

Thousands more COVID-19 deaths in Europe as British prime minister moved to intensive care unit

Thomas Scripps and Alice Summers
7 April 2020

On Monday evening, shortly after the announcement that another 439 people had died of COVID-19 in Britain, Prime Minister Boris Johnson was moved to an intensive care unit at St Thomas' Hospital in London. Diagnosed with a coronavirus infection 11 days ago, Johnson was admitted to hospital Sunday night with persistent symptoms of COVID-19. His condition had worsened by Monday afternoon.

While recorded deaths have fallen for four consecutive days and hospitalisation rates are reportedly stabilising in London, admissions are increasing rapidly in other regions of the country. Many British health workers have been infected with the virus and 12 have died, including a 24-year-old, John Alagos. In the last few days, 10 public transport workers in London have died, as have two postal workers. A bus driver in Bristol and another in Nottingham have also died. On Monday came the first reported death of a care worker.

In a ghoulish development, a law firm based in London is offering National Health Service (NHS) staff a free will-writing service.

Several European countries have showed a decline in their coronavirus cases and deaths in the last few days, suggesting that belated and necessary public health measures by governments are beginning to have a limited effect.

Italy saw a rise in deaths yesterday following its lowest daily total in two weeks on Sunday, but the number of new cases has now dropped for five consecutive days and the number of patients in intensive care for three.

In Spain, the number of daily cases and deaths has dropped for four consecutive days, to their lowest totals in two weeks. The number of new cases in Germany has also fallen for the last four days.

France is recording a massive increase in deaths now that figures are beginning to emerge from the country's nursing homes. The Macron government has made every effort to cover up the true scale of the outbreak, refusing until last Thursday to include deaths in rest homes in its official figures. Nearly 4,000 (3,865) care homes have now recorded at least one case of COVID-19.

The human cost has been brutal and the death toll in Europe

will continue to rise in the weeks to come. In Italy yesterday, 636 people were reported to have died, taking the total to 16,523. New fatalities in Spain totalled 637, bringing the death toll thus far to 13,055. France suffered 833 new deaths, raising the death toll there to 8,911. In Germany (1,695 deaths in total), 111 died. Overall, 3,132 more deaths were recorded in Europe, taking the grim total to 52,359.

The true numbers are far higher, with most government records failing to account for deaths taking place outside hospitals.

The fatalities include many health service workers whose lives have been taken due to the criminal negligence of governments, which failed to take adequate measures to prepare for a long-predicted pandemic and then delayed their response to the current outbreak and did too little too late to prevent its spread, while leaving frontline staff without sufficient protective equipment.

More than 12,000 healthcare workers have so far tested positive for COVID-19 in Italy and 101 medical staff (80 doctors and 21 nurses) have lost their lives. Professor Francesco Castelli, director of the Infectious Diseases Unit at a hospital in Brescia, Lombardy, told *Sky News*, "We were asking each other who will be the next..."

There is no official total for deaths among health care workers in Spain, but the number infected is over 19,000. The country's health system has been so overwhelmed by the epidemic that the government has told medical staff with suspected coronavirus infections that they must return to work seven days after first experiencing symptoms. The edict states that they must wear a mask for the next seven days while working, regardless of whether they've been tested.

The General Councils of Dentists, Nurses, Pharmacists, Doctors and Veterinarians—bringing together 700,000 health care workers—expressed their "absolute rejection" of this order, condemning it as "unacceptable recklessness" that would pose a "grave risk" to the health of medical workers and their patients.

In Sweden, the government adopted the policy of herd immunity that Britain was forced to back away from two weeks

ago, with officials citing its relatively young and healthy population and prevalence of single-occupancy households as reasons to hope for “Swedish exceptionalism.”

Schools for pupils under the age of 16 remain open, as do offices, cinemas, gyms, hairdressers, bars and restaurants. Only last Wednesday did the government ban visits to care homes, cut the maximum size of gatherings from 499 to 49, and advise people to keep an undefined “distance” from others.

Sweden’s state epidemiologist, Anders Tegnell, told the *Svenska Dagbladet* newspaper last week that the government’s core strategy was to ensure “a slow spread of infection, and that the health services have a reasonable workload.” He told the state broadcaster last Thursday, “In a month, I believe we will be quite close to reaching herd immunity.”

However, over 2,000 doctors and academics, including the head of the Nobel foundation, have published an open letter denouncing the policy. Cecilia Soderberg-Naucler, professor of microbial pathogenesis at the Karolinska Institute, told Reuters, “We must establish control over the situation. We cannot head into a situation where we get complete chaos. No one has tried this route, so why should we test it first in Sweden without informed consent?”

She continued, “We’re not testing enough, we’re not tracking, we’re not isolating enough—we have let the virus loose. They are leading us to catastrophe.”

In total, 333 people were reported dead in Sweden by last Friday, four times the total a week before. With an additional 76 new deaths Monday, the total rose to 477. A backlog in reporting means the real numbers will be higher. Over the last week, new infections increased by an average of 447 a day compared to 256 a day the week before.

A third of the country’s municipalities have reported that the virus is present in care homes, and 100 care homes in Stockholm have cases. Some 50 residents in the capital’s care homes have died.

Staff at hospitals and nursing homes have warned of a lack of protective equipment. Intensive care capacity in Stockholm has been tripled in preparation for a wave of admissions and a field hospital is being built south of the city centre, which will eventually cater to 600 patients.

On Saturday, Swedish Social Democratic Prime Minister Stefan Löfven was forced to admit, “We will have more seriously ill people who need intensive care. We are facing thousands of deaths. We need to prepare for that.”

Joacim Rocklöv, a professor of epidemiology and public health at Umeå, asked, “Does this mean this is a calculated consequence that the government and public health authority think is okay? How many lives are they prepared to sacrifice so as not to... risk greater impact on the economy?”

Although they were eventually forced to implement quarantines and other public health measures, the same cold economic considerations inform all of Europe’s governments. Above all public health considerations, they are concerned to

get workers back to work and producing profits for the corporations.

As a senior *Forbes* contributor wrote yesterday, “Italy cannot be reporting a thousand new cases a day by the third week of April, or the market will go berserk... Hopefully Europe can start re-opening at some point in early May.”

Italian Health Minister Roberto Speranza outlined a series of measures “to create the conditions to live with the virus.” Under “phase two” of the emergency, Italians will return to work while social distancing remains in force, greater use of personal protective equipment is encouraged, local health systems are strengthened, and testing and contact tracing are extended.

According to the *Sun*, civil servants in Britain are drawing up plans for a staggered return to work by June, with Treasury officials warning that any longer would see “normally successful businesses going under.”

Germany is drafting similar procedures.

On Saturday, Spain’s Socialist Party Prime Minister Pedro Sánchez announced that many non-essential workers, including those in construction and manufacturing, would be forced back on the job after Easter. They will be expected to make up lost hours by working overtime in evenings and on weekends.

Demands for a swift return to work are driven by financial interests, not scientific evidence or public safety. The *Financial Times* writes, “In managing the return to work, governments should also seek advice from economic and business experts, as they do on health aspects.”

On Saturday, Professor Graham Medley, the UK government’s chief pandemic modeller, told the *Times*, “The measures to control [the disease] cause harm. The principal one is economic... If we carry on with lockdown it buys us more time, we can get more thought put into it, but it doesn’t resolve anything—it’s a placeholder.”

The newspaper wrote that Medley said “the country needed to face the trade-off between harming the young versus the old.”



To contact the WWSWS and the
Socialist Equality Party visit:

wws.org/contact