



SARS-CoV-2: A virus that is shaking the world

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ABSTRACT

The coronavirus disease -19 and the causative virus, SARS-CoV-2 has had a profound impact globally during the year 2020. The virus has spread to over 213 countries and has created a climate of fear and uncertainty. In this article the author reflects on the pandemic, its effects and also the impact of measures to contain the virus.

I am scared and yet fascinated. I look at global corona virus cases at least once daily. Worldometers [<https://www.worldometers.info/coronavirus>] is my favorite site though I also look at the Johns Hopkins map [<https://coronavirus.jhu.edu/map.html>]. There is a morbid fascination with the rapidly galloping figures of total cases, new cases, cases recovered, deaths, serious cases, tests done and cases and tests per million population. The global graph of cases seems to be going nearly straight up though some country graphs have flattened and even come down. People mouth new terms like flattening the curve, social distancing, personal protective equipment and 'experts' on television propound their own theories on the course of events and actions which should or should not be taken.

COVID-19, the pandemic of the twenty-first century: Corona virus disease -19 (COVID-19) in many ways has been the pandemic which has affected

mankind this century There have been more serious ones with higher mortality and more dangerous signs and symptoms but due to its ease of transmission and the risk of causing severe illness which may require ventilatory support in about 5% of cases, COVID-19 has captured the global imagination and created a climate of fear. There is a fear of health systems being overwhelmed and of health care being rationed. I also find it ironic that 2020, the year considered as a landmark and a milestone year by many health schemes and officials, is turning out to be among the worst years of the century.

Fear of strangers: As humans we have always been afraid of strangers. The pandemic has amplified our fear. Housing societies and colonies are reluctant to let any outsiders into their premises. In most places globally slums and areas with poor housing and economic conditions have a greater number of cases. The maids and handymen working in apartment

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complexes and housing estates stay in the slums. Lack of maids and helpers is a serious inconvenience but in most cases the fear of contagion has overcome the distress. We have stopped seeing another human being as a friend or companion and look at the person as a potential source of infection and contamination. I used to be happy to meet another person, now I am scared. I know my fear is irrational. I do not have a high chance of contracting COVID from a brief interaction with someone. I do not have comorbid conditions and the disease, if contracted is likely to be benign. We have begun to be prejudiced against those with the disease. The climate of fear is all pervasive. People are reluctant to claim the bodies of their loved ones for last rites and the dead pile up in hospitals.

Health care workers: Our health care workers and others involved in disease control are dressed in protective gear and look like persons out of a science fiction novel. They are at risk of contracting the disease and need the gear for their own protection. In many places there is a shortage of protective gear. But I am sure patients will find these individuals scary. I have briefly examined this issue in my interpretation of Sir Luke Fildes's painting 'The doctor' during the time of the current pandemic.¹ Everyone asks for a medical certificate mentioning you are not suffering from COVID-19 and a nasal swab followed by polymerase chain reaction (PCR) is the definitive diagnostic test. But tests could be false positive or negative. Tests have become politicized and access is limited due to a variety of reasons. The test is still too expensive for most developing countries. Rising number of cases have political and social implications and may be an embarrassment to governments

Restricted mobility and personal bubbles: Travel has become nearly impossible. I am saddened that our globalized world has fractured once again into national, provincial and district bastions. We were just beginning to become one human race when COVID-19 struck. Now we are happy to be 'safe' in our personal bubbles. 'Stay home, stay safe' is the new mantra. Restricting movement of people may have its scientific basis but our old prejudices have also come to the fore. Airlines have nearly ceased to operate and many are on the brink of collapse. A few international routes are still operational. Repatriation and rescue flights have become common. Traveling domestically is a major nightmare with the requirement

of a fortnight of quarantine. Travel as we know it has ceased to exist. During the last three decades travel has become more comfortable and easier. Suddenly a virus has pushed things back and travel is no longer a thing of pleasure or something to be anticipated. You look with suspicion at the person next to you on the flight or the train. A cough sends everyone scurrying for cover.

The collapse of tourism: Tourism was beginning to bring us together as one human race. Wealth was being redistributed and many countries like the Caribbean countries, Peru, Thailand, Mauritius, United Arab Emirates among others had a thriving tourism industry. Apps had democratized travel and brought people together. You could book air, train and bus tickets and excursions and activities before you set foot in the country and hotels and accommodations could be explored online. You could check the quality and prices and make an informed decision. Air BnB was one of my favorite apps and by staying in people's home I got to know them better and could break down barriers. All this has come to a full stop for the time being and most hotels, tour operators and others are struggling and many are going out of business. Millions in the developing world are slipping back into poverty.

Migration in reverse: Most people in the developing world live from day-to-day, hand to mouth with little access to social security and job guarantees. 'If you work, you eat' could be a relevant maxim. With lock downs these group of people cannot work and their savings quickly ran out. They also ran out of food and hope and there was a mad rush to get out of the teeming cities to their villages. Transportation was not available so many had to walk for days or use whatever transportation was available. With sudden imposition of lock downs people were stranded. In the prevailing climate of fear, each human being was looked on as a potential source of infection. There have also been heart-warming stories of people rising above their fears to help those in need.

Searching for answers: Most small businesses and shops were shut. The major problem with COVID-19 is the lack of answers. We are still searching for drugs against the virus; a vaccine is still at least months away. We do not yet know this virus. How fast can it infect, the R number and other numbers? When is the pandemic likely to end? Will there be a second wave

and other successive waves? Many of our current mechanisms for licensing treatments may be too slow for the global calamity. The major problem is that lock downs goes on and on and on for weeks on end. By the end of ten weeks of lock down most people were literally gasping for money and means of survival. 'Unlocking' evokes a lot of fears and uncertainties.

Models are fallible: The pandemic showed that most models were just that, models. They were only mathematical representations of reality which may or may not be true. Luckily their dire predictions and apocalyptic death numbers did not come through. There remains the question, however, were the measures taken on the basis of these models too drastic and too disruptive. Could it be a case of the treatment being worse than the disease? The Prime Minister of Norway grappled with some of these questions on public television.² Other leaders may also do so. Like most of humanity leaders and the political establishment are also vulnerable to fear and panic. A recent systematic review and meta-analysis provides evidence that physical distancing, masks and eye protection may reduce the risk of COVID-19 transmission.³

Freedom a casualty: Our freedoms have been restricted and hopefully are now being slowly restored. In some countries, leaders apologized for taking away the freedoms in others the question was never considered. Many of the old controls and bureaucratic checks have returned though hopefully only for a short while. Keeping people safe is a challenge. Making decisions in the face of uncertainty is another. Many of the non-pharmacological interventions like shutting down businesses, closing schools, shuttering malls, stopping travel, keeping people at home are akin to our traditional anticancer drugs. They may kill the cancer but their adverse effects are very unpleasant. Like anticancer drugs these are to be used with caution. We understand the value of our freedom only when we lose it.

Effectiveness of international organizations: The pandemic has shown that international organizations may not be always effective. People's faith in them has eroded. Internationalism has been replaced by nationalism. It has become each nation for itself. This was underway well before the pandemic. Tensions came to the fore and reached the boiling point. Nations started bullying each other. The rhetoric has

become shriller and more bellicose. In many places, poverty, and unemployment and a lack of hope broke out in violence.

The days are dark and filled with despair. However, hope springs eternal in the human breast. Humanity waits, patiently for better days and times to regain control, control over a rampaging virus!

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