

OP ED Chicago Tribune

Chicago Medical Society and Corona Virus

On Sunday September 20th the Chicago Tribune chronicled the plight of many healthcare workers in Illinois stricken by COVID -19. It is with sorrow that the physician community could not have done more to prevent the loss of life and suffering for the 200,000 dead and those left behind and harmed by the virus.

Since the onset of the pandemic caused by SARS- CoV-2, better known as COVID-19, Chicago Medical Society(CMS) has been actively involved with its physicians to engage patients, the communities they serve, the scientific community, as well as elected officials to help make available all necessary resources to help control and treat the virus. At the beginning of the pandemic, CMS looked at ways to help our physicians obtain all available tools to treat their patients and keep themselves safe. The virus has affected the most vulnerable as evidenced by the increased mortality in the elderly, populations of lower social economic status, and underserved communities, further magnifying inequities that exist in society.

CMS helped bring convalescent plasma to over 29 hospitals by cutting thru administrative hurdles. This allowed plasma to be available to those in need and not just patients whose hospitals were contracted with blood banks that had access to plasma. Unfortunately, this issue has been politicized and mistrust of a potential therapy has taken place. At a time when we only have a few proven therapies, CMS has continued to advocate for our doctors to make available therapeutic options for those infected which are safe as we await clinical trials to prove efficacy. Thus far, only steroids have been shown to save lives. Plasma has been shown to be safe and the antiviral, Remdesivir has been shown to decrease how long patients stay in the hospital but not change death rates.

CMS recognized that our health care workers were at risk, as personal protective devices such as masks, gloves, and gowns were unavailable or sold at exorbitant prices. To address these issues, CMS engaged a wholesaler who provided personal protective equipment (PPE) at reasonable cost.

CMS actively engages with schools and religious institutions through their members to provide accurate scientific guidance so communities may return to some social normalcy and be safe at the same time. Unfortunately, mixed messaging regarding proven measures such as masking, social distancing, and hand hygiene have led to outbreaks, propagating positive cases which are not seen in the developed world.

CMS has provided healthcare workers access to mental health professionals, so our heroes have a place to talk about their stresses such as loss of colleagues, patients, and friends, while coming to work every day.

Now is the time to support our heroes, the healthcare workers. It is with great dismay, many have been asked to work without adequate protection at all times due to PPE shortages, and faced shortages in therapies for their patients all while being asked to take “voluntary” pay cuts, and in many instances, losing their jobs. Hospitals are closing in locations where disparities in healthcare and mortality rates are the highest. Many institutions have set up obstacles which have resulted in difficulty accessing medicines. We ask that institutions leave it to doctors and patients to make the best decisions on a case by case basis, not a form or committee.

We, CMS, ask our elected officials and healthcare leaders to start working with a central directed purpose. The most vulnerable cannot travel to locations many miles from their homes where therapies are available, therefore, much more community- based therapy is required. We ask that our doctors and healthcare workers who are being called heroes on one hand, not be punished by being asked to take cuts in pay and benefits. We ask that all patients have easy access to testing, and more importantly, rapid notification of their results as demonstrated by the University of Illinois at Urbana-Champaign, which developed an excellent low- cost test linked to a smart phone. A vaccine, even if available tomorrow, will take a long time to implement, and has many technical issues to overcome, and should not be viewed as a panacea which will immediately end the pandemic.

CMS is ready to engage thru its membership, our patients, communities and elected officials so we may control this virus and bring some normalcy back to our lives as we head into a long fall and winter compounded by seasonal influenza. Only by working together can we control COVID 19, as the virus does not know borders, political affiliation, the color of our skin, or where we live. It simply goes where it is easiest for it to grow and spread. Let us not allow the 200,000 who have perished be in vain.

Tariq H. Butt, MD
President, Chicago Medical Society
515 N. Dearborn Street
Cell: 312-545-8471

Vishnu Chundi, MD
Chairman, CMS COVID-19 Taskforce Committee
515 N. Dearborn Street
Chicago, IL 60654
Cell: 708-466-7715