

INDIAN ASSOCIATION OF DERMATOLOGISTS, VENEREOLOGISTS & LEPROLOGISTS - 2020

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IADVL POSITION STATEMENT ON CURRENT COVID 19 VIRUS PANDEMIC

Background

- Covid 19 (Corona Virus disease 2019) causes a flu like respiratory illness
- It spreads through droplets, fomites and rarely is food borne.
- The symptoms include: fever, myalgia, malaise, throat pain, cough, with or without expectoration, chest pain, dyspnea, respiratory failure, septicemia, multi organ failure and occasionally death.
- Population at high risk of severe disease includes elderly individuals and those who are immunosuppressed including iatrogenic immunosuppression due to steroids, biologics, etc.
- The definitive diagnosis is by a real time PCR assay on sputum or throat swabs.
- Currently there is no vaccine or specific pharmaceutical agent for cure of this disease in sight. There are several trials registered with clinicaltrials.gov and other registering agencies. Many of these are yet to take off, majority are from the Hubei province, China where the number of cases has drastically come down. This means these trials may not have enough number of patients to have meaningful results.
- The World Health Organization (WHO) on 12.3.2020 has declared coronavirus (COVID-19) as a pandemic affecting countries across all continents, except the Antarctica.
- It remains unknown to what extent the Covid 19 impacts skin diseases or how the treatment of skin diseases should be modified.

Prevention

- Non-pharmaceutical interventions can diminish the burden of Covid 19 pandemic.
- Non-pharmaceutical interventions included voluntary home isolation of ill persons, respiratory etiquette and hand hygiene. These are detailed below.
- Taking such simple measures can reduce the burden of the pandemic to such an extent that our health care system can cope.

Objective

This document is aimed at how best to prevent transmission of the COVID-19 at our clinics in particular and in the society at large.

**Strategies to combat Covid-19 in our dermatology practice:
General measures to be instituted in the clinic**

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1. To alert the dermatology patients about potentially harmful effects of the virus and how best to prevent transmission of the virus. These includes measures widely circulated in mass media and social media by government agencies.
2. Social distancing in waiting areas in OPD as practically possible.
3. Encourage sneeze etiquette. Provide tissues and no touch disposable receptacles. Make available alcohol-based hand sanitizers (alcohol content > 60%)/ facility for hand washing with soap and water in the waiting area where the patient (and also attendant, if allowed in the premises) first cleans hands with such sanitizer. The front-desk/ reception staff can guide and also encourage patients to do so.
4. TV monitors in the waiting area, if available, can be used for spreading awareness about the disease and the preventive measures.
5. Magazines, books and toys to be removed.
6. Regular cleaning of floor of the premises, surfaces that are frequently touched like door knobs/ handles and equipment should be done.

General measures to be instituted for patient care

1. Clinics can institute a phone/whatsapp triage. First visit pre-booked patients can be contacted via whatsapp or telephone on or a day prior to their appointment for symptoms of flu and visit to the dermatology clinic deferred- can be referred to the Flu/ Medical clinic.
2. All non-essential visits by patients for follow-up to be curtailed, going forward. Traveling in public transport and spending time in the waiting area puts them at an increased risk of contracting/ transmission of infection.
3. Monitoring visits for patients on treatment with laboratory investigation may be considered to be done on telephone/ whatsapp. This has to be done after discussing with patient and documented. Please be advised that tele-consultation is not legal.
4. The treatment plan for next 2-3 months can be discussed. If everything goes according to the script, the patients may come back for follow up when the pandemic is controlled. If there are issues, the patients may come back with an appointment. If essential, consider appointment in such a way that the time in the waiting area is minimized.
5. Avoid all non-essential / elective surgeries/ procedures, if possible.
6. May consider not allowing any attendant/ accompanying person with the patient, unless patient is sick, pediatric/ elderly patient, patients with disabilities or situations where presence of an accompanying person is essential.
7. Avoid or defer putting patients diagnosed to have COVID-19 infection on immunosuppressants. In patients without known coronavirus infection, weigh the benefits and risks, and try to avoid initiation of immunosuppressants, unless essential. Elderly individuals and/or those with cardiovascular comorbidities, diabetes, chronic lung disease, chronic kidney diseases and cancer may have a higher risk of having a more severe course of disease.

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8. Instruct patients already on immunosuppressants including steroids, chemotherapeutic drugs and biologics on effective preventive strategies. International Psoriasis Council recommends discontinuation of biologics who are infected with Coronavirus. Similar measures may be considered for other immunosuppressants in other diseases. Consider effect of sudden withdrawal on the primary disease, and also on patient, e.g. sudden withdrawal of long term corticosteroid and adrenal insufficiency.

General Measures for self

1. Keep yourself updated about ever-changing scenario and guidelines pertaining to COVID-19 from reliable sites like that of ministry of health and family welfare (Government of India), ICMR, WHO, CDC, etc.
2. All non-essential travels, within the country and even within the town/city of residence may be curtailed.
3. Try to avoid all non-essential gatherings including CMEs, meeting and conferences. Gathering in seminar rooms for teaching also may not be absolutely safe. The teaching departments may consider web-based interactions for teaching purpose.

For an easy reckoner, the CDC guidelines for cleaning and disinfection for COVID include

Hand hygiene

- If hand is visibly soiled, wash with soap and water for 20s using the WHO technique of hand washing. Otherwise wash with an alcohol-based sanitiser containing at least 60% alcohol.
- Avoid touching eyes, nose, mouth with unwashed hands.

Additionally, clean hands after

- coughing, sneezing
- using restroom
- contact with pets

before:

- eating
- providing care to patient

Cleaning surfaces

- Wear disposable gloves. If reusable gloves are being used, they shouldn't be used for any other purpose.
- Firstly, soiled surface needs to be cleaned with soap and water.

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- For disinfection diluted household bleach and alcohol solutions with at-least 70% alcohol can be used. Bleach can be diluted by mixing 5 tablespoons bleach per 3.78 litre of water.

Personal protective equipment

- Masks aren't recommended for the healthy. Even special groups including children and pregnant women aren't required to wear masks. Face masks are however recommended for patients or suspects in public until they are isolated. Although the best recommended measure is to maintain at least 6 feet distance and avoid overcrowding.
- N95 respirators are only recommended for health care personnel working in close contact with suspected or confirmed cases. They aren't required to be worn in the community.
- Non-sterile disposable patient isolation gowns used for routine patient care are recommended for suspects and confirmed cases. For healthcare workers with medium to high risk of contamination with body fluids isolation gowns can be used. And for those with lower exposure risk surgical gowns can be used. Those with minimal risk of body fluid exposure minimal barrier protection is recommended.
- Considering the profile of patients that we cater to in our routine dermatology practice, N95 respirators or isolation gowns are not routinely required, except for specific situations mentioned above.
- Non-sterile disposable gloves are recommended. Extended length gloves aren't required.

While we take care of our patients and protect ourselves, our family members or employees in our workplace may fall sick. The following is the CDC recommendation for homes and employers during COVID-19

CDC guidelines for homes during COVID

Household plan of action

- Consider high risk groups such as older adults, those with chronic illness
- Prepare a room and bathroom to isolate an affected member
- Have access to several weeks of medications and supplies if at high risk

Everyday measures

- Wash hands
- Avoid contact with eyes, mouth, face
- Regular cleaning and disinfection of frequently touched objects (tables, countertops, light switches, door knobs)
- Stay home when sick

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- Avoid contact with those who are sick
- Avoid public gatherings

Recovering at home

- Use separate room
- Wash hand with soap and water or sanitizer with at-least 60 % alcohol
- Use clean disposable face masks
- Clean room and bathroom as needed (**reduce frequency to as needed**)
- Avoid sharing personal items

CDC guidelines for employers

Regarding employees

- Encourage sick employees to stay home and return only when free of fever or any symptoms for 24 hours. Ensure sick leave policy is flexible and not requiring the letter from a health care provider. Allow employees to stay home and take care of sick family members.

Conclusion

- There is no reason to panic. These are general guidance to protect your patients, yourself, your family and staff. As with every previous pandemic, this one will also pass.

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