

## COVID 19 and disinfodemic – A new age problem

### Letter to Editor

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The coronavirus disease 2019 (COVID-19) pandemic has brought life as we know it to a screeching halt and has made us think about re-evaluating our happiness and long-term goals in a different light. It is currently the most dominating subject in our everyday conversation, social media presence and scientific endeavours. As it remains under a shroud of fear and uncertainty, governments all around the world are attempting to modify their current standards of patient care to adapt to the current circumstances to contain its spread and commotion. It has brought about a unique level of global collaboration never seen before, and it is imperative to continue as medical professionals to provide constant input to the pool of emerging knowledge and wisdom so that we may control it and pave the way to initiate mandatory steps in preventing a similar crisis from occurring again.

The World Health Organization (WHO) first showed signs of concern in January 2020 when they reported a series of 44 patients with pneumonia from Wuhan City, Hubei province, China.[1] Following this, a very perceptive article was published which described such pneumonia of unknown aetiology in Wuhan, China and expressed concerns of its spread internationally through commercial air travel.[2] On March 11, 2020, this disease spectrum was declared a pandemic by the WHO and had since rapidly spread to 216 countries of the world and killed over 910'000 patients. It is still creating havoc with the norms that were prevalent in societies and have unabashedly destroyed the concepts of community, socializing arts, culture, tradition, religion and politics. Moreover, it has precipitated the worst economic disaster in recent times and has exposed the inadequacies of the current healthcare systems. In a short period, scientific literature on the subject has multiplied exponentially with contributions from various disciplines of medicine. This has led the WHO to come up with another novel term which is "infodemic" which signifying an overabundance of information which has to sweep the world with fury and making it extremely difficult for

ordinary individuals to encounter authentic information and receive dependable guidance as required. [3] This has led to the dissemination of false information as well, throwing fuel on the fire to the already palpable anxiety in self-isolating population and communities.

Misinformation and Disinformation have been creeping around in different fields of science and technology and are by no means novel to COVID-19.[4] However, the enormity of the current global crisis in this new age of information has led to unprecedented levels of confusion and uncertainty which is leading to panic among the masses, further derailing public health measures and propagating false cures and conspiracy theories. It has been a field day for many alternative-medicine practitioners, holistic healers and wellness guides who have been advocating numerous dubious pills and potions to protect one's immune system against COVID-19. Although the simplistic ideas touted by them were even nonsensical before the epidemic, the desperation that has ensued with finding a cure has led many a people clinging to the idea of the fabled miracle drug. Even healthcare professionals working on the frontline have been suffering physically and emotionally in this crisis. While we do not have a recommended cure till date that works, we have been trying different medication based on urgency and uncertainty. Even though some of the interventions may work in different settings, the lack of time available for randomized controlled trials and drug trials has kept the



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mystery alive.

A recent communication published by Zagury-Orly et al. has stressed on the need for maintaining a sense of clinical equipoise during this impasse.[5] Under these conditions of doubt and skepticism, one has the subconscious tendency to favor newly acquired information because it is easy to recall leading to an availability bias when choosing a treatment modality. Similarly, we are partial towards anchoring to a diagnosis which restricts our thinking and leads to premature closure of the decision-making mechanism without sufficiently probing into the available alternatives.[6] Moreover, confirmation bias may drive us to emphasize our preconceived concepts at the expense of conflicting information. In such nerve-racking times, we begin losing our grip on scientific principles and start to rely on anecdotes and idiosyncratic experiences of our colleagues.

It is imperative that we utilize our norms of critical rational thinking and not give wind to the nuances of confusing information. Our training as physicians demands this of us. It is expected of us to determine an expeditious solution, but hearsay should not dominate our thinking and actions. Restraint with caution and reason will save us.

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