Letter to the Editor



Letter to the Editor re: "Effects of the COVID-19 Pandemic on Turkish Ophthalmologists."

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Dear Editor,

This letter is in regard to the article "Effects of the COVID-19 Pandemic on Turkish Ophthalmologists." authored by I.K. and M.M., which was published in volume 51, issue 2, 2021 of the *Turkish Journal of Ophthalmology*.¹

We read this article with great interest and thank the authors for providing an excellent demonstration of how the COVID-19 pandemic has caused both a decrease in the number of patient examinations by prioritizing only the most urgent care, as well as raised anxiety among ophthalmologists in Turkey. The authors summarize and emphasize how the proximity of these professionals to patients heightens the possibility for viral contraction and how crucial proper personal protection and clear guidelines are important for all involved to prevent contagion and provide care when needed.

Understanding the distinguishing particulars causing this anxiety can help policy makers address issues specifically and appropriately and thereby rehabilitate the health care system. We similarly held a three-part survey, collecting data from eye care practitioners (ECPs) during the first wave (and coinciding with a national lockdown, though ECPs were considered essential workers), during the lull, and again during the second wave of the pandemic (pre-published, ahead of print). Even at the third stage, in July 2020, when transmission and infection modalities

were better understood, a third of ECPs still refrained from providing full service, citing high levels of anxiety due to fear of contracting the virus through ocular tissue as well as, similar to the article presented here, a fear of passing the disease on to their families. Interestingly, the more novice ECPs were less reluctant and anxious than the more senior and experienced responders. As with this study, 99% of all ECPs also wore face masks throughout the survey timeframe. What was further instructive was to observe the progression of protective gear use as knowledge of transmission advanced between the stages of the pandemic and survey. For example, temperature measurement declined as it became understood that asymptomatic coronavirus disaese-2019 (COVID-19) positive patients are contagious and therefore an elevated temperature was not enough to identify and prevent disease spread. Glove usage decreased as well, with the understanding that disease transmission can be effectively prevented by thorough hand-washing (which remained high throughout all stages, at over 99%). It was sobering to note that at the end of the survey, at the second wave, still a third of the responding ECPs refrained from providing full care. It seemed that even though possible contraction of this coronavirus via ocular tissue when properly protected remains extremely low, ECPs were not sufficiently informed or receptive to that, and anxiety and subsequent substandard quality and quantity of care

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persisted. Although the COVID-19 pandemic has spectacularly accelerated and advanced fields such as telemedicine and brought about effective on-line consultation in ophthalmic imaging and even operations, face-to-face consultations are still often the preferred alternative.²

These results further support a multicenter survey conducted in Turkey in April 2020 which focused on the quality of care as well as the anxiety level of providers. The data showed that many ECPs felt the quality of their examination decreased (32.2%) as well as the quality of their intervention (38%). Telemedicine was not a prevalent alternative (62% did not use) but it is unclear if that was by choice or lack of availability. A poignant question asking "Have you missed a diagnosis during the pandemic?" was answered in the affirmative by 14.9% of responders. The authors proposed that health management organisations proactively provide mental health support, after learning 36.4% of the survey responders suffered from some level of anxiety caused by the pandemic.³

To conclude, the COVID-19 pandemic has disrupted all medical services across the world including ophthalmic services. In many countries, ECPs have had to independently self-educate regarding this pandemic. Seeing the results of all these studies magnifies the global significance and need for government and health care institutions' guidance, such as was provided by the Turkish Ophthalmological Association as early as April 2020, but even more so, highlights the importance of continuously updated information, such as provided by the British National

Health Service and British Contact Lens Association.⁵ Active education of even the more experienced ECPs on how to protect themselves and their patients is paramount in order to safely rehabilitate the system as quickly as possible to pre-pandemic status.

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