“We have the technology and knowledge, but it won’t work under capitalism”

An interview with a foreign-trained doctor prevented from fighting COVID-19 in Canada

By Janet Browning
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The World Socialist Web Site recently spoke with Dr. Sagara Wijesooriya, who has 10 years’ experience working on the medical frontlines combatting the deadly spread of malaria, cholera and dengue fever in his native Sri Lanka as a leading anesthesiologist in intensive care units.

A medical graduate from the prestigious University of Peradeniya, Dr. Wijesooriya worked in primary care but also assisted during brain surgeries in overcrowded hospitals. He moved his family to Edmonton in March 2013 and has struggled since then to get an Alberta medical license. He thought the coronavirus pandemic would surely provide him with such an opportunity. Yet, despite the dire need for doctors and other medical professionals across the country, Wijesooriya is one of thousands of foreign-trained medical professionals who continue to be blocked from practicing in their fields.

“I had a final clinical exam scheduled for May that’s been postponed, and I don’t think it will get rescheduled very soon because of this pandemic,” Dr. Wijesooriya told the WSWS. He has offered to work as an assistant to other physicians or in other supervised support roles in two other provinces. “All I want to do now is help people in need,” he said. “I live here in Alberta, I settled here, and I would like to give my service to the people here.”

He also spoke about the frustrating process for getting foreign medical qualifications recognized, which can take up to a decade and cost tens of thousands of dollars. “This is very disappointing after spending all this money and sacrificing our careers. We want to join this fight with the health sector because we trained to do it and that’s our life,” he commented. “The fight against COVID-19 is for those critical patients, so they may need ventilation, and I’m very familiar with the process with my vast experience in intensive care units.

“There are many internationally trained doctors with experience of tropical diseases, some of which are dangerous infections like Dengue fever, Malaria, Tuberculosis, Cholera, and many more,” he continued. “Politicians talk endlessly about the economy, stock markets and oil price. Meanwhile, the hospitals are understaffed.”

Dr. Wijesooriya also criticized governments’ failure to secure staffing levels in the health system, which he explained would have deadly consequences. “It seems that the politicians think the ventilators can be run by anyone, or they operate automatically. I have 10 years’ experience working with modern ventilators,” he stated. “Even with the best equipment, prolonged ventilation can kill a patient without expert staff on hand. This is a highly complex task and one must always check the vitals’ monitor, breathing tubes, ventilator changes, oxygen delivery, invasive lines, fluid and electrolytes, blood investigation, while administering various drugs, suction and so on. Very expensive inward blood gas machines are also needed to continue ventilation of a patient. A nurse must be trained one-on-one to assist the patient.”

He also sharply condemned those policymakers in Canada and internationally who are promoting a “herd immunity” policy, as opposed to fighting to prevent the spread of COVID-19. “I am sick of hearing about it!” he said. “They are misleading the public about this. [They
claim the majority of the population should be infected to develop herd immunity to protect the people who are not immune. We don't know exactly about the level of immunity after a COVID-19 infection. Some scientists suspect that there are several strains of the virus spreading on different continents and the truth is we don't know much about them. We should base our response on real information, not speculation.”

Turning to the impact of the Canadian authorities’ refusal to let him and other internationally trained colleagues practice in their fields, he noted, “My wife worked as a nurse in Sri Lanka for 12 years, but now she is working as a nursing assistant, not a nurse. I am employed in a senior’s facility as a Recreation Therapy Assistant. I work the day shift and she works the night shift to care for our three children, including my son with special needs, so our life is very hard and we are struggling to survive.

“Now that the schools are closed and the kids are switched to on-line school, it is uncomfortable for the teachers, since all their support workers will be laid off as a result of provincial budget cuts to education. And Jason Kenney’s United Conservative Party (UCP) provincial government has decided to privatize the senior public care facility where we both work during this crisis time.

“I have many friends who are in the same terrible situation. I know some internationally trained doctors who work as clinical assistants under supervision of a licensed doctor in busy hospitals, and they make less than 20 percent of the money made by a doctor with an independent licence, around $60,000 per year. They must work all the unpopular shifts including nights, weekends and holidays for an annual fixed salary.”

Wijesooriya also remarked on the absence of a globally coordinated response to the worldwide pandemic, which has infected more than 2 million people and claimed over 125,000 lives. “We should have been declaring an international state of emergency on January 1, 2020, as soon as China said they had an epidemic, but none of the Western capitalist countries chose to act to protect their people,” he said. “There should be global forums of scientists set up with full resources to take over the vast assets of the private pharmaceutical companies and medical technology and research companies to work globally to invent a vaccine as soon as possible.

“The viral research technology of the world is owned by the world powers, including the USA, China, Russia, UK, Germany, and France. Virology and genetic engineer experts are scattered in research labs and different universities all over the world. Experienced epidemiologists live in tropical countries like India. They all must work together to invent vaccines against COVID-19 strains without aiming for profit. We have the technology, knowledge, and research facilities, but it won’t work under capitalism and its nationalist profit motive. It should be an international medical effort, including experts from the relevant fields, but not the big pharmaceutical companies, who are waiting to make billions from the global crisis.”

Wijesooriya issued an urgent appeal for action, commenting, “Unlike other countries, Canada has thousands of internationally trained, experienced doctors and nurses currently who work in different fields. If the government is not going to use this asset to save Canadians’ lives, it would be the biggest mistake they could make. It will be too late if they don’t call internationally trained medical doctors now. They need to familiarize themselves with the system and institutional protocols. It seems that the politicians don’t care about people’s lives; instead, they still worry about the stocks and businesses.

“The politicians are printing money for the banks and the bourgeois class are laughing. Look at Trudeau. How much did he give the food banks? A meagre $100 million and compare it to what he gave the chartered banks in tax cuts and loan guarantees. Kenney is the same. All the consequences of this will have to be faced in the future. Canada is still at the beginning of the first wave of COVID-19 cases and we may have to face the peak and subsequent waves. But there is no sign of a solution from the capitalist governments. The decision for workers is to accept death or fight for socialism to live.”

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