

## The Coronavirus mass panic is not justified

By Professor Peter C. Gøtzsche

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I shall try to summarise what we know about the Coronavirus pandemic. I have learned a lot from discussions on email lists; from publications by my good friend, Professor John Ioannidis from Stanford and Silicon Valley technologist Aaron Ginn; from a teleconference with another good friend, the founder of CrossFit, Greg Glasman, and nine others; and from discussions with my best friend, my wife, Professor of Clinical Microbiology Helle Krogh Johansen. CrossFit asked me to write about the mass panic, which I [uploaded on 21 March](#).

On 8 March, I published "[Covid-19: Are we the victims of mass panic?](#)" on the *BMJ* website. I wrote that case-fatality rates are highly uncertain, as many mild infections pass unnoticed, and if an elderly frail patient with serious heart disease is pushed over the edge by an infection, was it then a virus death or a cardiac death? We know that most of those who die are old and have serious comorbidity, just like for influenza and other respiratory viruses.

I asked: "What if the Chinese had not tested their patients for coronavirus or there had not been any test? Would we have carried on with our lives, without restrictions, not worrying about some deaths here and there among old people, which we see every winter?"

We should compare with influenza, but we do not have reliable estimates for influenza deaths. When people take the trouble of counting them, one by one, we can see that official numbers are wildly exaggerated. I have illustrated this with a Canadian example in my book, "[Vaccines: truth, lies and controversy](#)"<sup>1</sup>:

*When the so-called flu pandemic hit in 2009, and the WHO had scared the whole world about how serious this would likely be, a rare opportunity arose to check the true death toll from flu. For the first time, there was widespread lab testing, a national reporting system, and all eyes were on potential flu-related deaths. The final count, 428 deaths, was much closer to the seasonal average of around 300 recorded in the vital statistics tables than to the up to 8,000 deaths estimated with the computer models. Instead of scaring us, health officials could assure us that we shouldn't be worried. Even the wildly exaggerated estimate of 8,000 could be turned around to almost nothing. It means that 99.98% of Canadians would not die of flu during a year.*

The [WHO has estimated](#) that seasonal influenza may result in 290,000 to 650,000 deaths each year due to respiratory causes alone. We don't know how reliable this estimate is, or how reliable estimates of Coronavirus deaths are, but so far, 4 months into the pandemic, the estimate is around 17,000 deaths. Why then the extreme panic, with non-evidence-based draconian measures in many countries restricting seriously people's lives?

People tell me it is because the Coronavirus is much more contagious than the influenza virus but every time I have asked for the evidence, there was silence. The transmission rate seems to be very similar to the seasonal flu. I base this on [Ioannidis information about the cruise ship](#) where people have a high risk of getting infected because they crowd in bars, at buffets and when they dance, and on the [information in Ginn's paper](#). Furthermore, Ginn writes that out of the thousands of flights since November 2019, only a handful of airport and airline staff have tested positive.

Is the Coronavirus much more deadly than the influenza virus? It doesn't seem so. The WHO estimate of a [case-fatality rate of 3.4%](#) is much exaggerated. South Korea has been coping well with the virus, and they lead in the number of tests per capita. The official mortality rate is only 0.9%, but the true rate is likely lower because many people with mild symptoms are not tested.

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<sup>1</sup> E-book, Skyhorse will launch a print version in the autumn; will also appear in Spanish, French, Italian, Dutch and Swedish, and exists in Danish.

Italy is a special case. Of the 16,558 deaths in the world so far, no less than [6,077 are from Italy](#), and the mortality rate is 9.5%. I find it very prudent that people were told to stay in their homes in South Korea if they fell ill, and that only if they became very sick, would they be brought to a hospital that was not overcrowded. We know from [Professor Peter Aaby's groundbreaking work with measles](#) that if the infectious dose is high, mortality will also be high because there will not be sufficient time to establish an immune response. Therefore, overcrowded hospitals will have higher mortality rates. The panic does just that: leads to overcrowded hospitals.

Comparing countries is, of course, tricky for many reasons. People in Northern Italy, which is the region with the most deaths in the world, are older, smoke more, have much closer social contacts, more comorbidity, etc, than in most other places. We also know that there is more than one genetic variant of the virus, and since it is an RNA virus, it mutates fairly quickly.

Also for influenza, there are huge variations in reported case-fatality rates. In a systematic review, the median was about 1% for laboratory confirmed influenza during the mild influenza pandemic in 2009 and the following years (estimated by me from [figure 3 in the paper](#)).

Is it evidence-based healthcare to close schools and universities, cancel flights and meetings, forbid travel, close borders and to isolate people when they are ill? Isolation and keeping a distance of 2 m to other people is very good advice because the virus spreads in large droplets and it does not have wings, as a commentator noted.

It is unlikely that the draconian measures work. Ginn wrote that the daily growth rates declined over time at similar rates across countries with very different measures. In South Korea and Taiwan, people can go to the gym and eat at a restaurant, and those places that closed schools (e.g., Hong Kong) did not seem to have more success in reducing spread than those that did not (e.g., Singapore). People can still have an ordinary life in Singapore.

In my country, Denmark, the politicians have destroyed life itself, and they make it worse all the time. Almost everyone I talk to shake their heads in disbelief. They consider the Coronavirus pandemic a pandemic of panic, more than anything else. All gatherings in Denmark of more than 10 people are banned, even outdoors, and you can get a fine of 1500 kr. (200 Euros) if you violate this rule. This is a dream scenario for any ruler with dictatorship tendencies; all democratic demonstrations have been made unlawful.

Football matches are allowed if there are only 5 players on each team and no spectators. Gyms are closed, tennis courts are closed even though we cannot be more than 4 people on the court at a time, golf courses are closed even though you may still walk on the fairways if you don't look like a golfer, and you cannot get a haircut. Next, perhaps our prime minister will declare that only one person will be allowed at a time in Danish double beds, as we all need to keep the distance.

We are still allowed to run in the forest. But people we meet make big bends to avoid coming too close to us, and the other day we saw an elderly couple with face masks, which is an extremely rare sight in Denmark, in contrast to Asia. Face masks should only be used if you are infected, but people don't seem to know that. Many people we meet look stern, as if they are thinking what to write in their testament before it is too late. There is nothing in the TV news but Corona, Corona, Corona; Doomsday has come close.

We closed our borders with Germany and Sweden, although we have more Coronavirus than they have. Why not close the island of Fyn, in the middle of Denmark, which is easy, as there is a bridge on each side that can be blocked by the military? Where does this stop? Logic was the first victim.

Toilet paper is sold out in many countries, as if we had an epidemic of cholera. I do not understand this. And I do not understand why Corona is the only thing that matters when millions die from malaria, TB and prescription drugs they didn't need. Where is the perspective? Is eternal life awaiting us if only we can avoid dying from Corona?

The hysteria has some positive effects. Teaching people to wash their hands and not coughing in others' faces will undoubtedly reduce deaths, also from influenza and other viruses.

But the harms are colossal for our national economies and ourselves. Quality of life has been reduced for billions of people and mortality from other causes goes up. Businesses go bankrupt in droves,

which increases suicides, unemployment increases suicides, and depression pills increase suicides. Some people, even children, who are worried about dying from Corona have been put on depression pills, and we know that they [double suicides not only in children](#) but [also in adults](#). Foolish doctors can be similarly dangerous as foolish politicians.

No such draconian measures were applied during the 2009 influenza pandemic. Consider also, that it is always winter somewhere, and we cannot close down the whole world permanently. So why now? Well, obviously, no one will ever get in trouble for measures that are too draconian. The epidemic will likely die out not so far from now, and then there will be a queue of people wanting to take credit for it.

Democracy has suffered, as we cannot demonstrate, and freedom has suffered. The ugly face of censorship is also already with us. Ginn's interesting article was taken down by *Medium*. [Wall Street Journal wrote](#) that the page now says that, "this post is under investigation or was found in violation of the Medium Rules." Meanwhile, Twitter has unveiled sweeping restrictions on posts about the coronavirus. The company says it will restrict "content that goes directly against guidance from authoritative sources of global and local public health information." If you click on the link to the Medium post from Twitter, you get a page warning it is "potentially harmful."

When an honest and informative article about a major public health problem is censored because its contents goes "against guidance from authoritative sources," we not only got the virus from China. We also got Chinese style censorship. Is this what we want? Apart from this, I cannot see that Ginn's advice or tentative conclusions go against such guidance. I cannot even see he recommends anything.