

Editorial: Stay safe during this coronavirus crisis

Wherever we look, the world has turned its attention to the coronavirus (COVID-19) crisis that causing havoc, anxiety and panic. Stock markets around the world have drastically, and it is likely that the world economy will take a long time to recover. The excellent online Johns Hopkins Coronavirus Resource Center provides up to date information detailing confirmed COVID-19 cases by country,¹ and a recently published article provides a good overview for dental professionals.²

At the time of writing (24 March 2020), over 387 000 cases have been confirmed with 17 000 deaths. Some members of the public and even healthcare professionals are behaving as if they are immune from getting COVID-19 infection. Not only is the physical risk to our health, but we should not forget the underestimated psychological implications that self-isolation, schools and businesses closed, stress and anxiety at work and at home can have on our personal wellbeing.³ Staff support and even counselling may be needed during an outbreak like this.⁴ Furthermore, effective leadership from governments through to clinical teams is also important.

Please remember that while working under more stressful circumstances than usual, tensions can rapidly escalate and result in shouting at other members of the team, bullying or even frank outbursts of anger. One moment such as this can lead to loss of respect, breakdown in team working as well as potentially compromising patient safety.⁵ If a stressful situation begins to escalate, the act of stopping and walking away (if this is safe to do so), followed by an apology if needed, can usually reduce the likelihood of conflict with others.

1 | GUIDELINES ON COVID-19

There are many recent government and specialty association guidelines published about COVID-19. Maintaining safe distance between colleagues, not examining the mouth or oropharynx without full personal protection equipment (PPE) which includes a full facial visor, an approved face mask, apron and gloves are clearly important, as is regular handwashing for at least 20 seconds. Nasendoscopy is not recommended at the current time unless absolutely necessary. Similarly, aerosol-inducing treatments including the use of dental burs can significantly raise the risk of COVID-19 infection. Two useful links about COVID-19, published by UK Specialty Associations, are available.^{6,7} These provide clear

information for colleagues who manage oral cancer and work in and around the oral cavity. Our UK specialty associations advise that examination of the oral cavity is regarded as high risk and fully protective measures should be used.

Even when not at work, we should be extra careful. Coronavirus can live for up to 72 hours on some surfaces such as stainless steel and some plastics, and therefore, we are at risk from petrol pumps, ATM machines and supermarket trolleys to name just a few potential sources of transmission.

2 | RESEARCH ACTIVITY

With many colleagues around the world working from home, this crisis might provide some with the time and opportunity to complete an overdue research manuscript. At JOPM, all manuscript handling is done electronically. The editorial office and team and our many reviewers remain available to process papers in a timely manner.

As always but particularly during this difficult time, I am immensely grateful to the whole editorial team and office staff. We welcome Ricardo Coletta as a new Associate Editor to help with the ever-increasing submissions.

Whatever you are doing, please keep well and stay safe.

CONFLICT OF INTEREST

None.

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