Transcript: Sir Patrick Vallance - 13 March 2020 - BBC Radio 4's Today programme- Full Interview

Audio: https://www.youtube.com/watch?v=bEoDWqSH488

START

Presenter

Good morning, can we start with sports events? Which causes a lot of people to raise their eyes. And obviously the Charlton Festival and big rugby match in Cardiff 75,000 people tomorrow. What's your reasoning about thinking at the moment that they should go ahead?

Patrick Vallance

Well, our reasoning is based on which interventions are going to have the biggest effect to reduce the peak of this epidemic, pull it down and broaden it, which is what we're trying to achieve and what everybody I think agrees is the right course of action. And the one that was announced yesterday will have a major effect.

If everybody with a new persistent cough, fever or a temperature above 37-38 goes and stays at home for a week. That is a major way to try and reduce the speed of transmission and should reduce the peak by about 20%.

The second measure we talked about was home isolation with the whole entire household does that if one person gets it, that's another major measure, and then in terms of protecting the vulnerable, which is absolutely critical; because the older and vulnerable population, the ones who stand the biggest chance of getting the serious disease from this - that needs to be done at the time that you've got transmission in the country at a level where they are at risk. So those are the key things.

Coming back to mass gatherings. Mass gatherings do have some impact, so it's not they don't do anything if you stop them, but they are very much more minor than those ones, and the most likely place you're going to get an infection from is from a family member, a friend, somebody very close in a small space, not in the big space, so it's sort of eye catching to say stop those. It's not actually a big effect on the transmission. Not to say we wouldn't do it at some point but it's not the most important thing to get in place first.

Presenter

At the moment then, for instance, at Cardiff with this 75,000 people coming to the rugby match. Is it your view that there will not be transmission between them?

Patrick Vallance

I think it's more likely that there will be transmission in pubs and other areas where people are aggregating, watching it than in the actual stadium itself.

Presenter

And so would you advise that although that sporting match and others are going ahead, that it's those things that people should not do?

Patrick Vallance

At the moment, the things that people should do are to stay at home for a week if they've got the symptoms--

Presenter

--but not without symptoms?

Patrick Vallance

Without symptoms there are some practical things and, you know, I heard the point that Jeremy Hunt made about care homes. I completely agree, care homes are the places we've really got to look after and make sure we get right; and that will be something that, as this epidemic grows, becomes an important part of how we need to do it. But the practical this is, if you're two metres away from somebody, wash hands – those things really matter in terms of disease transmission.

Presenter

Is it your understanding at the moment that people without the symptoms are passing it on?

Patrick Vallance

It looks quite likely that there is is some degree of asymptomatic transmission. There's definitely quite a lot of transmission very early in the disease when there are very mild symptoms.

Presenter

To your wider thinking, when people say as they do serious people, serious scientists look at Wuhan, look at Hong Kong, look at Singapore, look at the things that they have done. The very drastic actions that they have taken and look at the fall off in new incidences of the disease. Why should that not be the model for us?

Patrick Vallance

Well, I've spoken a lot to the teams in Singapore who are doing this. We've exchanged ideas and data, and of course they went for only selective school closure where they had for example, cases they didn't go for mass school closures as their response initially.

Patrick Vallance

And many of the measures they took were appropriate for what they have. I think the measures we've just taken are actually quite extreme in terms of you think about the impact on social distancing and the other measures may come into play, and one of the things that we need to do is monitor this outbreak very carefully and react in advance of things, and that's what we will do, but not to just go for things, because they seem instantly attractive.

Presenter

But is that the point that actually, although they might seem instantly attractive that they are quite short term and is it your fear? Is it your thinking? Is it your reasoning? Your modelling? That actually some of those actions taken in other places may lead to COVID-19 coming back more aggressively in the autumn?

Patrick Vallance

That is exactly the risk that you would expect from previous epidemics. And if you suppress something very, very hard. When you release those measures, it bounces back and it bounces back

at the wrong time. So our aim and this has been described very well by Tony Fauci, from the US is to try and reduce the peak, broaden the peak not to suppress it completely. Also the vast majority of people get a mild illness to build up some degree of herd immunity as well so that more people are immune to this disease and we reduce the transmission at the same time we protect those who are most vulnerable from it. Those are the key things we need to.

Presenter

That is fascinating, the herd immunity idea. So, in many respects it would be a good thing would it for the disease to be spread quite widely now rather than later.

Patrick Vallance

What we don't want is everybody to end up getting it in a short period of time so that we swamp and overwhelmed NHS services. So that's the flattening of the peak. You can't stop it so that you should end up with a broader peak, during which time you would anticipate that more people will get immunity to this and that in itself then becomes a protective part of this process, and this is quite likely, I think, to become an annual virus, an annual seasonal infection.

Presenter

Is it also likely that if you have some herd immunity, so a lot of people gain some degree of immunity with a milder strain, then if it does come back; and one reads all sorts of things about what potentially is happening to the virus, but if it does come back in a mutated and potentially more dangerous form in the future than they're protected?

Patrick Vallance

Well, if the virus mutates a lot, then you don't necessarily get immunity to that variety, but in general, what you would expect is that in a virus where there's no particular pressure on it to mutate to become nastier, the mutations are unlikely to go in that direction. And tend to get a bit milder if anything, because for the virus it wants to be more transmissible and less lethal to the person it infects. That's the sort of survival of the virus--

Presenter

--so that's really interesting actually. It is a good thing in terms of combating the barrels of the virus to get that strain of it that strain that can be coped with for a lot of people rather than to push it away potentially.

Patrick Vallance

Well, I think that we will end up with a number of people getting it. They will get immunity and that will be helpful for the overall protection of society and many of the measures we're talking about are not things that protect you as the individual. So isolating at home isn't for you, it's for everybody else.

At the peak, really protecting the elderly and vulnerable is about protecting the individual.

Presenter

You are advising the government to do things that other governments aren't doing and you're explaining very clearly why you're doing that. Have you considered the publication of more of the modelling? More of the evidence of the scientific work that you're doing behind the scenes.

Patrick Vallance

Yes, I mean I think. A lot of the work that we're looking at, of course, comes from academics who have their own data and they must publish that as they will, but I'm very keen to make everything we do as transparent as we possibly can.

And frankly, this is a collective scientific effort. We need all of the input we can get to get this right, and we should be prepared to change our minds as the evidence changes and cannot go in with a fixed plan that is immutable.

Presenter

And on that thought of evidence changing, when it comes to individuals who do fall seriously ill. Are we learning? Are you learning more about what works in bringing them back to full health and what doesn't?

Patrick Vallance

It looks like there are two phases to this illness. There is a mild viral phase which lasts for seven days and for most people that's it. And for a small number of people, there's a second phase which starts after about five days, which seems to be a reaction of the body to the virus. So when they get ill then with shortness of breath and the other symptoms which progress in that small minority of people. That is not the virus actively doing that, it's now a reaction of the body to what was the viral infection. We don't yet have any treatments for any of these stages but things are being looked at ranging from anti-HIV drugs, where there's some glimmer of evidence that they might do something, through to much more common medicine that might be used. But we don't have anything yet and it's about supportive care, oxygen therapy, ventilations in the most critically ill.

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