

Faced with a new wave of COVID-19, France ends public health restrictions

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An extremely dangerous health situation is emerging in France and across Europe. As the number of COVID-19 infections rises rapidly, states are removing all health restrictions that previously helped to somewhat contain the contagion. The prospect of a huge new wave of COVID-19, driven by new variants, is looming.

France's fifth wave of COVID-19 began in November 2021 following the accelerated spread of the highly contagious Omicron variant across the globe. This wave infected around 17 million French people, i.e., a quarter of the population, peaking at 501,000 daily infections on January 25. The number of cases declined rapidly in February and stabilised in early March at a high level of about 50,000 cases per day in France.

Now, however, the number of infections has risen again to 116,618 on Wednesday and 108,832 yesterday in France. A similar trend is evident in Britain (91,345 cases yesterday), the Netherlands (60,263 cases), Belgium (11,180 cases) and Italy (72,568 cases): Their infection curves all began rising again around March 1.

Amid media propaganda that Omicron is "benign" and that one has to "live with the virus," the dismantling of public health measures is well underway. On February 28, the obligation to wear a mask in indoor areas requiring a vaccination pass was abolished. Since March 14, the mask is no longer compulsory, except in public transport, hospitals and old people's homes. In addition, health protocols in workplaces have ended, and the vaccination pass has been suspended.

On February 22 in the Senate, Health Minister Olivier Véran said the March 14 measures would be implemented only if the virus reproduction rate (R) was less than 1, the incidence rate was under 500 per

100,000, and there were fewer than 1,500 COVID-19 patients in intensive care.

Now, however, the removal of health restrictions is underway although the incidence rate is 629, 1,855 people are in intensive care and on Sunday the effective viral reproduction rate was above 1. This underscores that the public health criteria proclaimed by the government are smoke and mirrors. In fact, the state is turning to a policy of mass infection in the hypothetical and false hope that repeated waves of infection and mass death will produce herd immunity.

The tsunami of Omicron cases has been devastating, killing over 20,000 people in France and 300,000 people in Europe. The milestone of 140,000 COVID-19 deaths was hit in France on March 10. The level of deaths remains high, despite 794 deaths in the last 7 days.

Never before, however, has the media reported so little on COVID-19 deaths. This trend has intensified with the Russia-Ukraine war, as French media beat the war drums against Russia.

We are witnessing an unprecedented collapse of public health policy. To get an idea of what the current "return to normal" means, it is useful to compare the excess deaths from COVID-19 with those from influenza. The two major influenza mortality peaks in France after the 1918 Spanish flu were the Asian flu of 1957-58 (over 20,000 deaths) and the Hong Kong flu of 1968-69 (over 30,000 deaths).

In 2010, the National Institute for Demographic Studies wrote: "From 1970 onwards, the death rate from influenza has fallen dramatically, without the disappearance of epidemics. Over the last 40 years, the risk of death has been divided by 10, and in 2005, the year of the last major epidemic in France, the number of direct deaths hardly exceeded a thousand. This

impressive drop in influenza mortality is the direct consequence of an appropriate prevention policy, based on vaccination of subjects at risk and associated with better therapeutic management of complications.”

Since Omicron’s appearance, COVID-19 is typically presented in the media as an endemic that we will have to live with, “like the flu.” In fact, the fight against influenza has been constant for 50 years with appreciable results, leading to a huge reduction in mortality, even though influenza remains endemic.

To claim that COVID-19 is endemic and would lead to mortality comparable to that of influenza is a lie, which serves to conceal the colossal regression in health care that is being prepared.

Over just three months, the fifth COVID-19 wave alone has killed as many people as the Asian flu of 1957-58 and claimed 20 times more victims than the 2005 flu peak. This is despite mass vaccination, which means that popular immunisation is high compared to that of influenza. In addition, COVID-19 has specific effects distinct from influenza, requiring more hospitalization, rehabilitation for Long COVID, and significant neurological damage, the long-term effects of which remain unknown.

The much touted “return to normal” thus involves only the dismantling of the precautionary measures but not the end of the pandemic in 2022 or after.

The Omicron BA.2 subvariant is driving infections in Europe and worldwide. It has risen above 50 percent of cases in France since March 1, and its share of cases rises every week. Far more contagious than BA.1, it will soon be overwhelmingly dominant.

The Pasteur Institute has predicted a sixth wave starting in March, fueled by the lack of health protocols.

Much has been made in France of WHO technical officer Maria Van Kerkhove’s statement that “The Omicron sub-variant BA2 does not cause a more severe form of Covid than BA1.”

However, the scientific data is contradictory and not at all reassuring with, for example, animal studies showing a deeper lung penetration by BA.2.

Denmark, which experienced a large outbreak of Omicron BA.2 in the fifth wave, had a higher level of infections and deaths than at any other time during the pandemic, despite a very high vaccination rate.

Hong Kong, a densely populated area of nearly 7.5

million people, held the virus at bay for nearly two years. Now it is facing a deluge of Omicron BA.2 infections, flooding hospitals, filling morgues and causing the health care system to collapse.

The Omicron BA.1 and BA.2 subvariants are genetically very different, making it easy for those who have been infected with BA.1 to be reinfected. The efficacy of vaccines developed on the basis of the initial strain of the virus offers minimal protection from infection and mainly affects the severity of the disease. However, the vaccine’s effectiveness against the Omicron variants fades rapidly after a few months.

The almost complete end of sanitary protocols is setting the stage for mass contagion. The result of this sociopathic policy will be another tragic mass of preventable deaths and a predictably endless string of waves of infection. This underscores the need for the independent mobilisation of the working class across Europe and internationally to impose a Zero COVID strategy and bring the pandemic to a close.



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