Corona pandemic—let us not be part of the problem

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Corona pandemic has stymied us all to size; all mundane barriers of caste, creed and religion have been broken, giving that eerie feeling of “Oneness in Hammam”. It is as if the Mother Nature is punishing us for all our follies, and not without a reason—we abused its resources, foraged into the forbidden territories and started believing that we were the masters of all we surveyed, giving scant respect to the flora and fauna—equal stake holders in this real-estate called earth, and it is the pay-back time now.

I seem to be darting askew of the rules of the game—when on fire, ask not why, extinguish the fire first. The concerned infectious disease experts and the public health teams all over the world are doing all that they can to extinguish (hic... conquer) the disease, but we, the fringe players, from ancillary specialities too can chip in, by not making off the cuff statements. My first lesson as a trainee surgeon was, ‘A good assistant is one who knows not when to assist, but when not to assist’. A corollary thereof applies in the current times—a responsible doctor is one, who knows not what to talk, but what not to talk!

The media, both print and electronic, is agog with perspectives and advisories—as many mouths, as many opinions. I am not referring to the ill-intentioned rumour mongers, but even the well-meaning scientific researchers, who are doing more harm than good to the society by disseminating half-baked knowledge. For example, a Chinese study showed that the Blood Group ‘A’ individuals had higher risk for acquiring COVID-19 than those with blood group ‘O’ [1]. Even though the journal and the authors issued special and emphatic disclaimers that the article was not peer-reviewed and should not inform clinical practice, the same was not publicised, leading to panic and fear in the individuals with ‘O’ blood group. In another instance, just a letter to the editor of New England

Journal of Medicine extrapolating the Corona virus’ proclivity for Angiotensin Converting Enzyme (ACE) receptors to causing harm was erroneously deemed as an advisory for withdrawal of ACE inhibitors and Angiotensin Receptor Blockers (ARBs) in hypertensive patients [2]. The resultant aftermath—potential of blood pressure going up, stable heart failure destabilising and increased myocardial infarction leading to increased morbidity and mortality [3]. Off-label, prophylactic use of Hydroxychloroquine and Azithromycin have been so widely publicised in the lay media and press that the general public has made a bee-line to the chemist shops, and these drugs have disappeared from the shelf, so that they are not available even for those who need them the most—the medical professionals and the first-order caregivers. The same is true for masks, sanitizers and personal protection gears, which too have gone missing (hic... hoarded), thereby giving the unscrupulous elements a window of opportunity to manufacture fake, ineffective and in fact, dangerous look-alikes. All this ‘shooting off the hips’ is creating a kind of mania of the ‘fear of the unknown’ and may be doing as much harm, if not more, as the virus itself!

Changing tracks, I am reminded of James Howell’s classic proverb, ‘All work and no play makes Jack a dull boy’ which was subsequently modified with an addendum, ‘All play and no work makes Jack a mere toy’. But what happens when ‘Jack has no work and no play’? The cacophonous answer—boredom!

So the moot question—what is the solution, when all men are to themselves? Answer may lie in meaningful and gainful employment of our faculties for non-curricular activities and harnessing the value and power of solitude, just to be with one’s own-self (as against being aloof). All our trainees should heed to this advice to inculcate some such trait, which they can pursue with passion, apart from the curriculum. In fact, we must all invest in nurturing a hobby, when still relatively young and working, which may come handy when home bound, not just because of the Corona virus, but more likely due to the age-related deterioration of our physical faculties. That will take off the so called boredom of these kinds of trying times, which will unfortunately recur in future too,

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and I dare prophecy... even more frequently, aggressively and furiously, lest we mend ways.

And lastly, this has been a God-sent opportunity for us to rediscover ourself and to move away from the mundane ‘Over-science’, in to the world of ‘Organic’ and ‘Holistic’ living. It is time to catch up with those boxed sets of videos waiting to be seen and to read those timeless classics, sitting and adorning the bookshelves for aeons, rather than attending the scientific sessions of the virtual American College of Cardiology conference, conducted via internet, at the peak of COVID 19 pandemic. As John Mandrola puts it, ‘Brain can not focus on non viral topics. It seems tone-deaf to discuss science that can wait, while the colleagues across the world fight the challenge’ [4]. Let us not go over-board with our science. What we need today is wider dissemination of the tenets of the esoteric knowledge encapsulated in our scriptures. In these trying and unprecedented times, we must invest in that kind of humanity-redeeming knowledge, rather than conducting and reporting trials exhorting the advantages of Rivaroxaban plus Aspirin in peripheral artery disease or radial artery versus saphenous vein in coronary artery bypass graft surgery [5]. All this can wait.

Be counselled—if we continue with our unbridled science, neither chastised nor synchronized with conventional wisdom and ground realities, it shall be to our peril.

Written on April 5, 2020, I wishfully hope that by the time this piece catches your eyes, the cataclysm has at least abated, even if not resolved completely, so that we are in a position to ponder—firstly, why this disaster and secondly, how to face the equally daunting aftermath?

My prayers for your good health... Stay safe.

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