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INTERNAL MEDICINE / Doctors for Adults

"A Dynamic Community of Ethical and Compassionate Internists,
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August 1, 2020

PRESIDENT RODRIGO ROA DUTERTE

President

Republic of the Philippines

through:

SECRETARY CARLITO GALVEZ, JR.

Chief Implementer

National Taskforce (NTF) COVID-19

SECRETARY FRANCISCO DUQUE III

Secretary

Department of Health

Re: Medical Community appeals for return to Enhanced Community Quarantine (ECQ) in Mega Manila from Aug. 1 to 15 to recalibrate strategies against COVID-

19

Dear President Duterte:

Healthcare workers are united in sounding off a distress signal to the nation – our healthcare system has been overwhelmed.

On July 30, the Department of Health reported 3,954 new cases of COVID-19 positive Filipinos. We have witnessed a consistent rise in number of infections and this, among other scenarios, prompts us to act now and act fast. Yesterday, the Local Government of Manila announced the temporary closure of two of their largest government hospitals, the Ospital ng Maynila and the Dr. Fabella Memorial Hospital citing the increasing number of their hospital workers confirmed to be COVID positive and their need to decongest due to the overwhelming number of patients being admitted. Our healthcare workers are falling ill as they take care of patients, responding to the call of duty while battling the fear and anxiety COVID-19 brings. Our healthcare workers are burnt out with the seemingly endless number of patients trooping to our hospitals for emergency care and admission.

We are waging a losing battle against COVID-19, and we need to draw up a consolidated, definitive plan of action. Hence, we, as your healthcare frontliners call on our national government to return Mega Manila to Enhanced Community Quarantine (ECQ) for a period of two weeks, from August 1 to 15.

We propose that the 2-week ECQ be used as "time out" to refine our pandemic control strategies, addressing the following urgent problems:

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1. Hospital workforce deficiency – Hospitals in NCR are being overwhelmed by the alarming increase of COVID-19 cases these past weeks. The workforce is again effectively reduced because of the need for intermittent quarantine of personnel, and isolation of many who have fallen ill. To compound this, many have resigned because of fear, fatigue, and poor working conditions. Facilities have had to close because of these problems.
2. Failure of case finding and isolation – RT-PCR is now being denied patients with symptoms. LGUs that do test continue to insist on use of inappropriate rapid antibody tests to identify cases of COVID-19, sending home patients with symptoms who test negative. This may be responsible for the surge of cases we are now experiencing, because rapid tests miss more than half of people with active, contagious illness. In addition, patients with disease confirmed by RT PCR are being turned away from isolation centers and forced to isolate in homes where this is hardly feasible.
3. Failure of contact tracing and quarantine – Contact tracing is failing miserably. DOH and IATF guidance exists but LGU compliance is optional. The guidelines must be cascaded to our community leaders, health officers and local authorities and strictly enforced.ⁱ A whole-of-society approach must be implemented, integrating use of non-uniformed personnel and volunteers.
4. Transportation safety – This problem cannot be addressed by long term infrastructure plans. We need prompt and rapid solutions with long term impact such as immediate implementation of service contracting, pop-up bicycle lanes and pedestrian lanes. Workers need more public transportation options to prevent congestion in public streets. We need these now, not next year because people need to get to work but have no safe transport options.
5. Workplace safety – workplace safety is assured in few, mostly high-income settings, but there is clear failure in most settings, especially among the poor. Employees and laborers are required by LGUs and their companies to have rapid antibody tests, despite international agreement that these antibody tests are not recommended for work clearance, and just lead to missed cases and local outbreaks. To make matters worse, employees and laborers, already impoverished by the lockdowns, are asked to shoulder the costs.
6. Public compliance with self-protection – The progressive lifting of quarantine has inadvertently fueled public misperception that the pandemic is getting better. It is not. The progressive decline in compliance will push us to the brink to become the next New York City, where COVID-19 patients die at home or in stretchers, unable to find vacancies. The first line of defense is the public, so people need to be reminded that we need to use masks and face shields, wash hands and practice social and physical distancing – now more than ever.
7. Social amelioration – We ask the DSWD, DA, DOLE, DILG, LGUs, and other relevant government agencies to provide the necessary support for those whose livelihood will be affected by this proposed timeout for the health sector.



In relation to this, we also appeal to your good offices to reconsider the pronouncement of the Department of Trade and Industry (DTI) regarding the approval to reopen businesses such as gyms, fitness centers, tutorial services, review centers, internet cafes, pet grooming services, drive-in cinemas previously closed due to the community quarantine starting August 1.

We understand that imposing an enhanced community quarantine is a complex decision. Though health may be just one dimension, let us remember that we need healthy people to reinvigorate our economy. The current crisis necessitates putting prime importance on effective solutions addressing the health problems at hand. These proposed solutions can have far-reaching effects once implemented. The health sector cannot hold the

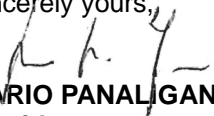
line for much longer. Our health care workers should not bear the burden of deciding who lives and who dies. If the health system collapses, it is ultimately our poor who are most compromised.

In the end, winning the war against COVID-19 relies heavily on being able to keep our health system capacitated to address the needs of all Filipinos. We hope that our government heeds this plea.

For any other queries about our recommendations, please feel free to contact Gel Dumaraos thru email mediarelations.pcp@gmail.com and 0926 036 7782.

Thank you.

Sincerely yours,


MARIO PANALIGAN, MD, FPCP
President
Philippine College of Physicians

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¹ DOH-DILG JAO 2020-0001 and other issuances; implementation guides
<http://bit.ly/COVID19CommunityManagement>
