

As vaccination shortage continues, US swine flu deaths mount

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A new estimate by the Centers for Disease Control and Prevention (CDC) places the US death toll from the swine flu, or H1N1 virus, much higher than had been previously reported. The death rate among the young and healthy is also far greater than both recent CDC estimates and that of normal flu strains.

Nearly 4,000 American have died as a result of the swine flu, out of an estimated 22 million who have been infected with the virus, according to the new CDC calculations, which are extrapolations based on data gathered in ten states.

“We’ve been tracking influenza for decades,” said Anne Schuchat of the CDC’s National Center for Immunization and Respiratory Diseases. “What we are seeing in 2009 is unprecedented.”

The swine flu is exacting the greatest toll in age categories typically more resistant to flu strains. Approximately three quarters of all deaths have been among those aged 18 to 64. About 540 teenagers, children and babies have died as a result of the swine flu—a figure four times higher than that reported last week by the CDC, and seven times the death total for a typical flu strain—with the heart of flu season, December through May, still to come.

There have been a total of 98,000 H1N1-related hospitalizations, with more than a third of these, 36,000, among those age 17 and under.

Only about 10 percent of swine flu-related deaths are among the elderly, a stark reversal from a normal flu season. Typical flu strains in recent years have led to 36,000 annual deaths, about 90 percent of these among the elderly, with the flu fatally aggravating previously existing medical conditions in most cases.

In contrast, the CDC estimates that 90 percent of H1N1 deaths have been among those 64 years and younger, and between 20 and 30 percent of those killed were healthy prior to contraction.

What makes these deaths particularly tragic is that, in most cases, they could have been prevented had a sufficient supply of H1N1 vaccine been prepared in time.

After declaring that the shortage in the vaccine would ease through November, the CDC has been compelled to admit that weekly shipments again fell far short of expectations. Only 5 million doses were shipped last week, 3 million short of expectations and down

from an average of 11 million in each of the previous two weeks.

A CDC spokesman, Tom Skinner, told the *World Socialist Web Site* that “a few of the manufacturers had some unforeseen issues with getting some lots released. You’d have to call the manufacturers to get more detail about that.”

The CDC’s Schuchat had earlier speculated that among these issues “might have been side effects of the storm” resulting in “slower shipping.”

The Obama administration ordered approximately 250 million doses of the vaccine, and confidently predicted that 120 million of those would be available to the public by this point. Instead, the federal government has received only 42 million doses as of Thursday, and not all of these have been distributed.

According to a recent Associated Press poll, only one in six families have been able to vaccinate at least one child, while one in seven families have tried to vaccinate but have been turned away. For every one adult who has been vaccinated, three have tried and failed.

Among recent deaths from the swine flu:

- Alitza Ortiz Sanchez, age 5, of San Diego on October 10. A healthy child with no known medical complications, her parents took her to the hospital immediately after she developed severe symptoms, but intensive medical intervention was unable to save her.

- Carrie Brinson, age 25, of south Chicago on October 30. Brinson was five months pregnant. Her husband, Sylvester, said she had tried to get the vaccine, but had been turned away for lack of supply.

- Daejon Meadows, age 6, of Las Vegas in early November. The boy’s mother, Shannon Wilson, said he was days away from being vaccinated when he contracted H1N1. “He was supposed to [have had the shot.] He couldn’t get the mist, so I had to wait for the shot to become available for him,” Wilson said. “It was supposed to be that Saturday, and he was admitted the day before.”

As has characterized his response to the economic crisis, President Obama determined that the best approach to the swine flu would be provided by “market solutions.” The White House entrusted production of the vaccine to a handful of pharmaceuticals (none of which are US-based firms, which find the production of flu vaccines insufficiently profitable.)

In spite of repeated assurances, the pharmaceuticals have failed to produce an adequate quantity of vaccine. This is owed in large measure to their reliance on primitive forms of virus production.

Now, as the death toll mounts, the question must be posed: *How many will die for lack of the H1N1 vaccine?*

As a share of the total number of people who have contracted the virus, both the death rate (about two-tenths of one percent) and the hospitalization rate (about one-half of one percent) remain low. Yet with the number of deaths certain to rise substantially in the coming months, it is increasingly apparent that the Obama administration's response to H1N1 has been woefully inadequate.

The White House cannot claim that its response to H1N1 came for lack of time to prepare, with epidemiologists concluding last spring that the virus would produce a full-scale pandemic that could claim many lives.

Such has been the administration's incompetence and indifference to the pandemic that commentators have suggested the swine flu may well become "Obama's Katrina," a reference to the callous and blundering response of the Bush administration to the hurricane that laid waste to the US Gulf Coast and its principal city, New Orleans, in 2005.

As was the case with Hurricane Katrina, the swine flu epidemic has revealed the decrepit state of infrastructure in the US and the indifference of a government whose overriding concerns are the profit margins of Wall Street banks and the imperialist wars in Iraq and Afghanistan.

Delivery and disbursal of the vaccine in the US has been compromised by the decimation of public health care over the past several decades through budget cutbacks and layoffs. This has only been accelerated by the economic crisis, with doctors, nurses and administrators being laid off from vital public health jobs even as they are most needed.

The lack of an adequate public health system has led health officials to turn over quantities of the vaccine to private employers for administration. It was recently revealed that New York public health officials have distributed substantial quantities of the vaccine to Wall Street firms Citigroup and Goldman Sachs ahead of hospitals and elementary schools. (See: "Wall Street banks go to the front of the line for H1N1 shots")

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Nor did the Obama administration and Congress use the seven months they had to prepare to pass legislation establishing mandatory paid sick days for all workers. This basic right does not exist in the US, where fully 40 percent of the private sector workforce lacks even a single day of paid sick leave—and a large share of the remainder face various penalties for taking time off for illness.

What results, public health officials complain, is a more rapid spread of viruses as workers, desperate for money, go to work sick and infect

their co-workers.

"For people who are really caught on a weekly income, if they can't make a go of it, they might say, 'I'm desperate. I'm going to do what I have to do, and I'm going into work even though I'm sick,'" Robert Blendon, a health policy professor at Harvard told the *New York Times*.

The effort to fight the swine flu has also been damaged by an "every man for himself" response among national governments. Wealthier countries have attempted to corner a large share of the vaccine, while poor countries have been left at the end of the line.

The World Health Organization (WHO) estimates that it will have only 37 million doses to distribute to as many as 95 poor countries by the end of February, equivalent to 2 percent of their combined populations.

The WHO is dependent on donations from the vaccine purchases of wealthier nations—including the US, France, and Australia—and from the pharmaceuticals. None of these self-declared donors have, as of yet, supplied any vaccinations.

The US government had said it would distribute through the WHO a total number of vaccinations equivalent to 10 percent of its overall purchase beginning in early December.

However, at the end of October, Health and Human Services Secretary Kathleen Sebelius outlined an "Americans first" agenda, declaring that no vaccines would be shipped to poor nations until all at-risk Americans had first been vaccinated. Given the enormous shortfall in the US, this is tantamount to canceling out the offer of help.

Major pharmaceuticals Sanofi Aventis and GlaxoSmithKline (GSK) have said they will donate a number of inoculations to the WHO, but these have also yet to materialize. GSK will not start its delivery until May at the earliest.

Meanwhile, the WHO reported Thursday that it is rushing the antiviral medication Tamiflu to a number of Central Asian countries—Afghanistan, Mongolia, Belarus, Ukraine, Azerbaijan and Kyrgyzstan—that have had major H1N1 outbreaks. Antiviral medications are used to treat those who are already experiencing severe flu-like symptoms.

Most swine flu-related deaths so far have occurred in the Western Hemisphere.



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