

Vaccines and social solidarity

(This is an expanded and annotated version of an article that appeared in the [column Pinoy Kasi](#) on August 26, 2020.)

So many false hopes were raised especially because of vaccines being dangled as instant solutions. We saw that recently with Duterte jumping on an offer from [Russia](#) and [China](#) to accept their vaccine offers, with the excitement of a “Coming Soon” movie.

But vaccines aren't movie productions. They're not even like medicines. The money, time and expertise needed for vaccines is so much more complicated.

Vaccines are not cures. What they do is to introduce the virus itself – weakened or killed -- into the body of a healthy individual, which then stimulates our defense mechanisms to produce antibodies against the virus. (Yes, the same antibodies that the rapid antibody tests look for, as evidence that the person had the Covid-19 virus. Antibodies from the plasma of people who have recovered from Covid-19 are also currently being used to treat patients, the process called [convalescent plasma therapy](#).)

Sounds simple enough but there are two important challenges in developing vaccines.

First would be the safety issues. Will there be harmful effects from introducing the virus into the body? The earliest vaccinations, introducing pustules from smallpox patients to healthy individuals, actually resulted in mild smallpox, followed by immunity. The famous Balmis expedition, ordered by the King of Spain in 1803, mobilized children as live carriers. The inoculated children were brought to Mexico with the live smallpox and used to vaccinate a new set of child carriers who then brought the live vaccine to the Philippines.

Thankfully, we've had many advances since then but vaccines are still tricky, and may have risks.

The second challenge is that of proving efficacy. To know if the experimental vaccine works, we have to observe large numbers of people given the vaccine and, more importantly, exposed to the general population where the virus is active. If a person does not get infected, they still to figure out if it was because of immunity brought about by the vaccine rather than because the person was using effective promotions like masks and physical distancing.

Researchers also have to look at how long immunity will last. The flu vaccine, for example, has to be given yearly because vaccines have to be “updated”, incorporating the many variants of the flu virus that emerge.

These challenges make scientists cynical about the Russian vaccine. What we’re seeing is a new mad race similar to the one to conquer space in the 1950s and 60s, between the then USSR and the USA. It’s not surprising the Russians are calling their experimental vaccine Sputnik, which was the name they used as well for their first space satellite launched in 1957, ahead of the Americans.

The World Health Organization and scientists are concerned that the Russians have taken short cuts with clinical trials for the Sputnik vaccine, meaning there’s [not enough evidence yet on safety and efficacy](#).

Yet Duterte has said he is willing to try the vaccine, together with Filipinos.

Three superpowers – the Americans, Russians and Chinese – are the most aggressive in the vaccine race, not only to prove their superiority in science and medicine but also for soft diplomacy, that is, currying favor especially from poorer countries like the Philippines.

Tedros Adhanom Ghebreyesus, the head of the World Health Organization has warned about [“vaccine nationalism”](#), a reference to the way richer countries have been making advanced orders, even before vaccines are proven, to make sure they can stockpile the vaccines when they do make it through the trials. In Filipino, sinaswapang nila, they’re going to hoard the vaccines for themselves. Ghebreyesus also referred to “supply nationalism” in the way countries have requisitioned medical supplies needed to battle Covid-19. The US has already done this, buying up the entire 3-month supply of Gilead’s anti-viral remdesvir. Even European countries will not be able to buy the medicine until September, if the US doesn’t buy up the stocks again.

The World Health Organization is concerned that with this kind of “nationalism”, the rich countries will make it difficult to control the pandemic. While citizens of rich countries will be immunized, they will still be surrounded by poorer countries with large numbers of unprotected people. Even within poorer countries, you will have enclaves of richer people who can afford the vaccine, but are surrounded by the poor, with no protection.

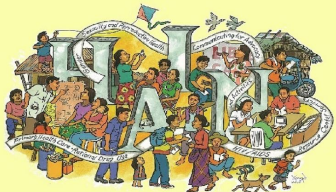
We're not even talking about the "anti-vaxxers", people who will refuse vaccination because they see the vaccines as unsafe or ineffective or even part of a conspiracy to harm people. A recent survey in the States found that [a third of the population](#) would not get the vaccinations even if they are approved.

So many "ifs" here if we want to think of a post-Covid era. If there is a cure. If there is a vaccine. I would say, more importantly, "if the world, especially rich nations and rich people, understand that the social solidarity needed to fight this virus will need more than charity.



¡Alerta!

This e-newsletter/blog will appear as needed, calling attention to crucial health issues with information, commentary and analysis, as well as links to additional resources. The newsletter draws on a wide range of publications and media platforms from around the world to help you make informed decisions.



Because of the pandemic, our staff is doing WFH (work from home), out in Pangasinan, Rizal & Metro Manila. Contact us via email: hain@hain.org or visit our site www.hain.org