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Wisely choosing the numbers during the pandemic

A B S T R A C T

Having the right data is critical in managing a crisis. More so, at the time of a pandemic. Rather than relying heavily on absolute numbers, we discuss alternatives that could improve testing numbers in India.

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Dear Editor,

The readily available statistical data in the press, social media, and in the medical bulletins and journals, regarding the ongoing COVID-19 pandemic, has created curiosity, but also confusion amongst the common people and in the medical fraternity. It is quite difficult to understand the importance of these figures, for most people.

Regarding monitoring for COVID-19, we believe that the positivity rate of tests on a daily basis is a better indicator of infectivity rather than the cumulative positive numbers since the disease is in a dynamic condition, and the dynamics change rapidly and widely on a daily basis. If the cumulative rate should be considered, then a maximum of one week or the incubation period of two weeks will perhaps be more reliable. The cumulative numbers of tests done should be used as a guide to see how the respective States have been doing in terms of testing.

We see in the media an over-reliance on absolute numbers of positive cases from each State. The tables of numbers have become shaming tables rather than used for planning. Consequently, some States and administrators may be trying to hide behind numbers by not doing or declaring an adequate number of tests, which places states at risk of inadequate preparation for the pandemic. These tables are useless in planning strategies and more so for comparing responses between states when their testing rates vary widely. The number will only depend on the number of tests done and the total population of a state. It is a known fact that the density and population number of states vary widely in India. We have seen, for example, that the State of Andhra Pradesh showed the maximum number of positives of more than 10000 on July 29, 2020. But the number of tests done on that day was more than 70,000, which is a commendable effort giving one positive in seven tests and far more than some of the states listed below Andhra. And more importantly, the healthcare teams know where the positive cases are coming from and can focus the efforts on those locations to contain the pandemic and reduce mortality. Even the public will be alerted and prepared in those locations, thereby increasing practices of precautions followed and reporting early symptoms and indentify risk factors.

Prime among the perils of not testing are a false sense of security in the people and health care workers, a sense of helplessness when they find more infected and dead despite low numbers declared, an inability to plan a scale and rate of escalation of resources and preparedness. Planning and escalation of resources may be revised on a weekly or biweekly basis for the same reason. If the cases are missed, so will be the number of deaths due to COVID-19. A state with a low number of deaths, with a poor record of testing, may not show a high number of COVID-19 deaths. The danger here is missing an aggressive strain of the virus or a contributing risk factor. Despite all these advantages stated above, sadly, the positivity rates and testing numbers are not widely publicized. These should be done on an urgent basis.

Fortunately, due to the fast dynamics of the pandemic, any state adopting such a strategy now, even if they have not been testing until now, can save many lives and reduce further morbidity and mortality.

“We are drowning in information while starving for wisdom. The world henceforth will be run by synthesizers, people able to put together the right information at the right time, think critically about it, and make important choices wisely”. - E. O. Wilson.

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