

# Aesthetic medicine during the COVID-19 pandemic. How should we proceed in times of uncertainty?

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#### ABSTRACT

Aesthetic medicine is a rapidly developing field of medicine. Year on year, the number of patients who undergo cosmetic ambulatory procedures increases. The COVID-19 pandemic affected all branches of healthcare including aesthetic medicine. Therefore,

# INTRODUCTION

The unprecedented pandemic of COVID-19 has reorganized the contemporary world. SARS-CoV-2 was 1st reported in December, 2019 in Wuhan, China [1, 2]. Since then, the virus has spread all over the world and has become a major public health challenge. In order to tackle the pandemic, governments worldwide introduced restrictions and imposed social distancing rules. These novel regulations affected multiple branches of the economy including healthcare. Hospitals reorganized the way they are structured in order to provide the highest quality care for COVID-19 patients. At the same time, aesthetic ambulatory procedures were suspended as the vast majority do not have a curative aim.

In this paper, we would like to present our view and share our personal experiences of ambulatory aesthetic clinic management during this unprecedented period. We do not intend to elaborate on or lay out strict step-by-step guidelines and recommendations. Nevertheless, our aim is to stress some crucial aspects of safe and ethical care in the field of aesthetic medicine.

# THE ROLE OF BEAUTY

The concept of beauty has always been present in human thought and has deep philosophical roots. For instance, Plato, one of the greatest and most influential philosophers of all time, emphasized the role of beauty by including it in his triad of higher forms (Truth, Beauty and Good).

In the contemporary world, medicine facilitates the pursuit of beauty and makes it more accessible than it has ever been before. Therefore, aesthetic and anti-aging medical procedures are rapidly developing branches of medicine and are becoming more popular, which significantly improves quality of life. A good body image is positively corelated with both physical and mental health regardless of race and gender [3]. Women establishing safety protocol is of paramount importance in order to provide safe and ethical care.

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are, however, more likely to seek cosmetic procedures than men [4]. This phenomenon exemplifies the benefits of aesthetic medicine and cosmetic surgery.

# SHORTAGE OF GUIDELINES

Several safety procedures were described for both non-operative [5, 6] and operative [7, 8, 9, 10, 11] medical specialities including aesthetic surgery [12]. There is a shortage of COVID-19 guidelines dedicated for aesthetic medicine [13] proposed by national and international associations, despite the fact that these are necessary to provide safe and ethical care. There are multiple reasons which may lead to the viral transmission in an aesthetic clinic, yet there are not many papers targeting ambulatory aesthetic procedures [14, 15].

# HOW TO PROCEED?

It is vital to briefly lay out easy-to-follow guidelines and adjust them to a particular clinic. From the standpoint of applicability, one should set recommendations separately for medical and non-medical staff and for different kinds of activities. Thereby, it is suggested to implement protocols for the following categories: medical receptionists, medical staff [i.e. physicians and medical cosmetologists], patient management and general housekeeping. Herein we would like to present crucial aspects which are easy to implement in any aesthetic clinic and are effective in reducing the risk of infection.

# **GUIDELINES FOR MEDICAL RECEPTIONISTS**

There are different activities conducted at different times of day. In the morning, before work begins, it is recommended

to disinfect hands with a 60% alcohol based disinfectant [16]. Subsequently, the temperature should be checked and noted in the temperature diary. In addition, it is recommended to turn on bactericidal at the reception desk for 30 min.

Since many SARS-CoV-2 carriers remain asymptomatic [8, 17], screening for potentially infected people is of a paramount importance. Therefore, in order to prevent the viral spread, patients ought to be phoned before the appointment to determine whether they are at risk of being infected. Specific questions medical receptionist should ask are as follows: COVID-19 symptoms i.e. cough, shortness of breath, fever [18] and gastrointestinal symptoms (nausea, vomiting or diarrhoea [19]), direct contact with individuals presenting aforementioned symptoms, traveling abroad within last 14 days, possible contact with COVID-19 positive individuals. In the event of an affirmative response to any of these questions, the appointment must be postponed for 14 days. When scheduling an appointment, the patient should be informed about safety precautions undertaken in the clinic.

In order to reduce the number of people in the waiting area, patients should be scheduled for appointments within an appropriate time frame. In the event of face-to-face contact, receptionists ought to wear a gown, a face mask and a face shield.

#### **GUIDELINES FOR MEDICAL STAFF**

Personal protective equipment (PPE) which should be utilized in a clinic include: eye protection (goggles and face shields), airway protection (surgical masks and respirators), hand protection (gloves – ensure gloves are put over the calf), body protection (gowns and disposable surgical caps). Personal protective equipment should be properly used by implementing the World Health Organization guidelines for putting on and taking off PPE [20]. However, some minor alterations may be introduced.

At the beginning of the day, after entering the clinic, medical staff should perform hand hygiene. In the cloakroom, a medical apron and face mask should be put on. Other PPE should be used when needed. It is advised to leave cell phones in a separate room and use them only during breaks and after performing hand hygiene.

Before the procedure, all necessary PPE and other equipment should be prepared in order to avoid moving between rooms (this also applies to office accessories such as pens). During the procedure, the patient is obliged to wear a mask unless the procedure is performed on the facial area. After the procedure, PPE should be taken off as described. Medical staff should not enter the reception area right after the procedure.

### PATIENT MANAGEMENT

Patients are encouraged to attend their appointments by themselves, comply with social distancing rules and wear face masks. On entering the clinic, they are asked to disinfect hands and put

gloves on. The receptionist checks the patients temperature using a non-contact thermometer. In the event of fever (38°C and more), the measurement is repeated 3 times. When results remain the same, the appointment is postponed for 14–21 days.

It is important to adjust waiting areas to these new circumstances. Patients are asked to sit in a dedicated area (1 person per sofa) respecting social distancing rules. Subsequently, the medical receptionist asks them to fill in a questionnaire regarding potential SARS-CoV-2 exposure and COVID-19 signs and symptoms.

Making patients feel assured and safe during their stay in a clinic should be a top priority. Therefore, it is suggested that each and every patient is guided by a medical receptionist to their appointment.

In order to reduce viral spread, contactless payment is advised. When payment is conducted otherwise, cash should be quarantined for several days. Moreover, once a patient has left, the clinic, reception desk, payment terminal and all devices which the patient came into contact with should be disinfected.

### **HOUSEKEEPING GUIDELINES**

In order to diminish exposure to SARS-CoV-2, physical barriers (plastic windows) should be installed at the registration desk. All non-essential materials such as newspapers, books and leaflets should be removed from the clinic [21].

We recommend implementing easy-to-follow general cleaning guidelines. First of all, cleaning staff should wear PPE i.e. gloves, surgical masks and disposable aprons. Secondly, all medical waste must be placed in a dedicated container. Moreover, frequently used items such as chairs, pens and metallic surfaces ought to be cleaned with alcohol-based disinfectant.

Equipment which came into direct contact with a patient must be carefully disinfected. For instance, after taking pictures using VISIA®, the apparatus, keyboard and all surfaces touched by the patient i.e., the chair and interior of the VISIA® must be disinfected. The same rule applies to any other device utilized in the clinic.

We implemented the following end-of-day protocol:

1. All consultation and procedure rooms are aired, cleaned and disinfected.

- 2. A UV lamp is turned on for 30 min.
- 3. An Ozone generator is turned on for 15 min.
- 4. All staff perform hand hygiene.

It is important to note that equipment operating time is set in accordance with the user manual.

#### CONCLUSION

COVID-19 is an enormous challenge for healthcare professionals worldwide. Some carriers of the virus do not present any symptoms and therefore every patient should be treated as a potentially infected person. Implementing effective guidelines may reduce the risk of spreading the virus among both patients and medical staff and is crucial in providing the highest quality care in accordance with ethical standards.

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