

# Remdesivir as “miracle drug”: Back-to-work propaganda vs. science

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The newly released preliminary results by the National Institutes of Health present the drug remdesivir as, according to US President Donald Trump, “a big building block” toward a cure for the coronavirus pandemic.

It has at the same time been breathlessly proclaimed by the mainstream media to be “good news about [a] coronavirus drug” (CNN) which shows “clear promise” (MSNBC). Alongside are reports that it “sped coronavirus recovery time” (Fox) according to “positive data” (*New York Times*) from the trial.

Under normal conditions, the results reported by the National Institutes of Health would be noted with interest by researchers as part of an ongoing and protracted effort to find an effective response to a new and complicated viral phenomenon.

But the media’s adulation of this “breakthrough” takes place in the midst of an increasingly frenzied effort to legitimize a back-to-work campaign, and to create the impression that the virus is “under control” and the crisis is all but over.

It must be hoped that the research being done will prove to be an important contribution to efforts to find an effective response to COVID-19. But the claims that are being made about remdesivir and the purpose to which it is being put are highly suspect.

One has more and more the impression that Anthony Fauci, the director of the National Institute of Allergy and Infectious Diseases, is making statements determined by political pressure rather than scientific considerations and the needs of public health.

What is known is rather more limited in scope. According to the NIH press release, patients who received remdesivir and had advanced respiratory symptoms caused by COVID-19 had a median time to recovery of 11 days, compared to 15 days for those who received the placebo, an improvement of 31 percent. The release further suggests that the mortality rate for those taking the

drug decreased from 11.6 percent to 8.0 percent, though Fauci noted those results are not statistically significant.

Even if the results were statistically significant, it would mean that the drug would not save the lives of the large majority of serious cases.

Nor is there any serious discussion about the other trials of remdesivir, none of which have come close to the success presented in the current study. The results of a clinical trial in China were published Wednesday in *The Lancet*, the same day the results of the NIH trial were released. The *Lancet* study did not find a statistically significant decrease in patient recovery times. Indeed, more patients died while on remdesivir than on the placebo.

Ignoring these facts, Fauci declared: “The data shows that remdesivir has a clear-cut, significant positive effect in diminishing the time to recovery. ... We think it is opening the door to the fact that we now have the capability of treating [the coronavirus].”

The announcement was made amid the accelerating back-to-work drive by the Trump administration, in which even the limited measures to “slow the spread” of the virus will be eliminated. The president met yesterday for over an hour with a dozen executives from major industries to further work out their “Plan for Opening Up America Again,” which is ongoing in nearly half the country and across all the major industries.

Remdesivir will no doubt play a large part in this campaign. In their attempts to force workers back into offices and factories, the major banks and corporations have already signaled their willingness to risk tens of thousands if not millions of lives to the pandemic.

What is never mentioned is the fact that remdesivir will only slightly mitigate the impact of a return to work. If, for example, the coronavirus caseload in the US increases by a factor of ten as workers are forced back into offices and factories, the NIH data states that remdesivir will at

best save only a fraction of those who would not have been infected or died in the first place.

Moreover, even in the most optimistic scenario, in which a remedy or vaccine for COVID-19 proves to be effective, it does not argue for reopening the economy. If progress is being made now, it argues for more rigorous testing, contact tracing and physical distancing, because it would be all the more tragic if countless millions are forced to expose themselves to the coronavirus and possibly get sick or die. All the while they would know that if their employers had exercised a modicum of patience, they would not have had to suffer.

And it is all the more criminal that the American ruling elite is forcing workers back to work even as it is dangling a potential treatment in front of them.

To make a historical analogy of which Fauci and his colleague Deborah Birx are familiar, the development of antiviral medications to fight the AIDS epidemic in the 1980s came alongside the promotion of “safe sex” and other measures to prevent the spread of the disease. There was never any suggestion that it was appropriate to share needles or not use condoms just because vaccines and therapeutics were being researched.

None of these considerations stopped Wall Street from celebrating the announcement. The stock price of Gilead Sciences, which makes remdesivir, shot up four percent in the two days since the results of the NIH trial were released, and has rocketed up more than 20 percent since the trial began, lining its shareholders’ pockets with an estimated \$20 billion. The Dow Jones as a whole jumped 500 points the day of the press release.

This forms the core of the response to the remdesivir trial by the American ruling elite. There is money to be made, both from the drug itself and from the scientific veneer for employers and the government to force the American population back to work even as the pandemic rages on.



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