Opinion

I read carefully the recent paper by Fazio et al., on this journal, where the authors widely criticized the approach with which COVID-19 pandemic was addressed by the Italian Government in the dramatic period 2020-2022 [1]. They focused all major concerns on the failure in recommending a sound and reliable home COVID-19 therapy, an issue particularly debated on my own [2-5]. The authors detailed with commendable stubbornness the many shortcomings (and mistakes, as they stated) of the Italian Government Institutions engaged to address public health policy during the COVID-19 pandemic emergency, some of these allegations were addressed also elsewhere [6]. Yet, I wrote this Letter to the Editor because, despite I retrieved some scientific convergence in the tale exposed by the colleagues, I would like to raise doubts about the “alternative” the authors make available as a convenient proposal, i.e., “freedom of cure” rather than “Government guidelines”. First, naming as a “Government’s guideline” a draft focused on a trivial, commonly used painkiller to address SARS-CoV2 infection at the earliest, is ridiculous. Second, if the freedom of cure to challenge a tremendous pandemic encompasses vitamins and flavonoids, besides highly controversial therapies, is ridiculous as well [1,7]. If the alternative to a trivial painkiller is to use vitamins, in addressing a scaring pandemic such as COVID-19, the civil debate between two different opinions is quite far to be fully appreciated. On contrast, recommending NSAIDs and COX-2 inhibitors as an early therapy against SARS-CoV2 infection, is much more arguable [8, 9]. Furthermore, the authors did not address a fundamental aspect characterizing the way to address pandemic, we refer to the possibility to treat COVID-19 patients with ozone therapy [10]. Ozone adjunct medical treatment has been reported so far as an effective approach to address COVID-19 and the pandemic related burden for healthcare services [11, 12]. Nutraceuticals should be restricted to the field on nutrition rather than pharmacology, particularly in the elderly. The huge bias of this discussion, which overflows from the scientific community to the street outcry, is that, during the COVID-19 pandemic, the majority of physicians was persuaded that therapy against SARS-CoV2 infection was “exclusively” a property of hospitals and major healthcare systems, whereas people staying at home due to quarantine, could be simply swabbed and identified. Paracetamol was only a sweet to relieve their pain and discomfort: nothing else.

Therefore, during the COVID-19 pandemic, hospitals were the only place where people “must” be treated, so causing the huge crisis of the socioeconomic texture, due to lockdown and restrictions policies. These latter were tailored in order to relieve the huge burden of hospitalization requests. Yet, which kind of alternative family doctors and practitioners did offer to politics in term of therapy proposal? If any of us sift through data coming from public information and mainstream in the years 2020-2022, he could find a terrifying confusion. Quite any single physician exhibited an own, personal idea on how to treat patients with COVID-19. Therefore, I admit that the problem was
never medical but political. So, which is the “real” imputation of the Italian politics in the tale reported by the authors? No actual concertation table, no actual scheduled meeting, no co-operation were seriously taken into account in order to tailor a proper, suitable and successfully therapy for those people forced to stay at their homes because quarantined, particularly if elderly. The pharmaceutical issue contains guilt people on both sides. Undoubtedly, paracetamol is not a drug tailored to treat COVID-19 (the Ministry of Health reported this statement on its public website), yet, on the contrary, no suitable and intelligent alternative proposal was ever attempted, aside from NSAIDs. And to date, while I am writing this manuscript, people are still not endowed with a proper battery of pharmaceuticals, as, so far, physicians are used to prescribe paracetamol if a patient has been infected with SARS-CoV2. We have learnt nothing more than quarrelling, from our tragedies.

References