

Coronavirus toll reaches two million worldwide, nearly 30,000 US dead

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The number of people on the planet infected with COVID-19 passed the two million mark on Wednesday, with the pandemic killing nearly 8,000 people in a single day. Half of those were in Europe, still the hardest-hit continent, while the largest single-country death toll was in the United States, some 2,482 people.

Nearly 5,000 Americans have died of the coronavirus in the last two days, but neither the American government nor the corporate media seem to care. At the White House coronavirus press briefing Wednesday, Trump vented his grievances against his political rivals and threatened to shut down Congress, while offering nothing to halt the spread of the infection or save the lives of tens of thousands now under threat.

American network television broadcasts barely even took note of the record death toll on Tuesday, and they said even less when this figure in turn was exceeded on Wednesday. Instead, they reported on the mounting demands (from big business and the ultra-right) to reopen the economy and force workers back to their jobs regardless of the dangers to their health and lives. Meanwhile, the military continues to build field hospitals—not for today’s patients, but to house the far greater numbers still to come.

COVID-19 is a global crisis, and the death tolls on a per capita basis are even higher in Italy, Spain, France and Britain than they are in the United States.

On Wednesday the pandemic killed 1,438 people in France, 761 in Britain, 578 in Italy and 557 in Spain, bringing the cumulative death toll in these four countries to 70,492, according to figures posted on WorldoMeter. Britain will reach 100,000 coronavirus cases today, joining France, Italy, Spain and Germany.

One of the hardest-hit countries, in terms of deaths per million people, is Belgium, which has suffered 4,440 deaths, far more than China, which has 100 times as many people. Germany too, portrayed as a comparative

“success” in Europe, has lost more of its citizens than China, where the coronavirus first made its appearance last December.

While presently the US accounts for 30 percent of coronavirus cases and Europe for about 50 percent, there is a surge in cases in Brazil, India, Egypt, Indonesia and other countries in Asia, Africa, and Latin America. These figures only give a glimpse of the potential impact of this 21st century plague when it reaches the poorest countries, with the weakest public health and sanitation systems. The response of the Trump administration, however, is to turn its back on the majority of humanity by halting its funding contribution to the World Health Organization.

Contrary to the predictions of a decline at White House press briefings and official models, the number of new cases continues to rise, and the number of deaths per day in the United States has doubled in only nine days.

At this terrible milestone of two million human beings infected, it is worth reviewing the speed with which the pandemic has spread, and the complete incapacity of capitalist governments in both Europe and the United States, the richest and most technologically advanced societies on the planet, to do anything effective to halt it.

On January 22, WorldoMeter began keeping count of the numbers of cases in the outbreak that had its epicenter in Wuhan. On that day, 580 people harbored the coronavirus virus. Initially dubbed 2019-nCoV, the virus was officially given the name SARS-CoV-2 and the disease associated with it became COVID-19 (Corona Virus 2019).

On January 24, the day Chinese authorities implemented a massive lockdown of Wuhan city and Hubei province, an unprecedented quarantine of a massive geographic area impacting nearly 60 million people, the official count stood at just over one thousand. By this time, the genetic code for the virus had been shared with the world, and a test that could detect the virus had been provided to all

countries by the WHO. Six days later, the WHO issued an official notice of a Public Health Emergency of International Concern.

At the end of January, the number of cases had jumped to over 10,000 with several nations having confirmed imported cases, including South Korea, Taiwan, Singapore, France, Australia, Germany, Italy, United Arab Emirates, India, Russia, Spain and the United States.

At an international level, scientists, epidemiologists and virologists were engaged in elucidating the nature of this SARS-like coronavirus. Several publications describing clinical experiences with the infection were made available free in online journals.

In practice, there was initially a wide range of national experiences with the virus. The massive lockdown in China, combined with the mobilization of the country's health care personnel and economic resources—two hospitals to treat patients with COVID-19 were constructed in a matter of days—ultimately seemed to have an impact. The number of cases in Wuhan and Hubei province stabilized, and other parts of China were not greatly affected.

By mid-February, however, reports from Iran suggested the outbreak there had grown out of control. US sanctions thwarted efforts to direct assistance by various governments and international aid groups. In the same period, a cluster of infections associated with a religious sect in South Korea saw a rapid escalation of community transmission leading to an essential lockdown of the city of Daegu. Massive testing and contact tracing were initiated that helped drastically curb the spread.

In March, however, the virus exploded across Europe and the United States. On March 6, the global count surpassed 100,000. On March 9, Italy's lockdown was extended to the whole nation as the number of cases rapidly escalated, followed by a huge number of deaths of Italian physicians and health care workers. The videos of coffins by the truckload being transported in the dark hours of the night had a profound effect on the consciousness of the world.

The first few cases in the United States, on the west coast, led to the first death near Seattle, Washington, and a cluster of infections at a Seattle-area nursing home. The Trump administration established its coronavirus task force, with Vice President Mike Pence named its head and Dr. Deborah Birx the response coordinator. At this point, the CDC had only performed a few thousand tests, and the White House continued to exude complacency and indifference—Trump was only energized when reports on

the epidemic led to a sharp fall in the financial markets.

On March 11, WHO Director-General Tedros Adhanom formally designated the coronavirus as a pandemic, declaring at a press conference, “In the past two weeks, the number of cases of COVID-19 outside China has increased 13-fold, and the number of affected countries has tripled. There are now more than 118,000 cases in 114 countries, and 4,291 people have lost their lives.”

On March 13, with total cases in the US at over 2,000, Trump declared a national emergency which granted access to \$50 billion in funding for US states and territories. State after state began “shelter in place” policies, first closing schools, then most businesses. Though Trump promised testing capacity would increase, he told those without symptoms, “It's totally unnecessary. This will pass.”

Only on March 17, during a news conference exactly one month ago today, did Trump finally ask “everyone to work at home, if possible, postpone unnecessary travel, and limit social gatherings to no more than 10 people.”

A week later, as the number of cases approached 100,000 in the US, with New York City at the epicenter of the pandemic, came Trump's infamous statement complaining that the financial cost was more important than stemming the rising death toll. “The cure can't be worse than the problem itself,” he tweeted.

On April 2, the world passed the threshold of one million cases. The number of deaths had exceeded 50,000 people. Two weeks further on into this global crisis, and both figures have more than doubled.

Throughout this process, while doctors, nurses and other health care workers have labored heroically, through great difficulties and at great risk to their own survival, to save lives, the capitalist governments of Europe and America have been preoccupied with a different problem: how to preserve and even increase the accumulated wealth of the capitalist ruling class, at the expense of the working class, no matter how high the death toll rises.



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