

EDITORIAL VIEW OF THIS ISSUE

After a short period of decline in the number of cases of COVID-19 globally, escalation re-appears, defining the entrance into the fifth wave of the pandemic. The new variants are the omicron subvariant BA.4 and BA.5. Studies have shown that these variants have changed antigenicity than the previous variant.¹

The good news is that these variants cause less severe disease, albeit highly transmissible. However, the big concern is the antigenicity of the already in use vaccines against them. It has been shown that the vaccine has three folds fewer reactions towards omicron subvariants BA.4 and BA.5.² Iraq enters this wave in June 2022 with a rising level of new cases reported.³

The epidemiology in Iraq has witnessed two other visitors; haemorrhagic fever and cholera. Both are not new in the full sense of this word, but the incidence rate is higher than that reported in previous years, incurring some fatalities. In the first six months of 2022, 212 cases were under consideration, 115 suspected and 97 laboratory-confirmed cases, 27 of them died, 14 in suspected cases and 13 in laboratory-confirmed cases, making the case fatality rate 13 % for the confirmed cases.⁴ The Ministry of Health in Iraq registered 160 cases infected with cholera, with two deaths, one in Kirkuk and the other in Baghdad.⁵

Worldwide, many countries registered an unprecedented viral infection, Monkeypox. It is an Orthopoxvirus genus in the family Poxviridae. It is neither a new virus nor a new disease.⁶ In Africa since 1970, many limited epidemics have been reported with exceptional reports outside Africa; however, since May 2022, many cases have been reported in non-endemic countries. The route of transmission is from animal to human through direct contact with blood, bloody fluid and cutaneous lesions of the infected animals and human to human through direct contact with respiratory sections. The disease is self-limited but has a mortality rate of about 3 %.⁶ Fortunately, Iraq is not involved so far with Monkeypox.

This issue includes an editorial discussing medical education and postgraduate students' training in Iraq (see page 64). The authors addressed many important domains about the training and education of postgraduate medical students in Iraq. We think that building new generations of physicians qualified to face the challenges in the practice of medicine in the near future is not a duty of the Ministry of Higher Education alone but also of the Ministry of Health. The collaborative work of these two parties is vital to building a solid health system capable of providing affordable and high-quality healthcare to the people of Iraq.

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REFERENCES

1. European Centre for Disease Prevention and Control. Epidemiological update: SARS-CoV-2 Omicron sub-lineages BA.4 and BA.5. 13 May 2022. Available from: <https://www.ecdc.europa.eu/en/news-events/epidemiological-update-sars-cov-2-omicron-sub-lineages-ba4-and-ba5>.
2. Hachmann NP, Miller J, Collier AR, Ventura JD, Yu J, Rowe M, Bondzie EA, Powers O, Surve N, Hall K, Barouch DH. Neutralization escape by SARS-CoV-2 Omicron subvariants BA.2.12.1, BA.4, and BA.5. *New England Journal of Medicine*. 2022 Jul 7;387(1):86-8.
3. Department of Field Epidemiology, Public Health Directorate, Ministry of Health in Iraq. Available from: <https://datastudio.google.com/u/0/reporting/c7689cad-8edb-455f-9d8f-56b102322b52/page/F2pRC>. Accessed 20 June 2022.
4. World Health Organization (1 June 2022). Disease Outbreak News; Crimean-Congo Haemorrhagic Fever in Iraq. Available at: <https://www.who.int/emergencies/disease-outbreak-news/item/2022-DON386>. Accessed 20 June 2022.
5. Iraqi News Agency, MoH declares number of cases of Cholera and haemorrhagic fever. Published 3 July 2022, available from <https://www.ina.iq/159991--21-.html>. Accessed 3 July 2022.
6. WHO. Monkeypox. 19 May 2022. Available from: <https://www.who.int/news-room/fact-sheets/detail/monkeypox>. Accessed 20 June 2022.