

MEMORANDUM

DATE: December 10, 2020
TO: Health Service Board
FROM: Dr. Stephen Follansbee, Board President
RE: President's Report

I'd like to share a progress report on vaccines against SARS-CoV-2, the virus causing the COVID-19 pandemic. Three manufacturers have reported impressive results on candidate vaccines. Two companies have applied to the FDA and the European Union for expedited approval. None of the vaccines are LIVE vaccines. None of the results have been published in detail to date.

Q1: When can I get the vaccine? **A1:** To be determined. The 24 million American front-line health care workers and nursing home residents may be able to start receiving the first of two doses later in December. The larger group of essential workers in other occupations will follow. There are estimated to be 80 million people who will need 160 million doses. The rest will follow these first groups.

Q2: I want the best one. Which is that? **A2:** There is not an answer. None of the vaccines were tested against each other. It is impossible to say one is better from the development trials, despite apparent differences in efficacy. Do not try to make comparisons from these studies.

Q3: Will the vaccines be as good as advertised? **A3:** Probably not. Rare vaccines are 100% effective. Vaccine trials are very carefully controlled and monitored. The results are presented as EFFICACY under relatively ideal conditions. Once marketed, the EFFECTIVENESS of a vaccine is usually not as good in "real world" conditions. There are exceptions to this rule. We also do not know how long the protection will last.

Q4: After vaccination, can I stop wearing masks and being as cautious about reducing my risk for acquiring the infection? **A4:** No, not in the near future. No vaccine is perfect. A vaccinated person may still get infected but have a milder case. Adults and children infected but without symptoms can still transmit the virus. Do not relax good pandemic habits while the pandemic is still active.

Q5: I think I had a SARS-CoV-2 infection. Do I need to be tested to make sure if I am already immune? **A5:** Right now, the answer is NO. If you qualify for the vaccine, the recommendation is not to get further testing. Just take the vaccine.

Q6: I understand that Russia and China have vaccines already available. Should I take one of those if I can? **A6:** There are NO DATA from either Russia or China on how safe and effective their vaccines are. My recommendation is a solid NO. Do not seek one of these vaccines at present.

I received a newsletter from financial advisers, listing a consensus prediction of the ten most important Investment Themes for the next ten years. Four of these are directly related to health care. I list only to remind us all that Health Care is a Big Business and getting bigger and more complex. I am not suggesting any investment advice. My only intent is to alert us to the forces and challenges we face in the coming decade as San Francisco Health Service Board Commissioners. The four themes are:

1. **The Big Keep Getting Bigger:** Consolidation of various components of the industry is already in progress. There may be fewer competing entities in each area.
2. **The Prognosis Looks Good for a Cancer Cure.** These cures are very exciting and undoubtedly will be very expensive.
3. **House Calls Are Coming to Medicine.** No, this does not mean your provider will be making home visits in person. Virtual or telemedicine visits are already increasing. As mentioned last month, some analysts think the pandemic has shortened the pace of this advance from 5 years to 5 months.
4. **Artificial Intelligence Could Spark the Next Tech Revolution.** Menus or algorithms already exist trying to arrive at a diagnosis, or a shortlist of possible diagnoses, just answering a few questions. Expect this field to expand widely. Devices to monitor blood sugar constantly, for example, could be programmed to recalculate insulin dosing without intervention by either the patient or a health care provider.

We are going to hear more about the Star rating for Medicare plans. The Centers for Medicare & Medicaid Services (CMS) is just one of the federal agencies that will be seeking to restore scientific processes under new leadership. For more commentary on this issue, I suggest the opinion piece by Dr. Peter B. Bach from Memorial Sloan Kettering Cancer Center, entitled *Science Under Assault at Medicare and Medicaid* in a recent *New York Times* <https://nyti.ms/3fVC0KR>.

Happy Holidays