**Covid-19 and continuity of care**

Press Release from the French National Academy of Medicine and from the National Academy of Surgery

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The management of severe forms of Covid-19 has profoundly disrupted the continuity of care during the first epidemic phase last spring due to the lack of preparation of the health care system. In a context of high hospital tension, some patients are deceased due to the lack of care in time. In addition to the postponement of screening, diagnosis and follow-up examinations for chronic diseases, the deprogramming of surgical procedures led to a loss of opportunity for many patients, especially those suffering from cancer, as well as a frequent psychological distress, with a considerable health and economic impact [1]. If heart and liver transplants could be maintained because of the vital risk [2], the temporary interruption of kidney transplants, as a precaution, has been found to cause the loss of more than a hundred grafts.

Worsened by an insufficient recourse to private practice and private hospitalisation, the saturation of emergency and intensive care units in public hospitals by patients with Covid-19 has created a bottleneck due to the lack of material and human resources, thus forcing to postpone the care of "non-Covid" patients.

The epidemic rebound in autumn, which began in summer, could not be avoided despite several warnings [3,4]. Faced with this second wave, which is proving to be higher than the former, the National Academy of Medicine and the National Academy of Surgery underline the need to learn from the lessons of the spring in order to take care of "Covid patients" without having to perform a selection to the detriment of "non-Covid" patients by respecting the rules laid down by the national professional councils of each speciality.

They recommend:

- to mobilise in a rational manner all human, material and medication resources available in public and private hospitalization by encouraging coordination between the health regional agencies and the regional bodies of the various federations (FHF, FHP, ESPIC);

- to use all available communication tools to inform the general public of the arrangements made by the health authorities to avoid the interruption of medical care, and essential surgical procedures;

- to inform patients that they should not cancel their consultation appointments;
- to think now about the future strategy for deconfinement, including an efficient and reasoned exit from the white plane to take care quickly of the patients deprogrammed during this second wave.