

COVID-19: Back to Basics

Last year, I wrote two opinion articles about COVID-19 titled **“Reopening: From flattening the curve to controlling COVID-19”** (May 2020) and **“To Focus on the Vulnerable, not in the Number of Infected Persons”** (July 2020).

In those writings, I expressed my concern about excessive confinement measures applied by governments all over the world due to the emergence of the COVID-19 pandemic as well as the need to pay special attention to the number of people with preexisting medical conditions instead of the media fixation with the daily number of infected persons, which has persisted until today.

Since the coronavirus was declared a pandemic by the World Health Organization (WHO) a year and five months ago, media, governments, international organizations, medical experts and institutions as well as people everywhere have already accumulated a great deal of knowledge and experience about the COVID-19.

In fact, one year and five months seems to be a reasonable period of time to assess the actual status of the pandemic and start our mental transition to the state of normalcy, that is, to retake our economic and social life.

Once media, governments, medical experts and institutions get out of their mental fixation with COVID-19, then millions of people suffering from other serious diseases will recover their right to receive the proper medical attention. Actually, every year, a larger number of people around the world die of heart disease and stroke compared with the number of deaths caused by COVID-19 in the past 18 months (around 4.5 million). Just in 2019, the WHO reported over 8 million deaths caused by ischemic heart disease; however, there has not been a declaration of emergency in regard to this illness. In addition, I don't see governments, media, medical experts and institutions declaring any emergency on the approximately 9 million people who die of hunger annually, including over 5 million children.

Therefore, I think it is about time to come to terms with the fact that COVID-19 is already an endemic disease. In fact, this new coronavirus has become a member of the family of respiratory infectious diseases just like flu or cold and will be appearing seasonally. So, people with a weak or compromised immune system will have to get vaccinated every year to avoid fall seriously ill or die. Besides, we have to bear in mind that viruses mutate rendering vaccines less effective as is happening with the current case of the Delta variant.

Indeed, with the new Delta variant of COVID-19, various governments are evaluating or recommending the need for a third shot to boost efficacy of available vaccines due to many cases of people reinfected despite being vaccinated. In fact, Israel a country with one of the highest rate of vaccination in the world is experiencing reinfection of COVID-19 and has authorized a third shot, while the US government will start the third vaccination by September due to through

infections, despite the fact that the WHO has indicated it is too premature to implement a third shot when billions of people have not yet received one or two doses or none.

I firmly believe in science as it teaches us the method to study, measure, test, replicate, and verify any phenomenon to create principles or laws that explain the natural functioning of our world. But science, including medical science, is not dogma and may be subject to change over time when new information is available on any phenomenon. Indeed, medical experts are human beings who can err in their judgements or can be influenced by money or politics, while international institutions are also subjected to politics, money (donations for medical research) and agendas with divergent interests.

It is quite evident that throughout the pandemic, we have frequently observed medical experts and institutions issuing contradictory opinions from the WHO to the Center for Disease Control and Prevention (CDC), to the National Institutes of Health (NIHs) in regard to COVID-19.

Many of you may remember the issue if COVID-19 was a transmissible disease from human to human or if people who were not sick had to wear masks, despite the fact that since early January 2020, the Chinese authorities had identified the virus as novel coronavirus. It meant that this virus came from the same viral family as SARS, MERS, COLD, FLU, all of them infectious and transmissible diseases with similar symptoms, and therefore, requiring the use of masks to prevent infection. And, most recently, there were confusing signals from medical experts in the US if reinfected people should wear masks or not.

Furthermore, medical experts and pharmaceutical companies have been frantically working on vaccines to tackle COVID-19 and achieve herd immunity, but at the same time, they also understand that there is always a possibility of new virus mutations that could reduce the efficacy of those vaccines. Indeed, the WHO has recorded several variants of concern and variants of interest depending on the level of contagion, being the Delta variant the most contagious so far, reinfected vaccinated people, and making difficult to achieve herd immunity.

Last year, around May, I remember Dr. Mike Ryan, executive director of WHO's health emergencies programs saying that "the coronavirus may never go away and may just join the mix of viruses that kill people around the world every year". I believe these words summarize the whole ordeal of the COVID-19 and must trigger a mindset to leave the pandemic behind.

Many will agree that confinement measures are no longer an acceptable policy option. People everywhere are very exhausted and unwilling to follow governments orders. When responding to a question on implementing tougher restrictive measures in Japan, Mr. Yasutoshi Nishimura, minister in charge of the coronavirus response said, "the people are growing used to coronavirus and are weary of self-restraint."

We all know these confinement measures have left many millions of people in a state of socio-economic vulnerability. Millions of parents have lost their jobs and their children have been deprived of a normal education and life. There are millions of bankruptcies everywhere, which

have caused a worrisome labor pandemic, and certainly governments are facing or about to face the political consequences of these confinement measures.

In a nutshell, it is time to get back to basics. In this regard, governments first must stop the policy of confinement and mobility restrictions, and the media must stop its fixation with the number of infected people or new variants. New virus mutations will continue, and new vaccines will be developed to cope with those new strains, just like the vaccines available to tackle the four types of influenza (A,B,C, and D) every year.

Remember, COVID-19 is cousin of the flu, with the difference that COVID-19 is more contagious and takes longer time to show the symptoms (2-14 days), making it difficult to kill the virus in the cradle.

Second, Governments, medical experts and media must keep the focus on vulnerable people, that is, individuals (young, adult and elderly) with weak or compromised immune system. As indicated by the WHO, “Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness”.

The data shows that approximately 80 percent of infected people experience mild symptoms or are asymptomatic, 15% are gravely infected, requiring oxygen and 5% are critically infected requiring ventilation and with high probability of passing away. As I said, just in one year (2019), more than 8 million people died of ischemic heart disease compared with the 4.5 million deaths caused by COVID-19 in one year and eight months.

Third, wearing masks and frequent hand washing are the first line of defense against COVID-19. Everyone at home, school, workplace or any other social space must follow this basic protocol especially now that available vaccines are losing efficacy before the Delta variant. I believe that in Japan, thanks to strong compliance of the population on mask wearing and frequent hand washing, the number of COVID-19 death remains quite low, around 16,000, despite having over 35 million elderly citizens in a population of 126 million people. Certainly, healthy eating habits have also contributed to build a good immune system in the Japanese population.

Four, antiviral medication must be delivered to infected people who stay home or hotels with mild symptoms as well as their families, previous consultation with doctors. This will help to kill the virus in the cradle and avoid overloading hospitals. Interestingly, in Japan very recently (I would say quite late), the prefectural government of Kanagawa approved the prescription of pain relievers and cough medicine for people in self-isolation due to COVID-19. They should also include the Japanese-made drug Avigan, which is already being applied and seem to be working well in other countries. I am sure the example of Kanagawa will be followed by the rest of the country in view of the dramatic increase of COVID-19 cases.

In the case of Panama, health authorities have prescribed several remedies for self-isolating patients, including Hydroxychloroquine and Ivermectin, which are not recommended by the US Federal Drug Administration (FDA) and the WHO. However, the number of COVID-19 cases decreased significantly among the population and before vaccines were deployed. Perhaps, 10 or

20 years later, when “passions” that have permeated the COVID-19 drama no longer polarizes people’s minds, we will find out what drugs were really adequate for treatment of this malaise.

Fifth, we now have vaccines that have been developed at “warp speed”, despite the fact that any serious development of vaccines takes years to assert their efficacy and safety due to the evolving nature of viruses and to the complex nature of every human body. And, as mentioned above, current vaccines are rendering less effective against the new Delta variant of COVID-19.

However, I believe in vaccines, even if they are not as strong as they were promised, but I am sure they will reinforce those people with compromised or weak immune systems, who truly need them. They will help to send less people to hospitals and save lives, just as I believe that antiviral drugs can kill the virus in the cradle if taken at an early stage (despite and against the official expert message).

I also believe governments must follow a careful approach to vaccinations, avoiding the temptation of forcing citizens to get vaccinated. If COVID-19 statistics would have shown the opposite, that is to say, that 80% of population are dying, 15% are at risk of dying and 5% would survive, I am sure most people would rush to get vaccinated. Again, take a look at the flu, which is a seasonal illness and people get vaccinated without being mandatory.

Sixth, after 18 months, hospitals must be better equipped to deal with new waves of COVID-19, including basic protection for front-line health workers and first responders. Surprisingly, in Japan, the hospital infrastructure seems to be on the brink of collapse due to a fifth wave of coronavirus, aggravated by the Delta variant. In this regard, Hiroyuki Morita, a medical journalist and practicing doctor, explained the situation to the Japan Times in the following terms: “The strain on the medical system is caused by a problem with its design and policy. Most of the hospital and clinics in Japan are privately operated, and it’s difficult for the whole system to work together strategically.” The Japanese medical system is also affected by a shortage of health workers.

In Panama, the medical system was severely impacted last year as the pandemic unfolded; however, additional facilities were assembled to cope with the avalanche of COVID-19 patients, so now the country is better prepared even as the Delta variant has already been detected in Panama. The government also reinforced medical staff by hiring foreign doctor and nurses.

Seventh, fighting a pandemic is not an exclusive domain of health authorities. As Fareed Zakaria, a CNN political analyst pointed out, “war is a very delicate matter to be left only to generals”. Fighting COVID-19 or any other pandemic requires an interdisciplinary effort from several government agencies led by the President, Prime Minister or Head of State. This interaction is necessary to maintain a balance between appropriate health policies to combat COVID-19 and the socio-economic health of the country. I have observed this dynamic in the Japanese government where the Prime Minister appointed a minister in charge of the pandemic (different from the minister of health) to coordinate all government efforts. This intergovernmental dynamics has avoided harmful confinements or lockdowns and kept the economy moving forward, projecting a GDP growth of 3.8% and an unemployment rate around 3% for 2021.

In Panama, on the contrary, the President appointed a super minister of health to formulate anti-COVID-19 policies, which resulted in a prolonged lockdown last year and a short one in January this year as well as other restrictive measures that have hardly hit the economy. Although international institutions estimate an economic growth around 9-12% in 2021, the reality is that Panama started the first quarter of this year with -8.5% GDP, and it is estimated that unemployment will remain in the two-digits zone. Therefore, it is about time for the President to assume his leadership and present an integral plan for economic revival of the country with the participation of productive forces of Panama.

In my view, the final solution for the COVID-19 drama will be a mix of vaccination with an application of antiviral drugs delivered to patients at an early stage. As the US government has approved a 3 billion dollars strategy to develop antiviral drugs for COVID-19 and other viruses with pandemic potential, it is very probable that next year we will find more effective drugs to tackle this illness.

We should all remember that the Spanish flu lasted over two years between March 1918 and April 1920 taking the lives of over 25-50 million people in a time when we did not have the medical advances of nowadays. If governments, medical experts and media continue prolonging this ordeal beyond this year, I am afraid there will be a lot of instability and social unrest in every corner of this planet.

I believe that this pandemic is just a symptom of a larger illness affecting our natural habitat, our planet. At the current pace, if we do not stop harmful practices that contaminate our planet atmosphere, oceans and landmass, the COVID-19 pandemic will become a quickly forgone historical event.

I just want to conclude this writing by reiterating my deepest respect for all health workers, those in the front lines, who have risked their lives and have perished to treat people infected with COVID-19. They are true heroes and will be remembered for healing and saving the lives of their brothers and sisters.

Dr. Ritter Diaz
International Consultant
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