

### Waves of COVID-19 on the sands of time: Impact on Indian ophthalmology

Dear Editor,

As we write this letter, the second wave of COVID-19 is surging relentlessly through the length and breadth of our country. The officially recorded counts have far exceeded 3 lakh cases per day and is rapidly marching upwards with close to 4000 deaths a day. These numbers are gross underestimates, and that the true picture of the devastation is much more horrifying.<sup>[1]</sup> As we grapple daily to come to terms with this health crisis of catastrophic proportions, we would like to take a moment to reflect on the short-term and long-term implications on the Ophthalmology practice in India.

#### Short-term impact

The waxing and waning of patient volumes determined by the restrictions imposed by the fluctuating numbers of COVID-19 cases will greatly distress the fiscal health of ophthalmology practices both big and small in our country. We must prepare ourselves to face this challenge and protect those employed under our care by saving for many a rainy day. The silver lining in this gloom has been the development of vaccines to combat the deadly variants of the COVID-19 virus with the combined efforts of human ingenuity and perseverance. All ophthalmologists and allied eyecare professionals must actively vaccinate themselves if not yet done already to help protect against infection or to decrease the intensity of the illness.<sup>[2]</sup> We must lobby with the government to continue to provide booster doses against the evolving COVID-19 variants at no cost for healthcare workers and allied personnel. The webinar tsunami precipitated by the lockdown phase of the last year has led to webinar fatigue among the ophthalmology fraternity.<sup>[3]</sup> As online webinars are currently the primary mode of dissemination of knowledge, we need to be cautious of information overload or run the risk of drowning the message in the cacophony of voices. As a part of the scientific and clinician community, we need to be sensitive and set an example by resisting the temptation to organize large academic gatherings in the foreseeable future. We need to adopt electronic medical records to ensure that we have access to patient information to address patient concerns using Teleophthalmology in the event of either of them not being able to travel to the point of care.<sup>[4]</sup> Postgraduate and Fellowship training has taken a hit over the past year, and we need to safeguard this important fabric of teaching the next generation by closely monitoring their progress in these trying times.<sup>[5]</sup>

#### Long-term impact

When we emerge from the pandemic, the challenges faced by practitioners who have outstanding loans to be paid to the industry need to be addressed. The ophthalmology community and the various societies both local and national can play a crucial role to intervene to arrive at a common ground to provide a buffer to those in need. Relaxation of monthly installments at the policy level must be explored with the government in times such as this. The future is of hybrid conferences; we must move away from the traditional physical gatherings to a combination of an online presence and a limited gathering at the venue. While hybrid meetings

will deny us of the important aspect of social networking and personal connect, it opens up the wondrous possibilities of a much wider global participation both in terms of faculty and attendees. Teleconsultations are here to stay. With the travel restrictions and social distancing measures severely affecting patient volumes, we need to adopt and adapt to this new normal of care delivery for our patients.<sup>[6]</sup> Ophthalmology is a unique practice with its own set of challenges posed to perform a detailed clinical examination remotely. We need to build tools and use existing apps to gather as much information as possible to recognize and refer as relevant to higher care. It is likely that the experiences during the pandemic of wearing masks and a heightened awareness of cleanliness will have a lasting imprint on the collective psyche of our nation, thereby promoting better health. However, practitioners should also anticipate greater numbers of more advanced pathologies due to the backlog created by the absence of access to healthcare services. We must prepare for the backlog created by the second wave and must gear up mentally and physically to address the growing need of patients scarred both due to visual impairment and the mental trauma of the pandemic. Online education has arrived and we must significantly invest in resources in developing these online tools and platforms for access to our students. The All India Ophthalmology Society can develop educational modules that can grant continuing medical education credits to the ophthalmology fraternity to enable the cycle of learning by breaking the barriers of geography. There is no greater time such as this that we need together watch out for each other and pray that we tide over the COVID-19 crisis facing our world today. We would wish all our readers and their families the very best of health, and wish to express our heartfelt condolences to those who have lost their near and dear ones. Stay Safe! Stay Strong! Together we shall overcome one day!

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#### Conflicts of interest

There are no conflicts of interest.

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