2020 will be a historical milestone

2020 ficará marcado na história

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The year started with our close sight over what was happening in China, the first COVID-19 case, which accounted for the name given to the disease caused by SARS-CoV2, identified in Wuhan at late 2019. It emerged in China and spread to other Asian and European countries; and reached Brazil in late February 2020.

In March 2020, WHO (World Health Organization) reclassified the outbreak as a pandemic⁽¹⁾; actually, we are seeing that it is not just a mere respiratory virus. The media have been showing its impacts on peoples' lives – which, by itself, would be very worrisome – and on public health systems worldwide, as well as on the global economy.

Each one of us felt, and still feels, such impacts. Our professional routines have been changing. The sustainability of our services has been threatened and we have been forced to rethink everything in a quite fast way. Every day, news reports show that uncertainties are not a privilege of our groups: governments and sanitary authorities all over the world give their opinions and change their own viewpoints due to new factors and to new measures to mitigate this unprecedented crisis.

Medical entities were not excluded from these changes.^(2,3) We all know that the new generations, the digital natives, consumed scientific and non-scientific information in ways different from those observed in the 1990's. We have to comply with this process in order to provide this new generation with services that meet their experiences and preferences. We can see ourselves gathering shapes and service delivery to the oldest and earliest generations in our registered and internship courses, as well as to recently graduated individuals. All of a sudden, everything was accelerated: we all need to interact and absorb communication practices and studies that were previously attributed to youngsters and to the ones linked to technology.

Our services are oftentimes outside great hospitals; they suffer the reflexes of the crisis. COVID-19 entered the ophthalmological clinics due to one of its symptoms: conjunctivitis, even at low incidence, and to the risk of contact during clinical examinations. Everything is going too fast! But we are reinventing ourselves, we need to be resilient.

The pandemic will pass, crisis will pass. However, we, our services and entities, will no longer be the same. This time in history will leave significant marks on all of us, due to the loss of lives, to financial difficulties and to new social habits.

Eventually, we will meet again in our face-to-face congresses some time, given their importance, not only due to knowledge exchange, but to new contacts, networking and meetings with old friends and professors. However, several of us will start enjoying virtual events, which will be more appreciated than before.

We will have, even if we did not want it, questioned our habits and processes; we will certainly leave this moment stronger than we are today and more prepared to a new era that has started this year.

REFERENCES

- 1. World Health Organization (WHO). Coronavirus disease (COVID-19) pandemic [Internet]. Genève: WHO; c2020.[cited 2020 Apr 23]. Available from: https://www.who.int/emergencies/diseases/novel-coronavirus-2019.
- 2. Associação Médica Brasileira (AMB). Diretrizes AMB COVID-19 [Internet]. São Paulo: AMB; c2020 [citado 2020 Abr 23]. Disponível em: https://amb.org.br/diretrizes-amb-covid-19
- 3. American Academy of Ophtalmology. Practice managment coronavirus research [Internet]. San Francisco: American Academy of Ophthalmology; c2020. [cited 2020 Apr 23]. Available from: https://www.aao.org/practice-management

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