



A global COVID vaccination campaign is urgent

Description

We did it for smallpox, we can do it for this pandemic

By Irwin Rapoport

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The emergence of the [Omicron variant](#) of **COVID-19** should concern us all. This mutation is just one of many that shall arise unless we vaccinate most of the people on Earth. Medical researchers across the planet are thoroughly investigating Omicron and their hard work is paying off daily as we learn more about its strengths, impacts, ability to spread, and how to treat it. This is important work and very much appreciated. The last variant of concern was the [Delta variant](#) and it caused great panic when many thought that COVID was finally under control.

The [Spanish Flu](#), which hit the world between February 1918 and April 1920, literally went extinct after a third global wave. At the time, the global population was close to two billion, and it easily could have caused more deaths. The virus struck in the final months of World War I, and it was lethal, targeting younger people for the most part.



WWI U.S. army field hospital during Spanish Flu outbreak – Image: Public domain, via Wikimedia Commons

States the [Wikipedia page](#) for the Spanish Flu, “The earliest documented case was March 1918 in Kansas, United States, with further cases recorded in France, Germany and the United Kingdom in April. Two years later, nearly a third of the global population, or an estimated 500 million people, had been infected in four successive waves. Estimates of deaths range from 17 million to 50 million and possibly as high as 100 million, making it one of the deadliest pandemics in human history.”

The Wikipedia page contains some excellent information about the Spanish Flu, the responses to it, and provides data and links on how it compared to pandemics that occurred later in the 20th and 21st centuries. I would also suggest reading [John M. Barry’s *The Great Influenza*](#), an extremely well-researched history of the Spanish Flu and the state of medicine and medical research between the mid-1800s and the outbreak of the virus. Much of what Barry relates will fascinate and shock many.

While the Spanish Flu disappeared, COVID won’t go away so easily as there are billions of people for it to infect and thrive in, giving it opportunities to further mutate and possibly renew itself into an entirely new virus. There is much to be worried about, and these fears should spur a global initiative to vaccinate most of the human race. We have no time to lose if we want to end this pandemic.

We have the resources to launch such a campaign and the ability to ensure its success. It just requires a will to get it done. And we must act quickly before new variants arise, which may render our current vaccines ineffective. If anyone required proof that evolution was a fact, COVID’s mutations should be sufficient to eliminate any doubts.

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The question is, how do we do it? And the answer is simple. We have the **United Nations World Health Organization**, the United States’ **Center for Disease Control and Prevention**, similar European agencies, and organizations in Asia staffed with top-notch researchers and experts. And, we have vaccinations that can easily be manufactured in great numbers by several pharmaceutical companies with many manufacturing facilities and



access to the materials required for their production.

Because we need to vaccinate as many people as possible immediately, it is now time for the world's governments to agree to initiate a global vaccination campaign. It would require that governments requisition pharmaceutical manufacturers to produce vaccines in vast quantities (as in the case of the U.S. government), and the securing of agreements with the firms that supply the raw materials for the vaccines and the manufacture of the needles. This is no small task and it requires a great level of coordination, administration and flexibility. It will also require sophisticated diplomacy to deal with governments in war-torn countries, failed states, and regions where rebel groups occupy large areas and control the lives of millions of people.

Humanity is experiencing a major medical crisis. It's time for the pharmaceuticals, and suppliers of raw materials and needles, to set aside the profit incentive and selflessly pitch in for the benefit of all. For COVID, I would give these firms a non-taxable .2 or .3 percent profit margin, as well as cover the cost of replacing manufacturing and processing equipment. This, I believe, is fair for no one should benefit financially during a pandemic that has killed and impacted millions of people, creating fear and causing great suffering for individuals and families and crippling economies.

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A death in the family is never easy and COVID has killed many. In Quebec, we know how these deaths are causing great pain and tears. The Spanish Flu is estimated to have killed between 500,000 and 850,000 Americans – COVID has killed over 800,000 so far. I recall a conversation with a friend at the start of COVID who was trying to downplay the virus. I stressed that I don't believe that Americans are prepared to accept the loss of 500,000 people. In response, I was told that COVID was no worse than the seasonal flu and that many who died or would die were old and had pre-existing conditions. It was a disturbing conversation and one that stays with me. I imagine that many of us had similar experiences, and in some cases, have seen friendships wane or end.



Rahima Banu, the last victim of smallpox (1975) –
Image: [CDC/ World Health Organization Stanley O. Foster M.D., M.P.H.](#), Public domain, via Wikimedia Commons

Even today, we still have anti-vaxxers and those who refuse to wear masks or take basic precautions. I have one friend, a mother of two daughters, who refuses to be vaccinated. Her children are fully vaccinated. I informed her that COVID has taken the lives of young and middle-aged people, and I asked her, “How would you feel if you died due to COVID and your children became orphans?” She responded, “It is my right to not be vaccinated.” In the U.S. alone, many children have lost parents due to COVID and have to live with that experience and what it entails for the rest of their lives, no easy burden.

Launching a global campaign to vaccinate people for COVID is realizable. It will not be easy, but we have the resources, via civilian and government agencies and military organizations, to get it done rapidly and efficiently. If we decide to press forward with this global program, I do not doubt that we can succeed and learn many lessons on dealing with the next pandemic.

Nor is this the first time that we have launched a global vaccination program. We did so for [smallpox](#) and due to that effort, it no longer exists in the wild, only as samples in a few laboratories. In fact, as a debate was taking place on whether the samples should be destroyed, it was learned that the Russian military had weaponized smallpox. This rightly scared many and ended that debate. An exercise to see how rapidly it could spread and if an outbreak could be stopped in time determined that it was impossible and would flourish among so many who were unprotected. The exercise found that most doctors are unable to recognize the symptoms and make the

correct diagnosis. Fortunately, smallpox has not returned.

It is, in many ways, thanks to the late [Dr. Donald Henderson](#), an American epidemiologist who passed away in 2016, that smallpox was eradicated. Henderson was a true hero and we are in his debt. Despite obstacles and hurdles, his dream of wiping out the scourge of smallpox became a reality.



Dr. Donald Henderson after receiving the Presidential Medal of Freedom from President Bush in 2002 – Image: Public domain, via Wikimedia Commons

According to Wikipedia, *“Henderson served as Chief of the CDC virus disease surveillance programs from 1960 to 1965, working closely with epidemiologist Alexander Langmuir. During this period, he and his unit developed a proposal for the United States Agency for International Development (USAID) program to eliminate smallpox and control measles during a 5-year period in 18 contiguous countries in western and central Africa. This project was funded by USAID, with field operations beginning in 1967.”*

“The USAID initiative provided an important impetus to a World Health Organization (WHO) program to eradicate smallpox throughout the world within a 10-year period. In 1966, Henderson moved to Geneva to become director of the campaign. At that time, smallpox was occurring widely throughout Brazil and in thirty countries in Africa and South Asia. More than 10 million cases and 2 million deaths were occurring annually.”

“Vaccination brought some control, but the key strategy was ‘surveillance-containment’. This technique entailed rapid reporting of cases from all health units and prompt vaccination of household members and close contacts



of confirmed cases. WHO staff and advisors from some 73 countries worked closely with national staff.”

“The last case occurred in Somalia on October 26, 1977, only ten years after the program began. Three years later, the World Health Assembly recommended that smallpox vaccination could cease. Smallpox is the first human disease ever to be eradicated. This success gave impetus to WHO’s global Expanded Program on Immunization, which targeted other vaccine-preventable diseases, including poliomyelitis, measles, tetanus, diphtheria, and whooping cough. Now targeted for eradication are poliomyelitis and Guinea Worm disease; after 25 years, this objective is close to being achieved.”

We can use more Donald Hendersons – people who care about others and whose goal in life is to create a better world and do their utmost to inspire others. Without question, his post-smallpox initiatives have helped with the response to COVID.

We have the blueprint for a global COVID vaccination campaign and the sooner we implement it, the better. Donald Henderson and those who aided him have done the homework for us, and today, we have far better tools and resources than they had to work with.

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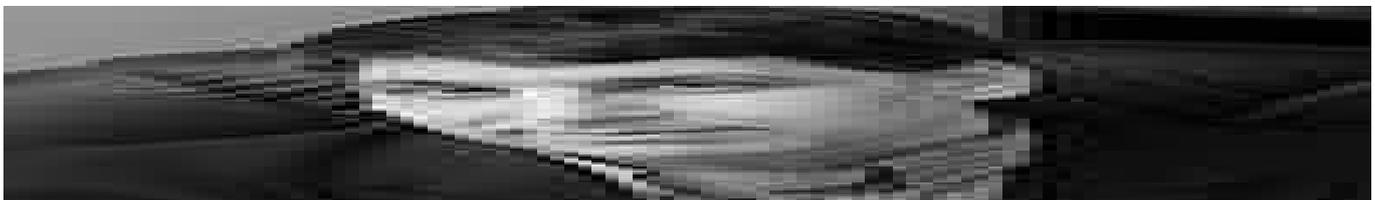
If the desire is to have life return to pre-COVID times as soon as possible, we must insist at every opportunity to have a coordinated global response to end the ongoing crisis. Our COVID experience is mild when compared to the outbreak of the [Black Death](#), the [Plague of Justinian](#), and the Spanish Flu, and for that, we should consider ourselves lucky. Those were terrible times and caused great suffering and distress. I doubt many of us alive today would have the strength and fortitude to survive those awful experiences.

Feature image: COVID vaccination campaign in South-Africa, by [GovernmentZA](#) via [StockPholio.net](#)

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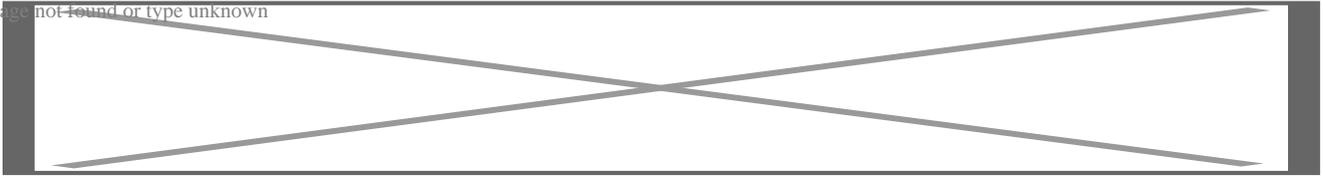
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Irwin Rapoport is a freelance journalist.



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