

International Journal of Scholarly Research in Biology and Pharmacy

Journal homepage: https://srrjournals.com/ijsrbp/ ISSN: 2961-3310 (Online)



(REVIEW ARTICLE)



COVID-19: The complex background of a pandemic

Vogt PR 1, del Valle LD 2 and Fimia DR 3,*

- ¹ EurAsia Heart Foundation, Switzerland.
- ² Parasitology Department. Regional High Specialty Hospital (HARE), Dr. Juan Graham Casasús, México.
- ³ Faculty of Health Technology and Nursing (FHTN), University of Medical Sciences of Villa Clara (UMS-VC), Cuba.

International Journal of Scholarly Research in Biology and Pharmacy, 2023, 03(01), 018-022

Publication history: Received on 11 July 2023; revised on 26 August 2023; accepted on 28 August 2023

Article DOI: https://doi.org/10.56781/ijsrbp.2023.3.1.0035

Abstract

The struggle between man and infectious diseases dates back to the very beginning of civilization. It must be taken into account that the increase of infectious entities has not been, nor is it something casual, but rather, consequences derived from the bad actions and management of the human being on the ecosystems. The objective of the present investigation consisted in arguing, in the light of the new pandemic of COVID-19, the complex framework that encloses this pandemic with its various twists and turns and points of view that turn it into a pandemic of paradoxes. It is concluded that the current situation that the planet is living, because of the new coronavirus is one more effect, derived from the bad proceeding of the anthropogenic activity, accumulated during thousands of years, so that undoubtedly through this study, both the scientific community and the society will have a much clearer idea about COVID-19 itself, where we do not know yet if the virus will become endemic, recurrent year after year or finally will be controlled, so it is needed the joint contest of all human beings who inhabit this planet to achieve victory.

Keywords: Anthropogenic; COVID-19; Background; Pandemic.

1. Introduction

The struggle between man and infectious diseases dates back to the very beginning of civilization.1 Throughout history, mankind has suffered the scourge of an infinite number of entities with varied etiological diversity (viral, bacterial, fungal and parasitic), which have spread death and incapacity among millions of the planet's inhabitants (Metcalf and Flint, 1975; Kyle, 2008; Troyo *et al.*, 2008; WHO, 2009). The increase in re-emerging and emerging diseases in recent decades has greatly complexified the epidemiological picture at the global level (Troyo *et al.*, 2008; Cassab *et al.*, 2011; Maron *et al.*, 2011), where the occurrence of several epidemic and pandemic outbreaks has been evident, with marked repercussions on human health and that of other animals (Delatte et al., 2008; Dehecq *et al.*, 2011; Lugones and Ramírez, 2012; Gould *et al.*, 2017). It must be taken into account that this increase in infectious entities has not been, nor is it something casual, but rather the consequences of human mismanagement of ecosystems (WHO, 2009; Fimia *et al.*, 2015; Gould *et al.*, 2017). The current situation that the planet is experiencing due to the new coronavirus is one more effect, derived from the mismanagement of anthropogenic activity, accumulated over thousands of years (Berovides and Gerhartz, 2007; Fimia *et al.*, 2015; Sun *et al.*, 2020).

The new coronavirus (2019-nCoV) identified on December 31, 2019 in Wuhan, China, currently officialized as SARS-CoV-2, produces COVID-19. Moreover, this virus is the first of its family to be declared a pandemic by the World Health Organization (WHO) on March 11, 2020 (WHO, 2020). Global epidemiological studies of coronavirus (CoV) over 15 years have shown that bats in Asia, Europe, Africa, America and Australia are reservoirs for a wide variety of viruses, harboring and spreading these infectious agents quite easily, increasing their transmission capacity (Fan *et al.*, 2019; Wang, 2019; Woo and Lau, 2019).

^{*} Corresponding author: Rigoberto Fimia Duarte

The truth is that we do not yet know whether the virus will become endemic, recurrent year after year or finally be controlled (Amanat and Kramer, 2020; Dhama *et al.*, 2020; Fan *et al.*, 2020; Nomier *et al.*, 2020; Chowdhury *et al.*, 2021; Moore and Offit, 2021). Nor whether it prevents, in addition to disease, also infection. And, in addition, the pace of vaccination is slow, with economic interests and irregular distribution, which has given way to the emergence of new waves, and the appearance of mutations that could hinder the effectiveness of current vaccines (Amanat and Kramer, 2020; Chowdhury *et al.*, 2021; López, 2021; Moore and Offit, 2021).

COVID-19 is a pandemic of paradoxes (Horton, 2020)²⁵, where such a pandemic had and continues to have such a profound international effect. These paradoxes appear, for example, in (i) the manifestation of the disease in different risk groups; (ii) in its differential way of affecting high, medium and low socioeconomic groups; (iii) in the great scientific capacity available with limited political and social impact; and (iv) in the wasted opportunity of great world powers that, having everything, lost control of the pandemic.

According to Prof. Paul R. Vogt (2020), COVID-19 is not only a mechanical ventilation problem, but affects the heart in a similar way. Thirty percent of all patients who do not survive in the intensive care unit die for cardiac reasons, where the last possible therapy for invasive pulmonary insufficiency is cardiological or cardiosurgical: the use of an "ECMO", the method of "extracorporeal membrane oxygenation", i.e., the connection of the patient to an external, artificial lung, which in this clinical picture can take over the function of the patient's lungs until they are functioning again. The problem in relation to the new pandemic is much more complex and has dissimilar and varied edges, both the level of media coverage and a large number of readers' comments should not be accepted without contradiction in terms of facts, morality, racism and eugenics. They urgently need objection based on reliable data and information. The facts presented come from scientific articles that have undergone "peer review" and have been published in the best medical journals. Many of these facts were known before the end of February. If these medical facts had been noted and ideology, politics and medicine could have been separated, Switzerland would probably be in a better position today: we would not have per capita the second most COVID-19 positive people in the world, and significantly fewer people who lost their lives in the context of this pandemic. In addition, we would most likely not have a partial and incomplete lockdown of our economy, and we would not have contentious discussions about how we can "get out of here."

It is understandable that everyone wants to understand the scope of this pandemic in one way or another. However, day-to-day arithmetic does not help us, because we do not know how many people have had contact with the virus without consequences and how many people have actually become ill. The number of asymptomatic COVID-19 carriers is important for making assumptions about the spread of the pandemic. However, to have usable data, extensive mass testing would have to have been conducted at the beginning of the pandemic. To assess the severity of the pandemic, we would need other data: an accurate and globally recognized definition of the diagnosis "of COVID-19 disease": a) positive laboratory test + symptoms; b) positive laboratory test + symptoms + corresponding result on lung CT; or c) positive laboratory test, no symptoms, but corresponding findings on lung CT. The number of hospitalized patients with COVID-19 in the general ward, the number of patients with COVID-19 in the intensive care unit, the number of patients ventilated for COVID-19, the number of patients with COVID-19 on ECMO, the number of deaths from COVID-19, and the number of infected physicians and healthcare personnel. These numbers alone give an idea of the severity of this pandemic and the dangerousness of this virus. The current accumulation of numbers is very inaccurate and has a touch of "sensationalism for the press", the last thing we need in this situation (Vogt, 2020).

Is it just "a common flu" that is transmitted every year and we generally do nothing about it, or a dangerous pandemic that requires strict measures? To answer this question, one definitely does not need to ask statisticians, who have never seen a patient. Pure statistical evaluation of this pandemic is immoral anyway. We need to ask the people on the front lines. The claim that "flu" is equally dangerous and costs the same number of victims every year is incorrect. Furthermore, the statement that one does not know who is dying with COVID-19 and who is dying because of COVID-19 is also not correct. According to the current state of knowledge, one generally cannot speak of a "common flu". And that is why society's rampant epidemic is not a recipe. A recipe, of course, that Great Britain, the Netherlands and Sweden tried and gave up one after the other (Vogt, 2020).

In principle, there were eight CONCRETE AND CLEAR WARNINGS in 17 YEARS that something like this was coming. AND THEN IT REALLY CAME!. In December 2019, nine months after Peng Zhou's warning. And the Chinese report to WHO after seeing 27 patients with atypical pneumonia without death. The Taiwan reaction chain begins on December 31, which consisted of a total of 124 measures, all published by March 3, 2020. And no, it was not published in Taiwanese Chinese in an Asian medical journal, but with the collaboration of the University of California in the "Journal of American Medical Association". All one had to do: as of December 31, 2019 "bat + coronavirus" in "PubMed", US National Library of Medicine, enter and all data were available. And all one had to do was to follow the publications until the end of February 2020 to know what we had 1) what to expect and 2) what to do.

You have to be very clear, that politics is one thing, and scientific work is another. By the end of February 2020, so many excellent scientific papers with Chinese and mixed American-Chinese authors had appeared that one could have known what the pandemic was all about and what should be done.

1.1. Why did we miss it all?

Because neither politicians, the media nor most citizens are unable to separate ideology, politics and medicine in such a situation. Viral pneumonia is a medical problem, not a political problem. Thanks to political and ideological ignorance of medical facts, Europe quickly became the world center of the pandemic, right in the middle we have Switzerland with the second highest infection rate per capita. Politics and the media play a particularly inglorious role here. Instead of focusing on their own failures, the population is distracted by the continuing stupid onslaught from China. Plus, as usual, bashing Russia and Trump. You don't need to like Trump at all, but until the US, is on par with Switzerland in terms of COVID 19, and deaths per capita, it is still 30,000 deaths short.

1.2. On the future of the pandemic

This pandemic raises many political questions. "Foreign Affairs" with Donald Trump and Anthony Fauci on the cover wrote on March 28, 2020, "The plagues tell us who we are. The real lessons of the pandemic will be political."

The first questions will definitely affect our healthcare system. With a budget of 85 billion, Switzerland, in terms of the number of crown patients per million inhabitants, came in second place worldwide. Congratulations, what a pity! Basic and cheap material is missing in Switzerland after 14 days. This comes when self-proclaimed "health politicians", "health economists" and IT experts spend billions on projects like e-health, electronic health cards, expensive clinic information systems (ask the Cantonal Hospital in Lucerne!), TONS of computers and "Big Data"." Invest and thus remove billions from the health care system that are fully utilized. And the medical profession and the WFH are literally too stupid to finally stand up to it. They prefer to be called scammers and crooks every week. Switzerland finally needs to investigate how much of 1 million cash funds are still used for medical services, which directly benefit the patient and how much embezzled money flows to lobbying associations outside the industry, who are shamelessly enriching themselves on the 85 billion pies, without ever having seen a patient. And, of course, finally there is a need for proper quality control of medical services. I do not want to take further steps here as part of the reorganization of the Swiss healthcare system (Vogt, 2020).

The international questions mainly concern our relationship with China and Asian countries in general. Critical comments: yes, but the constant and stupid "onslaught" of other nations cannot be a recipe for tackling global problems together. I don't even want to talk about "solving". Instead of spewing meaningless propaganda, perhaps one should deal with authors who actually have something to say at a high level, such as:

- Pankaj Mishra: "From the Ruins of Empire."
- Kishore Mahbubani: "The Miracle of ASEAN. A catalyst for peace"
- "Has the West lost it?"
- "Can Asians think?"
- Lee Kuan Yew: "One Man's View of the World."
- David Engels: "On the road to empire"
- Noam Chomsky: "Who rules the world".
- Bruno Macàes: "The Dawn of Eurasia"
- Joseph Stiglitz: "Rich and Poor".
- Stephan Lessenich: "On Our Side the Flood" Parag Khanna: "Our Future"
- Parag Khanna: "Our Asian future".

Reading does not mean that all these authors are right about everything. But it would be of great value for the West, including Switzerland, to replace know-it-all, ignorance and arrogance here and there with facts, understanding and cooperation. The only alternative is to try to eliminate our supposed competitors sooner or later in a war. Everyone can decide for himself what to think of this "solution".

In this sense, one can only hope that humanity remembers better that dreaming is always allowed. The challenges are global. And the next pandemic is just around the corner. And perhaps this will be caused by a super virus that will take on a dimension we would rather not imagine.

2. Conclusion

The current situation that the planet is going through, due to the new coronavirus is one more effect, derived from the bad behavior of anthropogenic activity, accumulated over thousands of years, so that without any doubt, through this study, both the scientific community and society will have a much clearer idea about COVID-19 itself, where we do not yet know if the virus will become endemic, recurrent year after year or finally be controlled, so the joint effort of all human beings who inhabit this planet is needed in order to achieve the longed-for success.

Compliance with ethical standards

Acknowledgement

To Prof. David del Valle Laveaga for his financial contribution towards the publication of this manuscript.

Disclosure of conflict of interest

No conflict of interest exists among the Authors.

References

- [1] Amanat F, Krammer F. (2020). SARS-CoV-2 Vaccines: Status Report. Immunity Perspective/CellPress. 52: 583-589.
- [2] Berovides V, Gerhartz JL. (2007). Diversity of life and its conservation. Scientific and Technical Editorial. pp. 98.
- [3] Cassab A, Morales V, Mattar S. (2011). Climatic factors and dengue cases in Monteria, Colombia. 2003-2008. Rev Public Health of Colombia. 13: 1-12.
- [4] Chowdhury A, Sajid M, Jahan N, Adelusi TI, Maitra P, Yin G, et al. (2021). A secondary approach with conventional medicines and supplements to recuperate current COVID-19 status. Biomedicine & Pharmacotherapy. 142: 111956.
- [5] Dehecq JS, Baville M, Marqueron T, Mussard R, Filleul L. (2011). The remergence of the chikungunya virus in Reunion Island on 2010. Evaluation of the mosquito control practices. Bull Soc Pathol Exot. 2:153-60.
- [6] Delatte H, Dehecq JS, Thiria J, Domerg CP, Fontenille D. (2008). Geographic distribution and developmental sites of *Aedes albopictus* (Diptera: Culicidae) during a Chikungunya epidemic event. Vector- Borne and Zoonotic Diseases. 8: 25-34.
- [7] Dhama K, Khan S, Tiwari R, Sircar S, Bhat S, Malik YS, et al. (2020). Coronavirus Disease 2019-COVID-19. Clinical Microbiology Reviews. 33: e00028-20.
- [8] Fan Y, Zhao K, Shi ZL, Zhou P. (2019). Bat Coronaviruses in China. Viruses. 11: 27-32.
- [9] Fang J, Liehua D, Lianging Z, Cai Y, Cheung CW, Xia Z. (2020). Review of the clinical characteristics of Coronavirus Disease 2019 (COVID-19). The Journal of General Internal Medicine. DOI: 10.1007/s11606020-05762-w
- [10] Fimia DR, Marquetti FM, Iannacone J, Hernández CN, González MG, Poso del Sol M, Cruz RG. (2015). Anthropogenic and environmental factors on the fauna of culicidae (Diptera: Culicidae) of Sancti Spíritus province, Cuba. The Biologist (Lima). 13: 41-51.
- [11] Gould E, Pettersson J, Higgs S, Charrel R, de Lamballerie X. (2017). Emerging arboviruses: why today? One Health. 4: 1-13. Horton R. (2020). The Covid-19 Catastrophe. Public Studies. 159: 205-210.
 - DOI: https://doi.org/10.38178/07183089/1924200718
- [13] Kyle JL, Harris E. (2008). Global spread and persistence of dengue. Annual Review. Microbiology. 62: 71-92.
- [14] López RMA. (2021). COVID-19 vaccination in special gynecological and obstetric groups. Journal of Negative & No Positive Results. 6: 434-441.
- [15] Lugones BM, Ramírez BM. (2012). Dengue. Rev Cubana Med Gen Integ. 28: 1-4.
- [16] Maron GM, Escobar GA, Hidalgo EM, Clara AW, Minnear TD, Martínez E, et al. (2011). Characterization of Dengue Shock in pediatric patients in El Salvador. Pediat Infect Dis J. 30: 449-50.

International Journal of Scholarly Research in Biology and Pharmacy, 2023, 03(01), 018-022

- [17] Metcalf CL, Flint RL. (1975). Destructive insects and useful insects. 2nd ed. Havana: People and Education.
- [18] Moore JP, Offit PA. (2021). SARS-CoV-2 Vaccines and the Growing Threat of Viral Variants. JAMA. 325: 821–822.
- [19] Nomier YA, Rao DS, Suhagi AH, Ahmed RA. (2020). Distinctive Therapeutic Strategies against Corona Virus-19 (COVID-19): A Pharmacological Review. Sys Rev Pharm. 11: 544-561.
- [20] Sun Z, Thilakavathy KT, Kumar SS, He G, Liu S.V. (2020). Potential Factors Influencing Repeated SARS Outbreaks in China. International Journal of Environmental Research and Public Health. 17: 1633.
- [21] Troyo A, Calderón AO, Fuller DO, Solano ME, Avedaño A, Arheart KL, et al. (2008). Seasonal profiles of *Aedes aegypti* (Diptera: Culicidae) larval habitats in an urban area of Costa Rica with a history of mosquito control. J Vector Ecol. 33: 76-88.
- [22] Vogt PR. (2020). A mid-term review or analysis of morals, medical facts, and current and future policy decisions. Interview with Dr. Paul R. Vogt. Vogt. April 09, 2020.
- [23] Wang BX, Fish EN. (2019). Global virus st outbreaks: Interferons as 1 responder. Seminars in Immunology. 43: 101300.
- [24] WHO (World Health Organization). (2009). Dengue and dengue hemorrhagic fever. Descriptive note N- 117. Revision of May 2008.
- [25] WHO (World Health Organization). (2020). Draft landscape of COVID-19 candidate vaccines. In: https://www.who.int/blueprint/prioritydiseases/key-action/novel-coronaviruslandscape-ncov-21march2020.PDF?ua=1
- [26] Woo PCY, Lau SKP. (2019). Viruses and Bats. Viruses. 11: 880-884.