

With so few virus deaths, Australians debate vaccine risks

July 1 2021, by Rod McGuirk



People queue to receive a vaccination at the NSW Vaccine Centre at Homebush Olympic Park in Sydney, Australia, Thursday, July 1, 2021. Australia has little COVID-19 because its border is closed. Many Australians are in no hurry to get vaccinated because there is so little virus. But the border is unlikely to reopen until the vaccination rate is much higher than the current 5%. Credit: Mick Tsikas/AAP Image via AP

Australia has weathered the pandemic far better than many nations—recording just a single coronavirus death since last October—but its success means many Australians are not in a rush to get vaccinated and that could delay the country's return to normalcy.

Concerns are growing about the economic cost to Australia of being left behind by countries that suffered far higher death tolls, but urgently embraced vaccines and are increasingly opening up.

Most of Australia's pandemic success, after all, can be attributed to the continued closure of the isolated continent's border, something that is unlikely to change until far more than the current 6% of the population is vaccinated.

But with relatively few cases of the virus and so few deaths, many in Australia are questioning whether the slight health risks to young adults of the widely available AstraZeneca vaccine make it worthwhile.

It's a debate that divided politicians and [medical experts](#) this week at a time when nearly half of Australia's 26 million people are living under lockdown measures due to the emergence of new virus clusters mostly blamed on the delta variant, which is thought to be more contagious.

The AstraZeneca shot in Australia currently is recommended only for people older than 60 because of the risk of rare blood clotting in [younger people](#). The only alternative registered in Australia is Pfizer, which unlike the locally made AstraZeneca is imported and in short supply.

AstraZeneca had been recommended for all adults until a 48-year-old Australian died from blood clots in April. The vaccine was then recommended for people older than 50 until a 52-year-old died in May.

That's more than the single death from COVID-19 since last year, an

80-year-old man who died in April after being infected overseas and diagnosed in hotel quarantine.

Many people are refusing to take their second AstraZeneca jab, recommended three months after the first, because of the evolving safety advice. Many have canceled appointments for their first shots.

In most parts of the world, the risk-benefit assessment is stacked in favor of taking AstraZeneca. But that balance is different in Australia.

The Australian government on Monday gave all adults the AstraZeneca option if their doctors agree to administer the jab. The government also indemnified the doctors who administer the shot against lawsuits.

The leader of the Australian military's pandemic response, Lt. Gen. John Frewen, said Pfizer was restricted to people older than 40 because of limited supplies.

"It's really important that Australians have now got a choice about whether they make an informed decision about accessing AstraZeneca," Frewen said on Thursday.

"We've got AstraZeneca available and I think Australians who want to should be able to have a conversation with their G.P. about whether they access AstraZeneca now or whether they wait for another vaccine later on," Frewen added, referring to general practice doctors.

But fewer than 3,000 adults under 40 had taken up the opportunity for a first dose of AstraZeneca by Thursday.

Queensland state Chief Health Officer Jeannette Young was accused by critics of scaremongering when she said on Wednesday that with only 42 coronavirus cases active in the state, AstraZeneca was not worth the risk

for younger adults.

"I don't want an 18-year-old in Queensland dying from a clotting illness who, if they got COVID, probably wouldn't die," Young said.

She was contradicted by former Deputy Chief Medical Officer of Australia Nick Coates, who said younger Australians were at greater risk of dying of COVID-19 than they were from AstraZeneca side effects.

Young was "unfortunately out on a very lonely limb there," Coates said.

But Prof. Chris Blyth, the co-chair of the Australian Technical Advisory Group on Immunization that advised the government to recommend Pfizer for those younger than 60, said few [young adults](#) should take AstraZeneca.

"I do not believe at this stage that young people should be receiving AstraZeneca at this stage unless their circumstances press for that," Blyth said. "There are some situations where that would be warranted, but they are quite small."

The alternative to AstraZeneca is to wait for more Pfizer or an as-yet-unregistered Moderna vaccine contracted to be delivered between October and December.

Australia has been relatively successful in containing clusters throughout the pandemic, registering fewer than 31,000 cases and 910 deaths total.

Australia introduced extraordinarily tough border restrictions in March 2020 that prevent Australian citizens and permanent residents from leaving the country as well as foreigners from arriving except under limited circumstances.

The government forecasts that normal flights won't resume until mid-2022, which frightens business groups.

Those involved in international education, Australia's third-largest export industry, have warned that would mean overseas students would turn to universities in other countries next year and stay with those institutions throughout their courses for years.

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