EDITORIAL

Biased and unwarranted Political view in Lancet Journal

Krupal Joshi¹, Sanjay Singhal², Akshay Dhariwal³, Ashwani Tandon⁴

¹Associate Professor, Department of Community & Family Medicine, All India Institute of Medical Science Rajkot, Gujarat

²Associate Professor, Department of Respiratory Medicine, TS Misra Medical college, Lucknow, Uttar Pradesh ³Former Director NCDC and NVBDCP, Govt. of India, New Delhi

⁴Professor, Department of Pathology, All India Institute of Medical Science Bhopal, Madya Pradesh

CORRESPONDING AUTHOR

Dr. Sanjay Singhal, Associate Professor, Department of Respiratory Medicine, TSM Medical college, Lucknow, Uttar Pradesh

Email: drsanjaysinghal79@yahoo.co.in

CITATION

Joshi K, Singhal S, Dhariwal A, Tandon A. Biased and unwarranted Political view in Lancet Journal. Indian J Comm Health. 2024;36(3):327-328. https://doi.org/10.47203/IJCH.2024.v36i03.001

ARTICLE CYCLE

Received: 29/05/2024; Accepted: 15/06/2024; Published: 30/06/2024

This work is licensed under a Creative Commons Attribution 4.0 International License.

©The Author(s). 2024 Open Access

India is the largest democratic country and currently celebrating the festivity of the election. We observed that the editorial by Lancet published about India's election: Why Data and Transparency Matter (1). After reading the editorial, the most important question came to the mind of Indian readers: Is there any hidden agenda in the editorial team of Lancet Journal? Why did the Lancet choose to deal with the subject of data and transparency at the time of the election in India? Close examination of this editorial's references, particularly the second one, confirmed the hunch of readers that the comprehension is significantly biased as it is based on a media report and the editor has used his position in a scientific journal to interfere in the affairs of a sovereign nation. It is totally unacceptable and undone of scientific temperament. Through this letter, our team is conveying the feelings of the people of the largest democratic and secular country. We would not pick the Lancet as our first source of information on this issue. Secondly, the journal cannot afford to become politicized by allowing only one point of view to be expressed. How will we know the editor hasn't rejected papers simply because their findings disagree with your politics?

We want to mention that the editor used the word "leader of Hindu". It seems that the editor was unaware of the actual meaning of the word "Hindu" quoted by the Supreme Court of India. But, even unknowingly, the editor had done the major task as the meaning of "Hindu" refers to the land and peoples beyond the Indus River. In that sense, the author is right that our Hon'ble Prime Minister Narendra Modi, a leader of the Bhartiya Janta Party truly represents all the Hindus. The past two general elections's results (during the second election, shares of votes were even higher compared to the first one) had put a stamp that Hon'ble Prime Minister Narendra Modi truly represents the majority of India.

Moreover, The editor failed to mention that the Indian Government has implemented and launched the Ayushman Bharat Yojana as part of the national health digital mission, requiring almost every health facility and practitioner to be registered (2). The health data of every patient will be uploaded directly from the service providers without bias. This indicates that India has stepped into the utmost transparent data method to provide the best health services to every person and patient, regardless of caste, religion, or socioeconomic status.

The editor mentioned that the actual cumulative COVID death in India is six to seven times higher than the official reported death of 0.48 million, implying a COVID death rate of ~345 per million population, about oneseventh of the US death rate (3). Even if we believe this estimated data, the COVID situation in India and the USA are alike. But the prevailing conditions of the 1.3 billion population in India and the advanced health infrastructure of the USA, are exactly opposite. This shows the commendable Job of our entrusted Government, fulfilling the trust of the entire nation. Moreover, statistical modeling estimates can be off target, as seen in the USA and other countries like India. But to call it false is a prejudiced opinion of the editor. We contested a similar issue related to malaria-attributed deaths in India published in your journal in 2010 which was a methodological issue (4-5).

The editor also failed to mention the success of the Indian Government in hastening the process of manufacturing the COVID-19 vaccine which was accomplished in record time and at the lowest cost (cost-effective even for developing countries), showing the ability to perform and excel under pressure. Not only manufacturing, but the Government also provided the COVID-19 vaccine free of cost at the doorstep through door-to-door mass vaccination programs, an exemplary performance under pressure, setting a benchmark for other African countries (6). Not only this, the Government donated vaccines to countries in need during the pandemic, a true reflection of a collaboration between science, humanity, and political will, and maintained the legacy of "giving" as of thousands old "Sanskriti of Bharat" and our values enshrined in the concept of Vasudhev Kutumbkam (7). In recent years, the Lancet has lost its prestige, as cheap shots have been published recently, and in the past, not worthy of an editor of one of the most prestigious medical journals in the world (1, 8-9). Press and Editorial members may disagree with the Government's stance, but that disagreement has no place in a medical journal. However, it isn't appropriate to use the influential position to trumpet the

Editor's political biases. Continuing to do so only discredits the journal. Lastly, regarding political views in India about the Government, diametrically opposite views exist, but the readers of scientific journals look for evidence-based views.

Finally, We need to mention this to the responsible editorial/reviewer board of the Lancet Journal to avoid derailing from its prestigious scientific path and focus.

AUTHORS CONTRIBUTION

All authors have contributed equally.

DECLARATION OF GENERATIVE AI AND AI ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

The authors haven't used any generative AI/AI assisted technologies in the writing process.

REFERENCES

- 1. The Lancet. India's elections: why data and transparency matter. Lancet. 2024;403(10435):1419.
- Ayushman Bharat Digital Mission. https://abdm.gov.in Last accessed on 14 April 2024.
- Jha P, Deshmukh Y, Tumbe C, Suraweera W, Bhowmick A, Sharma S, et al. COVID mortality in India: National survey data and health facility deaths. Science. 2022;375(6581):667-671.
- Dhingra N, Jha P, Sharma VP, Cohen AA, Jotkar RM, Rodriguez PS, Bassani DG, Suraweera W, Laxminarayan R, Peto R; Million Death Study Collaborators. Adult and child malaria mortality in India: a nationally representative mortality survey. Lancet. 2010;376(9754):1768-74.
- Shah NK, Dhariwal AC, Sonal GS, Gunasekar A, Dye C, Cibulskis R. Malaria-attributed death rates in India. Lancet. 2011;377(9770):991; author reply 994-5.
- Sethy G, Chisema MN, Sharma L, Singhal S, Joshi K, Nicks PO, Laher B, Mamba KC, Deokar K, Damte T, Phuka J. 'Vaccinate my village' strategy in Malawi: an effort to boost COVID-19 vaccination. Expert Rev Vaccines. 2023;22(1):180-185.
- Sethy G, Chisema M, Sharma L, Joshi K, Singhal S, Omar Nicks P, Macheso S, Damte T, Eleonore Ba A, Mitambo C, Thomas M, Laher B, Phuka J. COVID-19 vaccine express strategy in Malawi: An effort to reach the un-reach. Vaccine. 2022;40(35):5089-5094.
- Koya SF, Kumar S. India's indefinitely delayed census. Lancet. 2023;402(10406):962-963.
- Kumar D, Mittal M. India's COVID-19 emergency: overarching conclusions belie facts. Lancet. 2021;397(10293):2465.