

WHO, Covid-19 and 2021 - the year ahead

WE began 2020 with the knocking of Covid-19 and no one could imagine that it is going to affect everyone in the world. Some of us thought that it is like the SARS virus and will not cross the borders. It will remain as a 'domestic' affair of Southeast and East Asia. But in the whole of 2020, our story about Covid continued to change. We continued to wander around with different thoughts. We thought about summer, we considered several medicines and even thought that the sun would take away Covid or it would go away as soon as winter goes. We also thought it is a disease of temperate climate and so it will not be in our country. We considered it as a disease affecting only the older generations and for others it is a simple cough and cold. There was no end to our thoughts or hopes in 2020. As our hopes and expectations transformed, our contemplations and our efforts have changed too. Now it seems that we are considering the vaccine as a panacea. We will be free from the curse through the vaccine. While it is still a question, we finished 2020 with a ray of hope.

Somehow, we all know that Corona originated in Wuhan, China. However, according to the World Health Organisation, six of the 15 people contracted with MERS-COV disease died between October 1 and December 26, 2019 in Saudi Arabia. The death practically began in May 2019 and the disease was then called MERS-COV, a strain of MERS affecting the Middle East region. News of deaths also came from Qatar. On November 8 2019, WHO first reported infection with SARS-COV2 from Denmark. According to the report, about 214 people were infected in Denmark as early as in June 2019. However, on November 5 2019, they first found a separate strain of virus in 12 patients. Eight of them were workers at mink farms in the North Jutland area of the country and four were local people. They are between 7 and 79 years old. Then between December 3 and December 21, 2021 news of SARS-COV 2 outbreaks came from Denmark and from UK. However, it was January 20, 2020, when the World Health Organisation began reporting corona outbreak separately with a report from Wuhan.

The first corona virus report was like this - between December 31 and January 3, the Wuhan branch of the World Health Organisation reported 44 patients with "special pneumonia." They called it "special type of pneumonia" because they could not determine any source. The report actually came from the Chinese health authority. Five days later, on January 8, Chinese authorities described it as a new type of coronavirus. Three days later, in another report on January 11 and 12, China's National Health Authority said they found a connection of the virus to the Wuhan's marine fish market. In a separate report on January 12, Chinese authorities also sent the genetic sequence of the new virus to the World Health Organisation so that others can isolate and identify the virus too. The next day, on 13 January, Thailand identified a patient for the first time with covid infection. On January 15, Japan and on January 20, Korea also reported the disease in their countries. On January 23, the first patient was reported in the United States. The same report of WHO stated for the first time that the virus is being transmitted from human to human. After this, the number of patients began increasing exponentially.

On January 24, the WHO issued a warning to flights around the world. At the same time, the first patient was found in Singapore. On January 25, the WHO sent a procedural guide to all countries about how to deal with the disease along with care guide and other advisory rules. Around the same time, it asked its research team to come up with proper vaccine ideas, medicines and health care rules to deal with the disease. China, however, took actions much earlier. It installed special temperature gauges at its 25 airports since January 12, 2020. On January 25, Chinese authorities closed all large public gatherings across the country ahead of their spring festival. On January 26, patients were found in Malaysia, Vietnam, Nepal, Australia and France.

On January 26, WHO and the World Economic Forum issued a supply chain alert for essential health products in the

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A health worker prepares a syringe to administer the Pfizer-BioNTech Covid-19 vaccine at the Timone Hospital in Marseille, southeastern France, on January 5, 2021

—AFP

market for dealing with the epidemic. They also suggested a field verification of the supply and stock of medical equipment, PPEs and also medicines to prepare for the epidemic and requested report by February 5. On the same day, patients were reported from Canada, Germany and the UAE. The World Health Organization (WHO) said on February 1 that the virus had spread from Wuhan to all China. Until then, however, the lion's share of the total patients were in Wuhan. Out of about 15,000 patients, more than 13,000 are in Wuhan, China. On February 19, the WHO launched an online course for health workers to train them on how to secure patient care and intensive care and by then, more than 75,000 people were infected worldwide.

Meanwhile, on the basis of a PPE-related market alert, on February 29, the World Health Organisation advised caution in the use of PPE and said that it is a much-needed safety measure for emergency health workers, so they discouraged others from using it. By March 7, the disease had spread in 100 countries around the world. On March 12, the agency declared COVID - a global pandemic.

On the same day, in a joint statement with the International Civil Aviation Organisation, WHO and ICAO directed all civil aviation authorities to monitor flights in order to deal with COVID. The first three covid cases were identified in Bangladesh a day earlier, on March 11. The US Centres for Disease Control reported their first patient on March 7. However, according to the report of the World Health Organisation, the first patient was identified in that country on January 23.

Now let's look at vaccine information. According to WHO

as of December 29, 2020, a total of 172 vaccines are in the list of studies. Of which 70 vaccines are now in the clinical trial stage. However, the epicenter of these vaccines are in China, Europe and the United States. China has completed clinical trials of 36 vaccines, while the United States has completed 25. Of these, 138 trial studies were conducted on samples selected using Randomised Controlled Trial (RCT) method and 30 using non-random method. So far, the Chinese Sinovac and Oxford vaccines have clinical study results using the largest sample size. Their sample number consists of 13 and 12 thousand samples respectively. The results of Sinovac's clinical trial (of 3rd stage) will be available this year, in October 2021 and that of the Oxford vaccine will be available in July 2022. In general, the number of sample for first and second tier vaccines trial ranges between 100 and 200 people. WHO report shows that in some cases the number of samples is a little over two thousands. In the third level of clinical research, various symptoms were observed up to one year after vaccination is given to a patient. In the second stage, however, only the effectiveness of the vaccine is tested on healthy persons. Therefore, the results of the third level of clinical trial on disease control are extremely important.

You may be wondering, but why are we hearing so many vaccine names? Of the 60 vaccines that are in the clinical trial stages, 13 are now in the third stage of the trial and two are in the second-third stage study. Six of them are made in China, four in the United States, one each in Canada, Russia, Germany, Belgium and the United Kingdom. At the forefront of the study are two vaccines- Sinovac and AstraZeneca

(Oxford) and their trial is using the largest samples.

According to the World Health Organisation, of the five vaccines that have so far 'published' their results, three of them, Moderna, AstraZeneca and Pfizer, have only published their findings through the press, and the results are not scientifically validated yet. Of the 10 research papers published so far in a scientific journal, including one by AstraZeneca (Oxford), they are all from the second stage of clinical trials which were administered on healthy persons only. In the second phase of the trial, the key focus was on effectiveness of the vaccine and not on any adverse effects. People who were suffering from various illnesses were not tested in any of the second tier studies.

Recently, a colleague of mine told me over the phone that a telecom company in the country had paid in advance to purchase vaccine for its staff. Another colleague informed that he has information about another Bangladeshi company who also informed that they have also done so. These are disturbing information. Private companies have 'paid' in advance for a medicine which is yet to see the light and approved by authorities. You cannot import a product which is not authorised nor can you send money abroad for purchase of a product which is not yet legally ready for sale. These news are spreading across the board and I strongly feel a scam in it - a scam to transfer money out of the country. On the contrary, imagine the news is true and that they have done so for their employees and the government could not. It will be very difficult for the government to absorb (politically).

I would also like to mention the review of the World Health Organisation on the effectiveness of the vaccines. According to their researchers, the effectiveness of the vaccine will depend on how quickly it is passed on to the public and yet it will never be 100 per cent effective. Mind it, no vaccine is ever 100 per cent effective. Not only that, WHO had advised a sequence for administering the vaccines starting from health workers, vulnerable groups like elderly people and others.

Overall, the picture that emerges is that it will be hard to expect any rapid improvement in the Corona situation even in 2021. So we have to carefully plan the year 2021. We must remember that the world is looking at a pandemic after a hundred year. This is the first experience for the World Health Organisation. Over the past 100 years, the world has changed. We are now a lot more closer to each other than we were a hundred year ago. So, the control is not easy. Therefore, in 2021 we must learn things again and differently.

2021 will be the year of change. We have to be prepared with new rules suitable for the new globalised world with threats of covid. One of my son's friend was working in the Singapore branch of a Chinese company. Since March, they were working from home. The company realised that it has reduced their costs - no free snacks, no utility bills etc. They, therefore, raise the salaries. So that staff at home can work from a comfortable environment - utility bills might increase. Now, the company even told their staff to move back to their home countries and work from there. You can see the change in global work culture. This will affect the world and the global economy.

Except for the jobs where human to human interactions are necessary other tasks will be online from now on. We must prepare for this and we must increase the speed of the internet. We have to think about 5G technology now. It will reduce the infection too. Not only that, the population pressure will decrease in Dhaka. Now an expatriate can think of teaching Bangla to his/her child living abroad. We can use a teacher across the world to learn things. For this, the government does not have to do everything. The government has to introduce new rules. Allow online schools to be registered. Treatment will also change. In 2021 we expect such changes. Hopefully change will come.

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