

Social implications of a change in the legal classification of COVID-19: The need for pandemic prevention, preparedness, and healthcare system strengthening

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Abstract: In Japan, there has been a discussion of the potential reclassification of the novel coronavirus infectious disease 2019 (COVID-19) as an infectious disease under the Act on the Prevention of Infectious Diseases and Medical Care for Patients with Infectious Diseases (the Infectious Diseases Control Law), beginning in late 2022. To make an informed decision, the societal impact of COVID-19 needs to be carefully considered to ensure that any reclassification does not negatively impact healthcare or society as a whole. The disease burden of COVID-19 remains considerable and is likely to persist for an extended period of time. Consequently, numerous special measures have been taken in the healthcare system to cope with COVID-19. Several of these measures must be implemented. Thus, the healthcare system needs to be strengthened in the future. This will result in adequate prevention, preparation, and a response to future pandemics.

Keywords: the Infectious Diseases Control Law, transmissibility of infection, public health

Introduction

Three years have passed since the onset of the global novel coronavirus infectious disease 2019 (COVID-19) epidemic. In Japan, discussion of the reclassification of the disease under the Act on the Prevention of Infectious Diseases and Medical Care for Patients with Infectious Diseases (the Infectious Diseases Control Law) began toward the end of 2022. One of the primary drivers of the discussion is the decreased risk of severe morbidity and mortality associated with the disease. Nevertheless, there are concerns regarding the lingering deleterious ramifications of the disease control measures on society. Consequently, the presumption is that a shift in the disease classification under the Infectious Diseases Control Law could abate the measures' negative societal impact. Nonetheless, any change in the classification of the disease must be grounded in a profound understanding of its current impact on society, and such a change must not adversely affect healthcare and society as a whole.

This study provides an evaluation of the present medical status of COVID-19 and its impact on society. In addition, it discusses pertinent aspects that need to be considered in the development of the healthcare system when contemplating future changes to the classification of COVID-19.

Current medical status of COVID-19 and its impact on society

Severity of COVID-19

Comparing the severity of COVID-19 to that of influenza poses a challenge. However, if people who are tested and test positive are considered to be those seeking medical care, then utilizing the positive cases as the denominator to evaluate the rate of severe cases and deaths may provide useful insights into the level of medical care required. To this end, on December 21, 2022, the Ministry of Health, Labour and Welfare presented data to its Advisory Board on COVID-19, indicating a decrease in severity to similar levels only for people seeking medical care (1). A point worth noting is that COVID-19 has been associated with prolonged symptoms and a heightened risk of exacerbating pre-existing comorbidities. The risk of worsening comorbidities triggered by COVID-19 has also been noted. Individuals hospitalized with COVID-19 are reported to be at an increased risk of cardiovascular events (2). These facts may represent a significant additional burden of the disease.

Transmissibility of infection

This disease is highly contagious, with the Omicron

variant exhibiting greater transmissibility compared to both the seasonal and 2009 H1N1 influenza strains (3). The elevated level of transmissibility serves to account for the considerable number of positive cases, hospitalizations, and fatalities stemming from COVID-19.

Impact on public health

The COVID-19 pandemic has led to a significant number of positive cases, a vast number of hospitalizations, and an elevated death toll, thus imposing a substantial medical burden on healthcare facilities, compounded by pre-existing medical requirements. Moreover, the lingering post-illness symptoms associated with COVID-19 (4) and the heightened risk of developing subsequent health complications, such as cardiovascular diseases, have been identified as additional burden on the healthcare system. Hence, the medium- to long-term ramifications of this disease on public health are immense. To address this challenge, various public health and medical interventions currently in place must be sustained. Accordingly, the establishment of a sustainable healthcare system is imperative.

On the one hand, the disease commonly referred to as COVID-19 has been designated as a distinct illness known as "a novel coronavirus infection" under the Infectious Diseases Control Law. Consequently, medical facilities that offer both outpatient and inpatient care are substantially restricted to those officially designated by the government for the purpose of medical treatment and testing. Therefore, healthcare facilities that lack such government recognition are not mandated to accommodate patients diagnosed with COVID-19. Despite the increased medical workload resulting from the aforementioned circumstances, the current healthcare system is no longer equipped to handle the demands posed by this disease. To remedy this situation, the number of medical facilities capable of providing COVID-19 treatment must be increased.

Points to be considered after the change in classification

The emergence of COVID-19 has imposed a considerable supplemental strain on existing medical demands. The majority of the current support mechanisms for patients and the medical system, such as outpatient care, inpatient care, and home care, are vital and must be sustained. Although a considerable number of these measures are not legally mandated, they are implemented through funding by both central and local governments. Naturally, as the healthcare system adapts to cope with the exigencies posed by the pandemic, redundant services that are no longer required will need to be discontinued.

A system to coordinate hospitalization

Coordinating hospitalization for dialysis patients, pregnant women, and children poses a significant challenge. Consequently, local governments need to provide support for coordination of hospitalization at present. In the long run, a collaborative hospitalization system needs to be established among medical facilities and it needs to operate independently of local government support. Although autonomous coordination among medical facilities is underway in some regions, significant regional disparities persist. Despite established methods of preventing severe disease, treatment, and vaccination, many medical facilities refuse to accept COVID-19 cases due to their special classification under the Infectious Diseases Control Law. An important point, however, is that the pathogenesis of COVID-19 is well-understood and that the disease can be treated similar to other illnesses. The current classification under the the Infectious Diseases Control Law impedes the ability of medical facilities to effectively address the disease. Therefore, the classification of COVID-19 under the Infectious Diseases Control Law should be modified accordingly to allow for better management of the disease.

Several medical facilities and facilities lack experience in accommodating COVID-19 patients and thus lack the necessary infrastructure to respond efficiently. Despite the reclassification, continued government and local medical facility support needs to be provided to facilitate the smooth acceptance of COVID-19 patients in medical facilities and facilities for the elderly that have limited experience in handling such cases. Such support would include medical care and infection control. Acute respiratory infections, including COVID-19 and influenza, are anticipated to remain a significant medical and nursing care challenge in Japan's super-annuated population. A robust regional healthcare infrastructure needs to be developed to effectively manage these illnesses, while concurrently preparing for future pandemics. Establishing a robust and resilient healthcare system will help to avoid the confusion experienced during the current pandemic and better navigate future crises.

Outpatient clinics

Moreover, there is a pressing need to increase the number of medical facilities capable of providing outpatient care. The current classification of outpatient care presents a significant obstacle to entry, and hence, its reclassification is imperative. Amidst the ongoing pandemic, Japan has witnessed the commercial availability of COVID-19 and influenza test kits, which can now be directly utilized by consumers. This has facilitated independent testing and significantly curtailed the need for patients to visit medical facilities.

The anticipated surge in medical demand due to COVID-19 is considerable. Furthermore, ailments like the common cold, which do not necessarily require specialized treatment, impose a considerable strain on Japan's healthcare system. To alleviate this burden, patient self-care for acute respiratory infections needs to be promoted, utilizing self-testing kits and other pertinent tools.

Conclusion

Therefore, the disease burden imposed by COVID-19 is substantial, and anticipating its prolonged persistence is imperative. To address COVID-19, government agencies have introduced specialized measures to facilitate both outpatient and inpatient care. Several of these interventions will require sustained implementation. Strengthening healthcare systems is critical to meeting prevailing healthcare needs. Such endeavors will enable adequate prevention, preparation, and a response to future pandemics.

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