



Response in Southeast Asia: Managing diabetes and other endocrine disorders during the COVID-19 crisis

In our medical world and beyond, so much has changed, and still needs to change, since the end of 2019.

It was in December of 2019 when we first heard the news about a cluster of patients with pneumonia in Wuhan, China, caused by a novel coronavirus. We still remember distinctly the news report of a Filipino in Wuhan in lockdown, describing his situation with fear. Since then, the condition has been named COVID-19, and practically all countries in the world have faced this extraordinary challenge and crisis, this pandemic. In our region in Southeast Asia, we feel the extent of this crisis even more deeply in the context of preexisting handicaps in our healthcare systems.

Our borders mostly closed, most communities self-quarantined, and healthcare systems and economies faced challenges like never before in many decades or even since the last century. Governments and their health departments are frantically struggling to combat the pandemic and manage its social and economic repercussions.¹ After months of lockdown, efforts at re-opening the economy are gingerly being implemented as we write, even as anxieties persist over the potential next waves of the virus.

As endocrinologists, we look to addressing chronic conditions as diabetes and other endocrine disorders in these newly difficult times. Epidemiologic data on COVID-19 in the diabetic population is emerging; it is still limited and its timely sharing from various affected countries is imperative.²

It is noteworthy that scientific papers in pre-prints (without yet the normal peer review) and pre-proofs (without the usual full-copy editing) become early data sources. We await the development of the vaccine and the clinical trials of medications that will stem the transmission of this virus and eradicate the disease. We await verdicts on effectiveness and safety of treatments, both new and repurposed drugs, to save patients. We cautiously weigh more evidence even as we hope to use trial treatments effectively and safely for the very sick as a last resort.³

We have to adapt faster to the changing times.

The ASEAN Federation of Endocrine Societies (AFES) has been in existence since 1981, with initiatives for collaboration through the years. In a survey about this pandemic, responses by AFES leaders are reported by Dr. Gabriel Jasul Jr., Philippine Society of Endocrinology, Diabetes and Metabolism (PSEDM) Past President. This issue's lead article "AFES A.S. O.N.E.: ASEAN Survey Of Needs in Endocrinology in the Time of the COVID-19 Pandemic," describes in detail the situations faced by endocrinologists and other practitioners within our region, painting one landscape of ASEAN with distinct features. In many countries, it highlights the tighter limitations in our teaching and training programs in endocrinology, including reduction in opportunities for face-to-face mentoring, given the limited case load in our specialty as COVID-19 cases are prioritized instead.

This is a critical time, too, where information campaigns are most needed to counter "fake news." We expect specialty organizations to step up, help to streamline content, provide timely position statements, and check on the accuracy and safety of statements already circulating, in order to correct any misinformation or misleading recommendations that tend to spread as fast as the virus, if not faster. In this issue of JAFES, we include position statements from Indonesia and the Philippines. As face-to-face outpatient consultations have become less feasible, the role of online or remote education in diabetes care to empower the patient has never been greater, utilizing a variety of new platforms. We feature an article on the use of social media for the information needs of persons with diabetes amidst the COVID-19 pandemic, by our group in the Philippines led by Drs. Iris Isip-Tan and Jerico Gutierrez, who previously initiated the use of visual abstracts for JAFES articles and recently expanded into infographics and educational videos for patient education. We include in this issue and in our website some examples and links prepared by the PSEDM.

Physicians are faced with heartbreaking decisions about prioritization of care, given limited hospital beds, breathing devices and ventilators. We need to be guided by clearer ethical guidelines as we take care of patients and attempt to do life-saving research.⁴ In this issue, Dr. Marita Reyes elucidates the challenges of research ethics committees in the setting of the pandemic.

With this issue, we are also introducing a new article type, "Endocrine Perspectives," inviting experts to express short commentaries on timely topics. Our first offering is by PSEDM Past President Cecilia Jimeno, on early impressions about new challenges and opportunities in diabetes care during this pandemic. Though it is situated in the Philippine context, we believe the topic is of broader concern.

And so while the whole world is grappling with the COVID-19 public health threat and onslaught, we envision JAFES to be the platform to discuss our regional perspective in Southeast Asia: how COVID-19 is affecting the clinical picture, diagnosis, and subsequent care of our patients with diabetes and other endocrine disorders. We will work on quicker turnaround timelines, and publish online ahead of print. This is our commitment as the voice of endocrinology in Southeast Asia.

We need to move to a new and better normal for everyone in our healthcare systems: improving compensations for nurses and essential services workers, allocating more funds for adequate healthcare capacity including hospital bed and equipment, and cooperating locally, regionally and globally, in order to combat COVID-19 and prepare for the next pandemic. As physicians, we have to genuinely provide nurturing and compassionate care, which is truly our calling, with or without the COVID-19 crisis. We pray that this pandemic also brings out the best in all people.

And before anything else, let us take a moment to honor our fallen heroes, and to say thank you to our health care workers and all those who provide our daily essential needs.

Let us all do our bit, in small ways, and while there is yet so much to be done, with God's graces we will overcome.

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https://doi.org/10.15605/jafes.035.01.01