Editorial

Are We at the Edge of Global Pandemic, Are We Prepared, the Contexts nCoV 2019 Outbreak

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Current episode of nCoV 2019

Since the notification to WHO of the first suspected cases of nCoV 2019 on 31 December 2019, the story evolution looks like as if we are currently thrown at the edge of global threatens. The continuation of successive episodes of consecutive bacteriology largely reflects growing capabilities of threat that could place the world on the edge of an unprecedented threat. The outbreak has managed to expand the scope of its spread in a remarkable way too many countries and diverse population groups without visible indicators showing the possibility of limiting the spread of the outbreak and narrowing its scope. Thus, the cosmic community finds itself with two main issues, the first is the weak capabilities of prediction and preparedness, and the second is the inability to contain early outbreaks using the resources available for national and local health systems [1-3].

Lack of prediction and preparedness at national health systems

The experience of exposure to trans boundary hazards in the last three decades that the world has witnessed confirms that there is no way to deny that local and national health systems, it must be able, technically to simulate the underlying and imminent dangers. That can pose a challenge to the global public health system. This is evident in the world witnessed the spread of SARS, Ebola, Zika virus and the Middle East Respiratory Syndrome (MERS-CoV), which have caused profound transformations in public health systems not only in terms of preference, prediction, and response but also coordination and integration with international public health system response [4,5].

Outbreak morbidities and mortalities

Time after time, the numbers and the facts related to an outbreak, whether current or previous outbreaks reflect that we often find ourselves with growing and accelerating numbers of injuries that expand in their temporal dimensions and spatial

dimensions with a steady suspicion and an accelerator exceeds the available capabilities to reduce it despite the application of all available protocols, which may reflect the need for a new look and innovative mechanisms for confrontation and response that were not familiar with health systems before, in the sense of thinking outside the box in an unfamiliar way [6].

This corresponds to a growing number of victims (deaths), especially with regard to vulnerable groups, which are often easy prey for such outbreaks. In light of the absence of the capabilities to provide adequate protection for these groups in addition to the deadly hostile behavior of such outbreaks and confusion caused by the outbreak as a result of trauma-based on lack of preparedness or absence of expectation. Accordingly, the course of the outbreak often reflects frightening statistics on the level of disease incidence and prevalence and mortality rates among different population groups [7].

Economic implications

In most times, cross-border outbreaks place the fate of the world on the edge of the threat and overburden, the burden due to its direct impact on the movement of trade and tourism-related activities and productive activities and cast thousands of people out of the cycle of production and effective economic activity. Thus, the burdens multiply and take other forms that are not limited to the direct health and financial burdens required to deal with the disease, but rather extend to the burdens of the global economic slowdown and its deterioration [8-10].

Gaps in the international public health system

In contexts of successive threats to the public health system represented by we see that the international public health system needs a new leadership vision-based largely on the ability to predict and initiate rather than wait and respond, and this may be achieved by linking vital information systems with public health sciences and bringing epidemiology side by side with information and data management techniques, and artificial intelligence, in addition to genetic studies related to epidemic mutant viruses, thus the international health system has made

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revolutionary steps towards the principles of early prevention and avoiding the underlying and imminent dangers. We can say that one of the most important reasons for the inability of the international global health systems to anticipate and challenge epidemics before they occur is that we are not yet able to use the available resources effectively and benefit from the data of the tremendous progress in the sciences and technologies that humankind has achieved [11,12].

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