



## LIVING WITH COVID– WHAT DOES IT MEAN?



**Dr Peter Moss has been a consultant in infectious diseases since 1999. He has worked within the full range of infectious diseases, and was the Director of Infection Prevention and Control for more than 10 years. Since 2020 much of his time has been devoted to managing patients with COVID-19. Dr Moss will be issuing a series of bulletins to help inform the public of the medical background of COVID-19. These bulletins are aimed to help provide reassurance and advice to the community during the transition towards eventually ‘Living with COVID’.**

The phrase ‘Living with COVID’ seems to be everywhere at the moment. Many countries have adopted it as a slogan for the next stage of dealing with this new virus, and St Helena has joined the party. What do we actually mean by ‘Living with COVID’?

Perhaps first we should ask ‘what do we mean by COVID?’ as the names do cause some confusion.

Coronaviruses are a family of viruses, found mainly in bats and rodents, but some of which cause illness in humans. Four different types of coronavirus have been common in humans for hundreds of years, and are one of the many causes of coughs, colds, and ‘flu-like’ illness: we have been ‘living with’ these coronaviruses all our lives without most of us even knowing that they existed. A few coronaviruses have crossed from animals to humans more recently, and have tended to cause more problems.

**SARS CoV1-** jumped from bats to civet cats to humans in 2002, killing about 1000 people around the world: the virus seemed to have died out in humans in 2004.

**MERS-** crosses from bats to camels, and causes occasional infection in humans especially in the Middle East: it is highly dangerous and kills many of those who catch it but doesn’t spread easily.

**SARS CoV2-** is another coronavirus which has crossed the species barrier from bats to humans, probably via an animal called the pangolin. Unlike SARS CoV1 and MERS, SARS CoV2 has spread rapidly from person to person around the world, and infected hundreds of millions of people. The virus seems to like living in people, and is gradually adapting to be a true human virus: this means that it causes less harm to the host. The illness caused by SARS CoV2 is called COVID-19 (CoronaVirus Infectious Disease 2019), but the term COVID is often used for both the virus and the illness.

The SARS CoV2 virus keeps mutating and changing, and the type of virus that survives best becomes the main strain. Generally the virus that does best is one that is more infectious (so it passes from one person to another more easily), and less harmful (because people who are well and walking around are more likely to pass on the virus than people who are sick in bed). The strain of virus most common in South Africa and the UK at the moment is the most infectious and least harmful strain that we have seen so far: it is called Omicron BA4/BA5.

So back to ‘Living with COVID’. Most people get coughs and colds every year, and don’t really worry about what causes them: they either carry on as normal, or take a few days off with mild symptoms. These coughs and colds are caused by a variety of viruses including coronaviruses, rhinoviruses, and adenoviruses. We have ‘lived with’ these viruses all our lives. Every so often there is an outbreak of influenza (‘flu), caused by the influenza A or B virus. This causes a slightly worse illness, with fevers, headaches, and muscle pains, and unfortunately does kill some people each time it comes round. However we have also ‘lived with’ ‘flu all our lives.

When COVID first appeared we knew very little about it, and had no vaccine, so the first strains of the virus caused serious illness in some people who caught it. Now, two and a half years on, the virus has evolved to become much less harmful, and we have effective vaccines and treatments. COVID now generally causes less harm than a bad ‘flu outbreak, and for most people will be no worse than the usual seasonal coughs and colds. The only real difference is that because very few people on St Helena have ever come into contact with SARS CoV2 it will probably spread very quickly, and most people will catch it within a matter of weeks. (The vaccine doesn’t stop you from catching the virus, although it will prevent people getting ill, which then reduces the chance of passing the virus on). On the Falklands, most people on the island had had the virus within a few weeks of the first case (and no-one ended up needing hospital treatment). The virus will probably come back again next year, most likely in a less severe form, and over time it will just turn in to another one of the viruses that go around every year and we don’t really think about.

We will then all be ‘Living with COVID’ in just the same way as we ‘live with’ rhinovirus, adenovirus, and all the other minor infections that we take for granted.