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COVID “Long-Haulers”; Vaccine Access; Vaccine Acceptance; 2000 Deaths a Day.

I had a phone appointment with a patient who was intubated for weeks in the early stages of the pandemic (I’ve written about him extensively in previous COVID notes). He is 9 months out and a “long hauler” patient who survived but continues to have symptoms. I have quite a number of these patients and [we have a lot to learn on how to best treat them](#). I had two new COVID patients Tuesday (these are all seen telephonically) – one who lives with his father who is symptomatic and the other who went to the ER with symptoms but did not need to be hospitalized. Thinking nationally, last week we had 67,000 cases per day compared to 300,000 in January. However, the data is plateauing at a time when many states are opening. Texas, without health professional engagement, is dropping the mask mandate. Texas went from 23,000 cases per day to 7,700 per day in the last few days and half as many people are in the hospital; yet test positivity is 11%, much higher needed to keep the spread under control. Many people are still dying – 2000 a day nationally. If we have enough vaccine by May another 175,000 individuals will die. Contrast that with zero deaths in people receiving the vaccines in the clinical trials and in Israel, the country, with the largest vaccination rate – no one has died after receiving the vaccine (20% + of the population has thus far refused!).

Masks are still critical for our protection for now and the foreseeable future. We continue to learn different aspects of mask effectiveness including [the role of humidity](#).

Many patients have died of COVID in nursing homes. Tragically, the apolitical National Bureau of Economic Research has [pretty conclusively demonstrated](#) that increased private equity investment in nursing homes is correlated with increased nursing home deaths.

Two points on the vaccine. Ultimately **world wide access** to the vaccine is key to managing (not eliminating) COVID. Previous successful AIDS and Ebola campaigns demonstrate the need for citizen engagement. We need organizations like the World Health Organization but also citizen’s action groups such as [Justice is Global](#) and [People’s Vaccine Alliance](#).

We are reaping the failure of the previous administrations COVID policy. Two relevant now: we didn’t [hire nationally the contact tracers/ community health workers](#) at the beginning of this pandemic as advocated by both Republican and Democratic health policy experts and [we didn’t commit to purchasing enough vaccine](#) supply for the entire country. Contact tracers in place could have addressed the challenges with vaccine hesitancy, a phenomenon highlighted in our first webinar on the topic. They could have helped with more effective distribution of vaccines

especially in underprivileged areas. Instead we have increased polarization around good public health practices. Not only are more than 40% of Republicans, as previously reported, stating that they will refuse the vaccine, Republican lawmakers are [fanning the flames](#) leading to a prolonged pandemic with [world-wide burn out](#) of health professionals.

In response, groups such as the AdCouncil are [organizing campaigns](#). AND had a webinar two weeks ago attended by more than 60 people from around the country. We plan on having another one in next two weeks or so. At this first meeting with many break out groups, we exchanged all sorts of ideas on how after vaccination, people would bring back to their communities the feeling that vaccination “opens the world to you.” Among many other ideas we need to have to have credible messengers/experts for the people we are addressing; Share demographics of people in studies and scientists involved in studies; Hear from people who have experienced the vaccine and why they think it is important; Need a national PR campaign engaging role models and celebrities; Appreciate that hesitancy is reluctance, not opposition; Medical/Public health professionals have varying degrees of disillusionment upon seeing public rejection of the vaccines. I am approaching foundations looking to partner with them (not asking for money) on how we can work together to promote vaccine acceptance. And please consider looking into and engaging in any way with a citizen’s group promoting vaccine for all. Without worldwide access to vaccine [we are all at risk](#). All ideas welcome.

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