

What is expected in an editorial of a medical science journal?

It is undeniable that editorials in medical science journals should serve the purpose of drawing the attention of the administrative machinery of a country and its head, on what the Government could do for the benefit of its citizens. Such editorials are expected to be well tempered and not echoing the criticisms levelled by the opposition benches in the parliament or assembly. In the light of this well-established norm, a brief comment on a recent editorial¹ should be in order.

In this editorial, shortcomings in the management of COVID-19 pandemic during the second wave in India and the options available to efficiently manage and overcome the pandemic are given. However, the editorial digresses, criticizing the Prime Minister and the Government for the way it has so far managed the pandemic. In the past also, an editorial² was widely condemned as it directly interfered with internal security matters of India. Contrary to the expectations of the global scientific community for unbiased and impartial analysis, these editorials read like politically motivated columns.

The arguments in the latest editorial are flawed and its contents misleading. For example, India is about 1/3 the size of the USA, and has a population of more than 1.3 billion. It has 20 times the population compared to that of the UK. Comparing caseloads in the US or UK with those in India makes no sense. If one considers today's statistics, the total number of infected cases in India is 28,046,947, which works out to 2%, which is far less than the incidence in UK (6.4%). The fatality rate in India (1.16) is far less than that of UK (2.85) during the first wave. Total number of deaths till date is 329,127. Per cent death due to the pandemic is 0.0245, which is far less than that observed in the US or

UK. Does it not indicate that everything is not wrong with the management of the pandemic situation?

There cannot be any disagreement over the need for improvement in the management of COVID-19 crisis as pointed out in the editorial. India is not only going through the second wave of infection, which peaked on 6 May and is consistently going down (thanks to the measures taken by the Government and the vaccination programme that is in progress), but is also battling with new mutants that did not affect England or some other parts of the world. Well-meaning constructive criticism and suggestions are welcome by the administration and scientific community for improvement, especially when the entire world is facing unprecedented crisis due to rapidly evolving new coronavirus strains. It is important to recognize the geographical and socio-economic diversity, population size, and inadequate infrastructure in India which makes it difficult to meet the enormous and varied challenges thrown up by the pandemic. In spite of all these, India has done better than most advanced countries. The role played by India and its leaders early in the pandemic, has been hailed by most countries.

The Indian Government has not relaxed its measures to control the pandemic. As of today 12% of its 1.3 billion population has received the first dose vaccination and 3.1% has been fully vaccinated. Yes, the situation could have been better if we had more vaccine doses available. It should be appreciated that much of the vaccination programme in India is from the vaccine produced within the country, as vaccine imports are not yet possible on large scale, because even in the countries where they are produced, the vaccination programme is in progress. Producing new vaccines and

getting them approved for public use is a time-consuming process. In spite of all odds, India not only has been successful in producing two vaccines which are already being used in vaccination programmes, but also supplying vaccines to 95 countries – a humanitarian act which needs appreciation rather than criticism. Should India have been selfish and not come forward to help other developing countries, which are also suffering and have no vaccines produced in their own countries?

Continued use of drugs like hydroxychloroquine, ivermectin, favipiravir, etc. without sufficient scientific evidence for management against COVID-19 needs to be looked into. Overuse of remdesivir, that seems to lack life-saving properties is another aspect that needs discussion. The role of traditional approaches of the Ministry of AYUSH, which have helped in prevention, home-care and management of asymptomatic, mild COVID-19 and effective convalescence are other matters for discussion. Many medical experts feel that the COVID-19 response in India has been rapid, strategic and multipronged and has adapted to the evolving pandemic situation.

Editorials in journals such as *The Lancet* should refrain from making statements ignoring facts, causing panic; and worse, making comments like politicians.

1. *The Lancet*, 2021, **397**, 1683.

2. *The Lancet*, 2019, **394**, 542.

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