There will be no solution outside an internationally coordinated effort

Italian health care workers speak out on coronavirus pandemic

By Marc Wells
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Italy’s health care system is under unbearable strain amid an exponential rise in coronavirus infections and deaths. Friday, Italian authorities announced a total of 47,021 infections and 4,032 deaths so far.

Health care workers are making immense efforts and sacrifices to try to minimize the impact of the virus and reduce deaths. However, they are dealing with the limitations of a system that, despite warnings by the international scientific community for 20 years, is so starved of funds that it cannot adequately deal with standard operations, let alone a historic health emergency.

The brutality of the virus cannot not be underestimated: while many of the deceased are above the age of 80, daily reports are revealing that no one, including the young, is safe from the risks of long-term complications or even death.

Southern Italy (the ‘Mezzogiorno’) has not yet been affected to the level of the north. However, the numbers of infected there are catching up rapidly, while health care infrastructure in the Mezzogiorno is a fraction of what it is further north.

On March 7, the day the Conte government shut down the Lombardy region, a wave of emigrés rushed back to their southern hometowns, bringing the infection with them. This is now likely to produce dire consequences: the region of Apulia has doubled its death toll in one day, while Sicily and Campania are preparing to mobilize the army.

The WSWS spoke to medical personnel from Central Italy.

Emanuele Sorelli is a registered nurse in one of Florence’s public hospitals. The General Medicine department where he works has now been converted to a specialized COVID-19 unit. “On March 10, the hospital shifted its testing criterion and started testing all patients coming through the Emergency Room, not just those with grave symptoms. Over 48 hours, we discovered that nearly all incoming patients were positive.”

Emanuele explained the new testing procedure: “Unlike Lombardy, here in Tuscany we decided to test all incoming patients, then dispatch them to either the COVID or No-COVID departments. Unfortunately, Lombardy had to face large numbers of sick people and they had to convert entire hospitals to infectious decease treatment.

“The wave of contagion is slowly moving south,” Emanuele said. “Now, we are seeing larger numbers in the center; soon the south will be overwhelmed. In my hospital, many No-COVID units are being converted to COVID, due to the rapid rise. Only today, we opened two new units, tomorrow we are opening another.”

Further south, he said, “The migration of those workers traveling back to their southern hometowns after the government’s order will start producing effects in the next week. Tuscany and Emilia Romagna are possibly the best in health care infrastructure, but in Campania, Basilicata, God help us!

“Our units are completely contaminated, as these sections were not originally set up for infectious diseases. We can wear our protective gear for 2-3 hours at a time, it’s exhausting. The hospital has hired new contingency personnel in the last week, former temp doctors and nurses.” He remarked, “Our problem is shortage of protection gear and we already have reported 4 positives among my coworkers (they are actually sick).”

The virus is highly contagious: “We presume that most of us are positive. We are all contaminated, including our families. I’ve had a sore throat, so does my partner and daughter. We hope it won’t turn to pneumonia. The problem is not our patients, but the contagion among coworkers working in small spaces. And we risk infecting patients who are negative.”
Emanuele said 5 to 10 percent of patients get interstitial pneumonia. “Of these, 5-10 percent require intubation and intensive care. For those, specialized areas are needed, and we have a dangerous shortage of beds. In those areas, you need one nurse per patient, plus equipment. And no doubt, in Lombardy they’ve had to make harsh choices about which life to save. The elderly are sacrificed.”

Finally, he warned, “Interstitial pneumonia may have no symptoms. Then it suddenly advances to suffocation. Patients require immediate intubation. A 30-year-old patient required it, and he was shocked because he could still breathe fine. Time is the difference between life and death.

“Social distancing is essential. In Southern Italy, the lead actress of a theater play was positive and she infected everyone, cast and audience. Many of us have no idea we are positive.”

About job safety, he said: “There’s shortage of equipment, masks especially. No country will sell them to us. The European Union did not help us; they don’t understand that what happens in Italy will inevitably propagate to Europe. Only China has been helping with supplies. Once we run out of FFP2 and FFP3 [masks], we will be totally exposed.”

The WSWS also spoke to Prof. Stefano Arcieri, leading Physician at Rome’s Policlinico, the polyclinic of the Faculty of Medicine and Surgery of Rome’s Sapienza University.

He said, “We are paying for inadequate management of the initial response. The danger of contagion had not been assessed properly some 10-12 days ago. Directives were optional and lax; now social distancing has been implemented, with serious restrictions. It’s important to think in collective terms: masks must be worn around older people or people with pathologies to protect them from possible contagion, especially from people who are either positive but asymptomatic or may be unknowingly positive.”

Arcieri recommended preventive measures: “Wash your hands thoroughly, the virus travels through droplets and survives on surfaces for hours, if not days, although no conclusive study has determined this with absolute accuracy. Avoid touching any part of your face.

“There is a rising trend in contagion. We are hoping the containment measures will bear fruit and that infections may decline, at least based on the Chinese experience.”

Prof. Arcieri commented critically: “I must say that every country responded with delay. Probably, no one was anticipating such worldwide spread. One thing is certain: in addition to the health crisis, we are looking at a world economic crisis: massive resources must be deployed. Medical personnel are not tested, although demands are being advanced. Given our exposure, it seems an obvious demand.

In conclusion, he said: “Everyone must play a part. If in a month or two Italy should find itself in the same conditions as China today, which show an improvement, that would still mean Italy has not solved the problem. A solution can only be found at a global level, or the fuse will be lit somewhere and we start all over again. The problem here confronts the world population, not a given nation-state. Some countries prevent people from entering their territories, but this will not solve the problem. We don’t just fight at home, the battleground is the whole world. There will be no solution outside an internationally coordinated effort.”

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