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LETTER TO THE EDITOR

Scientists are more in favor of Covid 19 protection than restrictions

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On October 4, 2020, Dr. Martin Kulldorff, Professor at Harvard University, Dr. Sunetra Gupta, Professor at Oxford University, and Dr. Jay Bhattacharya, Professor at Stanford University, signed in Great Barrington, United States, a declaration raising grave concerns about the damaging physical and mental health impacts of the prevailing Covid-19 policies, recommending instead focused protection on the vulnerable [1]. Even if lockdown supporters and mainstream media downplayed the petition in every possible way, the now (January 5, 2021) 13,083 signatures by Medical & Public Health Scientists and 39,544 signatures by Medical Practitioners are a clear indication that a significant percentage of scientists do not support generalized lockdowns going on forever.

Current lockdown policies have a guestionable effect on fatalities. They are also producing devastating effects on short and long-term public health, leading to greater excess mortality in years to come. The effectiveness of prevailing lockdown policies, same as pharmacotherapy approaches, is challenged by the evidence of fatalities and the percentage of fatalities that simply do not fit the narrative. Belgium had a total number of cases 650,887, and a total number of deaths 19,750, or 56,035 and 1,700 per million. France had a total number of cases 2,680,239, and a total number of deaths 66,282, or 41,015 and 1,014 per million. The United Kingdom had a total number of cases 2,774,479, and a total number of deaths 76,305, or 40,759 and 1,121 per million. Then, the neighboring Netherlands and Sweden had a much smaller total number of deaths despite fewer restrictions. The Netherlands had a total number of cases 834,064 and a total number of deaths 11,826, or 48,621 and 689 per million. Sweden had a total number of cases 469,748 and a total number of deaths 8,985, or 46,364 and 887 per million.

Similarly, countries such as Saudi Arabia, United Arab Emirates (UAE), or Qatar that adopted less restrictive protocols for Covid-19 infection, not intended to replace clinical judgment but to complement, had much smaller percentages of deaths than the very strict therapeutic orthodoxy France, United Kingdom or Belgium, where, for example, the use of the CQ/HCQ that is widespread in UAE and Qatar, is strongly discouraged. Saudi Arabia had 363,259 cases and 6,265 fatalities total, or 10,352 cases and 179 fatalities per million. The UAE had 216,699 cases and 685 fatalities total, or 21,775 cases and 69 fatalities per million. Qatar had similarly 144,852 cases and 254 fatalities total, or 51,589 cases and 87 fatalities per million.

While other factors in addition to restrictions and pharmacotherapy certainly contribute to explaining this enormous difference in between the outcome of infection, it must be added that disparities are extreme also in patients of about the same profile for age and comorbidities.

As the vulnerability to death from Covid-19 is in principle more than a thousand-fold higher in the vulnerable for age or comorbidities, and almost not-existing in the generally healthy population, if everything is done as per best protocols, the petition suggests bringing back life as-close-as possible to normal, while focusing protection towards those at highest risk. As Covid-19 is going to have its way with us like it or not, how we deal with it is a matter of how much we want to destroy or otherwise the economy and the future of the younger generation.

This makes a lot of sense to a large number of scientists, that however has been so far prevented to express their, at least partial, support in the peer review, where only critical statements have been surfaced, for example [2]. Of title "Scientific consensus on the Covid-19 pandemic: we need to act now", this work is promoting as "consensus" what is a minority view in between 31 mostly young and inexperienced scientists. The corresponding author is not an epidemiology professor but a post-doctoral fellow of a diverse current research focus. The letter says that any so-called herd immunity strategy based on letting coronavirus infections spread unchecked is not only dangerous but completely unsupported by scientific evidence. However, the Great Barrington declaration is not promoting letting coronavirus infections spread unchecked, but advocating sustainable restrictions and focused protection that is something completely different. The group of 31 has then been portraved by the mainstream media as a clear indication that "the scientists" are happy with lockdowns going on forever. Remarkably, comments of the opposite sign have been declined in the same journal, publisher of the top retracted work of 2020, a retrospective analysis of not available data that had tremendous influence, leading to the suspension of CQ/HCQ clinical trials, that by the way is still used with success in some countries such as Saudi Arabia, the UAE, and Oatar.

Thus, even if science is not a democracy, projects such as [3] aimed at objectively measuring consensus on matters

of scientific and social controversy surrounding the Covid-19 pandemic are welcomed. This project targets opinions from scientists in a specific field. A literature ''search'' in the Web of Science identified 1881 corresponding authors of recent articles relevant to the topic of Covid-19 mitigation strategies. Their answers were solicited. Despite very preliminary, only based on the responses of 122 scientists, and including researchers in various disciplines and not only health professionals or epidemiologists, but also this survey expresses criticism versus generalized lockdowns. Answering the question to what extent do you support a "Focused Protection'' policy against Covid-19, only 25.4% responded none, the remaining 74.6% expressing support in a variable extent to the Great Barrington declaration. Present support goes from little (17.2%) to partially (29.5%), from mostly (16.4%) to full (11.5%). Thus, 3 of 4 scientists feel uncomfortable with current lockdowns.

So far, the pandemic has been approached in different ways, with restrictions enforced differently, and also with very different pharmacotherapy approaches, and results have dramatically differed in-between countries, with more popular narratives often challenged by the evidence. Consensus science by mainstream media is everything but the best possible science available, and certainly not the ''majority'' opinion between scientists. Scientists are more in favor of, rather than against, focused protection. Scientists are in favor of more effective and more sustainable evidence-based measures.

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Ethical approval

Not required.

Randomized controlled trial

Not applicable.

Disclosure of interest

The author declares that he has no competing interest.

References

- [1] gbdeclaration.org, visited January 5, 2021.
- [2] Alwan NA, Burgess RA, Ashworth S, et al. Scientific consensus on the Covid-19 pandemic: we need to act now. Lancet 2002;396:e71–2.
- [3] www.covidconsensus.org, visited January 5, 2021.

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