**Injecting hope**

BY M A H I R A L I 2020-11-18

NOTWITHSTANDING the ludicrous antics of the prima donna in the White House, 2020 will go down in history primarily as the year of the pandemic.

We cannot at this point be entirely confident that it won`t be remembered merely as the first year of the coronavirus catastrophe.

Af ter all, millions across Europe have lately been obliged to return to their urban or suburban bunkers after the easing of previous restrictions led to a second wave of potentially deadly infections.

Patient numbers have also been surging across the United States and Russia, and badly hit countries such as India and Brazil do not so far appear to be approaching a turning point. Imran Khan, while acknowledging cases had quadrupled in the previous fortnight and advising precautions, has attributed his nation`s relative reprieve to Pakistan being `specially blessed`, compared with Iran and India.

One can only wish he would desist from using the kind of language that differs by barely a degree from the voices that construe every scourge or disaster as a manifestation of divine wrath. And while the cancellation of PTI rallies might be seen as a blessing, restricting wedding parties to 300 people hardly counts as a serious curb. Those are 300 potential vectors, after all. Other countries have whittled the number down to 10 or fewer.

But never mind all that, there`s help on the way, not from the heavens but from laboratories in the US and Europe, and possibly elsewhere. Last week, a vaccine developed by the Germany-based BioNTech in collaboration with the pharmaceutical giant Pfizer was declared to be 90pc effective. This week the US-based Moderna upped the ante with a concoction with purportedly nearly 95pc efficacy.

Dozens of other preventive formulas are being tested by a number of countries including India, Britain, Russia and China.

Hopefully, some of them will prove useful in due course. None of the vaccines has so far been approved for mass delivery. The first such approval could be just weeks away, and by next spring there could be several vaccines to choose from.

The best-case scenario thus holds out great hopes for 2021. The early part of the year could potentially be a turning point. But perhaps only for some.

First of all, although Pfizer and Moderna`s share prices have no doubt shot up since their announcements, the mass efficacy of their vaccines remains to be tested. SARSCoV-2 is a tricky customer, and could mutate to avoid the pitfalls placed in its way by the cleverest of scientists.

Hopefully, that will not come to pass. Yet, even assuming that Moderna and Pfizer/BioNTech and perhaps Oxford/ AstraZeneca and other candidates that will join them before long are as effective as they claim, there are economic and logistical considerations that cannot be overlooked.

The concept of `vaccine nationalism` has sporadically been discussed for months.

Even in cases where a number of countries have pre-purchased millions of doses, which of them will be served first? How long will it be before any country has suf ficient stocks to inoculate at least the more vulnerable segments of its population? And what about countries that lack the resources to bulk-buy the vaccine, the vast majority of whose citizens cannot afford it either? Pfizer expects to charge $39 for the two dosesrequired forimmunitythatmaynot last more than a year. Moderna declared in August that it expected to charge $32-$37 per dose. Even the cost of the Oxford/AstraZeneca variant, possibly as low as $5 per dose, could prove prohibitive for billions of people.

But evenif suf ficient doses can be manufactured at high speed and subsidised by most governments, there is the question of delivery.Pfizer`s vaccine needs to be refrigerated throughout at minus 80 degrees Centigrade, which obviously requires special arrangements (at an extra cost, naturally).

Moderna`s concoction requires far lower levels of refrigeration, but cannot survive for morethan a few hours at room temperature.

One of the biggest achievements in 20thcentury medical science was the invention in 1953 of a vaccine against poliomyelitis, the virus that causes polio, a disease that was killing thousands and crippling almost 20 times as many (including president Franklin D. Roosevelt)in the US alone. The day it was officially approved for use two years later, the legendary journalist Edward R. Murrow put a leading question to Dr Jonas Salk, the researcher behind it: who owns the patent? `Well, the people, I would say,` Salk responded. `There is no patent. Could you patent the sun?` Seven decades later, hardly any journalists would even raise such a question, let alone expect a similar response. There is, of course, no contradiction between marvelling at the achievements of medical science while decrying the profit motive.

An ef fective fast-tracked Covid-19 vaccine indeed provides cause for excitement, but no one should mistake it for a universal silver bullet. m mahir.dawn@gmail.com