

Italy's death toll overtakes China's

Coronavirus crisis cripples Italy's health care system

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Coronavirus is ravaging Italy. On Thursday alone, 427 people died, after a death toll of 475 on Wednesday, as new infections topped 9,500 in just two days. Italy's health care system is on the verge of collapse, especially in the hardest hit area: Lombardy, Italy's industrial heartland.

With 41,035 cases and 3,405 deaths as of Thursday night, Italy has the most coronavirus deaths in the world and is second, after China, in the number of infections. Relative to population, the toll inflicted on the Mediterranean country is the gravest in the world, with 679.84 per million people sick, versus 56.84 in China and 165.63 in South Korea. Likewise, 56.41 Italians per million have died so far, versus 2.27 in China and 1.76 in South Korea.

In the Lombardy city of Bergamo, local morgues are unable to cope with a surging death toll. Images of military convoys transporting dozens of coffins to remote cremation sites have sent chills throughout the world. Bergamo is Italy's worst-hit city: so far, 4,305 cases and 93 deaths have been confirmed.

A fundamental factor in the ability to promptly address the contagion is testing. However, in Italy this has been limited to patients displaying full symptoms, although this is now changing in the daily practice of some hospitals, which test all incoming emergency room patients. As of March 8, Italy had tested 826 individuals per million, compared to South Korea's 3,692 and China's 2,820. Early detection increases the chances of survival, rendering testing critical.

The hardest-hit regions in the country's north have been brought to their knees: the health care system is overwhelmed, and choices of life and death are made in the face of insufficient resources, especially for critical patients requiring Intensive Care Unit treatment.

The ones to pay the highest price are the elderly, already the most socially vulnerable layer and the likeliest to die. In addition to the increased weakness to fight the virus, the elderly above 80 are now routinely denied health care in favor of younger patients. In the northern city of Turin, a crisis management team has proposed a protocol in which, due to the lack of hospital beds, all patients 80 or older or in poor health can be denied ICU access.

One doctor explained: "[Those who live and who die] will be decided by age and by the [patient's] health conditions. This is how it is in a war."

This will likely be extended across Italy, especially to Lombardy, Veneto and Emilia-Romagna, where a shortage of respirators is causing a surge of deaths. The policy is not limited to Intensive Care: "The criteria set out guidelines if the situation becomes of such an exceptional nature as to make the therapeutic choices on the individual case dependent on the availability of resources, forcing [hospitals] to focus on those cases in which the cost/benefit ratio is more favorable for clinical treatment."

The situation is so desperate that the Conte government has decreed the deployment of 10,000 medicine graduates without taking their final medical exams. They will face shortages of all basic protective equipment including masks, gloves, and cover-alls.

Desperate, largely uncoordinated attempts are being made to increase production of vital medical equipment. A factory near Bologna is deploying 25 army technicians who undergo 3-4 days training and work up to 15-hour shifts, aiming to boost production from 40 to 125 respirators per week. Another factory near Modena is working nonstop to produce non-invasive respirators for cases not requiring intensive care.

The Conte government's department of Civil Protection

has put out a fast-track bid to corporations to provide 1,800 ventilators, a number still insufficient to treat the sick.

Italy has allocated just €3.5 billion to address the pandemic, despite its gigantic proportions, even as the European Central Bank forks over €750 billion for bank bailouts.

Italy's national health system is being exposed as inadequate as decades of cuts have slashed medical and nursing staff, beds, and machinery; leaving Italy totally unprepared for a pandemic. In 1998, 311,000 hospital beds were available, or 5.8 beds per thousand people. By 2017, the number had fallen to 191,000, according to Eurostat, or 3.2 beds per thousand people.

A September 2019 study by the Gimbe Foundation found that from 2010 to 2019, "37 billion euros were subtracted from public health care." These figures were confirmed this month by Walter Ricciardi, a doctor and member of the executive committee for the World Health Organization (WHO), in a TV debate with Luigi Marattin. A congressman for *Italia Viva*, the party founded by former prime minister Matteo Renzi from a split with the Democratic Party, Marattin criticized the data and defended decades of criminal negligence by the entire ruling elite.

According to several experts, the real situation is much worse than the numbers reveal, due to the lack of testing capacity.

WHO's expert Dr. Ricciardi said, "Our diagnostics ability is such that we cannot even perform it on the symptomatic," adding that specialized and competent technicians are needed for the tests. He also warned about ensuring the tests are reliable, saying: "In Germany, 70 percent were found to be false positives."

The ruling class is unwilling to invest in test kits and training of qualified personnel, even as it shovels hundreds of billions of euros into the pockets of the financial elite, indifferent to the highest of costs: human life.

Immunologist Sergio Romagnani, Professor Emeritus at the University of Florence, spoke of a high percentage of asymptomatic contagion (60 percent) among those below 50 years of age. A study by one of his pupils, Professor Andrea Crisanti, evinced that, among those infected at least 70 percent showed no symptoms, but they continue to transmit the disease. This suggests the disease is far more widespread.

Romagnani stressed the use of masks must be implemented to prevent spread, especially by those

unaware of being carriers. He also urged an immediate and massive increase of the number of tests performed, especially among 20- to 50-year-olds. Tests in South Korea, which included high-risk individuals aged 20 to 50, proved far more efficient than in Italy.

Romagnani added, "The quarantine cannot be continued for too long: the country risks an economic collapse. However, there will be no alternatives to mass screening later. We have about 20 days to get organized and get started, selecting the most important targets I mentioned earlier. Maybe starting from the health staff: doctors and nurses."

Over the past week, workers in Italy and internationally have launched dozens of wildcat strikes against the lack of basic safety measures. The Italian government's proposed safety regulations are utterly inadequate. Requirements for employers to provide masks, gloves, goggles, overalls, headphones and gowns in factories are not binding: their implementation depends on "commercial" availability. However, these goods are commercially unavailable. Even medical and paramedical staff in the public health care system, the most exposed to contagion, often lack this equipment.

A storm of anger is mounting among the population against the state and the corporations, who are doing nothing to ensure proper procedures to contain the pandemic or ensure safe working conditions. There is enormous resentment toward the European Union for its blunt refusal to assist Italy with the most basic equipment, while China, despite its own toll, is shipping masks and respirators.

The ruling class instead blames this all on "unruly" social behavior of individuals violating confinement guidelines.

The army has been mobilized, initially in Sicily with the pretext of keeping "Streets Safe," as the operation has been named. In reality, this is a clear sign that the ruling class is preparing for a class confrontation with workers protests against a system that is collapsing.



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