

OPINION COVID-19 and other health concerns in 2023

The United States is one of the newest additions to the list of countries that are, or soon will be, imposing a coronavirus disease 2019 (COVID-19) testing requirement on visitors coming from China, a highly populous country which is just emerging from a three-year lockdown. Apart from the US, other countries requiring COVID testing on people flying in from China are Japan, India, Italy, the UK, France, Australia, Canada, Spain, Malaysia, South Korea, Morocco, Qatar, and Taiwan.

The move to secure borders came amidst reports that hospitals in China are being overwhelmed due to new COVID-19 infections. This as China announced new rules that will loosen its “zero COVID policy” to reopen the economy. Chinese officials, on the other hand, have insisted that the COVID situation in their country is under control.

With these developments, it can be rightly said that COVID-19 will remain to be the top health agenda item in 2023. The latest COVID surges open the possibility for the development of new COVID variants, some of which could become highly infectious or deadly. With many countries reopening their borders, there will always be the threat of outbreaks.

“We should remain vigilant and focus on vaccinating target populations to achieve herd immunity,” said Jannette Jakosalem, vice-president of the Pharmaceutical and Healthcare Association of the Philippines in a recent interview on ANC.

As of Dec. 26, 2022, the Department of Health (DoH) reported that 165.8 million COVID-19 vaccine doses have been administered in the country, 21.1 million of which are booster doses. With the potential changes in the global COVID situation, there is now a more compelling reason for individuals to complete their primary vaccine series, and for the qualified priority groups, especially individuals 60 years old and above and those with comorbidities, to get their booster shots.

COVID-19 vaccines work in three ways. First, they lower a person’s chance of getting the virus. Second, they prevent serious illness if a person does get the virus, thereby lowering the chance of hospitalization or death. Third, they make a vaccinated person less likely to pass the disease on to others.

The bivalent COVID-19 vaccines have received emergency use authorization (EUA) from regulators in a number of countries. These new generation vaccines include a component of the original virus strain to provide broad protection against COVID-19, and a component of the Omicron variant to provide better protection against COVID-19 caused by the Omicron variant. These are called “bivalent” COVID-19 vaccines because they contain these two components. A bivalent COVID-19 vaccine may also be referred to as an “updated” COVID-19 vaccine booster dose, according to the US Food and Drug Administration (FDA).

The US FDA authorized bivalent formulations of the Moderna and Pfizer-BioNTech COVID-19 vaccines for use as a single booster dose.

The DoH has stated that it intends to procure bivalent COVID-19 vaccine doses and make these available in the country by the first quarter of 2023. The agency is currently working on the EUA of the bivalent vaccine, and coordinating with vaccine manufacturers.

The World Health Organization (WHO) earlier said that the end of the COVID-19 pandemic is in sight. Thanks to the rollout of safe and effective vaccines and new therapies, deaths and hospitalizations due to the novel coronavirus have been significantly reduced in the majority of countries across the globe, including the Philippines.

“There is reason to be optimistic in 2023. We are in a much better position now than we were in January 2022 when the country was hit by the highly infectious Omicron variant,” said Ms. Jakosalem.

She added that no government was prepared to tackle COVID-19 when it was first declared as a pandemic in early 2020. But today, there are a number of lessons that could help the country better prepare for the next pandemic. These include taking steps to strengthen our healthcare system and fostering close collaboration between the government and biopharmaceutical sector, the medical community, and the general public.

As one of the members of Task Force T3, Ms. Jakosalem recommended following the same principle of testing, tracing, and treating as the country prepares for 2023. Task Force T3 was the private sector-led initiative formed in April 2020 to support the Inter-Agency Task Force on the Management of Emerging Infectious Diseases (IATF-EID), the DoH, and the National Task Force (NTF) Against COVID-19.

Alongside continued vigilance against COVID-19, the country must also start focusing on other health concerns that arose due to the pandemic such as “long COVID” and mental health issues. The year 2023 must also bring renewed attention on non-communicable diseases such as cardiovascular diseases, diabetes, and cancer, among many others. They were inadvertently left behind in the fight against COVID-19.

TEODORO B. PADILLA is the executive director of the Pharmaceutical and Healthcare Association of the Philippines (PHAP), which represents the biopharmaceutical medicines and vaccines industry in the country. Its members are at the forefront of research and development efforts for COVID-19 and other diseases that affect Filipinos.



Before embarking on a workout regimen, check your blood pressure first

GETTING in more exercise is one of the top New Year’s resolutions every year, and individuals embarking on a new workout routine will do well to have their vital signs (such as blood pressure, pulse rate, respiratory rate, and temperature) checked first.

“If your BP is too high, start with low-intensity exercises first such as walking or biking or lifting weights,” Vergil A. Oabel, a registered physical therapist, advised in a Dec. 30 episode of the Adventist Medical Center Manila’s *Voice of Health*. “If you have an existing disease, consult your doctors first before starting to exercise.”

Blood pressure (BP) is the force of the blood pushing against the arteries as the heart contracts and relaxes with each beat. This is read in two numbers — a systolic reading which measures the pressure in the arteries when the heart beats, and the diastolic reading which measures the pressure in the arteries when the heart rests between beats. “Normal” blood pressure means having a systolic reading of less than 120 and a diastolic reading of less than 80 (i.e., 120/80 mmHg) — although a single, elevated blood pressure measurement does not necessarily indicate a problem.

“A high BP reading can lead to diseases such as a stroke [which is what happens when blood flow to the brain is blocked] or an aneurysm [which is the abnormal ballooning of a blood vessel wall]. Organs may also give way, as in the case of multiple organ failure,” said Mr. Oabel in the vernacular.

WHO SHOULD GET CHECKED OUT?

“The reason behind [the suggestion to get checked out by a doctor before embarking on an exercise routine] is that, in theory, when you start to participate in a moderate or intense activity, there is a slightly increased risk of a heart attack or cardiac complications,” said Dr. Neel Chokshi, the medical director of the Penn Sports Cardiology and Fitness Program and assistant professor of clinical medicine, in the Penn Medicine’s Penn Heart and Vascular Blog. “So the heart check-up would be to make sure a person doesn’t have an underlying heart condition that they may not be aware of — or that they don’t undertake a regimen that’s too intense, if they are normally pretty sedentary.”

But according to Dr. Chokshi, this is changing. “As a medical community, we’ve realized that recommending everybody see a doctor first before starting to exercise can actually create an obstacle that keeps people from exercising,” he said. “So the American College of Sports Medicine has revised its guidelines. The goal is to balance ensuring patient safety with overcoming any obstacle to exercise.”

If a person is normally sedentary, it is best to consult a doctor first before starting a regular exercise program, to make sure there are no unknown underlying conditions. If a person has signs of heart problems or has other health issues that can predispose one to heart issues — like diabetes, kidney disease, and lung disease — they should get checked out first.

And if you are planning on embarking on high intensity exercise like running, especially if you are not normally an active person, see your doctor first. You do not want to collapse of a heart attack in the middle of a marathon.

The Mayo Clinic says some of the other reasons for checking in with your healthcare provider prior to the start of an exercise program: obesity, dizziness during activity, and a history of heart attack.

BENEFITS OF EXERCISE

One should not be put off from exercise as there are many benefits beyond, say, weight management. These include a lowered risk of falls and injuries from falls, a reduction of stress and anxiety, the prevention of diseases like arthritis and stroke, an improvement of cognitive function, and the control of one’s blood pressure.

Deaths due to hypertensive diseases was the fifth leading cause of death in the Philippines in 2022, per the Philippine Statistics Authority. Moreover, a June 2022 study in *Journal of Hypertension* noted that the economic cost of hypertension in the country is expected to increase to P97.3 billion by 2050 from P52.6 billion in 2020.

The World Health Organization cautioned that people can have hypertension without any signs and symptoms.

Don’t be afraid to get your BP checked, Mr. Oabel said: “*Mas maganda na... malaman na ngayon, para mabigyan ng lunas* [It’s better that... you’re aware of your reading now, so you can remedy it if need be].” — **Patricia B. Mirasol**

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