The WHO has Declared COVID-19 is No Longer a Pandemic-Level Threat: A Perspective Evaluating **Potential Public Health Impacts**

ASM. Roknuzzaman¹, Rapty Sarker¹, Nazmunnahar², Mohammad Shahriar¹, Rana Al Mosharrafa³ and Md. Rabiul Islam⁴

¹Department of Pharmacy, University of Asia Pacific, Farmgate, Dhaka, Bangladesh. ²Department of Sociology, Eden Women's College, National University Bangladesh, Gazipur, Bangladesh. ³Department of Business Administration, Faculty of Business Studies, Prime University, Dhaka, Bangladesh. ⁴School of Pharmacy, BRAC University, Dhaka, Bangladesh.

Clinical Pathology Volume 17: 1-2 © The Author(s) 2024 Article reuse guidelines: sagepub.com/journals-permissions DOI: 10.1177/2632010X241228053 S Sage

KEYWORDS: SARS-CoV-2, COVID-19 pandemic, public health emergency, health impact, world health organization, WHO

RECEIVED: July 13, 2023, ACCEPTED: December 22, 2023 **TYPE:** Perspective

FUNDING: The author(s) received no financial support for the research, authorship, and/or publication of this article

COVID-19, caused by a novel virus named coronavirus-2 (SARS-CoV-2), was first identified in late 2019 in Wuhan, Hubei Province, China, and started to appear rapidly in other countries primarily through travel-related cases from individuals.¹ As a result, the World Health Organization (WHO) declared COVID-19 a global pandemic on March 11, 2020.^{2,3} The healthcare authorities worldwide implemented various measures to contain the virus's spread and mitigate its impact.⁴ Primary symptoms of COVID-19 include fever or chills, cough, shortness of breath, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, runny nose, etc.¹ This coronavirus has undergone several mutations since its initial emergence, such as the D614G mutation, Alpha variant, Beta variant, Gamma variant, Delta variant, Omicron variant, Arcturus variant, etc.^{5,6} This pandemic has profoundly impacted the social, economic, educational, and health sectors globally.7,8,9 As of May 17, 2023, more than 766 million confirmed cases have been reported to WHO, including about 7 million deaths.¹⁰ To defend against COVID-19, several vaccinations such as mRNA vaccines (such as Pfizer-BioNTech and Moderna), vector vaccines (such as AstraZeneca and Johnson & Johnson), and protein subunit vaccines (such as Novavax) have been developed, approved, and distributed globally.11 According to WHO, as of May 8, 2023, more than 13 billion vaccine doses have been administered globally.¹⁰ Because of this vaccination, high population-level immunity from infection reduces the risk to human health, and the mortality rate has significantly reduced than before. For the decreasing trend in COVID-19 deaths and a decline in COVID-19-related hospitalization and intensive care unit admission, the WHO has declared that COVID-19 no longer constitutes a public health emergency of international concern on May 5, 2023. $^{\rm 12}$ Now businesses have reopened; people are doing their jobs, which are restoring economic stability and growth; they have already resumed their everyday social interactions; students have returned to in-person learning

DECLARATION OF CONFLICTING INTERESTS: The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

CORRESPONDING AUTHOR: Md. Rabiul Islam, School of Pharmacy, BRAC University, Kha 224 Bir Uttam Rafiqul Islam Avenue, Merul Badda, Dhaka 1212, Bangladesh. Email: robi.ayaan@gmail.com

sessions; the tourism industry has reopened; and the burden on the healthcare system has reduced.¹³⁻¹⁵

The announcement made by the WHO that marks the end of pandemic-level threat due to COVID-19 holds significant implications. The potential adverse effects could arise due to the misinterpretation of this decision. The possibility exists that some people would erroneously interpret the news as proof that the world has eradicated coronavirus, which could result in unfavorable outcomes.14 There is a risk of developing dangerous complacency, which could result in a sudden spike in the number of cases and deaths. Moreover, there is a chance of revival in transmission rates as a direct consequence of weak adherence to health safety measures. People may be less likely to seek testing and treatment for influenza-like symptoms, unintentionally contributing to the virus's discrete spread.¹⁶ The worst situation will appear if the authorities do not follow protocols for isolating patients. The unrestricted social gatherings and public events that do not have proper measures in place have the potential to serve as ideal conditions for unexpected surges in the number of cases and deaths, which undermines the gains that have been so hard-won in the fight to control the pandemic.¹⁷ Another cause for concern is the possibility that policymakers will misinterpret the data. Furthermore, an inadequate allocation of finances toward COVID-19 programs may impair crucial research and monitoring efforts. The mutated virus strains might develop without being identified.^{18,19} The lesser financial resources committed to vaccine development targeting new variants could leave governments ill-prepared for future outbreaks threatening the lives and well-being of an incalculable number of individuals at risk.^{20,21} Therefore, we can expect further COVID-19 outbreaks with significant adverse health impacts on the global community. In the context of shifting priorities, scientific research may unintentionally move its attention away from the need for developing vaccines for new strains.²¹ It is possible that vaccination rates will decrease due to the decrease in public

 $(\mathbf{\hat{n}})$

Creative Commons Non Commercial CC BY-NC: This article is distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 License (https://creativecommons.org/licenses/by-nc/4.0/) which permits non-commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access pages (https://us.sagepub.com/en-us/nam/open-access-at-sage). desire and a decline in support from the government if the emphasis is shifted away from the issue at hand. This doubleedged fall in public and authority incentive to prioritize immunization can prove fatal in the face of potentially more virulent and transmissible mutant strains, perhaps resulting in another catastrophic outbreak.

It indicates that we are moving from a global health emergency to a monitoring phase. During this transition, policymakers, and local healthcare authorities are responsible for implementing strategies that track cases, deaths, and symptoms for prompt identification of any new mutations that may arise. Researchers need to pay significant attention to current research on the mutation patterns of the virus as well as the development of new vaccines to combat the mutated strain of the virus.²² During this monitoring phase of COVID-19, preparedness is of the utmost importance. Both national governments and healthcare systems need to be sufficiently prepared to deal with any unexpected outbreaks or other isolating circumstances that may arise. The local healthcare authorities should keep adequate inventories of vital medical supplies, support the healthcare infrastructure, and implement preventative measures to identify and respond to probable disease clusters. Each individual has a responsibility to get vaccinated following the guidelines. Vaccination not only protects individuals against more severe illnesses, but it also plays a role in reducing the virus's propagation within communities.²² Individuals must actively participate in the monitoring activities by promptly reporting any cases or symptoms to the appropriate authorities. Reporting possible outbreaks as soon as they occur enables rapid contact tracing, testing, and isolation measures that facilitate successful control.^{23,24} Through our collective efforts, we can comprehensively understand the virus's behavior and adapt our strategies accordingly. This strategy of working together will make it possible to keep comprehensive track of the virus and its mutations, making it easier to take rapid action when required.

Acknowledgements

None.

Author Contributions

ASMR and RS, conceived the study and wrote the first draft. Nazmunnahar and MS, revised and gave intellectual inputs in the manuscript. RAM and MRI, conceived and supervised the work. All the authors approved the final version for submission.

Ethics Statement

It was an analysis of online available aggregate data. No Ethical approval was needed.

Data Availability Statement

Data sharing not applicable to this article as no datasets were generated or analyzed during the current study.

REFERENCES

- Ochani R, Asad A, Yasmin F, et al. COVID-19 pandemic: from origins to outcomes. A comprehensive review of viral pathogenesis, clinical manifestations, diagnostic evaluation, and management. *Infez Med.* 2021;29:20-36.
- World Health Organization. Coronavirus disease (COVID-19) pandemic. 2023. Accessed May 18, 2023. https://www.who.int/europe/emergencies/situations/ covid-19
- Sohrabi C, Alsafi Z, O'Neill N, et al. World Health Organization declares global emergency: a review of the 2019 novel coronavirus (COVID-19) [published correction appears in Int J Surg. 2020 May;77:217]. *Int J Surg.* 2020;76:71-76.
- Nicola M, O'Neill N, Sohrabi C, Khan M, Agha M, Agha R. Evidence based management guideline for the COVID-19 pandemic - Review article. *Int J Surg.* 2020;77:206-216. doi:10.1016/j.ijsu.2020.04.001
- Nazmunnahar, Ahmed I, Islam MR. Risk evaluation and mitigation strategies for newly detected SARS-CoV-2 Omicron BF.7 subvariant: a brief report. *Health* Sci Rep. 2023;6:e1127.
- Rahman S, Hossain MJ, Nahar Z, Shahriar M, Bhuiyan MA, Islam MR. Emerging SARS-CoV-2 variants and subvariants: challenges and opportunities in the context of COVID-19 pandemic. *Environ Health Insights*. 2022;16: 11786302221129396.
- Das R, Hasan MR, Daria S, Islam MR. Impact of COVID-19 pandemic on mental health among general Bangladeshi population: a cross-sectional study. *BMJ Open*. 2021;11:e045727.
- Lee J, Solomon M, Stead T, Kwon B, Ganti L. Impact of COVID-19 on the mental health of US college students. *BMC Psychol.* 2021;9:95.
- 9. Nicola M, Alsafi Z, Sohrabi C, et al. The socio-economic implications of the coronavirus pandemic (COVID-19): a review. *Int J Surg.* 2020;78:185-193.
- World Health Organization. WHO coronavirus (COVID-19) dashboard. 2023. Accessed May 18, 2023. https://covid19.who.int/
- COVID19 Vaccine Tracker. World Health Organization (WHO). December 22, 2022. Accessed May 18, 2023. https://covid19.trackvaccines.org/agency/who/
- 12. World Health Organization. Statement on the fifteenth meeting of the IHR (2005) Emergency Committee on the COVID-19 pandemic. May 5, 2023. Accessed May 18, 2023. https://www.who.int/news/item/05-05-2023-statement-on-the-fifteenth-meeting-of-the-international-health-regulations -(2005)-emergency-committee-regarding-the-coronavirus-disease-(covid-19) -pandemic
- Sarker R, Roknuzzaman ASM, Nazmunnahar, Shahriar M, Hossain MJ, Islam MR. The WHO has declared the end of pandemic phase of COVID-19: way to come back in the normal life. *Health Sci Rep.* 2023;6:e1544.
- Rahman MA, Cronmiller S, Victoros E, Shanjana Y, Islam MR. The WHO has terminated global public health emergency for COVID-19 by the IHR Emergency Committee recommendation: potential impact analysis. *Ann Med Surg* (Lond). 2023;85:3755-3756.
- Sarker R, Roknuzzaman ASM, Nazmunnahar, Hossain MJ, Islam MR. Benefits and probable ill effects of WHO's declaration of end of COVID-19 pandemic: a way back to pandemic-free normal life. *Ann Med Surg (Lond)*. 2023;85: 3199-3201.
- López L, Rodó X. The end of social confinement and COVID-19 re-emergence risk. Nat Hum Behav. 2020;4:746-755.
- Ether SA, Emon FA, Roknuzzaman A, Rakibuzzaman M, Rahman FI, Islam MR. A cross-sectional study of COVID-19-related knowledge, risk perceptions, and preventive practices among pharmacy students in Bangladesh. SAGE Open Med. 2022;10:20503121211073014.
- Islam S, Islam T, Islam MR. New coronavirus variants are creating more challenges to global healthcare system: a brief report on the current knowledge. *Clin Pathol.* 2022;15:2632010X221075584.
- Mohapatra RK, Tiwari R, Sarangi AK, Islam MR, Chakraborty C, Dhama K. Omicron (B.1.1.529) variant of SARS-CoV-2: concerns, challenges, and recent updates. *J Med Virol.* 2022;94:2336-2342.
- Islam MR, Hossain MJ. Detection of SARS-CoV-2 Omicron (B.1.1.529) variant has created panic among the people across the world: what should we do right now? J Med Virol. 2022;94:1768-1769.
- Dewan SMR, Islam MR. Increasing reinfections and decreasing effectiveness of COVID-19 vaccines urge the need for vaccine customization. *Ann Med Surg* (Lond). 2022;84:104961.
- Islam MR. Urgent call for mass immunization against coronavirus in Bangladesh. Sci Prog. 2021;104:368504211058562.
- Dhama K, Nainu F, Frediansyah A, et al. Global emerging Omicron variant of SARS-CoV-2: impacts, challenges and strategies. *J Infect Public Health*. 2023;16: 4-14.
- Barai S, Kadir MF, Shahriar M, Islam MR. The re-emergence of COVID-19 in China is a big threat for the world: associated risk factors and preventive measures. *Ann Med Surg (Lond)*. 2023;85:348-350.