



COVID-19 pandemic repercussion in the European Air Transport Command

Lt. Col. Martín Gascón Hove

Aeromedical Evacuation Control Center

European Air Transport Command

EATC structure



POOLING & SHARING

**7 NATIONS
ONE
COMMAND**



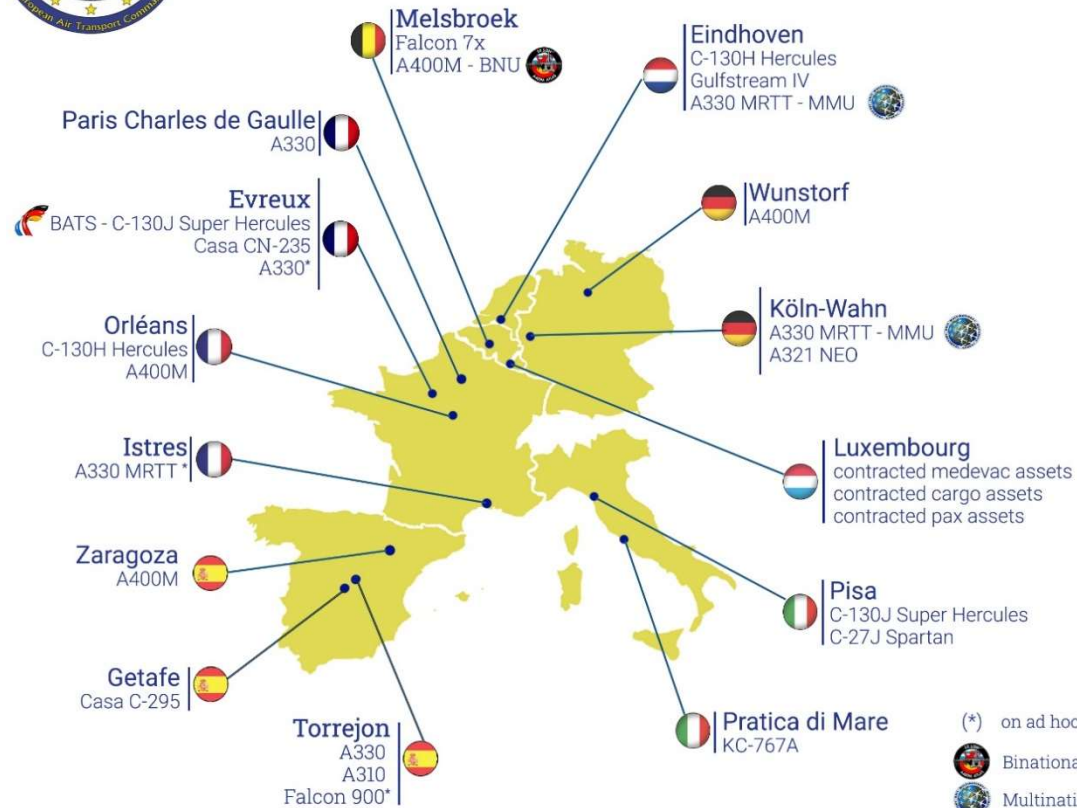
215 STAFF-MEMBERS



**AIR MOBILITY COMMAND
&
CENTRE OF EXPERTISE**



EATC fleet

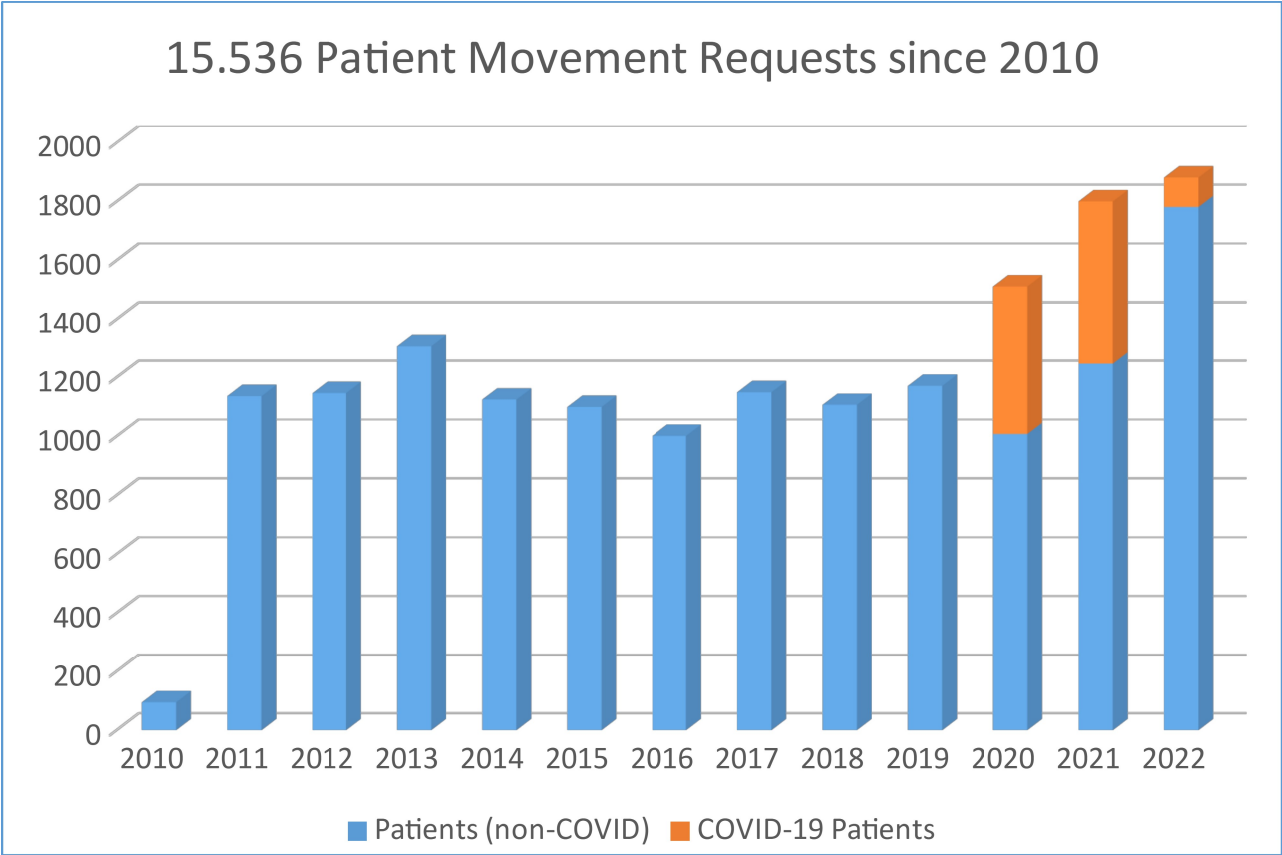


- 7 nations
- 200+ experts
- 1 command
- worldwide missions
- 24/7/365 operations
- on average: 60 missions/day
- 14 bases
- ~20 types
- 150 aircraft

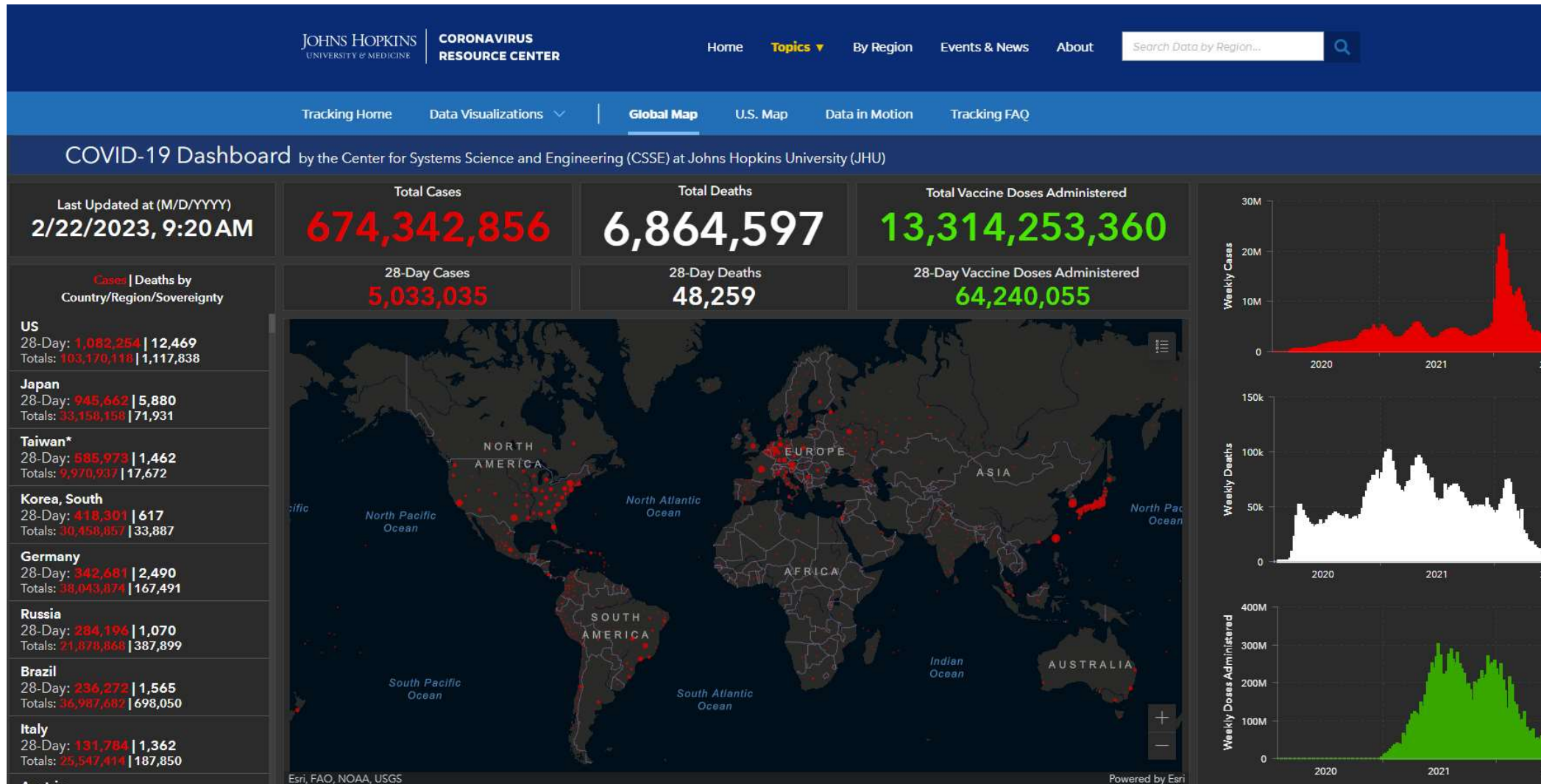
(*) on ad hoc basis

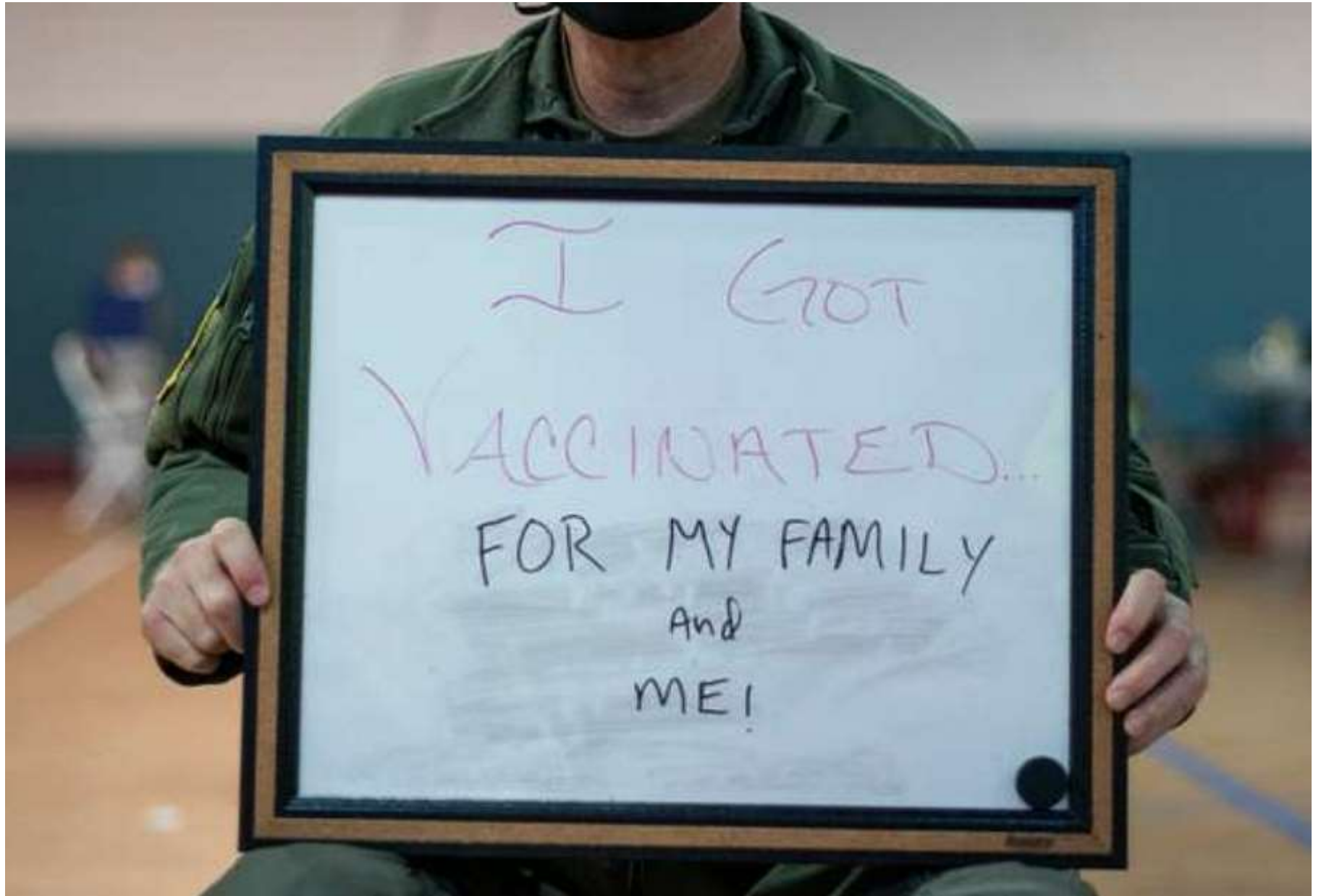
- Binational A400M Unit
- Multinational A330 MRTT Unit
- Binational Air Transport Squadron

1060 COVID-19 patients managed during 2020-2021



Pandemic: waves





I GOT
VACCINATED...
FOR MY FAMILY
AND
ME!



NORTH ATLANTIC TREATY ORGANIZATION
SCIENCE AND TECHNOLOGY
ORGANIZATION



TECHNICAL COURSE PROGRAMME

HFM-350
NATO RAMSTEIN AEROSPACE MEDICINE
SUMMIT

"FLYING THROUGH UNCERTAINTY"

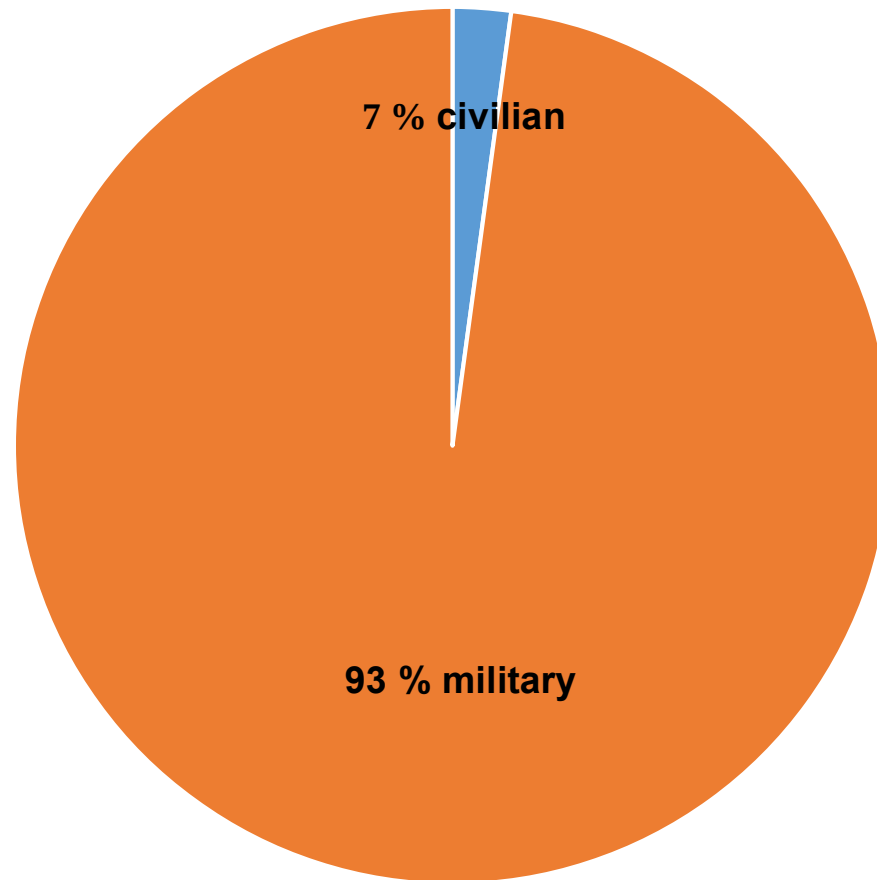
**22 - 25 MARCH 2022 IN GARMISCH-PARTENKIRCHEN,
GERMANY**



Criteria

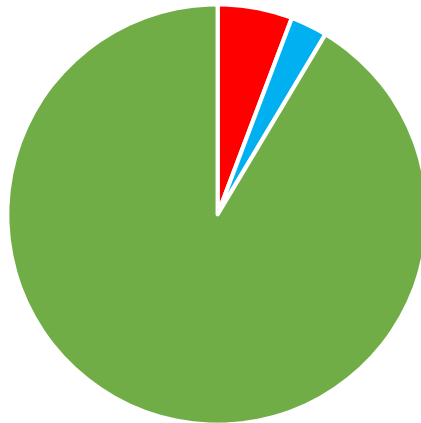
- Intubated < 5-7 days
- PaO₂ / FiO₂ > 150
- FiO₂ < 70 %
- PEEP < 14
- No Pronation
- MOF (catecholamines, dialysis, extracorporeal membrane, anemia, DIC)

Condition of patients



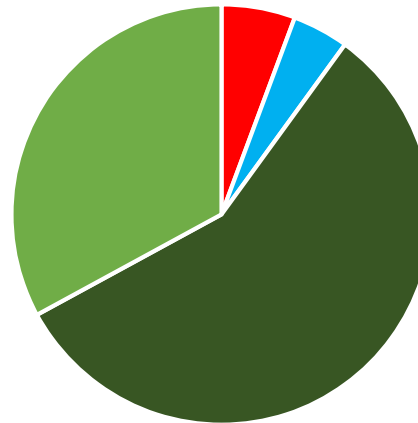
Features

Priority



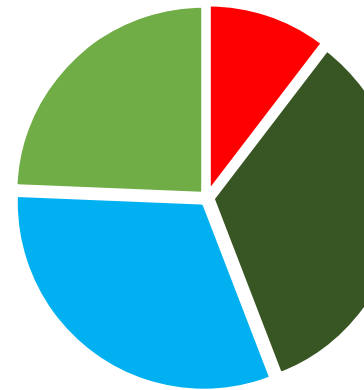
■ P1= 61 ■ P2= 30 ■ P3= 969

Dependency



■ D1= 60 ■ D2= 46 ■ D3= 605 ■ D4= 349

Classification

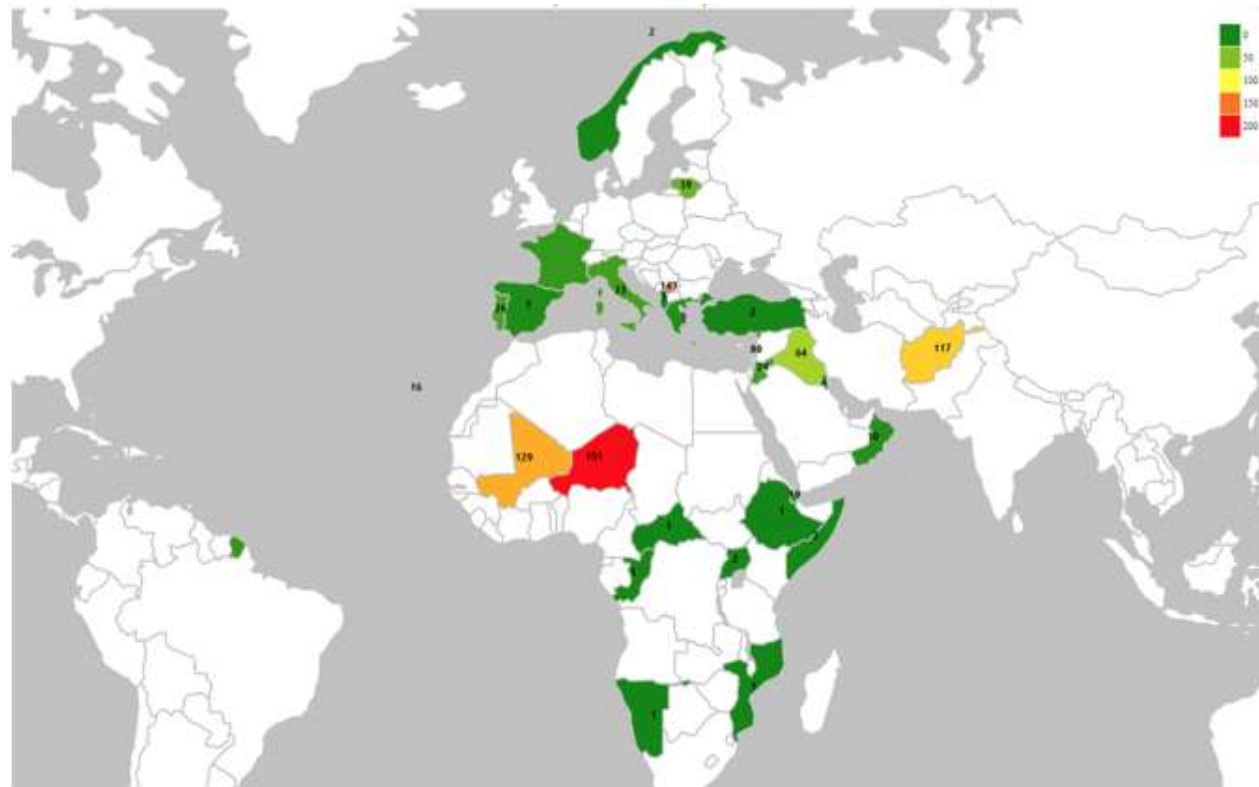


■ 2A= 110 ■ 2B= 358
■ 3 (A y B)= 334 ■ 4= 258



NATO - STANAG 3204
AEROMEDICAL EVACUATION

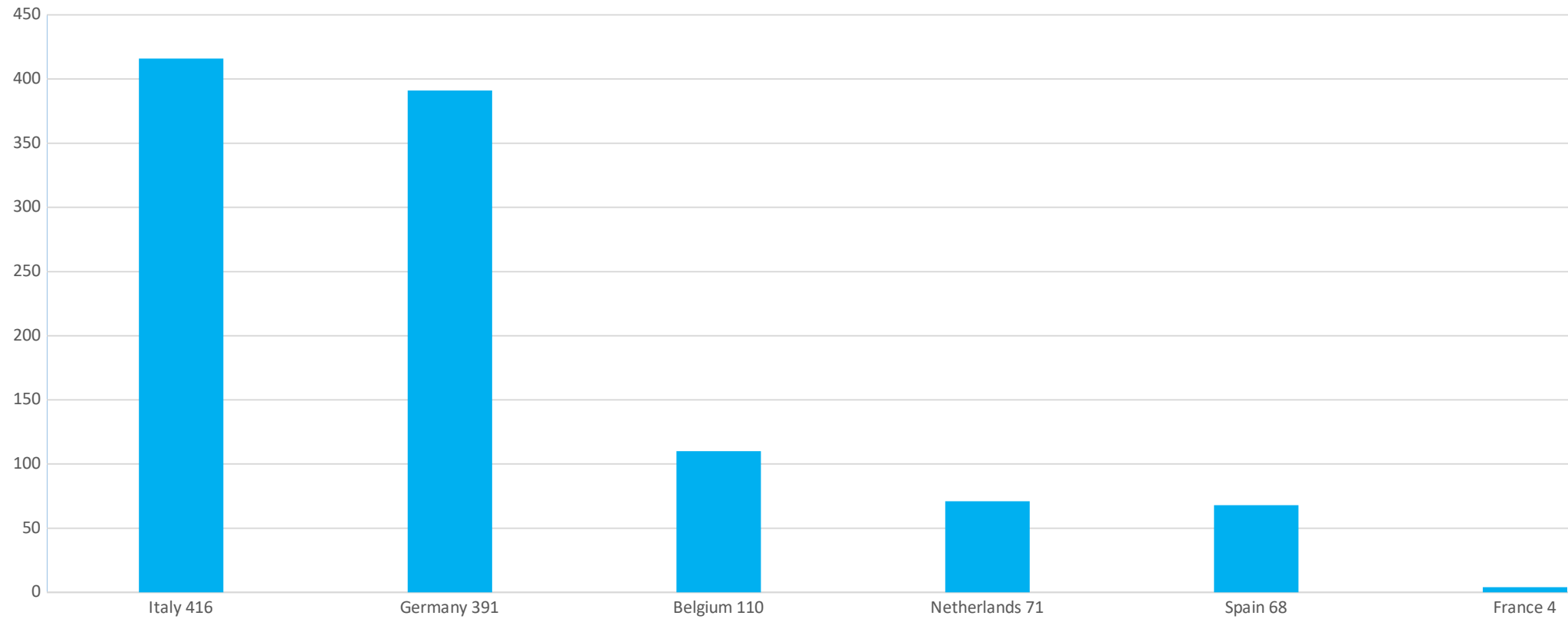
Origin of 941 patients until July 2021



Origin of the patients during 2020-2021

Nation	Patients
Niger	191
Kosovo	149
Mali	138
Afghanistan	117
Irak	110

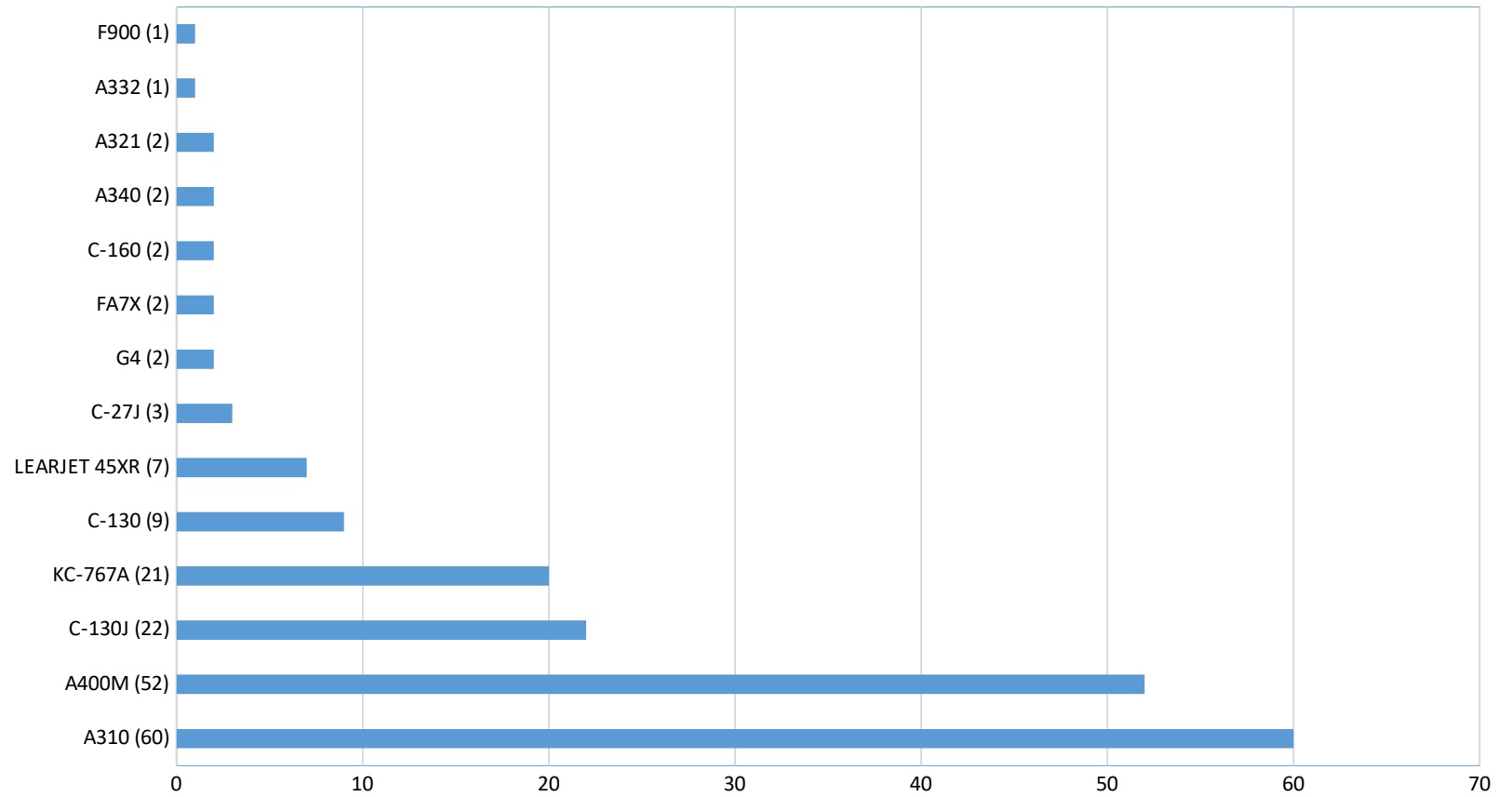
Nationality of the patients



Aircraft: A310



Aircraft (II)



Aircraft (III): Learjet 45XR



EpiShuttle isolation unit



Civilian missions

Date	N	P	Origin	Destiny	Aircraft
28/3/20	6	1	Bergamo	Cologne	A310
29/3/20	2	1	Strasbourg	Stuttgart	A400M
29/3/20	6	1	Bergamo	Hamburg	A310
1/4/20	4	1	Bergamo	Cologne	A310
3/4/20	6	1	Bergamo	Cologne	A310
30/6/20	8	3	Kabul	Pratica di Mare	A400M
17/7/20	1	3	Djibouti	Hamburg	A400M
13/11/20	2	2	Tirana	Bari	C130J
11/12/20	1	3	Kinshasa	Brussels	Learjet 45XR
5/4/21	1	1	Brindisi	Palermo	C130J
11/6/21	2	3	Entebbe	Pratica di Mare	KC767-A
1/11/21	6	1	Bucharest	Cologne	A310
1/11/21	6	1	Bucharest	Cologne	A310
26/11/21	6	1	Memmingen	Cologne	A310
28/11/21	5	1	Munich	Hamburg	A310
1/12/21	6	1	Munich	Dresden	A310
3/12/21	6	1	Memmingen	Paderborn	A310

Cross-national missions

Nation	AM requested	AM performed	Patients
Germany	5	33	222
Belgium	14	-	-
France	3	1	1
Italy	21	2	3
Netherlands	2	2	2
Luxembourg	-	7	7

Spanish missions

Date	Aircraft	Origin	N	M	N	T
19/3/2020	A400M	Djibouti	1	-	1	2
4/10/2020	A310	Mali	7	2	2	3
5/12/2020	A310	Mali	21	1	2	3
12/12/2020	A310	Mali	13	2	2	3
23/12/2020	A310	Mali	16	1	2	3
2/1/2021	F900	Mali	1	2	1	2
5/1/2021	A310	Ethiopia	1	2	1	2
28/4/2021	A400M	Greece	8	2	1	1

Summary

- 1060 patients.
- Augment of 31,9 %.
- 186 missions.
- 91,4 % P3.
- 93 % military.
- 74 civilians in 17 missions.
- 76,1 % Italy and Germany.
- 32,2 % Airbus A310.
- Niger: 191.
- 235 patients X-nat.


Conclusions

- Increase in the number of patients.
- Challenge (operational, medical, technical).
- Depends on vital reserve.
- Feasible and safe.
- No complications on board reported.

EDITORIAL | VOLUME 401, ISSUE 10371, P79, JANUARY 14, 2023

The COVID-19 pandemic in 2023: far from over

The Lancet

Published: January 14, 2023 • DOI: [https://doi.org/10.1016/S0140-6736\(23\)00050-8](https://doi.org/10.1016/S0140-6736(23)00050-8) •  Check for updates

The COVID-19 pandemic in 2023: far from over

3 years ago, on Jan 5, 2020, the Department of Zoonoses at the National Institute of Communicable Disease Control and Prevention (Chinese Center for Disease Control and Prevention) announced the isolation of a new Coronavirus responsible for a wave of respiratory illnesses. On Jan 30, WHO declared a Public Health Emergency of International Concern. Despite many efforts to learn from the pandemic during the past 3 years, and discussions on international treaties of pandemic preparedness, the global response remains inadequate and fragmented. In 2023, far from it being the end of the pandemic (as hoped by many and announced for the USA by President Biden in September last year), there is a new, dangerous phase that requires urgent attention.

On Dec 7, China seemed to react to a wave of protests against its draconian so-called dynamic zero-Covid policy by dropping most of its restrictive controls. Chinese people with mild or asymptomatic disease were able to quarantine at home, travel in public was no longer restricted by electronic health passes, and lockdowns were now highly focused and no longer required for whole municipal areas or cities and were relaxed after 5 days for new cases. Additionally, from Jan 8 onwards, people were able to travel internationally again. The sudden turnaround caused rapid infection in many millions of Chinese people in December, 2022. A struggling health system was at its limits and many older people were dying, although official figures did not capture these deaths as COVID-19-related because Chinese authorities applied a very narrow definition and stopped information on numbers of infections, hospital admissions, and intensive care admissions. Although infections might have peaked in Beijing, China and its population are entering a precarious and difficult phase for several reasons.

First, the vaccination rate, especially of older people, is insufficient. According to figures from the Chinese National Health Commission, at the end of November, 69% of those 60 years and older and only 40% of those 80 years or older had a course of two vaccinations and a booster with Chinese-licensed vaccines, although these are not specifically aimed against the prevailing omicron variants. A vaccination drive, especially aimed at older people, is underway. Additionally, several

Chinese companies are working on a bivalent mRNA vaccine, but it will take some time for these more effective vaccines to be licensed.

Second, in addition to the winter season, the Lunar Chinese New Year on Jan 22 and the expected travel wave across the country to see relatives will mean spread of infections to rural areas where the health-care system is weaker, and where many older people with comorbidities and poor health live, as a recent Peking University-Lancet Commission outlines. Understandably, Chinese people want to lead normal lives again and see friends and family after such a long period of restrictions, but the health consequences could be dire.

Third, the international community, far from showing compassion, has quickly reacted by imposing or strongly encouraging travel restrictions and requirements of a pre-travel negative SARS-CoV-2 test for Chinese people. This move was regarded as unnecessary by the European Centre for Disease Prevention and Control as the variants seen in China, the omicron subvariants BA.5.2 and BF.7, are the ones that have been circulating in Europe and elsewhere in populations that now have high levels of immunity. Although precaution is understandable and variant monitoring and data sharing should be widely encouraged, singling out Chinese travellers is counterproductive and might have unintended consequences.

The more worrying omicron subvariant and one to watch closely is XBB.1.5, which has rapidly spread in the USA, where it comprised 20-1% of cases at the end of December, 2022, according to the Centers for Disease Control and Prevention. Maria Van Kerkhove, WHO's COVID-19 technical lead, called it the most transmissible yet with mutations in the protein spike that allow a closer binding to the ACE-2 receptor and facilitate immune evasion, although so far there are no signs that it causes more severe disease. However, there are some early indications that hospital admissions are increasing in the northeast of the USA, where it is most prevalent.

Rather than hoping for the end, letting our guard down, and thinking that the problem is somewhere else, everyone needs to remain alert, encourage maximum transparency in reporting cases, hospital admissions, and deaths, and accelerate collaborative surveillance of variant testing and vaccinations. The pandemic is far from over. ■ The Lancet



This online corrected first appearance on January 14, 2023

For the full text of this article, visit www.thelancet.com and search for the article title.

For more information on this article, visit www.thelancet.com and search for the article title.

For more information on this article, visit www.thelancet.com and search for the article title.

