

## EDITORIAL

# The Ups and Downs of COVID-19 Epidemics for Orthopedic Community

Behnam Panjavi, MD<sup>1</sup>; Reza Shahryar Kamrani, MD<sup>1</sup>; Bahareh Ghane, MD<sup>1</sup>

1 Tehran University of Medical Sciences, Tehran, Iran

**W**e started 2020 while facing the largest pandemic of infectious diseases in the last one hundred years and also the most widespread recession in human life. The relatively small size COVID-19 virus has now placed more than half of the world in lockdown and is passing through countries borderless without discrimination. Although our health is primarily at risk due to the disease itself, we cannot ignore subsequent damages of the disease and especially its economic damages.

The Orthopedic Society, as a member of the health care family, is at the frontline of the defense against these damages. This makes us, as a conscious commander, to first examine the current situation and then find appropriate ways to deal with it. Physicians in the orthopedic community, as a referral social group, are working in various aspects to deal with this unpleasant situation although these efforts may need to be redoubled or more purposive.

### Research aspects

Although this disease is primarily an infectious disease and secondarily related to internal medicine and pulmonologists, it can affect orthopedic patients and their treatment. Early algorithms for the treatment of orthopedic patients have already been developed in some countries (1, 2). Furthermore, in Iran, its protocol has been provided (3). Although this guideline will need to be reevaluated and updated, it should remain a foundation for the orthopedic community facing this new situation. Research does not end here, and the effects of this pandemic on the treatment of orthopedic

conditions and the consequences of delaying in elective orthopedic surgeries must be determined (4). This issue requires close communication between orthopedic researchers and our colleagues in other fields, especially internal medicine, epidemiologists, social science, and humanities. Furthermore, it requires gathering an accurate data concerning the current situation.

### Educational aspects

In this pandemic, the orthopedic community should realize and advance its educational goals in several aspects. The first is community education. What we present as a leading group advances the general population literacy. Proper approaches in visiting patients, personal hygiene, and environment hygiene can all help promote the community education in dealing with the current situation. The second aspect of education in the current situation is educating orthopedic students and residents. The current situation has created a unique opportunity to accommodate an improved virtual learning experiences. Providing virtual educational content, presenting physicians' morning reports, journal clubs, and conferences online can be expanded during the current situation. Not only can this solve some of the educational problems right now, but it has two other benefits. One benefit is gathering a good educational resource that can be used for a long time specially for undergraduate students. Second benefit is that we enhance this skill in this very diverse teaching method.

### Treatment aspects

We still do not know how long we will be dealing with

**Corresponding Author:** Reza Shahryar Kamrani, Tehran University of Medical Sciences, Tehran, Iran  
Email: rz\_kamrani@yahoo.com



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this particular situation. Although the status of urgency and emergency cases in orthopedic patients is less ambiguous, the treatment of elective patients is still unclear. Institutional, regional, and national treatment protocols are being developed and completed through research; however personal initiatives can also be helpful. Telemedicine visits, virtual consultations and post-operative follow-up visits via video chat are examples that have been initiated. Patient confidentiality along with respecting patients' and physician's rights both financially and the right to receive the best treatment should be considered. These factors along with possible complications involving forensic medicine are among the issues that need to be further discussed and evaluated in terms of medical ethics.

#### **Social aspects**

Once again This pandemic highlighted the authority

of the medical community as a leading social group. But in return for this honor, we have a greater responsibility as physicians to keep this trust. It is the obligation of the orthopedic community to care for low-income patients, to prioritize the rights of patients, to refrain from unnecessary criticism of politicians, to be polite and patient to immoral and disturbing people, and finally to help political and social leaders bring the society out of this social stagnation. As physicians, regardless of any belief we have and regardless of any color or language, we must strive to improve our moral standing.

#### **The future**

The future is created by us. If we recognize our responsibilities today and act realistically, we can create a brighter future.

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