

# INDIA Under-prepared for the second wave of mutant COVID19 surge.

By end of the March 2021, the population in India began to witness a steep rise in COVID infections in some states. The month of April saw surge in patients seeking admission into local hospitals and subsequent unmet demand for oxygen.

Some epidemiologists and scientists have been predicting a potential for a huge surge since last year. The overwhelming evidence that has emerged indicates that the government of India have been caught almost unprepared to respond for such a calamity affecting the country. The B1.617 double mutation of the corona virus changed the dynamics of transmission, resulting in wildfire spread. This was compounded by low vaccination uptake in a densely populated country and mass political and religious gatherings.

India is not short of resources –there has been long-term misguided priorities with chronically underfunded public health care.

There has been inheritance of both chronic underfunding - about 3.6% of GDP, of the public health services for decades as well as dereliction of much needed infrastructure to provide sustainable development of these services. Particularly, the exponential growth of the private healthcare sector over the past decades has dwarfed the public sector provisions, leaving the most valuable to be left out of the accessibility to any affordable healthcare, when needed.

On 28 January 2021, addressing Worlds Economic Forum's Davos Summit the Prime Minister PM Modi had said that India is one of the countries that has successfully controlled coronavirus. He explained, "India took a proactive public participation approach and developed a COVID-specific health infrastructure and trained its resources to fight COVID."

In contrast, by late April, reported India reported the world's biggest-ever daily surge in COVID-19 infections with over 3.32 lakh new cases recorded the last 24 hours. Emergence of shortage of vaccines, shortage of hospital beds and oxygen cylinders unveiled a nightmare of horrors.

Each day, the media had images and video clips of people gasping for 'air' and dying without oxygen or medical assistance. Medical staff were seen battling to save lives while the supply of oxygen was running out, in some places the doctors and nurses deserted their posts, fearing for their

safety as the public anger grew day by day.

The international communities led by Non-Residential Indians are organising to fund oxygen generators and concentrators to ensure that these were reaching India to aid those in most urgent need.

India is one of the largest manufacturers of oxygen and has the potential to cope with the crisis. Yet, it lacked storage, transportation, and distribution infrastructure for such purposes.

There are many debatable issues –adequacy of vaccines orders and distribution strategies. Also, there has been huge uncertainty in the policy for 'lock downs' to promote social distancing protocols, to prevent the spread of the pandemic. Finally, the complacency of the 'scientific' task force which met in late April, since the previous meeting in January 2021.

There is no doubt that there are many other reasons behind the current covid crisis in India beside the poor response of the Central and state administrations, which includes relying on false hopes in the belief that India has truly controlled spread of COVID. The system involving Public Health and Disease Control agencies- ICMR, had totally failed or not being able to instigate appropriate response from the Central government about the rapidly rising cases in the community.

The Indian diaspora living aboard have lost many family members and friends and are still caught in the 'war of shortage' of vaccines and access to medical help; it is most anxious and stressful time for all. We owe it to the medical professionals and their supporting colleagues who have risked their lives in treating the patients and are doing their utmost to help the humanity.

We also owe our gratitude to a huge pool of volunteers and community organisations for their prompt and most timely efforts in organising essential aids for India to cope with the mutant virus surge.

It is, indeed, a testing time for the nation trying to cope with the deadly second wave and we hope that the mutant COVID surge will end soon.

Buddhdev Pandya MBE

On behalf of the Swasthya Editorial Team

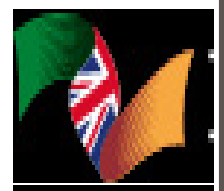


## British International Doctors Association

### OXYGEN FOR INDIA EMERGENCY APPEAL

BIDA has initiated a fund raising campaign in association with the British Asian Trust.

BIDA is making an initial contribution of £4500 to kick start this fund



British Asian Trust

Please donate to their JustGiving Crowdfunding Page: [https://www.justgiving.com/crowdfunding/bida-bida?utm\\_](https://www.justgiving.com/crowdfunding/bida-bida?utm_)

**Please donate**

Lloyds Bank  
Sort Code: 30-65-62  
Account: 25036268

Cheques made payable to:

"British International Doctors Association"

Can you help BIDA to raise £100000 to Help fund Oxygen supply to India for Covid. Funds raised will be transferred to British Asian trust or BAT's advisors and programme partners in India. BIDA will ensure that the money raised from this appeal is utilise entirely for present Covid crisis in India.

Any Queries can be directed to:

Dr. Ashish Dhawan, General Secretary BIDA

Dr. Pranab Sarkar, National Treasurer BIDA

Dr. Amit Sinha, BIDA Media & Communications Lead BIDA

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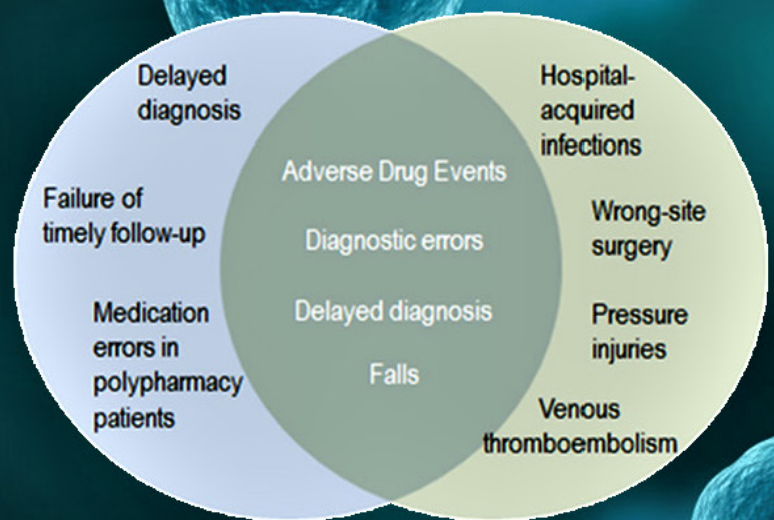
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# Improve patient safety by eliminating adverse events in health care settings

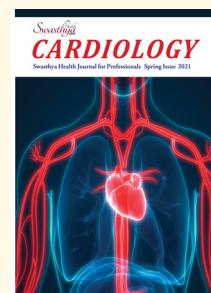
It is estimated that every year more than 300,000 patients acquire a healthcare associated infection (HCAI, HAI or nosocomial infection) as a result of care with in the NHS.

Primary and ambulatory care

Hospital care



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