

COVID-19 Pandemic: Critical Actions Needed

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Strategies for managing COVID-19, SARS CoV-2 have been deficient, with the variation in the emergence of new cases still being reported in Pakistan. There has been a positive response to the vaccination program for controlling the spread of the Covid-19 pandemic. Critical actions are needed as the COVID-19 pandemic continues. Hence there is a lack of validated treatments, and therapeutic, clinical practice guidelines and policy measures for proper management are the main stays, high-quality, evidence-based management for enhancing patient care for application of therapeutic interventions are something which should be established soon¹.

Critical actions are taken to decrease the transmission and exposure of Covid-19, by guiding to use an appropriate face mask, hands washing and using sanitization for protection, in the general community, protecting the vulnerable by vaccines and specialized Personal Protective Equipment's (PPE's), encountering disinformation, accelerating the reasonable entrance to new COVID-19 tools including vaccines, diagnostics and therapeutics for prophylactics. Empowering the communities to lead or be part of the response decision-making process, easing the restrictions to social gatherings, so that fall in hospitalization and mortality rates to occur, evidence-based guidelines for antibacterial therapy, nutritional recommendations during quarantine, different social-distancing scenarios, and sug-

gestions for dealing with the threatening challenges for both the health and economy of populations, proposing strategies to control the spread of COVID-19.

Other measures include how social and community engagement were dealt with the previous epidemics², media exposure, communicational sources, institutional trust, and incentives as effective motivators for raising positive attitudes pertaining to enormous influence for the public towards having or not having the vaccination. However, vaccination has been a strategic factor for reducing the transmission of the pandemic.

The SARS-CoV-2 alpha variant was discovered first in the UK, beta variant in South Africa, gamma variant in Brazil, and delta variant in India. Initially, priority was given to those with the highest risk due to the restricted availability of vaccines. At the same time, mutations of the Covid-19 called delta were discovered after mid-2021 causing increased infections though the vaccine effectiveness was retained. At the end of 2021, another variant of omicron was detected in Africa. However, the disease severity was noted as highest in unvaccinated people, and sufficient protection against the disease in vaccinated people³ suggests keeping focused on the vaccine strategies to control and get rid of the pandemic.

All over the world, two types of tests are used to diagnose and screen Covid-19: the PCR (polymerase chain reaction) that detects virus genetic material and antigen test detect proteins present on the virus's surface, and antibody titres for assessing immunity status of individuals in pandemic⁴.

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The PPEs^{3w}, i.e., masks, gloves, hazmat suits, and hygiene measures, are effective. However, temperature screening might not be reliable⁵. Furthermore, more suitable arrangements are needed to be implemented to stay in a hotel for quarantine before entering another country⁶.

The lesson learned from the Covid-19 pandemic is that the management of successful public health policies requires an exemplary comprehensive, easily accessible testing system and an organized surveillance system for contact tracing. A well-organized and coordinated public health system provides protection and awareness of the disease knowledge and encourages research for the management of the upcoming situation to become helpful in governmental communication and management. Furthermore, a vaccine booster of the disease provides imitative immunity and more robust protection against delta and omicron. Even incomplete vaccination revealed effective rather than non-vaccinated individuals against the disease. Protection against re-infection of SARS-CoV-2 was found to be heightened after having one dose of various Covid-19 vaccines³.

A restricted, controlled and limited supply of vaccine stimulates SARS-CoV-2 with the appearance of mutated delta and omicron variants that is more infectious and harmful. Hence, there should not be any doubt about the importance of the access of vaccines globally and with global equity for the health of all.

With the emergence of Delta and Omicron variants, there must be free access to vaccination for all; after all, herd immunity is our only solution to ending this pandemic.

References

1. Dhivagaran T, Abbas U, Butt F, Arunasalam L, Chang O. Critical appraisal of clinical practice guidelines for the management of COVID-19: protocol for a systematic review. *Syst Rev*. 2021;10:317. [DOI: 10.1186/s13643-021-01871-7].
2. Gilmore B, Ndejjo R, Tchetchia A, de Claro V, Mago E, Diallo AA, Lopes C, Bhattacharyya S. Community engagement for COVID-19 prevention and control: a rapid evidence synthesis. *BMJ Glob Health*. 2020;5:e003188. [DOI: 10.1136/bmjgh-2020-003188].
3. McIntyre PB, Aggarwal R, Jani I, Jawad J, Kochhar S, MacDonald N, Madhi SA, Mohsni E, Mulholland K, Neuzil KM, Nohynek H, Olayinka F, Pitisuttithum P, Pollard AJ, Cravioto A. COVID-19 vaccine strategies must focus on severe disease and global equity. *Lancet*. 2021;16:S0140-6736-02835-X. [DOI: 10.1016/S0140-6736(21)02835-X].
4. Peeling RW, Heymann DL, Teo YY, Garcia PJ. Diagnostics for COVID-19: moving from pandemic response to control. *Lancet*. 2021;20:S0140-67361. [DOI: 10.1016/S0140-6736(21)02346-1].
5. Bielecki M, Patel D, Hinkelbein J, Komorowski M, Kester J, Ebrahim S, Rodriguez-Morales AJ, Memish ZA, Schlagenhauf P. Air travel and COVID-19 prevention in the pandemic and peri-pandemic period: A narrative review. *Travel Med Infect Dis*. 2021 ;39:101915. [DOI: 10.1016/j.tmaid.2020.101915].
6. Williams J, Gilbert G, Dawson A, Kaldor J, Hendrickx D, Haire B. Uncertainty and agency in COVID-19 hotel quarantine in Australia. *SSM Qual Res Health*. 2022 ;2:100034. [DOI: 10.1016/j.ssmqr.2021.100034].