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EDITORIAL

Second Wave of COVID-19 in India: Is it resulted due to Bad Planning?

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India is currently struggling with the second wave of COVID-19, which is more terrible than the first wave (Jan.-Sept., 2020) as per the number of affected cases and deaths per day. The second wave in India began around 11th Feb, 2021 and latest up to 9th May more than 4,00,000 new cases and more than 4,000 deaths per day have been reported [1]. This number of cases eclipses India's previous highest number of new cases reported in a single day, which were 97860 cases on Sept 16, 2020 [2]. These data are representative of the level of severity of the pandemic in India. At the present time, the whole country is struggling for hospitals, ventilators, medicines and other health care systems. Hospitals are besieged, and health workers are fatigued and getting the infection. The infrastructure of health care system in major cities has been collapsed and there is a situation of chaos and confusion. State governments are trying to manifest the situation by imposing curfew, lockdowns, and restrictions on gatherings but to date, no major positive outcome has been seen. In the sudden increase in demand for oxygen, the state governments are trying to generate new infrastructure, making various announcements and suddenly inaugurating new health facilities or oxygen plants. But the question needs to be addressed: Is it the appropriate time to do this? Or is it late?

Experts say that this hectic activity has been started in the middle of the ongoing and unstoppable rise in cases, whereas it should have come before. Before the beginning of this second wave of COVID-19 in early March 2021; Indian Health Minister stated that India was in the endgame of the pandemic [3]. The government proposed that India has defeated the COVID-19 as there were very fewer cases, despite the warnings of the emergence of second-wave due to the occurrence of new viral strains. Also, it was postulated that Indian population has reached sufficient immunity which led to false confidences among the population and no preparation against the second wave. The ICMR's survey revealed in January 2021 that only 21% population of India had antibodies

against SARS-CoV-2, which was a very small part of huge Indian population [4]. Meantime, the central government was involved in resolving the criticism on social media rather than preparing strategies to combat the pandemic. The belief of no occurrence of second wave led to reopening of societies to revitalize the economic growth.

Despite the warnings of the possible second wave, the government allowed several religious events, transport across the countries, huge political gatherings, elections and several other mass gathering events. Recently there were elections in five states of India, where huge political rallies were organized involving renowned Indian leaders, even the Prime Minister. The information regarding rallies and crowds was openly shared on social media. Indian election commission released notices regarding the threat of the spread of COVID-19, still no strict action was taken and later, the number of persons in an election event was reduced to 500. Meanwhile, the huge Hindu Festival "The Kumbh Mela" was also allowed to be organized involving a huge public attendance. This festival was stopped after 17 days when more than 2000 COVID-19 cases were reported in the attendees [5].

Although government started the vaccination campaign, but the false message of control of pandemic slowed the vaccination progress and only 2% of the population got vaccinated [6]. In the severity stage, government announced vaccination of all individuals of age over 18, which were without prior preparation and policies. Now the situation is that there is a lack of sufficient vaccine supply, major confusion among public and the health communities. Another major fact regarding the current wave is that the crisis has a different extent of exposure in different Indian states. For example, Uttar Pradesh and Maharashtra were unprepared for the sudden crisis leading to severe emergency of oxygen supplies, hospital beds and even cremation space. On the other hand, few states like Kerala and Odhisha were prepared and the requirements have been fulfilled to greater extent.

The shortage of oxygen supply has led to the development of dreadful situations. Indian government has stated in early

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April that daily production of oxygen was 7127 metric tonnes, whereas daily consumption was just 3842 metric tonnes [7]. But later on by 21st April, 2021, the daily consumption of oxygen was raised over 8000 metric tonnes. In this regard, Indian government stated that they are going to import about 50,000 metric tonnes of oxygen through foreign policies [8]. Several countries including USA, Germany, Singapore, France, UK, Netherlands, Bangladesh, Ireland, Switzerland, Bahrain, Qatar, Australia, etc., came forward to help India in this crisis period.

Indian government also stated that India's COVID-19 vaccine programme is the largest in the world. Indian vaccine manufacturing companies are exporting vaccines to many countries, such as Serum Institute is exporting AstraZeneca and also manufacturing Sputnik-V vaccine. But the unfortunate part in the current time is that India is facing a great shortage of vaccine for its own population. People are not able to get the second dose of Covaxin/Covishield whereas 18 plus vaccination programme has not been started yet in several states of India. A virologist Shahid Jameel from Delhi stated that "It was all bad planning" as no sufficient orders were given to the companies, which led to shortage of vaccines in the current time. Despite shortage, India is still exporting the vaccines to WHO's COVAX Facility [9].

The current situation is endangering in India as no part has been left untouched even the villages have been involved to a greater extent. People are dying due to lack of health facilities, policies and hospitals. Several persons/groups have been found involved in malpractice of Remdesivir sale, oxygen cylinder sale as well as in the ambulance services which is very unfortunate for India. Many state governments have imposed strict lockdown policies in order to break the infection chain, whereas some have exposed curfew and other restrictions.

India must work on two very important strategies to combat the prevailing infection. First the vaccination programme should be rationalized and must be run at all possible speed. The vaccine shortage should be fulfilled as soon as possible and the rural population which is 65% of total Indian population must be vaccinated at priority. Second, to reduce the viral transmission public must be made familiar with the true data about the dreadful situations and also possible lockdowns must be included with the involvements of

local governments. Each individual must contribute toward breaking this wave as soon as possible. Health volunteers can play a great role in combating this problem; therefore, health systems must implement suitable strategies and plans to improve their capabilities [10]. It can be achieved by running proper education plans for them at macro levels so that they can promote the self care among communities. Beyond this, health volunteers can also be benefited by providing them PPE kits, sanitary goods, masks, disinfectants, incentives, honouring ceremonies and appreciation awards.

CONFLICT OF INTEREST

The authors declare no conflict of interest financial or otherwise.

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