

Covid-19 Could Have Been Prevented and the Growing Vulnerability of Obese Patients to the Virus

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It has yet to become clear just how harmful the coronavirus (Covid-19) will prove to be, with case figures and deaths continuing to evolve. As was anticipated, this highly contagious disease is causing havoc once it enters hospitals, nursing homes and other care facilities – where the virus is spreading forth at ease and infecting thousands of vulnerable people.

To make matters worse, in the neoliberal era, hospitals and care centres have been underfunded and stripped of staff due to cuts or privatisation. For elderly people with underlying conditions like cancer or diabetes, the coronavirus has provided a death knell to an already depleted constitution. On these occasions the impression is often given, by mainstream media and politicians, that Covid-19 resulted solely in the patient's death. It is more likely that, in many cases, the virus was a contributory factor in the loss of life, rather than the single cause.

Yet this virus should certainly not be written off as a mild disease, as analysis later on here may demonstrate. In some instances Covid-19 has been unwisely and recklessly dismissed, downplayed or even blamed on other countries.

Unlike heart disease or cancer, the coronavirus is of course infectious; it can spread quickly, unseen and, crucially, there is no vaccine or immunity to it. Therein lie some of the legitimate core concerns relating to this illness.

Covid-19's emergence was most likely as a combination of the following factors, bolstered by scientific opinion and research: Industrial meat production which is massively reliant on the administering of antibiotics (1). Dangerous, mutant bacteria resistant to drugs have been developing as a result of overuse of antibiotics fed to livestock. America and China, the world's strongest economies, are among the largest utilisers of antibiotics in meat processing and agriculture.

Tellingly, antibiotic resistance in domestic animals has almost tripled since the year 2000, as antibiotic usage has exploded this century (2). The abuse of antibiotics, in which both livestock and humans are becoming resistant to treatment, has many worrying repercussions, among them the likely spawning of various illnesses, including viruses. Another major factor in disease development is ongoing human encroachment into the natural world, like rainforests and grasslands. Habitat destruction across the globe has increased greatly over the past 70 years. This has resulted in regular interaction between billions of people, their livestock and wild creatures, all possible carriers of diseases, new or old.

It is irrelevant as to which country Covid-19 sprang forth from, whether it was China or some other state. For political or ideological reasons, a great deal of energy has been wasted in

directing fingers of blame towards a particular nation, pertaining to the virus's emergence. A viral outbreak is a world issue in which global corporate power, greed and the pursuit of profits are largely accountable – not a specific country or race.

About four months after the coronavirus was first reportedly identified, it has at least partly contributed so far to an official death toll of about 200,000 people, with global cases at present approaching three million. (3)

The above figures consist of a very small fraction of 1% of the planet's human population. However, Covid-19 is in its early stages, and worldwide infections are increasing daily by the tens of thousands through statistics relayed to the public. There could be a considerable rise in cases to come, particularly if there are outbreaks of the virus among broader communities. It continues to spread relentlessly in hospitals, care facilities, etc., contributing to hundreds of deaths each day. In addition, the official coronavirus numbers are only the cases reported. The real Covid-19 figures are quite probably higher, due to inadequate testing and misdiagnoses, problems which have already come to the fore.

Early symptoms in patients with Covid-19 and influenza (flu) can be similar. The resemblance soon ends there. Every year, flu epidemics affect from 5% to 10% of the world's human populace, up to 780 million people. Out of this, the flu is responsible for killing between 290,000 to 650,000 people globally per annum (4). Therefore the death rate worldwide from the flu each year, though slightly increasing in recent times, amounts to well below 1%.

Regarding Covid-19, official figures currently portray a death rate of around 7%: that is, 200,000 deaths out of 2.9 million cases. These statistics will, as stated, change over time but it indicates that Covid-19 is far more harmful than influenza – and likewise relating to the swine flu pandemic of a decade ago. These observations are supported by medical experts on the ground. Dr. Randell Wexler, a family physician working in various hospitals in the Ohio area, wrote earlier this month that, "What makes Covid-19 so much more dangerous than the flu, is that there's no vaccine and no natural immunity in the world, meaning everybody is susceptible". (5)

Indeed, and as of yet there is no evidence that recovered Covid-19 patients will thereafter develop immunity to the virus. They could catch it again and spread the disease about. Official figures from countries with some of the world's highest coronavirus infection levels – such as Italy, France, Spain, Britain, Belgium, the Netherlands and Sweden – show that in each of these nations the death rate, from those infected with Covid-19, is presently at 10% or over (6). Bearing in mind that these are wealthy countries just mentioned, with more resources at their disposal than the vast majority of nations. The UN Human Development Index (HDI) places the above seven European states listed near the top of the "Very High Human Development" bracket. (7)

To provide one example, Italy, over 25,000 people there have died at least partially due to Covid-19, out of fewer than 200,000 cases recorded at present. This comprises a current death rate of 13.5% in Italy. There are indications that the disease is being contained in the country, mostly due to the necessary clampdown on Italian society announced in early March, it can be noted. The daily Covid-19 figures in Italy are gradually declining, but the Italians are not out of the woods by any means. Further outbreaks or clusters could occur, as in any affected country, and caution will need to be applied in the time ahead.

The coronavirus was first identified on Italian soil during 31 January 2020. In the 12 weeks or so directly prior to this, there were at least three million confirmed flu infections recorded in Italy by medical experts, up to 23 January 2020. Out of these approximately three million flu cases, just 240 people are thought to have died. (8)

Research conducted by scientists at separate universities in Britain, has outlined that those most vulnerable to the coronavirus are not only the elderly, but rivalling them are the obese (9). Medics have been struck by the influx of obese patients admitted to British hospitals with Covid-19. Obesity is a worsening problem in Britain, with almost 30% of the adult population considered obese, and many of them are not elderly. The insidious connection between obesity and Covid-19 has been under-reported by the media, and is presumably little known among the public.

America has easily the world's highest level of reported coronavirus infections. By now, over 50,000 Americans are said to have succumbed to the virus, out of more than 900,000 official detections and counting. During the winter of 2018-2019, an estimated 35.5 million people contracted the flu in America, with 34,200 people dying, a death rate of a fraction of 1% (10). Studies have shown that obesity is a leading factor in coronavirus hospitalisations in New York City for example, the worst affected area of the US. Just over 40% of the American adult population is obese (11). Another one third of American adults are classed as overweight, below the level of obesity, but we will stick with the latter phenomenon which has more severe health ramifications.

Most of those enduring obesity are again far from advanced in years – 17% of American children are obese. Dr. Nivedita Lakhera, working in an intensive care unit in San Jose, California, noticed the large numbers of young and obese with coronavirus entering O'Connor Hospital, where she is mainly based. Dr. Lakhera revealed last week that, "They are young and coming to ER [Emergency Room] and just dropping dead" (12). Some of the patients who died of Covid-19 had no other known health problems, other than being that of morbidly obese.

America's national public health institute, the Centers for Disease Control and Prevention (CDC), has listed those afflicted with obesity among the high risk patients (13). This term, obesity, is defined by medical professionals as people who have a Body Mass Index (BMI) of 30 or above. Dr. Jennifer Lighter, an epidemiologist at New York University Langone, noted recently that, "BMI is the achilles' heel for American patients. In China it was smoking and pollution, and Italy had a larger older population, and many grandparents lived with extended families. Here, it's BMI that's the issue".

Tim Spector, professor of genetic epidemiology at King's College London, warned last week, "Obesity and poor diet is emerging as one of the biggest risk factors for a severe response to Covid-19 infection that can no longer be ignored". (14)

The food industry is amassing huge profits in churning out cheap, low quality processed foods that fill supermarket shelves, and which is a cause behind disturbing obesity levels. Furthermore, those who are severely overweight are more likely to have embedded health issues, such as diabetes or cancer. Considering the high rate of obesity in America, it would not at all be accurate to suggest that a minority of the US population are potentially vulnerable, should they contract the virus. On obesity figures alone, more than a third of the American adult population could face health complications should they become infected

with Covid-19.

Such a prospect is a low possibility, and it is not to suggest that millions will die due to the virus in America, or badly affected countries elsewhere – but every precaution must be taken to prevent it from spreading at will among the public. A World Health Organisation (WHO) account expounded that 80% of patients “experienced mild illness” when infected with Covid-19, before recovering quickly. The WHO was referring here primarily to cases in China (15). This WHO report was published almost two months ago, when China then had the world’s highest infection numbers. The virus was swiftly contained in China following strict lockdown measures enacted by the authorities.

Not mentioned once in the WHO report in question is the threat of obesity. Only between 5% to 6% of China’s population is obese. In Hubei province, where the city of Wuhan is located, 7.8% of its inhabitants are obese (16). By comparison, more than three times that percentage suffer from obesity in New York state, encompassing New York City. In the UK to date, three-quarters of critically ill coronavirus patients have either been overweight or obese. The official death rate from Covid-19 infections in Britain is 13.5%, with around 20,000 reported to have died, but this does not include those who passed away in care homes. The actual British death toll from the disease is likely to be 40% higher than the figures released by the government, which relate just to hospital deaths.

Elsewhere it may be no coincidence that, in South Korea, with one of the lowest obesity rates worldwide, that nation has experienced a very mild coronavirus death rate. Although there may be other factors involved in South Korea’s low fatality count, the country with the planet’s lowest obesity level, Vietnam, has so far recorded no deaths from Covid-19 – despite the fact that the first virus patient was noted in Vietnam just three days after the first American case.

Recent scientific studies highlight that more than 10% of the global human population is obese, around 800 million people (17). Dr. Samuel Kline, a gastroenterologist at Washington University School of Medicine, said that obesity sufferers “already have lower oxygen levels, they are predisposed to pulmonary dysfunction, and they have decreased chest function because of the weight on their chest. And many have sleep apnea. So they’re at pulmonary risk already”.

As the coronavirus is a respiratory disease that attacks the lungs, obese patients become yet more vulnerable. It could explain Dr. Lakhera’s poignant remarks about how some obese patients in California are “just dropping dead” after contracting Covid-19. In the age of neoliberal globalisation especially, one is well advised to treat government actions with suspicion. Nevertheless regarding the coronavirus epidemic, governments are undoubtedly correct in ordering lockdowns of the public so as to suppress this disease; providing it is done professionally, with proper notice and explanation given to the public, the opposite to which took place in India last month.

It must be stressed that governments have no other alternative but to call for lockdowns of societies for a certain period of time, and to promote social distancing initiatives. To suggest by now that governments should not implement these policies is irresponsible, to put it mildly. Were the public free to pursue their lives as before, this dangerous virus would clearly spread at a much quicker rate. As general populations of all ages are in overall poor physical shape, and with many having underlying illnesses, a lack of restrictions could have serious consequences.

Bucking the trend in Europe, the Swedish government has so far withheld implementing a complete lockdown, and precautions in the country have been light. The authorities may well be advised to alter their policies, as the official Covid-19 death rate in Sweden now stands at around 12%. On per capita terms Sweden, with a modest 10 million population, is among the world's worst affected nations. Other Scandinavian countries also have much lower Covid-19 figures than Sweden.

It remains to be seen if the planet's ultra-rich sectors will emerge in an even stronger position, when the virus is finally quelled. The signs may not be encouraging, even for the absolute elite. From late January to late March 2020, the richest 100 billionaires lost over \$400 billion of their wealth, a painful dose of medicine by any measure (18). Almost all of the wealthiest people have seen their grotesquely bloated incomes fall appreciably during this period, coinciding with the virus outbreak. US president Donald Trump himself lost a billion dollars over the course of a month.

The reality is that the top 1% around the world, and more specifically the top 0.1%, were managing very nicely prior to the virus spread. Covid-19's emergence was not desired by much of those in de facto control of the world. Corporations that will benefit are primarily the large pharmaceutical and drug companies, but this is just one segment of the big business sphere. The masses are unsurprisingly bearing the brunt of suffering once more, from highly unequal and impoverished countries like India, to the world's richest nation, America.

Global spread of coronavirus could in fact have been prevented from the start (19). A growing likelihood of a virus epidemic was well known to scientists and other experts, and also by governments. Nothing was done, however. The crisis was compounded by the perfidy of our political systems. The reaction to Covid-19 was particularly sluggish and shambolic in America and Britain, where the warning signs had previously become so obvious. Thousands have since needlessly died.

While Covid-19 is having disastrous economic and social consequences, two greater challenges loom on the horizon which are scarcely mentioned: rising threat of nuclear war and climate change, both of which are being largely driven by a combination of Trump administration policies and neoliberalism. A major nuclear war or rampant climate change will make Covid-19 seem like child's play in comparison. Mass media coverage of these bigger threats is either inadequate (climate change) or almost non-existent (nuclear war). Yet the media have directed enormous attention towards the coronavirus.

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Shane Quinn obtained an honors journalism degree. He is interested in writing primarily on foreign affairs, having been inspired by authors like Noam Chomsky. He is a frequent contributor to *Global Research*.

Notes

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