



Research Article

CURRENT DIFFICULTIES IN THE PREVENTION AND CONTROL OF SARS-COV-2 IN CHINA

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ABSTRACT

In China, Zhong Nanshan reported on January 20, 2020, that because there was a human-to-human transmission of SARS-CoV-2, the whole country will uniformly adopt a precise prevention and control strategy. Then, after several months of hard work, the new coronary pneumonia has basically been effectively controlled in China. This article summarizes the difficulties in prevention and control through several special cases reported by the media. It is worth a warning. If societies are careless, there will be another outbreak of a new coronary pneumonia in the near future.

Key words:

COVID-19; SARS-CoV-2; pandemic; epidemic

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INTRODUCTION

I read with great interest the Editorial on the prevention and control of the SARS-CoV-2 coronavirus disease (COVID-19) in China by *The Lancet*.¹ After more than 2 months of effort, the COVID-19 epidemic in China was effectively controlled. However, there is still great uncertainty regarding the future of the COVID-19 pandemic. By means of several illustrative cases, I herein report on the current difficulties encountered in the prevention and control of COVID-19 in China.

The first case involves a woman from the Henan province, who was living in Wuhan. On January 10, 2020, she returned to Henan Province. By January 29, five of her relatives had been diagnosed with COVID-19, but she had not developed any symptoms.² This case shows that asymptomatic carriers are still infectious, even if it is difficult to detect.

The second case involves an older man from the Henan province. On November 13, 2019, his father-in-law returned home from Wuhan for treatment. He and his wife went to his father-in-law's house to care for him. After his father-in-law died on November 30, 2019, the patient continued to live in his father-in-law's home, until January 31, 2020, while his wife and son returned to their home. Thereafter, the patient only ventured out twice to buy groceries and once to buy medicine; he performed no other outdoor activities. He was febrile on February 12, and he went to the county people's hospital on February 14 and was hospitalized for observation.

He was diagnosed on February 15. The total number of days between the patient visiting his father-in-law and his diagnosis was 94 days. After contract tracing, the source of the infection has been difficult to determine.³

The third case involves a man who presented to the outpatient department of the China-Japan Friendship Hospital with a fever on January 30, 2020. Before admission, he had tested negative for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) on three separate occasions; he tested positive for the H1N1 influenza virus. At that time, owing to severe pneumonia symptoms, the patient was admitted to the negative pressure unit of the hospital with a "severe H1N1 infection" and received invasive respiratory support. Following this treatment, alveolar lavage was performed and specimens were collected. On February 5, he tested positive for SARS-CoV-2, and the diagnosis of COVID-19 was finally confirmed.⁴

The fourth case involves a man with a "green" health code who returned to Shanxi Province from the Hubei Province on April 13, 2020. On April 30, he tested positive for SARS-CoV-2, and on May 2, an expert team confirmed the diagnosis of COVID-19.⁵ The state implements health codes as an electronic voucher for individuals to enter and exit the areas affected by the epidemic. This case shows that being assigned a green health code does not mean there is no risk of SARS-CoV-2 infection, which makes the health code system unreliable for prevention and control.

Thus, SARS-CoV-2 infection involves many uncertainties such as, an asymptomatic patient may be infectious, the incubation period cannot be determined, nucleic acid tests may

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show false-negative results, presence of a green health code does not guarantee that an individual is not infected, and home isolation for 14 days cannot rule out the risk of infection or disease. To maintain control of the COVID-19 epidemic in China, it is imperative that we pay attention to these characteristics of SARS-CoV-2, optimize epidemic prevention and control plans, and remain vigilant in order to prevent the second wave of infection.¹

I hope that the Chinese government, patients, healthcare staff, and the Chinese population as a whole will continue to do their part in combating COVID-19 and will stay vigilant until the pandemic is effectively controlled globally. I also hope that this pandemic will come to an end soon.

Declaration of interests: There are no conflicts of interest to declare.

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