



Surgery During Covid-19 Crisis

Isabelle Gomez*

Journal Managing Editor, Surgery: Current Research, Barcelona, Spain

COMMENTARY

The biggest hit on 21 century though the Covid-19 (Coronavirus disease 2019), left many commodities, business, welfare organizations to halt their normal functioning. One such is seen in the field of surgeries, where many operational theatres, Personal Protective Equipment (PPE), ventilators, and Intensive Care Unit (ICU) beds, are used for treating patients affected by SARS Cov-2. Hence only few surgeries are administered.

At the peak of Covid cases, many of the operating rooms was turned into Intensive Care Units (ICU), leaving only few Operation Room (ORs) to perform essential surgeries like, trauma, symptomatic, expanding aneurysm. The Society of Surgical Oncology (SSO) have asked chairman and vice chairman's to provide recommendations, during this pandemic period, keeping in mind about the delay of surgeries.

The recommendations are:

- Treatment has to be made on the decision of case by case basis
- Considering the knowledge of surgeon and understanding its biology (cancer)
- Considering the alternative options for treatment
- Following Covid-19 policies

Because of the COVID-19 outbreak, there is also tremendous laden on work force and finances, on most of the health care systems across the globe. So many guidelines to handle this frame work were put forth in these difficult times. Such guidelines varies from department to department, for example, spine surgery in, related to cervical or thoracic, acute spine trauma, oncology are forwarded in hospital with surgical intervention and acute or sub-acute lumbar disk problems with specific time period are forwarded at surgical centers or proceed at hospital only when low Covid-19 graph is registered. These guidelines were given by Rothman Institute in the time of Covid-19 crisis for spine surgery.

There was triage kind of system developed, where clinical urgency was taken into consideration and the degree of urgency is decided by the time a surgery could be delayed, without any harm to patient. If surgery need to be completed in 24 hrs-Emergency

If surgery need to be completed in (1-2) days-Urgent

If surgery need to be completed in (3-7) days-Semi-urgent This system is developed for Columbia University Medical Centre, New York.

Centers for Medicare and Medicare Services (CMS), have given some recommendation to doctors and medical administration, whether to perform a surgery or postpone it. It has also announced that all surgical procedures, non-essential medical procedures, elective surgeries and dental practices needed to be postponed. Some of the other important reason to stop the non-urgent surgeries is due to thoughts to conserve the resource and Personal Protection Equipment (PPE). Hospital administration, like leaders, surgeons are involved in bringing out the best recommendations and also implementing them, these leaders established teams to get the real-time information and also to get recommendation from the locals, however the obtain recommendation from the local are considered keeping in mind about national priorities.

Thus, surgeries during Covid are tackled, allowing some, restraining others for the wellbeing of society, this kind of approaches need to be increased in higher levels at any given time or situation to face.

Correspondence to: Isabelle Gomez, Journal Managing Editor, Surgery: Current Research, Barcelona, Spain, E-mail: surggenopen@peerjournal.org

Received: June 14, 2021; Accepted: June 15, 2021; Published: June 19, 2021

Citation: Gomez I (2021) Surgery During Covid-19 Crisis. Surgery Curr Res. 11:117

Copyright: ©2021 Gomez I. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.