Firstly, I would like to commend our previous Government for the strength, unity in message and consistent actions that were displayed as we faced a somewhat unknown and perceived unique threat in the face of this new virus. I genuinely feel the Irish people were united in the face of this threat under good stewardship. We were asked to 'Flatten the Curve' and do our bit to aide our frontline workers who were bravely fighting this poorly understood new enemy. All these people are heroes, there is no braver action in my view.

The Global response to this pandemic, aside from a few notable exceptions, was to as quickly as possible lock down our communities and our economies and flatten the curve, thus buying us time to deal with the sick and to continue the race for vaccines and therapies. This was an understandable and intuitive reaction and to some extent has been a success. However, Sweden, who were vilified for their approach, has had a very similar death rate to other countries despite enacting a lighter response to SARS-CoV-2 while largely leaving their economy, including schools, open. Sweden's science-based policy has allowed them to emerge from the pandemic with many sectors of its economy and public health intact. Like most countries in Europe, Sweden has little or no deaths or ICU admissions from Covid-19 in recent weeks, without requiring any of the measures imposed by the vast majority of European countries. This brings into question our response to this crisis, and whether or not we have made decisions grounded in the evidence.

As the Epidemic morphed into a Pandemic, data from China, Italy, Asia, and other European countries gave us a clearer picture of how this particular virus was behaving. This data informed us regarding important aspects of Sars-CoV-2, including transmission, immunity, ICU admission rates, mortality, seasonality, predisposing factors and much more. Professor Michael Levitt, Nobel prize winner for Chemistry in 2013 and many other experts in epidemiology, have been deciphering this data. Professor Levitt concluded that the curves produced by death rates show a steep, sharp rise followed by a long, slow tail – a Gompertz Curve. This has been the way countries have played out time after time. Another important point raised by Professor Levitt - the impact of Covid 19 in Europe is not nearly what people perceive. The excess mortality from Covid 19 is not very much greater than the excess mortality observed during the 2018 influenza season.

Professor Emeritus Beda M. Stadler, former director at The Institute of Immunology at the University of Bern, raises a crucial point on Sars-CoV-2 immunity. The virus is indeed new, however, it shares many structural properties with prior coronaviruses in the family. It is now clear through many publications over past months that our immune systems recognize these priorly present protein structures when exposed to Sars-CoV-2, leading to a very large extent of immunity in our unexposed population. He explains that that is why the mortality and ICU loading has collapsed across all of Europe. This is also why contact tracing of symptomatic Covid patients through their direct family members whom they share homes with, shows 70% or more never exhibit infection or symptoms. This illustrates Professor Stadler's point; the majority of people are already de facto immune, from cross-immunity to prior coronaviruses.

With regards to seasonality, Sars-CoV-2 appears to follow a seasonal pattern as described by Dr. Edward Hope-Simpson and fits very neatly with his work. Studying the impact of seasonal viruses over 50 years, Hope-Simpson illustrated that the shape of the curve depends heavily on what region of the World is involved. Still debated, the drivers of viral triggering include latitude, UV flux, human immune system cycles and humidity. In any case, this helps to explain how the virus has

spread in certain US states like New York (North Temperate region) versus Florida (North tropical) and why rising cases now in places like Melbourne and New Zealand are expected.

The impact as determined by all-cause mortality and ICU admissions is similar across Europe, essentially what you would expect for this time of year. This is despite rising cases in many regions. So, it begs the question, why the alarmist response? As any country scales up PCR testing, we will naturally see a rise in cases. This is to be expected due to immunity, cross reactivity and previous viral shedding. What we do not have is a corresponding impact in terms of ICU admission or mortality. Cases are on the rise, yet significant impact is not. What we have is what can be described as a "Casedemic". This is being driven by continued PCR testing, driving cases which will often be false positives or merely dead viral fragments in people who contracted the virus many weeks ago.

So why are we increasing restrictions and mandating mask use? Experts in Ireland and around the world have been on the fence about the use of masks since the beginning of this pandemic, as the empirical evidence pointed to very little benefit in viral transmission mitigation. In any case, given the reality described by the experts above, there is no possible scientific justification for mandating masks at the end of an epidemic. The CDC, in May 2020, compiled 14 randomized control trials in mask use and viral transmission. It concluded that masks were near-useless as a mitigation measure. Note that the WHO themselves have been careful to note that they are not instructing governments to implement mandatory masks. Thus, the implementation of mandatory masking has clearly become a politically driven endeavour.

The ever-looming threat of a second lockdown now confronts the Irish people - our society faces rolling lockdowns that will lead to missed cancer diagnoses, closure of schools, businesses destroyed, jobs lost, travel restricted, domestic violence, isolation and depression increased, and operations postponed or cancelled. It is important to remember, it is the poor and working class who will suffer the worst impacts from this. We are a long way from solving our health system and our housing crisis. Globally, this lockdown will drive millions into poverty. If we are to embark on a multi-year journey of economic depression, ruining young people's hopes and dreams of buying homes, expanding or opening businesses, travelling or even enjoying a normal college experience, at least let it be built on sound empirical evidence. It is time to think about a brighter future, and with the correct science-based thinking and brave political will, it can be realised.