

Death of young student on hospital floor lays bare Argentina's COVID-19 crisis

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The death of a young student in Argentina last week laid bare a health care system that is totally devastated by the coronavirus pandemic now sweeping that nation.

Lara Arreguiz, a 22-year-old veterinary student from the northeastern city of Santa Fe on the Parana River, died of COVID-19 on May 21 following a tragic chain of events that lasted eight days and left her lying for many hours on a hospital floor, while waiting for a bed to become available.

She died two days later, drowning with fluid-filled lungs. A photograph of her lying on the floor before being admitted to the hospital—taken by Claudia Sanchez, her mother—went viral on social media.

Lara's death adds to the list of young adult victims of the Manaus and South African variants of the COVID-19 virus, which are more virulent, more transmissible and more likely to severely affect the lungs.

Among the latest young victims are not just those with underlying risk factors, such as Lara, but otherwise healthy and young individuals. On April 26, 35-year-old Joel Rutigliano, a rugby player, died in the city of La Plata, after a 19-day battle with the disease. In early May two sisters, Aldana, 21, and Marina, 29, both biology students died within days of each other in Entre Ríos, across the Uruguay River. Sol Casella, 23, a journalism student at Lomas de Zamora University near Buenos Aires, died on May 1.

Lara began showing symptoms of the disease on May 13. Yet she was not diagnosed with a COVID-19 infection until May 17; given antibiotics and sent home. The antibiotics were ineffective, and two days later, her parents took her to Iturraspe Hospital in Santa Fe.

Attempting to explain this chain of events, the head of Iturraspe Hospital, Francisco Villano, said that the Lara's photo revealed only an aspect of what was

going on. Villano insisted that Lara had been under constant medical supervision.

Exhaustion of hospital personnel

Villano was quoted by Santa Fe's *Diario Uno*: "She entered the hospital last Monday, was admitted and was seen by doctors 30 minutes later. She spent almost six hours in an isolation room and underwent tomography. An ambulance arrived and was sent to Iturraspe. At the time there were no beds available, even in private clinics. ... I am not suggesting that we are perfect, but let us keep in mind that the degree of saturation, the amount of work and the exhaustion of hospital personnel are important. We also need to take care of them; that is what is most essential."

He pointed out that hospital employees have been working with not enough rest for a year and a half. He stated that "we are seeing very young people, this young woman suffered from Type 1 diabetes, which put her at the highest risk level. ... These are young patients. In fact, we have two pregnant patients, 27 and 30, both on respirators."

The hospital has only 40 beds equipped with respirators, which are constantly in use. "Most of our beds only become vacant when a patient dies. At this point in the pandemic we face conditions of 60 percent mortality, compared with 40 percent in the previous wave. Patients require mechanical respirators 48 to 72 hours after symptoms begin."

The May 6 Spanish language *BBC News-Mundo* published statements from the Pan American Health Organization (PAHO) that confirm Villano's age

observations. In Argentina and across Latin America, “Adults of all ages—including the youth—are becoming gravely ill; and many are dying,” declared Carissa F. Etienne, head of the PAHO. According to that organization, death rates doubled in Brazil for people between 40 and 50 years of age and tripled for those between 50 and 60. In Chile, the rate of hospitalization of people under 39 years of age has shot up by 70 percent in recent months. The same goes for Argentina, in which the average age for those being admitted to intensive care is now 52, compared to averages of 70 and 75 in 2020.

“Some [like Lara Arreguiz] suffer from high-risk conditions, others don’t,” declared Rosa Reina, head of the Argentine Intensive Therapy Society. “They remain in intensive care for an average of 15 to 20 days; 70 percent require respirators. When they gain admission to the hospital, they already are in a very serious condition.”

Even though Argentina managed its first wave of the COVID-19 pandemic with a near total lockdown, which lasted 234 days, the reopening of the economy this year rapidly resulted in a second and deadlier wave with a daily average that exceeds 30,000 new cases, a number four times higher than at the beginning of the year.

According to statistics from the Health Ministry, a total of 3.7 million infections have been recorded and 77,108 deaths as of May 30, undoubtedly a major undercount, according to PAHO and the World Health Organization. By total cases, Argentina is ninth in the world, behind countries with much higher populations, such as Italy and the United Kingdom. Currently its two-week average of daily cases per 10,000 inhabitants is over 49, placing it ahead of most other South American nations, including Brazil.

On the day before Lara Arreguiz’s death, the administration of Argentine President Alberto Fernandez imposed a nine-day partial lockdown in most regions of the country in response to the new flare-up of COVID-19 cases, pending a decision on what further measures to take across this nation of 40 million inhabitants.

Even before the pandemic, Argentina’s health care system was already reeling from three decades of attacks, beginning with the imposition of privatization and austerity measures dictated by Wall Street and approved by the International Monetary Fund in 1991. By almost any measure—vaccinations, tuberculosis testing, office visits, pregnancy care, etc.—the system has become a skeleton of its former self. As Argentine society entered a deep economic recession in 2018, hospitals began confronting diseases most associated with poverty and hunger.

When the pandemic hit, this broken health care system was unable to provide the necessary care.

In the Buenos Aires metropolitan area, ICU bed occupancy in private clinics is between 95 and 100 percent. In the public hospitals, the occupancy rate is 79.7 percent. Only 91 out of 450 beds are available for critically ill patients.

The new wave of COVID-19 infections this year combined with the nature of the new COVID-19 variants, have increased demand for oxygen by more than 300 percent in April, a shortage that is already having deadly effects. In many clinics nurses are being ordered to ration oxygen for their patients.



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Argentina’s Health Care Crisis