

DIRECTOR'S REMARKS ON COVID-19 PANDEMIC - 26 MAY 2020

Thank you and welcome and thank you for joining us again.

As of May 25, there have been more than 2.4 million cases and more than 143,000 deaths due to COVID-19 reported in the Americas.

As global cases topped 5 million this past week, Latin America surpassed Europe and the United States in the daily number of reported coronavirus infections, numbers we suspect are even higher than we know. Two of the three countries with the highest number of reported cases are now in the Americas.

There can be no doubt – our region has become the epicenter of the COVID-19 pandemic.

In South America, we are particularly concerned that the number of new cases reported last week in Brazil was the highest for a seven-day period, since the outbreak began. Both Peru and Chile are also reporting a high incidence, a sign that transmission is still accelerating in these countries.

All of the alarms we've sounded, the solidarity that we've called for and the guidance we've issued over the past 3 months – all of this was to prepare all of us for this time.

For most countries in the Americas, now is not the time to relax restrictions or scale back preventive strategies. Now is the time to stay strong, to remain vigilant and to aggressively implement proven public health measures.

We have learned from other regions what works and what doesn't, and we must continue to apply this knowledge to our context.

Now is a time for action, not for diversion. The lives and wellbeing of millions across our region depend on it.

One of the most concerning aspects of the COVID-19 pandemic is the disproportionate impact of the virus on people suffering from non-communicable diseases, or NCDs, namely hypertension, cardiovascular disease, diabetes, cancers, asthma and other respiratory diseases, in addition to obesity.

We have never seen such a deadly relationship between an infectious disease and NCDs.

Some of the data are truly alarming. Especially for our region, where NCDs are pervasive.

Studies in China show that more than 28 percent of cancer patients who contracted COVID-19 died, compared with only 2 percent of overall patients. There are 1.2 million people living with cancer in Latin America and the Caribbean.

A review of more than 16,000 patients with COVID-19 found that persons with diabetes were twice as likely to have severe disease or to die. There are an estimated 62 million people in the Americas living with diabetes.

Smoking causes cancers, heart and lung disease and is directly associated with reduced respiratory capacity. Additionally, smoking has been shown to increase the likelihood of developing severe illness from COVID-19. About 15% of adults in the Americas still smoke and may face this risk.

In fact, our region has a high incidence of NCDs, and we are deeply concerned for the health of people living with these conditions.

All told, approximately 1 in 4 people in our region are at increased risk of poor outcomes from COVID-19 due to underlying NCDs.

The COVID-19 pandemic has also disrupted the routine health services that patients with NCDs count on to manage their illnesses. Many health care workers who typically provide care have been redirected to the COVID-19 response, adversely impacting the timely diagnosis and treatment of NCDs.

Furthermore, some countries experienced disruption of supply chains, as well as challenges to the distribution of medicines and health products – all of which impact access.

Stay at home measures, disruptions in provision of health care services, as well as the fear of attending care facilities have resulted in reduced elective clinic visits and lower access to renal dialysis, cancer care, and delays in high priority treatments for patients with NCDs. This puts patients at higher risk of complications and death from diseases which we know how to treat.

This challenge must be addressed head on by health systems in our region or we will be faced with a parallel epidemic of preventable deaths of persons with NCDs.

First, it is important to find safe methods of delivering essential clinical care for people with NCDs during the pandemic. For example, many countries are quickly scaling up telemedicine, prioritizing scheduled appointments to avoid crowded waiting rooms and providing services in novel ways.

We also must ensure that supply chains for essential NCD medicines are protected and continue to function efficiently, and that these products are distributed to the people who need them.

And finally, we need to help people with NCDs protect themselves from COVID-19 to avoid a situation of greater risk. This means providing them with the resources, the support system and information that is needed to protect themselves.

Let's not get trapped in a false dichotomy: Fighting NCDs now is integral to our response to COVID-19. We need aggressive preventive measures to protect people with diabetes, respiratory and cardiovascular diseases from the new coronavirus.

We also must ensure timely access to care for chronic diseases to prevent them from becoming life-threatening. PAHO is working with countries in the region and providing guidance to help plan and implement these measures. As cases continue to rise in our region, our efforts to protect those with underlying conditions must intensify.

May I remind you that May 31st is World No Tobacco Day. Observing this day in the midst of the COVID 19 pandemic highlights how smoking increases our risks and vulnerabilities to this pandemic and to many other health threats. This year's focus is on protecting the youth from the harms of tobacco, and if there was ever a good time to quit smoking, that time is now.

I have said before that our health systems must be resilient and adaptable in times of crisis. The dual challenge of NCDs and COVID-19 has certainly put our resilience to the test.

Prior to COVID-19, 81% of all deaths in the Region of the Americas was due to NCDs and 39 % of these deaths were premature, that means occurring before 70 years of age.

As together we reconstruct and transform our economy, our social protection and health systems post COVID-19, we need to pay critical attention to the prevention, early diagnosis and management of Noncommunicable Diseases.

Thank you