

Will Virtual Teaching Continue After the COVID-19 Pandemic?

Manter-se-á o Ensino Virtual Após a Pandemia de COVID-19?

Keywords: Coronavirus; Coronavirus Infection; COVID-19; Pandemics; Medical Education

Palavras-chave: Coronavírus; COVID-19; Infecção de Coronavírus; Pandemia; Educação Médica

After reading the article published recently in your journal one can understand how a dramatic event such as the COVID-19 pandemic can shape the future of communities and also how important it is to learn from it.¹

Medical schools, which used to be adamant about recording classes when facing a shutdown in order to keep students safe, managed to transform their curriculum and adjust it towards learning through 'virtual classes'.² I believe this new setting might improve class attendance due to the easiness of access and also because it helps students to overcome some shyness in asking questions in front of their colleagues. Students are now able to pose questions

anonymously. On the other hand, the preparation of this type of classes, which requires use of a different type of hardware and software, are more time consuming for faculty, and that can be a limiting factor.³ In the aftermath of this crisis, medical schools must assess student satisfaction with the new methodologies in order to make improvements aligned with the perspectives of all the different stakeholders.

Furthermore, there was also an increase in the number of webinars freely available in post-graduate medical education. This enabled many academic meetings, which used to take place behind closed doors, to become available to a wider range of professionals and allowing a much broader exchange of ideas.

In conclusion, if we want to act as a 'smart community,' this crisis has to be a lesson from which we can embrace the new opportunities which we created ourselves in these difficult times.

Finally, I'm not defending complete virtual teaching but we can make a change in order to be more in accordance with the available technologies and I hope that we can continue to profit from virtual teaching.

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Letter to the Editor about the Article “Excess Mortality Estimation During the COVID-19 Pandemic: Preliminary Data from Portugal <https://doi.org/10.20344/amp.13928>”

Carta ao Editor sobre o Artigo “Estimativa do Excesso de Mortalidade Durante a Pandemia COVID-19: Dados Preliminares Portugueses <https://doi.org/10.20344/amp.13928>”

Keywords: Coronavirus; Coronavirus Infections; COVID-19; Disease Outbreaks; Mortality; Pandemics; Portugal

Palavras-chave: Coronavírus; COVID-19; Infecções por Coronavírus; Mortalidade; Pandemia; Portugal; Surtos de Doenças

The authors state that “it is safe to assume an observed excess mortality of 2400 to 4000 deaths in the period assessed” during the COVID-19 pandemic.¹ This alarming claim is based primarily on increased mortality due to decreased use and access to healthcare (1291), rather than

reported COVID-19 related deaths (689), seasonal factors and other effects of the lockdown. Excess mortality due to decreased access to healthcare has been estimated utilising mortality records from Portuguese 2008 triage admission data. It would be interesting to undertake a sensitivity analyses about this key value. It is possible those who did not attend for emergency care during the lockdown period were at considerably less risk of death than the average attendee. Furthermore, it is possible that investment in the Portuguese Health care system since 2008 has reduced average triage mortality rates per admission in 2020.

Even if it is assumed the number of deaths primarily due to COVID-19 are underestimated by 20% in Portugal, as has been proposed for other countries, this study would suggest that deaths due to a decrease in access to healthcare caused by the lockdown are 1.5 - 4x higher than due to COVID-19 in the same period. Do the authors have any anecdotal reports or data to support mortality of this magnitude?

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Development of a Portuguese COVID-19 Imaging Repository and Database: Learning and Sharing Knowledge during a Pandemic

Desenvolvimento de um Repositório de Imagens e Base de Dados Portuguesa de Casos COVID-19: Aprendizagem e Partilha de Conhecimento em Tempo de Pandemia

Keywords: Access to Information; Coronavirus Infections; COVID-19; Portugal; Radiology Information Systems; Tomography, X-Ray Computed

Palavras-chave: Acesso à Informação; COVID-19; Infecções por Coronavírus; Portugal; Portugal; Sistemas de Informação em Radiologia; Tomografia Computorizada

The coronavirus disease 2019 (COVID-19) has been evolving rapidly world-wide and preparedness of health services and front-line hospitals in particular has led to a focus in containment, rapid diagnosis, effective treatment and extensive population screening.

Radiology departments have implemented infection prevention and control standard precautions, according to

published recommendations.^{1,2} Restructuring of hospital operations, however, has affected trainees in terms of their educational (residency) programs and workforce capabilities, in order to promote workplace safety.³ In order to further engage trainees and mitigate the restrictions of social distancing, educators have been encouraged to design alternative instructional platforms for active learning and promote digital teaching resources⁴.

Some international societies have developed public imaging registries for learning and research purposes, sharing knowledge and experience regarding COVID-19 in dedicated websites, namely the European Society of Radiology (EURORAD), the British Society of Thoracic Imaging and Società Italiana di Radiologia Medica e Interventistica.^{5,6} Such databases have been used as an adjunctive tool by colleagues all over the world to boost and improve their skills, as well as provide a better understanding of this condition.

With this in mind, a group of radiology residents in Portugal designed a public database of COVID-19 cases from their respective institution with the intention of creating a learning platform and share knowledge among peers.⁷

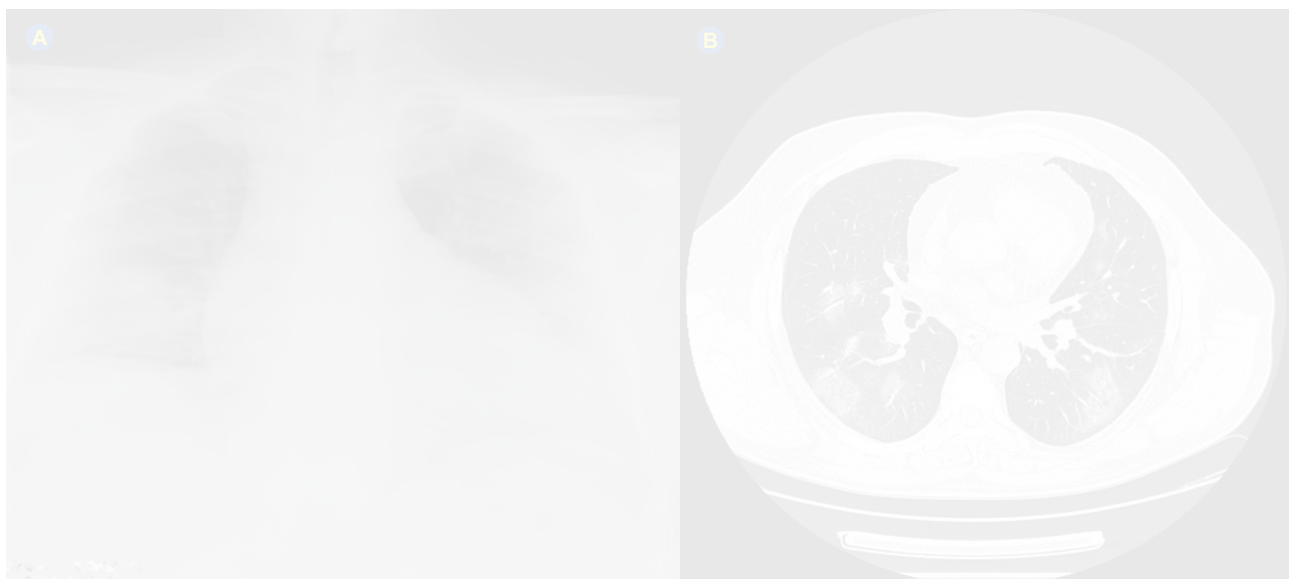


Figure 1 – 52-year-old hypertensive male patient attends the emergency department due to persistence of fever and diarrhea for six days. Lab work performed at admission reveals leucopenia, thrombocytopenia and increased lactate dehydrogenase levels. Chest radiography (A) and thoracic CT axial slice (B) performed at admission show multiple bilateral peripheral ground-glass opacities, compatible with COVID-19 pneumonia, which was confirmed with throat and nasal swab test.