IS THE CORONAVIRUS CRISIS OVER? GAPS IN HEALTHCARE AND POLITICS

¿SE ACABA LA CRISIS DEL CORONAVIRUS? CARENCIAS EN LA SANIDAD Y EN LA POLÍTICA

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The coronavirus crisis we are suffering globally should soon be over. As of this writing (4/17/2020), there have been 150,000 deaths accounted for due to this cause and almost one million confirmed cases worldwide.

Due to the lack of diagnostic testing and health politics to carry out analysis, mainly to those who are admitted to hospitals with symptoms, we still do not know the actual number of affected individuals, but it must be much higher than reported cases. The authors themselves have affected family members, even in Intensive Care Units (ICU). The healthcare and political authorities continue to say that the worst is yet to come. And certainly, very important, that we all stay at home. Once the national state of emergency is declared by governments, physical distancing compliance should be taken as an obligation for all^(1,2).

The fake news that invade social media, along with misconceptions as to who should wear a mask in public and regarding operational measures, and in the light of mutant official versions, all of these should serve to enlighten us about what measures to take when there is an increase in demand for hospital beds, and avoid us from slipping down a fraudulent slide⁽³⁾. For we are already aware that we are exposed to video, internet, and a laid-back and joking communication that steals our privacy and generates a crisis of anxiety leading to the disappearance of health. Or is it that we do not consider health to be the most precious asset?

It is indisputable that the healthcare systems have been overflowing hundreds of patients lying on stretchers in hospital hallways; ICUs are saturated and patients are dying due to lack of access. Potentially infected patients with suggestive clinical signs are not receiving diagnostic testing. There is a lack of sufficient respirators in hospitals. Hotels have been adapted to transform into hospitals. The lack of physicians has led to the hiring of recently graduated doctors without a specialty; and of retired physicians that have joined as support work. There is a lack of specialized physicians adequate for the needs of coronavirus patients. The lack of materials and infrastructure, and human resources has been resolved through improvisation. The government authorities justify their ineffectiveness to the "exceptional nature" of this situation, and the "malignancy" of the coronavirus. Lastly, this mess has brought to light the gaps facing the painful consequences of the pandemic⁽¹⁾.

In our opinion, although the number of deaths is unfortunate, this situation should not be categorized as intractable in relative numbers. There are thousands of critically ill patients in affected countries. However, every year we evidence healthcare center collapses during winter season mainly due to the common cold and respiratory viruses, and we don't learn from experience and structural changes are not established in the health system to properly address the viral epidemics we encounter every year. Our impression, regarding Spain, is that it could be the country with the greatest number of deaths from coronavirus, if we take into account its population, and, certainly, we have already surpassed China in absolute numbers^(1,3).

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All of this occurs at a time of great uncertainty over how the epidemic will evolve in our country in view of the Italian experience. In light of this scenario, we all ask ourselves what the coronavirus crisis will be like in Spain in the middle of August, which is vacation season for many European tourists and summer vacation for the majority of Spaniards. Epidemiologic and bioclimatic pathogen studies, like the common cold and influenza virus, have shown marked seasonal incidence variations. In our environment, it is much more common in winter than summer, and frequently cause the collapse of healthcare systems which often require back up, especially during the months of December and January. The vast majority of respiratory virus epidemics, similar to coronavirus, are very infrequent in the month of August⁽²⁾.

However, let's ask ourselves, what will happen if a viral regrowth occurs during the summer? Based on the data we have, we cannot ensure that the COVID19 is a seasonal viral infection and we do not even know if having had it confers immunity. There are many unanswered questions, and the politicians should not underestimate the possibility of a coronavirus resurgence during the summer months. Can we expect to have better prepared hospitals? Will the medical professionals count on having better weapons, at least to protect themselves, and be able to offer service in the face of a hypothetical demand increase?

The circumstances we are currently facing, in which the virus will not be stopped under the climatic conditions in the summer heat, because, as we suppose, the virus can potentially re-infect, can cause a collapse in the healthcare system services, if we include the worldwide tourist population that visit us. This is, without a doubt, a dangerous possibility that should not be ignored; it is to say, that given this we must ensure our weapons and must not

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2. COVID-19 Resource Centre [Internet]. [citado 17 de abril de 2020]. Disponible en: https://www.thelancet.com/coronavirus lower our guard, while waiting for the follow up results of serious studies. Scientific studies that relay the management of a state of emergency and that provide short term and long-term observational results, agreeing over which is the most appropriate way to prevail in the acute phase of the pandemic⁽²⁾.

And when we refer to the best way to fight the disease, confinement should not be the only prescription. Hopefully we won't need to have another healthcare state of emergency; it would be preferable to come out ahead from any contingency and not have to console ourselves with an ecumenical act of faith and love that, in our consideration, would have to metamorphose itself into quality healthcare and well equipped that seeks to first protect those that take care of us. It is a labor for all of us. Let's come together, given that the contingency we face does not allow us to fall captive to partisan interests. A nation should not be placed under the weaknesses of different political persuasions when facing an extreme condition. It is time to pull together and understand in a clear, clean and lively form, including on the basis of discrepancy, the citizens' reasons. It is a moral and political duty, for the health of the entire country, because it naturally is linked to their obligations.

Contrary to what it may seem, we intend to send a message of optimism which we all need. We can hope that strict contention methods stop the propagation of the epidemic and that in a few months we may have a more conducive and favorable outlook that reduces the number of new infections. All the while, waiting for time to pass and that an effective treatment and/ or vaccine appear as soon as possible for this global pandemic. Furthermore, politicians should set aside their interests from a biased decision-making axis when it refers to the general interest of the country and the wellbeing of its citizens.

3. Orientaciones para el público [Internet]. [citado 17 de abril de 2020]. Disponible en: https://www.who.int/es/emergencies/diseases/novelcoronavirus-2019/advice-for-public

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