Questionnaire

UK COVID-19 Inquiry: Module 2 - Rule 9 Request to Professor Janet Lord - Reference:

M2/SAGE/01/JML

Please provide the following information:

 ${\bf 1. \ A \ brief \ overview \ of \ your \ qualifications, \ career \ history, \ professional \ expertise \ and \ major}$

publications.

I am a professor of Immune Cell Biology at the University of Birmingham, at the time of my attendance at SAGE I was director of the Institute of Inflammation and Ageing. I have 40 years of research experience, hold a BSc in Human Biology (1979, Oxford Brookes University) and my PhD (1983, Aston University) was in type 2 diabetes and obesity. My area of expertise is the immune system of the older adult, including susceptibility to infections, response to infections and response to vaccinations. My career history is:

1982-1984 Research Fellow, Department of Clinical Biochemistry, Oxford University

- 1984-1985 Temporary lecturer, Department of Biochemistry, University of Birmingham.
- 1985-1989 Research Fellow, Department of Immunology, University of Birmingham.
- 1989-1998 Royal Society University Research Fellow, Department of Immunology, University of Birmingham
- 1998–2004 Reader in Molecular Immunology, Deputy Head of Immunology, University of Birmingham
- 2004 present Professor of Immune Cell Biology, Institute of Inflammation and Ageing, Birmingham University
- 2013-2015 Head of the School of Immunity and Infection, University of Birmingham
- 2015-2021 Director of the Institute of Inflammation and Ageing, University of Birmingham

I have over 275 peer reviewed publications, I list only a few relevant ones here:

Wilson D, Drew, Jasper A, Crisford H, Nightingale P, Newby P, Jackson T, Lord JM, Sapey E (2020). Frailty is associated with neutrophil dysfunction which is correctable with phosphoinositol-3-kinase inhibitors. *J Gerontol Series A: Biol Sci Med Sci* 75:2320-2325.

Hazeldine J, Lord JM (2020). Immunesenescence: a predisposing risk factor for the development of COVID-19? *Frontiers Immunol* 11: 573662

Cox LS, Bellantuono I, Lord JM, Sapey E, Mannick J, Partridge L, Gordon AL, Steves CJ, Witham MD (2020) Tackling immunosenescence to improve COVID-19 outcomes and vaccine response in older adults. *Lancet Healthy Longevity* 1 (2): E55-E57.

Al Saleh G, Panse I, Swadling L, Zhang H, Meyer A, Lord JM, Barnes E, Klenerman P, Green C Simon AK (2020) Autophagy in T cells from aged donors is maintained by spermidine, and correlates with function and vaccine responses. *eLIFE* 9: article 57950.

Hazeldine J, Lord JM (2021). Neutrophils and COVID-19: Active participants and rational therapeutic targets. *Front. Immunol.* 12: article 680134.

Evans RA et al; PHOSP-COVID collaborative group (2021). Physical, cognitive and mental health impacts of COVID-19 following hospitalisation – a multi-centre prospective cohort study. *Lancet Resp Med* 9:1275-1287.

PHOSP-COVID collaborative group (2022). Clinical characteristics with inflammation profiling of Long-COVID and association with one-year recovery following hospitalisation in the UK: a prospective observational study. *Lancet Resp Med* doi.org/10.1016/ S2213-2600(22)00127-8.

Haroon S, Nirantharakumar K, Hughes SE, Subramanian A, Aiyegbusi OL, Davies EH, Myles P, Williams T, Turner G. Chandan JS, McMullan C, **Lord J**, Wraith DC, McGee K, Denniston AK, Taverner T, Jackson LJ, Sapey E, Gkoutos G, Gokhale K and 23 others (2022). Therapies for Long Covid in non-hospitalised individuals: from symptoms to patient-reported outcomes and immunology to targeted therapies (the TLC study). *BMJ open.* 12, 4, p. e060413.

2. A list of the groups (i.e. SAGE and/or any of its sub-groups) in which you have been a participant, and the relevant time periods.

I attended only one meeting of the main SAGE group.

- 3. An overview of your involvement with those groups between January 2020 and February 2022, including:
- a. When and how you came to be a participant: I attended the SAGE meeting to present a report produced by the COVID-19 Immunology working group of the British Society for Immunology (BSI) on the impact of age on the immune system which may help to explain the increased vulnerability of older adults to SARS Cov2 and the greater severity of COVID-19 in this population.
- b. The number of meetings you attended, and your contributions to those meetings; I attended only one meeting on June 4th 2020.
- c. Your role in providing research, information and advice. I presented a report written by a COVID-19 Immunology working group of immunologists from the BSI, focussed on factors influencing the susceptibility to SARS CoV2, including older age, and answered questions on the report's content posed by SAGE members.
- 4. A summary of any documents to which you contributed for the purpose of advising SAGE and/or its related subgroups on the Covid-19 pandemic. Please include links to those documents where possible. The document is here: https://www.immunology.org/sites/default/files/BSI_Ageing_COVID-19_Report_Nov2020_FINAL.pdf.
- 5. A summary of any articles you have written, interviews and/or evidence you have given regarding the work of the above-mentioned groups and/or the UK's response to the Covid-19 pandemic. Please include links to those documents where possible. None.
- 6. Your views as to whether the work of the above-mentioned groups in responding to the Covid-19 pandemic (or the UK's response more generally) succeeded in its aims.

This may include, but is not limited to, your views on:

- a. The composition of the groups and/or their diversity of expertise;
- b. The way in which the groups were commissioned to work on the relevant issues;
- c. The resources and support that were available;
- d. The advice given and/or recommendations that were made;
- e. The extent to which the groups worked effectively together;
- f. The extent to which applicable structures and policies were utilised and/or complied with and their effectiveness.

As I only attended one meeting of SAGE I cannot offer any informed comment on the above questions.

7. Your views as to any lessons that can be learned from the UK's response to the Covid-19 pandemic, in particular relating to the work of the above-mentioned groups. Please describe any changes that have already been made, and set out any recommendations for further changes that you think the Inquiry should consider making.

This is my personal opinion but I think that there were many positives such as regular updates on the incidence of infection, ready access to testing, data on which members of the population were more susceptible and became sicker. UKRI also funded a consortium of immunologists to work together across the UK, led by Prof Paul Moss, to investigate immunity to SARS-CoV2, something which I have never seen before and was very effective at producing data quickly and support sharing of precious samples. What I am less clear on is to what extent the data on different infection susceptibility and disease severity was taken in to account in the modelling by SAGE and how this could have influenced our approach to lockdowns more significantly. The economic and societal cost that we are now bearing could perhaps have been reduced with a more focussed, strategic lockdown of vulnerable groups until the vaccine was available.

8. A brief description of documentation relating to these matters that you hold (including soft copy material held electronically). Please retain all such material. I am not asking for you to provide us with this material at this stage, but I may request that you do so in due course.

The only documentation is the report from the BSI listed above. The SAGE meeting minutes will record my attendance.

Professor Janet M Lord 3rd October 2022