

India's Health in Peril - Lessons from COVID-19

Dr. Vinay Aggarwal

It's been a month & half since our Honourable Prime Minister announced a complete lockdown in view of the emerging pandemic of COVID-19. It was indeed a bold and timely call taken for a country like ours & has been beneficial in terms of flattening the curve to a great extent. On the day India crossed 1 million tests, its total number of positive cases were still far less than the likes of Germany, Italy, Spain and even the United States. In terms of recovery we have seen a positive trend of almost 29% cases that have recovered & mortality rate of around 3.3%. Most of the positive cases were mild type/ asymptomatic & did not warrant typical ICU care. Now that we have braved through lockdown 1.0, 2.0 & have all grudgingly accepted the need for lockdown 3.0, we must not lose sight for the reason behind this bold call. The main reason for a complete lockdown was to prevent the surge of COVID 19 cases that may require increased hospitalisations & overwhelm the already fragile healthcare system of our country. The lockdown was also intended to give the bureaucracy (centre & state governments) enough time to prepare a contingency plan for readiness to manage the COVID 19 cases, if requirement of hospital beds and healthcare facilities increases.

So now comes the real question- How is our healthcare system handling this crisis? Behind the claps, lamps, being showered with flowers from the sky - how are the healthcare corona warriors really coping? Currently healthcare sector in the country has taken a major hit. Most family physicians are sitting at home, all routine outpatient clinics have been blocked, all routine surgeries and elective procedures have been cancelled, small nursing homes/hospitals are almost running empty or have been foreclosed, big corporate hos-

pitals have seen major occupancy drop down to less than 30% & hence significant revenue losses all around in private healthcare. Major public hospitals have been converted to corona centres, leading to helplessness in the large number of patients they catered to. There is a growing fear amongst the healthcare personnel to discharge their duties in view of the reports of more than 15 healthcare workers (HCWs) who died due COVID 19 & even the authorities announcing strict actions like sealing these institutions. This situation is compounding the panic all around. Genuine patients who need healthcare services for routine and chronic non-COVID 19 illnesses are suffering. As we are into the third phase of lockdown, healthcare facilities are seeing a surge of preventable emergencies and non COVID-19 deaths due to unnecessary delays in treatment -like burst gall bladders, avoidable sepsis, fatal heart attacks, critical renal patients due to missed dialysis, and many more.

The government on its part may have the right intentions but chaos has arisen all around in execution. For example, whenever a patient walks into a hospital even for a routine appointment, they come in contact with at least 5 HCWs. In the unfortunate incident that during contact tracing or random testing the patient comes COVID-19 positive, district authorities asked to seal the establishment he/she visited, instead of quarantining and testing the contacts. This lead to loss of medical care for other non-COVID patients being treated, loss of employment for the HCWs besides severe financial losses. This amounts to breaking the back of the small nursing homes and hospitals, which provide much of the healthcare in this country. This is leading to doctors being over cautious in practice. Doctors are not doing any surgeries or small procedures without a proven negative corona report. A corona test report on average takes 2 days. So the patient loses two days of waiting time, or gets admitted in the hospital and an added test burden for a routine procedure. Multiple recent reports have emerged where magistrates, health secretaries and hospital heads have asked for strict action be taken against HCWs who tested positive for



Dr. Vinay Aggarwal is executive member, Delhi Medical Council; past national president, Indian Medical Association; and recipient of Dr. B C Roy National Award.

COVID 19, squarely putting the blame of a confused and collapsing infection management system on the doctors and healthcare personnel. This is leading to the larger public perception of HCWs as carriers of infection and hence rising incidents of stigmatisation and violence against them. Reports emerged of authorities coming down hard on junior doctors and staff who protested putting themselves in harm's way without proper PPE. Instead of helping out, many leaked documents in the media showed that protesting doctors, or those that tried to source PPE personally were asked to realign or resign.

The government cannot solve this impending healthcare crisis without supporting and strengthening public and private healthcare. Millions of deaths every year in India are due to communicable diseases easily preventable by following basic hygiene and cleanliness practices, if enforced. The lessons learnt by the government from corona should be replicated in managing the bigger killers in India like tuberculosis, malaria, dengue, typhoid etc. India lags considerably behind the developed world in many health indices and the same level of determination, focus and unity is required by all stakeholders to improve them. Primary and secondary healthcare should be strength-

ened throughout the country, so that we don't burden the tertiary care referral centres. 'Make in India' movement should further encourage the production of PPEs, test kits, ventilators and drugs. Telecommunication services should be freed from draconian laws. No part of the country should be left without access to a real or virtual health facility. Private healthcare provides almost 80% doctors, 60% hospitals and 30% of the hospital beds in this country. The government has to stop ostracising its most valuable ally in healthcare and work with the private sector in developing policy, uniform guidelines and infection control procedures as we move forward. Authorities should strengthen and support the nursing homes and hospitals in their area instead of reprimanding them. Doctors and health care workers should be protected from the scourge of violence and stigma both in private and public establishments. This pandemic has been a wakeup call and both central and state governments should recognise the need for larger GDP allocation to health. The governments, medical associations, public/private hospitals and the public together can transform India into a world leader in health services.

+

DOCTORS – Keep Abreast of the Latest Medical Advances & Benefit Your Practice

Read & Refer The Indian Practitioner, India's foremost & oldest medical monthly now over 74 years of publication.

Doctors would be aware that more than at any time in the past, medical technologies, advances in medicines & treatment protocols, surgical practices are moving ahead at lightning speed.

Many doctors say that they don't have time to read.

All the more reason to patronise The Indian Practitioner written in brief, easy to read style, for your Quick Information Needs.

The Indian Practitioner covers Peer Reviewed Medical Articles on latest Medicines, Treatment Protocols, Surgical Practices, and from News to Important Happenings in the Medical World to Technology & Devices to Doctor/ Hospital Profiles/ Events Diary, etc.

**All In One – To Keep You Updated.
To Help You In Your Day-to-Day Practice.**

If your Hospital, Medical Centre, Medical College, Diagnostic Unit does not have atleast one copy, then please subscribe to The Indian Practitioner NOW.

**Ask for a FREE sample copy.
Digital Version also available.**

For further details contact, Email: theindianpractitioner@gmail.com

