

# Britain's leading health journals the BMJ and HSJ warn: "The NHS is not living with Covid, it's dying from it."

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The National Health Service (NHS) is closer to collapse than at any time in half a century. This is the warning sounded by Kamran Abbasi, editor in chief of the *BMJ*, and Alastair McLellan of the Health Service Journal (HSJ) in a joint editorial.

The editorial was published prior to the July 19 anniversary of Prime Minister Boris Johnson proclaiming "Freedom Day", when all remaining protections against the spread of COVID-19 were removed. It details the disaster this murderous decision has led to.

The authors warn against the Conservative government's "failure to recognise that the pandemic is far from over and that a return to some of the measures taken in the last two years is needed".

Noting the difficulties posed to the NHS by the heatwave, the *BMJ* and *HSJ* note that "this brutal situation is the culmination of many factors," including decades of underfunding of the NHS and social care. But "now is the time to face the fact that the nation's attempt to 'live with covid' is the straw that is breaking the NHS's back."

The NHS faces the long-term effects of the first two years of the pandemic, during which it coped with peaks of infection by stopping or slowing much of its routine work. 2022 was meant to be a year of recovery. But this goal was based on a lie, "that covid-19 would be nothing more than an irritant for most of the year, with perhaps a winter wave in December."

Instead, the UK has suffered the initial Omicron surge that peaked in January and "two further covid waves, with gaps of just under three months between peaks" related to new variants BA.4 and BA.5. Other variants "will be ready for global distribution soon."

Far from receding, hospital admissions with COVID-19 are rising to new highs, averaging just over 9,000 in the

first six and a half months of 2022, compared with under 6,000 for 2021, mostly concentrated in January and February, and under 7,000 in 2020.

The Omicron variant is only seemingly less severe, with just under 40 percent of hospital patients infected being treated "primarily" for the disease. "But a covid-19 diagnosis is a complicating factor for many conditions, worsening outcomes and lengthening recovery times" and resulting in staff sicknesses and absences. In addition, "What the hospital admissions figures hide is a rising tide of people with long covid, now at two million and likely to be a major burden on the health service and the nation's productivity for a generation."

The government's response is to claim everything is under control because the link between infections and hospitalisations and hospitalisations and death has supposedly been broken. The authors counter, "But the link between infections and hospital admissions has clearly not been broken, even if you just consider those being treated 'primarily' for the disease."

"As for deaths, the latest ONS figures indicate just under 24 000 fatalities 'involving covid' in the first six months of 2022", more than the 21,000 people who died in the last six months of 2021. "Excess deaths from all causes are also still running above five year averages before the pandemic."

The editorial notes that the only references to the crisis in the NHS and the government's COVID policy during the Tory leadership contest is "talk about bringing in the army to shake up the NHS" from Tom Tugendhat or criticism of "unsustainable" healthcare spending by former Chancellor Rishi Sunak.

It concludes with a call for the return of limited mitigation measures including wearing masks in healthcare settings, on public transport and in crowded

places, ensuring good ventilation, working from home, ending large gatherings and a return to free testing, together with renewed and extended vaccination.

Despite the vital warning sounded by Abbasi and McLellan, the “vaccination plus some mitigations” approach they advocate will not stem the accelerating spread of the pandemic.

According to the latest data from the ZOE Health Study, one in 15 in the UK are now suffering with COVID.

At the heart of this acceleration is the heightened infectivity of Omicron and its sub-variants. Last December Omicron led to a 15-fold increase in reinfections due to extensive mutations largely negating immunity acquired through previous infection or vaccination. Danny Altmann, a professor of immunology at Imperial College London, told *The Guardian* that Omicron and BA.4 and BA.5 are “poorly immunogenic, which means that catching it offers little extra protection against catching it again.”

Vaccinations continue to ameliorate the effects of infections, while re-infections have tended to be milder due to residual immunity, but this protection has weakened as new variants have evolved. Moreover, research by the University of Tokyo has found that new sub-variants may have evolved to favour infection of lung cells, rather than upper respiratory tract tissue, with a dangerous impact.

Professor Tim Spector, who leads the ZOE study, also told *the Guardian*, “There are definitely a lot of people who got Covid at the start of the year who are getting it again, including some with BA.4/5 who had BA.1/2 just four months ago, who thought they would be protected.” He warned that the virus’s symptom profile has undergone a new change, meaning that anyone experiencing cold-like symptoms is now “twice as likely” to have COVID than any other type of virus. We “haven’t seen this ever before.”

Dr David Nabarro, the World Health Organization’s special envoy on COVID, told *Sky News*, “This virus is capable of constantly evolving and changing... and it’s become too clever for us. It can break past our immune defences, and that’s why the numbers are going up.”

This week the WHO reported that coronavirus cases have tripled across Europe in the past six weeks, accounting for nearly half of all infections globally. Hospitalisation rates have doubled.

Yet still scientific advisors on the Joint Committee on Vaccination and Immunisation (JCVI) have only called for an extra jab ahead of winter for all over 50s, care

home residents and staff and front-line health and social care workers. In the *Daily Mail*, Heath Secretary Steve Barclay again claimed that “the collective protection of a Covid jab... means we can now protect ourselves through science not restrictions.”

There is no difference between the Tories and Labour on letting the virus rip through the population. The last time Labour made any statement on the pandemic was in January when it coined the obscene variation on the government’s own policy slogan, “Learning to live *well* with Covid.” Its declared aim was to “prevent the need for harsh restrictions to tackle the spread of the virus,” by which was meant, “Do nothing.”

The International Committee of the Fourth International and its affiliated Socialist Equality Parties are leading the fight to build an international movement of the working class to stop the pandemic. In the UK, the SEP has placed the fight for a zero-COVID strategy at the centre of its call for a general election, as a means of enabling the working class to break out of the stranglehold of the Labour Party and the trade unions and intervene on its own interests in the crisis of rule surrounding the Tory government.

We explained, “Millions of workers celebrated the downfall of Johnson, whose criminal response to the pandemic has claimed more than 200,000 lives. Yet despite the removal of the man who declared, ‘No more lockdowns, Let the bodies pile high in their thousands!’, his policies continue.”

We call on workers to demand the reinstatement of all necessary public health measures to suppress the virus, including the closure of non-essential workplaces with full compensation to workers and small businesses, and the restoration of test, trace and quarantine protocols, including masking and lockdowns when required. This must be paid for through the expropriation of the major corporations, banks and pandemic profiteers.



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