

Impact of coronavirus disease-2019 and lockdown on non-coronavirus disease-2019 patients in India

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Received: December 10, 2020; Accepted: December 25, 2020

ABSTRACT

The whole world is under the grip of the coronavirus disease (COVID) 2019 pandemic and in India, the virus has wreaked havoc and the victory against the contagion seems a distant dream. A series of lockdowns were imposed in India at both central and state level to halt the spread of the virus, the repercussions of which have been drastic. The major brunt fell on the patients due to suspension of various health and public transport services amidst the lockdown. This could have been prevented by better planning and its implementation and systematic phased out lockdown measures.


KEY WORDS: Coronavirus; Lockdown; Non-communicable Diseases; Non Coronavirus Disease 2019 Patient

INTRODUCTION

With the more than 185 countries world being trapped in the ongoing pandemic of coronavirus disease-2019 (COVID-19) which first originated in Wuhan, China, the battle against the contagion is far from over. Since the time World Health Organization (WHO) had declared it as a pandemic on March 11, 2020, a number of steps were taken in India both at the central and state level to curb its spread. Among this, the one which stood out was the imposition of nationwide lockdown since March 24, 2020. It was not at all like what it was made to appear that India will quickly overcome the tidal wave of the COVID-19 pandemic. In fact a lot had been thought that the series of nationwide lockdowns would halt the spread of the contagion. However, as we slowly march toward the fag end of 2020 and we look back, the complete victory against the severe acute respiratory syndrome coronavirus 2 (SARS CoV2) still seems a distant dream.

There are talks of numerous vaccines coming up in the first quarter of 2021 but its effectiveness is still uncertain. With the records showing more than 10 million individuals were tested positive for COVID-19 across the country, one can understand that the actual numbers may be still much higher than that.^[1] However, the solacing thing is that our country has one of the highest recovery rates also. With the recent update showing that there is new strains of the virus which are coming up in the other countries has again created fear among the people.^[2] It is really unknown to anyone when all the saga shall end but the most concerning thing is the way, it has indirectly impacted various aspects. The major brunt of this whole showdown has fallen on the petty non-COVID patients on whom the pandemic has just piled on the misery. Hence, we have attempted to focus on the difficulties faced by the non-COVID patient due to COVID-19 and lockdown by compiling various media and study reports.

If we look at the non-communicable diseases (NCDs) group, a report has summarized a set of data from National Health Mission (NHM) which shows that around 350,000 less people received outpatient services for diabetes, 150,000 less people received outpatient treatment for mental illness while approximately 100,000 fewer people received outpatient cancer treatment in March 2020 than compared to

Access this article online	
Website: http://www.ijmsph.com	Quick Response code
DOI: 10.5455/ijmsph.2020.12183202025122020	

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March 2019.^[3] Well we felt that this is quite concerning as India contributes to more than two-third of the total deaths due to NCDs.^[4] It has been estimated that around 53% of Indians have died due to the NCDs which mainly includes cardiovascular diseases, stroke, diabetes mellitus, chronic lung diseases, and cancer. Above this, the most common comorbidities in patients who died due to the SARS CoV2 infection globally are diabetes, hypertension, kidney, or cardiovascular disease.^[5] To minimize, the in-person visits to the hospitals have introduced the tele-consultation services. But still the diseases of advanced stage or complications cannot be detected or predicted in tele-consultation. Some chronic diseases if not treated on time can prove to be fatal.^[6] It has been found that Government of India has increased its focus more on e-Sanjeevani, which is a web-based comprehensive telemedicine service.

As reported by the central tuberculosis (TB) Division's Nikshay portal, there has been a tremendous decrease in the number of diagnosed new TB cases. In India, from the beginning of March 2020 until August 2020, the number of new patients who were registered every month with TB was 1,67,727, 82,249, 1,18,455, 1,52,656, 1,32,400, and 1,02,835. When compared with the figures, of the previous year, there is a percentage decrease in 21%, 63%, 47%, 25%, 38%, and 45%, respectively, from the months of March 2020 to August 2020.^[7] Until April 2020, there is around 78% decrease in the number of new cases detected in government run health centers than compared to the year before in the same month. In private sector, this drop is around 89%.^[8] In the wake of the COVID-19 pandemic, it should not be forgotten that TB kills 1000 Indians every day. Furthermore, more than 100,000 cases go "missing" every year.^[9] In the complete lockdown time interval, around 224,450 cases of TB were detected whereas during the same time period, the numbers were as high as 507,749. Furthermore, in the post lockdown period, there is a reduction in about 37% cases than compared to the year before.^[7] Another important factor is the struggle for anti-TB drugs. More than the availability of the drugs, accessibility has been the major problem which makes them vulnerable to develop drug-resistant TB.^[10]

According to the National AIDS Control Organization data in 2017, the total number of People Living with HIV (PLHIV)/AIDS is 2.1 million.^[11] Moreover, this population is the third-largest population of HIV positive people in this world.^[12] However, with the present lockdown condition, there is disruption in public transport services which have led to the lack of accessibility of these patients to the Anti-retroviral Therapy Centers. Furthermore, many experts believe that due to COVID 19, there is an effect on the WHO's target to bring a positive change among the life of PLHIV.^[13]

Earlier media reports have shown that many services for pregnant women including the vaccination services were normal in the month of March 2020. This was solely possible

due to the active intervention of the Accredited Social Health Activist and the Auxiliary Nurse Midwife. However, there is a huge fall on the medical intervention on pregnant women with the number of deliveries and increased number of unattended home births.^[3] According to the NHM data as reported by a media article, about 100,000 children were not able to get Bacillus Calmette-Guérin vaccination and about 200,000 children had missed the doses of pentavalent vaccine. It is worth noting because the former protects against the infectious TB while the later prevents against five deadly diseases, namely, meningitis, pneumonia, whooping cough, tetanus, hepatitis B, and diphtheria.

An analysis by the Foundation for Reproductive Health Services, India estimates that around 25.6 million couples might be unable to be accessible to needful contraception services during the lockdown period. This will result in about 2.3 million unintended pregnancies, 0.68 million child births, and 1.45 million abortions with more than half of it being unsafe abortions. Furthermore, there has been an estimation of more than 1743 maternal deaths.^[14] There have been innumerable media reports all over India reporting many health facilities denying Antenatal checkups. Furthermore, those suffering of labor pain have been denied emergency treatment. Considering the disruption of public transport, many of them have not been able to reach the health facilities and those who tried to come by walk have delivered while walking on the road side or have died in the process of delivering. This has led to more maternal deaths as well as infant deaths also. In addition to this, there has been no proper menstrual hygiene management especially among the poorer section of the society considering the crisis situation. A media report the hardships faced by such people. It portrays that the deep embedded inequalities as well as impoverishments based on caste, class, sexuality, and gender becomes most evident in crisis situation like this. By pushing the reproductive and maternal and child health care into a lesser priority zone to address pandemic is going to have wide ranging implications on health.^[15] Due to the prevailing of lockdown for a longer duration of time, there was a loss in distribution for the organizations as well as private providers involved in social marketing which has further led to a reduction in access to family planning as well as abortion services. Already the accessibility to avail the services was on the lower side and this pandemic has nothing but exaggerated the situation to a greater extent.^[16]

According to a study conducted by an international consortium, a total of around 28 million surgeries to be postponed worldwide with over 580,000 planned surgeries being in India alone.^[17] Delay in such surgeries will ultimately lead to deteriorating health, worsening quality of life, and unnecessary deaths.^[18]

According to the survey by Kantar Indian Market Research Bureau, nine out of ten persons suffer from major oral health

problems. Furthermore, more than 76% of the adults have some sort of cavities or are at high risk of having them.^[19] As a result of the outbreak, most of the dentists across the country are not opening their clinics. Some are on the view that physically treating the patients is not at all possible until the spread of the virus is suppressed as unavailability of effective disinfectants with shortage of personal protective equipment kits have compounded the problem.^[20] While there have been innumerable norms of social distancing by the government to curb the spread of COVID-19, there has been no such thing concerning the dental or the oral health of the patients. Dental issues are known to cause severe problems and sleepless nights. Those who are not able to seek treatment have become the indirect victims of COVID-19 and lockdown.^[19]

To sum up, the above discussions provide a glimpse of the current scenario of the non-COVID patients in India. It is always easy to say anything on the hindsight in any situation but none can ignore the fact that COVID-19 has nothing but exposed the weak public health system of the country. Now we stand in such a position that we are neither able to control and take care of the COVID-19 patients nor are we able to provide adequate treatment to the non-COVID patients. First, the hospitals which have a larger patient flow should never been converted into a COVID care hospital. One of the authors in this study visited such tertiary care hospital as well as community health centers in Chhattisgarh for other research purpose during the lockdown phase and found the sorry state of the non-COVID patients. Due to the conversion to COVID care hospital, the number of out-patients had decreased from 2500/day to around 250/day. The health services such as antenatal checkups, planned surgeries in-patient admissions, and laboratory tests were completely disrupted. Hence, in our perspective, the conversion of such tertiary care hospitals should not be done until the utmost crisis arises. Even in such situation, provision can be made for secluding the COVID care section with the rest of the hospital. For better management of all the patients within the available infrastructure, adequate use of human resources should be done. We felt that there was immense violation of the basic human rights during the whole lockdown phase with the major brunt falling on the poorer section of the society which could have been prevented by a more systematic phased out lockdown than an abrupt one.

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How to cite this article: Dixit A, Roy PK. Impact of coronavirus disease-2019 and lockdown on non-coronavirus disease-2019 patients in India. *Int J Med Sci Public Health* 2020;9(10):549-551.

Source of Support: Nil, **Conflicts of Interest:** None declared.