they function. Closed borders have been a barrier to the daily movement of people, goods and services, and helped reinforce regional differences. This has been problematic, not least for the health services (6). The 'every country for itself' mindset has magnified the already existing health and economic inequality in Europe and the world in general.

Seldom has this been more apparent than in the global distribution of vaccines. The glaringly unfair distribution of vaccines across the globe is disastrous in humanitarian terms. There are strong indications that this will also lead to the continued spread of new virus variants, as seen by the Southern African Omicron variant which has now become a threat. However, at the recent summit meeting, all that was achieved was that the richest G20 countries agreed to appoint yet another working group to look into the matter (7).

Fortunately, there is some light ahead. The extremely rapid development of new vaccines has demonstrated the strength of global research collaborations. The results, such as the development of mRNA-type vaccines, will have a lasting impact in the

fight against a number of important diseases and will enable vaccines against new variants of the virus to be developed and produced at record-breaking speed (8). The important role played by the WHO in global health policy has become increasingly clear, and it will be difficult to downplay the role of this organisation in the years to come. The world has also been made aware of our global mutual interdependence – as was seen when even the US president argued in favour of waiving patent rights to coronavirus vaccines (9). However, even with patent rights intact, a total of 11.7 billion COVID-19 vaccine doses will have been produced before the end of this year, increasing to 24 billion by June 2022 (10). This will be sufficient for three vaccine doses for the entire global population.

At this time last year, Norway was in lockdown, with strict limitations on the number of people at gatherings, including on Christmas Eve. At the time, I wrote that openness and trust are key ingredients for achieving sufficient vaccine coverage to permit us to decide for ourselves how many guests we could invite round on Christmas Eve 2021 (11). Now, a year on, openness and trust have been put to the test both nationally and globally. Nationally there is much to suggest that we have passed the test and that trust prevails. Globally, the situation looks rather more bleak. There is light in the darkness, however. And it still seems as though we ourselves will be able to decide how many guests to invite round on Christmas Eve 2021.

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