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Avoiding Covid in the Middle East; A New Wave in the US?

I spent March 20-30 in Israel/Palestinian Territories leading a dual narrative (Israeli and Palestinian guides) study tour for an organization that I founded 18 years ago on health care issues. (<https://www.facebook.com/healingacrossthedivides>). Everyone met in Israel and the West Bank needed to test themselves and wear masks in our presence. This was definitely not the norm – and it is not the norm in the U.S. anymore, though I guess it was never the norm in Florida or Texas! So, [what do we do now](#) as the new variant is leading to an increase in cases? [See what is going on](#) in your county; order home tests; if eligible get a booster; get a pulse oximeter.

I doubt that we will return to lockdowns. Mask requirements will be tough to enforce even in Democratic areas. If nothing else, the mental health and substance abuse [toll](#) is too high. That places a greater burden on individuals at higher risk (such as [diabetics](#)) to care for themselves by wearing masks and avoiding large crowds, especially as Covid rates rise. The unvaccinated are the other major at-risk group; they are [97 times](#) more likely to die than unvaccinated (see this [important article](#) in which an excerpt of a TV clip of Trump touting the vaccine made a difference). Importantly, today we have treatment options.

The Covid spillover effect continues to especially impact the [chronically ill poor](#) who have difficulty accessing everything – such as respiratory tubing, which is more difficult to find because of supply chain challenges. I have a significant number of suffering Long Covid patients; researchers have a [long way to go](#) to better understand this scourge which disproportionately impacts blacks.

Rebuilding our public health infrastructure is job #1 and is likely impossible to do at a national level. We seem unable as a country [to break the cycle of panic and neglect](#). There are many different aspects to the rebuilding process ranging from [improving indoor air quality](#) to [needed reforms](#) of the CDC and a comprehensive system of community health worker engagement especially for disadvantaged socioeconomic groups. This cannot happen at a national level when health professional organizations such as the AMA have not, to take just one example, vigorously defended public health officials who have [been threatened](#).

There continue to be excellent reviews of what went wrong in the pandemic response throughout the world from [NYC](#) to [Sweden](#). The article on Sweden published in last week's issue of the preeminent journal Nature is excellent. The death rate was extremely high. The bottom line conclusions:

“The Swedish response to this pandemic was unique and characterized by a morally, ethically, and scientifically questionable laissez-faire approach, a consequence of structural problems in the society. There was more emphasis on the protection of the “Swedish image” than on saving and protecting lives or on an evidence-based approach. A strategy was never discussed among all relevant parties, and never implemented nor communicated to the public. In addition, there was an unwillingness and incapacity to admit any failures at all governmental levels; or to take any responsibility for the clearly detrimental outcomes for Swedish society. There were even attempts to revise history by changing, or deleting official documents, communication, and websites, and gaslighting the public. The Swedish authorities involved were not self-critical and did not engage in any official and open dialogue and misled the public by withholding correct information and even spreading misleading information. A small group of so-called experts with a narrow disciplinary focus received a disproportionate and unquestioned amount of power in the discussion, nationally and internationally. There was no intellectual/scientific discussion between stakeholders (including independent experts from different disciplines), and the international advice of WHO, ECDC and the scientific community was ignored and/or discredited.”

Sound familiar? The U.S. is thus not the only country to fail in its covid response. Sadly, we are the worst and continue to struggle in our efforts. In response, Ask Nurses and Doctors continues to work on state level public health responses, electoral engagements, strengthening the ACA (including Medicaid which is [facing significant financial threats](#)), and fighting for international vaccine equity where [we continue to lag](#). On April 28th, there will be a demonstration at the Moderna shareholder meeting in Boston to point out Moderna's part in the drastic inequities in worldwide vaccine distribution. Please spread the word. Happy to give information to anyone interested and anyone who knows someone in the Boston area. Lastly, and importantly, please consider signing on to [this effort](#) against corporate/ TV Covid misinformation by signing this petition and learning about Defenders of Democracy Against Disinformation.

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