

Corona Paradox - लढनेको केहेते है और हाथमें तलवारभी नही

20 Mar 2020

All above 65 must be ready to die in the interest of & for the well being of young generations, to make the world more healthy and young.

Corona Paradox - Guidelines for me as a Doctor -

लढनेको केहेते है और हाथमें तलवारभी नही - फिरभी मै लढूंगा.

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1.

Any time in the history Doctors were never considered as Humans. They were either Gods or Devils. I must realize and accept this. Then it will be easier for me.

2.

The question is not what others think about me, but what I think about myself. It is important to stay calm and think honestly, about what I think about my convictions, obligations and responsibilities. Then I will be able to take decision for myself.

3. The Decision to take:

- a. To continue being a doctor (or HCW) or not.
- b. To run the OPD or Hospital or to close it down. (and face the consequences of either decision.)
- c. To participate in the one way battle against Corona or to quit (in any way).
- d. To understand and fulfill the responsibility towards my family and extended families (Hospital staff and other dependents) or to ignore.
- e. To understand and fulfill the responsibility towards my Patients (also dependents) or to turn away and ignore them.

4. MY decision:

- a. I am willing to do ANY kind of Health Care work (including taking care of COVID 19 patients) during this period, Unconditionally.
- b. I am above 65 Years.
- c. I have taken permission from my family members.

5. The Problem:

- a. In present situation, running ROUTINE OPD for ALL patients is more then

dangerous and risky. ALL - Patients, Doctors, HCWs and their families are at risk.

* Considering available spaces for average OPDs of Private Practitioners, segregation (into fever-cough patients & other patients), two separate OPDs and distancing is impossible.

* Very limited number of patients fit into government criteria (Fever - throat pain - breathlessness + travel & exposure history) to carry out Corona test. Very large number of patients with less severe complaints & asymptomatic carriers can attend the OPDs for any reason (even as attendants of patients). They can also spread the disease. (of course, the source of spread will be that OPD.)

* In this situation a Doctor must treat EVERY patient as COVID 19 Patient or carrier (as it is the usual practice to consider every patient as HIV positive & take universal precautions)

* Only limited PPE (usual Mask-Cap-Gloves) is available for Average Private Practitioner.

* Only limited or no staff is available for Average Private Practitioner.

* All patients, particularly pediatric, pregnant, old and immunologically compromised patients, are unnecessarily exposed to risk. It is thoroughly against social distancing.

b. The result: ROUTINE OPD will be the Spread Center for COVID 19. (it is at least as dangerous as transporting humans in milk tankers.) - The result -

* Spread of pandemic

* Quarantine of that OPD/ Hospital, Doctor, staff, their families & other patients attending that OPD.

* Infected and ? Dead doctor or Staff (This means PERMANENT LOSS of the MOST VALUABLE HUMAN RESOURCE in This Disaster Situation. Suicide Squads and Concepts of sacrifice are emotionally appealing but are Practically Unaffordable.)

* Infected family of that doctor or staff.

c. The same community demanding continuous routine healthcare will blame the Doctors for spreading the disease.

d. There can be so many other emotional, social and health problems.

6. Suggestions:

a. This is NOT an Emotional problem. So ONLY Practical solution is needed. There cannot be any "Ideal" solution.

b. 1st rule in any Disaster / Emergency management - make YOURSELF Safe, Fit and Prepared and then try to help others. So, in a compromised situation Doctor will not be able to help others.

c. This is not a Temporary, 15 days, problem. We have to take precautions for at least 1 year - and probably for Future. (See 7. The Dilemma of Social Distancing & Herd Immunity.)

* CLOSE ALL Small Private Clinics.

* ENROLL As many Private Practitioners as possible to provide healthcare.

- * CATEGORIZE them according to their Qualifications, Availability, readiness and willingness into Primary, Secondary and Tertiary HCW (as I have mentioned, I am willing to participate as Tertiary HCW)
- * TRAIN them and PROVIDE them with required PPE according to their Primary secondary and tertiary status. (Even police are provided with masks and lathhis)
- * Use Government and Private Hospital premises as Space for Health care centers. These Centers will Provide ALL types of healthcare
- * Distancing and Segregation of patients into Routine cases and Suspected COVID 19 cases will also be possible in such centers.
- * COVID 19 Positive cases will be treated separately.
- * Encourage Telephonic and Internet Consulting whenever possible. It is The need of This situation and Future. (We can meticulously decide the Norms; SOPs and Legal and Ethical aspects of Telephonic and internet Consultation afterwards.)
- * Make arrangements for their Transport and Safety.
- * Most of the Private Doctors and Paramedical staff also are willing to contribute, share the responsibility and even sacrifice. But they need something more than the sound of Bells and Thalish.
- * Consider (an Appeal to The People and Government) All HCW as HUMANS. Their concern for their families is REAL.
- * HCWs are not asking anything for themselves. They are only asking for Swords and Shields to fight with the 'Enemy with Crown' And Protection for their Families.
- * Without them NO Health Care Plan will succeed.

7. The Dilemma of Social Distancing & Herd Immunity.

a. Normal curve of an Epidemic and its Meaning.

- * Virus enters a community. Few people are infected.
- * Community is unprotected. More and more people get infected in exponential proportion in a very short time. At the peak stage, almost all in the community are infected.
- * Few are asymptomatic, many suffer from mild symptoms and few are seriously affected, out of which few die.
- * As a result (1) , asymptomatic, mild symptomatic and seriously affected but survived population develops Immunity, (Herd Immunity) which lasts for variable period (at least few years).
- * As a result (2) week, old, degenerate, immunologically compromised, unfit, unhealthy part of population dies and young strong & healthy part of population survives. (Natural Justice)
- * As a result (3) epidemic subsides, since almost everybody in the remaining population is Immune to the disease.
- * After few years immunity level of population decreases (many reasons) and population is again susceptible to Same infection.
- * And it is always susceptible to New Type of Infection.

b. Social distancing PREVENTS the development of Herd Immunity

- * Social distancing breaks the chain and Prevents the rapid spread of infection.
- * Thus it controls the severity of Epidemic.
- * But, by preventing new infections, it leaves large population uninfected.
- * This prevents development of Herd Immunity and large part of population remains susceptible.
- * So, there are new waves of infection when social distancing is relaxed. New waves will continue till all the community is infected & becomes immune. - Unless -
- -

c. So this is basically a Choice between HUGE Death Toll in Short period (by allowing epidemic to spread) against HUGE Death Toll over Long period (by observing Social distancing).

UNLESS we develop a VACCINE against that virus before New Waves or we have DEFINITIVE TREATMENT.

d. Choices:

- * Allow the population to get exposed, get infected and develop herd immunity (i.e. allow the epidemic to take its natural course - & No social distancing.)
- * Allow the disease to become Endemic (by Social distancing) with Flattening of Epidemic Curve and periodic, less severe, Epidemic Waves.

* Prevent spread & severity of epidemic by Social distancing and other measures and buy some time to develop vaccine & treatment to protect the uninfected population. In this case, Herd Immunity is developed by Mass Immunization (Similar to Triple, Pentavalent, Measles, MMR, Hep B, TT, etc. vaccines)

e. This is a continuous and ongoing battle because new viruses or new strains on known viruses will emerge.

f. Many times, this continuous and ongoing battle will be without swords & shields in our hands.

f. Actually, this is the battle between NATURAL JUSTICE & HUMAN JUSTICE.

8. What is Natural Justice & Human Justice. (???)

आत्ताचा विचार :

30 मार्च 2020

खून आमचाच होणार, खुनाला प्रवृत्त केलं म्हणून खुनीच आमच्या विरुद्ध फिर्याद करणार आणि शासन आम्हालाच दोषी ठरवून शासन करणार.

ओपीडी बंद ठेवली तर रोग्यांना तपासत नाही म्हणून गुन्हा दाखल होणार, तपासले तर निष्काळजीपणाचा (COVID 19 संदर्भात पुरेशी काळजी न घेतल्याचा) गुन्हा दाखल होणार आणि ओपीडी सुरू ठेवल्यावर रोग पसरवल्याचा गुन्हा दाखल होणार. डॉक्टरांवर अशा तिबल केसेस दाखल करत बसायला शासनाला डिझास्टर मॅनेजमेंटच्या काळात वेळ मिळत असेल

तर "करोनाच्या" केसेस पुरेशा आढळत नाही आहेत आणि साथ आटोक्यात आली आहे असं समजायचं का ?

शिवाय डॉक्टरांना COVID 19 झाल्यास त्यांना आधीच शिक्षाही झालेलीच असणार.

स्वतःच्या कर्तव्यदक्षतेचा आव आणणे, दुसऱ्यांवर दोषारोप करणे, नियमांवर बोटे ठेवून फर्माने काढणे, अंगचोरपणा करणे, केसेस दाखल करणे, इत्यादी थांबवून जरा खऱ्या महत्वाच्या कामांना भिडूया का ?

निदान आपण सर्वांनीच - शासन, पोलीस, डॉक्टर, पेशंट, जनता - सुरुवात तरी करूया का ?

जगलो वाचलो, नंतर यातून सावरण्याच्या कामातून वेळ मिळाला आणि व्यवस्था लागली की मग रिकाम्या वेळाचा सदुपयोग करण्यासाठी फार तर एकमेकांवर केसेस दाखल करून न्याय न्याय खेळूया.

डॉक्टरांनी, आपल्याला खूप कामे आहेत. इतर कुठेही लक्ष न देता आणि लक्ष विचलित होऊ न देता आपण आपले काम करत राहू. त्यासाठीच आपण प्रशिक्षित आहोत.

आपली उद्दिष्टे आणि आपल्यापुढील कामे

1. आपले नेहमीचे (आपापल्या श्पेशालिटीचे) पेशंट्स तपासत राहाणे.
2. हे करताना त्यांना या साथीचा संसर्ग होऊ न देणे.
3. साथ रोखण्याच्या कामात, सर्व धोक्यांची पर्वा न करता, सर्वतोपरी प्रयत्न करणे. यासाठी सरकारच्या सर्व योजनांना संपूर्ण सहकार्य करणे.
4. स्वतःच्या स्टाफची काळजी घेणे.
5. स्वतःच्या कुटुंबाची काळजी घेणे.
6. स्वतः न घाबरणे आणि स्वतःचे मनोधैर्य कायम ठेवणे. (त्यासाठीच आपण अनेक वर्षे प्रशिक्षण घेतले आहे. आणि अनुभवातूनही आपण हेच शिकत आलो आहोत.)
7. आपल्या स्टाफची आणि कुटुंबाची भिती घालवणे आणि त्यांचे मनोधैर्य वाढवणे.
8. आपल्या पेशंट्सची भिती घालवणे आणि त्यांचे मनोधैर्य वाढवणे.
9. साथीनंतर यातून सावरण्याच्या कामात हातभार लावणे आणि सुव्यवस्था प्रस्थापित करण्यास मदत करणे.
10. साथी आणि एकूणच रोगप्रतिबंधासंबंधी सर्वांचे सतत प्रबोधन करत राहाणे.