



COVID-19 in Brazil: A Message to the World

Bruno Ramalho de Carvalho¹

¹ Hospital Sírio-Libanês, Brasília, DF, Brazil

Rev Bras Ginecol Obstet 2021;43(3):238-239.

Address for correspondence

Bruno Ramalho de Carvalho, SGAS 614, conjunto c, sala 177, Edifício Vitrium – Centro Médico Inteligente, Asa Sul, 70200-740, Brasília, DF, Brazil (e-mail: ramalho.b@gmail.com).

Dear Editor,

Although the spread and severity of the Spanish Flu pandemic in 1918 have been much more significant than the numbers of COVID-19 so far, ¹ no one is able to affirm that the current crisis is nearing its end, and it is plausible to expect that it will overcome the "mother of all pandemics" and become the greatest pandemic event in human history. Such a fear is valid for the whole planet, but even more for Brazil. An observer attentive to the Brazilian scenario today, March 15, 2021, can assume exactly the reverse of the reality we would like to see: the country is considered a new global epicenter of the disease, having recorded rising curves of cases and deaths, and recently reached more than 2 thousand daily deaths.²

The emergency of COVID-19 in Brazil is noticed all over the world and makes the country's mistakes in facing the threaten more than evident. However, the announcement of scientific inconsistency in the discourse and actions of the Brazilian government in the face of the pandemic does not come from today: native and foreign researchers have been trying, over the last year, to warn about it.³⁻⁹ Furthermore, the apparent ineptitude of those who hold power is compounded by the neglect of a significant portion of the population, which, according to the mainstream media, preferred to form agglomerations from the Christmas festivities to the carnival, in spite of following the contrary recommendations from the World Health Organization.¹⁰

Yes, what we see here is the clear effect of the so-called post-truth¹¹ echoing in science, mixing reason and emotion in a contradictory broth, and taking people to the extreme of a faithful belief in any speech that relieves fears or promises a miracle of healing. In September 2020, we ourselves warned about the alternation between the useful, the uncertain and the futile in the COVID-19 epidemic in Brazil,¹² where the consumption of pseudoscientific or pre-scientific information has led authorities and deniers to indisputable misunderstandings. A clear example is the defense of early

treatment with hydroxychloroquine or ivermectin, ¹³ even after several satisfactorily well-designed studies have pointed out the ineffectiveness of those drugs, whether for prevention, early treatment or decreased mortality of people affected by SARS-CoV-2. ^{14–21}

Not without reason, the whole world is watching closely the curves of COVID-19 in Brazil. Currently, the growth of the Brazilian epidemic is too worrying. If we are still below the United States in absolute numbers (we just passed India),²² the relative numbers demonstrate that our epidemiological catastrophe has requirements to take the lead soon. It is worth saying here that many Brazilian citizens have been inspired by the intransigence coming from federal managers and have ignored even the basic measures to combat the transmission of the virus, such as wearing a mask and social distance. There is no way to ignore this popular behavior as a potential catalyst for this movement toward the complete lack of control of the disease.

At the moment we are dealing with the threat of new variants, ^{23–26} which appear to be easier to transmit and, therefore, can lead to the worsening of the situation, regardless of leading to more severe clinical conditions. Also, with the imminent collapse of the health system, which, according to the COVID-19 Observatory of the Oswaldo Cruz Foundation, had an occupancy of intensive care beds greater than 80% in 19 of the 27 federative units, in the last week.²⁷

Finally, we are facing a vaccination program well below the desirable for a country of continental dimensions like Brazil. Between conflicts with the National Health Surveillance Agency and resistance (at least in the beginning) to the acquisition of vaccines, the federal government does not inspire confidence in predicting the availability of immunizers quickly and in a number satisfactory to our people.

We are in the eye of the storm, with just over 4% of the population vaccinated, ²⁸ almost two months after the start of the immunization campaign. With optimism, we will achieve the 50% in 2021. And we wait for the actions of the new minister of health, the fourth to assume the Ministry since the

received March 17, 2021 accepted March 17, 2021 DOI https://doi.org/ 10.1055/s-0041-1728660. ISSN 0100-7203. © 2021. Federação Brasileira de Ginecologia e Obstetrícia. All rights reserved.

This is an open access article published by Thieme under the terms of the Creative Commons Attribution License, permitting unrestricted use, distribution, and reproduction so long as the original work is properly cited. (https://creativecommons.org/licenses/by/4.0/)
Thieme Revinter Publicações Ltda., Rua do Matoso 170, Rio de Janeiro, RJ, CEP 20270-135, Brazil

beginning of the pandemic, which already comes up facing the enormous challenge of controlling the Brazilian ship adrift.

This message to the world is both a vent and an appeal for the rescue of science in the conduct of COVID-19 in Brazil. Here, we have good researchers and solid scientific institutions, capable of providing proper support to such a movement. Science (and only it) will provide the answers we need and there is no doubt that denying it has been the most serious mistake of our government so far. It is time to change course. Otherwise, we will be charged by the world for something that we will not be able to reimburse.

References

- 1 Taubenberger JK, Morens DM. 1918 Influenza: the mother of all pandemics. Emerg Infect Dis. 2006;12(01):15-22. Doi: 10.3201/ eid1201.050979
- 2 Ministério da Saúde. COVID-19 no Brasil: dados até 10/03/2021 [Internet]. 2021 [cited 2021 Mar 11]. Available from: https:// susanalitico.saude.gov.br/extensions/covid-19_html/covid-19_html.html#/dashboard
- 3 The Lancet, COVID-19 in Brazil: "So what?" Lancet, 2020;395 (10235):1461. Doi: 10.1016/S0140-6736(20)31095-3
- 4 Dyer O. Covid-19: Bolsonaro under fire as Brazil hides figures. BMJ. 2020;369:m2296. Doi: 10.1136/bmj.m2296
- 5 Ortega F, Orsini M. Governing COVID-19 without government in Brazil: Ignorance, neoliberal authoritarianism, and the collapse of public health leadership. Glob Public Health. 2020;15(09): 1257-1277. Doi: 10.1080/17441692.2020.1795223
- 6 Lasco G. Medical populism and the COVID-19 pandemic. Glob Public Health. 2020;15(10):1417–1429. Doi: 10.1080/ 17441692.2020.1807581
- 7 Ferigato S, Fernandez M, Amorim M, Ambrogi I, Fernandes LMM, Pacheco R. The Brazilian Government's mistakes in responding to the COVID-19 pandemic. Lancet. 2020;396(10263):1636. Doi: 10.1016/S0140-6736(20)32164-4
- 8 Carnut L, Mendes Á, Guerra L. Coronavirus, capitalism in crisis and the perversity of public health in Bolsonaro's Brazil. Int J Health Serv. 2021;51(01):18-30. Doi: 10.1177/0020731420965137
- 9 Idrovo AJ, Manrique-Hernández EF, Fernández Niño JA. Report from Bolsonaro's Brazil: the consequences of ignoring science. Int J Health Serv. 2021;51(01):31-36. Doi: 10.1177/ 0020731420968446
- 10 World Health Organization. Coronavirus disease (COVID-19) advice for the public [Internet]. 2021 [cited 2021 Mar 15]. Available from: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public
- 11 Oxford University Press Oxford Languages. Word of the Year 2016: post-truth [Internet]. 2016 [cited 2020 Apr 8]. Available from: https://languages.oup.com/word-of-the-year/2016/
- 12 Carvalho BR, Fonseca FF, Beltrão HBM. Thinking about COVID-19 scenario in Brazil: the alternation between the useful, the uncertain and the futile. Rev Bras Ginecol Obstet. 2020;42(09): 519-521. Doi: 10.1055/s-0040-1717142
- 13 Ministério da Saúde Conselho Nacional de Saúde. CNS pede que Ministério da Saúde retire publicações sobre tratamento precoce para Covid-19 [Internet]. 2021 [cited 2021 Mar 15]. Available from: http://conselho.saude.gov.br/ultimas-noticias-cns/1570cns-pede-que-ministerio-da-saude-retire-publicacoes-sobretratamento-precoce-para-covid-19

- 14 Boulware DR, Pullen MF, Bangdiwala AS, et al. A randomized trial of hydroxychloroquine as postexposure prophylaxis for Covid-19. N Engl J Med. 2020;383(06):517-525. Doi: 10.1056/NEJ-Moa2016638
- 15 Tang W, Cao Z, Han M, et al. Hydroxychloroquine in patients with mainly mild to moderate coronavirus disease 2019: open label, randomised controlled trial. BMJ. 2020;369:m1849. Doi: 10.1136/bmj.m1849
- 16 Horby P, Mafham M, Linsell L, et al; RECOVERY Collaborative Group. Effect of hydroxychloroquine in hospitalized patients with Covid-19. N Engl J Med. 2020;383(21):2030-2040. Doi: 10.1056/ NEJMoa2022926
- 17 Kim MS, An MH, Kim WJ, Hwang TH. Comparative efficacy and safety of pharmacological interventions for the treatment of COVID-19: A systematic review and network meta-analysis. PLoS Med. 2020;17(12):e1003501. Doi: 10.1371/journal. pmed.1003501
- 18 Self WH, Semler MW, Leither LM, et al; National Heart, Lung, and Blood Institute PETAL Clinical Trials Network. Effect of hydroxychloroquine on clinical status at 14 days in hospitalized patients with COVID-19: a randomized clinical trial. JAMA. 2020;324(21): 2165-2176. Doi: 10.1001/jama.2020.22240
- Mitjà O, Corbacho-Monné M, Ubals M, et al; BCN-PEP-CoV2 Research Group. A cluster-randomized trial of hydroxychloroquine for prevention of Covid-19. N Engl J Med. 2021;384(05): 417-427. Doi: 10.1056/NEJMoa2021801
- López-Medina E, López P, Hurtado IC, et al. Effect of ivermectin on time to resolution of symptoms among adults with mild COVID-19: a randomized clinical trial. JAMA. 2021; ...; Doi: 10.1001/ jama.2021.3071 [ahead of print]
- 21 Galan LEB, Santos NMD, Asato MS, et al. Phase 2 randomized study on chloroquine, hydroxychloroquine or ivermectin in hospitalized patients with severe manifestations of SARS-CoV-2 infection. Glob 2021;•••:1-8. Health. Doi: 10.1080/ 20477724.2021.1890887 [ahead of print]
- World Health Organization. WHO Coronavirus (COVID-19) Dashboard [Internet]. 2021 [cited 2021 Mar 15]. Available from: https://covid19.who.int/table
- 23 Fujino T, Nomoto H, Kutsuna S, et al. Novel SARS-CoV-2 variant identified in travelers from Brazil to Japan. Emerg Infect Dis. 2021; 27(04):. Doi: 10.3201/eid2704.210138
- 24 Maggi F, Novazzi F, Genoni A, et al. Imported SARS-COV-2 variant P.1 detected in traveler returning from Brazil to Italy. Emerg Infect Dis. 2021;27(04):1249-1251. Doi: 10.3201/eid2704.210183
- 25 Claro IM, da Silva Sales FC, Ramundo MS, et al. Local Transmission of SARS-CoV-2 Lineage B.1.1.7, Brazil, December 2020. Emerg Infect Dis. 2021;27(03):970-972. Doi: 10.3201/eid2703.210038
- 26 Faria NR, Mellan TA, Whittaker C, et al. Genomics and epidemiology of a novel SARS-CoV-2 lineage in Manaus, Brazil. medRxiv [Preprint]. 2021 Mar 3:2021.02.26.21252554 Doi: 10.1101/ 2021.02.26.21252554
- 27 Ministério da Saúde Fundação Oswaldo Cruz (FIOCRUZ) Série histórica da situação de ocupação de leitos de UTI Covid-19 para adultos no SUS [Internet]. 2021 [cited 2021 Mar 15]. Available from: https://portal.fiocruz.br/sites/portal.fiocruz.br/files/documentos/serie_historica_leitos_uti_covid-19_adultos.pdf
- Ministério da Saúde. COVID-19 Vacinação, Doses Aplicadas [Internet]. 2021 [cited 2021 Mar 15]. Available from: https://viz. saude.gov.br/extensions/DEMAS_C19Vacina/DEMAS_C19Vacina. html