

# New UK Covid hospitalisation data used to back “herd immunity” agenda

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3 August 2021

Statistics produced by NHS (National Health Service) Trusts on levels of hospitalisation for patients with Covid has produced a flurry of denunciations by the right-wing press, supported by Conservative government ministers, of previous safety measures and lockdowns as an unnecessary infringement on “freedom”.

NHS Trusts were mandated to produce a breakdown of all patients with Covid into two categories—those in hospital with Covid as their primary care need and those who were diagnosed with Covid following their admission with other primary illnesses.

The latest NHS data for England shows that 23 percent of Covid infections in hospital, nearly one in four, were patients admitted for other reasons. The data shows that of 5,021 patients last week classed as hospitalised by Covid, 1,166 were admitted for other reasons.

The statistics were immediately jumped on by right-wing pundits to claim that such possibly asymptomatic infections (this is not proved as these infections could have developed into more serious cases) demonstrated that the risk of hospitalisation from Covid has been historically “overstated”, that the previous lockdowns were unnecessary and “lessons must be learnt”.

Learning the “lesson” that no future infringements on the right to profit must be tolerated was always the aim of producing such a statistical breakdown. NHS England began collecting the more detailed hospital Covid data in June 2021, at the request of Professor Keith Willett, NHS Strategic Incident Director. The official aim of publishing the new figures is, according to the government, to underscore the effectiveness of vaccines in preventing serious illness. But the breakdown was to be utilised to legitimise the removal of all Covid protections by the government on its

planned “Freedom Day” on July 19.

The official key criteria in the government’s lockdown measures throughout the pandemic, imposed on it by popular pressure, was to “protect the NHS” from being overwhelmed. The three previous lockdowns in March 2020, November 2020 and January 2021 were only announced at the point when the NHS was already at breaking point. The argument now being made is that the pandemic threat was historically exaggerated and, with the vaccine programme, is certainly being overstated today.

The *Telegraph*, which initially leaked the figures in an “exclusive”, quoted Professor Carl Heneghan, director of the Centre for Evidence-Based Medicine at the University of Oxford, an opponent of lockdowns and mask wearing throughout the pandemic. Heneghan was a signatory to the pro-herd immunity Great Barrington Declaration. He said of the data, 'This needs to be fixed as a matter of urgency,' adding that the previously published data on hospital admissions could lead the public 'towards false conclusions', exaggerating the true levels of pressures on hospitals. The *Telegraph*, in its haste to whip up right-wing fervour in their first article claimed that some “56% of patients” had Covid as a secondary concern. It only revised the numbers contained in its “exclusive” three days later when the statistics were more widely published.

Greg Clark, Conservative MP and chairman of Commons Science and Technology Select Committee, said in response that he would write to Sajid Javid, the Health Secretary, asking him to publish the breakdown on a regular basis. 'If hospitalisations from Covid are a key determinant of how concerned we should be, and how quickly restrictions should be lifted, it's important that the data is not presented in a way that could lead to the wrong conclusions being drawn,' he also said.

That the unnecessary deaths of over 150,000 from the pandemic can be defined as “overstated” and “exaggerated” reveals the indifference of the ruling elite to the mass loss of life. Moreover, the reality is that the National Health Service continues to be under enormous stress.

The UK has the highest levels of infections throughout Europe, averaging 23,000 per day. Last Tuesday, NHS leaders said the health service is as stretched now as at the height of the pandemic in January and made a plea for extra funding. In a letter to the prime minister, chancellor and health secretary, NHS Providers, which represents hospital trusts, raised fears the situation could get worse before it gets better. They blamed this on 'very different pressures', including a 'massive backlog' of patients in need of care and high numbers of staff self-isolating or on annual leave. But this is a short-sighted picture.

Despite the best efforts of NHS staff to keep these numbers down, the massive rise in community transmission, a product of the government's negligent response to rising cases and the lack of adequate personal protective equipment, produced a tragedy. Left unchecked it will do so again, especially as autumn and winter approaches.

The UK has among the fewest hospital beds per 1,000 of the population among developed countries, and NHS hospitals routinely run “hot” at over 90 percent capacity. There is a staffing crisis where around one in eight nursing posts and one in 11 medical vacancies are unfilled. The number of patients going to hospital for other reasons and then found to be infected with Covid points to the continued high incidence of infections despite the vaccine programme.

Each one places additional strains on the NHS. As Professor Sir David Spiegelhalter, from the Winton Centre for Risk and Evidence Communication at the University of Cambridge, stressed, 'The main role for hospitalisation statistics is to indicate the pressure on the NHS. Patients with Covid have to be treated in a resource-intensive way, whether Covid was the primary reason for their admission or not, and even if they caught it in hospital.' From this he insisted, 'Therefore the total number in hospital with Covid seems an appropriate overall summary statistic, although this new breakdown does provide additional information.'

Deaths from Covid have always been most likely

among those with co-morbidities. Those cases now being classed as 'primarily non-Covid' could include those where the virus was a significant factor in a potentially grave or fatal outcome—such as a patient whose primary diagnosis was a stroke but where Covid could have increased the risk of a stroke, or whose conditions will likely be made more serious by infection, particularly respiratory infection or anything that makes breathing more difficult.

In addition, the level of deaths through hospital transmission is not even mentioned. According to the *Guardian*, between March 2020, and May 2021, “Up to 8,700 patients died after catching covid-19 in English hospitals.” This was based on Freedom of Information requests sent to all 126 acute hospital trusts, with 81 replying. A total of 32,307 patients admitted with other conditions had contracted Covid-19 while in hospital, of which 8,747 (27 percent) died within 28 days. The continued admission of so many infected patients, including those only discovered after admission for other reasons, shows how dangerous hospitals are as sites for community transmission.

There has been no challenge by the Labour Party to the selective use of data to end all protective measures or support for the NHS to manage the unbearable demands placed upon it. On the contrary, Labour leader Sir Keir Starmer called on the government to bring forward the date on which double-jabbed people will no longer be told to self-isolate in England. Starmer wants to bring England into line with Wales, which confirmed on Thursday that isolation rules would be eased on August 7. The measures are due to start in England on August 16. Starmer's concern is that it has been 'a summer of chaos' for families and businesses.

The government's lifting all protections under the mantra of “learn to live with the virus”, backed by Labour and the trade unions, is placing millions at risk. Workers must act independently through the formation of rank-and-file safety committees in their workplaces and throughout the community to protect themselves.



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