

## Guest Editorial

# COVID-19: An Accelerated Learning Challenge for Developing & Developed Countries Alike

Professor Hassan Bella

Senior Advisor, Sudan Medical Specialization Board  
Former Director, The World Association of Medical Editors  
Former Editor-in-Chief, Saudi Journal of Medicine & Medical Sciences  
Former A Faculty, Johns Hopkins University, Baltimore, USA

Corresponding Author:  
Hassan Bella;  
email:  
hassanbella@yahoo.com

Received 1 April 2020  
Accepted 20 April 2020  
Published 23 April 2020

Production and Hosting by  
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Editor-in-Chief:  
Prof. Mohammad A. M. Ibnouf

Covid-19 is the fastest evolving and most horrific pandemic in the recent global history. It is perhaps the greatest and most daunting challenge humanity has faced since World War II and could bring on so many sequelae and a 'recession with no parallel in the recent past' [1]. The editors of the *Sudan Journal of Medical Sciences* have commissioned this timely issue of the journal to assess the implications of this unprecedented event on Sudan's healthcare sector.

Researching the literature for the purpose of this editorial, using Google Scholar and other authentic search engines, produced a seemingly infinite number of titles. Never in my career as medical teacher and researcher I have encountered such a vast volume of literature produced on one subject in such a very short time.

Apart from the fake and the undocumented information, there are so many conflicting and contradictory views in both the scientific writings and the media. One author remarked that:

Things are changing so fast that even the solid certainties that we thought we were sure of – the reproductive rate, the symptoms of the infection, the key to making a good quarantine – are suspect and need to be re-evaluated.  
[2]

In hospitals around the world, case definitions are changed on daily basis – sometimes twice in a day. There is also controversy regarding management. While some countries are considering Hydroxy chloroquine – upon scientists' advice – for a treatment, scientists in other countries are warning against its use.

Some authors view herd immunity as a possible preventive strategy, while others believe it is not. At present, there is no clear answer about the best way to deal with this pandemic, the data is varied and limited, and the science is unclear. This has led the Editor-in-Chief of *The Lancet* to call the response by the UK's National Health Service (NHS) 'a national scandal' and he urged the Board 'to resign after the dust settles'. He commented:

We shouldn't be in this position. We knew in the last week of January that this was coming. We wasted February when we could've acted. Time when we could've ramped up testing. Time when we could've got personal protective equipment ready and disseminated. The hypocrisy of clapping NHS workers

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and yet the government not supporting them to go into that frontline is tragic and it was preventable. [3]

One fact cannot be disputed: the economic impact of the pandemic in Sudan and similar countries will be devastating if the infection rate follows that seen in developed Western countries. We do not yet feel it because we are in the shock stage.

Social media during the pandemic has been described as both a blessing and curse. Despite the information chaos, both the internet and social media have proved to be invaluable vehicles providing scientific and health education material for both health workers and the public. Some respectable institutions recommended the careful use of social media and some have created Corona Virus Apps. I would like to take this opportunity to urge my colleagues not to post anything on the social media which is not authentic and accurate. The good news is that many highly-regarded international institutions have launched websites and search engines for COVID-19. For example, Johns Hopkins University have created 'Global Health Now' [4]. They have also produced a free teach-out 'Fighting COVID-19 with Epidemiology' [5]. Meanwhile, the Stephen B. Thacker CDC Library is collecting COVID-19 research articles and compiling them into an easily accessible and downloadable data base – updated every day – to help researchers find the latest COVID-19 research [6]. The World Health Organisation (WHO) regions provided Guidance Notes on COVID-19 [7] and also introduced the WHO Health Alert on WhatsApp in the 3 main languages [8].

At the time of writing this editorial, the number of cases of COVID-19 is still on the increase. However, we have already learnt many lessons and we will certainly continue to learn more as the pandemic progresses or regresses. China has illustrated that COVID-19:

[C]an be limited when public health outbreak response strategies and tactics are implemented early. In low and middle income countries (LMICs) programs must be strengthened by ensuring that at least minimum requirements for infection prevention and control (IPC) are in place as soon as possible. [9]

Another lesson to learn – particularly pertinent to Sudan – is that meagre resources should not stop us fighting the Corona virus. Recent events have revealed that no single health system anywhere in the world was ready for a pandemic of this scale. We can learn from the mistakes made by healthcare systems in other countries.

One good thing we learned from this pandemic is the importance of collaboration. Unlike politicians, researchers all over the world opened their doors in an unprecedented act of global collaboration. Research secrecy and competition are no longer the priority, saving lives is. A Harvard professor working on a Corona Virus trial recently noted that the 'ability to work collaboratively, setting aside your personal academic progress, is occurring right now because it is a matter of survival' [10]. Evidence of this ethos in our part of the world is visible in the establishment of an African Taskforce for Corona Virus Preparedness & Response (AFTCOR).

The pandemic has revealed the inadequacy and fragility of the health systems across the world. We should learn from the experiences of others, and gather together data concerning the numbers of all health personnel in our country, together with hospital

readiness checklists, so we can know if we are prepared for COVID-19 or any other epidemic/pandemic that might occur in the future. While it is true that malaria and other tropical diseases have a higher mortality rate than COVID-19, the difference is that these diseases do not require ICUs or ventilators to manage and therefore do not crowd hospitals. Moreover, the Corona crisis has shown the value of some medical specialties that are not usually known to the public and even to some health professionals, namely epidemiologists and physician scientists. These are now widely recognized as crucial members of the health team.

Perhaps the most important lesson which COVID-19 has taught us is the importance of allocating enough budget and resources for our national health services. Until recently (before the December revolution), expenditure on healthcare in the Sudan was outrageously low. Most of the annual budget used to go to the army and security forces, and the doctors and health personnel – who are now risking their lives to wage war against this treacherous virus – are poorly funded and poorly equipped. In the grip of this pandemic, every government is forced to acknowledge the vital importance of healthcare professionals to the strength and stability of the nation. Since it has been demonstrated that that health workers alone cannot fight the virus, the role of other humanitarian workers is immensely important. A new culture of voluntary work in Sudan needs to be implemented and promoted across all levels of education. Moreover, in view of our limited resources, especially in the numbers of ICU beds and staff, the only strategy for Sudan in dealing with this calamity is prevention and possibly containment of the pandemic.

Corona is not all evil. In a televised speech, the WHO Director General remarked that, 'COVID-19 is taking so much from us. But it is also giving us something: the opportunity to come together as one against a common threat, and to build a common future' [11]. The awareness revolution created by the Corona health crisis encourages governments, healthcare organizations and the general population to listen to some wise people from all walks of life. It is good to hear some rational voices speak up in a world dominated by corrupt politicians. Bill Gates is one of those sane and wise people who contributed to the Corona talks. He imparted some thought-provoking messages. He strongly believes that 'there is a spiritual purpose behind everything that happens'. It is worth quoting here few of his messages:

- 'COVID-19 reminds us that we are all equal, regardless of our culture, religion, occupation, financial situation or how famous we are'
- 'It is reminding us how precious our health is'
- 'It is reminding us of how materialistic our society has become'
- 'It is reminding us of how important our family and home life is'
- 'It is reminding us to keep our egos in check and that no matter how great we think we are or how great others think we are; a virus can bring our world to a standstill'
- 'It is reminding us that after difficulty, there is always ease'

He concludes that 'whereas many see Corona COVID-19 virus as a great disaster', he sees it as 'a great corrector' [12].

Finally, we need to remember the psychological aftermath of the pandemic. One author rightly observed that 'Wuhan's COVID-19 crisis is easing; its mental health disaster is just beginning' [13]. This in fact provides a great opportunity for our researchers to investigate the psychological effects of the pandemic. The existing vast and increasing literature on all aspects of the pandemic also provides a chance for writing review articles if not meta-analysis and systematic reviews.

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