The COVID-19 Pandemic: An Opportunity to Assess the Global **Health Status**

Yann A. Meunier

Professor. International Institute for Medicine and Science, USA

Corresponding Author*

Yann A. Meunier Professor International Institute for Medicine and Science, USA E-mail: ymeuniermd@gmail.com

Copyright: © 2022 Meunier Y. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received: 22-Mar-2022, Manuscript No. IJCRIMPH-22-56862; Editor assigned: 24-Mar-2022, PreQC No. IJCRIMPH-22-56862(PQ); Reviewed: 26-OC No. IJCRIMPH-22-56862(Q); Revised: Manuscript No. IJCRIMPH-22-56862(R); Published: 31-Mar-2022, DOI: 10.35248/1840-4529.22.14.3.346

Abstract

For those researchers like us, who started practicing medicine and have been involved in global health since the late seventies, the picture of the latter given by the COVID-19 pandemic is a vivid indication of its condition and it is a global mess.

Keywords: COVID-19 • Pandemic • Opportunity • Global • Health • Assessment

Introduction

There were many reasons for optimism and enthusiasm after the WHO Alma Ata declaration early September 1978. They included the apparent leadership from WHO, efficient public health tools, for example: wells and filters, mosquito nets, insecticides, swamp drainage, efficient immunization against several very lethal diseases like yellow fever and meningitis and efficient treatment against various diseases like malaria and TB [1, 2].

This led to spectacular achievements such as the eradication of smallpox [3, 4, 5]. However, in 2022, the results are dismal despite trillions of dollars spent on global health for decades on all fronts by international organizations (like WHO, The World Bank, PAHO, UNICEF, etc.), NGOs, bilateral aid, private funds (like the Gates and the Clinton foundations):-

- Polio remains endemic in Afghanistan and Pakistan. Malawi reported the first case in Africa since 2016 on February 17, 2022. According to WHO: "As long as one child is infected all countries are at risk to get 200,000 new cases per year" [6, 7].
- TB claims 1.5 million lives each year. Only one third of the people with multi-drug-resistant TB had access to treatment in 2020. Three million cases were missed by the detection systems and the funding to combat the disease was back to the 2016 level that year [8-10].
- The number of cholera cases remains high and many are not reported. Moreover, it can be re-introduced into many countries like it was in Haiti in the 2010 [11-13].
- Due to the sylvatic cycle in Africa yellow fever cannot be realistically eradicated [14-17].
- Because of the cattle and wild animal reservoirs of Trypanosoma rhodesiense in East Africa, sleeping sickness cannot be practically eradicated.

- In 2007, WHO announced a renewed strategy to eliminate Chagas' disease by 2010. On April 1, 2021, there were 6 to 7 million people infected by *Trypanosoma cruzi* and the disease was found in 21 continental Latin American countries [18,19].
- Meningitis is now extending outside of the Lapeysonnie's belt, which includes 26 countries, and into more forested regions of Africa [20-22].
- Globally after 2015, the ASRs (Age-Standardized incidence Rate) in high-middle, middle, and low-middle SDI (Socio-Demographic Index) regions began to rise and the uptrend remained in 2019. Central, Western, and Eastern Sub-Saharan Africa had the highest ASRs rate in 2019 since 1990 [23]. The main problems linked to the elimination of malaria have not been tackled like: deforestation, agricultural expansion, infrastructure development, the biological differences in Anopheles species adapted to different landscapes, human and mosquito migrations, travelers, climate change [24-26].
- The discovery of a dog-fish cycle in Chad renders a lasting elimination of dracunculiasis improbable [27-28].

I have identified historically wrong priorities and 54 common denominators between the causes of mismanagement of the COVID-19 pandemic in the United States and the disastrous state of global health [29].

Most worrisome are the trends for the diseases mentioned above and there is no sign of imminent or short term eradication. Moreover, lack of capacity is the main obstacle to adequate healthcare in developing countries [30].

- Quantitatively, data are dismal [31].
- Quality wise, the gap is huge and increasing [32].
 Unfortunately, the evolution in various places is not toward improvement particularly in Sub-Saharan Africa.
- Questions have not been raised on the unreliable origin and misutilization of resources. For example:
- On November 30, 2021, the Clinton Foundation donations had plummeted 75% since Hillary Clinton was Secretary of State [33].
- On February 2, 2022, Melinda Gates said she will stop donating the bulk of her wealth to the Gates Foundation [34]
- How many lives could be saved by buying vaccines instead of lifelong, viral-suppressive treatments for HIV/AIDS?

It takes courage and vision to make tough and right choices. Unfortunately, those are the ones leaders must make in resource-limited environments.

I believe that history will not be kind to deciders who fail their people in this regard. Guidelines should be given by international institutions on the establishment of healthcare budget priorities in developing countries [35].

With all the means that we had at our disposal, in 2022 we should have eliminated cholera, polio, malaria, meningitis, Chagas' disease, TB, and HIV/AIDS from the face of the earth.

It is an ignominy for the human race that we did not and it reflects poorly on our level of consciousness, ability to mobilize and organize, and degree of

It is clear that global health has been and still is a huge convoluted nexus wasting lives and treasury [36]. It is high time for it to be transformed radically. I have designed a road map for drastically transforming it with the simplifications required to tackle all healthcare issues much more efficiently and effectively, including: Three values, one need, one urgency, two priorities, three strategies, and seven suggestions [37]

Given the status of global health, it should be considered and implemented without any delay.

References

- Okumu, Fredros. "The fabric of life: what if mosquito nets were durable and widely available but insecticide-free?." malar j 19.1 (2020): 1-29.
- States Environmental Agency: https://www.epa.gov/caddis-vol2/insecticides
- Gentilini M., Caumes E., et al. Medicine Tropicale, Lavoisier editor 3. 2012 http://www.lavoisier.eu/books/medicine/medecine-tropicale-6eed/gentilini/description-9782257203960
- Meunier Y. Tropical Diseases: A Practical Guide for Medical Practitioners and Students. Oxford University Press, 2013. https://global.oup.com/academic/product/tropicaldiseases-9780199997909?cc=us&lang=en&#
- Raphael, Dennis, Joachim Kapalanga, and Yann Meunier, eds. Perspectives on International Research on Science in Africa. Cambridge Scholars Publishing, (2021).
- 6. Baicus, Anda. "History of polio vaccination." World J virol 1.4 (2012):
- 7. Osman, Lorraine. "Vaccines-the best protection against infectious diseases." South African Pharmacist's Assistant 21.4 (2021): 2-4.
- Elziny, Moustafa M., et al. "Case report: development of miliary pulmonary tuberculosis in a patient with peritoneal tuberculosis after covid-19 upper respiratory tract infection." Am J Trop Med Hyg 104.5 (2021):1792.
- AIDS, malaria and tuberculosis are surging. Nature. Int J Sci. 13, 2020, 9. 584, p169: https://media.nature.com/original/magazineassets/d41586-020-02334-0/d41586-020-02334-0.pdf
- Oakees, K,. CHEST physicians. UN aims to eradicate TB by 2030: https://www.mdedge.com/chestphysician/article/175092/pulmon ology/un-aims-eradicate-tb-2030
- Galey, P,. Medical press. 21, (2019): Tuberculosis can be eradicated 2045: experts: https://medicalxpress.com/news/2019-03by tuberculosis-eradicated-experts.html
- Africa. 12. WHO World Health Organization Cholera: https://www.afro.who.int/search/node?keys=cholera
- World Health Organization. Cholera WHO vearly distribution: http://gamapserver.who.int/gho/interactive_charts/cholera/ atlas.html?indicator=i1&date=2009
- Owoicho O, Priscilla A, Charles, Ochieng, Olwal. "Cholera in the Era of COVID-19 Pandemic: A Worrying Trend in Africa?." Int J public heal 66 (2021)
- Norrby, Erling,. "Yellow fever and Max Theiler: the only Nobel Prize for 15. a virus vaccine." J Exp Med 204.12 (2007): 2779-2784.
- Nwaiwu, Akuoma U., et al. "The incidence and mortality of yellow fever in Africa: a systematic review and meta-analysis." BMC infec dis 21.1 (2021): 1-11.
- Vanderslott, Samantha, and Tatjana Marks. "Travel restrictions as a disease control measure: Lessons from yellow fever." Global Public Health 16.3 (2021): 340-353.
- Alkadir, Shemsia, Tegenu Gelana, and Araya Gebresilassie. "A five year trend analysis of malaria prevalence in Guba district, Benishangul-Gumuz regional state, western Ethiopia: a retrospective study." Trop Dis, Travel Med Vac 6.1 (2020): 1-7.
- Haas, L. F. "Eugene Jamot (1879-1937)." J Neu, Neurosur & Psyc 73.6 (2002): 656-656.
- Reithinger, Richard, et al. "Eliminating Chagas disease: challenges and a roadmap." *Bmj* 338 (2009). Cruz, Dardiane Santos, et al. "Serological screening for Chagas
- disease in an endemic region of Northern Minas Gerais, Brazil: the

- SaMi-Trop project." Revista do Instituto de Medicina Tropical de São Paulo 63 (2021).
- World Health Organization Africa. WHO meningitis: Disrihttps://www.afro.who.int/search/node?keys=meningoc occal+meningitis
- Mbaeyi S., Duffy J. et al. CDC Center for Disease Control and Prevention. Meningococcal disease. 24. (2019): https://wwwnc.cdc.gov/travel/yellowbook/2020/travel-relatedinfectious-diseases/meningococcal-disease
- Mazamay, Serge, et al. "An overview of bacterial meningitis epidemics in Africa from 1928 to 2018 with a focus on epidemics "outside-thebelt"." BMC Infec Dis 21.1 (2021): 1-13.
- Liu, Qiao, et al. "Trends of the global, regional and national incidence of malaria in 204 countries from 1990 to 2019 and implications for malaria prevention." J travel med 28.5 (2021): taab046.
- Mer, Mervyn., et al. "Severe malaria. Current concepts and practical overview: What every intensivist should know." Intens Care Med 46.5 (2020): 907-918.
- Barry, Meagan., Alison H,. "Global EM, Infectious Disease." Snow, Robert W., et al. "The changing limits and incidence of malaria in Africa: 1939–2009." *Ad in parasito* 78 (2012): 169-262.
- Ganasegeran, Kurubaran, and Surajudeen Abiola Abdulrahman. "Epidemiology of Neglected Tropical Diseases." Neg Trop Dis
- Phytochem Drug Discov (2021): 1-36.
 Goodwin, Cecily ED., et al. "Seasonal fishery facilitates a novel transmission pathway in an emerging animal reservoir of Guinea worm." Current Biology 32.4 (2022): 775-782.
- Meunier Y. Global health: what stands behind the name? A global mess? LinkedIn 25, (2015). https://www.linkedin.com/pulse/globalhealth-what-stands-behind-name-mess-yann-meunier/
- Peabody, John W., et al. "Improving the quality of care in developing countries." Dis Contr Priorities in Devel Countries. 2nd edition (2006).
- Meunier Y., Oxford Academic. Health budget priorities in developing countries. Oxford Academic, 1, 2012
- Meunier Y,. Oxford Academic. Health budget priorities in developing countries. Oxford Academic, https://www.ncbi.nlm.nih.gov/books/NBK11790/
- Lachlan M. Hans N. Clinton Foundation donations plummet 75%. Axios. November 30, 2021.https://www.axios.com/clinton-foundationdonations-plummet-87bc5cf3-4633-4544-a29d-3f84daa3be3f.html
- Lazer E,. Melinda French Gates no longer pledges bulk of her wealth Gates Wall Street J. 2, (2022).https://www.wsj.com/articles/melinda-frenchgates-no-longer-pledges-bulk-of-her-wealth-to-gates-foundation-11643808602
- Meunier Y. The 5th Global Public Health Conference, 2022. p57 https://drive.google.com/file/d/1qkLoyPMD_cPMSJ9G4R_VhBH5JrAO FHz0/view