From drought to continuous days of heavy showers in the space of a month, like the weather the covid-19 numbers seem to swing between the extremes.

Two or three weeks ago I was convinced we were starting a second wave like happened in New South Wales, Victoria and Queensland six months before. Some days nurse Kathy was calling up to 30/day, half of what I was doing at the pandemic peak, but yesterday we only had notifications of two new cases and today none. I realise that not all cases have been notified to Public Health but if you at least let us know as soon as possible we can provide back up and support. Kathy arranges scripts with me for paracetamol and ibuprofen: it is easy to run out when a whole household is hit. She arranges antibiotics and asthma puffers as since coronaviruses are part of the common cold group they trigger asthma, and we see it in patients who haven't had asthma for years. Most importantly between us we can arrange a script for Paxlovid, the combination of two antiviral medications that actually target this virus and really need to be started in the first three days. Paxlovid is taken as 2 or 3 tablets morning and night for 5 days and heavily reduces the number viruses in the body, and that means a markedly reduced chance of hospital admission, from clot clogged lungs, and ending up fighting for life in Intensive Care.

This government has made it available to at risk patients, those with other serious illnesses who are sick with covid-19 despite my calculations saying it would cost NZ\$170 a day if we had to pay for it like Americans.

I have prescribed it for a number of patients already and they usually notice big improvement in symptoms within the first 24 hours. The scripts are only available locally at Unichem Papakura Pharmacy and The Capsule at Drury but afterhours there are pharmacies at Pukekohe and Manukau who stock it. We have been arranging it at weekends and evenings. All this care is free to the patient- and that includes scripts and after hours care- if you are registered with Public Health. It is a part of the care package put together by the government to manage the pandemic and does cover the first 6 weeks after proven infection. Registration can be by phone but is easiest through the My Covid Record app that we used to use to check in to shops, surgeries etc with. We can register patients with Public Health too and have been doing it especially for our older patients who don't have smartphones, or are less computer-literate.

We have lost two patients to covid-19 now and my condolences to their families. One was my patient and I will miss him as he was a lovely man. The other was a patient of Dr Mick's. Both fit that category of elderly/ underlying conditions, mine was heart conditions but doing fine, on the right medications which he was fully compliant with, but the extra load on the heart muscle of Covid-19 [just like with influenza] was just the straw that broke the camel's back. Our other patient was even older and developed a nasty pneumonia [again just like influenza] and died in ICU at Middlemore. I am now worrying what the influenza season will bring as it swings into gear and hoping our patients contact us early in their illness so we can sort before problems like pneumonia happen.

Influenza is now showing up in our practice. It seems like Covid-19. Fast infection – within 2-4 days of contact with an infected person, mainly through aerosol secretions- with very rapid onset of high fevers[usually higher than Covid-19] and in the beginning less nasal and sinus congestion. It doesn't seem to have the same persistent severe sore throat. It also has the widespread body aching, but often more intense that Covid-19. But with so much overlap of symptoms it can be difficult to distinguish on symptoms alone.

At the surgery the nurses, not only can do carpark RAT tests but can do Respiratory Viral throat testing to see whether it is influenza instead. And check whether sore throats might be Streptococcus A, the one that can cause Rheumatic Fever anytime 4-6 weeks later in kids if they don't get prompt antibiotics, but especially the 4-18 year olds [up to 25 years is possible]. Strep throats can damage the heart valves and kidneys. It is very serious and sore throats in kids do need to be taken very seriously. I would hate us to miss any in our patients as it can affect them for the rest of their life and cause deaths in their 40's, 50's and 60's.

We are still vaccinating for influenza. Just phone to arrange with the nurses.

An update on Dr Mick: I have just been talking with him and he is definitely sounding even more chipper. He is up north at his little place on the Hokianga, and all his children and grandchildren have been there and he says had a wonderful time. He had already been for his morning swim! And was looking forward to another now at 2pm high tide [brrrr!]. I'm a climate refugee from the far south and you won't catch me swimming in the middle of winter short wetsuit or not. While it has rained here all the weekend and only seems to be lifting now with rather watery sun poking through, it has been sunny up there all weekend Dr Mick says. He is slowly improving - 'feeling much better' he says- and we are hoping he will be able to start back at the surgery at least a few sessions a week by the end of July. I'll keep everyone posted.

We are settling in at the surgery staff wise now with Jamie working fulltime on the desk with Ana. We will still have some temporary staff one day a week until we can find an experienced medical receptionist, maybe someone partially or nearly fully retired who is available to do a day a week for us: we welcome experience! We are still hunting for someone to replace Dr Latu but the general shortage of general practitioners not only NZ wide but around the world isn't helping.

So for the meantime I am keeping the current system of appointments, seeing patients at the surgery 11-1pm and after 4pm in PPE gear so I don't get sick and cause the surgery to close. I am going nowhere and doing nothing at the weekends to limit my chances of contacting any viral illness but was going the NZMA conference, the GP conference at Rotorua this coming weekend. I was going to be driving down after work Thursday in my first excursion out for 18 months! But it has been cancelled now at the last minute [Monday morning] as Dr Ranche is sick this week and I will be working Friday instead. Oh well, at least I'm not exposed to everyone's aerosol germs down there. We will review this at the end of June and I will hopefully have an update if we have found a locum or better still a fulltime GP.

Be safe, be well from us all, Drs Jacqueline, Mick, Dominic and Ranche, our redoubtable nurses, Paulette, Rachael S, and Kathy and help from Kay and Eden], our receptionists Ana and Jamie [with help from Jane and Rachel F.] and all held together with great skill by our Practice Manager Meriana.