



Iberoamerican Journal of Medicine

ISSN: 2695-5075

ISSN-L: 2695-5075

iberoamericanjm@gmail.com

Hospital San Pedro

España

Joob, Beauy; Wiwanitkit, Viroj
Testing and Screening of SARS-CoV-2: Concern on
Hygiene and Infection Control of Specimen Collection Place
Iberoamerican Journal of Medicine, vol. 3, núm. 3, 2021, pp. 185-186
Hospital San Pedro
España

DOI: <https://doi.org/10.5281/zenodo.4756733>

Disponible en: <https://www.redalyc.org/articulo.oa?id=692072543002>

- Cómo citar el artículo
- Número completo
- Más información del artículo
- Página de la revista en redalyc.org

redalyc.org

Sistema de Información Científica Redalyc

Red de Revistas Científicas de América Latina y el Caribe, España y Portugal
Proyecto académico sin fines de lucro, desarrollado bajo la iniciativa de acceso
abierto



**IBEROAMERICAN
JOURNAL OF
MEDICINE**

iberoamericanjm

Journal homepage: www.iberoamericanjm.tk

Editorial Comment

Testing and Screening of SARS-CoV-2: Concern on Hygiene and Infection Control of Specimen Collection Place

Beauy Joob ^{a,*} , Viroj Wiwanitkit ^{b,c} 

^a Private Academic Consultant, Bangkok, Thailand

^b Honorary Professor, Dr. DY Patil University, Pune, India

^c Joseph Ayobabalola University, Ikeji-Arakeji, Nigeria

ARTICLE INFO

Article history:

Received 26 April 2021

Received in revised form 10 May 2021

Accepted 13 May 2021

Keywords:

SARS-CoV-2

Diagnosis

Hygiene

© 2021 The Authors. Published by Iberoamerican Journal of Medicine. This is an open access article under the CC BY license (<http://creativecommons.org/licenses/by/4.0/>).

Pruebas y cribado del SARS-CoV-2: preocupación por la higiene y el control de infecciones del lugar de recogida de muestras

INFO. ARTÍCULO

Historia del artículo:

Recibido 26 Abril 2021

Recibido en forma revisada 10 Mayo 2021

Aceptado 13 Mayo 2021

Palabras clave:

SARS-CoV-2

Diagnóstico

Higiene

© 2021 Los Autores. Publicado por Iberoamerican Journal of Medicine. Éste es un artículo en acceso abierto bajo licencia CC BY (<http://creativecommons.org/licenses/by/4.0/>).

HOW TO CITE THIS ARTICLE: Joob B, Wiwanitkit V. Testing and Screening of SARS-CoV-2: Concern on Hygiene and Infection Control of Specimen Collection Place. Iberoam J Med. 2021;3(3):185-186. doi: 10.5281/zenodo.4756733.

Dear Editor, we would like to discuss on the publication “Factors affecting SARS-CoV-2 (COVID-19) Pandemic, including Zoonotic, Human Transmission and Chain of Infection. Reducing Public health Risk by Serum Antibody Testing, Avoiding Screening in Unhygienic Places and

False PCR Reporting [1].” Aziz et al. noted that “testing and screening of SARS-COV-2 should be avoided in unhygienic public places by nasopharyngeal swabs, which carry a high risk of further transmission, and such highly infectious virus must be isolated and tested in highly

* Corresponding author.

E-mail address: beuyjoob@hotmail.com

ISSN: 2695-5075 / © 2021 The Authors. Published by Iberoamerican Journal of Medicine. This is an open access article under the CC BY license

(<http://creativecommons.org/licenses/by/4.0/>).

<http://doi.org/10.5281/zenodo.4756733>

sterilized laboratory [1].” Indeed, the SARS CoV-2 test is presently widely used. There are many considerations on the test. Aziz et al. raised an interesting issue regarding hygiene of specimen collection place [1]. In many developing countries, the specimen collection is usually performed in a community level and it is usually difficult for sanitation management. Collecting a medical specimen for COVID-19 test might carry a theoretical risk of transmitting pathogen [2]. Insufficient personal protective equipment (PPE) is a common problem and it is necessary to have the best prevention for the practitioner [2]. In an area with severe limited PPE, a self-specimen collection by examinee is suggested [3]. Additionally, an applying of social distancing process such as pre-registration via online system might be sometimes causes more complicated problem. In Africa, the medical tools is severely insufficient and the laboratory testing of suspect COVID-19 cases is characterized by a very long wait periods [4]. The complex appointment process results in a delay of diagnosis and some patients might die during waiting for an appointment to get COVID-19 test.

The hygiene and infection control of specimen collection place is a very important issue. However, it is usually overlooked. In developing countries, the local medical technologist association and pathologist association usually have slow response to emerging problem. During an early outbreak, it is usually a period of uncertainty and the lack of specific guidelines result in poor outbreak control and occupational risk of medical practitioner [5]. Additionally, proper measures are not usually recommended. In a poorer case, those poor associations might sometimes issue an inappropriate suggestion to support local political policies on disease control without concern on the scientific principles. For example, when there is a publication on possible disease transmission in a forensic pathology unit in a country during early phase of disease outbreak, the local pathology might focus attention to deny the problem

and try to punish one who raised the issue. In fact, a good thing should be the recognition on the possible risk and try to find proper method to correspond to possible problem. An important factor that might affect pandemic is the human factor. In a setting with good local public health system and administrator, the pandemic situation might be successfully managed. However, the problem of good governance is not uncommon. Indeed, the problem of administration can be seen at a micro-unit such as a primary care center. A poor administrator might focus on his/her benefit on “no complaint” than the safety and infection control [6]. Transparency of COVID-19 pandemic management is very important [7] and this might be a factor determining pattern of pandemic in different settings.

1. REFERENCES

1. Aziz KMA, Othman A, Alqahtani WA, Azhar S. Factors affecting SARS-CoV-2 (COVID-19) Pandemic, including Zoonotic, Human Transmission and Chain of Infection. Reducing Public health Risk by Serum Antibody Testing, Avoiding Screening in Unhygienic Places and False PCR Reporting. A Scientific Review. *Iberoam J Med.* 2021;3(2):138-60. doi: 10.5281/zenodo.4599718.
2. Tang YW, Schmitz JE, Persing DH, Stratton CW. Laboratory Diagnosis of COVID-19: Current Issues and Challenges. *J Clin Microbiol.* 2020;58(6):e00512-20. doi: 10.1128/JCM.00512-20.
3. Karthik K, Aravindh Babu RP, Dhama K, Chitra MA, Kalaiselvi G, Alagesan Senthilkumar TM, et al. Biosafety Concerns During the Collection, Transportation, and Processing of COVID-19 Samples for Diagnosis. *Arch Med Res.* 2020;51(7):623-30. doi: 10.1016/j.arcmed.2020.08.007.
4. Kobias F, Gitaka J. COVID-19: Are Africa's diagnostic challenges blunting response effectiveness? *AAS Open Res.* 2020;3:4. doi: 10.12688/aasopenres.13061.1.
5. Lamas NJ, Esteves S, Alves JR, Costa FE, Tente D, Fonseca P, et al. The Anatomic Pathology laboratory adjustments in the era of COVID-19 pandemic: The experience of a laboratory in a Portuguese central hospital. *Ann Diagn Pathol.* 2020;48:151560. doi: 10.1016/j.anndiagnpath.2020.151560.
6. Saithong C. Motorcycle accident, vertebral fracture, COVID-19 and death. *Case Study Case Rep.* 2020;10(2):19-21.
7. Bump JB, Baum F, Sakornsin M, Yates R, Hofman K. Political economy of covid-19: extractive, regressive, competitive. *BMJ.* 2021;372:n73. doi: 10.1136/bmj.n73.