

India and Pakistan: United by COVID-19

Syeda Sidra Fatima, Samar Faheem

Madam, the number of new COVID-19 cases in India peaked at 362,902 on the 27th of April, 2021.¹ This is the highest single day total for the world. India sold double the oxygen in 2020-21 than the previous year, now it faces a shortage of medical oxygen as it struggles with rising cases.² Additionally, it struggles with the vaccine drive. In an article, Kamala Thiagarajan states that the initial block was mistrust of local vaccines, even among frontline healthcare workers. Other conspiracies followed, including fear of price hikes and reports about adverse effects, as approval for its own vaccines was rushed without proper evaluation to ensure safety.³ When adverse effects were observed in AstraZeneca and Johnson & Johnson trials, they were paused to conduct a safety review. However, no such thing occurred during the Covaxin trial.⁴

One reason for a spike in cases is the B117 (UK) variant, hypothesized to spread quicker than others.⁵ However, as the virus mutates, people's defenses lower, with large gatherings and political rallies occurring in recent months, and lack of social distancing even at vaccination centers.⁶ The situation in Pakistan is becoming similar due to the prevalence of the B117 variant. Pakistan has its share of conspiracies on vaccines, similar to those that follow polio.⁷ In comparison to India, it also lacks healthcare infrastructure for widespread vaccinations, and has a percentage of the population that cannot understand message instructions (due to literacy and language barriers) sent by the National Immunisation Management System-yet there are no guidelines from the government for such issues.

Even when the public can receive vaccines, there are barriers. Government vaccines are chiefly donated by other countries - notably, China. The rollout is slow and before April, didn't target much of Pakistan's working population. Privately imported vaccines are expensive, out of reach for many, and susceptible to shortages.⁸ Pakistan initially imposed a lockdown which was lifted in May 2020. As of April 2021, the Prime Minister has refused another lockdown citing concerns for the economy. However, this potentiates a relaxed public attitude regarding COVID-19

3rd Year Medical Student, Dow International Medical College, Dow University of Health Sciences, Karachi, Pakistan.

Correspondence: Syeda Sidra Fatima. e-mail: danielandsidra@live.ca

protocols and increased public gatherings for political or religious reasons.⁹

Because of the new variant, Galloway et al., state there should be stricter public health measures and COVID-19 protocols until vaccinations can provide protection.⁵ It is important that governments of both countries amplify vaccine efforts, ensure stricter lockdown implementations, and citizens follow social distancing and proper mask-wearing, as these are critical in preventing further spread. To protect lives, we must give up a few freedoms till the worst of the storm passes.

Disclaimer: None.

Conflicts of interest: None.

Funding disclosure: None.

DOI: <https://doi.org/10.47391/JPMA.013935>

References

1. Ministry of Health and Family Welfare Government of India. [Online] [Cited 2021 June 28]. Available from: URL: <https://www.mohfw.gov.in/#>.
2. Despite COVID-19 crisis at home, India doubled oxygen exports in FY21 [Online] [Cited 2021 April 26]. Available from: URL: <https://www.businesstoday.in/current/economy-politics/india-doubled-oxygen-exports-to-9301-mt-in-apr-jan-fy21-earned-rs-89-crore/story/437140.html>.
3. Thiagarajan K. Covid-19: India is at centre of global vaccine manufacturing, but opacity threatens public trust. *BMJ*. 2021; 372: n196.
4. Bhuyan A. India begins COVID-19 vaccination amid trial allegations. *Lancet*. 2021; 397:264.
5. Galloway SE, Paul P, MacCannell DR, Johansson MA, Brooks JT, MacNeil A, et al. Emergence of SARS-CoV-2 B.1.1.7 Lineage - United States, December 29, 2020-January 12, 2021. *MMWR Morb Mortal Wkly Rep*. 2021; 70:95-9.
6. Mallapaty S. India's massive COVID surge puzzles scientists. *Nature*. 2021; 592:667-8.
7. Khan YH, Mallhi TH, Alotaibi NH, Alzarea AI, Alanazi AS, Tanveer N, et al. Threat of COVID-19 Vaccine Hesitancy in Pakistan: The Need for Measures to Neutralize Misleading Narratives. *Am J Trop Med Hyg*. 2020; 103:603-4.
8. Yeung J, Saifi S. Pakistan opens private market for Covid-19 vaccines, raising concerns of Inequality. [Online] 2021 [Cited 2021 May 12]. Available from: URL: <https://edition.cnn.com/2021/04/12/asia/pakistan-covid-private-vaccines-dst-intl-hnk/index.html>
9. Ahmad S, Lucero-Prisno DE 3rd, Essar MY, Khan H, Ahmadi A. Pakistan and COVID-19: The mystery of the flattened curve. *J Glob Health*. 2021; 11:03013.