

# Deaths with and from CV 19

The UK government has rightly worried about deaths from CV 19. It has used these concerns along with worries over hospital capacity to treat seriously ill CV 19 patients to drive its anti pandemic lock down policies. The government has repeatedly said it wishes to be data driven. This requires consistent and accurate data over time to help inform policy decisions

I first took up issues of data adequacy with the government on April 11 th 2020. I reiterated and enlarged my concerns on this site on April 26th, May 22nd, November 7th and at other times. I asked how the UK defined a death caused by Covid 19, how it handled deaths with Covid 19 where it was not the main cause of death, and what use it made of deaths attributed to or with CV 19 when there had been no test on a patient to establish they had the disease. We know from the public daily reporting that the UK has adopted a standard of notifying CV 19 linked to a death if the patient has had CV 19 during the 28 days prior to death whatever other health problems they also experienced.

Others have now taken this up. People have come forward to complain that their relatives did not think their family member died of CV 19 yet it appeared on the death certificate. Doctors have explained that in some cases mistakes were made, in some cases the death certificate correctly identified other causes of death but needed to cite the presence of CV 19 at some point during the last 28 days of life. These figures matter, as people make international comparisons without being able to adjust the figures for the differing criteria adopted to define a CV 19 death. If you are going to be data driven you need to understand what your data means, and understand any weaknesses or possible errors in its compilation.

Using the global published figures the UK comes out as below the countries with most cases per million people, but at the top of the lists of deaths in relation to case numbers. Assuming the high level of testing adopted in the UK has come up with a realistic view of the total number of cases, this leaves us with the need for an explanation of why alongside Belgium we have the relatively high death rate of 2.9% of all identified cases, compared to the USA at 1.79% and figures closer to 2% for many other advanced countries. It looks as if the UK has ascribed more deaths to CV 19 than comparable places. I do not want to argue that our treatments have been less effective, given the huge efforts contributed by UK medical science and NHS staff to the task.

I suggest the government sets some data specialists onto the task of auditing these figures and adjusting where necessary. It does not seem fair to the NHS to leave the world with the impression we had a higher death rate from this disease given the many queries of death attribution we are now seeing. As many of the people who were recorded as dying of CV 19 were over 80, they belong to the generation that is likely to have other medical conditions that could have been the cause of death.