

Present reality. What we can benefit from.

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Given the health situation affecting us, our lives have changed, including our profession. In regards to education, virtual learning has become fundamental, and –as many say– it has come to stay. Without a doubt, face-to-face interaction is essential in education, but virtuality allows us to include and come to places which are frequently difficult to reach because of distance. Besides, it enables a more inclusive and federal education, and also gives us the possibility to reach colleagues in other countries.

With regard to medical activity, specifically to the treatment of degenerative pathology of the hip and knee, we have come to the situation where it is considered a “non-urgent” pathology. This has led to situations in which patients severely limited by their impairment and pain have either not received adequate surgical care, or had their surgeries delayed. Our Association has expressed an opinion on this subject in an article referenced on a scientific paper named “*Worse than death*” and waiting for a joint arthroplasty (*Bone Joint J.*, 2019), which can be found on our website. There, an evaluation is made of those patients in the British health system who are waiting for an arthroplasty and the physical and mental deterioration that such situation can cause. This might relate to the present day, and it is of crucial importance to understand that patients suffering from this condition deserve –within the possibilities that the health system can provide– to be considered part of a priority group for surgical treatment. It is our responsibility to be informed about this reality and communicate such information on that group of patients to colleagues of other specialties, like therapists, infectologists, and general practitioners, as well as the auditors of health insurance services, both state-run and private.

Moreover, as health professionals, it falls to us to benefit from this difficult situation by improving to the maximum the conditions in which our patient enters the operating room, and by optimizing the post-operative period so the patient can be discharged as rapidly as possible, in appropriate conditions. Not only in order to lower the risk of acquiring COVID-19, but also to occupy beds the shortest time possible.

To sum up, as is often said, every crisis is an opportunity. We should seek to benefit from this one, and hope that, in the near future, we will be able to meet again in person to continue to share our knowledge and experience.

I send my warmest regards.

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