

Increasing Fear Of Delta Variant Of New Coronavirus In Pakistan: Strict Actions Required To Wrestle The COVID-19 Peaks



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Dear Editor,

Different countries in the world are facing the COVID-19 third wave with new symptoms and mortalities with diverse intervals (1). Pakistan has experienced three mild waves of Covid-19 since the virus was first detected in early March in the country. During the first wave, which continued from April 2020 to August 2020, the daily active cases touched the peak of 6533 on June 19. The second wave started in late October 2020 and went on till February 2021 with a single day daily active case as 3261 on December 8. From early March 2021, the country witnessed a third wave which peaked with a single day-active case of 5694 infections on April 23 (2). People in Karachi now are facing more infected cases having a 30% positivity rate than other regions of the country. At present, though daily active cases hover around 3500, it is slightly high from a low of about 850 cases per day almost a fortnight ago. The country was facing the fourth wave due to the delta variant and recorded 2,574 new cases and 26,865 total deaths on September 16, 2021 (2,3). Provincial governments have been warned by the federal government about the lockdown again. Pakistan has received the BIBP vaccine, BioNTech, Pfizer, CanSino, CoronaVac, Moderna, AstraZeneca, and Sputnik V vaccine. The vaccine was totally administered to 49,010,906 subjects (both doses) till November 22, 2021 (2).

The Indian delta variant has emerged as a broader threat of the fourth wave, as daily cases and fatalities plummeted (3). Considering the similarity in genetic make-up, behavioral pattern and environmental conditions between the two countries, the Delta variant's submissive behavior in Pakistan is inexplicable to many experts of infectious disease. However, the third wave has shown the non-seriousness and carelessness of the people because they are not taking the precautionary measures endorsed by the government of Pakistan (4).

In October 2020 citizens of Maharashtra India first time identified the delta variant of COVID-19 which was double mutated. India had an experience in the increase in the prevalence rate of Coronavirus due to the new variant emergency. In India, a drastic turn has been taken by the pandemic situation where new cases, as well as death rates, are record-breaking (5). India in a single day counted more than 400,000 new cases of COVID-19 on April 30, 2021, and was reported as the first country to find a high level of new cases. Since the pandemic, cases of more than 32.9 million and deaths of 0.44 million have been recorded in India (6). The system of healthcare in India is nearer to the edge of collapse due to the overload of daily new cases. Due to the insufficiency of beds in hospitals and oxygen supply deficiency for critical care patients, the situation has gotten worse. Long lines in front of the hospitals to get admitted and the appeals of the

family members of COVID-19 patients for oxygen have been seen throughout India (7). In history, India's first time in its healthcare system is facing such type of fragile conditions. India is not solely facing this critical COVID-19 situation. Nepal is also facing the destruction of delta variants in the form of new increasing infections and deaths. By land area, the world's seventh-largest country is India its borders are shared with China, Pakistan, Afghanistan, Bhutan, Nepal, Myanmar, Bangladesh, and Sri Lanka (8). After the severity caused by the delta variant in India, Nepal is also facing and fighting the same calamity. After the rapid arrival of Nepalese migrant workers from India, Nepal got the COVID-19 delta variant in its citizens. A 47% positivity rate has been found in Nepal due to the daily new cases. Moreover, till now more than 100 countries got affected by the delta variant (9). South Asian countries have already been affected by the delta variant because of the frequent inter-cross travel of the people of this region to India.

Geographically Pakistan has an Indian border known as The Radcliffe Line. The connectivity of both the countries is not very well and no major movement is present from one country to the other however a small number of people from India visit Kartarpur Sahib Gurudwara in Pakistan through a visa-free pass corridor known as International Peace and Harmony having 4.2km long passage connecting Punjab provinces of both the countries. The government of Pakistan should not allow people gatherings and more strict rules should be implemented in public gathering areas like parks, tourist spots, and markets. Proper health guidelines should be followed in tourist destinations and minimum people should be allowed to these places. Patients affected by the delta variant may need more levels of oxygen than the SAR-CoV-2 variant affected patients (10). So, even the vaccination process is going on but the oxygen supply and ventilators should be arranged by the government in advance. Not to suffer like India the government of Pakistan should make the arrangement of hospital beds in advance to tackle the upcoming severity of the fourth wave of COVID-19. For the enhancement of the awareness in public and to increase the mental strength of health care workers government might arrange fruitful campaigns (11). The potency of collecting vaccines should be

increased also be increased. Health safety guidelines should be strictly implemented by the government authorities.

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