



Letters to the Editor

Incidence of COVID-19 among ophthalmology professionals[☆]***Incidencia de COVID-19 entre los profesionales de oftalmología***

To the Editor

As of 3rd May 2020, COVID-19 has affected 217,466 people in Spain, with 25,264 deaths.¹ The first patient was reported in December 2019 in Wuhan, China, the first case being detected in Spain on 31st January 2020 in La Gomera island. Given the epidemiological characteristics that the disease was taking, it was classified as a pandemic by the WHO on 12th March, declaring the state of alarm in Spain 2 days later.

The virus has been detected in patients' tears, so the lack of eye protection is a concern among health care providers treating these patients.² Ocular manifestations, in particular, conjunctivitis, can be a form of presentation of COVID-19. Ophthalmologists, therefore, may be the first doctors to evaluate these patients.^{2,3} The lack of safety distance between professionals and patients during the physical examination and the ancillary ophthalmic examinations could pose a high risk of contagion for this group.^{3,4} The first doctor to alert about this new disease in China, Dr. Li Wenliang, was an ophthalmologist; this doctor ended up getting sick and died of the disease.

Ophthalmic care has changed throughout our environment during lockdown, only providing care for emergency cases. The shortage, not only of certified personal protection equipment, but of the most basic protection materials, such as masks or alcohol-based hand rubs, has been one of the struggles of the health professionals in our country. Ophthalmology departments have continued to work longer than what would have been desirable without all the appropriate protection measures, until little by little the different departments have managed to adapt to the new situation. As they are essential personnel, most professionals have been tested for COVID-19, either because they had compatible symptoms, or in the context of the characterization of positives, which is so important from an epidemiological point of view.

Granada is a province of the autonomous community of Andalusia, with a population close to a million inhabitants. Two tertiary hospitals in the capital (Hospital Universitario Virgen de las Nieves [HUVN] and Hospital Universitario Clínico San Cecilio [HUCSS]), the Hospital de Alta Resolución de Guadix (HARG) and 3 regional hospitals (Motril, Loja and Baza) constitute the public ophthalmic care providers.

This study presents the impact data found in the public Ophthalmology departments of the province of Granada. Sixty-two serologies and 38 polymerase chain reaction (PCR) tests were performed at HUVN, HUCSS and HARG hospitals. The rest of the sites, where serologies were not requested, 3 PCRs and 14 rapid tests

were carried out on a total of 21 professionals, all of them were negative, and it cannot be ruled out that these professionals had COVID-19 in a oligosymptomatic way due to the lack of serologies.

In our case, the professionals with symptoms or contact with positive patients, initially underwent a PCR test. Subsequently, in an attempt to determine the actual impact of the virus, serologies were performed using the ELISA technique.

The percentage of health personnel analysed by serology who contracted COVID-19 was 16.1% (10/62 PCR+ or IgG+), with 12.9% (8/62) being detected in the active phase (PCR+). Seven patients presented residual IgM+ in the serological controls (PCR–, IgM+ and IgG+). In general, the symptoms were mild, flu-like, one of the cases required hospital admission. Only one oligosymptomatic patient was diagnosed when control serologies were performed (PCR–, IgM+ and IgG–).

These data coincide with the high degree of contagion observed among health professionals.⁵ Despite the fact that we are not in the first line of care for COVID-19 patients, we have a high incidence rate, possibly derived from the characteristics of our specialty, where examinations require close proximity to the face of the patient. It is essential, among ophthalmology department professionals, to adopt the necessary protection measures to minimize the impact of this disease.

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