

**AN OPEN LETTER FROM COLLEAGUES AT THE MALAWI-LIVERPOOL-WELLCOME TRUST  
CLINICAL RESEARCH PROGRAMME, BLANTYRE**

16<sup>th</sup> April 2020

Dear friends and supporters,

Thursday, 2<sup>nd</sup> April 2020 marked the day for which Malawi has been preparing for some weeks with great trepidation: the confirmation of the first cases of COVID-19 in the country.

Malawi is a densely populated low-income country making rapid spread of COVID-19 very likely. Models estimate that up to 90% of Malawi's 18 million population will become infected during the epidemic. While the population is young, there is a high burden of both infectious (TB, HIV and malaria) and non-communicable diseases (stroke and diabetes) making Malawi's population incredibly vulnerable to the effects of COVID-19. In a nation where food and water are often purchased on a daily basis, social distancing and lockdown measures will be difficult to implement. We are therefore working with the Malawi Government and other partners at district and national level to develop innovative ways to shield vulnerable populations and prevent deaths.

We are actively supporting preparedness at our local healthcare facilities in order to maintain essential services and mitigate against the effects of the epidemic and we continue to contribute directly to clinical care at Queen Elizabeth Central Hospital, which operates beyond capacity on a daily basis. Currently, there is a major shortage of basic PPE, inadequate facilities for or waste disposal and insufficient oxygen provision making the prospect of a widespread community transmission of COVID-19 uphill challenge. As the Ebola crisis taught us, epidemics can turn hospitals and clinics into places of fear, discouraging attendance and leading to indirect mortality.

Despite many challenges, Malawi has made undeniable progress in health outcomes over the last 20 years, as proven in the past few months when the WHO formally declared the country having eliminated lymphatic filariasis, a neglected tropical disease affecting millions across the continent. This was possible in part due to the commitment of the government and its partners to develop healthcare workers. These precious individuals are now at the frontline of the COVID-19 response and need appropriate protection and support to avoid healthcare worker infections. This can only be achieved by ongoing international cooperation; appropriate funding; easing of relevant import and trade restrictions and sharing of knowledge.

We write to you to ask for support to purchase basic equipment to ensure that people on the frontline are adequately equipped to deliver the best health care during this time. Your financial support will also be used both in the hospital to purchase oxygen and basic sanitation for infection prevention, and in the community to support public engagement work and public health measures to prevent transmission. This global COVID-19 pandemic is challenging, even in the most developed healthcare systems. We can still protect and save lives in Malawi but it is now a race against time.

With thanks and best wishes,

Professor Stephen Gordon, Director, MLW

Professor Henry Mwandumba, Deputy Director, MLW

Professor David Lalloo, Director, Liverpool School of Tropical Medicine (LSTM)

Professor Bertie Squire, Dean of Clinical Medicine and International Public Health, LSTM

Dr Derek Cocker, MLW

Dr Jennifer Cornick, MLW

Professor Nicholas Feasey, MLW

Dr Bridget Freyne, MLW

Professor Melita Gordon, MLW

Dr Marc Henrion, MLW

Dr Kondwani Jambo, MLW

Dr Rebecca Lester, MLW

Dr David Lissauer, MLW

Dr Eleanor McPherson, MLW

Dr Ben Morton, MLW

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