

# Canada passes 50,000 registered COVID-19 deaths as “triple-demic” wreaks havoc on health care systems nationwide

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Fatalities from the COVID-19 pandemic passed a grim milestone in Canada over the weekend as the official death toll surpassed 50,000. According to data tracked and collected by Dr. Tara Moriarty, an associate professor at the University of Toronto Medicine, at least 50,000 Canadians had died from COVID-19 as of December 18, although she estimated the real figure to be closer to 80,000.

Meanwhile, hospitals across Canada are experiencing extreme pressure over what many officials are referring to as a “triple-demic” of respiratory viral illnesses, specifically high levels of influenza, RSV (Respiratory Syncytial Virus) and COVID-19. Pediatric hospital admissions have exploded nationally, with growing levels of infections also among seniors.

The situation has caused many hospitals to put into place operational emergency protocols to deal with the massive surge of patients. The BC Children’s Hospital in Vancouver, the largest pediatric care institution in the province, became one of the first to declare a “Code Orange,” activating its emergency triage procedures, on November 23. An internal memo, obtained by the Canadian Press, indicated that the hospital had implemented “double-bunking,” putting multiple children in single rooms.

In Alberta, health services were diverted from other services, including respite care, to help deal with the flood of pediatric patients. In Calgary, officials were forced to open heated trailers outside of the main children’s hospital to deal with the overflow of patients. The United Nurses of Alberta trade union issued a demand Wednesday for an indoor mask mandate to slow down viral transmission.

In Montreal, the largest city in the province of

Quebec, the city’s two pediatric hospitals reported an average occupancy rate of 112 percent. Two children have recently died in the city from strep A infections. The chief of emergency medicine at St. Justine’s Children’s Hospital, Dr. Antonio D’Angelo, stated that the inflow of patients was something he had never seen before, and added that it is “scary” to think how the next few weeks will play out.

Meanwhile, medical authorities have announced an investigation into the death of a 2-year-old infant in Ajax, Ontario, which prompted widespread outrage on social media, directed at hard-right premier Doug Ford for his spending cuts to health care. A video posted by a woman claiming to be a nurse who witnessed the death, indicated that the young child may have died on the floor of an ER room because of overcrowding.

Data provided to Global News showed a 150 percent increase in pediatric hospital admissions in the province over pre-pandemic levels, a trend that has been on a steady increase since July. The Children’s Hospital of Eastern Ontario (CHEO) formally requested volunteer help from the Canadian Red Cross, a step that underscores that the province’s health care system is collapsing.

A poll released by the Ontario Federation of Labour earlier this week found that 79 percent of respondents think health care is in a “state of crisis” and 55 percent blame the situation on Ford. There is no doubt that Ford’s Progressive Conservative government’s savage austerity measures since coming to power in 2018, and the imposition of brutal wage restraint through Bill 124 on public sector workers, has slashed hospital budgets and driven workers out of the industry. But the crisis in Ontario and across the country is the result of decades

of ruthless budget cutting backed by all the established political parties, since the 1990s, to fund tax breaks for the corporate elite and Canadian military interventions abroad. The Trudeau government has maintained a strict 3 percent cap on health transfers to the provinces since coming to power in 2015, helping ensure that health spending has consistently fallen in real terms.

The Atlantic provinces also confront a health care crisis. In New Brunswick, where at least five patients have died in emergency rooms over the past six months while waiting for care, public health authorities revealed that cases of RSV among children were 80 percent higher in November than in previous years. Dr. Andrew Lynk, the top doctor at Halifax's IWK Health Center, the largest children's hospital in the Maritimes, told Global News on December 10, that the hospital was continuing to get "slammed" with patients.

As RSV and flu infections rage on, Canada appears poised to enter another deadly winter COVID wave. On December 14, Chief Public Health Officer Theresa Tam, told reporters that the country could experience an "uptick" in the new year. Despite desperate attempts by Tam and other public health officials to downplay the dangerousness of the virus, emerging data shows that the country may have already been seeded by BQ variants of Omicron, and is in the initial stages of a winter wave just before the winter holidays, when increased travel to visit family and friends will facilitate viral transmission.

In BC, data released by the BC Centre for Disease Control (BCCDC) on December 16 showed a marked increase in infections, hospitalizations and deaths from reporting the previous week. In Quebec, the province announced on December 20 that it was experiencing its highest levels for hospitalizations for COVID-19 since the middle of last summer.

The callous disregard for the health and safety of children by the ruling class and their indifference to mass disease and illness has been brought into sharp focus this winter. The current health care catastrophe is the direct product of the decision by all provincial governments, overseen by the federal Liberal government, to adopt the program of the far-right "Freedom Convoy" last spring by abolishing all remaining restrictions on COVID's spread.

The ruling elite's embrace of "forever COVID," from the Conservatives on the right to the New

Democrats on the "left," has been accompanied by pseudo-scientific nonsense about the inevitability of the current wave of infections due to "immunity debt." The logic of this argument, much like the bogus claim that "herd immunity" would offer a way out of the pandemic, is that we must accept permanent mass infection with whatever viruses are in circulation. Serious scientists have instead pointed out that the unchecked spread of COVID has weakened our immune systems and undermined the ability of already overstretched hospitals to provide care.

One of the prime examples of the moral bankruptcy of Canada's public health system is BC's Chief Public Health Officer Bonnie Henry and the BCNDP government she serves. On December 3, Henry and BC Minister of Health Adrian Dix updated the province on the state of the pandemic. Days later, reports began surfacing in the media that six children in the province had died from influenza over the previous two weeks, critical public health information that Dix and Henry deliberately withheld. Amid the public outcry, Henry and the BCCDC promptly changed course and declared their intention to begin issuing weekly influenza updates.

Henry, long a proponent of the far-right Great Barrington Declaration, a virulent anti-masker, and denier of the fact that COVID-19 spreads through the air in tiny particles called aerosols, is a kind of poster child for the pseudo-scientific claptrap the ruling class has used to promote its homicidal "live with the virus" strategy. Her concealment of the children's deaths demonstrates the depths that governments have succumbed in attempting to justify their murderous policies.



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