

# EDITORIAL

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THE HINDU

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## Gearing up: On vaccines and public trust

**India starts on vaccination, the government must bolster public trust in the process**

India now has a firm date to roll out the biggest vaccination programme in its history. Prime Minister Narendra Modi has said that from January 16, after the Makar Sankranti and Pongal festivities, doctors, nurses and sanitation workers, who are part of the priority group, would begin getting the vaccine. India has approved two vaccines in emergency-use mode — Covishield by the Serum Institute of India, Pune, and Covaxin by Bharat Biotech Ltd. While it still is unclear who gets which vaccine, there are more doses of Covishield available at present than Covaxin, almost five to one, and it could take a few months before the 30 million prioritised get one of their doses. Others, those in the 50-plus age group and those with comorbidities, will have to wait much longer, especially in a situation where vaccines such as those by Pfizer and Moderna are not made available for import by the private sector.

However, the vaccination begins under a cloud. Covaxin belongs to a league of vaccines that has been approved without establishing its efficacy, namely, the extent to which vaccination protects from COVID-19. There have been differences among scientists such as on the best testing strategy, treatment, extent of infection, but none more divisive than on the approval of Covaxin. Several experts have made the case that the declining rate of infections and low relative mortality meant that India was not in as dire a state of emergency that required it to approve an untested vaccine when more clarity would likely have come by March. Covaxin is best kept as a backup in the event of a sudden surge of cases till its efficacy data are available and acceptable. Also, reports have emerged of trials in Bhopal where volunteers were seemingly under the impression that they were getting a protective shot when some were likely getting a placebo. They also complain of no medical follow-up when some developed symptoms such as fever, body pain and loss of appetite. The vaccine may eventually prove protective and the adverse symptoms reported, seen as part of the variety of the human body's response — there are 28,500 volunteers after all. However, a vaccine that evokes distrust is self-defeating. With childhood immunisation, India has proven that it has the infrastructural backbone to inoculate millions. The dry runs to test the Co-WIN management software have reportedly given authorities valuable feedback on perfecting the prospective rollout. However, this could be undone if people do not turn up, and worse, if vaccine hesitancy rises. The pandemic gave India an opportunity to examine its dispensation of health care. Along with improving access, the government must seriously examine the conduct of vaccine trials and work hard to bolster public trust in it, and monitor the vaccination process for adverse reactions.

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