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## Letter to the Editor

## Re: 'Non-COVID-19 visits to emergency departments during the pandemic: the impact of fear'



The COVID-19 pandemic, caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), is an incredible stress test for emergency departments (EDs) worldwide. Not only should EDs be prepared for increasing COVID-19-related patient volumes, they should also preserve sufficient capacity for the 'usual' emergencies. Similar to the experiences in our own centers, Mantica et al.<sup>1</sup> observed a steep decline of non-COVID-19 ED visits in two northern Italian hospitals. When the daily COVID-19 mortality rates in Italy peaked, the number of ED visits reached its lowest point. The authors focus on the fear by patients to contract the virus in hospitals, which may have resulted in reduced ED utilization for low urgent complaints and a tendency to postpone specialist consultation. Although we agree that the impact of fear on hospital resource utilization during this pandemic is an important concern, we would like to provide some additional insights.

A few reports exist about reduced ED utilization during the first weeks of the pandemic.<sup>2–4</sup> Although fear may have its share and many patients with low urgent complaints likely postponed physician consultation, the (indirect) effects of lockdowns, social distancing, and improved personal hygiene should not be overlooked. First, lockdown was associated with a reduction of workplace and traffic accidents in France and Spain.<sup>2,3</sup> Second, schools are well-known vectors of infectious disease transmission, which makes it likely that school closures have reduced the burden of 'regular', non-COVID-19, infections.<sup>5</sup> Improved hand hygiene in the community may have had similar effects. Third, hospitals canceled elective surgeries, likely causing reduced ED visits for postoperative complications. Finally, a decrease in physical efforts by patients and improved air quality may be associated with reduced access for cardiovascular emergencies.<sup>2,6</sup>

Nevertheless, fear likely contributed to reduced ED utilization,<sup>7,8</sup> and it has indeed been reported that patients delayed seeking emergency care because of COVID-19 fear.<sup>4,9</sup> Therefore, it is vital that the public is properly informed about the safe hospital environment and the low risk to contract SARS-CoV-2. However, one should keep in mind that there is more than fear that keeps the patients away.

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