

**Covid 19 and Surgical training:  
Carpe Diem**

Editor

We read with interest recent articles on cancellation of elective surgery during the pandemic<sup>1-3</sup>. This has greatly impacted surgical training. Irish trainees were surveyed on their experience of the COVID-19 era in an attempt to navigate the ‘new normal’ in surgery and to explore potential learning and personal opportunities.

A survey was distributed to all surgical trainees in the Republic of Ireland ( $n = 340$ ). Response rate was only 29% ( $n = 98$ ). Of these, 44% ( $n = 43$ ) were Core Surgical Trainees (CST) and the remainder (46%) were on the Higher Surgical Training (HST) pathway. Respondents were from 22 training sites and 8 specialties. As

expected, those at both CST and HST level experienced a significant reduction in elective major, day case, and endoscopy sessions (Fig. 1). Many trainees felt that COVID 19 had impacted access to elective cases (83.7%,  $n = 82$ ).

The reduction in operative exposure may be interpreted as a positive evolution with the opportunity to modify traditional educational approaches. Perceived training deficits could be mitigated by virtual lectures, independent learning resources, and simulation. Free time can be channelled into outside interests for work-life balance and personal development.

O Hennessy<sup>ORCID</sup>, AL Fowler,  
C Hennessy, A Hogan, E Nugent  
and M Joyce

Department of Surgery, University  
Hospital Galway, Ireland

DOI: 10.1002/bjs.12032

- 1 Spinelli A, Pellino G. COVID-19 pandemic: perspectives on an unfolding crisis. *Br J Surg* 2020; **107**: 785–787.
- 2 Søreide K, Hallet J, Matthews JB, Schnitzbauer AA, Line PD, La PBS *et al*. Immediate and long-term impact of the COVID-19 pandemic on delivery of surgical services. *Br J Surg* 2020; **107**: 1250–1261.
- 3 COVIDSurg Collaborative. Elective surgery cancellations due to the COVID-19 pandemic: global predictive modelling to inform surgical recovery plans. *Br J Surg* 2020; <https://doi.org/10.1002/bjs.11746> [Epub ahead of print].

Fig. 1 Illustrates the significant decrease in access to elective operating sessions for trainees at all levels

