

COVID-19: An Overview of the Evidence

The data is in: lockdowns serve no useful purpose and cause catastrophic societal and economic harms. They must never be repeated in this country.

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The ‘[sunk cost fallacy](#)’ is a well known one. World War 1 is the classic example. By Christmas 1914 it was obvious to all that the war was a catastrophe, but to admit this was to admit that all the lives lost had been lost pointlessly. And no country would confess that.

However, after a year of pain, suffering and enormous loss, the UK must reach for new solutions to the COVID-19 problem and any future respiratory disease outbreaks. We must learn from errors, acknowledge the harms of the measures we have taken and account for them moving forward. We now need a more holistic, measured approach.

Many international studies bear out that lockdowns have proven to be a complete failure as a public health measure to contain a respiratory virus. They did not succeed in their primary objective of containing spread yet have caused great harm.

Lockdowns were explicitly not recommended even for severe respiratory viral outbreaks in all pandemic planning prior to 2020, including those endorsed by the WHO and the Department of Health. The reasons for ignoring existing policies and adopting unprecedented measures appear to have been (i) panic whipped up by the media (especially scenes from China), (ii) a reluctance to do things differently to neighbouring countries and (iii) the unfaltering belief in one single mathematical model, which latterly turned out to be wildly inaccurate ([Imperial College, Neil Ferguson](#)).

We must find the courage to do things differently and to admit mistakes. The USA is leading the charge here, with more and more states turning their backs on lockdowns and mask mandates.

Moving forward, we would recommend the following steps:

1. Reinstate the existing pandemic planning policies from 2019, pending a detailed review of the policies adopted in 2020. Look to countries and states which did things differently. There should be a clear commitment from the Government that we will never again lockdown.
2. Stop mass testing healthy people. Return to the principles of respiratory disease

diagnosis (the requirement of symptoms) that were well researched and accepted before 2020. Manufacturers' guidelines state that these tests are designed to assist the diagnosis of symptomatic patients, not to 'find' disease in otherwise healthy people.

3. Stop all mask mandates. They are psychologically and potentially physically harmful whilst being clinically unproven to stop disease spread in the community and may themselves be a transmission risk.
4. Vaccination. Abandon the notion that vaccine certification is desirable and that children should be vaccinated. There is no logical or ethical argument for either.
5. Devise a public education programme to help redress the severe distortions in beliefs around disease transmission, likelihood of dying and possible treatment options. A messaging style based on a calm presentation of facts is urgently needed.
6. A full public enquiry into the extent to which severe/fatal COVID-19 is spread in hospitals and care homes. There is stark recent evidence on this from Public Health Scotland and if true for the rest of the UK, there needs to be better segregation of COVID-19 patients and staff within these settings.
7. More funding and investigation of treatments for COVID-19, instead of only focusing on vaccination as a strategy. Given the high rates of hospital transmission, encourage a drive for more early treatment-at-home using some of the protocols discussed herein.
8. Divert funds. The not inconsiderable money saved from ceasing testing programmes can be diverted to much needed areas, such as mental health, treatment research and an increase in hospital capacity and staffing. The vast debts accrued during 2020 will also need to be paid off, a fact that seems to be worryingly absent from economic recovery plans.

[Read our full review of the evidence here.](#)

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