'We could open up again and forget the whole thing'

Epidemiologist Knut Wittkowski on the deadly consequences of lockdown.

SPIKED

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Governments around the world say they are following 'The Science' with their draconian measures to stem the spread of the virus. But the science around Covid-19 is bitterly contested. Many experts have serious doubts about the effectiveness of the measures, and argue that our outsized fears of Covid-19 are not justified. Knut Wittkowski is one such expert who has long argued for a change of course. For 20 years, Wittkowski was the head of Biostatistics, Epidemiology, and Research Design at The Rockefeller University's Center for Clinical and Translational Science. *spiked* spoke to him to find out more about the pandemic.

spiked: Is Covid-19 dangerous?

Knut Wittkowski: No, unless you have age-related severe comorbidities. So if you are in a nursing home because you cannot live by yourself anymore, then getting infected is dangerous.

We had the other extreme in Switzerland, which was hit pretty hard. There was one child that died. People believed that this child was born in 2011. In fact, it was born in 1911, and that was the only child that died. It was a mere coding error. Somebody with the age 108 was coded as aged eight.

spiked: How far along is the epidemic?



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Wittkowski: It is over in China. It is over in South Korea. It is substantially down in most of Europe and down a bit everywhere, even in the UK. The UK and Belarus are latecomers, so you do not see exactly what you are seeing in

continental Europe. But everywhere in Europe, the number of cases is substantially declining.

spiked: Have our interventions made much of an impact?

Wittkowski: When the whole thing started, there was one reason given for the lockdown and that was to prevent hospitals from becoming overloaded. There is no indication that hospitals could ever have become overloaded, irrespective of what we did. So we could open up again, and forget the whole thing.

I hope the intervention did not have too much of an impact because it most likely made the situation worse. The intervention was to 'flatten the curve'. That means that there would be the same number of cases but spread out over a longer period of time, because otherwise the hospitals would not have enough capacity.



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Now, as we know, children and young adults do not end up in hospitals. It is only those who are both elderly and have comorbidities that do. Therefore you have to protect the elderly and the nursing homes. The ideal approach would be to simply shut the door of the nursing homes and keep the personnel and the elderly locked in for a certain amount of time, and pay the staff overtime to stay there for 24 hours per day. How long can you do that for? For three weeks, that is possible. For 18 months, it is not. The flattening of the curve, the prolongation of the epidemic, makes it more difficult to protect the elderly, who are at risk. More of the elderly people become infected, and we have more deaths.

spiked: What are the dangers of lockdown?

Wittkowski: Firstly, we have the direct consequences: suicides, domestic violence and other social consequences leading to death. And then we have people who are too scared to go to the hospitals for other problems like strokes or heart attacks. So people stay away from hospitals because of the Covid fear. And then they die.

spiked: Were hospitals likely to be overrun?

Wittkowski: Germany had 8,000 deaths in a population of 85million. They had 20,000 to 30,000 hospitalisations. In Germany, that is nothing. It does not even show up as a blip in the hospital statistics. In Britain, the highest hospital utilisation was about 60 per cent, if I am not mistaken.

In New York City, it was a bit higher. The Javits Congress Center was turned into a field hospital with 3,000 beds. It treated just 1,000 patients in all. The Navy ship sent to New York by President Trump had 179 patients but it was sent back because it was not needed. New York is the epicenter of the epidemic in the United States, and even here at the epicenter, hospital utilisation was only up a bit. Nothing dramatic. Nothing out of the ordinary. That is what happens during the flu season. People have the flu, and then there are more patients in the hospitals than there otherwise would be.

spiked: Are we on the way to reaching herd immunity?

Wittkowski: All the studies that have been done have shown that we already have at least 25 per cent of the population who are immune. That gives us a nice cushion. If 25 per cent of the population are already immune, we are very quickly getting to the 50 per cent that we need to have what is called herd immunity. We will actually get a bit higher than that. So we have flattened what otherwise would have been a peak, and if we now let it run, even if the number of cases would increase a bit, it would not get as high as it was, because we already have enough immune people in the population. So it is not going to spread as fast as it could have spread in the beginning.

spiked: Should we worry about a second spike?

Wittkowski: This is an invention to justify a policy that politicians are afraid of reversing.

spiked: Should people practice social distancing?

Wittkowski: No.

spiked: Why not?

Wittkowski: Why? What is the justification for that? People need to ask the government for an explanation. The government is restricting freedom. You do not have to ask me for justification. There is no justification. It is the government that has to justify what it is doing. Sorry, but that is how it is.

spiked: How did we get this so wrong?

Wittkowski: Governments did not have an open discussion, including economists, biologists and epidemiologists, to hear different voices. In Britain, it was the voice of one person – Neil Ferguson – who has a history of coming up with projections that are a bit odd. The government did not convene a meeting with people who have different ideas, different projections, to discuss his projection. If it had done that, it could have seen where the fundamental flaw was in the so-called models used by Neil Ferguson. His paper was published eventually, in medRxiv. The assumption was that one per cent of all people who became infected would die. There is no justification anywhere for that.

Let us say the epidemic runs with a basic reproduction rate of around two. Eventually 80 per cent of the population will be immune, because they have been infected at some point in time. Eighty per cent of the British population would be something like 50million. One per cent of them dying is 500,000. That is where Ferguson's number came from.

But we knew from the very beginning that neither in Wuhan nor in South Korea did one per cent of all people infected die. South Korea has 60million people. It is about the same size as the UK. How many deaths were in South Korea? Did they shut down? No. The South Korean government was extremely proud to have resisted pressure to drop the very basic concepts of democracy.

The epidemic in South Korea was over by March, the number of cases was down by 13 March. In Wuhan they also did not shut down the economy. Wuhan had restricted travel out of the city. They stopped train services and blocked the roads. They did not restrict anything social within the city until very late. We have seen, then, in Wuhan and South Korea, if you do not do anything, the epidemic is over in three weeks.

Knowing that the epidemic would be over in three weeks, and the number of people dying would be minor, just like a normal flu, the governments started shutting down in mid-March. Why? Because somebody pulled it out of his head that one per cent of all infected would die. One could argue that maybe one per cent of all *cases* would die. But one per cent of all people infected does not make any sense. And we had that evidence by mid-March.

spiked: Just to clarify, cases are different from people infected?

Wittkowski: Cases means people who have symptoms that are serious enough for them to go to a hospital or get treated. Most people have no symptoms at all. But waking up with a sore throat one day is not a case. A case means that someone showed up in a hospital.

spiked: The UK government was also heavily influenced by the situation in Italy. Why did that go so wrong?

Wittkowski: What we saw in Italy was that the virus was hitting those who were both old and had comorbidities, so lots of people died. But the median age of those who died in Italy was around 81 years. It is not that children or working people were dying. It was the elderly in nursing homes – not even the elderly living by themselves mostly. We saw lots of deaths and that scared people. But then, Italy did an illogical thing. It closed schools so that the schoolchildren were isolated and did not get infected and did not become immune. Instead, the virus spread almost *exclusively* among the old, causing more deaths and a higher utilisation of hospitals. And that is mind-boggling.

Very early on, we knew from China and we knew from South Korea that this is an epidemic that runs its course, and there was nothing special about it. But when it hit Italy, we stopped thinking about it as an age-stratified problem, and instead lumped everyone all together. The idea that if we did not shut down the schools the hospitals would have been overwhelmed does not make any sense. I frankly still cannot fully understand how our governments can be so stupid.

spiked: Governments say they are following the science. Is that really true?

Wittkowski: They have the scientists on their side that depend on government funding. One scientist in Germany just got \$500million from the government, because he always says what the government wants to hear.

Scientists are in a very strange situation. They now depend on government funding, which is a trend that has developed over the past 40 years. Before that, when you were a professor at a university, you had your salary and you had your freedom. Now, the university gives you a desk and access to the library. And then you have to ask for government money and write grant applications. If you are known to criticise the government, what does that do to your chance of getting funded? It creates a huge conflict of interest. The people who are speaking out in Germany and Switzerland are all independent of government money because they are retired.

spiked: Did the Swedish scientists get it right?

Wittkowski: Sweden did the right thing. And they had to take a lot of heat for it. Now compare Sweden and the UK. The only difference is that Sweden did fine. They did have a problem. They had a relatively high number of deaths among the nursing homes. They decided to keep society open and they forgot to close nursing homes. Remarkably, the politicians acknowledged that it was a mistake to extend that open concept to nursing homes. The nursing homes should have been isolated to protect the elderly who are at high risk. But I think the Swedish government is doing well to even acknowledge that mistake.

The first death in the United States was in a nursing home in Seattle. And that was by the end of February. So everybody knew that we were expecting the same thing that we had seen in Italy – an epidemic that hits the elderly. But until just this week in New York State, the government told the nursing homes that if they did not take in patients from hospitals, they would lose their funding. So they would have to import the virus from the hospitals.

One third of all deaths in New York State were in nursing homes. One could have prevented 20,000 deaths in the United States by just isolating the nursing homes. After three or four weeks, they could have reopened and everybody would be happy.

That would have been a reasonable strategy. But shutting down schools, driving the economy against the wall – there was no reason for it. The only reason that this nonsense now goes on and on, and people are inventing things like this 'second wave', which is going to force us to change society and never live again, is that the politicians are afraid of admitting an error.

spiked: Is this easier to see in hindsight?

Wittkowski: What I am talking about is not hindsight. The epidemics in Wuhan and South Korea were over in mid-March.

In March, I submitted a paper to medRxiv, summarising all of that. At least towards the end of March, the data was there, and everybody who wanted to learn from it could.

On 17 April, Robert Redfield, director of the Centers for Disease Control and Prevention, presented data at the coronavirus presidential briefing at the White House. And there was one plot that he presented. And I looked at it and asked why people were not jumping to their feet. Why were people not understanding what they were looking at? The plot was the data from the ILINet. For 15 years, hospitals have counted every person who shows up with an influenza-like illness - fever, coughing, whatever. There were three spikes in the 2019-2020 flu season. The first was in late December - influenza B. The next was in late January – an influenza A epidemic. And then there was one that had a peak in hospital visits around 8 March -Covid-19. For the peak to happen on that day, those patients have to go through a seven-day incubation period and then have symptoms. But they do not go to the hospital with the first symptoms. If it gets worse over three days, only then do they go to a hospital.

Four weeks later, on 8 April, the number of new infections was already down. In time for Easter, our governments should have acknowledged they were overly cautious. People would have accepted that. Two weeks' shutdown would not have been the end of the world. We would not have what we have now – 30million people unemployed in the United States, for example. Companies do not go bankrupt over a two-week period. Two months is a very different story. If you have to pay rent for two months for a restaurant in New York with no income, you will go bankrupt. We see unemployment, we see bankruptcies, we see a lot of money wasted for economic-rescue packages – trillions of dollars in the United States. We see more deaths and illness than we would otherwise have had.

And it is going on and on and on, just because governments are afraid of admitting an error. They are trying to find excuses. They say they have to do things slowly, and that they have 'avoided 500,000 deaths' in the UK. But that was an absurd number that had no justification. The person presenting it pretended it was based on a model. It was not a model. It was the number of one per cent of all people infected dying. And nobody was questioning it. And that is the basic problem.

spiked: People will say that the interventions in South Korea – like contact tracing – were more effective.

Wittkowski: How many orders of magnitude, take us from 500,000 to 256, the number of deaths in South Korea? To have that kind of effect you would have to put everybody in the UK into a negative pressure room. It is totally unrealistic to even consider a reduction from 500,000 to 256.

Knut Wittkowski was talking to Fraser Myers.

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NICK HUNT

20th May 2020 at 1:03 pm

The problem is much deeper and more serious than 'Ferguson's mistake'. It is the problem of scientific illiteracy. Basically, government is treating science as a singular authority that determines and justifies decision-making. But science is a fallible, progressive enterprise full of disagreement, debate and diverse opinion. Scientific truth progresses, but only when its fallibility is fully embraced and practised. Only dogma is 'infallible' and so never progresses. Diverse, sceptical expert opinion must always be welcome and considered in policy-making. Had it been, Ferguson and many other 'scientific advisors' would have been challenged and made obsolete long ago. Politicians treating an expert advisor as unquestionable oracle fail to see that "science is belief in the ignorance of experts", as Richard Feyman said. Such illiteracy also enables arrogant advisors like Ferguson to think they can determine policy in the first

place. Without expert humility, scepticism and diversity of opinion, science becomes dogma, and there is our real problem. The same huge error underlies official views and policy on 'climate crisis' and CO2 and hydroxychloroquine treatment in the UK, to name just 2 key examples. And to think the UK was once the home of science and rational thinking! Anyone enjoying this way of thinking, more here:

https://medium.com/@nickhun...

BRIAN COPELAND

18th May 2020 at 9:40 pm

Are you suggesting that this is the man you wanted the country to follow? Because if you do it's sure to be a disaster. Let's explore what 'ol Mr. Wittkowski has to say. What he says is either completely wrong or in the short space of this one interview he falls all over himself contradicting himself. Wittkowski says "... the South Korean government was extremely proud to have resisted pressure to drop the very basic concepts of democracy." Uh…no. Here's what the South Koreans did.

First, unlike the US they acted quickly and fast. Then they tested and tested and then tested some more. Third, they relied heavily on contact tracing and isolation of anyone the infected person came in contact with and finally, unlike don trump or evidently Dr. Wittkowski, the Koreans pushed hard on the enlistment of the public's help. They strongly advocated wearing masks and electronic contact tracing. By and large the South Koreans have broadly accepted the loss of privacy as a necessary trade-off. From all of this they (South Korea) have had a very low death rate per captia.

The Wittkowski starts in on another ruse. Wittkowski say the number were never so great that NYC was inundated...so therefore the numbers of cases to be expected is wrong. That's all very fine to try to make that argument and use NYC as an example....I'd say it's still wrong but be that as it may. New York City, not only densely populated but densely populated with hospitals and medical infrastructure. Now, does his argument work as well when its not NYC but Linn or Blackhawk county in Iowa. You actually think some rural hospital has the capacity to handle multiple intubations? You're dreaming if you do.

Then Wittkowski is asked if we should worry about a second spike. Amazingly he says no not at all....that a second spike is just "...an invention to justify a policy that politicians are afraid of reversing." Well I'm sure we'll find out for sure in the fall. I can only go on what history teaches. And history is a stern taskmaster when you look at the numbers produced in the second spike in 1918. Then WIttkowski is asked if we should "socially distance". Poppycock...he says of course not. This he says is nothing more than government overreaching and restricting freedom. Well you know what really restricts freedom? Being intubated.

Wittkowski also goes on to say that every study says that we're 25% infected as a nation....which for the USA is 75 million more or less? Oh really? Which study? Clearly he's far too busy to point us to a study he's using to prop up his theory. So....if herd immunity comes at about 60 percent then we've got another 80 to 85 million more infections to go and it'll all be over? Even at .008 percent mortality out of a 85 million infected pool that get you oh ...only about 680 thousand more dead people.

The USA can do better....and we all can do better than to take the advice of Knut Wittkowski.

PAULINE FARMER

19th May 2020 at 5:23 pm

But don't you think he has a point? It's baffling how Johnson & Co. followed Ferguson's advice, when the latter's track record shows him to be a serial failure. All his predictions have been wildly inaccurate, exaggerated and alarmist. Hardly a reliable source of advice.

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