Show Me the Money

396. Florencio Travieso
Healthcare Data: A Holy Grail for Data Monetisation

401. Hans Erik Henriksen
Chronic Disease Management – Need For a Paradigm Shift to Reduce Costs and Maintain High Quality of Treatment

407. Janette Hughes et al
Introducing Hospitalisation@Home - Analysed Using the MAFEIP Tool

415. Panagiota Pietri
COVID-19 Pandemic: Health, Social and Economic Consequences

419. Emma Sutcliffe
Patient Engagement – An Adjuvant Therapy With Demonstrable ROI
COVID-19 Pandemic: Health, Social and Economic Consequences

Author: Panagiota Pietri | Cardiologist | Research Institute for Longevity and Aging-Related Diseases | Athens, Greece

The spread of the novel coronavirus SARS-COV-2, originating from Wuhan, China two years ago, has brought dramatic changes in global health systems, leading to thousands of deaths worldwide, jeopardising the treatment of patients with chronic diseases and pushing societies to psychological breakdown. If economic ‘dyspragia’ is added, the mixture of the COVID-19 pandemic becomes explosive.

Key Points

- The COVID-19 pandemic has brought dramatic changes in global health systems.
- Initial restrictive measures effectively reduced active cases, hospitalisation and death rates but repetitive lockdowns have led to health, social and economic decline.
- Given that the least developed countries are far behind others in vaccination programmes, the hope for a pandemic termination seems a utopia.

The shock from the arrival of SARS-COV-2 in Europe and the absence of any preparations for the viral attack, along with the lack of data from China, forced several European countries to impose strict restrictions ('lockdown') as the only effective measure to prevent virus spread and contamination. Although initial restrictive measures seemed to effectively reduce active cases, hospitalisation and death rates, the repetitive lockdown periods led to health, social and economic decline. Many of the scheduled therapeutic interventions, including surgical procedures, were postponed, whereas outpatients with chronic diseases were deprived of public health care due to the dedicated management of COVID-19 patients. Moreover, the psychological burden from the sequential imposed restrictions in everyday life and the job losses, particularly among the poorest and most vulnerable citizens, led to an increase in depression and anxiety disorders. Interestingly, in Greece, domestic violence increased after withdrawal of restrictions. Notably, apart from the lockdown-related psychosocial adverse events, patients with COVID-19 also suffered from long psychological impairment after hospital discharge.

The unfavourable effect of lockdown and COVID-19 hospitalisations on economic figures was also evident. Governments spent a huge amount of money to support almost every business in the private sector, both employers and employees, thus fuelling a future economic recession. The economic burden of healthcare systems due to the long hospitalisation of COVID-19 patients and the subsequent rehabilitation was also considerable.

The initial enthusiasm derived from the onset of mass vaccinations in January 2021 was replaced, a few months later, by scepticism about their effectiveness to stop the pandemic. Although hospitalisation and death rates were decreased, the authorised vaccines proved to be less sufficient to interrupt the spread of SARS-COV-2 and thus, to avoid contaminations. Moreover, given that the least developed countries are far behind others in vaccination programmes, the hope for a pandemic termination seems a utopia, at least for some countries. According to the recent World Health
Organization arguments, vaccination is a significant tool, but it is not sufficient itself to solve the problem. Other measures should also be implemented. In addition, the worrying social phenomenon that emerged during the vaccination period, namely the division of the population into vaccinated and unvaccinated citizens, may have dramatic effects for social cohesion and solidarity and should be taken into account from the authorities when mandatory vaccinations are under consideration. In addition, the deprivation of unvaccinated people from consumptive and social activities may further strengthen health, social and economic destabilisation.

Given the abovementioned detrimental effects of the COVID-19 pandemic, the reasonable question is how can we escape from this difficult situation? How will we manage to reverse the health, social and economic distress?

Several measures may be proposed:

- Governments should be supportive and reassuring, avoiding punitive actions. Authorities should encourage citizens to follow health protocols and be vaccinated. Vaccine hesitancy may be overcome with public dialogue where the pros and cons of vaccination will be analysed by expert scientists with divergent position statements. Official approval of more vaccine platforms may also aid to this direction. Moreover, donation of vaccines to poorest countries will increase the rates of vaccination in those countries, thus reducing the risk of new viral mutations and subsequent uncontrolled spread.

- Model countries that managed to restrain the pandemic should guide health policies of other countries. There is the paradox where countries with high vaccination rates, such as United Kingdom or Israel, presented high rates of COVID-19 cases due to the predominance of the more infectious delta variant in August 2021, however, with decreased mortality rates among vaccinated people. On the contrary, countries that implemented less restrictive measures such as Sweden, managed to almost eliminate COVID-19 since the number of active cases showed a significant constant decrease, beginning from April 2021 (Our World in Data). Thus, lockdown and quarantine measures may not be the key answer to the pandemic limitation. On the contrary, return to normal living activities with adoption of healthy protocols and frequent diagnostic tests may be a more effective strategy for both disease control and economic stability.

- Public healthcare systems should not be confined to COVID-19 patients. Patients with chronic diseases must continue to take advantage of public health care. Hospitals dedicated to contagious diseases may be recruited instead of general hospitals. Accordingly, private health systems should take part in the battle against COVID-19 by giving hospital beds for COVID-19 patients and/or lowering the hospitalisation costs for non COVID-19 patients. In every case, governments should provide financial support for both public and private health sectors.

- Emphasis should be given to patients with chronic psychiatric diseases or newly, pandemic-related, psychological disorders. Growth of infrastructures focusing on psychiatric support are warranted.

In conclusion, both governments and societies should work to alleviate the adverse effects of the pandemic. Hard restrictions, punitive measures and social division are harmful and should be avoided. By contrast, implemented measures with human orientation may inspire people and lead to the successful management of the pandemic.

Conflict of Interest
None.

Lockdown and quarantine measures may not be the key answer to the pandemic limitation ... return to normal living activities with adoption of healthy protocols and frequent diagnostic tests may be a more effective strategy for both disease control and economic stability