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## Reply re: COVID-19 Recommendations From Ophthalmic and Plastic Reconstructive Surgery Societies Worldwide<sup>1</sup>

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To the Editor:

We hope that our reply will address questions raised by our Brazilian oculoplastics colleagues. We conducted an unbiased study regarding COVID-19 recommendations provided by oculoplastics societies worldwide. We aimed to include all 38 oculoplastic societies, found after searching the 235 countries and areas included in the United Nations 2019 World population prospectus, by directly contacting them. We would like to thank the authors of “Re: COVID-19 Recommendations From Ophthalmic and Plastic Reconstructive Surgery Societies Worldwide” for sharing the Brazilian Society of Oculoplastic Surgery (SBCPO)’s guidelines with us. To date, no other oculoplastic society have taken issue with our findings.

Firstly, we would like to clarify the difference between Figures A and B. Both figures classify oculoplastic societies’ COVID-19 recommendation status: dark green covers areas with available recommendations (e.g., OPAI’s published guidelines for Indian oculoplastic surgeons<sup>2</sup>), light green are societies referring members to another oculoplastic or ophthalmology society like the Italian society that follows the European Society of Ophthalmic Plastic and Reconstructive Surgery’ (ESOPRS) recommendations, orange are societies that did not reply to our COVID-19 recommendation inquiries, pink are oculoplastic societies that did not have accessible contact information, and grey regions do not have an oculoplastic society. Figures A and B display different geographical types of oculoplastic societies. Figure A maps all 30 *national* oculoplastic societies, where SBCPO was initially included in orange. Figure B maps official oculoplastic societies covering *regions* (larger areas incorporating more than one country), such as APSOPRS, ANZSOPS, ESOPRS, ISOPRS, NOSOPRS and NASAOS, and does not represent affiliations like the ASOPRS-ESOPRS-SECPOO-SAPO-SOCHOP-ACPO collaboration mentioned in our colleagues’ letter, since this partnership is not a society in itself. We would like to addend Figure B, which now shows the Pan-American and Middle East Africa regions in orange

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because their respective oculoplastic societies (SOPANOP and MEASOPRS) did not reply to our email inquiries as detailed in the Supplemental Digital Content 1.

With regards to SBCPO's specific COVID-19 guidelines, we originally searched for COVID-19 related announcements on their bilingual webpage. Since COVID-related content was not easily found and the SBCPO email address is not publicly available, we contacted them twice per our study's methodology via their contact webpage (<https://www.sbcpo.org.br/contato/> and <https://en.sbcpo.org.br/contact/>) on both May 19 and 22, 2020 with no reply. We thank our colleagues in SBCPO for their letter to the editor, which clarified their recommendation status after our study was published and specified how we can access these valuable guidelines. When we initially searched for COVID-19 recommendations on the SBCPO website, we thoroughly inspected the content displayed after selecting the English language flag. As mentioned in their letter, SBCPO has a public English webpage (<https://en.sbcpo.org.br/>), which should have the exact equivalent on the Portuguese webpage. In our prior search on the English webpage, the "news" and "videos" subheadings were not present on May 27, 2020 nor August 24, 2020. To access the COVID-19 guidelines, the reader needs to inspect the Portuguese webpage (available after selecting the Brazilian flag), and scroll down to the webpage's "notícias" section. Once there, the reader must click on the subheading "notícias", where 4 news banners are COVID-19 related, published on March 16, 17, 23 and most recently July 12, 2020.

Their first COVID-19 related news recommends that people limit physical contact and handwash frequently as there are no COVID-19 vaccines and the virus transmits via droplets. SBCPO further refers members to the Brazilian Society of Infectious Diseases report, and provides a clear table differentiating COVID-19 symptoms (more commonly: fever, dry cough, breathing difficulties) from the common cold (notably body pain, sore throat, nasal discharge). On March 17, 2020, the SBCPO president encouraged common surgical mask use (indicated for infected people), and more specifically N95 and PFF2 masks for health professionals dealing with infected patients. On March 23, 2020, SBCPO announced the suspension of consultations and elective procedures and provided detailed recommendations to their members about urgent conditions (e.g., pain, low vision or foreign body sensation cases, presence of inflammation/infection, malignant tumor symptoms), urgent surgeries that must be performed to prevent visual loss and permanent damage (e.g., tarsorrhaphy, biopsies and potentially enucleation for tumors, orbital abscess drainage), telemedicine advice (e.g., management of orbital disease and medication use when possible via telephone, remote evaluation of patients after dermis fat grafts, and clear encounter documentation directly in patient charts). On July 12, 2020, the SBCPO vice-president provided guidelines for resuming oculoplastics activities.

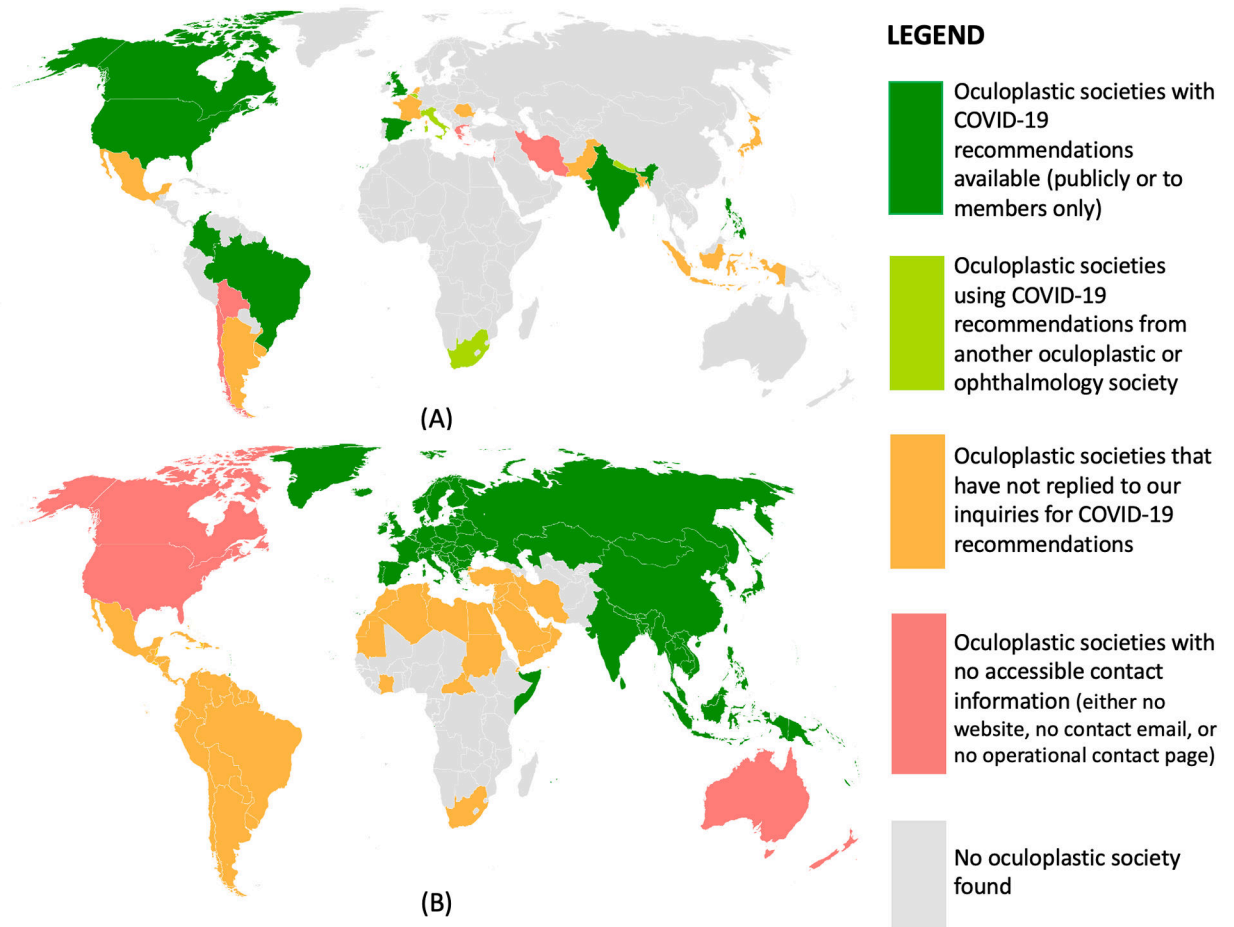
We thank our colleagues in Brazil for highlighting the SBCPO's guidelines which are crucial in the fight against the COVID-19 pandemic. We hope that our letter clarifies these recommendations, as these measures will assist all oculoplastic surgeons, particularly those in Portuguese speaking countries.

## Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

## References

1. Nguyen AX, Gervasio KA, Wu AY. Covid-19 recommendations from ophthalmic and plastic reconstructive surgery societies worldwide. *Ophthalmic Plast Reconstr Surg* 2020;36:334–45. [PubMed: 32658132]
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**Figure.** Maps of COVID-19 recommendations by available oculo- plastic societies around the world. **A**, Per country (e.g., ASOPRS and SBCPO). **B**, Per region greater than a country (e.g., NASAOS and SOPANOP).