

The coronavirus pandemic and the need for global socialized medicine

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The coronavirus outbreak that began last December in Wuhan, China has escalated into a global pandemic, requiring a coordinated international response to avert catastrophe. A planned, rational deployment of worldwide medical and industrial resources is essential to keep the disease from potentially claiming millions of lives.

The danger of infectious, untreatable and potentially fatal viral outbreaks causing pneumonia has been known for decades. Two different coronaviruses caused regional outbreaks, SARS in 2002–2004, mainly in China, and MERS in 2012–2014, mainly in Saudi Arabia. However, while SARS claimed 774 lives after infecting 8,000 people, and MERS killed 886 after infecting 2,519 over two years, the highly contagious Wuhan coronavirus (SARS-CoV-2) is spreading worldwide, infecting 81,296 and killing 2,770 in barely two months.

Major outbreaks are surging not only in East Asia, but also in Europe and the Middle East, with 383 cases in Italy and at least 139 in Iran. China has managed to significantly slow the disease's spread, limiting the number of cases to 78,073, with draconian measures to place hundreds of millions of people under lockdown and shut down much of its economy. However, it is apparent we are only in the initial stages of a global epidemic.

Initially, officials in the United States and internationally tried to downplay the new virus. Even yesterday, President Donald Trump—speaking for the broad sections of the financial aristocracy who look no further than their stock portfolios—took to Twitter to ignorantly berate the media for trying “to make the Caronavirus [sic] look as bad as possible, including panicking markets, if possible. Likewise their incompetent Do Nothing Democrat comrades are all

talk, no action. USA in great shape!”

On Wednesday night, Trump gave a rambling news conference in which he alternatively downplayed the severity of the disease, shamelessly praised himself and his government for their response, and denounced his political opponents.

Such ignorant and irresponsible comments notwithstanding, this coronavirus is a highly dangerous and deadly disease. Fully eight percent (2,770) of the 33,129 detected cases no longer under treatment have ended in death. Of the 48,167 detected cases still battling the disease, 8,867 (18 percent) are in serious or critical condition—kept alive by intensive care and access to artificial ventilation and oxygenation and requiring attention from multiple dedicated medical staff.

Moreover, World Health Organization (WHO) advisor and University of Florida Professor Ira Longini told Bloomberg News epidemiological models show that without aggressive measures to contain the virus, up to “one third of the world” could catch the disease. This could overwhelm hospitals worldwide—even in the advanced capitalist countries—with millions of desperately ill, highly contagious patients.

This danger is all the greater as the disease spreads to Middle Eastern and African countries whose hospitals lack high technology, or have been devastated by decades of imperialist occupation, civil war or—in the case of Iran—vindictive US and European sanctions.

An internationally coordinated response is essential to prevent the pandemic from devastating humanity. It is critical that the world's health system be able to isolate patients, limit the speed of the disease's spread, and devote the necessary resources to provide intensive care for those patients who develop pneumonia from the infection. The production and use of necessary

treatments and medical equipment cannot be subordinated to the diktat of the financial markets and the profit motive, or to imperialist war policies.

Modern science provides medicine with tools of enormous power against the disease. The contrast with previous global pandemics, like the 1918 flu epidemic, could not be more stark. Only two months into the pandemic, we have vast knowledge of the virus: its internal genetic RNA code, the form of its outer shell, and what cells and receptors it targets in the human body. Multiple teams internationally, including in the United States, China and Europe, are racing to produce vaccines, hoping to clinically test them by as early as next year.

Clinical trials in China show that pre-existing drugs like chloroquine, used to treat malaria, or fapilavir, used to treat the flu, may also block the coronavirus and accelerate recovery.

At the same time, the pandemic is exposing the destructive irrationality of capitalism: it has wasted resources and wealth created by the international working class over decades, leaving humanity unprepared for the coronavirus.

The risk of coronaviruses causing highly contagious, untreatable and potentially fatal pneumonia has been known for nearly 20 years. After the SARS and MERS epidemics, 2017 research by the EcoHealth Alliance showed that Asian bats harbored hundreds of strains of coronaviruses that could potentially infect humans. Nevertheless, with the production of vaccines, viral drugs and protective gear subordinated to the profit interests of major private investors, nothing was prepared to deal with for the risk of a major pandemic.

While massive resources were needed to invest in medical and industrial infrastructure, trillions of dollars were instead wasted on the 2008–2009 bank bailouts for the super-rich in America and Europe, as well as on US-NATO wars like the occupations of Iraq and Afghanistan. While hospitals were shut down in cities across America, the European Union imposed austerity that slashed health care wages and staffing levels to the bone.

Such policies have not only prevented the rational use of available technology to prepare for a global pandemic, but now cut across measures urgently needed to treat the pandemic.

Iran, the epicenter of the coronavirus pandemic in the

Middle East, provides perhaps the starkest illustration of this. Hundreds of Iranians have fallen ill and the disease is spreading rapidly, under conditions where US and European sanctions imposed first in 2012 and then again after the US withdrawal from the Iranian nuclear treaty in 2018 have slashed Iran's access to critical medicine.

Last year, an Iranian doctor told America's ABC News that "Out of every 20 people, we have to tell at least 10 that we have run out of medications they need." There are shortages of drugs for many critical conditions, including several like asthma, diabetes and cancer that often lead to complications and death in coronavirus patients. This is in part because the US Treasury vindictively prosecuted international firms exporting medical supplies to Iran.

Last year, the Atlantic Council think tank noted that in Iran in "2012–2013, the price of medicine increased by 50–75 percent. Coupled with an economic downturn and an increase in unemployment, medicine became less affordable to Iranian patients. According to field research conducted in Iran during 2013, asthma, cancer, and multiple sclerosis patients struggled with either shortages of medicine or skyrocketing prices. This research further found that many cancer patients had stopped treatment because of an increase in the prices of medicine."

Today, Iran is plunging into a coronavirus epidemic that is rapidly spreading not only to the Persian Gulf States, but to neighboring countries like Iraq and Afghanistan, whose health infrastructure has been devastated by decades of US-NATO sanctions, bombings and military occupations.

With the lives of millions hanging in the balance, decisions in the critical battle against the coronavirus cannot be left up to the imperialist powers and the financial aristocracy. Sanctions against Iran must be lifted, hundreds of billions of dollars spent globally to fight the pandemic threat, and humanity's scientific and industrial resources fully mobilized under the democratic control of working people.



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