

Opinion: In vaccine-resistant Alabama, hospitals face a two-front war



A local activist hands out a covid-19 vaccine information flier in Uniontown, Ala., on March 11. (Michael S. Williamson/The Washington Post)

Opinion by Michael Saag

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All of us have suffered mightily from the covid pandemic during the past 18 months. Some of us have had the infection. Many more have provided support to a friend or colleague who fought the infection. More than 611,000 Americans have lost their lives to this global plague.

Through the spring and into the early summer, owing in large part to large-scale vaccine production and distribution, every American age 12 and over had access to the vaccine. Many received their “jab” as soon as it was available. As a result, the number of covid cases plummeted, the grip on our hospital systems relaxed, death rates fell and we began to see the light at the end of the tunnel.

But in many regions of the country, including the Southeast where I live, up to two-thirds of the population chose not to protect themselves. I've heard all the reasons: "The vaccines are experimental." "I am young and healthy; I don't need the vaccine." "So what if I get covid?" "The epidemic is over." "The vaccine will destroy my fertility." "The vaccine is a government plot." "I have the freedom to choose." "Nobody can tell me what to do." "The doctors are lying to me."

Like most of my fellow health-care workers, these comments stunned and stung me. We had spent a year fighting a raging pandemic. We suspended activities in our usual disciplines of medical care, rolled up our sleeves and provided care to the more than 30 million people who showed up in our ERs, clinics and hospitals. Covid was more than disruptive; it was exhausting. Most of us survived. But we were also fatigued and battle-worn.

Enter delta. We knew variants had emerged elsewhere in the world. The alpha variant entered the United States as the vaccines were rolling out and, fortunately, was well neutralized by the vaccine's immune response. Delta, we thought, would be similar. It is not.

As we entered into the July Fourth weekend, many Americans celebrated as if the epidemic had ended: traveling in record numbers and engaging in large gatherings with no masks and no social distancing. All the while, many of those celebrating were unvaccinated and immunologically vulnerable. With the delta variant going from zero cases in March to 60 percent of cases by mid-July, we were approaching a near-perfect storm.

Now we are in it. Cases are exploding. Here in Alabama, the state with the lowest vaccination rate (less than 35 percent), rates of infection have risen from less than three cases per 100,000 people four weeks ago to more than 54 cases per 100,000 this week. Suzanne Judd at the University of Alabama at Birmingham School of Public Health generated models that show, by Labor Day, cases will skyrocket to two to three times the peak we experienced in January. At our 1,157-bed hospital in Birmingham, Alabama's largest, we have risen from three cases in-house in mid-June to more than 67 cases on Wednesday. Statewide, the rise exceeds 500 percent since July 4.

These trends are terrifying and, as a virologist who had covid-19 last spring, I can say they induce a kind of pre-traumatic stress in our health-care workers. We know what's coming. We've experienced this trauma before. We don't want to do this again, but the die is already cast. My fellow health-care workers are being thrown back into the fire, like servicemen and women going back for a third tour of duty in a war zone. This week alone, one infectious-disease colleague and four ER physicians, all fully vaccinated, have become ill with the variant. This is very different from what we experienced before. Delta *is* different.

With the current spike of cases, 99 percent of deaths are occurring in unvaccinated people. Almost all of these are preventable. That is particularly troublesome to health-care workers who struggle valiantly to save the lives of those who now present to the hospital, the vast majority of whom chose not to be vaccinated.

Making it worse is the hate we experience from a small, but very real, group of people who seek to undermine our efforts through the steady release of misinformation in social media and elsewhere. I received an inquiry this week from a person who claimed to be a CNN reporter, initially asking me for information about delta and then demanding "proof" that delta is here. Despite my best effort to explain, I was berated with accusations that I was making this up. (He later posted most of the exchange on Facebook.) I am not alone in suffering these types of attacks. It is this sort of behavior that has led to poor vaccine uptake among many people and resulted in this new spike of cases.

Despite the static and misinformation, we will get it done. It will be helpful, however, if this time around we pull together as a country, ignore those who spew hate and sow mistrust of those trying to serve the public. The virus is a formidable enemy and terrifying enough. We can't afford to be fighting a two-front war.