



# Orthopaedics in Times of COVID 19

Vaibhav Bagaria<sup>1</sup> · Dipit Sahu<sup>1</sup>

Received: 9 April 2020 / Accepted: 15 April 2020 / Published online: 27 April 2020  
© Indian Orthopaedics Association 2020

## Introduction

The coronavirus (COVID 19) outbreak was first reported in Wuhan City of China in the month of December 2019 [1]. WHO declared it as a global pandemic on 11 March 2020 [2]. As of 6 April 2020, 1,276,587 people around the world had tested positive for coronavirus disease 2019 (COVID 19).

In response to the COVID 19 outbreak reported from all across the globe, Government of India declared a nationwide lockdown on 23rd march for a period of 3 weeks.

## Orthopaedic Preparedness and Response

Orthopaedic surgeons are not the frontline workers against the COVID 19 outbreak. However, the services of the orthopaedic surgeon may be needed if the outbreak overwhelms the resources and the manpower. Although there is a continuous debate on hydroxychloroquine use, given the circumstances and unavailability of any treatment in near future, administration of chloroquine is being recommended for at-risk healthcare providers [3].

## OPD Clinics and Telemedicine

Regular active OPD has been closed in most parts of the country following the lockdown. Only the urgent follow-ups and patients with acute pain are being seen. Many hospitals like ours were only admitting patients through triage in the emergency room. Telemedicine emerged as a viable option for taking care of regular visits and non-emergency care.

## Orthopaedic Surgery and Procedures

Since the aerosol generating procedures like intubation pose grave risk to the anaesthesiologist and use of drill and saw increase the risk to the surgeon, only the urgent procedures are undertaken with the understanding that the patient may be infected, and the surgeons have to take full precautions for personal protection [2].

## Learning, Teaching, Research and Innovation

Residents and assistants have been rostered so as to station only two residents for active duty and rest are given the day off. Education and research collaboration have increased due to zoom video-conferencing technology. As both the teachers and learners find ample time to engage in these activities, on a given day, there are several simultaneous activities. Perhaps, amongst all the surrounding negativity, this is the best positive effect of the pandemic. Many of us have taken up the challenge of innovating and using our skills in 3D printing, mechanical engineering, and artificial intelligence to devise novel solutions in times of crisis.

## Summary

As the epidemiologists look at the curve of disease progression to decide upon whether the lockdown will be extended, we continue to face new challenges in this rapidly evolving situation. With adversity also comes an opportunity; this may be time to get ourselves involved in research and academics, to learn a new skill and immerse ourselves in service of community.

And once the storm is over, you won't remember how you made it through, how you managed to survive. You won't even be sure, whether the storm is really over. But one thing is certain. When you come out of

✉ Dipit Sahu  
dip.it@me.com

<sup>1</sup> Department of Orthopaedics, Sir H.N. Reliance Foundation Hospital, SVP road, Mumbai, India

the storm, you won't be the same person who walked in. That's what this storm's all about.

Haruki Murakami

### Compliance with Ethical Standards

**Conflict of interest** The authors declare that they have no conflict of interest.

**Ethical standard statement** This article does not contain any studies with human or animal subjects performed by the any of the authors.

**Informed consent** For this type of study informed consent is not required.

### References

1. Azman, A. S., & Luquero, F. J. (2020). Comment From China: Hope and lessons for COVID-19 control. *The Lancet Infectious Diseases*, 2019(20), 2019–2020. [https://doi.org/10.1016/S1473-3099\(20\)30264-4](https://doi.org/10.1016/S1473-3099(20)30264-4).
2. Evidence, C., & Strategies, E. (2020). TI novel coronavirus COVID-19. *Journal of Bone and Joint Surgery. American volume*. <https://doi.org/10.2106/JBJS.20.00396>.
3. Wong, Y. K., Yang, J., & He, Y. (2020). Correspondence caution and clarity required in the use of chloroquine for. *Lancet Rheumatology*, 9913(20), 30093. [https://doi.org/10.1016/S2665-9913\(20\)30093-X](https://doi.org/10.1016/S2665-9913(20)30093-X).

**Publisher's Note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.