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## **The Case for Covid Optimism**

A century ago, another pandemic terrorized the world for over a year — until it didn't. Is the coronavirus finally going the way of the 1918 flu?

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Millions of Johnson & Johnson's single-shot coronavirus vaccines are being shipped across the country this week, just days after the Food and Drug Administration confirmed that it was 85 percent protective against severe Covid-19 and 100 percent protective against hospitalization and death.

That may sound like another bit of routine pandemic news, but it shouldn't: If Johnson & Johnson's had been the first authorized vaccine in the United States instead of the third, "everybody would be doing handstands and back flips and high fives," Dr. James T. McDeavitt, dean of clinical affairs at the Baylor College of Medicine, told The Times.

The addition of a third stream of vaccine supply also means that there will be enough doses for the entire adult population by the end of May, according to President Biden. Which raises a tantalizing question: Could life in the United States soon return to something approaching normal? Here are a few reasons to think so, along with a few reasons to keep your expectations in check.

### **'Normal' by summer?**

The vaccines are a scientific marvel. Exactly one year ago, Dr. Anthony S. Fauci said it would take 12 to 18 months, at best, to discover a single vaccine of potentially middling efficacy. Many scientists thought even that was something of a moonshot: Vaccines typically take 10 years to develop, if they can be developed at all, and none had ever before been developed in less than four.

So it's worth taking stock of how extraordinary it is that in less than 12 months since the pandemic was declared, the United States alone has three — and potentially soon four — vaccines that appear to effectively eliminate the risk of dying from Covid-19 and nearly eliminate the risk of hospitalization, including, it seems, for the most fearsome variants. That's an unequivocally heartening fact whose real-world effects are only just starting to be felt:

In nursing homes, deaths plummeted between December and February even as they rose across the country.

In Israel, a recent analysis of 602,000 vaccinated people found that only 21 later contracted the virus and had to be hospitalized. As my colleague David Leonhardt has pointed out, that's a minuscule fraction of the rate of flu hospitalization in the United States every year.

"The vaccines have proved to be more effective than anyone could have hoped, so far preventing serious illness and death in nearly all recipients," my colleague Apoorva Mandavilli writes. "If the Biden administration can keep its promise to immunize every American adult by the end of the summer, the variants should be no match for the vaccines."

The rollout is speeding up. After being hobbled by the polar vortex two weeks ago, both Pfizer and Moderna are expected to increase their weekly shipments this month. If they meet their pledges, and if Johnson & Johnson also comes through with the 20 million single-shot vaccines it has promised, about 130 million Americans — or roughly half of all eligible adults — could be immunized by the end of March. And that's before taking into account the partnership between Merck and Johnson & Johnson the White House announced on Tuesday, which an official said could eventually double the supply of the new vaccine. The number we should be striving for, experts say, is three million doses per day, up from the current 1.94 million.

Cases have plummeted. Since the U.S. outbreak's peak in January, cases have fallen by about 74 percent, stirring hopes that the worst may be behind us. What's causing the decline? Some, like Dr. Marty Makary, a professor at the Johns Hopkins School of Medicine and Bloomberg School of Public Health, believe it can be explained only by the increasing prevalence of natural immunity, leaving him with the prediction that "Covid-19 will be mostly gone by April."

Other epidemiologists think that's far too optimistic a timeline and attribute the case decline to other factors like the end of the holidays and the turning of the seasons. Herd immunity, then, is probably still some months away — but perhaps only just a few. Soon enough, Dr. James Hamblin writes for *The Atlantic*, "pre-pandemic norms could return to schools, churches and restaurants. Sports, theater and cultural events could resume. People could travel and dance indoors and hug grandparents, their own or others'. In most of the U.S., the summer could feel ... 'normal.'"

### ***The case for more caution***

The U.S. outbreak is still very bad. As of Tuesday, the United States was averaging over 2,000 Covid deaths a day. While it's an improvement from January's numbers, that's still more Covid deaths in a single day than South Korea has recorded in the entire pandemic.

The decline in cases has also leveled off in recent days, prompting fears that the easing of restrictions and the spread of more contagious variants — several have been identified in the United States, including most recently one in New York City — could give rise to a new surge of infection.

"Very, very high case numbers are not a good thing, even if the trend is downward," Marc Lipsitch, a Harvard epidemiologist, told *The Times*. "Taking the first hint of a downward trend as a reason to reopen is how you get to even higher numbers."

The vaccine messaging has been confusing. Six decades ago, the announcement of the polio vaccine was greeted with national celebration: Church bells rang, children were sent home from school and people danced in the streets.

"One might have expected the initial approval of the coronavirus vaccines to spark similar jubilation — especially after a brutal pandemic year," Zeynep Tufekci writes in *The Atlantic*. "But that didn't happen. Instead, the steady drumbeat of good news about the vaccines has been met with a chorus of relentless pessimism."

Communicating outstanding uncertainties about the vaccines — the extent to which they reduce transmission, for example — is both honest and necessary to pre-empt potentially risky post-vaccination behavior. But if that's the primary message people hear, as Mr. Leonhardt writes, journalists and public-health officials run the much greater risk of discouraging people from getting vaccinated in the first place.

The issue may be made worse by headlines that give people a misleading impression of non-mRNA vaccines as “second class,” a perception that has begun to hinder the rollout in Europe.

“If there is a kind of a differential allocation, even if the reasons are good, that will definitely explode into allegations of racism and mistrust,” Kasisomayajula Viswanath, a professor of health communication at Harvard, told Stat. “We already have a lot of mistrust in the system.”

So what message should people hear? “It’s going to save your life — that’s where the emphasis has to be right now,” Dr. Peter Hotez of the Baylor College of Medicine told The Times.

Vaccine hesitancy is polarized. Republicans are the only demographic group whose members are less likely than not to say they will get vaccinated, Caitlin Owens reports for Axios. As a result, vaccine hesitancy is now more prevalent among white Americans than Black and Latino Americans.

Rich countries are hoarding vaccines. As the head of the United Nations lamented last month, the global vaccine distribution has been “wildly uneven and unfair,” with just 10 countries administering 75 percent of the world’s doses. At the current pace, it will take more than four years to reach global herd immunity.

“The pandemic will not be vanquished anywhere until it is vanquished everywhere,” The Times editorial board writes. “Several known coronavirus variants are making their way around the world, and epidemiologists know more will evolve so long as the virus continues to spread, potentially challenging the efficacy of existing vaccines.”

The board praises President Biden for pledging \$4 billion to the Covax program, the World Health Organization’s initiative to deliver at least 1.3 billion shots to 92 low- and middle-income countries by the end of 2021. But Dr. Tedros Adhanom Ghebreyesus, the director general of the W.H.O., has stressed the need to go further by waiving intellectual property rights to the vaccines so that other countries can afford and manufacture them, much as patent exceptions were made for H.I.V. drugs in the early 2000s.

The proposal, which the World Trade Organization is debating this week, has faced staunch opposition from the United States and Europe, but House lawmakers and advocacy groups are now turning up the pressure on Mr. Biden to support it.

### ***What is ‘back to normal,’ anyway?***

The coronavirus is probably not going to be eradicated, as Nicky Phillips explains in Nature. About nine in 10 scientists she surveyed predict it will instead become endemic, meaning that it will continue to circulate at reduced levels indefinitely, hopefully causing less severe symptoms over time.

So how exactly will we know when the American outbreak is “over”? In The Atlantic, Alexis Madrigal proposes the “flu test”: 100 Covid-19 deaths or fewer a day, which is about the number of Americans who die every day from the flu.

“Right now, the country as a whole is still reporting close to 2,000 deaths a day, and just two weeks ago that number was more than 3,000,” he wrote last week. “So, if we’re going by the flu test, we still have a very long way to go.”