

GENETICS, NOTEWORTHY

# WHY THE “IMMUNITY DEBT” NARRATIVE ULTIMATELY COLLAPSED

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There was an interesting Bluesky Post with this title



**Nick Tsergas**  @nicktsergas.ca · 7 Std.

Why the “immunity debt” narrative ultimately collapsed:

Over the past few months, the conversation has moved toward the conclusion the evidence has been pointing to for years.

Since 2022, immunity debt offered an easy explanation for the unusual patterns of illness we kept seeing.

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It arose through a convergence of data signals across epidemiology, immunology, virology, pediatrics, and clinical practice. Taken as a whole, the evidence breaks the old frame.

The real lesson here has little to do with COVID.

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It has everything to do with how modern societies handle complexity.

We are extraordinarily good at generating data and surprisingly bad at synthesizing it across domains. This forms the vacuum where false narratives take root, calcify, and finally break.

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<https://bsky.app/profile/nicktsergas.ca/post/3m7h36uha4k2e>

I agree. Likewise [Drosten said in 2022](#) that someone who believes that they can train their immune system through an infection should, by the same logic, also believe that “by eating a steak they can train their digestion”. It was as stupid as the hygiene hypothesis.

In reality, post-pandemic seasons returned to historical volatility rather than showing sustained amplification. RSV and influenza displayed timing shifts and one-off rebounds, but no long-term increase in total burden.

Nations with long and strict NPIs (like New Zealand, Taiwan) should have shown the largest “payback.” By 2025 this clearly did not occur. Conversely, countries with minimal restrictions (Sweden, GB) still experienced unusual RSV and influenza patterns, demonstrating the hypothesis being wrong, but [taking a huge death toll](#).

Memory B & T cells persist; mucosal training is complex but not “use-it-or-lose-it.” The hypothesis overestimated the role of routine pathogen turnover and underestimated homeostatic immune regulation.

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