

17 Kildare St.,
Dublin 2.
10th May 2021

Mr Stephen Donnelly TD,
Minister for Health,
Department of Health,
Block 1, Miesian Plaza,
50 – 58 Lower Baggot Street,
Dublin 2.

Dear Mr Donnelly,

I am writing to you to express the serious concerns of the ISME National Council at the remarks of the Chief Medical Officer at a press conference on Friday evening, 7th May. Dr Holohan referred to *“a lot of claims”* about antigen testing, that could lead to *“inappropriate reassurance”* in a situation where a person could *“go into a supermarket and buy, for example, you know, a pound of sausages and charcoal for a barbecue and an antigen test and think, great...”*

On 8th May, Professor Philip Nolan tweeted in relation to the antigen tests being sold in a supermarket: *“Can I get some snake oil with that? ...These antigen tests will not keep you safe.”*

These attacks on antigen testing, verbalised to the press corps and on social media, are not grounded in science, and evidently reflect only the personal opinions of individual members of NPHEt.

The dissenting opinions to the Report of the COVID-19 Rapid Testing Group¹ published on 1st April also came from doctors in the HSE and NPHEt. It is noteworthy to ISME that these two individuals do not in our opinion appear to have the level of technical expertise enjoyed by their other colleagues in that group.

As you know, that group concluded that rapid antigen testing should be considered in community settings such as nursing homes and other long term care facilities, schools, universities, sports clubs, small and large private and public office workplaces, food processing plants, manufacturing facilities, prisons and shelters. The report referenced a manufacturing case study where workers arriving at their plant were tested, with approximately 600 tests per week being conducted. They identified five positive tests (all asymptomatic) in January, and all were confirmed following HSE testing. The benefits of such programs require no further explanation or justification to anyone with a modicum of common sense.

To date however, NPHEt has continued to reiterate only the (well-known) relative shortcomings of antigen testing, rather than the scientifically established advantages of widespread testing.

¹ <https://assets.gov.ie/129982/35f38622-e397-4468-96a9-4b499f85a2be.pdf>

As long ago as September 2020, the WHO acknowledged the relative strengths and weaknesses of rapid antigen testing,² stating *“Though these antigen detection RDTs (Ag-RDTs) are substantially less sensitive than NAAT, they offer the possibility of rapid, inexpensive and early detection of the most infectious COVID-19 cases in appropriate settings.”*

The Centre for Disease Control (CDC) in the US, in its latest general guidance note on screening³ summarises the relative advantages of PCR and rapid antigen testing in language easily comprehensible to laypersons as well as those in government.

The ECDC, in its latest technical report on antigen testing,⁴ summarized *“The use of rapid antigen detection tests (RADTs) and/or self-test RADTs in occupational settings can complement, but not replace, occupational safety and health measures and existing non-pharmaceutical interventions at the workplace aimed at preventing the introduction and spread of SARS-CoV-2.”*

ISME is not in a position to determine who among the current members of NPHEt would be clinically better qualified to sit on their equivalent teams in the WHO, CDC, or ECDC. However, we do not consider it unreasonable to expect that when members of NPHEt attempt to criticise or undermine the use of rapid antigen in appropriate settings, they would be capable of doing so citing scientifically informed opinion. To date, this has not been the case. If NPHEt is privy to scientific advice at variance with the guidance from the agencies above, it should publish it immediately.

A significant number of Irish people have died since ISME made its request to the Tánaiste on 9th December last to prioritise the rollout of rapid antigen testing in the workplace before the Christmas departure to their home countries of tens of thousands of non-national workers. How many of these lives could have been saved by a robust system of workplace antigen testing is unknown, but is likely to be non-trivial.

Ireland is thankfully exiting the disease phase of the Covid-19 pandemic, but has yet to suffer the post-pandemic surge in economic effects. Many employers and enterprises are adopting workplace antigen testing systems in order to protect their staff and their customers. The efficacy of these individual testing efforts is likely to be compromised by the absence of state support or guidance on antigen testing. Even with high levels of vaccine rollout in this country, the necessity for antigen testing in the workplace is likely to be inevitable into the medium term, especially when international travel fully reopens.

We ask you and your cabinet colleagues to consider, therefore, how much longer you can afford to indulge the cavalier press conference and social media musings of those members of NPHEt who have departed so radically and inexplicably from established scientific and public health guidance on antigen testing. Ireland no longer has the luxury of entertaining glib, flippant and scientifically ignorant ruminations of NPHEt members. We believe it would be prudent for your Department to ascertain why some members of NPHEt continue to exhibit such an animus to antigen testing in the face of overwhelming scientific evidence to the contrary; and we also ask your Department to

² <https://www.who.int/publications/i/item/antigen-detection-in-the-diagnosis-of-sars-cov-2-infection-using-rapid-immunoassays>

³ <https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>

⁴ <https://www.ecdc.europa.eu/en/publications-data/considerations-use-rapid-antigen-detection-including-self-tests-sars-cov-2>

consider how reliable are the advices of NPHET when they are so demonstrably wrong on the issue of rapid antigen testing.

Yours sincerely,



Neil McDonnell
Chief Executive

CC Tánaiste Leo Varadkar TD DETE
Minister of State Damien English TD DETE
Robert Watt, Secretary General, Department of Health
Dr Orlaigh Quinn, Secretary General DETE
Declan Hughes, Assistant Secretary General, DETE