


# Comments on: Patterns of acute surgical inflammatory processes presentation of in the COVID-19 outbreak (PIACO Study): surgery may be the best treatment option

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Dear Editor

We have carefully read the interesting study by Guadalajara *et al.* (PIACO Study)<sup>1</sup> referring to acute surgical inflammatory processes recorded during the first weeks of confinement in Spain owing to the COVID-19 pandemic. First, we congratulate the authors for the collective work developed.

The reduction in the number of emergency patients (36.6 per cent) is consistent with the studies published to date. However, it is interesting that the reduction in the number of cases and the delay in seeking healthcare is not reflected in a significant increase in the percentage of severe cases (variation –11.3 per cent) or in the percentage of severe complications (7.1 versus 5.5 per cent;  $P=0.225$ ).

We are surprised that the numbers of serious complications and deaths in the COVID-19-positive subgroup are not intrinsically higher than in the COVID-19-negative subgroup (or the 2019 cohort), contrary to findings described by other groups.

With a relatively small number of COVID-19-positive patients (37) and a short observation period (49 days), and considering the notable heterogeneity of cases and de-escalation phases in Spain, it could be daring to recommend the same surgical approach (surgery over conservative management) as in the prepandemic period. We consider it essential to combine information from other surgical teams (currently in the compilation phase) before agreeing on recommendations regarding the management of surgical digestive pathologies.

Received: August 28, 2020. Accepted: September 7, 2020

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Our group is concluding a collaborative observational study (COVID-CIR; NCT04479150) on urgent digestive pathology operated during the 4 months of maximum impact—health and social—of the pandemic in Spain (March–June 2020). Our objective is to verify whether the patients (COVID-19-positive or -negative) operated during this period developed a greater number of complications and were more likely to die, to establish the validity of classical prognostic scores in this context and, if possible, to develop a specific postoperative risk propensity model for patients infected with SARS-CoV-2.

*Disclosure.* The authors declare no conflict of interest.

## Reference

1. Guadalajara H, Muñoz de Nova JL, Fernandez Gonzalez S, Yiasemidou M, Recarte Rico M, Juez LD *et al.* Patterns of acute surgical inflammatory processes presentation of in the COVID-19 outbreak (PIACO Study): surgery may be the best treatment option. *Br J Surg* 2020;**107**:e494–e495