





Face the COVID-19 emergency: measures applied in an Italian Dermatologic Clinic

Editor

We have read with great interest the article by Radi et al. which reported the measures applied in order to limit the spread of coronavirus infection in their dermatological clinic.¹ Particularly, they described all the exceptional precautionary measures adopted in order to face COVID-19 emergency and to reduce the spread of infection.¹ Herein, we report the experience of our dermatologic Clinic (University of Naples Federico II) which has a very large catchment area and a high number of annually visits (59 000 visits in the 2019). Since in Italy the first epidemic outbreak was detected on February-21 in Lombardy region with 16 cases of COVID-19 positive-patients,² before The World Health Organization declared the coronavirus outbreak a pandemic on March-11-2020,³ we already started to apply a series of measures to limit the risk of infection for both patients and physicians. Firstly, each physician received instruction to use during each visit a personal protective equipment (surgical-gloves, mouth-mask, disposable-eye-gear). We reduced the number of people in the waiting room allowing to entry only to the patients without family members, except for minors and disables. With Decree of the President of the Council of Ministers on March-9-2020,⁴ all the outpatient services have been temporary suspended except for oncological dermatology and/or emergencies (anaphylactic-cutaneous-reactions, erythrodermic-diseases, erysipelas, etc.). In this not postponable situations, before the visit, a phone-triage is mandatory to differentiate patients with suspect symptoms of infection (fever, cough).⁵ As regards Day-Hospital-admissions, firstly we reduced from 11 to 4 cases per day; then they were totally suspended (on March). Day-hospital admissions for severe disease (mycosis fungoides, melanoma and other skin cancers, etc.) were the only ones which could not be postponed. Regarding dermatology surgery activity, we have reduced daily-surgery procedures from 50 to 5, reserved only to patients with a diagnosed neoplastic skin disease, in which surgery represented a not postponable treatment. Another important group of patients were represented by oncological patients treated with chemotherapy drugs which often require a dermatological visit. For these and for other more fragile patients, we created an online-contact available for video-consultation through webcam, in order to avoid, when possible, their potential exposition to risk coming at the hospital. Patient scheduled both for a first-visit or follow-up have been contacted by phone postponing their appointments and to understand through some questions if their visits were postponable or not. Indeed, all the medical staff has been available by telephone or e-mail for patients' questions. Moreover, different email addresses for different diseases have been created in order to ensure continuity of cares, through the

email-service patients could change scheduled-visits or also ask information about the treatments. Regards patients affected by chronic inflammatory skin disease (psoriasis, hidradenitis-suppurativa, atopic-dermatitis) under biologics (which require a special-prescription in Italy) Italian-Medicines-Agency (March-13-2020), allowed the automatic renewal of the prescriptions for a further 90 days if these expires in the period between March-1-2020 and April-30-2020;⁶ obviously each patient was contacted by phone to schedule a new appointment, to make sure the therapy was running smoothly, to ensure that no alarming symptoms (e.g. fever or cough) or adverse events occurred. All lessons for medical students were converted in online and interactive lessons much appreciated by students.⁷ Regard the medical staff, we reduced the work shifts of medical doctors in specialized training, starting activity of 'independent study', deepening different themes and dermatological diseases. Despite the decree issued nationally, the organization of the activities is different between hospitals. Until the creation and approval of an effective vaccine, we believe that the sharing of preventive measures among different hospitals represents a method to improve the clinical management of patients with the aim of reducing the spread of infection both in patients and physicians.

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References

- 1 Radi G, Diotallevi F, Campanati A, Offidani A. Global coronavirus pandemic (2019-nCoV): Implication for an Italian medium size dermatological clinic of a II level hospital. *J Eur Acad Dermatol Venereol* 2020; <https://doi.org/10.1111/jdv.16386>.
- 2 Day M. Covid-19: Italy confirms 11 deaths as cases spread from north. *BMJ* 2020; **26**: m757. <https://doi.org/10.1136/bmj.m757>.
- 3 Mahase E. Covid-19: WHO declares pandemic because of "alarming levels" of spread, severity, and inaction. *BMJ* 2020; **12**: m1036. <https://doi.org/10.1136/bmj.m1036>.
- 4 GU Serie Generale n.62 del 09-03-2020. https://www.gazzettaufficiale.it/atto/stampa/serie_generale/originario.
- 5 Zhang H, Tang K, Fang R, Sun Q. What dermatologists could do to cope with the novel coronavirus (SARS-CoV-2): a dermatologist's perspective from China. *J Eur Acad Dermatol Venereol* 2020; <https://doi.org/10.1111/jdv.16389>.
- 6 Transitional measures concerning the extension of the AIFA treatment plans for the containment and management of the epidemiological emergency from Covid-19. Italian Medicines Agency (AIFA, Agenzia Italiana del Farmaco). Published on: March 11, 2020 Available at https://www.aifa.gov.it/documents/20142/1124329/comunicato_proroga_PT_AIFA_11-03-2020.pdf/4362b271-212c-7c9f-657f-979f6c34ad9a.
- 7 Reinholz M, French LE. Medical education and care in dermatology during the SARS-CoV2 pandemia: challenges and chances. *J Eur Acad Dermatol Venereol* 2020; <https://doi.org/10.1111/jdv.16391>.

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