

Transcript of Professor Mahendra Patel Clip

I started off as a community pharmacist having my own pharmacies and it was that that showed me the health inequalities within the different settings that I had the pharmacies in; one was in a highly concentrated ethnic minority setting, the other one was largely white and it was the disparity between the two in terms of access to services, that helped me to then go on to develop my PhD around inequalities in health and access to, particularly, pharmacy services.

I started teaching at the University of Bradford and I was working with NICE, I was working with the South Asian Health Foundation, we'd developed a tool kit with the British Heart Foundation.

I mean, it's those things that sort of made me think, sort of when Covid came, how am I going to reach out to these people?

I was approached to see if I'd be interested in supporting the work at the University of Oxford around developing treatment for Covid 19, for early stages of Covid. Not once they've gone into hospital, but it was to that early treatment of Covid, like an antibiotic. They were looking at what we can give so that help people from recovering early, stopping them from getting into hospital and even potentially dying as well really.

So, I had a sort of an interview with them that then they'd started their trials in 2020. They were just beginning the treatment trials through what we call the PRINCIPLE Trial which was using repurposed medicines for the early treatment of Covid 19 in people that was vulnerable and such as people with asthma, diabetes, people aged 50 and how can we stop them becoming ill and even being hospitalised?

It was important that they had somebody like me on their team to support recruitment in reaching out to those people that were more affected, particularly people from ethnic minority groups, marginalised communities, and disadvantaged communities up and down the country because of the reach of the work that I'd already done previously with the South Asian Health Foundation, with NICE, with the British Heart Foundation etc.

They started off in March and in September, they appointed me as their national pharmacy and inclusion and diversity lead for the principal trial. This was a national and urgent public health trial that we wanted to get everybody behind.

If you look at the north west – Bolton on a number of occasions had the highest Covid case rates, particularly with the new variant coming through as well and I approached the University of Bolton and the vice chancellor there who then gave me the green light to use their international students where we developed resources and materials in different languages and they actually went out, with the restrictions of Covid and keeping distance as well, to promote the trials in different languages but also in areas of very high footfall like shopping malls and market places.

I'd mobilised support through the largest pharmacy chains in the UK – the Boots, the Lloyds, the Wells pharmacies, Superdrug etc., and they were putting posters out through their pharmacies, and I got Mr Motivator to do videos with him promoting the trial and encouraging people to get on board. I went on to Kanshi TV which had about 60,000 viewers from a Punjabi audience, and I actually went down to the studios in Birmingham to talk about Covid and the treatment trials in Punjabi. The average 61 day traffic that we had at the trials unit increased by threefold following those announcements and that was the impact and the influence that faith groups have and all this learning then became, for the PRINCIPLE Trial we found that the, you know, using antibiotics made no difference to the early treatment of Covid 19 symptoms for primary treatment so that also

helped and that was published in medical journals – Lancet – and also became practise guidance for other countries such as India.

As well really and we also found that the use of inhalant budesonide which we use in treatment of COPD and asthma etc., is people are very familiar with that, very cheaply available, regularly available that would also help people recover earlier than normal really.