

COVID-19: Recommendations for Management of Elective Surgical Procedures in Aesthetic Surgery

This document is a strategic guidance built on generic principles to be operationalized in specific country-system contexts, according to local, regional and/or national requirements and jurisdiction

It is very likely that the health care infrastructure and resources of most countries around the world will be strained over the coming weeks because of the dissemination of COVID-19 particularly as it relates to care of the most critically ill patients.

Social distancing, crowd avoidance, and other techniques do help to flatten the curve of the dissemination of COVID-19, but beyond that, it is appropriate to be forward thinking regarding those patients who will, nevertheless, become infected.

ISAPS has additional comments on this issue. Following a careful review of the current situation and given the current guidelines of the World Health Organization and Center of Disease Control and Prevention, we recommend the following:

- **Each hospital, health system, and plastic surgeon should thoughtfully review all scheduled elective procedures with a plan to minimize, postpone, or cancel electively scheduled operations or other invasive procedures** until we have passed the predicted inflection point in the exposure graph and can be confident that our health care infrastructure can support a potentially rapid and overwhelming uptick in critical patient care needs.

- **Immediately minimize use of essential items needed to care for patients, including but not limited to, ICU beds, personal protective equipment, terminal cleaning supplies, and ventilators. There are many asymptomatic patients who are, nevertheless, shedding virus and are unwittingly exposing other inpatients, outpatients, and health care providers to the risk of contracting COVID-19.**

Don't put your elective patients at risk: An asymptomatic patient can turn into a complication patient through general anaesthesia, as we push the viruses into the lungs through ventilation. In addition, we weaken the immune system with every surgical procedure.

Every operation can cause complications that require hospitalisation and possibly intensive care, which is a scarce resource in corona times.

Keep in mind that every infusion, every ampoule of adrenaline you need for liposuction or an antibiotic that you give for prophylaxis in a breast augmentation might be needed for emergencies and is already in short supply on the world market and already no longer available in several countries.

Time is of the essence. Please be vigilant and take a leadership role in your practice setting so that these recommendations begin to take hold immediately.

Sincerely,

Dirk F. Richter – ISAPS President

COVID-19 Updates from the President

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March 20, 2020

Less than a week ago, The Aesthetic Society issued a recommendation that all direct patient contact and non-urgent procedures be curtailed as much as possible. The situation in the United States and around the world has only worsened. The entire state of California is under Stay at Home orders and similar restrictions were announced in New York today. In several urban areas, the Intensive Care Units are full of COVID-19 patients. Hospital space and off-site buildings are being urgently converted into ventilator units. There is a critical shortage of PPE and our colleagues on the front lines are intubating patients without appropriate masks or eye shields. All estimates by public health authorities indicate that we have several more weeks before the peak of the crisis is reached.

It is the official position of The Aesthetic Society that all non-urgent care, whether surgical or non-surgical (in-office or hospital-based), be ceased immediately. We will continue to monitor the situation on a daily basis and will provide regular updates. The Aesthetic Society urges everyone to consider donations of their time, supplies, PPE and equipment to local hospitals; in many areas, the shortages have reached crisis proportions.

We are all in this together. Let's get through it together.

Sincerely,

Charles H. Thorne, MD

President, The Aesthetic Society