Asymptomatic Spread Revisited

The phrase "fog of war" is attributed to Carl von Clausewitz. It has come to refer to the confusion and uncertainty felt by everyone in the midst of conflict. It is often unclear who is making decisions and why, and what the relationships are between the strategies and the goals. Even the rationale can become elusive as frustration and disorientation displace clarity and rationality.

In 2020, we've experienced the fog of disease mitigation.

The initial round of lockdowns was not about suppressing the virus but slowing it for one reason: to preserve hospital capacity. Whether and to what extent the "curve" was actually flattened will probably be debated for years but back then there was no question of extinguishing the virus. The volume of the curves, tall and quick or short and long, was the same either way. People were going to get the bug until the bug burns out (herd immunity).

Gradually, and sometimes almost imperceptibly, the rationale for the lockdowns changed. Curve flattening became an end in itself, apart from hospital capacity. Perhaps this was because the hospital crowding issue was extremely localized in two New York boroughs while hospitals around the country emptied out for patients who didn't show up: 350 hospitals furloughed workers.

That failure was embarrassing enough, given the overwhelming costs. Schools closed, commercial rights were vanquished, shelter-in-place orders from wartime were imposed, travel nearly stopped, all large events were cancelled, and so on. Clearly there needed to be a good, solid, science-based reason for why the politicians and their advisers had, on their own, decided to take away much of what we once regarded as human rights.

Talk about this began in March but faded. Sometime in summer, the idea of asymptomatic spread started to trend, bit by bit. It finally went to an explosion of interest in the first week of

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Asymptomatic spread was the answer given to the great question: I'm not sick so why should I have to be locked down? Why are we quarantining the healthy? And what possibly could it mean, in any case, to be sick without symptoms? Why are half the PCR-positive tests assigned to people who otherwise seem to be perfectly fine?

All these valid questions came to be answered by this one phrase: asymptomatic spread. You might not feel sick. You might not ever have symptoms from SARS-CoV-2. Still, you could be an even worse super spreader without knowing it, infecting people all around you who will carry it to people who will die from the disease. This was also the moment when, subtly and imperceptibly, we were being asked to think of our fellow citizens not as human beings with dignity and rights but pathogen-carrying disease vectors. We had to be masked, all of us, because we are secretly filthy and unclean: we cannot be allowed to breath near others, so even with a mask we must stay 6 feet away.

(As I type these words, I feel sure that if anyone reads them in ten years, the reader will assume I'm writing fiction or engaged in wild hyperbole. To the future reader: this is all true.)

On June 7, Dr. Maria Van Kerkhove, head of the WHO's emerging diseases and zoonosis unit, <u>told</u> a press conference that from the known research, asymptomatic spread was "very rare." "From the data we have, it still seems to be rare that an asymptomatic person actually transmits onward to a secondary individual." She added for emphasis: "It's very rare."

There was an understandable explosion of fury on all sides. People against lockdowns were screaming all over Twitter that if this is true, the rationale for the lockdowns mostly disappears.

We can go back to our normal lives. We can open up everything again!

I wrote at the time:

What this suggests, of course, is that there is nothing mysteriously magical or insidious about this new virus. It behaves like the viruses that scientists have been studying for one hundred years. What we do with a normal virus is be careful around others when we have symptoms. We don't cough and sneeze on people and generally stay home if we are sick. That's how it's always been. You don't need lockdown to achieve that; you just proceed with life as normal, treating the sick and otherwise not disrupting life.

If that is the case with this one, everything we've done over the months — the mask wearing, the grasshopper dance not to be next to people, the canceling of everything, the wild paranoia and premodern confusions — has been a calamitous and destructive waste of time, energy, and money.

On the other side, there was the predictably pro-lockdown mainstream media which decried her heresy. The cry was so loud that the WHO immediately started walking back the claim, mostly with hints and suggestions that did say untrue things but did not repudiate the initial claim either: "There is much to be answered on this. There is much that is unknown. It's clear that both symptomatic and asymptomatic individuals are part of the transmission cycle. The question is what is the relative contribution of each group to the overall number of cases."

Following that, the question seemed to fade. We went back to assuming that potentially everyone had a disease, enabling fellow citizens to become virtuous enforcers of mask wearing, staying home, and separating, screaming and yelling at others for failing to comply. The science on the question was unsettled, we were told, so let us go back to wrecking life as we once knew it.

The fog of disease mitigation, indeed. But as with most of the "science" throughout this ordeal, it eventually came to be revealed that good sense and rationality would prevail over implausible claims and predictions that led to experiments in social control without any precedent.

In this case, the carrier of rationality is a gigantic study conducted in Wuhan, China, of 10 million people. <u>The article appears in Nature</u>, published November 20, 2020.

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The conclusion is not that asymptomatic spread is rare or that the science is uncertain. The study revealed something that hardly ever happens in these kinds of studies. There was not one documented case. Forget rare. Forget even Fauci's previous suggestion that asymptomatic transmission exists but not does drive the spread. Replace all that with: never. At least not in this study for 10,000,000.

Stringent COVID-19 control measures were imposed in Wuhan between January 23 and April 8, 2020. Estimates of the prevalence of infection following the release of restrictions could inform post-lockdown pandemic management. Here, we describe a city-wide SARS-CoV-2 nucleic acid screening programme between May 14 and June 1, 2020 in Wuhan. All city residents aged six years or older were eligible and 9,899,828 (92.9%) participated. No new symptomatic cases and 300 asymptomatic cases (detection rate 0.303/10,000, 95% CI 0.270-0.339/10,000) identified. There were no positive tests amongst 1,174 close contacts of asymptomatic cases. 107 of 34,424 previously recovered COVID-19 patients tested positive again (repositive rate 0.31%, 95% CI 0.423-0.574%). The prevalence of SARS-CoV-2 infection in Wuhan was therefore very low five to eight weeks after the end of lockdown.

One might suppose that this would be huge news. It would allow

us to open up everything immediately. With the whole basis for post-curve-flattening lockdowns crumbled, we could go back to living a normal life. The fear could evaporate. We could take comfort in our normal intuition that healthy people can get out and about with no risk to others. We could take off our masks. We could go to movies and sports events.

From what I can tell, there was only one news story that was posted about this. It was on <u>Russia Today</u>. I've not been able to find another one. People not following the right accounts on Twitter wouldn't even know about it at all.

We keep hearing about how we should follow the science. The claim is tired by now. We know what's really happening. The lockdown lobby ignores whatever contradicts their narrative, preferring unverified anecdotes over an actual scientific study of 10 million residents in what was the world's first major hotspot for the disease we are trying to manage. You would expect this study to be massive international news. So far as I can tell, it is being ignored.

With solid evidence that asymptomatic spread is nonsense, we have to ask: who is making decisions and why? Again, this brings me back to the metaphor of fog. We are all experiencing confusion and uncertainty over the precise relationship between the strategies and the goals of panoply of regulations and stringencies all around us. Even the rationale has become elusive — even refuted — as frustration and disorientation have displaced what we vaguely recall as clarity and rationality of daily life.

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