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Strategies to Create Awareness Among Community in Case of Medical Emergencies

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Abstract: The emergencies are unpredictable and non-assuming they are arising naturally while some are caused due to human activities and the need to evade and mitigate the seriousness of the risk is quite important and the successful strategies are to be carried out during medical catastrophe which causes devastating changes in human life and the emergency strategies of the country include the proper diagnosis of the population and the assigning and the availability of the certain emergency service numbers which helps to navigate and mitigate the prognosis of the disease and the improvement in technologies help to us to shield from the disease. A literature review was carried out from the scopus pubmed database. Aim of the study was to collect the successful strategies carried out by the government both in India and abroad. The first step for increasing awareness would be starting various advertisement campaigns.The next step would be implementing a unified emergency number (112 in India) to address all kinds of distress calls such as police , fire and ambulance. Awareness campaigns and training sessions for the general public should be conducted for the same,it is also necessary to spread awareness and help to populace know about the good samaritan law and even a short videos and catchy songs to demonstrate the seriousness of medical emergencies which is a great initiative by the government

Keywords: Medical catastrophe, unified emergency number, Good samaritan law

INTRODUCTION

Health care provisions

Health care provision in India is multi-pronged, including a tiered national health system, private hospitals, and a multitude of alternative medicine practitioners which is better for emergencies.

National health policy

The National Health Policy (NHP) was first formulated in 1986(Welfare, Government of India and Ministry of Health and Family Welfare, 1986) and This policy-guided government effort aims to provide health for all by outlining a time-bound phased setup of comprehensive primary health care services throughout the country and in turn most high-income countries, the number of visits to hospital emergency HEALTH departments (EDs) has increased considerably over recent years due to the progression of disease(Berchet, 2015) and now emergency physicians and emergency medicine have remained a realized need in the country, the practice of emergent care has remained centralized, with traditionally few private hospitals admitting emergency cases(Aggarwal et al., 2001)

Medical emergencies

Although India has the emergency number 102 for calling ambulances, the responsiveness of the system has always been doubted. In 2007, Ramanujam et al. reported that nearly 50% of trauma victims admitted to a premier hospital in an urban Indian City had received no pre-hospital care however government is rectifying the flaws in the medical emergencies and the dial 108 came to play to serve immediately in the time of emergencies (Ramanujam and Aschkenasy, 2007)

World pandemic covid-19

And recently a world pandemic threat COVID-19 mitigation is crucial to the human life and for reducing distortion of livelihood the ICTV (International Committee on Taxonomy of Viruses) labelled SARS-CoV-2 (SARS- Severe Acute Response Syndrome) virus induced coronavirus disease (COVID-19) was outbreak from Wuhan, China from this January(Wu et al., 2020) though it spread drastically all over the globe, governments of all nations and India are taking a good measures and creating the big awareness about the virus and its spread and making us to prepare and mitigate the disease by giving some measures to follow like maintaining social distancing and frequent hand washes and wearing mouth masks in gathering through the mass medias although Medically adequate research has undertaken to resolve this problem worldwide. However, researchers are struggled to attain the vaccination for this single-stranded RNA contain virus(Shereen et al., 2020) and the several studies have been conducted to diagnose and control the disease(Marickar, Geetha and Neelakantan, 2014; Ashwin and Muralidharan, 2015; Shahana and Muralidharan, 2016; Pratha and Geetha, 2017; Renuka and Muralidharan, 2017; Smiline Girija, Vijayashree Priyadharsini and Paramasivam, 2018; Smiline, Vijayashree and Paramasivam, 2018; Vaishali and Geetha, 2018; Vijayashree Priyadharsini, Smiline Girija and Paramasivam, 2018a, 2018b; Girija As and Priyadharsini J, 2019; Girija et al., 2019; Maajida Aafreen, Rv and Thangavelu, 2019; Shahzan et al., 2019; Paramasivam, Vijayashree Priyadharsini and Raghunandhakumar, 2020) and even more studies are there to implement the awareness and thereby providing the absolute strategy designed for the emergencies and even in foreign countries other factors can cause an increasing demand or explain a high use of Emergency department resources. Examples are risk aversion (e.g. patients perceive their symptoms severe enough to attend the ED; patients that think they're better off in a high-tech environment) and the easy access to specialised care. Indeed, the perception exists that EDs are convenient ‘one-stop shops’ that provide ‘total care with relevant diagnostics, delivered by a specialist team trained in emergency medicine (Lowthian et al., 2011) and hence same strategy were followed both in india and foreign countries with some mild variations.WHO declared the coronavirus disease 2019 (COVID-19) outbreak, caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), to be a pandemic on March 12, 2020(Kindrat et al., 2020) and School closures can affect deaths during an outbreak either positively, through reducing transmission and the number of cases, or negatively, through reductions in the health-care workforce available to care for those who are sick. Studies of UK children and young people report that the mean number of daily social contacts during school holidays are approximately half that of school term days(Eames et al., 2010; Eames, Tilston and Edmunds, 2011).

Scenarios of covid-19

The scenario of India on COVID-19 has decently better than other already affected countries, it's due to the precautionary measures(Stawicki et al., 2020). However, India hasn't escaped from the pandemic, where it also comes into a danger position. The Union government has undertaken several steps to restrain the community spread, whereas people are not effectively understanding the situation. As we are an Indian, we have interacted and seen many peoples who all are not bothered about the life threatening COVID-19 calamity. This negligence has occurred due to their economical poverty, where union governments have never discussed their livelihoods, however some state governments like Kerala and Madhya Pradesh have announced some monetary schemes for their daily needs and many initiative were taken by both the government of indian as well as a foreign countries to ensure the further spread of this novel coronavirus and many measures were taken and Due to this coronavirus majorly dentist are more prone to the infection so the government of india and the management of institution have taken several measures to ensure the safety of the dental practitioners and our study is to gather the strategies that the government had done to make the people to evade from the pandemic and emergencies condition which are prevailing upto date Our team has rich experience in research and we have collaborated with numerous authors over various topics in the past decade (Deogade, Gupta and Ariga, 2018; Ezhilarasan, 2018; Ezhilarasan, Sokal and Najimi, 2018; Jeevanandan and Govindaraju, 2018; J et al., 2018; Menon et al., 2018; Prabakar et al., 2018; Rajeshkumar et al., 2018, 2019; Vishnu Prasad et al., 2018; Wahab et al., 2018; Dua et al., 2019; Duraisamy et al., 2019; Ezhilarasan, Apoorva and Ashok Vardhan, 2019; Gheena and Ezhilarasan, 2019; Malli Sureshbabu et al., 2019; Mehta et al., 2019; Panchal, Jeevanandan and Subramanian, 2019; Rajendran et al., 2019; Ramakrishnan, Dhanalakshmi and Subramanian, 2019; Sharma et al., 2019; Varghese, Ramesh and Veeraiyan, 2019; Gomathi et al., 2020; Samuel, Acharya and Rao, 2020)

MATERIALS AND METHODS

Study setting is by systematic review-pmc database ,medline, embrace, google scholar, No.of articles collected-15

DISCUSSION

Strategies followed to mitigate medical emergencies

In foreign and india there is an equally distributed strategies have followed to mitigate the medical emergencies but if there is a difficulty,an emergency sector which suggests the role of investment,development,deployment and the rapid diagnostic tests are necessary to diagnose the pathogens although the pandemic preparedness activities which focus on reducing the morbidity and mortality after pandemic had spread widely(Katz and Seifman, 2016)

Emergency services and emergency development systems

And the emergency services in India have a network of emergency physicians and it has a virtual network of emergency,policy,physicians and management constraints if it has an liberal access to use by the community and it behaves as a serving emergency obstetric care(Mavalankar, 2002) and in foreign countries. Telephone triage holds the potential to alleviate the pressure on EDs by redirecting patients without urgent or specialised care needs to a more appropriate care level (e.g.GP post, scheduled primary care or self-care). Yet, there is lack of high-quality evidence about the effect of validated pre-hospital telephone triage systems on ED use. This doesn't mean that the domain 'telephone triage' for calls related to urgent medical problems is understudied since several studies with impact on other outcomes and dimensions have been published(Lidal, Holte and Vist, 2013) and the proper guidance and care to provided for the affected individual to get rid of the disease soon even though there is an excessive emergency protocols are there it is the prime duty to ensure and the patients with the contagious diseases should be treated as a normal being and proper hospital facilities(Kirch, 2003)

Covid-19 mitigation and strategies followed

And amenities should be provided for the patient in need rather than making money on their situation,since the negligence of professionals may cause the disease to spread far and wide and increases exponentially and drastically and so there is a need to notice every being to ensure the proper epidemiology to prevent the spread of disease and to reduce the transmission of COVID-19, many countries had instituted large-scale or national closure of schools by March, 2020. These actions appear largely based on assumptions that the benefits apparent in influenza outbreaks are also likely to be true for COVID-19. There are several theoretical reasons why school closures might be less effective in COVID-19 than in influenza outbreaks. Children contribute more to influenza transmission than do adults(Wallinga, Teunis and Kretzschmar, 2006)with low levels of immunity and high levels of transmission due to symptomatic disease and the WHO have implemented the social distancing of 1m to prevent the spread of coronavirus and WHO have instructed some protocol when to aid the hospital like If you have minor symptoms, such as a slight cough or a mild fever, there is generally no need to seek medical care. Stay at home, self-isolate and monitor your symptoms and intimates us to Follow national guidance on self-isolation and asked us to Seek immediate medical care if you have difficulty breathing or pain/pressure in the chest. If possible, call your healthcare provider in advance, so he/she can direct you to the right health facility and international lockdown have implemented all over the globe in strict basis and In India they launched "Aarogya Setu" is an Indian open-source cross-platform CoVID-19 "Contact tracing, Syndromic mapping and Self-assessment" digital service, primarily a mobile app, developed by the National Informatics Centre under the Ministry of Electronics and Information Technology (MeitY).The app reached 100 million installs in 40 days. On 26 May, amid growing privacy and security concerns, the source code of the app was made public beyond some privacy concerns this app is stated spread awareness of COVID-19 and to connect essential COVID-19 - related health services to the people of India (Jhunjhunwala, 2020) and medical management is full swing to evacuate from the risk of spreading from coronavirus and Hospitals were intimated to check the patient preliminarily for the sign of virus before taking the patient needs into consideration and many hospitals doesn't allow the patient inside the hospital if he/she doesn't allow wear protective masks and In India many cops are appointed by the government to prevent crowding of peoples and further the corona spread is determined by three colour codes red zone,orange zone,green zone.

In the red zones, a complete lockdown will continue to be enforced. These are districts with a sizable number of cases. And also the ones that have already been declared hotspots by the government. Red zones will be sealed. And no non-essential movement will be permitted.

The orange zones are likely to be districts that initially reported a cluster of cases - but have since flattened the curve.There will be a limited lockdown in orange zones, with partial operation of public transport.But most crucially - agriculture harvest will go ahead as planned in orange zones. This will come as a huge relief to farmers living in these districts. Green zones are districts with zero COVID-19 cases and These districts could see minimum curbs -- mostly in the form of strict social distancing norms and these helps the people from the dreadful coronavirus and frequent handwashing which is said by WHO is important measure to prevent us from the virus and several restriction were imposed on vehicles like certain amount of people can only travel in that

vehicle and The Union Ministry of Home Affairs has also given the state governments to frame their own guidelines while preparing a plan to open Covid-19 orange and green zones and for the red zones e-passes were issued for the process swift and hassle free and this article windsup by saying several strategies were performed during medical emergencies and pandemics to improve the life of the people in catastrophical situations.Our institution is passionate about high quality evidence based research and has excelled in various fields ((Pc, Marimuthu and Devadoss, 2018; Ramesh et al., 2018; Vijayashree Priyadharsini, Smiline Girija and Paramasivam, 2018b; Ezhilarasan, Apoorva and Ashok Vardhan, 2019; Ramadurai et al., 2019; Sridharan et al., 2019; Vijayashree Priyadharsini, 2019; Chandrasekar et al., 2020; Mathew et al., 2020; R et al., 2020; Samuel, 2021)

Future Scope

This type of strategies and existing strategies helps to create the awareness about the disease and mitigating pandemic risk and it also reduces the scope of the disease

CONCLUSION

Preparing for a pandemic is challenging because of a multitude of factors,many of which are unique among natural disaster, pandemics are rare events and the risk of occurrence is influenced by anthropogenic changes in the natural environment. In addition,accountability for preparedness is diffuse, and many of the countries at greatest risk have the most limited capacity to manage and mitigate pandemic risk

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