

Blog 4/7/2021

10% Kiwis [over 12yrs] are fully vaccinated and another 5% have had their first dose! [But Fiji is now 54% fully vaccinated, so ahead of the rugby test next Saturday, come on Kiwis!].

It does look like while immunity builds faster with the Pfizer-BioNtech vaccine, the Astra-Zeneca one they are using in the Pacific Islands is probably just as effective but takes a bit longer to get there, even up to three months. It doesn't have the rigorous and difficult cold-chain requirements of the Pfizer one which makes it easier to use in tropical countries. But the time taken until full immunity up to 95% unfortunately means we will see the death rate in our neighbour Fiji take some time to fall. I would hate to see it take such deaths from COVID among New Zealanders in New Zealand, to convince many hesitant people of the need to get vaccinated.

We are going well at the surgery at the moment and the team continue to do an amazing job. Vaccinating for COVID at the surgery has loaded us, and I know patients wanting a regular appointment are sometimes finding it difficult to get through on the phones due to the demand for vaccination appointments. Please keep trying or just log on through the portal and book your own appointment with a doctor or nurse; if you are not on the portal – it's free - arrange it with a receptionist once, and you will find it's easy.

We are starting to know our limits to what we can contribute to this immunisation roll-out. Having two vaccinators working at the same time on weekdays is our goal. We don't have the space weekdays to manage more. Mind you, this adds up to over an extra 100/day people having vaccinations. Currently we are vaccinating much less than this due vaccine supplies being low. We have only been allocated enough supplies to vaccinate a maximum of 70-77 people per day over the next three weeks despite being the only vaccinator in Papakura-Dury-Clevedon.

We know our area has a high proportion of Maori, Pasifika and Indian which are groups not being reached yet by the vaccine rollout, many of which (because of other illnesses) are already in the higher risk groups. Hopefully we can argue for a higher number of phials of vaccine allocated to us: we want at least another 10-15 phials a week - currently though once supplies become more plentiful we can manage 80 phials/week. Once we open on Saturdays [just for vaccines] we will need more but have yet to employ the staff and sort their availability, and we can't guarantee employment until we have the supplies. Catch-22 again. Then we will be able to vaccinate anywhere between an extra 70-200 people on a Saturday. Maybe then the banners and signs can go outside! We don't dare do that yet, as the tom-tom drums are keeping the phones running red-hot and our receptionists struggling to keep up with demand.

We all are trying to do our bit to help protect peoples' health. Our extra staff show

this. Barbara and Wendy are retired nurses, both keen to help as once a nurse, always a nurse. And their well-honed people skills and ability to spot any medical problems are very much welcome in our surgery given we strive for excellence. Kathy, I met when I first went into general practice and we have been friends ever since. She has even given up some of her golf and drives up from Mt Maunganui each week to help out [and stays with us at Clevedon]. She could retire but doesn't, and usually works regular part-time shifts at the big Tauranga A&E as a specialist orthopaedic nurse.

Eden is our nurse administrator [and sometimes vaccinator too as he is an exceptionally well qualified nurse] is pushing himself sometimes too hard as he recovers from a major injury so he can help with getting NZ protected too. None of them are doing it because they get paid. They are doing it because they believe in vaccination and want to see patients avoid getting sick and worse. I am very grateful for their dedication to Nursing. We have a way to go, but data from Israel where 57% of their population is vaccinated [and another 5% have had at least one dose] show their daily case rate has dropped from around 1300/day to less than a handful; they look to be proving it's possible to get herd immunity.

Herd immunity is where the virus can no longer find enough people to infect and so dies out. It's a different percentage of the population for each bacteria and for each virus depending on how it spreads [contact, droplet, aerosol, sharing fluids] and how infectious it is. Given the environmental imperative for a virus trying to survive, is to get less lethal but more infectious, we are currently guessing that we need to get to 70% of the population fully vaccinated to stop COVID-19 circulating in Aotearoa.

There is a lot to go yet to stop hospitals being overloaded and loved ones dying, and be safe to open up to all tourists again. Given this vaccine is 95% effective [and the Moderna one probably too] - and the Astra Zeneca one can achieve this in three or more months- there's at least 5% of travellers who can bring in milder cases [including the more infectious variants like Delta Plus] and spread them through our unvaccinated population. Like Dr Michael Baker, the epidemiologist, I think it is too early to open up yet.

There are lots of different vaccines being used around the world. Some are much less effective. Some are less effective against variants like Delta Sars-Cov2- 19. If vaccine passports are to work, will it only allow some brands of vaccine? Will it take into account some might need sooner re-boosting than others? How will the passports be updated? Will it be counterfeit proof? Who will issue the passports and police them?

Here in Auckland we have learnt to be very cautious, and have had anxious times right through last year. In the tourist areas [except Queenstown] they have not had outbreaks and extra lockdowns and have become dependent on the tourist dollar so it will have to be a difficult balancing act the politicians have to weigh up. I don't envy them. Whatever they choose they will be heavily criticised for it by some loud groups.

One day we will have to open up. Isolation and our elimination strategy won't work forever. Hopefully we are at least all fully vaccinated by then. We will be including 12-16 year olds soon in the rollout once supplies of vaccine are available. Younger children and babies will only be included once the studies have been done. While there are heaps of trials going on, there doesn't seem to be any clear answers emerging yet about which vaccine is best in these age groups and how much vaccine to give. Until we know that, we can't vaccinate our kids. And besides the misery that goes with catching COVID - that's a large group of spreaders out there. I want to be able to keep hugging my gorgeous grandkids. I hate to think of them innocently, accidentally passing on the infection to someone who suffers severe consequences such as being in intensive care, having long COVID for years, or even dying.

There is another big issue that I want to start the conversation about in the next issue of this blog, and that's about the upcoming revamp of our health system.

I'm hoping I can give the subject of COVID vaccinating a rest by then as it will be the rolling out smoothly without hiccups as we all need to think about what sort of health system we want and let the politicians know so they can deliver us what we need in 18 months, not what they [and the bureaucrats who advise them ] think we need.

Ma te wa, Be well, Jacqueline and our greatly enlarged team at Tiakina Te Ora.