

Risk Assessment of my Chances of Survival

The death toll is rising in South Africa and it's going to get worse. Our first fatality was on March 27th, exactly two months ago. Since then, 2 456 fatalities have been recorded. May God rest their souls.

I did a bit of research and found that in a normal year, the five biggest causes of death in South Africa are HIV and AID, diabetes, TB, homicide and road accident fatalities. I took the most recent statistics available for a whole year, and divided by four – to get a comparison on the three months since we started counting Covid fatalities.

For HIV and AIDS, there are statistics for 2017 when 126 755 deaths related to that pandemic. Divided by four that is 36 700 souls that perished every three months. That is fifteen times higher than the past three months of Covid deaths, but we have to bear in mind that the number of Covid cases is still rising exponentially. Yes we have flattened the curve, thanks to sound government guidance. But this is a respiratory disease that cannot be put out like a veld fire. It travels invisibly, leaving no smoke. Vectors can carry it without knowing that they have been infected. Somewhere between 41% and 80% of those infected are asymptomatic, so this is a fast-onset crisis. Compared to the spread of HIV, which was and is slow-onset, and relatively hard to catch.

For diabetes, there are stats available that estimate the number of fatalities at 90 000 per year, or 22 500 in three months. That is ten times the number who have died from Covid – only in South Africa and only since its appearance in early 2020.

For TB we have 2018 stats – 63 000 fatalities or 5 750 in one quarter. That is more than twice the number who have died from Covid so far.

We have 2019 figures for homicides – it was 21 022 last year which averages 5 220 for three months. Still over twice the number of lives lost to Covid.

And finally, we have 2017 stats for road accidents – 14 050 people perished, or 3 512 per quarter. All of these “Big Five” are still ahead of Covid at this stage. But then, the worst is yet to come in terms of the Covid-19 pandemic.

I do not offer these comparative statistics to suggest that the Covid risks are exaggerated. My point is rather that in three months since its debut, Covid has almost broken into the big leagues. In the next three months it could overtake several of these other risks, and by the end of the year it could stand second only to HIV and AIDS.

Here is another statistic – HIV and AIDS accounts for 25 percent of all Health fatalities. Now we are splitting hairs, because homicides are Police stats and road fatalities are Transport stats. The loss of life in South Africa is growing as Covid-19 rises. We haven't reached the peak yet. Then it has to taper off. It will probably be some time in early 2021 – if we are lucky – before we can roll out a vaccine?

We have learned to live with these other risks. Antiretroviral treatment for HIV and AIDS is working wonders. For those on treatment, it has been relegated to a chronic condition. Diabetes has two

manifestations, type 1 and type 2. Both can be treated effectively – type 1 with injections and type 2 with tablets. There are strong drugs for TB, although some strains are sadly resistant to treatment.

Two other Health risks should be mentioned – cerebrovascular (i.e. strokes) and IHD (i.e. cholesterol build-up). I am not a medical guy, but I have a reason for mentioning all these risks. We can do so much to manage these risks – we need exercise to keep our weight down (managing diabetes). We can adapt our diets (managing both diabetes and our cholesterol levels, thus IHD). There are medications to manage hypertension – like taking one tablet of “baby aspirin” per day.

Some of us have already learned these tricks of longevity, and changed our behaviour. We use condoms, we don't drink and drive, we use the courts to settle disputes instead of escalating tensions through retaliation and violence.

So there are a few simple ways to change your behaviour to manage the new Covid risks too. Like washing your hands more frequently, social-distancing and wearing a mask to protect others.

The media hype can get confusing. One and the same pathogen – Covid-19 – can be described on CNN as “a plague of biblical proportions”, while on Fox News, they compare it to a common cold. This is unfortunate – it should not be understated or exaggerated.

On a personal note, I am 69 years of age and the fatality-rate based on age is much higher, as you get older. A high proportion of the death toll of half a million souls world-wide is older people – like me. Some countries pay lip service to “shielding” – telling older citizens to stay home. Keep your distance. My best advice for those who have to circulate is to stay outdoors as much as possible, in the sun and wind – where the virus cannot as easily survive and transmit. Lower your exposure. Stay away from crowds and to be “sharp, sharp” about doing whatever you have to do. Don't take your time, don't stand in queues - get in and out of shops smartly. Use the cash registers designated for the elderly and get out of there!

Your home, possibly a “granny flat” within your residence, and your own vehicle are your “bubble”. Stay inside that closed-circuit and TAKE CARE.

Western culture must re-think the way that it “warehouses” the elderly after they retire. Covid-19 has exposed the folly of this arrangement. It has to go. Just like we scrapped orphanages in favour of a better approach called adoption or fostering children, we have to find a new way forward. The answer is not to nationalize those facilities, taking them out of the private sector where the profit motive may have diminished the quality of care provision. The whole architecture has to change and the best bet is probably back-to-the-future with extended families taking care of all of their generations.