Lack of preparedness for the next pandemic is an emergency

If we’re to be ready for the next pandemic, we can’t fall back into the same cycle of panic-neglect, writes Abraar Karan

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On 30 January 2023, President Joe Biden announced the near end of the covid-19 public health emergency that was put in place in the United States by the Trump administration in 2020. The World Health Organization (WHO) has signalled that it too may end covid-19’s designation as a public health emergency of international concern (PHEIC) when meeting in the coming months, although for now it hasn’t made any changes.1

Concerns have been raised about the implications of ending the emergency phase of the pandemic in the US.2 It will mean the loss of Medicaid coverage for between 5 to 14 million Americans, including people who are still eligible but who may have a hard time navigating the renewal process.3 People with disabilities or a limited proficiency in English, for example, may be particularly hurt. Ending the emergency will affect access to rapid tests, therapeutics (like Paxlovid), and vaccines.4 It will also cause disruptions to the healthcare system—we’ll have to revert to previous regulatory requirements and former, stricter rules on telehealth and prescribing practices.

Other commentators have argued that the US’s emergency phase was extended for far too long, and that the powers it granted the president were used to promote agendas beyond those strictly needed for pandemic control.5 Some say that covid-19 is more treatable now than in 2020, obviating the need for the same level of urgency.6 Similarly, arguments have been made both for and against the WHO ending covid-19’s designation as a PHEIC, including that it would signal incorrectly that covid-19 was no longer a serious health problem, but that it technically doesn’t meet PHEIC criteria any longer.7

Will ending the emergency have an impact on the US’s current pandemic response? It will undoubtedly have some of the ramifications mentioned—at a time when the country is still recording a few thousand deaths a week from the virus,8 and while the Republican led House of Representatives further scrutinises spending on covid-19.9 The more important question, however, is whether we are prepared for the next viral respiratory pandemic? To which the answer is still a resounding no.

The US’s patchwork efforts to tackle social inequities during the pandemic—which were necessary but insufficient—are unlikely to be sustained beyond the emergency phase.10 And without adequate, long term workplace protections or social safety nets, our frontline workers are still vulnerable to the next highly contagious pathogen that emerges. Key measures needed to prevent the spread of respiratory viruses are also lacking. One of our lowest hanging, most easily scalable interventions—masks—are still contested. Previous problems identified in our masking efforts, including the lack of fit testing for the public, have yet to be resolved. Low uptake of booster vaccines, even in high risk settings such as nursing homes,11 highlights the ongoing challenge of vaccine hesitancy, despite data continuing to show that vaccinations reduce real world transmission of SARS-CoV-2.12 Finally, federal efforts towards implementing wide scale air filtration and achieving better ventilation in shared public spaces13 have certainly been encouraging. Yet they also seem to be slow and incremental, despite three years of calls for this to be done urgently.14 Instead, people have been left to use stopgap measures, such as “do it yourself” filtration devices,15 while we await transformational changes in our buildings.

The next problematic SARS-CoV-2 variant is likely ahead of us, but so too are a number of other viruses with pandemic potential, including H5N1, which recently resulted in the death of a child and hospitalisation of her father in Cambodia. Major limitations in our genomic surveillance infrastructure remain, however, which prevent us from quickly detecting and acting on new outbreaks.16 Biden’s administration and WHO may indeed be moving towards the end of this pandemic emergency. Yet the lack of preparedness for the next infectious respiratory outbreak—which could be at any time—is itself an emergency we must solve. The usual cycles of panic-neglect cannot obstruct pandemic preparedness any longer. At a bare minimum, this must be a lesson that covid-19 has taught us.

Competing interests: Abraar Karan had served as a paid research consultant to the Independent Panel on Pandemic Preparedness and Response in 2020. He also worked as a pro-bono consultant to the Biden-Harris campaign for policy writing on safer reopening for schools in 2020.

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7 Adam D. When will COVID stop being a global emergency? Nature 2023;614:-2. doi: 10.1038/d41586-023-00294-9. pmid: 36725952


