

The start of SA's deadly Covid spiral

Madeleine van Wyk's death a year ago brought the reality of the virus home

By NIVASHNI NAIR

● Under normal circumstances, the national government would not have publicly announced the death of a 48-year-old Cape Town woman.

But within hours of taking her last breath on March 27 last year, almost every South African knew Madeleine van Wyk's name, and a photograph of her, with the wind in her hair and a huge smile, made its way onto social media.

Van Wyk, a financial manager, was the first South African to die from Covid-19, bringing home the reality of the pandemic which struck SA a year ago this week when the country's first coronavirus infection was confirmed.

Ahead of the first anniversary of her death, her friend of 20 years, Debra Badenhorst, said the only thing that had carried her through the past year was that Van Wyk – “a loving wife, a devoted mother to her son and stepdaughters, as well as a special, much-loved daughter and sister” – had unintentionally become “the face of Covid-19” in SA.

“If there's any ‘benefit’ to be found in losing her, it's that it made people sit up and take notice of just how deadly Covid-19 is,” Badenhorst said. “If Covid-19 could take someone like Madeleine, who had access to great health care, what chance was there for

others? In some way, her death was a wake-up call that made many people more aware, supportive and caring of others.”

Badenhorst's last conversation with Van Wyk was the week before she died when her friend begged her not to fly to Cape Town as the virus spread countrywide.

But they arranged to meet when Badenhorst arrived in the city, and Van Wyk fell ill a few days later. On March 27, Badenhorst awoke to the devastating message from Van Wyk's husband.

Within days, the death toll climbed to five and by the end of April 2020, 103 South Africans had died, among them casualties of the country's first outbreak at Durban's St Augustine's Hospital.

For internationally acclaimed scientist and chair of the ministerial advisory committee (MAC) professor Salim Abdool Karim, the outbreak was a “significant learning opportunity about the pandemic”.

“Very early on in this epidemic, I was asked to go to St Augustine's to unravel this scenario that was unfolding from ‘patient zero’. In a period of uncertainty I learnt a lot about this virus and its initial outbreak. I told them there is no mojo that is going to protect us. I didn't sugar-coat it in any way, and I mapped out an eight-stage response.”

This stringent protocol at hospitals, coupled with the country's hard lockdown under levels 5 and 4, is believed to have slowed the infection rate. By October the death toll had risen to 16,667, but with the holiday season and super-spreader events such as the matric Rage, the second wave arrived by December and a new variant, 501Y.V2, was discovered – and the death toll increased to 28,469.

In the first month of 2021, the number of



Lindiwe Ngoni gets her Covid vaccine shot from fellow nursing sister Heidi Fourie at East London's Frere Hospital, the third site in the Eastern Cape to roll out vaccinations for frontline health workers. Picture: Michael Pinyana

Last message to a friend

“Yes, this is horrible. Can't believe we are in this situation ... with all the advances made in the medical sciences, there is no vaccine. I know you will be fine and you will get home and stay healthy. Be safe.” — One of Madeleine van Wyk's final text messages to a friend.

50,462

Number of Covid-19 deaths recorded in SA as at Friday this week

March 27

Date of the first Covid-19 death in SA

for three months ramped up.”

He said what was important now in keeping people alive was understanding who was most at risk of severe illness, “which we now know are the aged and those with comorbidities”. “When we first started treating seriously ill patients we ventilated them, but very early on we learnt that this was not a good idea, with better ways of treating them being through continuous positive airways pressure systems and high-flow nasal oxygen treatment.”

He said in terms of medication he was struck by how little progress SA had made on treatment, compared to what it has made around vaccines and diagnostics. “We need to be preparing now for the next epidemic. This has shown that government needs an epidemic response unit so we know exactly what technical capacity the country has to deal with future pandemics.” – *Additional reporting by Graeme Hosken*