

Johnson halts travel to India as “there will be another wave” as UK sports venues and nightclubs reopen

Paul Bond
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Prime Minister Boris Johnson this week reiterated his government’s commitment to its murderous “herd immunity” policy, saying again that everyone had to “learn to live with this virus.”

In his Tuesday press conference, Johnson announced that easing lockdown restrictions will continue. The coming fortnight will see large attendances at events as part of the government’s Events Research Programme (ERP)—aimed at the full reopening of the economy by June 21—that will inevitably lead to more infections and deaths.

Johnson said, “We cannot delude ourselves that COVID has gone away,” adding, “I see nothing in the data now that makes me think we are going to have to deviate in any way from the roadmap cautious but irreversible that we have set out. But the majority of scientific opinion in this country is still firmly of the view that there will be another wave of covid at some stage this year.”

The callous response of the ruling elite was clear, with Johnson insisting, “We must—as far as possible—learn to live with this disease, as we live with other diseases.”

“Learning to live with” COVID means learning to die from it. The government’s official death toll is 127,327, but this is a sizable underestimate, as it records only deaths within 28 days of a positive test. At least 150,841 have died with COVID-19 cited on their death certificate. This equates to around 221 deaths recorded per 100,000 people—the highest death rate among all countries with a population of more than 20 million.

Lockdown is ending despite the spread to Britain of a host of mutations of the virus, including the Indian double-mutant B.1.617 variant. By Monday this week, 103 cases of B.1.617 had been officially identified in Britain, but other analysis of publicly available information suggested around 160 cases by last Saturday.

Johnson announced he had “very sadly” cancelled an already postponed trip to New Delhi. He had reluctantly decided to ban travel to and from India putting the country

on a red list as a “precautionary” measure, but the ban only resumes Friday.

This allowed nearly a week of continued travel between the two countries before the ban came into place. There were still 16 direct flights scheduled from India between the announcement Monday and the deadline, and many more indirect flights. India’s own travel restrictions, imposed over concerns over the UK variant B.1.1.7, only reduced the number of direct flights from 70 to 30 a week. This in the same week in which India recorded highest number of COVID-19 daily cases (315,728) ever seen during the pandemic.

Narendra Modi’s far right Bharatiya Janata Party government, like Johnson’s, bears responsibility for allowing the virus free rein. The B.1.617 variant poses exposure to a more contagious form of the disease that could impede existing vaccination programmes. Professor Danny Altmann, an Imperial College London immunologist, told *Good Morning Britain* that vulnerable people who have been vaccinated could “still be caught out by variants like this.”

University College London epidemiologist Professor Andrew Hayward, of the government’s Scientific Advisory Group for Emergencies (SAGE), called for a suspension of travel while the “unknown level of risk” of B.1.617 was properly assessed.

B.1.617 is currently listed by Public Health England as a “variant under investigation,” less serious than B.1.1.7—the mutation that emerged in Kent, England last September and is now the dominant strain across much of the planet—and other strains. Altmann warned, “My assumption from everything I’ve seen is that it will become a variant of concern”—the next level up.

B.1.617’s response to existing vaccines is not yet clear, and might undermine Johnson’s boast that 33 million people in Britain have received their first dose of the vaccine. Only 10.7 million have so far received the second dose. Rollout has in any case slowed appreciably, with supply bottlenecks

and concerns about availability.

The spread of variants has exposed the Conservative government's shambolic testing programme. University College London virologist and member of Independent SAGE, Professor Deenan Pillay, told MPs the spread of B.1.617 could be 10-20 times greater than documented, because only around 10-15 percent of positive swabs are handled at laboratories scanning for variants.

Johnson announced that an "Antivirals Taskforce" would be a vital part of "living with this virus." The Taskforce is part of a strategy to ensure no further impediment to the activities of business. Johnson said it intended to make available by the end of the year at least two effective antiviral treatments that can be taken at home, both by those testing positive and those living with them, to accelerate recovery and reduce transmission.

Government Chief Scientific Adviser Sir Patrick Vallance—an early advocate of achieving herd immunity through mass infection and without vaccines—called them "another key tool" in the pandemic response that "could help protect those not protected by or ineligible for vaccines."

Johnson and Health Secretary Matt Hancock proclaim tablet antivirals, but these do not yet exist. Johnson said the Taskforce would "search for the most promising new medicines and support their development through clinical trials." Hancock spoke of the need to "supercharge the search for antiviral treatments and roll them out as soon as the autumn."

Vallance said such antiviral tablets "could also be another layer of defence in the face of new variants of concern." This is a tacit admission of the government's disregard for public safety that has allowed the spread and mutation of the virus.

Variants are created when mutations cluster together and create new proteins. This allows further access to host cells, jeopardising existing vaccination programmes. In Israel, the rapid spread of the British coronavirus variant B.1.1.7 in December delayed the unfolding national vaccination programme's expected improvement in morbidity rates. Researchers at Tel Aviv university this week reported that B.1.1.7 is around 45 percent more contagious than the original strain.

Last week saw the largest surge testing operation in Britain to date, after a "significant" cluster of South African variant cases was identified in south London. Variants are not identified by the test itself but require genetic sequencing. Because of the delays, Independent SAGE's Dr Gabriel Scally said the UK is "continually trying to play catch-up."

Professor Pillay questioned the effectiveness of surge testing when people are still moving around freely. Four

weeks after a variant has been identified, he said, there is "a naïve assumption that testing should happen in the postcodes in London around where it was first identified," but "in a place like London you don't limit yourself to moving within one postcode."

The government sets great store by repeated lateral flow tests. Significantly less accurate than the National Health Service's PCR test on the original strain, they may also not pick up new variants.

The government last week had to deny that it planned to halt rapid testing over concerns about false positives. Leaked emails showed senior officials calling for "fairly urgent decisions" on the "point at which we stop offering asymptomatic testing."

This weekend 8,000 football fans will attend London's Wembley stadium for the League Cup final between Manchester City and Tottenham Hotspur. Chartered trains will bring 750 fans from Manchester in northwest England to London—where they will then have to travel to the stadium and back on London's busy Underground!

The fans will be used as guinea pigs. They must sign an ERP consent form, take a lateral flow test at a designated site in the 24 hours before the game and agree to take two PCR tests. The second test will be five days after the game, allowing plenty of time to spread any infection they may have.

Pointing to the possibilities for cross-infection, Professor John Ashton, former director of public health for northwest England, said, "If we're not careful, we'll finish up in a situation in October where we're back at square one."

The Wembley attendance is the largest crowd for a sporting event since the first lockdown last March, when such events played a key role in COVID's mass spread. The following weekend will see Liverpool nightclub Circus host a two-night event to be attended by 6,000 people. There will be no masks or social distancing, as this will also be an ERP event. The homicidal policy is back in full force.



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