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*The changing society at the time of COVID-19 What Italy
should learn?*****

On 31 December 2019, the WHO reported many cases of an unknown pneumonia in the city of Wuhan, Hubei Province, China.

After a few days a new type of Coronavirus, a virus usually infecting animals (e.g., bats, snakes, etc.) was identified to be the etiologic agent of such pneumonia, named SARS-CoV-2. Rapidly and incredibly the new disease, now called COVID-19, had widespread worldwide causing hundreds of thousands of infections and a great number of deaths.

Due to the international widespread of the infection and of the related increase of sanitary expenses, as well as of the governments' decisions to

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prevent further cases, any nation begun to face new social assets. In his period a certain number of papers focused on the usually underestimated socio-economic aspects of COVID-19 has been published (1, 2).

Currently, people with COVID-19 are dramatically increasing in Italy and, to date, it is a severe public health emergency.

The whole Italian health system, with local and national authorities are strongly working to face the dramatic consequences of COVID-19 outbreak and mainly to fix specific issues about Emergency Department overcrowding, bed resources and available healthcare professionals. Recent literature, statistical data and disease's rates of morbidity and mortality suggest that they will grow.

Correct and updated epidemiological data are needed to guide situational awareness and intervention strategies worldwide.

Current issues are the availability of adequate and effective personal protective equipment (PPE), not only for health workers but for all people at risk of contagion, to minimize the risk of further contagions and deaths, to understand even more clearly how this new condition can be contrasted by healthcare and drugs and, desirable, by an effective vaccine.

But this is not only a health issue, because it also has gave rise to a lot of socio-economic effects that are modifying our lifestyles and policy, with long term consequences, and we agree that at the end of this period the whole world will be different (3).

After a short from the arise of the current COVID-19 pandemics our lifestyles are changing worldwide, also with some positive effects. For

example, the atmospheric pollutions are widely decreased as a lockdown consequence, wild animals are regaining their natural spaces, dietary habits are ameliorated, etc.

China and Italy, that have been the first countries with the earlier and most large number of patients, have taught to the others what to do and not do to face COVID-19 pandemics, and unexpected international collaborations arose overcoming past and actual contrasts.

On the other hand, this crisis unmasked a lot of problems, but we can consider this episode as a rehearsal for future social and health crises, it will be mandatory rethink deeply the social and health funding, and their basic policies (4).

The Italian case may be paradigmatic of this opportunity. In fact, in order to respect the need to control public spending and to meet EU directives, during the last decade we lost a large amount of health funding, hospitals and health professionals.

At this time this led to a reduction in the number of hospital beds, intensive cure units, clinical laboratories, and healthcare professionals, with the reported dramatic effects on the current possibility to cure patients in the central and northern regions (4), and the risk of being able to warrant effective cures only to a few people in southern regions.

The amount of the lost financing has been calculated approximately in 37 billion of euro, due to the lack of inflation adjustment and assigned fewer resources allocated to the Italian National Health System (formerly Servizio Sanitario Nazionale, SSN) compared to planned levels.

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Antique texts report how the social structure and the whole lifestyle of people evolve and must change after a severe crisis, usually related to infectious diseases (i.e., plague epidemics, “Spanish” flu pandemics, AIDS, etc.), to create new health models and to implement health-related policies⁵.

School system, national and international economy, and personal relationships are currently evolving and changing, and any government must consider these in the next future (5).

Hopefully, the large economic interventions adopted to support the SSN to face the COVID-19 crisis should become largely ordinary at the end of the emergency period to be able to tackle with serenity and appropriate tools a possible new, future situation of health crisis.

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