

CoronavirusPandemic:TasksAhead



Unilever Bangladesh Limited and The Daily Star jointly organised a roundtable titled “Coronavirus Pandemic: Tasks Ahead” on March 21, 2020. Here we publish a summary of the discussion.



MAHFUZ ANAM
Editor and Publisher
The Daily Star

The times are different. The whole world is different. We have never faced a situation like this before. In a sense, we are all confused. As a responsible newspaper, we want to communicate authentic information to the public. The public needs to know what the tasks ahead are.



DR BARDAN JUNG RANA
World Health Organization (WHO)
Representative to Bangladesh

We are already in a place where we should not be. We were in a preparatory stage throughout the months of January and February, before the first COVID-19 case emerged. Like many other countries, Bangladesh did not go forward with strong measures. However, Bangladesh, as well as all other countries in the region, are following the international health regulations. Bangladesh already has a National Action Plan for Health Security, which includes events such as outbreaks of such viruses.

We already have a few confirmed cases, but instead of dwelling on these concerns, we must attempt to mitigate them. It is important to accept that we have many cases, and be open and clear about the fact that the number of cases is going to rise.

Misinformation and rumours are scarier than the virus itself. These things hamper the country's efforts towards mitigating and containing the spread of the virus. The media should be responsible in controlling the spread of misinformation and rumours. Right now, panic is the worst enemy. If the public starts to panic, the government would have to begin mitigating the panic, and not the virus.

We need to look into the actions of other countries which have been successful in containing the virus. Bangladesh is the 108th country to declare a case. Over 180 countries have been affected so far, which is why WHO has declared it a pandemic. The positive aspect to this is that there are a number of countries whose experiences we can learn from. COVID-19 is a new virus and so everything is a learning curve. This virus has no mention in medical textbooks, nor do we have prior experience with it, which is why it is called “novel.” WHO is giving all of its efforts in order to gather more scientific information on the virus.

Physical distancing has proven to be a successful measure to slow down the transmission of the virus. Awareness on this

is already rising, as you can see from the reduced traffic in Dhaka. Social or physical distancing is an individual responsibility. This is no longer solely the responsibility of the Ministry of Health. All wings of the government should be involved in this. If each person is individually conscious, there is no way the virus can travel from one place to another, since it transmits from person to person. People can leave the virus on surfaces or objects they touch, which is why we are asked to wash hands regularly.

There will be more cases in the coming days, and more contact tracing will be required. The burden on the health system will only increase, since there will be more incoming reports, and more people wanting to be hospitalised even without needing to be. Moreover, Bangladesh is on the gateway of a dengue outbreak. Recently, there were two reports of a measles outbreak.

The epidemic can be controlled by strengthening and intensifying our tracing, isolation, testing, and treatment. Social distancing will help reduce the burden on the healthcare system, and the system will then conduct contact tracing, find the patients, then isolate, test and treat them.

This is not the first time that Bangladesh has experienced an outbreak, and so it has a system in place, and a government which has already mitigated other such health crises. It is also one of the best countries for immunisation. But, the Ministry of Health needs support. The government has to repurpose its funding, resources, and human resources because there was a shortage of human resources in the health sector even before the outbreak began.



DR A B M ABDULLAH
UGC Professor, Bangabandhu Sheikh Mujib Medical University (BSMMU) and Personal Physician of Prime Minister

The number of coronavirus cases in the country has risen to 24. There have been talks about the country going into lockdown and a state of emergency. Before going into lockdown, however, it must be taken into consideration that there are many workers in the country who survive on daily wages. Other countries provide such workers with food and other necessities, and so we need to think about how we can support them if a lockdown occurs.

Out of the 24 coronavirus patients, three have already been sent home while the rest are still in the hospital. Therefore, we need to think about whether more hospitals need to be prepared to house more patients. The situation has not yet turned such that space cannot be given to patients in hospitals. Three or four more hospitals are also ready. The preparations by the government are not bad, but the scenario is changing every day. If the number of cases rises significantly, the government will take steps accordingly.

Coronavirus is contagious, and so the patients infected by the virus should not be admitted to general hospitals, since the

RECOMMENDATIONS

- Undertake initiatives to track all the home-quarantined people and bring them under community-quarantine immediately.
- Ensure PPE for doctors as they are vulnerable to infection.
- Avoid gatherings and public transportations as much as possible. Senior citizens or those at risk of co-morbidity should not step out of their homes without an emergency.
- Look into how we can properly communicate to people about gathering for prayers as it is a sensitive issue.
- Decentralise testing mechanism for coronavirus. If the tests are positive, then isolate those people and ensure quarantine.
- The marginalised population should be taken to the quarantine facilities since they cannot quarantine themselves at their homes. Proper support should be ensured for them so that they can stay there for at least two weeks.
- Every hospital should strongly implement the guidelines provided by the World Health Organization (WHO). Predict the

speed and time within which coronavirus can spread in Bangladesh and take measures accordingly.

- Focus on strengthening and maintaining isolation properly so that people cannot lie about it.
- Emphasise on focused communication. For example, who must wear masks and who are not required to do so, how to wear and dispose of masks, etc.
- Awareness of non-pharmaceutical measures should be enhanced. Emphasise on awareness at personal, social and governmental levels.
- Recognition of the problem is the first step of the solution. Establish a centralised command centre to co-ordinate efforts in Bangladesh as multiple decisions are being focused on by multiple people.
- Decentralise diagnostic kits. Do not visit a doctor with simple cough, sneezing and runny nose.
- The government should involve all other stakeholders, including the public, to raise mass awareness.

virus could spread all over the hospital. This will lead to people panicking, and patients will either stop going to the hospital, or outdoor patients will try to leave. Therefore, coronavirus patients should be kept in isolated hospitals. For example, there is Kuwait Bangladesh Friendship Government Hospital which has 200 beds currently, Infectious Diseases Hospital (IDH), or Railway General Hospital. The issue is that Infectious Diseases Hospital (IDH) and Railway General Hospital do not have ICUs and dialysis machines. These facilities must be ensured when preparing other hospitals.

Personal protective equipment (PPE) must be provided to all doctors, nurses, and other medical personnel. If their personal protection is not ensured, they will be too afraid to continue treatment.

People with regular cases of cold and coughing are pouring into hospitals to be tested, which is an issue. Common cold symptoms do not equal to being infected with coronavirus. However, someone who has just travelled back from abroad might be at risk of contracting coronavirus if they have cold symptoms. If their family members within the household and other people in the area who have come in contact show cold symptoms, they are at risk as well, and their cases must be taken seriously.

Another issue is that doctors are denying treatment of patients showing cold symptoms. Where will these patients go now? They usually do not need to be admitted in wards, and mostly stay in the outdoor unit. Therefore, the PPE for outdoor doctors needs to be strengthened. A separate area could also be formed within hospitals for patients

showing cold symptoms. A top-level decision is required about Bangladesh going into lockdown. WHO says that this must be done immediately, or else controlling the spread of the virus will be very difficult. Huge numbers of people have arrived from abroad and have spread all over the country. None of them are in quarantine, and are roaming around freely. They might be responsible for spreading the virus within our communities.



DR SHAGUFTA ANWAR
Chief, Communication & Business Development
United Hospital Limited

In private hospitals, we usually deal with patients with non-communicable diseases. We get a lot of immuno-compromised patients. If a patient with an infectious disease comes to our hospital, they put others at risk. Hence, it is very risky to entertain these patients in our hospital.

We triage these patients by taking their history of travel, contact, etc., and try to detect the COVID-19 symptoms. Then we ask the potential suspects to go to IEDCR to get tested. The practical problem we are facing on the ground is their unwillingness to go. Since we are a private hospital, the

patients coming to us are mostly middle or upper-middle-class. This group of people are in greater denial and it is much more challenging for us to send them over to the testing centres. So, what we have to do is break this fear. There is also a fear surrounding isolation. Bangladesh has plans on creating isolation units in various places but all of these places will remain empty because the patients would prefer to stay in their own homes regardless of whether they have tested positive or negative for the disease.

The government is taking a lot of initiatives but I feel that disseminating information in the right way and in the right language is very important.

Words such as “quarantine” are quite technical and so people do not really understand the difference between “quarantine” and “isolation”. “Home quarantine” actually means being quarantined in a single room.

IEDCR or Ministry of Health cannot do everything alone. All they can do is spread the awareness regarding the disease and the do's and don'ts which they are doing wonderfully. But to make sure all the necessary precautions are implemented, we need support from law enforcement agencies.

There should be other hotline numbers helping out with the non-health related concerns and queries.

We are also getting a lot of patients who are not properly disclosing their history to the doctors. We should motivate and encourage people to refrain from doing this. Media should take steps regarding this. We also need support regarding personal protective equipment. We also need to be aware of the types of masks we should be wearing and in what situations and how to wear and dispose of them.



PROF MD NAZRUL ISLAM
Professor of Virology, and Former Vice Chancellor, BSMMU

In Bangladesh, people have mainly taken up home quarantine, which has spelled disasters for us. People who are not maintaining the standards of home quarantine must be located by the health services. Patients must be tested before being shifted from quarantine to isolation. Isolation centres should be set up, up to upazila level. Patients with common cold symptoms will be treated in upazila and district level hospitals. However, patients with severe manifestations such as difficulty in breathing, or co-morbidity, should be taken to critical care. Critical care facilities must exist in district level and tertiary level hospitals, and the mass public should be made aware of which hospitals contain these facilities. Big hospitals such as Dhaka Medical College and Hospital (DMCH) should create separate counters for patients with cold symptoms. Even patients requiring surgery must first visit this counter if they exhibit cold symptoms, before

USE ANY SOAP

TO PREVENT* THE SPREAD OF
CORONAVIRUS

*According to the WHO, washing hands with soaps is an effective way to prevent coronavirus.

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