

COVID-19 Pandemic's Effect on Brazilian Head and Neck Surgery Facilities

Prince Tiwari*

Department of Rama Medical College Research Centre, India

Abstract

The outbreak of the COVID-19 epidemic had a considerable impact on the healthcare access, treatment, and follow-up of oncologic cases. The end of this study was to estimate how the COVID-19 epidemic has affected discussion and follow-up demand as well as treatment volume at Brazilian Head and Neck Surgery centers. An anonymous online questionnaire was used for collection of data across all Brazilian Head and Neck Surgery Centers across a 3-month period (April–June 2021). This information included the characteristics of each center, and the perceived tone-reported impact of the COVID-19 epidemic on academic conditioning, occupancy training, and the opinion, treatment, and follow-up of cases with Head and Neck diseases. The COVID-19 epidemic presents a new challenge to global healthcare, with further than 273 million verified cases and 5.3 million deaths worldwide as of December 2021. Brazil was one of the countries most affected by COVID-19, and came a center of the epidemic, with the third topmost number of cases and the alternate loftiest mortality rates in the world. In addition to the treatment and forestallment of COVID-19 transmission, healthcare systems are anticipated to deal with the burden assessed by habitual on-communicable conditions similar as cancer, with numerous cases chancing that their requirements were left unmet because of the epidemic.

Keywords: COVID-19; Pandemics; Cancer treatment; Head and neck neoplasm

Introduction

The overall impact of the COVID-19 epidemic on oncologic care remains unclear. Still, its goods on general healthcare access are anticipated to be analogous for the treatment and follow-up of oncologic patients³. Several acclimations to health service provision have been put in place to reduce the threat of staff and case infection to deflect coffers to the care of cases with COVID-19⁴, the relinquishment of these defensive measures most likely limited the capacity for head and neck surgery services to perform individual examinations. In addition, the World Health Organization (WHO) has come up with a recommendation to defer all optional surgeries worldwide, supported by public and transnational societies, which might have a significant impact on individual procedures, similar as necropsies, and on procedures for the treatment of benign head and neck conditions. During the COVID-19 epidemic, the safety of the case and the head and neck surgery platoon should have been a early concern and several guidelines have been published to guide the surgical team. When consider the case, factors similar as social distancing, restriction of unnecessary relegation, as well as the holdback of optional consultations and non-emergency procedures all affect the standard of care for oncological patients⁸. Also, the epidemic has assessed a fresh burden over cancer treatment related to the incapability to admit medical care due to deficit of operating apartments and ferocious care unit beds [1-4].

Head and Neck Cancer (HNC) is the sixth most common malice worldwide, counting for of the periodic cancer prevalence, with a worse prognostic in those presenting with advanced illness^{5, 6}. COVID-19 assessed fresh challenges to the opinion and treatment of HNC, since healthcare professionals were at a high threat of developing SARS-Cov-2 due to increased contact exposure during the epidemic. Since cases with HNC are frequently immunocompromised and have poor nutrition, they're also more vulnerable to developing COVID-19. The decision to relate oncological cases for expansive surgery during the epidemic is also complicated, since surgery performed during the

SARS-CoV-2 incubation time is associated with increased mortality^{9, 10}. On the other hand, delaying treatment inauguration in cases diagnosed with HNC, a well-established time-dependent complaint, is associated with increased morbidity and mortality as well as poor functional recovery. In summary, the measures put in place because of the COVID-19 epidemic are allowed to have contributed to poor healthcare access and difficulties in the opinion and treatment of cases with HNC, particularly in resource-limited settings [5].

In this environment, determining the impact of the COVID-19 epidemic on healthcare systems is demanded in order to plan, reorganize, and optimize the operation of cases with HNC. The end of this study was to estimate how the COVID-19 epidemic affected Brazilian Head and Neck Surgery centers, with a focus on discussion and follow-up demand as well as surgical treatment burden. In addition, we looked for an effect on the training of Head and Neck Surgery residents since new challenges have surfaced to insure proficiency in advanced surgical training. An anonymous online check was created using the Survey Monkey platform. The exploration platoon shouldered airman testing, and questions were modified to ameliorate appreciation. In the 3 month study period (April 2020–June 2020), the check was posted to all Head and Neck Surgery Centers certified as an Educational Surgical Center by the Brazilian Head and Neck Surgery Society. The questionnaire collected data on the characteristics of each Head and Neck Surgery center (position, public or private setting, surgical capacity, occupancy training etc.) as well as the impact of the COVID-19 epidemic on the opinion, treatment, and follow-up of cases with HNC. The effect on

*Corresponding author: Prince Tiwari, Department of Rama Medical College Research Centre, India, E-mail: princetiawari.22@gmail.com

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academic conditioning and occupancy training was also examined.

Discussion

Descriptive statistics were performed on the Survey Monkey online platform. Absolute and relative frequentness were reported for the qualitative data, and means, middles, standard diversions(SDs), interquartile ranges(percentile (P25) percentile(P75)) or 95 Confidence Intervals(95 CIs) were used for the quantitative data. The first case of SARS- CoV2 in Brazil was linked on 25th February 2020. This fully changed the Brazilian public healthcare system, further compounding the issues of habitual low backing and poor operation.

The end of this study was to describe how the COVID- 19 epidemic affected the opinion, follow- up, surgical waiting times, and oncological education across certified Brazilian Head and Neck Surgery centers. Since the public Brazilian Health System provides healthcare to 75 of the population, and cancer treatment is organized towards large technical public hospitals, the treatment of HNC is performed substantially as a public service at academic hospitals or cancer centers located in large civic areas¹⁸. These characteristics might have contributed to making Head and Neck Surgery centers largely vulnerable to changes assessed by the COVID- 19 epidemic. A significant reduction in first consultations and total movables in Head and Neck centers was reported. This might affect from the complex relations between numerous factors, similar as difficulties in reaching the health services due to measures for restriction of population rotation, patient disinclination, and avoidance of health services because of fear of infection. The primary care services were also overwhelmed with COVID- 19 cases, assessing a major reduction on optional procedures, and delaying original opinion and referral, therefore reducing first consultations at specialty centers [6].

A analogous situation was observed for the treatment of benign thyroid conditions, the most common head and neck condition, which might have led to delayed surgical treatment. Responding to the reduction of optional movables, druthers inpatient consultations were espoused, with utmost of the Brazilian Head and Neck cancer centers using telemedicine for follow- up. Still, this practice is fairly new in the country, only being regulated in 2020 due to the COVID-19 epidemic, and its use varies greatly among croakerand. According to this study, the use of telemedicine was confined to follow- up, most likely reflecting the limitations of the styles used substantially for upper airway examination.

A drop in the performance of individual upper airway examinations was also reported, presumably related to the threat of SARS- CoV2 transmission due to aerosol dispersion during upper airway endoscope. Although safety recommendations were put in place to reduce healthcare professional impurity, the relinquishment of these defensive measures most likely limited the capacity for Head and Neck services to perform individual exams. During the period, a civil attempt was made to maintain oncological treatment. Still, we set up a considerable reduction in surgical procedures in nearly every replier center, most likely reflecting depression of available surgical apartments, ferocious care beds, and healthcare professional availability. Following recommendations of the Brazilian National Sanitary Vigilance Agency and of the National Medical Board, optional procedures were laid over during COVID- 19 epidemic, which is demonstrated in our study by an increase in the proportion of procedures for cancer treatment in the total surgical logbook reported by the Head and Neck centers [7,8].

In addition, occupancy programs faced reductions in both clinical conditioning and surgical cases due to a reduction in optional surgeries,

restriction of pool to essential labor force, and redeployment of residers outside of their specialty to meet COVID- 19 affiliated demands for medical care. In our study, utmost repliers reported at least a minor reduction in resident consultations and surgical procedures, reflecting the most common reality nationwide. Indeed though academic conditioning weren't suspended or confined, the COVID- 19 epidemic assessed numerous changes to the moralistic class and being education styles. One of the most apparent was the use of technology for remote literacy, which was espoused by utmost of the Brazilian Head and Neck occupancy programs. The precise impact of the COVID- 19 epidemic on education and surgical training isn't well- known. Still, in certain aspects, especially the use of technology for education purposes, a remarkable new occasion was presented because of the COVID- 19 pandemic [9,10].

Conclusion

The present study estimated the impact of the COVID- 19 epidemic on HNC operation and in head and neck surgery training. Unfortunately, the interpretation of our results raised some other questions and lead to some limitations for illustration, the main cause of residers training abandon wasn't penetrated. also, the quality of literacy by the residers wasn't penetrated, still, the rate of blessing by final examination by the Brazilian Head and Neck Society raised in the following times in 2019 and, independently consequently to public results of the Scientific Department. Regarding the HNC treatment, we also don't have data to identify explanations about the reasons to the drop of the number of treated patients. The results of this study should be precisely estimated. Only half of Brazilian centers responded to the check. Also, our data represents substantially the richest and advanced part of the country (South and South- East regions) and the impact of the COVID-19 epidemic could be indeed worse than our findings suggest. Further studies are demanded in order to determine the precise effect of the outbreak, especially for the long- term care of cases with cancer.

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Conflict of Interest

None

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