

AVAILABILITY OF COVID-19 INFORMATION FROM NATIONAL AND INTERNATIONAL BURN SOCIETY WEBSITES

DISPONIBILITÉ DES INFORMATIONS CONCERNANT COVID-19 SUR LES SITES DES SOCIÉTÉS SAVANTES NATIONALES ET INTERNATIONALES

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SUMMARY. National and international burn society websites are an important source of information for patients and burn care professionals. The current COVID-19 pandemic represents an unprecedented global health crisis. The aim of this study was to assess the information available on national and international burn society websites on the current pandemic of COVID-19. National and international burn society websites were assessed with regard to COVID-19 information. Five percent of nations had a burn care society website. Forty percent of these national society websites mentioned COVID-19. None provided their state's guidelines, nor advised to provide only urgent or emergent care. None recommended following WHO guidelines. One-third (33%) of the international societies documented the decision to postpone its congress and provided links to two articles describing burn care during the COVID-19 pandemic. The availability of COVID-19 clinical guidelines and information on national and international burn care society websites is lacking. Burn care society websites must develop relevant COVID-19 information to support burn care professionals on the frontline of care.

Keywords: societies, medical, internet, burns, surgical procedures, operative, Coronavirus, severe acute respiratory syndrome coronavirus 2, COVID-19, pandemic

RÉSUMÉ. Les sites des sociétés savantes brûlologiques sont une source importante d'information pour le grand public et les professionnels. La pandémie actuelle à COVID-19 est une crise sanitaire sans précédent. Le but de cette étude était d'évaluer les informations concernant cette épidémie disponibles sur les sites des sociétés savantes, tant nationales qu'internationales. Seuls 5% des pays ont des sites émanant des sociétés savantes brûlologiques, 40% de ces sites dispensant des informations sur la pandémie. Aucun ne relayait les recommandations de leur état, pas plus qu'il ne conseillait de ne pratiquer que des soins urgents ni de suivre les recommandations de l'OMS. Le tiers des sociétés y a fait apparaître la décision de repousser leur congrès, le tiers aussi insérant un lien vers 2 articles décrivant la prise en charge des brûlés en période pandémique. Les informations concernant la pandémie COVID-19 manquent donc sur les sites des sociétés savantes brûlologiques. Elles doivent les afficher, afin d'aider les professionnels dans la prise en charge des brûlés pendant cette période.

Mots-clés : sociétés savantes, brûlure, internet, COVID-19, pandémie

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Introduction

The emergence of a novel coronavirus, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), and the disease it causes, coronavirus disease 2019 (COVID-19), has rapidly developed into a global pandemic and public health emergency.^{1,2} As of 7th July 2020, a total of 11,571,722 accumulated cases and 537,045 deaths have been reported worldwide in 215 countries and regions, with an overall mortality rate of about 1%.³ Healthcare systems around the world are operating at, or preparing to operate at, above usual capacity, and significant adjustments in surgical services will be required. International healthcare systems have variable environments, with conditions differing significantly by locality.⁴ It presents challenging choices for burn surgeons, about whether elective burn care procedures can and should be delayed or reprioritized, with the immediate goal of maintaining provision of emergency and essential surgery while preserving precious resources, minimising exposure of burn care professionals, and preventing onward transmission. Critical choices regarding the management of burns patients and procedures should be made based on institutional policies and guidelines from local, national and international authorities, considering the availability of finite and essential resources and supply chains supporting health services.^{5,6}

National and international burns societies are seen as reliable sources of information for burn care professionals.⁷ Their websites should provide clinical information and guideline needs to meet national and international standards.^{7,8} No studies have assessed the information available on national and international burns societies' websites.⁹ The aim of this study is to evaluate each national and international burns society website for availability of COVID-19 information.

Materials and methods

A Google search was performed of United Nations member sovereign states to determine whether they had a national burn care society website and to assess its contents.¹⁰ The name of the society had to

contain the words 'burn' and/or 'burns' in its title. The Google search engine used the search terms 'burn' and/or 'burns' and 'society OR association' and '(Name of nation of interest)'. Each website was assessed for the presence of COVID-19 information, clinical practice guidelines and links. In addition, all national and international societies associated with the International Society for Burn Injuries, European Burn Association and Asia Pacific Burn Association were also included.¹¹ All national and international societies associated with the European Association of Society of Aesthetic Plastic Surgery were also included.¹² This was performed on 11th April 2020. The presence of COVID-19 information was recorded.

Results

There are 193 United Nations member sovereign states. Ten (5%) of United Nations member sovereign states had a national burns society website. COVID-19 was mentioned in 4/10 (40%) of those national burns society websites; of these, no society advised to provide only urgent or emergent care (*Table 1*). No national society provided their own

Table 1 - National and international burn societies with internet websites

Nation / Organisation	Name of Organization	Web address	Information on COVID-19
Australia / New Zealand	Australian and New Zealand Burn Association	www.anzba.org.au	Yes
Belgium	Fondation des Brulés	www.brulures.be	Yes
Brazil	Sociedade Brasileira de Quemaduras	www.sbqueimaduras.org.br	Yes
China	Chinese Burn Society	www.burns.cma.cn	No
France	Société Française de Brulures	www.sfb-brulure.com	No
Germany	Deutsche Gesellschaft für Verbrennungsmedizin	www.verbrennungsmedizin.de	No
India	National Academy of Burn Injuries	www.thenabi.org	No
South Korea	Korean Burn Society	www.burn.or.kr	No
United Kingdom	British Burn Association	www.britishburnassociation.org	No
United States of America	American Burn Association	www.ameriburn.org	Yes
International	International Society for Burn Injuries	www.worldburn.org	Yes
Europe	European Burn Association	www.euroburn.org	No
European Mediterranean Countries	The Euro-Mediterranean Council for Burns and Fire Disasters	www.medbc.com	No

COVID-19 advice. No national society provided their state's directives to provide only urgent or emergent care; none recommended following WHO

guidelines. One society provided COVID-19 public resources. One society provided information on donning and doffing of masks. One society raised concerns regarding the sale of 70% alcohol to clean surfaces and sanitize the hands due to the COVID-19 pandemic. This society also documented that it had discussed flows, protocols and the need for clinical guidelines to manage burn patients during the COVID-19 pandemic. One society documented the decision to cancel all events for four months.

All three burn care international societies had a website. COVID-19 was mentioned in 1/3 (33%) of those international plastic surgery society websites. One international society documented the decision to postpone its congress and provided links to two articles describing burn care during the COVID-19 pandemic.

Discussion

This is the first study to evaluate the COVID-19 website information provided by national and international burn care societies. The presence of COVID-19 information on national and international burn care websites is scarce, with 90% of sovereign nations not represented. There were limited links between national and international burn care websites other than to conferences and courses. Few national burn societies provided significant member and non-member resources. COVID-19 recommendations for management of emergent and elective burn procedures, clinical guidelines, advice on personal protection equipment and patient information sheets on many national burn care society websites is very limited.

The COVID-19 pandemic is a major health crisis straining the healthcare system and affecting us all. COVID-19 has prompted a cascade of reports, an indistinct amalgam of unsubstantiated information, helpful information, misinformation and intentionally manipulated disinformation. The challenge for national and international burn care societies is that, although some information is clearly false, and even harmful, the validity of other posts is less clear-cut. National and/or international burns society websites should provide high quality and accurate informa-

tion to both their members and patients. Enabling information technology platforms can optimise burns education and best standard of care.¹²⁻¹⁶ Clinical practice guidelines can improve the quality of care and are helpful in summarizing evidence, standardizing management and guiding appropriate referrals.^{8,12-16} No national or international burn care society website provided paediatric COVID-19 guidelines for burn care professionals. National and international burns societies should develop COVID-19 guidance.^{8,12-16} These societies must determine the topics to be addressed based on questions that are received from its members and others, as well as input from their boards and clinical experts outside burn care.^{14,15} For each topic, burns society staff must work with clinical authorities to develop recommendations in an iterative, co-operative approach.^{8,12-16} The recommendations should focus on and emphasise, where possible, evidence published in the peer-reviewed literature as well as guidance issued by local, national and international health authorities and professional organizations.⁸ Once draft recommendations are expounded for the subject matter, they must be evaluated by the relevant society board members, who approve all statements regarding patient care.⁸ Approved recommendations are then published online.⁸ The recommendations are revised as new evidence arises and all subject matter is appraised at regular intervals in its totality by national and international burns society leadership to ensure uniformity with rapidly evolving recommendations from other societies and government organisations.⁸ The date of the last evaluation must be on the published page.⁸

Burn care professionals are committed to providing timely, high-quality surgical care that achieves the best outcomes for patients. However, if burn teams are not adequately protected from virus transmission during the COVID-19 outbreak, the health systems' capacity to provide necessary care will collapse as more burn care professionals are forced into isolation. Moreover, protecting those who care for the acutely ill and injured is the ethical decision to prevent anxiety and attrition of burn care professionals.¹⁷

Social media groups provide social support and allow shared global peer experiences and education

between burn care professionals.¹⁷⁻¹⁹ Burn care professionals on the frontline must be given access to global peer experiences for information gathering and social networking.^{20,21} Social media can improve the interaction between national and international burns societies and burn care professionals.^{18,19} It is important to acknowledge that confidentiality is an issue when discussing surgery in social media.^{9,10}

It is necessary to urge and promote the use of links between national and international burn care societies when seeking information on COVID-19.²¹ There is minimal integration and standardization between websites and burn care societies.²¹ In an increasingly technological health system, where the internet and communication play a crucial role, it is essential that this shortcoming be addressed.²¹ This highlights the opportunity for partnership between national and international burns societies to standardize the information and quality of care provided to burn care professionals.^{8,11-13} In this way, the national and international burn care societies will be able to obtain high-quality information more frequently, and such websites' accessibility and positioning may improve, given that search engines justify the positioning of links obtained in a search based on the frequency of access to them. One of the limitations of our study is intrinsic to the nature of internet, namely that information changes continuously; like others, this study analysed the information available at a particular time.^{19,20} A limitation of this study is that it could not evaluate if direct information was provided by the national or international burn care society directly to their society members,

e.g. by email or post.^{19,20} This study used the Google Search engine, as it is the most used search engine on the World Wide Web across all platforms, with 92.62% market share as of June 2019.¹⁰

Conclusion

This study evaluated the availability of information on the COVID-19 disease pandemic provided by national and international burns society websites.^{19,20} To help burn care professionals stay informed during this rapidly evolving situation, national and international burns societies should gather and evaluate COVID-19 resources, recommendations and guidelines from different countries and international organisations such as the WHO, to provide materials that are more specific to burn care professionals, including information for practice management with particular focus on patient and surgeon safety.^{7,8} A variety of free access scientific articles have been published recently by international experts on lessons learned about specific aspects of burn injury epidemiology, management and clinical experience during the COVID-19 pandemic which could be linked to burn society websites.²²⁻³⁰ Such a presentation of a well-organized, constantly updated summary of COVID-19 management of burn care patients during the pandemic, with emphasis on safe practice methods for patients and providers, will assist burn care professionals in making correct decisions regarding care for their patients during the pandemic.^{8,13,16, 31-37}

BIBLIOGRAPHY

- 1 Wang C, Horby PW, Hayden FG, Gao GF: A novel coronavirus outbreak of global health concern. *Lancet*, 395: 470-473, 2020.
- 2 McCloskey B, Zumla A, Ippolito G, Blumberg L et al.: WHO Novel Coronavirus-19 Mass Gatherings Expert Group. Mass gathering events and reducing further global spread of COVID-19: a political and public health dilemma. *Lancet*, 395: 1096-1099, 2020.
- 3 Worldometer: COVID-19 Coronavirus Pandemic. Available at: <https://www.worldometers.info/coronavirus/> Accessed: 7th July 2020.
- 4 Kandel N, Chungong S, Omaar A, Xing J: Health security capacities in the context of COVID-19 outbreak: an analysis of International Health Regulations annual report data from 182 countries. *Lancet*, 395: 1047-1053, 2020.
- 5 Al-Benna S: Adequate specialised burn care services are essential at major trauma centres. *Burns*, 39: 1495-7, 2013.
- 6 Al-Benna S: Burn care facilities are lacking at major trauma centres in England. *Burns*, 39: 533, 2013.
- 7 Al-Benna S, Clover J: The role of the journal impact factor: choosing the optimal source of peer-reviewed plastic surgery information. *Plast Reconstr Surg*, 119: 755-756, 2007.
- 8 Al-Benna S: Construction and use of wound care guidelines: an overview. *Ostomy Wound Manage*, 58: 37-47, 2012.
- 9 Al-Ajam Y, Al-Benna S: Burns associations and societies websites - do they provide enough information for patients and doctors? *Burns*, 35: S42, 2009.

- 10 United Nations. Member states. <https://www.un.org/en/member-states/> Date accessed: April 12, 2020.
- 11 International Society for Burn Injuries. <https://worldburn.org/> Date accessed: April 12, 2020.
- 12 European Burn Association. <https://www.euroburn.org/> Date accessed: April 12, 2020.
- 13 Asia Pacific Burn Association. <http://apburn.org/> Date accessed: April 12, 2020.
- 14 Al-Benna S: The paradigm of burn expertise: scientia est lux lucis. *Burns*, 40: 1235-1239, 2014.
- 15 Al-Benna S, O'Boyle C: Burn care experts and burn expertise. *Burns*, 40: 200-203, 2014.
- 16 Al-Benna S: A discourse on the contributions of evidence-based medicine to wound care. *Ostomy Wound Manage*, 56: 48-54, 2010.
- 17 Huang Z, Zhuang D, Xiong B, Deng DX, Li H, Lai W: Occupational exposure to SARS-CoV-2 in burns treatment during the COVID-19 epidemic: specific diagnosis and treatment protocol. *Biomed Pharmacother*, 127: 110176, 2020.
- 18 Tariq G, Veenman GR, Lackalabudi SA, Reyes MAMA et al.: Wound care link nurses program. *World Counc Enterostomal Ther J*, 38: 10-16, 2018.
- 19 Al-Benna S, Tariq G: Wound care education in the developing world. *Wounds Middle East*, 4: 6-7, 2017.
- 20 Al-Benna S: Availability of COVID-19 information from national and international aesthetic surgery society websites. *Aesthetic Plast Surg*, 44: 1043-1046, 2020.
- 21 Al-Benna S, Gohritz A: Availability of COVID-19 information from national plastic surgery society websites. *Ann Plast Surg*, 2020 May 4. doi: 10.1097/SAP.0000000000002447.
- 22 Li N, Liu T, Chen H, Liao J et al.: Management strategies for the burn ward during COVID-19 pandemic. *Burns*, 46: 756-761, 2020.
- 23 Ma S, Yuan Z, Peng Y, Chen J et al.: Experience and suggestion of medical practices for burns during the outbreak of COVID-19. *Burns*, 46: 749-755, 2020.
- 24 Barret JP, Chong SJ, Depetris N, Fisher MD et al.: Burn center function during the COVID-19 pandemic: an international multi-center report of strategy and experience. *Burns*, 46: 1021-1035, 2020.
- 25 Saha S, Kumar A, Dash S, Singhal M: Managing burns during COVID-19 outbreak. *J Burn Care Res*, 2020, doi:10.1093/jbcr/iraa086
- 26 Farroha A: Reduction in length of stay of patients admitted to a regional burn centre during COVID-19 pandemic. *Burns*, 2020, doi:10.1016/j.burns.2020.05.028
- 27 Kamolz LP, Schiefer JL, Horter J, Plock JA: COVID-19 and burns: lessons learned? *Burns*, 2020, doi:10.1016/j.burns.2020.05.015
- 28 Farroha A: Effects of COVID-19 pandemic on burns epidemiology. *Burns*, 2020, doi:10.1016/j.burns.2020.05.022
- 29 Brewster CT, Choong J, Thomas C, Wilson D, Moiemem N: Steam inhalation and paediatric burns during the COVID-19 pandemic. *Lancet*, 30: 395:1690, 2020.
- 30 Ilenghoven D, Hisham A, Ibrahim S, Mohd Yussof SJ: Restructuring burns management during the COVID-19 pandemic: a Malaysian experience. *Burns*, 46: 1236-1239, 2020.
- 31 Al-Benna S: Concepts of management of plastic surgery services during the Coronavirus Disease 2019 pandemic. *Eur J Plast Surg*, 2020, <https://doi.org/10.1007/s00238-020-01704-1>
- 32 Al-Benna S: Management of hand surgery services during the Coronavirus Disease 2019 pandemic. *J Hand Microsurg*, 2020, <https://doi.org/10.1055/s-0040-1714440>
- 33 Al-Benna S: Impact of COVID-19 on surgical registrars' education and training. *S Afr J Surg*, 58: 10-13, 2020.
- 34 Al-Benna S, Rajgarhia P, Ahmed S, Sheikh Z: Accuracy of references in burns journals. *Burns*, 35: 677-680, 2009.
- 35 Al-Benna S, Al-Ajam Y, Alzoubaidi D: Burns surgery handover study: trainees' assessment of current practice in the British Isles. *Burns*, 35: 509-512, 2009.
- 36 Al-Benna S, Patani N, Al-Ajam Y: Burns is not in the core curricula of medical schools in the United Kingdom. *Burns*, 34: 902, 2008.
- 37 Al-Benna S, Alzoubaidi D, Al-Ajam Y: Evidence-based burn care - an assessment of the methodological quality of research published in burn care journals from 1982 to 2008. *Burns*, 36: 1190-1195, 2010.