

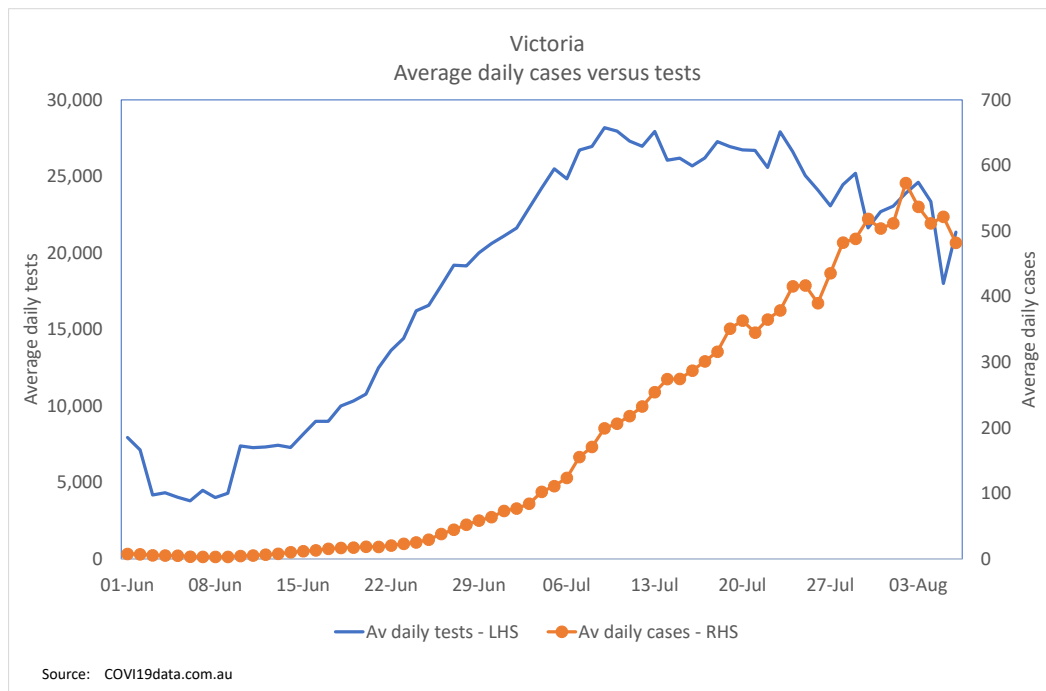
Victoria – Following the science?

@thinkingslow1

11th August 2020

When Victoria moved into Stage 4 restrictions on 2nd August 2020, you were given the same explanation that we received in the UK that political leaders were following “the science”. We believe that is not a true statement.

The graph below looks at cases and testing together, looking at cases in isolation is meaningless.



Surprisingly, in Victoria the increase in cases is not just due to testing but largely due to an increase in the ratio of positive tests. Interestingly, testing has recently gone down and we wonder if falling cases will soon be used to justify lockdown “success” – watch out for that.



In terms of the science behind lockdown, here are some simple facts;

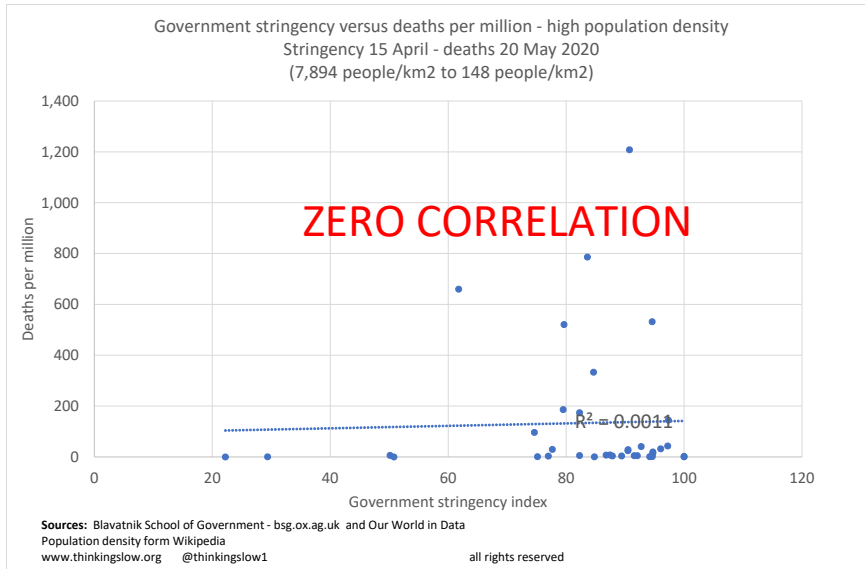
1. A detailed data study concluded (we reached the same conclusion)¹ there was no correlation between lockdown and mortality;
2. The UK's Office of National Statistics (ONS) has recently acknowledged that the quality adjusted life years (QALY) from policy impacts are 1.5 x the QALY from COVID²;
3. Nobody (apart from a handful of modellers) has ever recommended quarantining healthy people.
4. Almost all distinguished epidemiologists are against lockdown (to varying degrees). Professor Gupta recently commented on COVID-19 in Australia saying "there is no way lockdown can eliminate the virus once you lift lockdown in areas it will flare up again,"³.

The relevant data sources for the above points are linked in this document so you can check these documents and ask elected representatives to justify, or otherwise remove lockdown restrictions.

We unpack the four points below.

Statistical Study

In general many countries in Europe have reached similar endpoints despite a variation in policy responses. Furthermore, Professor Levitt has been able to predict peaks in deaths and cases based on maths alone, i.e. not factoring in a multitude of policy responses. The virus development follows a Gompertz function. In the work that we did we found zero correlation between the severity of lockdown regimes at peak and mortality outcomes at the end of May.



The study we site at point 1 is more sophisticated but reaches a similar conclusion “Lastly, government actions such as border closures, full lock-downs, and a high rate of COVID-19 testing were not associated with statistically significant reductions in the number of critical cases or overall mortality”.

The ONS study

The study identifies the QALY lost due to COVID and compares with the QALY from resulting recession and limiting access to healthcare services. Even with unrealistic assumptions (including that the years of life lost for every COVID death are 10.4 despite their age and comorbidities), the ONS still ends up concluding that QALY due to response and knock-on effects (recession) are 1.5 x QALY from COVID. We think a more accurate estimate could be around 5-6x.

Press seemed to have missed main point - the impact of policy response in terms of quality adjusted life years (QALY) is 1.5 x more than QALY of COVID.

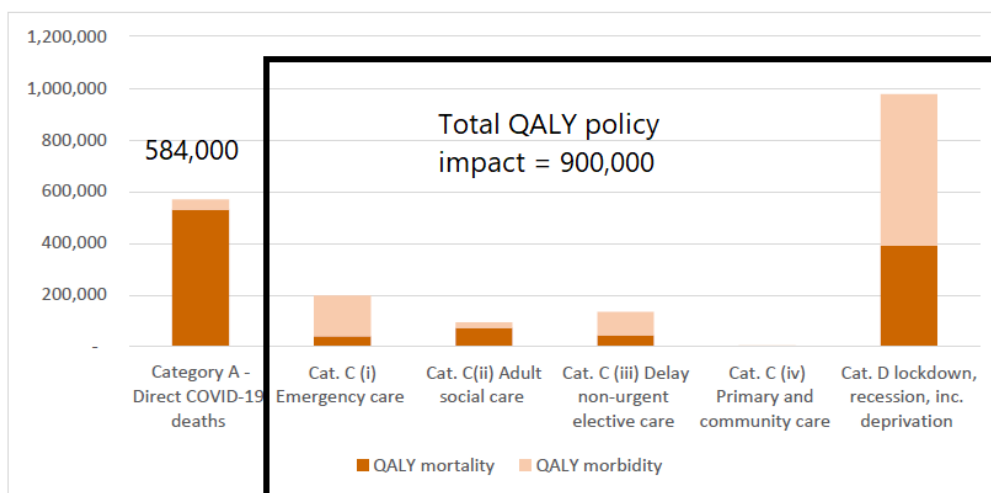


Figure 3 Estimated total lifetime QALYs for Categories A, C and D

Nobody has ever recommended quarantining healthy people

There is a valid aim to prevent contact between infected people and healthy people as expressed by the WHO. However, even here Professor Giesecke believes that given the very high proportion of asymptomatic infections (people with the virus but without symptoms) this effort is “all but futile”. We very much recommend reading his excellent half page summary (also linked below).

AIER⁴ identified the 2006 origins of lockdown theory (in a bizarre modelling exercise), which was vigorously refuted by epidemiologists who concluded that "The negative consequences of large-scale quarantine are so extreme.....that this mitigation measure should be eliminated from serious consideration"⁵.

Expert opinion

There is a lot of expert opinion which is against lockdowns for all of the reasons listed above. Hardly any of that opinion is reported in the mainstream media which has constantly over-emphasised the risks of COVID (there are risks) and generally supported lockdowns. Below we give you just a few relevant quotes from extraordinarily well qualified epidemiologists (and related disciplines). Many of these opinions were voiced at the very beginning of this pandemic in February and this is in not 20/20 hindsight.

These opinions were largely ignored by the UK leadership.

Lockdown comments

Professor Giesecke	Stopping the spread is all but futile
Professor Gupta	Lockdown measures are ineffective
Professor Woolhouse	I fear costs of lockdown considerably worse than disease
Professor Levitt	I think a lockdown is very, very crude and shouldn't have been used in this century
Professor Ioannidis	Isolating infectious impact from all other impacts is dangerous.
Professor Bhakdi	unforeseeable socio-economic consequences of the drastic containment measures

Only the modellers who were in the driving seat at SAGE when setting the initial policy response still maintain that the policy makes any sense and their “proof” is an assumption that lockdown reduced R_0 by 80% in a single step. But of course the most famous modeller has been wrong on every forecast that we have been able to identify.

We have posted links to some of the underlying material on our website at the following page.

<https://thinkingslow.org/resources/>

Conclusions

If you are told that this will be until 13th September 2020 then that is unlikely to be true – one thing that all epidemiologists agree on is that you will have to keep locking down/opening up essentially until there is a vaccine in 2021.

In addition COVID-19 is not unprecedented, the influenza pandemics of 1957 and 1968 were likely to have been more significant from a years of life lost perspective, only the reaction of locking down is unprecedented.

We remain suspicious of leaders who are constantly having press conferences, issuing pages and pages of orders and mobilizing the police and explaining how much they regret having to do this.

People in Victoria can accept Stage 4 lockdown is a necessary step to protect the State's health. But based on the material above, an alternative explanation is that this is a huge overreaction from a poorly informed group of politicians facing problems of their own.

We know which version makes more sense to us.

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¹ [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30484-9/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30484-9/fulltext)

² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/907616/s0650-direct-indirect-impacts-covid-19-excess-deaths-morbidity-sage-48.pdf

³ <https://www.dailymail.co.uk/news/article-8489039/Oxford-professor-Sunetra-Gupta-says-Australia-embrace-herd-immunity.html>

⁴ <https://www.aier.org/article/the-2006-origins-of-the-lockdown-idea/>

⁵ <http://upmc-biosecurity.org/website/resources/publications/2006/2006-09-15-diseasemitigationcontrolpandemicflu.html>