Dear Editors

The COVID–19 outbreak is a major public health emergency initially occurred in Hubei, the epicenter in China, and then it rapidly turned into a global pandemic with much more than five million infected cases as of 28 May, 2020 [1]. Thanks to the joint efforts from all parties, especially the great contributions from Chinese medical workers, China’s domestic situation has improved significantly, while it remains severe in the rest of the world.

As a matter of fact, this sudden outbreak has become an enormous challenge for healthcare workers worldwide. According to data from the centers for disease control and prevention (CDC), the number of confirmed COVID–19 infections in the United States has reached nearly 1.7 million as of 27 May local time. At least 294 of the 62,690 doctors, nurses and other healthcare workers infected have died. The number of infected HCWs in the United States is more than total infected cases in countries such as Pakistan (about 59,000) or Belgium (about 57,000). Figures from China’s National Health Commission show that more than 90% (3,062) of the 3,387 medical workers infected came from Hubei province, accounting for about 4% of all cases. Other figures also manifested that front–line HCWs in other epicenters like Spain, Germany and Italy have high rates of infection [2,3].

As a novel virus, COVID–19 is extremely infectious with confirmed human-to-human transmission and 2-week incubation period [4]. Asymptomatic carriers during incubation can also be potentially contagious [5]. There are various factors conducive to the high infection risk: the large-scale human migration over the Chinese Spring Festival, the fact that patients characterized with mild symptoms flooded into hospitals in panic [6] and most importantly, the large demand of personal protective equipment (PPE) greatly exceeded the supply. However, even in this situation, over 42,000 health workers called “countermarching people” answered to the call swiftly to assist Hubei province [7]. More than 3,000 local medical workers there have been infected, 40% of which are infected in hospitals and most of them are not physicians specialized in infectious diseases [8]. All Health–Care Workers(HCWs) suffered from physical pressure and psychological torment due to overloaded work, the sense of powerlessness of the COVID–19 epidemic, witnessing death of patients and comrades-in-arm, and so on [9]. Some nurses resolutely cut their hair short to reduce the risk of viral infection. A front-line nurse cannot attend her mother’s funeral back in hometown, and all she could do at this critical time was to bow in the direction of home.

During the fight against the epidemic, the medical groups have played a landmark role. Prof. Zhong Nanshan, 84 years old and the leading hero combating SARS, was the first to confirm human-to-human transmission. The epidemic whistle blower, Dr. Li Wenliang, who was on the front line to save patients even after being warned, was ended up collapsing on his job. Their efforts promoted the implementation of “hospitalize all
suspected and confirmed patients” “all confirmed patients should be treated” later, which proved the success of zero growth in China.

Since the outbreak of COVID-19, numerous medical workers have been fighting tirelessly. In view of their sacrifice, dedication, and perseverance, it’s of paramount importance to ensure the safety of medical staff engaged in securing patients’ lives, meet their reasonable needs, and solve practical difficulties. Chinese government encouraged patients with mild symptoms to recuperate at home and receive treatments from family doctors and community clinics, and the government also focused resources on the elderly, children, and patients in severe condition, which at a certain extent reduced pressure on medical staff. Beside series of basic epidemic prevention and control strategies, the Chinese government has taken a raft of measures to provide security and boost effectiveness for medical personnel in 10 aspects, such as improvement of salaries and welfare, occupational injury recognition, professional title evaluation, implementation of life security, psychological counseling, and humanistic care as well as martyrs commendation, etc [10]. It’s indeed necessary to establish a reasonable system of rotation and adjust schedule time to ensure adequate rest as well as provide timely psychological crisis intervention to alleviate mental stress. Therefore, more than 300 psychological medical professionals have set out to Wuhan to provide psychological adjustment services for both patients and medical team members [7]. Simultaneously, Pre-job training from infection control experts on personal prevention was provided at meantime.

Moreover, in order to suffice the protection for front-line medical personnel, industry and governments should act rapidly to resume continuous output to guarantee medical supplies for the front-line and mitigate export restrictions. COVID-19 cannot be contained without prioritizing the safety of HCWs. Undoubtedly, our concern and admiration for HCWs should not be limited to this epidemic, but be institutionalized and normalized. The gratitude to medical staff is supposed to render into our respect, understanding, and trust in daily life.

It is worth noting that so far, none of the more than 42,000 HCWs in the Hubei medical team has been infected [3]. We hope that China’s medical supplies and experience can be helpful in control strategies, clinical monitoring, treatment and rehabilitation, and protecting healthcare workers from mental problems. With infectious cases increasing sustainably and medical pressure brought by the epidemic, the need for HCWs’ protection should have a corresponding increase. In addition to strictly adherence to the principles of safety and disinfection, regular virus tests should be performed no matter the individual has the symptoms or not. We firmly believe that China and the world will be empowered to contain and eradicate COVID-19 eventually. Even after the outbreak is ended, our care for healthcare workers should still continue and the protection system for them should be improved. Only in this way, we humanity with healthcare workers will be more confident and courageous in the face of more dangerous human diseases in the future.

References

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