Wuhan coronavirus accelerates while concerns over limited resources may prove catastrophic

Benjamin Mateus 29 January 2020

According to China's CDC, over 30,000 people are being observed for possible Coronavirus infection. As of this writing, there have been 5,974 confirmed infections and 132 deaths in mainland China, predominately at the epicenter of the epidemic, in Hubei Province.

In all, 6,053 people have been infected worldwide, with Germany confirming their first case and France three. In the US, though there are only five confirmed cases, more than 100 individuals across 22 states are being monitored. There is one confirmed case in Canada.

Chinese authorities' revelations drove the market's panic and sell-off on Monday when they disclosed that approximately 5 million residents left Wuhan before the citywide lockdown was enforced. Health officials and epidemiologists predict that there may be one infected individual for every 500 to 600 people. In other words, possibly close to 9,000 people who left Wuhan may be harboring the virus without knowing it.

Epidemiologic models constructed by MRC Centre for Global Infectious Disease Analysis indicate that, on average, each case has infected 2.6 other people, meaning that control measures need to block over 60 percent of transmissions to be effective in containing the outbreak.

In a press conference on Sunday, the mayor of Wuhan city, Zhou Xianwang, said that health officials have warned that the virus's ability to spread was getting stronger. Ma Xiaowei, the minister in charge of China's National Health Commission (NHC), endorsed these speculations at a press conference on Monday: "Signs are showing the virus is becoming more transmissible. These walking 'contagious agents'

[asymptomatic carriers of the virus] make controlling the outbreak a lot more difficult." In another statement, Minister Xiaowei said, "The epidemic is now entering a more serious and complex period. It looks like it will continue for some time, and the number of cases may increase."

During the SARS coronavirus pandemic, which began in November 2002 and lasted until July 2003, there were 8,098 confirmed infections and 774 deaths reported across 17 countries, the majority occurring in mainland China and Hong Kong. This corresponded to a case fatality of 9.6 percent. In less than one month, the present epidemic has affected more than 5,500 people and will certainly surpass those affected by the SARS coronavirus, highlighting the rapid spread and contagious aspect of this epidemic. The fatality case in the present epidemic stands at 2.35 percent.

There are more than 13 cities in essential lockdown in China, affecting more than 56 million people. There have been mixed responses to Chinese efforts to attempt containment of such magnitude.

Infectious diseases specialist and director of the Johns Hopkins Center for Health Security told the *New York Times*, "If you continue to quarantine more and more places in China, you're going to start to break normal societal interaction, normal movement of goods and people and medical supplies and food and medicine. At a macro level, it seems to me that it's more likely to be harmful than helpful in controlling the epidemic."

The Lancet has given the Chinese government their endorsement, commending them on their quick response and sharing of data with the international community. They have also applauded the World Health Organization for not yielding to pressures to

declare an international emergency without due cause.

The director-general of the World Health Organization, Dr. Tedros Adhanom Ghebreyesus, traveled to China on Monday and met with President Xi Jinping in Beijing. Dr. Tedros said in a press conference, "We appreciate the seriousness with which China is taking this outbreak, especially commitment from top leadership, and the transparency they have demonstrated, including sharing data and genetic sequence of the virus."

In a show of damage control over the rising tensions that are spilling into social and news media, Premier Li Keqiang, the prime minister of the Chinese government, flew to Wuhan on Monday as a sign of support to medical workers, and promised to get highly needed medical supplies. His actions have met with both approval and disdain by local citizens, while Western news media have called it a political maneuver to quarter rising tensions.

As one popular Wuhan-based blogger, Luo Bin, posted on YouTube, "There is no celebratory mood this time, it's kind of like going through an ordeal instead of the new year." He recounted the long lines for supermarket supplies after citywide food shortages.

Professor Yuen Kwok-Yung, chair of infectious diseases at the University of Hong Kong, had indicated that his research team had developed a vaccine against the Wuhan coronavirus but he told reporters it would require several months to a year to conduct necessary trials in animals followed by clinical trials on humans.

Chinese scientists and in the US are in a race to produce a vaccine. The Chinese have indicated they may have a vaccine ready in a record 41 days. Dr. Yuen was concerned that the Chinese scientists' efforts to expedite the development of a vaccine could lead to major health risks and complications, potentially exacerbating the disease if people are exposed to the coronavirus after receiving the vaccine. He explained that such reactions have been reported for coronavirus vaccines.

What is most required in the immediate sense is an international response in support of providing necessary aid and medical supplies that local authorities continue to request. Given the exponential rise in infection rates, the preliminary experience indicates that about 20 percent of those affected will need significant medical attention—oxygen, vital signs

monitoring, possibly ventilator support and ICU admission. Such resources are not easy to come by and, even in large centers, access will soon be exhausted. Potentially, mild to moderate symptoms that could be managed conservatively could spiral into catastrophe for patients having access to care limited by lack of resources.

Fundamentally, the poor and most vulnerable will pay the most severe price as poor nutrition, hygiene and access to care will weigh heaviest on their life expectancy.



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