

How India has managed the COVID-19 first and second waves?

Sir,
COVID-19 pandemic has disrupted the world entirely. Many countries are facing multiple waves of the pandemic within a short period. As we face these waves, we start learning more about disease epidemiology, prevention, and management.

COVID-19 pandemic is showing differential impact region wise in different parts of the world. There are geographical differences in the severity and virulence of disease between the first and second waves. Various epidemiological factors, locking-unlocking strategies, and sociobehavioral factors are associated with the rise and fall in cases and deaths. Although the case fatality rate (CFR) decreased in most countries in the second wave, the disease is more virulent in some regions.^[1-3]

Globally, there are 185 million COVID-19 cases reported as of July 10, 2021. The CFR of COVID-19 is 2.16% in the world currently.^[4] India had notified the first COVID-19 case on January 30, 2020. A total of 31 million patients and 405 thousand deaths reported from India to date. The CFR of India is almost 39% less than that of the world presently.^[5] There is a vast difference in the cases, deaths, and CFR reported in India in the first and second waves.

In India, during the first wave, cases started rising rapidly from July 2020. The first wave lasted for about five months. There was finally a reduction in cases due to strict nationwide lockdown and other preventive strategies. Due to the early unlocking strategies, the second wave started too early in March 2021. The second wave is continuing now but flattened. The unprecedented rise in the COVID-19 cases has led to the collapse of the health-care system, which had already tired.

Training of health-care workers was a process on continuum during these two waves. Hospitals were earmarked for the treatment of COVID-19. Some new dedicated COVID-19 hospitals were established within a quick span of time. Simultaneously, research was going on drug and vaccine development. Screening centers were working day and night. More emphasis was given

on contact tracing and testing. Every medical college in India has established reverse transcription-polymerase chain reaction laboratory. International travel restrictions and even interstate travel restrictions were made strict. Quarantine centers were established. During the first wave, there was an institutional quarantine strategy, but during the second wave, home quarantine was allowed. The number of intensive care unit and oxygen beds was increased in each hospital. Vaccination was started in second wave in full swing. In this way, due to proper intersectoral coordination and cooperation, India has managed these two waves very well. It became possible only due to the dedication of all the frontline health-care workers.

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Conflicts of interest

There are no conflicts of interest.

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