
WEEKLY PRESS BRIEFING ON COVID-19 DIRECTOR'S REMARKS—11 AUGUST 2020

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A very good morning to all of you. Thank you for joining today's briefing.

As of August 10, there have been more than 10.5 million cases and over 390,000 COVID-19 deaths reported in our Region, with the United States of America reporting around 5 million cases and Brazil reporting more than 100,000 deaths.

Every day we're seeing more than 100,000 new cases being reported in the Americas – over half of which are coming from the U.S., but we are also seeing worrisome spikes in places that had managed to contain their epidemics previously, like Colombia and Argentina.

We are also observing an expansion of cases in Central America, where this week Belize reported its highest-ever number of new COVID-19 cases. And in the Caribbean, the Dominican Republic is reporting more cases than all the other island nations combined.

These numbers make it clear that our region remains under the grip of COVID-19. But the virus isn't the only threat to people's health – the pandemic is also disrupting our ability to control transmission of other infectious diseases, many of which we have been fighting to eliminate for decades.

The Americas has always been at the forefront of the elimination of infectious diseases. Indeed, preventing and treating these diseases was the impetus for creating the Pan American Health Organization nearly 120 years ago.

We know that in some countries, infectious diseases, such as dengue and malaria, place a huge burden on health services and, along with many neglected tropical diseases they have a disproportionate impact on poor and vulnerable populations, including our indigenous communities – much like COVID-19.

In October last year, PAHO's Member States committed to a region-wide approach for the elimination of more than 30 communicable diseases and related conditions in the Americas by 2030.

The progress to achieving this milestone is now under threat, due to the burden of COVID-19 on health systems, and the disruption of essential services, including priority disease control programs, elimination initiatives and routine immunization.

Services for common conditions like TB, HIV and hepatitis are being affected.

Over 80% of the countries in Latin America and the Caribbean are reporting challenges in the delivery of (TB) tuberculosis treatment. If patients skip doses or interrupt their treatment, a manageable condition can quickly turn into an active infection that threatens not only the patient, but also their family and close acquaintances.

HIV is an example of a virus that we know how to prevent and to treat. In fact, several countries in our region have successfully eliminated HIV transmission from mothers to their newborns, which is a major example of the commitment of our countries. But we have data indicating that 30% of people living with

HIV are avoiding seeking care during the pandemic, and at the same time, countries have limited supplies of antiretrovirals. This is worrisome indeed since without continued care and consistent medications, people living with HIV are more likely to become ill and to pass on HIV to their partners.

One third of countries in Latin America are also experiencing disruptions in hepatitis screenings that are key for early detection and treatment.

I want to talk a little bit about mosquito-borne diseases. Diseases spread by mosquitoes are widespread in our Region, and since our collective ability to monitor viruses and pathogens has also been impacted by the pandemic, we are also concerned about falling behind on these diseases.

In the first two months of 2020 the Americas reported a 139% increase in dengue cases when compared to the same period in 2019. However, since COVID-19 hit our region in March, reported cases of dengue fever have actually fallen.

We've also seen that reporting of mosquito borne diseases, like malaria, is down more than 40%, and there has been also an observed reduction in the number of people getting tested. So we know that these data really don't tell the full story.

Without robust surveillance, we remain unaware of the extent to which these diseases are affecting our population and are therefore unable to sufficiently plan services and save lives. Really, for diseases that are completely curable, this is not acceptable!

While it is true, that because many of us are stuck at home we're therefore less prone to getting bitten by mosquitoes, the reality is that mosquitoes and the pathogens they transmit are still circulating.

And without testing or treatment, severe cases of mosquito-borne diseases could go from easily treatable conditions to death.

In fact, we're beginning to see just that across our region – and indeed the world – that people are dying at higher rates than normal, not *just* from COVID-19 itself, but *because of* the impact of this pandemic on essential health services.

Beyond disruptions to treatment, prevention and control programs are being paused or halted, during the pandemic. These programs normally provide people with the tools, the services and the information they need to protect themselves from infections like HIV, TB, malaria, neglected tropical diseases, and vaccine preventable diseases.

And just as we were making significant progress against neglected tropical diseases, like lymphatic filariasis, schistosomiasis, and soil-transmitted helminthiases, the pandemic interrupted the mass drug administration campaigns that are so vital to our elimination efforts.

Ultimately, these disruptions are likely to drive infection rates up in the coming months. In the short term, this means that more people will die from preventable and treatable conditions, and in the long term, the progress that we've made in recent decades could be lost in a few months. If these difficulties continue, we may even have to revisit the elimination targets for some of these diseases.

But the good news is that it's not too late to prevent these outcomes if countries take key steps to track and limit the impact of infectious diseases during the pandemic. We can continue with impact.

As I've said before, countries need to strike a balance between confronting the threat of COVID-19 in one hand and maintaining essential services in the other, including those that help manage and prevent infectious diseases.

Across the Americas, local clinics, urban hospitals and regional laboratories collect data about who is sick and the cause of their illness. They also survey the environment to detect how viruses and bacteria are spreading, so a handful of cases does not lead to larger outbreaks. We have a responsibility to ensure that our disease surveillance networks continue to function, especially during the pandemic.

Health systems must also make it easier, not harder, for patients to receive the care they need during this unprecedented time.

Leveraging telemedicine and offering care outside of hospital settings, such as community outreach programs and at-home visits will be key to ensuring patients can continue to receive the medical attention and the medications that they need to safely manage their conditions.

As countries work to provide essential services and to resume prevention programs, they must be careful to also protect our health workers, who are on the front lines of this pandemic. Our doctors, nurses and staff must have the protective equipment, the supplies and technologies that they need to safely deliver and offer care.

All of these changes require countries to commit to strengthening their health systems and invest in the health of their populations. While the challenge may be daunting, the pandemic has shown us that our health is a prerequisite to the wellbeing of our societies and I just say the success of our economies.

Countries can't delay the fight against COVID-19, but we must not let COVID-19 delay us in completing our unfinished agenda of eliminating and controlling infectious diseases in our region. The risks I believe are just too high both for our lives and our societies.