

COVID-19: The Impact of the Pandemic on Podiatric Medicine and Patients

On January 1, 2020, the Huanan Seafood Wholesale Market in Wuhan, China was closed over worries of a potential outbreak of the SARS (Severe Acute Respiratory Syndrome) virus first detected in 2002. By January 10, the World Health Organization (WHO) reclassified this new infection as being caused by a new virus and classified it as the 2019 Novel Coronavirus (2019-nCoV). This infection began rapidly spreading around the world with the first two cases in the United States being reported by January 20 in Washington State. On March 11, with more than 118,000 cases in 114 countries, the WHO declared COVID-19 a global pandemic.¹

Early in March of 2020, Lee Rogers, DPM, JAPMA's Associate Editor for Diabetic Foot contacted me about preparing a manuscript for the *Journal* outlining the potential disruptions that COVID could potentially cause in the management of diabetic foot infections and the risk that these patients may become at even higher risk for complications including amputation and death. Dr. Rogers and coauthors Drs. Larry Lavery, David Armstrong, and I submitted "All Feet On Deck - The Role of Podiatry During the COVID-19 Pandemic: Prevent Overburdening of the Healthcare System, by Reducing Hospitalizations, Amputations and Deaths in People with Diabetes," on March 23, only 12 days after the pandemic was declared.² At that time, only 36,000 cases and 475 deaths had been confirmed in the US. Little could we imagine what was to come.

In this paper we posited that significant changes would need to be made to the health-care system that would impact podiatrists and their patients. We recommended a call to action and suggested best practices in the new standard of care for the at-risk diabetic patient. These included:

- a shift away from hospital-based care,
- increased use of telemedicine and remote patient monitoring, and
- more in-home visits.

This manuscript was accepted for publication less than a month later and, because of the timeliness and importance of the message, it was immediately published and made open access—JAPMA is a subscription-based journal—for the greatest

dissemination. Since its publication, the paper has been cited in the world literature more than 140 times and has become the most accessed manuscript on www.japmaonline.org.

In the intervening years there have been numerous papers published from around the world proving the prescience of our suggestions. Complications to patients with diabetes, including amputation and death, did significantly increase and others echoed our recommendations. The publication of this manuscript is one of my proudest moments in my long tenure as Editor of JAPMA.

However, we did not rest on our laurels after publishing this single work. Many other papers began to flow into us describing foot complications being seen associated with COVID. As with most other medical journals, we modified our peer-review system to "fast track" these submissions and published them online immediately and as open access content, making them available to the greatest number of clinicians and researchers. In this Special Section of JAPMA, we present the formal publication of a number of these important works all in one place.

Much has changed since those early, frankly scary, dark days of the pandemic. We have effective vaccines and treatments and have learned to live with the virus present in our midst. It would be irresponsible to think that we are out of the woods and that this is the last global pandemic we will see. Although it has been more than 100 years since the previous one, unfortunately, I don't think we will be waiting that long for the next to happen. We have certainly learned that science evolves as new knowledge is gained, and it is our role as medical editors to disseminate in our publications the most current information in the most expedient way to the greatest number of readers.

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References

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2. ROGERS LC, LAVERY LA, JOSEPH WS, ET AL: All feet on deck—the role of podiatry during the COVID-19 pandemic: preventing hospitalizations in an overburdened healthcare

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