

EDITOR'S PERSPECTIVE

Science in the Time of Coronavirus

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As we work and adapt to life during a pandemic, I cannot help but think that many of the new habits we develop and changes we make to survive this time may well be improvements on old ways of doing things, forced upon us by these extraordinary times. Change is always difficult for people, but not infrequently results in improvements, tough as change is to accept initially.

The world—particularly the academic world—has rapidly become familiar with Zoom. At *Circulation: Heart Failure*, we have conducted our editor's meetings by Zoom for more than 2 years. The platform is remarkable—I have watched editors who have never met in person build relationships and then greet one another at a first in-person meeting like old friends. Who would have thought this possible with a virtual platform? At the University of Arizona, we are working to develop methods to ensure we actively engage learners on virtual platforms—combining technologies like Zoom with Slack or Microsoft groups to allow small group work and discussion at a distance. This ensures a higher level of engagement by participants not assembled spatially and has met with much positive feedback from our learners, who are also taking responsibility to actively engage to maximize their learning in these new times. What has struck me, watching this unfold, is that as we discover tools to actively engage learners in distance learning, we are likely discovering things that will improve our curricula when we come back together. We may finally move beyond a formal, didactic, and passive curriculum and discover technology that fosters more active learning, entirely by being forced to teach from a distance during this pandemic.

Similarly, at *Circulation: Heart Failure*, exciting and challenging advances in heart failure science are submitted to us daily. It is impossible, however, in the present environment, not to dwell on how heart failure will be altered by COVID-19 and its effects on our world and our patients. The news from Wuhan suggests that heart failure is present in as many as 1/3 of patients hospitalized with

COVID-19 infection and occurs in more than half who die of COVID-19. The American Heart Association journals encourage submission of manuscripts on cardiovascular implications of COVID-19, and we at *Circulation: Heart Failure* are particularly interested in submissions related to heart failure and myocarditis complications from the infection, as well as optimizing care of transplant patients during this pandemic. We are all doing our utmost to expedite these submissions, understanding that rapid dissemination is critical to weathering our time with as little morbidity and mortality as possible in our highly vulnerable patients. COVID-19 related submissions can be uploaded through our regular portal, with note made of the pandemic association to access our expedited pathways.

At *Circulation: Heart Failure*, we are also proud to have content beyond original articles and review articles of relevance to our community, perhaps more so in uncertain times like this. Such content includes our On My Mind feature, as well as our Images and Case Reports and Under Pressure features, which provide visual and case-based learning. The emotions and stresses of this time might lead to inspiration in the community for On My Mind submissions, and forced quarantine time provides moments for contemplation and writing. This month's piece from Dr Elizabeth Juneman was written from home while ruling out for COVID.¹ I encourage those of you on the front lines inclined to put pen to paper in the interest of working through these experiences to think of *Circulation: Heart Failure* as a forum.

As always, we remain active on Twitter (<http://twitter.com/CircHF>) and look forward to engaging you in rapid cycle discussion of experiences in the heart failure and transplant cardiology trenches, as well as ongoing discussion of the best science in the heart failure, mechanical circulatory support, and transplant space. We at *Circulation: Heart Failure* hope you are all masked and safe, and finding joy and wonder in the small details of lives lived

The opinions expressed in this article are not necessarily those of the American Heart Association.

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in uncertain times. We hope you will find our community sustaining, as it is for all of us in the editor ranks.

ARTICLE INFORMATION

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Disclosures

None.

REFERENCE

1. Juneman E. Leading the compassionate charge. *Circ Heart Fail.* 2020;13:e007085. doi: 10.1161/CIRCHEARTFAILURE.120.007085