



Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.



Letter to the Editor

Non-COVID-19 visits to emergency departments during the pandemic: the impact of fear



The novel coronavirus, Severe acute respiratory syndrome -CoronaVirus - 2 (SARS-CoV-2), and the resulting infection, COVID-19, is posing an enormous threat and huge workload to emergency departments (EDs) worldwide.¹ The COVID-19 pandemic is a major health emergency that is impacting the behaviour of entire populations in response to a direct threat to both individuals and communities.

Italy saw an exponential growth in COVID-19 cases from the day the first patient was identified in the north of Italy until the 9th of March, when the Italian government imposed the national lockdown. This measure represented a necessary and inevitable action to reduce the spread of infection; however, it also created an environment of strong emotions in the community, especially fear.

Recent studies have shown a significant reduction in ED visits related to different disciplines over the first weeks of the pandemic.^{2,3} The consensus is that patients were avoiding going to hospitals because they feared getting infected with COVID-19. This may highlight the overuse of EDs by non-emergency and low complex cases that could be managed by general practitioners;

however, there may also be a worrisome tendency to postpone consultations with specialists, even when necessary.

We compared ED visits in two major referral hospitals in the north of Italy from the 21st February to 16th April with COVID-19 daily mortality data from the Italian Civil Protection Department⁴ (Fig. 1). It emerges that the two curves almost mirror one another, with a meeting point on the 16th of March and the lowest peak of ED visits corresponding with the highest peak in the COVID-19 daily mortality trend. ED visits have recently shown a timid turnaround, reaching 150 visits/day on 16th April, which suggests the two curves will meet again in the coming next weeks.

The slow upward trend of non-COVID-19 visits to EDs presents a milder slope than the reduction in COVID-19 mortality, indicating how the behaviour of a population in a negative emotional state may require a longer time to change and, mostly, that the fear of what we can get might be greater than the fear of what we have.⁵

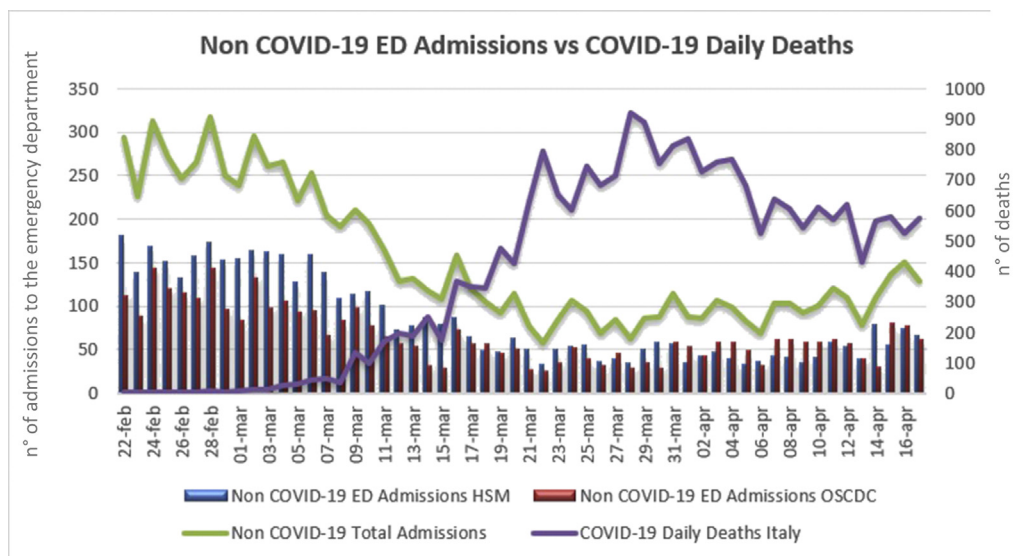


Fig. 1. Non-COVID-19 emergency department admissions vs COVID-19 daily deaths. HSM = Policlinico San Martino Hospital (Genoa, Italy); OSCDC = IRCCS Sacro Cuore Don Calabria Hospital (Negrar di Valpolicella, Italy).

Conflicts of interest

None.

Fundings

None.

Acknowledgements

The authors sincerely thank the emergency departments of both institutions for their strong efforts during the COVID-19 emergency. The authors are grateful to Dr Claudio Duffini and Dr Francesco Oneto for their support on providing data and Carolina Benzi for the English editing.

References

1. Wee LE, Fua TP, Chua YY, Ho FWA, Sim XYJ, Conceicao EP, et al. Containing COVID-19 in the emergency room: the role of improved case detection and segregation of suspect cases. *Acad Emerg Med* 2020 Apr 12. [Epub ahead of print].
2. Tam CF, Cheung KS, Lam S, Wong A, Yung A, Sze M, et al. Impact of coronavirus Disease 2019 (COVID-19) Outbreak on ST-Segment-Elevation Myocardial Infarction care in Hong Kong, China. *Circ Cardiovasc Qual Outcomes* 2020 Mar 17. [Epub ahead of print].
3. Lazzerini M, Barbi E, Apicella A, Marchetti F, Cardinale F, Trobia G. Delayed access or provision of care in Italy resulting from fear of COVID-19. *Lancet Child Adolesc Health* 2020 Apr 9. [Epub ahead of print].
4. <http://www.protezionecivile.gov.it/>- consulted on the 17th of April 2020.
5. Rosenbaum L. The Untold Toll - the pandemic's effects on patients without Covid-19. *N Engl J Med* 2020 Apr 17. [Epub ahead of print].

Guglielmo Mantica^{*1}

Department of Urology, Policlinico San Martino Hospital, University of Genoa, Genova, Italy

Niccolò Riccardi¹

Department of Infectious - Tropical Diseases and Microbiology, IRCCS Sacro Cuore Don Calabria Hospital, Valpolicella di Negrar, Verona, Italy

Carlo Terrone

Department of Urology, Policlinico San Martino Hospital, University of Genoa, Genova, Italy

Angelo Gratarola

Division of Anesthesia and Intensive Care, San Martino Policlinic Hospital, IRCCS for Oncology, Genoa, Italy

* Corresponding author. Department of Urology, Policlinico San Martino Hospital, University of Genoa, Largo Rosanna Benzi 10, 16132, Genova Italy. Tel.: +39010553935.

E-mail address: guglielmo.mantica@gmail.com (G. Mantica).

24 April 2020

Available online 7 May 2020

¹ Contributed equally.