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**OPINION**

FROM TOI PRINT EDITION

# A strategic testing regime: How to step up tests to ensure effective containment of corona

April 10, 2020, 4:00 AM IST          **Kirit S Parikh**   in   **TOI Edit Page** | **Edit Page**, **India**, **World** | TOI

If all families have enough space to remain at a distance from others, the 21-day lockdown would have been effective. All those who are infected will show symptoms within 14 days. The only persons they would have infected during the lockdown would be their family members, all of whom can be clearly identified. This scenario, however, is far from India's reality.

A sizeable portion of urban population lives in slums where the possibility of maintaining social distance is virtually zero. 42.6 million persons lived in slums in 2001 as per the census. By 2019 it has been estimated that some 104 million persons would be living in urban slums. The question is: How do we prevent the virus from spreading here?

We need to isolate the slum. If it is effectively done then nobody goes out of it and nobody comes to it from outside. This is a big if, but it can localise the problem. The next task would be to quickly identify those infected and quarantine their possible contacts. If the population cooperates, minimises interactions with people and maintains a list of all those with whom they came in contact we can focus on a limited number of persons as potentially infected. They need to be tested and quarantined if needed.

But given the limited testing facility we have, how do we test effectively? Korea has tested more than 6,000 per million persons. If we want to reach the same level of testing, we need to do some 6 lakh tests for the urban slum population.

Our goal should be to reach this level in less than a month. With an average family size of 5 persons in slums, this roughly means testing every 25th family. This then is the challenge: How to quickly step up our testing capacity to this level in a short period of time. The good news is that the government is gearing up to massively step up testing.

The Indian Council of Medical Research (ICMR) has sought price quotes for 10 lakh antibody kits (serological test) for diagnosis of Covid-19. The serological test detects if a person has been infected or not by detecting the presence of infection fighting antibodies in the blood. The result can be had within minutes. Unfortunately, this test is accurate only after seven to nine days of infection. So it may miss out on recently infected.

The ICMR has also procured 10 lakh RNA extraction kits, for RT-PCR testing. It is more accurate but results take time. It is also expensive.

A strategic plan should be evolved for testing. Anyone with a symptom should be tested as soon as possible. Others in the neighbourhood of those found infected should be tested next. If we can set up such a mechanism and effectively implement it, we have a good chance of controlling the spread of coronavirus. We could learn from the experience of Germany. We can mix the swabs of 16 persons in one test and see if it shows signs of infection. Then if the group of 16 shows infection it may be quarantined or further tests be given to its members. This way we can enlarge the coverage of testing rapidly.

The test, however, costs about Rs 1,200-1,500. With bulk purchase the price can be substantially lowered. In any case the amount involved is not much but the organisation to be created poses a bigger challenge. Even at Rs 1,000 per test, the cost per million tests would be only Rs 100 crore. If people have to pay for the test many with symptoms will not come forward for testing. The test should be free and the Supreme Court has mandated it so. However, the government should ask people to donate voluntarily for it just as its 'give-it-up' programme for LPG subsidy. A voluntary 'pay-it-up' programme will evoke good response.

Apart from the problem posed by densely populated urban slums, we have a bigger problem, that of migrant workers returning to their villages from cities. We should have anticipated this and provided organised return to them with provision for tracking them. We should have listed everyone who is leaving with his/ her name, village, mobile number. The mobile number can provide a way to communicate with them through local language about the need for them to maintain self-quarantine and also to track them.

The village pradhan should be notified of the worker coming home and the need to enforce quarantine. Here of course there is a danger that the worker would be ostracised, particularly if she/ he is from lower social strata. They should also be provided a telephone number of their nearest testing facility to report any symptom of infection. Since most, if not all migrant workers would have a mobile phone, this

is a feasible way. Of course it will require a major coordinated effort mobilising all our IT skills and resources as well as a system of dispersed testing facilities with mobile units to collect samples from villages.

Thus to make the lockdown effective and less painful we need to act on a variety of fronts. A much larger sum, say 5% of GDP, should be spent on reaching the poor and those who lose their livelihood during the lockdown. In any case, a huge step up in our public health infrastructure and testing facility is required. The crisis provides an opportunity to do so and should not be wasted.

DISCLAIMER : Views expressed above are the author's own.

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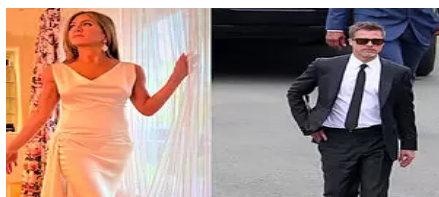


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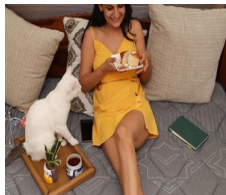
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