

Blog: 27<sup>th</sup> April, 2020

It's amazing: no community transmission for 2 whole weeks, some clusters closed down and contact tracing indicates the remaining cases are either incoming kiwis from overseas who are already quarantined, or predicted as they were close contacts of known cases such as the Rosewood dementia patients in isolation at Burwood Hospital in Christchurch. If, and it's a big if, all these known clusters can be fully closed down in the next fortnight and only new cases are those Kiwis still drifting in from overseas, then this country has done it! Covid19 has been eliminated from our country. As long as we keep the borders secure and remain vigilant. That means swabbing every sniffle, fever and sore throat until we have another two fortnights up - that is until mid June - and even then continuing to swab all upper respiratory illnesses. It's never been done before. We are so lucky to have done it and it is definitely due to the firm unwavering political leadership at the top.

Up to lockdown we were like Britain. We were not swabbing. We had very limited capacity for contact tracing. Like Britain we had very limited stocks of PPE gear to protect medical staff let alone share it with community medical workers like District Nurses and Care Home workers. Like Britain we had very limited ability to process any swabs anyway. Back on 27<sup>th</sup> February despite hours on the phone to Public Health and Auckland's Virology doctors I could not even get a swab processed for SARS-Cov-2 taken off a patient with a high fever, dry cough, who 9 days before had joined a flight in Hong Kong to Australia and onto NZ full of Chinese nationals fleeing Wu Han.

We only started processing the swabs here in NZ that day. Prior to this the few swabs that were done were sent to Australia for processing. Even in the first two weeks of March, contact tracers – by phone calling - only asked about contacts in the past two days, even if a patient clearly had symptoms for longer than this.

So much for being infectious at least two days prior to the first symptoms showing. We were no more prepared than Britain was. But full credit for managing the politically demanded U-turn to the Ministry of Health. When it got going, it really did as fast as it could, arranging supplies to be flown in, and finding alternative laboratory facilities, co-opting reagent chemicals and doing its best to get these distributed in an equitable manner. If we had continued on the same pathway as Britain we would have at least 1500 deaths by now, including nurses and doctors at the coalface.

We have less ventilators per head of population than they have, and so our hospitals would not be coping. Britain still isn't swabbing like we are already: they are doing about 1/3 as many as NZ on a population basis.

Under Level 4 Emergency Orders doctors like myself, Dr's Mick and Cathy could have been directed to work anywhere, any hours, no pay needed. The power to order

this is there. I am very relieved it did not come to this, even though I did have faith that in our country such draconian powers would not be abused.

So maybe now we can all breathe out and begin to dream again what life in a Covid 19 ravaged world will be like until we get effective vaccines, medicines and more information about acquiring immunity. Maybe within our bubble called Aotearoa/New Zealand by July we may be able to go back to concerts, restaurants, attend weddings and tangihanga, visit family in other regions. I will be able to hug my two mokopuna. It will be hard for some sectors, tourism in particular. Maybe Aucklanders will learn more about the beauty of Te Wai Pounamu? Maybe the Otago Bike Trail and the Great Walks like Milford, The Routeburn, Hollyford will be explored by more Kiwis and Queenstown will become party town again sooner than expected [just take a thick coat, woolly scarf, gloves and definitely a hat for night times through winter]. Whatever, it will be different than before.

A lot of immediate sacrifice has gone into this by us all. We do have to remember though, without lockdown, Covid 19 was going to wreck the economy anyway. It has in other countries who have not gone into lockdown. This way we have a chance to bounce out of it fast, and get going and get our food back out to what is going to be a very hungry world. All our farmers, horticulturalists and all those who support them need this boost and are primed to respond.

At the surgery we are going well. We will all be working every day now from the surgery. Without community spread the need for us to split into two teams has gone. We will all be at the surgery every day, and we will be seeing more patients at the surgery but while under Level 3 you will need to talk to us first to organise coming in for a face-to-face consultation. Now the nurses may recommend coming in, not just the doctors.

However it will be no more than three patients at a time in the waiting room, and then spread out on those white plastic chairs, and there will still be some in and out of different doors to minimise contact. Please try to organise family so they can be left in the car or at home, even though good evidence is accumulating kids are not the disease spreaders they are known to be with the common cold, and illnesses like measles and meningitis.

There is a sad note to this blog. We are losing our wonderful nurse Kay. She stayed on because of Covid19 to get us organised and to manage the bulk of the flu vaccinations. [These are still being done 10am-12pm every day at the window of Dr Mick's old room by fully gowned up nurses]. She has made sure from January we are fully equipped with PPE gear. And done us proud in that respect. After 17 plus years, her leaving will leave a great hole... and fewer jokes pinned up on office walls. At the moment she is still with us, training Shannon up to replace her. But not for long: as soon as she, Paulette and Shannon feel Shannon can manage ok, she will be leaving for a decent and well deserved break. [I will introduce Shannon in next

week's blog.]

In the meantime, thank you, all and everyone of you for your contribution to keeping our vulnerable patients safe, for helping preserve the lives of my medical and nursing colleagues, and accepting the need for this. Kia tau te rangimarie, Jacqueline [and of course, Mick, Cathy, Paulette, Kay, Shannon, Meriana, Anjana, Ana and Jane – and not to forget Bronson and Nikita, our two excellent housekeepers].