Invited Editorial

Current situations of COVID-19, a global epidemic

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COVID-19 is caused by a coronavirus called SARS-CoV-2. The elderly and those with underlying medical problems like high blood pressure, heart problems and diabetes are at higher risk for developing more serious complications from COVID-19.¹

There is currently no vaccine to prevent COVID-19. The best way to prevent illness is to avoid being exposed to the virus (and avoid exposing other people). There are some additional measures like practicing social distancing, using face cover in public, avoiding touching eyes, nose and mouth, covering coughs and sneezes, and cleaning and disinfecting “high-touch” surfaces.

According to the World Health Organization’s latest report, globally, as of 1:08pm CEST, 20 September 2020, there have been 30,675,675 confirmed cases of COVID-19, including 954,417 deaths.² In Nepal alone, from Jan 23 to 1:08pm CEST, 20 September 2020, there have been 62,797 confirmed cases of COVID-19 with 401 deaths.³ These numbers are daunting and frightening and attest to the fact that COVID-19 risk in Nepal is high. Centers for Disease Control and Prevention (CDC), recommends travelers to avoid all nonessential international travel to Nepal.⁴ Although the number of COVID-19 cases in most parts of the world continues to decline over the last few days, COVID-19 is widespread in many areas of Nepal.

The COVID-19 pandemic has changed how health care is delivered in Nepal and has affected the operations of healthcare facilities. Effects may include increases in patients seeking care for respiratory illness that could be COVID-19, deferring and delaying non-COVID-19 care, disruptions in supply chains, fluctuations in facilities’ occupancy, absenteeism among staff because of illness or caregiving responsibilities, and increases in mental health concerns. Healthcare facilities, around the country, need to provide care for all patients in the safest way possible for all patients and healthcare personnel and at the appropriate level, whether patients need outpatient care, urgent care, emergency room care, inpatient care, or intensive care.

Given the fact that the COVID-19 is widespread in Nepal, most hospitals should cancel or reduce nonurgent outpatient visits as part of their COVID-19 containment strategy. Surgeons should prioritize urgent or emergency visits and procedures. Elective and nonurgent admissions should be rescheduled. Patients who face life-threatening consequences if treatment is delayed should be prioritized for an outpatient visit, phone call, or virtual consultation by a member of the surgical team.

In order to keep patients safe during this pandemic, the healthcare facilities should be guided by internationally respected infection prevention experts and recommendations from institutions like the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC). In addition, the healthcare facilities should follow rigorous infection control measures such as screening for COVID-19 symptoms, using masks or face coverings by all patients and visitors, cleaning the waiting areas, exam rooms, reorganizing the waiting room for spacing out, etc.

References


