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Response to Peter Berman's Commentary on "Consideration of Trade-offs Regarding COVID-19 Containment Measures in the United States: Implications for Canada," by Mayvis Rebeira and Eric Nauenberg

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A Response to a Commentary

Commentaries are reflection pieces prompted by a HRA or CHRA, and either provide background information or respond in some way to conclusions reached in a HRA or CHRA.

Special Issue: COVID-19 Pandemic Policies and Systems Reforms

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<https://doi.org/10.13162/hro-ors.v11i1.5622>.

We are grateful to Dr. Berman for raising important points when analyzing an economy-wide crisis like the COVID-19 pandemic.

We agree with Dr. Berman that COVID-19 had different behavioural responses from different groups; thus the best that can be done is to estimate average effects. To understand the impact by different groups would necessitate information that in these circumstances was unavailable. Further, these groups could have behaved differently between the pre- and post-vaccine eras. Though average effects do not take into account the possible wide distribution of the effectiveness of the containment strategies in different groups, we think they provide a reasonable source of evidence in a crisis situation where data is often sparse and the situation is dynamic.

In regard to Dr. Berman's two other points, we note that we nearly always produce ex-poste analyses to learn from our experiences. Many pieces have been written about the experiences of past pandemics including, most recently, the West African Ebola virus epidemic in the hopes that we may learn something the next time a pandemic arises. While it is true that no pandemic is exactly like another, we can still glean lessons from previous experiences, and if our hunch is correct, this will not be the last zoonotic virus that will emerge from East Asia or any other part of the world, given that practices with regard to laboratory security and the preparation of food have largely not changed. Efforts that have been made to estimate the impact of COVID-19 on the economy and society during the pandemic itself had ranged to up to \$16 trillion or 90% of the GDP in the US (Cutler 2020).

In addition, economic evidence regarding cost-effectiveness regarding health care matters is, in this regard, just as legitimate a metric to consider going forward as any other metric, as it makes up the panoply of evidence needed to make future decisions, even though it is not necessarily determinative of such decisions. This has been true for a number of decades, and we believe it will be true going forward.

REFERENCES

- Cutler DM, Summers LH. 2020. The COVID-19 pandemic and the \$16 trillion virus. *JAMA*, 324(15): 1495-1496. <https://doi:10.1001/jama.2020.19759>.