First 65 Days Trajectory of COVID-19 Outbreak in Pakistan
(Facts, Hopes and Expectations) an Evidence Review

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Received: May 18, 2020 Published: June 15, 2020

Abstract

There is a significant risk to the public health in world and strong apprehensions in Pakistan due to emerging infectious disease known as Covid-19 which is characterized by a completely unique mode of pathogen. In this paper we reviewed the first 65 days trajectory of Covid-19 outbreak in Pakistan and its impact on the coming days, weeks and months. Since the first reported case of infection (COVID-19) caused by the SARS-CoV-2 on February 26th, 2020, in Karachi, (Sindh), until there has been a total of 15760 confirmed cases with 313 victims as of April 30, 2020. The identified route of (COVID-19) in Pakistan was through patients with travel history from various countries, such as Iran, China, Afghanistan and India coming to Pakistan. Further the data revealed that out of the total COVID-19 cases in Pakistan 78 percent cases were reported from visitors coming from Iran, the remaining statistic filled by religious centre Rewind and some by local transmission. Pakistan responded toward the pandemic naturally through management and arrangement of quarantine facilities, field hospitals, and necessary testing and protective kits. It was established early that the state of affairs of quarantines were not adequate, but was supportive to a big extent. The lockdown damaged daily wage labor financially and we have compiled a template for monitoring this impact till this crisis is over. Further COVID-19 higher education response of online system halted due to connectivity and quality issue. We suggested that to reduce the emerging risks of Covid-19 in future, the government should launch contemporary isolation house immediately at the departure and arrival points on border air ports as well as on communication routs and in major hospitals. We proposed hybrid education management for online system and suggested to generate catalogues and database for daily wage labour for on time support in future.

Key words: COVID-19, pandemic; Emergency Quarantine; Partial lockdown

Introduction

Multiple emerging and reproductive infections microorganisms can pose a serious threat to public health and food security. Pakistan needs to identify these threats, maintaining local, regional and global health Security issues. Regardless of the region, country and race infections are a serious threat. Emerging infectious diseases (EID) has been defined as "infections that first appeared in a new way [1]. Emerging infectious diseases are a burden on public health and the national economy and can affect environmental, ecological and socioeconomic factors of the nations. Globalization of food markets, changes in agriculture and livestock practices, climate and environmental degradation allowed new and easy passage for re-immersion of infectious agents and first appear in unusual areas [2]. The infectious and emerging infectious disease can be a terrifying situation for the third World Countries like Pakistan. Pakistan have been hit a number of pandemic diseases, due to regional geographical and environmental conditions [3]. According to WHO, the country is in danger of spreading many outbreaks due to inadequate basic health care of the future planning. Improper cleaning, crowded city, inadequate number of medical practitioners and inadequate medicines, contami-
nated water, lack of awareness among people. Public, Healthcare attention to health conditions [4]. The government is dealing with a large number of refugees and internally homeless people, religious misunderstandings, and resources limitations. Due to limited resources and financial constraints according to recent data, Pakistan spends 4.7% of its total budget on healthcare, which is not enough for the fifth populous country in the world. Due to defects in healthcare practices and environmental conditions, pandemic diseases always look for local outbreaks [5]. This review aims to critically summarize the first 65 days from 26th February to 30 April (2020) in understanding the coronavirus trajectory of Pakistan, as well as the strategies in prevention and treatment.

Method and Approach
This was a desktop study. Most of the information’s were collected from (http://covid.gov.pk/) which is web portal of COVID-19 and further information from print, electronic and social media from the timeline of 26th February to 30 April 2020 about the current situation and challenges of Pakistan against COVID-19 War.

Results and Discussion
2020 COVID-19 Outbreak in Pakistan
The 2019–20 coronavirus pandemic trajectory to Pakistan started on 26 February 2020, when a scholar in Karachi found positive upon returning from Iran [6]. By mid-March, cases reported frequently upon arrival of testing kits in all four provinces, the two autonomous territories, and the federal territory of Islamabad [7]. As of 30 April 2020, there have been over 15,758 confirmed cases with 4052 recoveries and 346 deaths in the country. Punjab has recorded the most cases at over 5,800, while Khyber Pakhtunkhwa has reported the most deaths in the country, a total of 122 [8]. The country has been put under a nation-wide lockdown until 9 May [4] which was initiated on 1 April and later extended twice [9]. According to a media report, Pakistan could have projected 50,000 cases of the COVID-19 by 25 April [10-12]. However, the numeral statistics by then stopped under 15,000, less than half of what was estimated [13]. According to available data sources predicted that a Tabligh Jamaat religious gathering was main super-spreader foundation for outbreak which took place in Lahore in early March 2020 [14], accounting for 27% of cases in the country by late April [15]. Meanwhile Pakistan started vaccine trials in teamwork with Sinopharm a Chinese pharmaceutical company in April 2020 [16] (Figure 1, Table 1 and 2).

An insignificant deviation of record was observed in two different sources (Table 1 & 2) and figure 1. This can be justified and endorsed as to time taken in bringing up-to-date of record. One thing is clear that while observing the data in judgment of the adjacent countries (China and Iran), condition of Pakistan is not as horrible as projected by media. Question arises, how Pakistan managed and sustained such bottom level of COVID-19 cases after 65 days of health emergency. First case in China informed its first confirmed case reported on 10th January, 2020. During this time period action plans were taken by Pakistan to concentrate on Pak-Iran border and international flights termination. Being as a developing country, the trajectory of COVID-19 outbreak could be highlighted in graphical illustration given below (Figure 2, 3, 4 and 5).
COVID-19 Demographic % of Pakistan

Figure 2: COVID-19 Demographic % of Pakistan showing different age groups affected by infection. Interesting to note male population 15.62% age group between 20-30-39 shown higher rate of infection as compared to other age groups. The fact that Pakistan has a higher young population as compared to China, USA and many other affected countries, explains why a majority of the confirmed cases in Pakistan constitute young adults. The thing that we must be worried about is that many youngsters think that coronavirus only affect elderly people because they have weak immune systems and not taking precautionary measures. Data source: http://covid.gov.pk/stats/pakistan

COVID-19 Demographic Diseased % in Pakistan

Figure 3: Covid-19 Demographic Diseased % in Pakistan indicating the novel coronavirus tends to affect men more severely than it does women. The male age groups have higher rates of infection as compared to females. Perhaps it’s because the X chromosome (which women have two of, but men have only one) has a larger number of immune-related genes, giving women a more robust immune system to fight off the coronavirus, SARS-CoV-2. Sex differences aren’t the only factor at play, however. Other groups more vulnerable to COVID-19 include the elderly and people with diabetes, high blood pressure and obesity. Data source: http://covid.gov.pk/stats/pakistan

Can Taftan Prove to be Pakistan's Wuhan?
The number of corona patients in Pakistan is increasing rapidly and after Sindh, the presence of people infected with the virus has been confirmed in Khyber Pakhtunkhwa and Punjab. The total number of people infected with the coronavirus in the country has reached close to 15759 and this number is expected to increase farther [17]. Whether it is a new patient from Sindh or the first case from Punjab and Khyber Pakhtunkhwa, one thing all these victims have in common is that they all came to Pakistan from Iran and spent 14 days in a quarantine center at Taftan areas. Concerns about the facilities and management of the quarantine in Taftan are not new. Ever since the quarantine was set up, there have been accusations of poor conditions and poor hygiene. Now the situation is that on social media, Taftan is being compared to the Chinese city of Wuhan. Wuhan is the site of the coronavirus outbreak and is one of the most affected areas in China. Balochistan officials acknowledged that due to inadequate facilities in the quarantine on the Taftan border, where it had not been particularly helpful in curbing the epidemic, one of the visitors was kept together [18].

Pakistan’s Struggle with COVID-19 Quarantine

In medical science, quarantine means isolating someone for a period of time to prevent the spread of an infectious disease. Government of Pakistan has set quarantine house at borders as well as in various cities. At the same time, the government categorical announced to lockdown metropolitans and highly densely populated municipalities for one month duration. In this line, which we can call it as Chinese approach of self-quarantine, overall country was placed into [19]. But the management presented no competence to retain the citizen inside their houses. For elementary necessities and day-to-day provisions, such as foodstuff and medications, they were acceptable to go outdoors. This is how; selected yards were permitted to keep work and open. These consist of vegetables, general store, and medicine shops. Some commercial and factories were entirely closed, such as industrial zones, barber shops, hotels, weeding hall and barber shops. In initial Phase Zaireens from Iran at once created immense problem for Pakistan. In the first week of March more than 3000 Zaireen were acknowledged and were held in reserve restricted to Taftan. When the number of Zaireen surpassed approximately 6000, it became problematic to be providing lodgings in quarantine house at Taftan. Pakistan was not supposing such massive number and was not organized and equipped for this. At first it was decided to place them at Taftan for 14 days quarantine. But the Zaireen were
not collaborating with the administration, and were with cracks to discharge from the quarantine center. On 26 March it was decided to hand over the Zaireen to their particular provinces from where they belonged. In this way 4596 were dispensed above to provincial administration. They were engaged in several quarantine centers located in Provinces. For instance Airport campus of Ghazi University DG Khan, Multan were initial centers of southern Punjab. In most of the press and electronic media this dispensing over and scattering of Zaireen was underlined as a cause for refinement and spread out of COVID-19 in Pakistan. According to International media reporter Aljazeera TV, Taftan was the epicenter of epidemic in Pakistan. By reviewing a number of tapes slides uploaded by different people, the following problems were identified:

- Insanitary and germ infested conditions
- No accessibility to medical consultants and specialists
- No convenience of medication and treatment
- Inadequate capacity of quarantine
- Storage in food of water and food supply lines

These hitches couldn’t validate for certain quarantine centre. For example at DG Khan a Ghazi University Campus located 25km away from urban ring declared as quarantine centre and further in Multan the quarantine centre was agreed in Industrialized Estate zone for Zaireen returning from Iran. 1247 Zaireen were retained contrary to the existing size of 3000. Zaireen at Sukkur were set aside in Labour Society for quarantine. Residence of these all zones were in deep psychological stress against decision of government for the said quarantine centre. As a whole, the quarantine arrangement was not satisfactory. Therefore Zaireen from Iran were responsible for the mounting epidemic of COVID-19. According to part of hot news on social and electronic media from health ministry 78.2 cases were trace back to the Zaireen travel history coming from Iran (The News International, 2020) [20].

Higher Education Challenge for Pakistan under COVID-19

The COVID-19 pandemic has cast uncertainty on education of at the primary, secondary and tertiary level. To sidestep the swift magnitude of coronavirus, all academic and technical school, colleges and universities were shut down on 13th March, 2020 all through the country. At first this action of government was questioned for the reasons that no substitute preparations were arranged to save time of the students. Such as online classes, reading materials, quiz program, assignment etc. Later on, with the passage of time, the infection was spread out rapidly across the globe as well as Pakistan. It was evidenced that this academic termination was defensible and was a respectable choice [21].

Pakistan has 46.8 million affected students due to the COVID-19 pandemic, out of which 1.9 million are registered at the tertiary level. This pose stands the gravest challenge because universities have enrolled students from overseas and the whole country (Developed and under developed zones). Policies and schemes may miscarry but key assessment is not to finding the middle ground on goals and principles. Our learning system must be retain and move by taking care of the health and safety of all (faculty, scholars and staff), and safeguarding stability of academic programs by being elastic in outcome and accommodating innovative solutions. There are number of challenges in this regard where leadership has a key role to play in this time of crisis [22].

• Internet Connectivity particularly in remote areas
• Faculty’s Lack of enthusiasm for Online Teaching
• All Subjects being Treated Similarly (These broader categories are: i) Arts and humanities; ii) Social sciences; iii) Natural sciences; iv) Biological sciences; and v) Engineering sciences. Lab-based disciplines which may suffer more through online teaching only.

How to Make Things Work

In most parts of Pakistan, due to hot summer, education institutes observed summer vacation during Jun and August. This year all the students will attend classes in hot most months of the year. For some people this may be a simple matter, but technically it is not that sound. All the schools, colleges and universities are not equipped to handle temperature above 40°C and will be a real problem, especially for the small kids. Besides, there is usually outbreak of summer diseases like diarrhea, and dengue. Pakistan may need to arrange a separate session of vaccinating for seasonal disease along with a separate program to beat high temperature to move country clocks time two hours early to use maximum sunlight and secondly in a world where information and facts are a mouse-click away, the title role of the educationalist must change too.

Coronavirus-related disruption can give educators time to rethink the sector with Hybrid learning arrangements. Online teaching should be complimented by at least one month of compulsory condensed face-to-face teaching when the universities open. This hybrid approach will help to maintain a certain level of quality and students will be evaluated the way they have been trained so far.

Regular temperature check of faculty students and staff at entry points to avoid the transmission within community.

A Template to Monitor the Impact of COVID-19 on Pakistan’s Economy

The corona infection has carried us adjacent to an international recession. Government of Pakistan should jerk too exceptionally to evaluate the economic situation [23]. We have accumulated an outline template for observing this influence over the coming days, weeks and months, till this crisis is over. The template categorizes the sectors/industry that could possibly be affected. In addition, we also make available the mechanisms that intrigue in the procedure, and the scales that can be used to monitor and gauge the impact. We may supplement here that it is not a comprehensive list which indicates gradient slope and we will retain informing it as the condition progresses.

The Template

The assumed model spots the sectors/industry that could hypothetically be affected. In addition, the mechanisms concluded which they would be exaggerated are also in case. The third column gives the scales looked-for to gauge this influence.

Daily wage labour Daily wage labour is the most vulnerable segment of our population. At present, Pakistan has a labor force of 72.5 million. 9.5 million are above 50 years age and 63 million are above 15 years age working in different sectors. Out of this total, 7 millions are daily wage worker and 3.6 million are unemployed [24]. Being as a developing country, it was not possible for the government of Pakistan to reach every daily
wage labour for appropriate support for their daily needs. Initially there was partial lockdown in Pakistan. The aim of partial lockdown was to avoid unnecessary interaction and mobility. Partial lockdown was good for daily wage labour. They could go to their work place. In the second phase major cities were locked down. Again it cannot be called complete lockdown, as someone can go outside for the purchase of various items of daily importance. Major markets, hotels and restaurants have been closed completely. After city level lockdown, Pakistan (Federal Government) has announced a relief package of 3,000 rupees per month for 7 million daily wage labour. The following are few recommendation required for Pakistan:

- Planning and supervision of excellence to quarantine capacity
- Work-related protection equipment’s for para-medics and other health workers
- Responsiveness and instruction of common persons
- Management of day-to-day wage labor and other deprived sections of a society
- Accessibility of defensive actions in terms of disinfectant and good personal hygiene
- Convenience of first aid utility on time
- Exceptional transportation capability for COVID-19 patients and dead bodies.
- Availability of treatment in hospitals. On the basis of the above factors, poor countries, like Pakistan are/were more vulnerable and affected the negatively.
- The following are few recommendation required for Pakistan:
  - Pakistan must construct quarantine facilities on all exist and entrance with Iran, China, Afghanistan, and India.
  - Pakistan should establish quarantine facilities at provincial level in all provincial capital cities, Karachi, Quetta, Lahore and Peshawar.
  - Pakistan should initiate online classes as future strategy to avoid break in academic session during epidemic.
  - Pakistan must keep a database for all sort of labour. In this way the government of Pakistan can reach to poor labour on time for support.

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