

COVID-19 AND HEALTHCARE WORKERS IN PAKISTAN: ARE WE LOSING THIS FIGHT?

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INTRODUCTION

The first case of novel coronavirus disease 2019 (COVID-19) emerged from Wuhan, China in December 2019¹. Ever since, it has spread globally and affected almost every country in the world². For this reason, the World Health Organization (WHO) has declared it as a pandemic³. The symptoms of COVID-19 include fever, cough, dyspnoea, and pneumonia⁴. The disease spreads by inhaling air droplets, by directly contacting the contaminated surfaces, or by contacting a person with an already existing condition⁵. As some of the patients suffering from COVID-19 appear symptomless, the advice given currently is to practice hand hygiene and social distancing⁶.

Healthcare workers (HCWs) all over the world are fighting on the frontlines to curb the spread of this disease⁷. Just like a soldier who goes to war needs protective equipment (Kevlar and helmet) and weapons, HCWs also need personal protective equipment (PPE), supportive medicines, and essential equipment like ventilators⁸. Unfortunately, reports are emerging from different countries that HCWs are getting infected with the COVID-19. The International Council of Nurses (ICN) has reported that COVID-19 infection affecting HCWs in Italy makes up 9 % of the total reported cases.⁹ In China, more than 3,000 HCWs are infected with COVID-19 as of 1st April, 2020¹⁰. The HCWs who got secondary COVID-19 infection from a hospital setting makes up 15% of the total reported cases in Spain¹¹. In France, 490+ HCWs working in government sector are now reported to have contracted COVID-19¹².

The situation in Pakistan is regrettably not so different from these above-mentioned countries. According to the news report published in Khaleej Times, 253 HCWs are now infected with COVID-19 in Pakistan¹³. Among these

are 124 doctors, 39 nurses, and 90 paramedics and the province of Punjab tops the list followed by Sindh, where HCWs are affected most with COVID-19¹³. There are many reasons for the HCWs to get COVID-19 globally and in Pakistan. One of the most important reasons is the inadequate supply of PPE¹⁴. Another important reason is the lack of complete understanding of disease transmission mechanisms and the absence of its vaccine¹⁵.

It is the responsibility of the health regulatory bodies and government to support our frontline HCWs in this critical time and meet their just demands. All the frontline HCWs should be trained according to the latest guidelines of WHO in order to prevent secondary transmission of COVID-19 from a hospital setting¹⁶. This training should include rational use of PPE, maintaining sanitation, personal hand hygiene, and waste management of COVID-19 patients^{16,17}. By following these steps, secondary transmission of COVID-19 could be curtailed in an effective manner. In addition, the authors suggest that aged HCWs or those with underlying systemic conditions should not directly treat COVID-19 patients. The staff of the hospital should undertake routine medical checks, should be assessed psychologically intermittently, and should take rest between long duty hours. Amidst COVID-19 outbreak, stress levels are high and HCWs should also use coping techniques like eating a well-balanced diet, taking proper rest, engaging in physical activity, and contacting friends and family over phone and through video chats. These proposed coping strategies are summarized in Fig 1.

The HCWs should be protected against COVID-19 as if this trend continues; their hospitals could serve as an epicenter for the virus spread. We are already having a difficult time restraining the spread of COVID-19 but this battle against COVID-19 pandemic cannot be won if we keep on losing a large number of our frontline soldiers. It should be the highest priority of our government to safeguard their HCWs from getting infected. If they are in good health and spirits, only then can we win this battle against the COVID-19.

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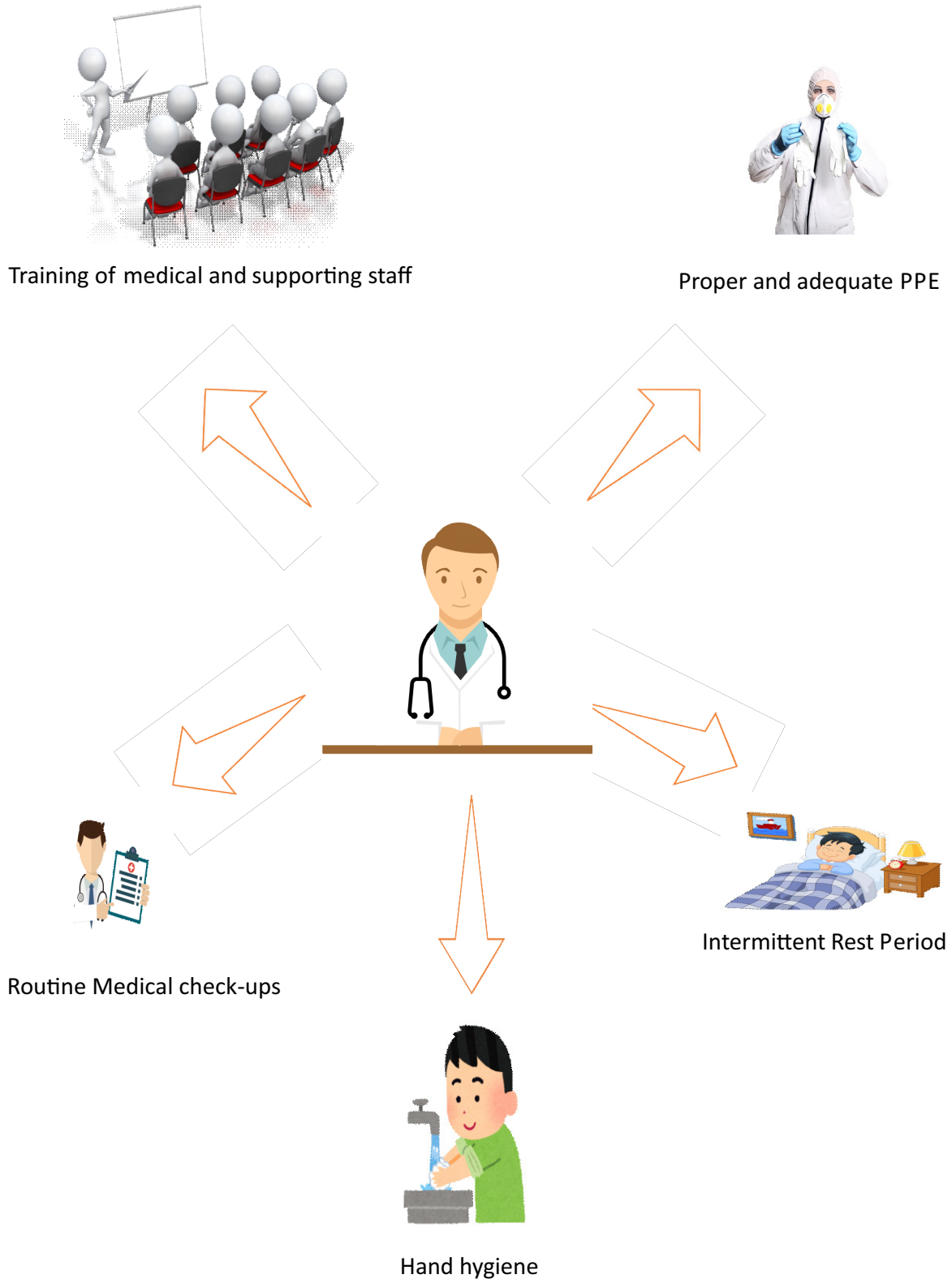


Figure 1: Possible strategies to protect HCWs from getting infected with COVID-19.

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