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COVID-19: PUBLIC HEALTH EMERGENCY OF INTERNATIONAL CONCERN TO PANDEMIC

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ABSTRACT

Coronavirus disease (COVID-19) is an infectious disease caused by novel virus Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). Various modes of spread of this disease include respiratory droplets, physical contact, and contact with surface and fomites. Worldwide efforts are made to mitigate spread of COVID-19 disease and reduce morbidity and mortality from severe acute respiratory syndrome Corona virus 2. Entire world is thriving amid COVID-19 and the commonest question in everyone's mind is "COVID-19 pandemic could have been avoided?" And secondly "has the World health organization (WHO) leadership failed?" A pandemic needs to be contained globally, including in the poor countries that depend on the WHO. The WHO is the only global organization whose budget and infrastructure are suitable for this. WHO can no more shirk responsibility and therefore it needs to be restructured, and should be led by health professionals.. The main purpose of a PHEIC declaration is to intervene timely based on proof and liquidate funding as well as control disease impact by enforcing preventive measures of emerging and re-emerging disease risks. After COVID-19 pandemic, IHR reform must be done at the earliest to make reactions to novel infections rapid and effective.

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INTRODUCTION

Coronavirus disease (COVID-19) is an infectious disease caused by novel virus Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2). Various modes of spread of this disease include respiratory droplets, physical contact, and contact with surface and fomites. Worldwide efforts are made to mitigate spread of COVID-19 disease and reduce morbidity and mortality from severe acute respiratory syndrome Corona virus 2. As of 20 May 2020 more than 3, 23,000 have died from COVID-19 and various studies show that millions will die in future. (1,2) Worldwide governments are managing COVID-19 pandemic at all the levels and policy makers are making guidelines for health care workers and general public (3).

Entire world is thriving amid COVID-19 and the commonest question in everyone's mind is "COVID-19 pandemic could have been avoided?" And secondly "has the World health organization (WHO) leadership failed?"

Public Health Emergency of International Concern (PHEIC) is defined as "an extraordinary event that may constitute a public health risk to other countries through international spread of disease and may require an international coordinated response."(4)

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The purpose of the declaration is to focus international attention on acute public health risks that "require coordinated mobilisation of extraordinary resources by the international community" for prevention and response.(4)The entire process of WHO deciding whether to declare a PHEIC under the International Health Regulations (IHR) has been criticised worldwide. In past also, during Ebola outbreak in west Africa there was four months delay by WHO before declaring PHEIC. (5) The Democratic Republic of the Congo, notified WHO of the outbreak on Aug 1, 2018, but WHO did four Emergency Committee meetings and stated that "the cluster of cases in Uganda is not unpredicted".(6) A PHEIC was finally declared at the fourth Emergency Committee meeting on July 17, 2019 (2501 cases and 1668 deaths), almost a year after initial notification. The IHR (4) require only a high potential of spread under consideration, whose criteria was already met in second meeting. (7) Worldwide Emergency Committee faced criticism as the process lacked transparency and was full of political interference. (8) The COVID-19 outbreak reported to WHO on Dec 31, 2019 shows that nothing has changed. Director-General Dr Tedros Adhanom Ghebreyesus concluded that the outbreak was "an emergency in China, but it had not yet become a global health emergency".(9) Again, the process appeared politically influenced than scientific, as a Lancet article described Ebola in Congo (10) By the time the Emergency Committee declared a PHEIC for COVID-19 on Jan 30, 2020, 7736 cases and 179 deaths had been confirmed in mainland China, with 107 cases confirmed in 21 other countries. Delays in declaring a PHEIC could have disastrous effects, giving a false sense of security worldwide, making countries unaware of the emergency leading to dreaded consequences since nations are not prepared for any response.

COVID-19 Pandemic, Politics and Failure of World Health Organisation

The WHO failed because it is not autonomous in certain ways. Instead, it's subject to the urges of the nations that fund it and choose its boss. In July 2017, China supported well its current leadership. Restructuring the WHO is crucial, because we need well-functioning global health institutions. On 14 Jan 2020, WHO stated, that "preliminary investigations conducted by the Chinese authorities have found no clear evidence of human to human transmission of the novel corona virus identified in Wuhan, China" which is not true. We can check data in places where COVID-19 was successfully controlled -Taiwan and Hong Kong. With dense populations and close links to and travel from China, these are not the likely candidates for success. They succeeded because they followed their own local health policy and ignored advice of the WHO in various occasions. Taiwanese health authorities sent their own medical teams to Wuhan in month of December 2020 confirmed human to human and their researchers transmission of COVID-19. Taiwan though is not the member of the WHO, due to various political reasons but informed the same to WHO. When access to Wuhan for research by the scientist was denied by China, WHO could have notified the world that an alarming situation is arising and declared a PHEIC for a coordinated international response. The WHO should not have waited till the month of March 2020 before declaring a pandemic. Around 114 countries had reported COVID-19 positive cases with 4,000 mortalities by that time. The annual budget of WHO for 2020-2021 stands at USD 4.8 billion, which is a great sum for an organisation most Low and Middle Income Countries (LMICs) bank upon. Decision by US President Trump to halt funding to WHO (15% of its budget) is likely to have disastrous consequences for Low and Middle Income Countries. Ignoring the undeniable epidemiological evidence and failure to render an effective early warning / response strategy, the WHO leadership has failed us all. A pandemic needs to be contained globally, including in the poor countries that depend on the WHO. The WHO is the only global organization whose budget and infrastructure are suitable for this. WHO can no more shirk responsibility and therefore it needs to be restructured, and should be led by health professionals.

CONCLUSION

WHO's image has been tarnished from a global health leader to a mere coordinating agency, fulfilling the interests of rich countries. Structural lethargy, absence of decisive leadership and underfunded programmes are the main factors. Most importantly, the PHEIC process requires urgent reform as the frequency of occurrence of emerging and re-emerging diseases is on the rise. Members of the Emergency Committee expressed different views during the initial days of the outbreak. But the final declaration by WHO Director General that the event did not constitute PHEIC was disastrous. Hence, a multistage PHEIC approach with each level defined by epidemiological criteria and combined with specific actions should be conceptualised and implemented. Echelon 01 PHEIC should show a high risk outbreak in a single country managed locally. Echelon 02 depicts that many countries are

affected. Echelon 03 signals that multiple countries are affected and transmission is evident. These three different tiers would be effective in providing preventive public health measures effectively. Also, WHO should make an expert panel to make its decision transparent based on epidemiological data and evidence based medicine. The main purpose of a PHEIC declaration is to intervene timely based on proof and liquidate funding as well as control disease impact by enforcing preventive measures of emerging and reemerging disease risks. After COVID-19 pandemic, IHR reform must be done at the earliest to make reactions to novel infections rapid and effective.

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