On Occasion of the COVID-19 Pandemic - One of the Most Important Dilemma: Vaccinate or Not?

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ABSTRACT

Probably in the history of medicine, doctors were not as united as they are today, in that fight against COVID-19, when the pandemic spread incredibly fast - from East to West, from North to South. The COVID-19 pandemic is likely to have unprecedented and unforeseeable consequences, from those on a worldwide/global level to those at the local level - at the level of local communities and families, and individuals (and not just humans, but all other living beings), of which the future will testify in various ways. The consequences will be political, economic, social, but probably to the greatest degree, the consequences of a health nature - systemic and individual. The death toll is high, despite the therapy being applied. We do not currently have a specific and effective therapy against COVID-19. In addition, we do not have a single clinical study that would support prophylactic therapy that could affect COVID-19. All of the therapeutic options now available to us are based on the experience we have gained in treating SARS and MERS. When the vaccine is discovered, at that moment we will be able to say that we have an appropriate and effective method in fighting against COVID-19. Some historians of medicine believe that voluntary vaccination against COVID-19 would be, not only less politically risky but also more effective in protecting the population from coronavirus. It remains to be seen what the new wave of the COVID-19 pandemic, announced by WHO experts these days, and which is expected in the fall of 2020, will bring us.

Keywords: COVID-19, Public health, Vaccination.

1. "LIFE IS UNKNOWN, DEATH IS AN ABYSS FOR US"

Within special meditation and thinking like never before, we have tried to discover ourselves and the ultimate meaning of our existence. We have probably realized how thin is the thread that separates our life from death...
Life and death are incompatible antipodes from whose struggle, as a winner, death always emerges in the end.

Life is a continuance, death is an interruption of that continuance. Life is joy and energy. Death is destruction, sorrow... We cannot see the thin, imaginary line that connects and separates them at the same time, but we feel and sense it...

And so we are all preoccupied with COVID-19, not only doctors and the „ordinary“ world but also pen feather persons. Everything is in the sign of COVID-19, our entire existence, our life, and our loss.

Death is so close and so looming over all of us... And about life and death and our existence, the famous Swiss theologian Maurice Zundel (1897-1975) summarizes it wonderfully in two sentences: „How great a mystery is a death! How great a life mystery is! Because we know very little about both and because life is unknown, and death is an abyss for us“.

The Arab physician and thinker Ibn Sina (Avicenna, 980-1037) in his writings „Epistle Concerning the Healing from the Fear of Death“ says that „Death is nothing but the soul’s abandoning the use of its tools, which are the organs whose assembly is called „a body“. It is just as the craftsman abandons his tools. Because the soul is a non-corporeal substance, and not a phenomenon or accident. According to this, it cannot suffer from decay. When this substance leaves the body, it continues to exist at it is appropriate for it: It is purified of the turbidity of nature, and it enjoys perfect felicity, which cannot be exhausted or annihilated. The sages claimed that there are two deaths: death by will and natural death, so there are also two lives: life by will and natural life. By „death at will“ the sages mean the killing of passions and cutting relations with them, by „life at will“ they imply foods, drinks, and passions...
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that man seeks to achieve in this world, and by “natural life” they mean the eternal survival of the soul in lasting satisfaction, which is achieved by means of the science it had acquired and by removing ignorance. That is why the wise Plato (428-348) bespeak to the one who seeks wisdom, telling him “die according to your will, to live spiritually (by nature)”...

Death is a term that completes the definition of a man. Namely, man is a living being, who thinks and dies. Therefore, the notion of death completes its essence and perfects it, and with its help it rises to its highest spheres (where reason prevails). Therefore, the one who fears death in this manner truly does not know of what it should be feared of, and fears of what from which there is no fear of and what has no effect.

The remedy for ignorance is knowledge: whoever knows he is pure, and whoever is pure, the path of happiness is clear to them and will follow it.” (1).

2. WHAT HISTORY LEARN US?

Probably in the history of medicine, doctors were not as united as they are today, in that fight against COVID-19 when the pandemic spread incredibly fast from Alaska to Tierra del Fuego and from Tokyo to London. It is the biggest global health crisis and the biggest problem and challenge for the current generation of doctors since the Spanish flu in 1918. Many doctors have lost lives, which is not recorded in recent history, saving the lives of infected patients with SARS-CoV-2. All the doctors showed great humanity, altruism, empathy, love and understanding towards the sick person, not sparing themselves in the moments when they might have known that they would lose their life and save the life of the patient. And during this pandemic, doctors proved that the call of doctors is the most humane, noblest and most sublime. The death toll is high, despite the therapy being applied.

We do not currently have a specific and effective therapy against COVID-19. In addition, we do not have a single clinical study that would support prophylactic therapy that could affect COVID-19. All of the therapeutic options now available to us are based on the experience we have gained in treating SARS and MERS. When the vaccine is tested, we will be able to say that we have adequate methods and instruments in the battle with COVID-19. Let’s just remember how many hundreds of millions of people have died from tuberculosis over the centuries and what therapy has not been unsuccessful, from taking beds with patients to balconies, because fresh air was thought to kill Mycobacterium tuberculosis, all the way to pneumolysis.

The beginning of the twentieth century was marked by novels about tuberculosis. Probably the best novel on the subject is Thomas Mann's (1875-1955) „The Magic Hill”. Only in the first half of the 20th century the battle with tuberculosis was won. Then streptomycin, para-amino-salicylic acid-PAS and isoniazid therapy started. With this triple therapy, even the most severe forms of tuberculosis were cured in 3 to 6 months, even the most severe forms of miliary tuberculosis! If streptomycin, para-amino-salicylic acid, and isoniazid, including the BCG vaccine, been discovered earlier, the great Jean-Baptiste Poquelin Moliere (1622-1673) would not have died on the scene in severe hemoptysis, nor would David Herbert Lawrence (1885-1930) died of tuberculosis, as did Anton Pavlovich Chekhov (1860-1904), nor the great ingenious painter Jean-Antoine Watteau (1684-1721), nor George Orwell (1903-1950) (author of the famous „Animal Farm”, published in 1984) who suffered terribly with his caverns, pneumothorax, hemoptysis until he died... John Keats (1795-1821), a great and ingenious English poet dying of tuberculosis as well as Frederic Chopin (1810-1849) and Charlotte Bronte (1816-1855) and famous illustrator Aubrey Beardsley (1872-1898) dies of tuberculosis at an early age... And the great German poet Christian Morgenstern (1871-1914) died of tuberculosis he got from his mother in the best years of his life... Not to mention Franz Kafka (1883-1924), who in addition to tuberculosis of the lungs had laryngeal tuberculosis. Just before his death, when tuberculosis destroyed his lungs and throat, and when he could no longer eat because of tuberculosis of the larynx, he told Dr. Robert Klopstock (1899-1972): „If you don’t kill me, you are a murderer!”. And so it will be with COVID-19. People will die, as they did from tuberculosis, until a vaccine is found. In a year, two, three or more,
everything that happens today with COVID-19 will be history... And life will go on...

Only the memory of COVID-19 and the pandemic will be described in books and novels, which will mark the first half of the 21st century, as HIV marked the literature of the late 20th century... So, the key to everything is a vaccine, and the path to it is neither easy nor fast, but difficult, long and arduous... „because medicine is the science of uncertainty and the art of probability”, as he says Sir William Osler Baronet (1849-1919) one of the greatest Canadian and world internists (2).

3. **COVID-19 CONSEQUENCES ARE COMING**

The COVID-19 pandemic is likely to have unprecedented and unforeseeable consequences, from those on a worldwide/global level to those at the local level - at the level of local communities and families, and individuals (and not just humans, but all other living beings, including plants), of which the future will testify in various ways. The consequences will be political, economic, social, but probably to the greatest degree, the consequences of a health nature - systemic and individual. The first author of this text introduced the term „PCSS - Post-Coronavirus Stress Syndrome”, the consequences of which will be much different and more intense than previously known and described in textbooks and other fiction, than more or less frequent intense phobias, depression, suicide, etc. If we add to this the data that in over 80 countries the population is already altered by PTSD due to the war in those countries, then there is an inevitable need that health professionals in all fields of medicine will have to work intensively on it, so that these cumulative consequences of past and present stressors and their consequences are less intensive and easier to overcome, with relatively low investment, because the economic consequences will directly affect the intensity of the health consequences. Experts and professionals in the field of Public health and Medical/Health Informatics will also have their share in everything said (3, 4).

4. **"COVID-19 DILEMMA" - VACCINATE OR NOT?**

What is a dilemma (from the title of this text)? Vaccinate ourselves or not?
For weeks, thousands of protesters have rallied in European cities furious over social distancing measures they believe are draconian tactics aimed at abolishing basic civil rights and opening the door to forced vaccination that will do more harm than the virus itself, believing the COVID-19 pandemic is a scam, devised by the pharmaceutical industry. This intensified especially after Bill Gates announced that between 5 and 7 trillion vaccines would be produced in the first phase.

Even before the COVID-19 vaccine is found (and reportedly about 50 that have already been produced and are already being tested), national leaders are faced with the dilemma of whether to immunize as much of the population as possible or whether compulsory vaccination carries the risk of movement, which is already prone to conspiracy theories about pharmaceutical companies and government authoritarian tendencies?

Preliminary results from a study conducted by the Vaccine Confidence Project and ORB International, in Europe in early April, while the infection was still on the rise, show that resistance to the vaccine is particularly strong in countries that have managed to avoid the worst pandemic. In Switzerland, where immunologists suggested mass vaccination as early as October last year, 20 percent of respondents said they did not want to be vaccinated. In Austria, skepticism about the vaccine is at a similar level, as 18 percent of respondents said they would refuse the vaccination, according to world media. The number of Germans who answered positively to the question about the vaccine against COVID-19 from mid-April to mid-May fell from 79 to 63 percent. In the UK, ORB International conducted a survey on May 6 and 7, and 10 percent of respondents said they did not want to be vaccinated. Although some scientists are calling for mandatory vaccination against COVID-19, German Health Minister Jens Spahn says he prefers a voluntary program (5).

At the same time, the introduction of „immunity passes” for those who have been vaccinated or developed antibodies has been removed from the new „pandemic laws” adopted in the Bundestag in May. Virologists weigh the evidence and often come up with somewhat contradictory advice, while public health authorities need weeks to formulate their messages.

Some historians of medicine believe that voluntary vaccination against COVID-19 would be, not only less politically risky, but also more effective in protecting the population from coronavirus.

On June 6th, 2020 official report of Worldometer’s, as consequences of COVID-19 infection, in the world died 402,237 people. The first places are the USA (with 112,000 cases), Great Britain, Brasil, India. Till today were infected 6,981.651 people and recovered 3,413.349 people (Figure 1 and 2) (6)

It remains to be seen what the new wave of the COVID-19 pandemic, announced by WHO experts these days, and which is expected in the fall of 2020, will bring us.

5. **INSTEAD OF CONCLUSION**

The pandemic or epidemic of COVID-19, unlike all previous epidemics or pandemics in the recent history of medicine, has brought many controversies about which the future and its actors in several scientific fields of interest will provide relevant observations, opinions and conclusions. Among other things, there is controversy regarding vaccines and vaccinations against Coronavirus infections.

But there are many other controversies and doubts which relate to life, work, health in general and the health systems and its subsystems, and are responsible for ensuring the work, as well as, all other activities of the individual and the community. In the use and misuse of all types of information, and they are mostly health information, the autocratic manner of dealing with decisions at all levels in the health care system (but also in society and politics in general) came to the fore, which
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fundamentally „transformed“ the normal system functioning - from local levels in Family Medicine units to those at the tertiary and quaternary level, where the hypertrophy of COVID-19 and its consequences „distorted“ the health system into forms that are not seen even in the most specific conditions, the so-called extraordinary conditions, such as states of war and catastrophic natural disasters.

This prompted the authors of this article to emphasize the significance and importance of the phenomenon of fear for life or fear of death, which, among other things, has intensified precisely with what has been said in the previous text. The first author of this article used to quote a sentence from a pioneer of Medical Informatics „if I have information, I have the power“ to his students at lectures held 30 years ago. Now that rephrased sentence should read “If I have dis-information, I have the power”.

We should especially emphasize the ethical moment related to all information about COVID-19, which „kills“ us every day and produces fear tendentially, irresponsibly, but also out of ignorance, which has not been a mass phenomenon so far. Every news in the media, television shows, from current daily news to educational content, on social networks has partial characteristics of unethical and immoral behavior - data on individuals, text and photographs were published, which in codes of ethics and declarations of rights and charters have the character of violations and bear the traces of criminal liability. Legal experts, lawyers and other law enforcement experts are already being called to file lawsuits and criminal charges for the health consequences of COVID-19 for individuals and their families, from the unnecessary wearing of masks, irrational purchase of food and medicine and the creation of unnecessary piling of supplies in homes, preventing regular control, diagnostic and therapeutic procedures at higher levels of health care, denying various physical rehabilitation procedures and treatments, especially to the elderly, who were and will be the primary risk group and potentially most at risk of COVID-19.

The phenomenon of fear is otherwise present in this category of the population, due to those conditions and diseases from which they otherwise suffer, and which occurred both physiologically and pathophysiologically with age. COVID-19 and this kind of relationship that this text write about only intensified that fear even more. Perhaps this is one of the „determining tendencies“ of the COVID-19 project, as psychiatrists would point it out, and which will be one of the important topics for future research. Sapienti sat (A word to the wise is sufficient).

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