Letter to the Editor

South Asia is more vulnerable to COVID-19 pandemic

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Dear Editor

Coronavirus disease 2019 (COVID-19) which originated in China spread progressively all over the world [1]. On 11th March 2020 WHO declared COVID-19 outbreaks as a pandemic [2]. As of 22nd May 2020, there have been more than 5.3 million confirmed cases of COVID-19, with more than 340 thousand deaths and more than 2.2 million recovered [3]. Slowly, South Asia is also entering the ranks of COVID-19 affected regions. This region comprises more than 21% of the world's population which remains vulnerable to COVID-19 [4].

The first confirmed COVID-19 case in this region appeared on January 24 in Nepal from a Nepali student coming from China [5,6]. Sri Lanka and India reported first confirmed COVID-19 cases on January 27th and 30th respectively [4]. As of April 1, the total number of COVID-19 cases in South Asia was 3,649 which increased to 62,895 on May 1 and more than 200,000 on 21st May. Similarly, total deaths increased from 71 on April 1st to 1,772 on May 1st and around 5000 on May 21 [4]. India is leading in terms of total numbers of confirmed COVID cases (more than 105,000) and deaths (more than 3500) [3]. Till now, no mortality is reported in Bhutan and only three deaths are declared in Nepal. So far, Bhutan seems to have been able to control COVID-19 cases. The number of COVID-19 cases is 516 in Nepal [4], but it is expected to increase rapidly with the increase of Nepalese workers returning from India and other countries [5,6]. Strict lockdown and the young population may be one reason for low mortality in South Asia.

South Asia is one of the world’s poorest and most populous regions. The health care facilities of this region are also very weak. Each of the South Asia’s eight countries has one of the lowest numbers of physicians per capita. It ranges from 0.3 physicians per 1,000 people (Afghanistan) to just one physician per 1,000 people (Maldives, Pakistan, and Sri Lanka) [7]. At the best of times, there are too few healthcare workers with negligible resources. Due to such reasons, this region will still be much more vulnerable if the severe cases of COVID-19 increase.

All these countries have imposed strict lockdown, border seal, and curfews amid the fears the virus will strike densely populated areas. Few studies have shown that the long prevalence of this pandemic has created different types of psychological disorders and chaos among people [5,6,8]. Media and some publications have also reported some cases of suicide in this region [9]. In such a juncture of the public health crisis, individuals, researchers, and public health officials should be very careful while receiving and providing effective communications [10] and health professionals also need to attend mental health counseling training [11].

Finally, as the data show, the numbers of COVID-19 cases and casualties are rising sharply on a daily basis and are estimated to be much higher than reported given the paucity of testing. The fight with COVID-19 is not going to be easy. There should be joint cooperation from all levels of stakeholders to win this pandemic.

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