



COVID-19 VACCINE.
PROFIT OR PREVENTION?



TWITTER CHAT :21ST JAN 2021

INTRODUCTIONS FROM 18:45 (GMT)

DISCUSSION BEGINS AT 19:00 TILL 20:00 (GMT)

Vaccination programmes have provided prevention and treatment against infectious disease since the eighteenth century with the eradication of smallpox in 1798 (Riedel, 2005). We have recently seen the expansion of vaccination programmes eradicating Polio in Pakistan. According to Asgher, 2020 up until recently Pakistan remained one of two countries who were unable to eradicate polio due to the lack of public trust in vaccinations and staff negligence, they recently overcame this by building trust through public education (Asgher, 2020).

According to The World Health Organisation Covid-19 pandemic has created a culture that circulates misleading and inconsistent information described as an "infodemic" (WHO, 2020). This is the use of misleading information mixed with scientific facts that are presented to the public, creating a lack of trust which has led to vaccine hesitancy. The World Health Organisation recognises vaccine hesitancy as the tenth highest global threat to maintaining good health, whilst preserving life (WHO, 2020).

The intent and motive of the vaccination programme has become questionable due to the record time taken by pharmaceutical companies to develop a vaccine which can usually take several years (Lockey, 2020). It is reported that the vaccine has been publicly funded and remains free to the public by pharmaceutical companies up until the pandemic has been declared over. The concern lies with the ability of pharmaceutical companies being able to hold a publicly funded patent to the vaccine and still be able to charge the public or universal healthcare providers, like the NHS for future doses of the vaccine post pandemic (Dyer, 2020).



"The current system—where pharmaceutical corporations use government funding for research, retain exclusive rights, and keep their technology secret to boost profits—could cost many lives." (Dyer, 2020)

The World Health Organisation also raises concerns about high income countries holding a monopoly for the vaccines, potentially giving rise to unfair pricing of the vaccine and inequitable distribution to low-income countries (WHO, 2020). This raises concerns about unethical and immoral use of public funds in order to increase profit margins for investors and pharmaceutical corporations. Although they maintain that the cost of the dose will remain fairly low, there are no guarantees that it will not increase post pandemic. We need to question if it is okay for investors and pharmaceutical corporations to set profit margins on a publicly funded initiative?

Furthermore how ethical is it when GP's are paid to vaccinate members of the public whilst in a pandemic? (Lacobucci, 2020) Are we encouraging the practice of immoral and unethical opportunist behaviours in healthcare? Would the armed forces do the same? These questions bring us back to the point, is the covid-19 vaccine for profit or prevention?

Amira Chaudhry 11th January 2021



Twitter chat

Questions to discuss on the night

1. What is an “infodemic” and how do we prevent vaccine hesitancy in our communities?
2. Is it ethical to charge universal health systems or the public for the covid-19 vaccine post-pandemic?
3. Is it ethical for pharmaceutical corporations to set profit margins for a vaccine that has been funded with public funds? If so, how should they be used?
4. Do you think there is a moral duty of care for high income countries to distribute the vaccine to low- income countries without a cost?



Articles of Interest

Asgher, R. J., 2020. Why is polio still here? A perspective from Pakistan. *The Lancet Global Health*, 8(2), pp. 177-178.

Dyer, O., 2020. Covid-19: Many poor countries will see almost no vaccine next year, aid groups warn. *BMJ*, Volume 371, pp. 1-2.

Lacobucci, G., 2020. Covid-19: GPs to get £12.58 per dose to deliver vaccine from December. *BMJ*, Volume 371, p.1.

Lockey, E., 2020. Covid -19: The race for a vaccine. *Journal of Renin-Angiotensin -Aldosterone System*, 21(2).

Rledel, S., 2005. Edward Jenner and the history of smallpox and vaccination. *Baylor university medical centre proceedings*, 18(1), pp. 21-25.

WHO, 2020. Global equitable access to COVID-19 vaccines estimated to generate economic benefits of at least US\$ 153 billion in 2020–21, and US\$ 466 billion by 2025, in 10 major economies, according to new report by the Eurasia Group. [Online] Available at: <https://www.who.int/news/item/03-12-2020-global-access-to-covid-19-vaccines-estimated-to-generate-economic-benefits-of-at-least-153-billion-in-2020-21> [Accessed 09 01 2021].

WHO, 2020. Immunizing the public against. misinformation. [Online] Available at: <https://www.who.int/news-room/feature-stories/detail/immunizing-the-public-against-misinformation> [Accessed 04 01 2021].

WHO, 2020. Ten threats to global health in 2019. [Online] Available at: <https://www.who.int/news-room/spotlight/ten-threats-to-global-health-in-2019> [Accessed 18 12 2020].

