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Multifaceted Response Development from Research on COVID-19 in Africa

(MURDER COVID-19 in Africa)

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Background:

The pandemic caused by the Coronavirus-19 (COVID-19) laid bare the long-ignored risks of inadequate and faulty health systems, the lapses in social protection and structural inequalities. It reiterated the ignored importance of research collaborations, public health awareness as well as health emergency preparedness and infection prevention control measures. Consequently, within a very short space of time, the spread of COVID-19 spanned across more than 190 countries, with over 480 million reported cases. As of 20th March 2022, the cumulative number of infections in Africa stands at 8,167,677, more than 7.5 million recoveries have been recorded, giving a recovery rate of 92.0% and 169,951 deaths have been reported. It is important to note that of the 4.1% of global death cases by COVID-19, 2.4% is accounted for by the WHO African Region. Therefore, a review on monitoring the community transmission trend and its management using existing national data on COVID-19 as well as the IPC practices with suggested best global practices for the protection of healthcare systems is advocated.

RECOMMENDATIONS

Mass Laboratory Testing/Sequencing and Turnaround Time

Considering the present laboratory testing capacity and turnaround time of result availability for appropriate and informed intervention strategies, the



report in Nigeria as of 30th March 2022 stands at 255,415 confirmed new cases with 3,142 deaths across 36 states (including the Federal Capital Territory) (NCDC, 2022). This may however not represent the

actual depiction of the burden and distribution of the virus in Nigeria due to the convenience type of sampling used comprising of active case surveillance of symptomatic individuals and not systematic research-oriented approach for asymptomatic people in the population. Furthermore, there is need for improvement of the outcome turnaround time and coordinated in-country sequencing laboratories



network to facilitate the real-time reporting which will in turn improve the intervention strategies.

Coordinated National Research Hub/Repository and Protocol Reviews for Variants

Despite prompt development of effective vaccines against COVID-19, the virus continued to spread and mutate throughout the year, since 2020. According to the United Nations (UN), the spread, mutation and prolonged pandemic has been linked to the lack of effective global collaboration. The failure of the international community to ensure that not only the citizens of wealthy countries get vaccinated and the fact that most vulnerable Africans had to wait for vaccines while lower-risk groups in wealthy nations are left out with greater exposure to the virus over time to achieve noticeable mutation. This is because, the longer the time it takes to suppress the spread of viral infection in a pandemic such as COVID-19, the greater the risk of emergence for new variants, that would be more virulent and resistant to available vaccines.



Thus, there's need for the Ministry of Health and other health parastatals as well as indigenous researchers to take appropriate step towards modification of testing protocols and policies to match the emergence of new variants thereby enhancing collaborative studies to avoid repetition, waste of effort and time for the achievement of research breakthrough. Detection of targeted regions of the virus from previous strains may not be reliable because of the reported mutations and to avoid false negativity, modification and upgrade of protocols to accommodate the changes is now germane more than ever.

Additionally, a centralized and controlled genomic epidemiological surveillance of infectious diseases research repository as well as collaboration within the nation will go a long way in promoting exchange of ideas between experts to foster completion of tailored goals for the protection of the populace and enhanced public health risk preparedness.

Need for Phase Zero Clinical Trial Center and Support for Vaccine/Local Remedy Discovery

This relates to the respective foreign protocols and therapeutics for combating COVID-19, most importantly, the vaccine. This is crucial to ensure efficacy and applicability in our locality owing to its constant roll out, time interval from production to transportation and arrivals to the end user. This will assist in ensuring better healthcare and safety of the



populace.

Furthermore, support should be provided for phase zero clinical trials of discovered local drugs/remedies and indigenous vaccine candidates. Indigenous researchers should be encouraged so as to improve the nation's research productivity and support our ailing health systems instead of awaiting external support that overtime has proven to have done more harm than good as evident in the emergence of new variants.

Advocacy and Sensitization

Properly monitored risk communication and information dissemination routes and strategies that will involve all stakeholders and community gate



keepers should be strengthened. This will help bring information to the doorsteps of the people as well as limiting the spread of unfounded rumors or news that increases vaccine hesitancy which could hinder the targeted goals. Furthermore, the concerns and queries of the populace can be easily addressed through these channels of communication to ensure compliance and cooperation.

Funding

This is an integral part for the success of the aforementioned recommendations. Private sectors,



government along with non-governmental organisations (NGOs) should pull resources to support research in genomic epidemiological surveillance of infectious diseases across every nook and cranny of the nation. This is because most of the at-risk individuals where mutation may emerge because of continuous localized community transmission coupled with little or no awareness to the virus are usually hard to reach settlements. Consequently, the epidemiological data are usually incomplete or insufficient to offer guidance and advisory to the appropriate authorities.

References

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