

Blog: 17th January 2022

As we welcome in the New Year and hope things improve from 2020 and 2021, there are definite clouds on Omicron on the horizon. Given that now over 200 cases have been detected at the border, and well managed by our border rules and careful isolation in MIQ Hotels is a credit to how well our system works. Given the aerosol of an Omicron covid infected person can blow into the air just with breathing and talking is very infectious for at least 5 minutes after they have passed, and lasts up to 20 minutes especially inside, then I am amazed we haven't had it earlier in the community. We owe our Border workers a great debt of gratitude. Now is the time to get out, to go to the beach, to have holidays, to go on those adventurous water rides and vertigo inducing rides at Rainbows End. We need to do things and spend time with friends and family, because humans are humans and I can see a breach is inevitable sometime.

Cloth masks without removable filters worn for no more than 4 hours before resting them for 4 days [or washing/ironing them] are effective in reducing your transmission by at least 70%. Ill fitted surgical masks are about effective the same. Those ear loops if tied up with a small bunny ears to fit tighter -there shouldn't be a gap along the cheeks- are more effective and more comfortable especially if there is an metal band to wind over a finger and fit high on the nose. Then you can breathe thru the mask and not have expired air within the mask to rebreathe. These so call disposable masks cope with gentle hand washing too, up to 19 times so they are not as expensive as that. Well-fitted, these masks can be not only 90-95% effective at reducing your emissions but reduce the possibility of breathing in someone else's by over 60%.

Vaccinations, good ventilation inside homes and businesses plus masks and hand washing will be the most effective tools we have to avoid catching the new Omicron variant. I don't think Borders inside NZ or actual strict Lockdowns are effective against it. It multiplies too fast and is infectious too quickly for Lockdowns and I hear both the experts and the politicians saying this too. Sure, once in the community more people will be encouraged to work from home again. Sure, there will be strict numbers limits on gatherings especially indoors to avoid super-spreader events [so do those Rock concerts held outdoors now if you can]. And keep your haircuts up to date!

The total for NSW of new daily cases on Friday was over 92,000, and we know because of the overload at testing stations and long wait-times plus the only 80% accuracy of the spit tests then this is very underreported. But if we translate this to NZ that's over 52,000 cases a day here. Sure, not so many get as sick with it and need hospital care, but the high numbers still mean our hospitals will be overloaded. Their hospitals are overloaded: here will be worse as they are much better staffed than ours with more equipment and beds. After all Australia takes 1 in 4 of our medical graduates as the conditions and pay are much, much better. In Australia the hospital beds are occupied by the unvaccinated and the vulnerable despite being vaccinated.

And other life threatening conditions miss out too- they don't count as Covid-19 related deaths but they are. These remind me of the term invented in the Vietnam War when the Americans bombed North Vietnam cities like Hanoi and Hue to cover missed targets: collateral damage. At least our hospitals are much better organised now and have strict systems to cope with the spread of Covid-19 within the hospital. And staff are all fully vaccinated or work from home, and very regularly tested. This unfortunately means a strict reduction in visitors, which can make for a very lonely time for patients who can't use smart phones and tablets. [This is a good time to upgrade Grandma and Granddad's phones and teach them carefully how to use Facetime and Zoom].

Children's vaccinations are now being done at our surgery. We had hoped to blend the 300 eligible children into our usual vaccination systems to make it less frightening for them, but no, the rules invented by the Ministry of health by people who have never interacted with patients, insist they be done in separate clinics. We have signed up to do them in good faith, and our nurses, Paulette and Kay have completed the on-line modules which are a couple of hours each, even we have very inadequate information from the Ministry of health. We have no idea how my they are going to reimburse us yet for the vaccinations and so whether we can afford to do them! I know what we have signed up to pay the vaccinators, I know that children will take at least twice as long to vaccinate, but I have no idea how much we will be paid to do this. By now one would think the bureaucrats were better organised, but they are not. No wonder many Health organisations are not ready to begin despite the beginning of the school year starting soon. I am happy to talk with any parents about vaccinating their children and no charge to them if they have questions. Please just organise a phone appointment and tell staff what it is about.

I have just finished talking with a chirpy Dr Mick who is feeling much brighter since his medical procedure and who sends his regards to all his patients and hopes to be back at the end of a phone for at least a few hours a day from next Monday. He will let us know the night before what hours he is available for the next day, and if he isn't available for a day our receptionists can record a list of names for when he is, and check back whether you would like an appointment once he is available. We are still very actively looking for someone to look after his practice in the meantime, but until then we are doing all we can to cover, and ask for your patience.

From all of us at Tiakina Te Ora, including Dr Mick, fond wishes and please make the most of this glorious weather. Jacqueline