

Situation of COVID-19 Wave II and Challenges of Nepal

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Abstract:

With South Asia becoming the center of the Corona Pandemic in recent times, Nepal has reached a position where the daily positivity is very high not only in this region but also in the world. Past experience and inability to learn from the rest of the world is biggest weakness and mistake of Nepal. The pandemic situation is behind the control of Nepal government. Nepal and Nepali people needs immediate international support, love and prayer to get rid from this pandemic.

Introduction:

The first case of COVID-19 pandemic (CP) in Nepal was confirmed on 23 January 2020.¹ It was also the first recorded case of COVID-19 in South Asia.² Nepal reported its first COVID-19 death on May 16.³ Death rate from COVID-19 was high in September and October in Nepal during the first wave of CP.⁴ Nepal is a landlocked country situated between China and India in South Asia. China lies in northern side of Nepal surrounded by High Mountains and no open border. Nepal is surrounded by India from East, south and west and holds a open border. Due to geographic and socio-economic relation between India and Nepal, the COVID-19 control policy of Nepal is also to some extent dependent on Indian situation and Indian government activities. Major surge of CP in Nepal was through India.¹

The second wave of CP started to hit the India from Mid March, 2021 and increased rapidly; reaching a peak of more than 400,000 recorded daily cases on 30 April.⁵ Many Nepalese were working in different parts of India. When they return back to Nepal, and when they tested for PCR majority of them resulted CP positive. Nepal government failed to trace all the Nepali workers who entered Nepal from porous border. Nepal government did not take it seriously, although, the situation in India was worse. It has resulted a high possibility that many of them may have carried COVID-19 into the country spread in countryside Last, year also major cases of COVID-19 were imported from India and led to rapid community spread¹. Nepal should have in very high alert situation, to make proper management of Nepali people returning from India with 100% coverage of people with PCR and other related tests.

As the situation was going to be very worse in India, Nepal did not initiate any preventive measures. There are a few mistakes from the Nepal government of Nepal. The government of Nepal took the situation very lightly and did not initiate any activities to control the movement in Nepal India border. It relaxed all rules for people coming to Nepal from any country. While a mandatory two-week quarantine of last year was not given priority, all one needed to enter Nepal was a negative PCR report conducted in the last 72 hours. People from India even made Nepal a transit to go to other countries. The contact tracing was also ignored.

According to data available from ministry of health, only about 150 new infections were appearing daily in Nepal by the end of March. Until the first half of April, daily trials were minimal, and daily infections and deaths remained normal.⁶ Since then, daily infections and deaths have risen sharply, and the Government of Nepal gradually increased the number of trials. The second wave of Covid-19 pandemic has struck Nepal evidently as daily reported infections rising exponentially every passing day. On 11th May, 2021, highest intraday cases, which was early recorded on October 21, 2020 when 5,743 cases were logged, with record 9317 cases.⁶ In recent times, mountainous districts such as Mustang and Manang, where new infections have only been seen



sporadically, there has been an increase in active infections. A deadly second wave of the pandemic is sweeping across Nepal, with about 8,000 new cases being reported daily for the past several days.

Covid-19 infections are spreading very fast during this second wave as compared to the first wave. With increasing daily infections, the number of deaths related with Covid-19 is also increasing in Nepal. The highest number of official death recorded was 246 persons on 19th May 2021.⁶ People doubt that this death rate should be quite higher than this because there were low number of government reported cases last year as well.⁴

Nepal has only 1,595 ICU beds and 480 ventilators for its almost 30 million people, according to an official COVID response plan officials came up with in May 2020. The country has only 0.7 doctors per 100,000, according to the report.⁷ With the spike in COVID-19 cases, the hospitals are turning patients away for want of beds and necessary equipment. There is also a shortage of oxygen in the country. Towns and villages near the Indian border have been hit particularly hard by the health emergency, with the number of people needing medical treatment rapidly rising. On the other hand, the crematoriums are overwhelmed, turning the management of dead bodies into a huge challenge for authorities.⁷ Currently, it is very difficult to find a place for corona treatment in hospitals in Nepal. News of a lack of oxygen and other drugs is no longer new. Nepal government should be very serious to save the lives of Nepali mobilizing extra health personnel, increasing covid-19 treatment hospitals, management of sufficient oxygen and drugs to needy people. Further, it is necessary to increase the morale of health personal working day and night for the treatment of COVID-19 patients.

A major contributing factor to the sudden spike in cases in Nepal is the Kumbh Mela — a Hindu pilgrimage to the Ganges River in India that drew millions throughout April. Over 50,000 Nepali pilgrims participated in the event.⁸ Other main reason is, government not learning from past experience and inability to learn from the rest of the world. Political unrest, political rallies, religious rallies, marriage ceremonies and party are other immediate major reasons.

On April 29, Issuing a public appeal, the Ministry of Health and Population told the level of infection has already gone beyond the capacity of the public health system. The government of Nepal says adopting prevention measures against the Covid-19 pandemic are a must as hospital beds cannot be enough for all patients.⁹

To get this under control, the government needs to ensure that more tests are conducted. But, it is not happening as people are only testing when they show Covid-19 symptoms. The lack of testing has been a major concern as the virus is transmitting into entire communities. On the other hand, there is no political unity between different political parties of Nepal. Ruling party failed to get the faith of opposition and his own parliamentary members. The president of Nepal has dissolved the parliament and set the election for November 12 and November 19.

To contain the spread of the virus, the Nepali government has imposed a number of restrictions on public movement and gatherings in many cities. Authorities have closed the border with

India and canceled all domestic and international flights. They have also temporarily closed all night clubs and gyms. Other important factor Nepal government needed to do is contact tracing, management of quarantine and isolation centers, proper public information and awareness campaign along with nationwide lockdown.

With South Asia becoming the center of the Corona Pandemic in recent times, Nepal has reached a position where the daily positivity is very high not only in this region but also in the world. Past experience and inability to learn from the rest of the world is biggest weakness and mistake of Nepal. As the situation with the second wave of COVID is very deadly and alarming, Prime minister of Nepal has requested international community to help in such a situation.¹⁰ Nepal needs important medical and equipment support from specially from donor countries to fight with this pandemic. Nepal government also needs to allocate proper budget to buy public health related curative and preventive equipments, medicines and vaccines

Finally, the current situation in Nepal must be regarded through extremely serious lenses. The long prevalence of this pandemic had created different types of psychological disorders among people of Nepal.^{4,11} Nepal government alone cannot control the situation. Support from donor agencies and international organizations is immediately required.

References

1. COVID-19 Situation and Challenges for Nepal. *Asia Pacific Journal of Public Health*. 2020; 32: 281–282. PubMed: <https://pubmed.ncbi.nlm.nih.gov/32545991/>
2. Situation of COVID-19 Pandemic in South Asia. *Journal of Health and Allied Sciences*, 10(2), 11-14. <https://doi.org/10.37107/jhas.184>
3. Fears of COVID-19 catastrophe as Nepal reports death from new Coronavirus. *J Phys Med Rehabil Disabil*. 2020; 6: 047. <https://doi.org/10.24966/PMRD-8670/100047>
4. Fears of health catastrophe as Nepal reports increasing deaths from COVID-19. *Arch Psychiatr Ment Health*. 2021; 5: 001-003. DOI: 10.29328/journal.apmh.1001027
5. <https://www.bbc.com/news/56987209> India Covid: How bad is the second wave? Accessed on May 8, 2021. <https://covid19.mohp.gov.np/>
6. <https://www.aninews.in/news/world/asia/electric-crematorium-in-kathmandu-overwhelmed-due-to-increase-in-covid-19-deaths20210503223944/>
7. <https://www.dw.com/en/nepal-coronavirus-second-wave/a-57461127>
8. <https://english.onlinekhabar.com/govt-hospital-beds-cant-be-enough-for-covid-19-patients-prevention-measures-are-a-must.html>
9. <https://www.aa.com.tr/en/asia-pacific/nepal-lack-of-beds-equipment-risk-lives-of-covid-19-patients/2000797>
10. Chalise HN. COVID-19 situation in Nepal. *Arch Psychiatr Ment Health*. 2020; 4: 033-034. DOI: 10.29328/journal.apmh.1001015