



AN UPDATE FROM YOUNG OPHTHALMOLOGISTS IN THE ASIA-PACIFIC REGION

YO ACTIVITIES, TRAINING AND THE IMPACT OF COVID-19 IN THE YEAR 2020

■ Dr Diva Kant Misra, Dr Marcus Ang, Dr Seng Kheong Fang

The COVID-19 outbreak has rapidly spread across the globe and one message is loud and clear: the virus knows no borders! At the time of this article, the virus has affected more than 4 million people, leading to more than 280,000 deaths worldwide in short space of months since WHO declared a global pandemic in March 2020. This outbreak has disrupted lives of billions around the globe, with healthcare workers at the forefront of the battle to keep this virus under control.

In the field of ophthalmology, the COVID-19 virus has also affected clinical practices and academic centers around the world – as ophthalmologists join the fight against the pandemic, while many eye care services have been limited to emergencies only. Ophthalmologists also face a possible heightened risk associated with exposure to the virus due to the proximity of patient contact during clinical examination, and the insidious clinical presentation of COVID-19 in some who may be mildly symptomatic or have non-specific manifestations such as conjunctivitis.

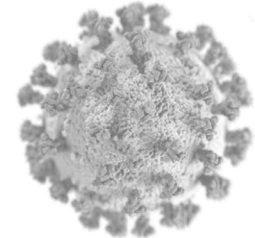
The personal and professional lives of young ophthalmologists (YOs) across the Asia-Pacific region have

been affected as well. Most have to balance added clinical responsibilities during the outbreak, with ophthalmology training or fellowships, while dealing with the risks of potentially bringing the virus home to their young families or elderly.

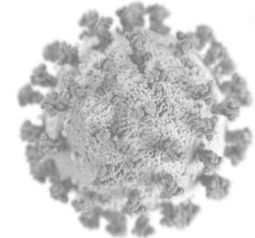
The Asia-Pacific Academy of Ophthalmology (APAO) is committed to supporting all ophthalmologists from our member societies during this difficult time, including the YOs. In this article, we provide an update on the ongoing developments of the YO committees in APAO, to serve as a potential resource for YOs to approach their societies for advice or help during this outbreak. We also summarize the perspectives of YOs from the Asia-Pacific region, sharing experiences and ways that the YOs continue to learn and practice in this extraordinary time.

We hope that everyone stays safe and healthy during this extremely difficult period, and that we may emerge stronger and meet up again at the next APAO Congress.

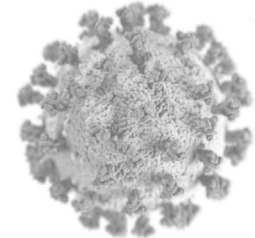
Summary of Young Ophthalmologists Committees in APAO



Country	Official YO Committee/Society	Status	Representative/Contact
Australia	2013, RANZCO Younger Fellows Advisory Group	Criteria: 10 yrs post-fellowship completion of training YO activities: Business development workshop, scholarships, social events	Chameen Samarawickrama (Chair)
Bangladesh	Not established yet	Criteria: Less than 45 yrs old YO activities: Started in 2018, YO sessions in National Meeting	Ashraful Huq Ridoy (Rep) Mahziba Rahman Chowdhury Mizanur Rahman (APAO YO Committee)
Brunei	Not established yet	Criteria: NA Two YO members, two more in training in Singapore	Helena Hurairah (Rep) Noor Affizan Rahman
Cambodia	Not established yet	NA	Saly Thearith (APAO YO Committee)
China	2017, COS	Criteria: <ul style="list-style-type: none"> Membership of the associate of Ophthalmology, Chinese Medical Association Associate professor or higher Less than 45 yrs old No more than 2 memberships per unit YO activities: assist the ophthalmology branch of the Chinese Academy of Medicine to hold academic conferences, annual ophthalmology conferences, and other international conferences	Kaijun Wang (Chair)
Chinese Taipei	Not established yet	Criteria: NA YO Activities: YO sessions in annual meeting	Tai-Chi Lin (Rep) Hung-Da Chou Wei-Chi Wu (APAO YO Committee)
Hong Kong, China	2016, HKOS	Criteria: All trainees and up to 5 yrs post-fellow training, no age constraint YO Activities: YO symposium, social events. The VR YO society (<40yo) with a longer history also has events in HK.	Joy See Leung (Chair) Lawrence Lu Ian Wong (APAO YO Committee)



Country	Official YO Committee/Society	Status	Representative/ Contact
Iran	Not established yet	NA	Mehran Zarei-Ghanavati (APAO YO Committee)
India	2014, Young Ophthalmologists Society of India (YOSI)	Criteria: Ophthalmologists in training, within 5 yrs of training or less than 40 yrs of age YO Activities: Two annual meetings, YO Times (quarterly publication)	Digvijay Singh (President, YOSI), Diva Kant Misra (Secretary, YOSI) (APAO YO Committee)
Indonesia	2019, PERDAMI YO	Criteria: Under 40 yrs old or within five yrs of ophthalmology practice YO Activities: (In progress) YO newsletter and planned YO symposium in 2020	Rina La Distia Nora Muhammad Bayu Sasongko Anggun Ramayudanta (APAO YO Committee)
Japan	Not established yet	NA	Yasuo Yanagi (Rep)
Malaysia	2020, Malaysia YO Special Interest (MYOSI) Group	Criteria: TBC YO Activities: In planning phase	Sudhashini Chandrasekaran Mae-Lynn Catherine Bastion (APAO YO Committee)
Laos	Not established yet		
Mongolia	Only YO workgroup	Criteria: Mongolian Ophthalmology Society member under 40 yrs old and in training or complete training within 5 yrs Approx. 70 members	Ijilmurun Enkh-Amgalan Munkhsaikhan Munkhkhuyag (APAO YO Committee)
Myanmar	Not established yet	There are currently 400 ophthalmologists, estimated 200 qualified as YO. YO Activities: Sessions in annual meeting	Aye Chan May Zun Aung Win
Nepal	Not established yet	Currently 350 ophthalmologists, with around 150 YOs Hoping for a platform in the future	Ashish Pant Anadi Khatri Qasim Chaudhry (APAO YO Committee)
Pakistan	Not established yet	NA: Ophthalmological Society of Pakistan	
Pacific Islands	Not established yet	NA: Pacific Eye Care Society	



Country	Official YO Committee/Society	Status	Representative/ Contact
Philippines	Not established yet	YO committee is currently a sub-committee of the Continuing Education Committee, Philippine Academy of Ophthalmology (PAO).	Charisse Sanchez-Tanlapco (Rep) Jubaida Aquino (APAO YO Committee) Sherman Valero (APAO YO Committee)
Singapore	2016, Singapore Society of Ophthalmology (SSO) YO Chapter	Criteria: In training and 5 yrs post-exit as a specialist YO Activities: 3 major goals of YO Singapore - education & training, local community work, and overseas outreach	Wong Chee Wai (Chair) Marcus Ang (APAO YO Committee Secretary) Desmond Quek (APAO YO Committee)
South Korea	2020, Korean Ophthalmology Society (KOS) YO Committee	Criteria: Hoping to improve training, education, and network building for YOs	Heeyoon Cho (Chair) Jeeyun Ahn Seung-Young Yu (APAO YO Committee)
Sri Lanka	Not established yet	NA: College of Ophthalmologists of Sri Lanka	Asela Hangilipola
Thailand	Not established yet	Criteria: NA Hoping for collaborations with other countries	Supanut Apinyawasisuk (APAO YO Committee)
Vietnam	Not established yet	NA	Minh Phu Nguyen (APAO YO Committee)

■ Global YO Symposium 2020

Before the COVID-19 pandemic outbreak was announced, the Singapore-Malaysia Joint Meeting in Ophthalmology hosted the Singapore Society of Ophthalmology (SSO) Young Ophthalmologists' inaugural 'Global YO Symposium' from 17-19 January 2020. We had more than 200 attendees from Asia Pacific, Europe, Africa, and the USA.

The YO symposium was extremely well received, with invited YO from all over the world, featuring a debate format with a live polling system, which led to passionate

discussion and sharing of clinical practices. YO leaders from APAO with other supra-national societies such as AAO shared their experiences in building YO programs. We also awarded twenty SSO YO Travel Grants and special awards to YO leaders. The YO symposium was celebrated at the YO Social where friendships and bonds were formed between YOs from all over the globe. We certainly hope that the YOs from APAO can come together once again, after this pandemic settles down!

35TH SINGAPORE-MALAYSIA JOINT MEETING IN OPHTHALMOLOGY
in conjunction with

1ST ASIA-PACIFIC OCULAR IMAGING SOCIETY MEETING

17-19 JANUARY 2020
ACADEMIA SINGAPORE

YOUNG OPHTHALMOLOGISTS' (YO2020) PROGRAMME HIGHLIGHTS

- YO Travel Grants reserved for YO attendees.
- Free paper, poster and surgical video presentations with Awards for best YO presentations.
- YO Social to network with international and regional YO and YO society leaders.

REGISTRATION

For more information on registration and abstract submission, please visit www.asophth.org/iso-apollo2020

Organized by
APOLS
Asia-Pacific Ocular Imaging Society

Malaysian Society of Ophthalmology



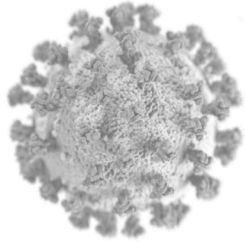
Dr Diva Kant Misra



Dr Marcus Ang



Dr Seng Kheong Fang



Dr Zoe Gao, a consultant ophthalmologist at Precision Eye Clinic, **Australia**, and Deputy Chair of RANZCO Young Fellows Advisory Group, writes:

"The practice of ophthalmology in Australia has changed significantly. Elective surgery was ceased on the 1st April and only emergency procedures were allowed as per the new triage guidelines produced by RANZCO. Nationwide, medical practitioners were transitioning to Telehealth. Despite ophthalmology being a specialty that does not lend well to examination via videoconferencing, eye surgeons across the nation have been innovative and resourceful. For the patients who still need face to face care, ophthalmologists are actively screening patients, using slit lamp shields, PPE where appropriate, and limiting patient numbers and time in waiting rooms.

Unfortunately, given the lack of surgery and decreased numbers of patients in clinic, RANZCO made the difficult decision to suspend training.

Australia and New Zealand look currently to have successfully 'flattened their curves'. On 21st April, the Australian Federal Government announced a plan to gradually lift the ban on elective surgery. This is positive news for our patients but as the COVID-19 situation is constantly evolving, I'm sure the situation will be reassessed and ophthalmologists will need to remain flexible throughout this challenge."



Dr Mahziba Rahman Chowdhury and **Dr Ashraful Huq Ridoy**, both consultants at **Bangladesh** Eye Hospital & Institute, update us on the condition in their country:

"Bangladesh's first case of COVID-19 was diagnosed on 8th March, and now the number of affected has exceeded 4,500 & the death toll is 140 till date.

The number of doctors affected has grown considerably and in spite of this, all our government & private ophthalmology hospitals remain open. Most eye hospitals have stopped elective surgeries, and are advising patients to come to hospital only if necessary. Also a precautionary screening measure is being followed at the hospitals and till now no ophthalmologist or ophthalmic worker has been affected.

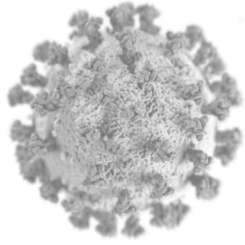
Coming to young ophthalmologists, apart from scheduled hospital duty hours, they are providing telemedicine via

phone & social media. They are also enthusiastically attending the online CMEs/Web-meetings. But ophthalmic training has suffered in all institutes all over the country as there are fewer patients, and almost no surgical procedures. All international fellows have had to go back to their respective countries as all scheduled training program for international candidates had to be suspended indefinitely.

On a positive note, all our colleagues are optimistic that eventually, this crisis will end and we will once again be able to get back to our normal schedule."

@ Bangladesh





Dr Phuntsho Dorji from **Bhutan**, who is pursuing a vitreo-retina fellowship in India, writes:

"In my country there are only 6 confirmed cases of COVID-19 though we lie in between the two Asian giants (China and India).

Our government had put in place strict and timely preventive measures. All educational institutes were closed both in my country and also in India, where I am currently pursuing my fellowship.

I was called by the government to return immediately to my home country as there was an acute shortage of health personnel. Therefore, I have returned and joined the work force in my country. Though I am not directly involved in

COVID-19 mitigation program right now, I am looking after our own eye department. Currently, our optometrists and eye technicians have been deputed to look after the flu clinic in shift basis. There is a decrease in the number of patients attending the routine eye clinic and surgical cases. In my country, our new eye hospital in the capital has been converted to COVID-19 isolation center with all state-of-the-art ventilators, operation theaters, and indoor wards. Till now, there is no COVID-19 related ocular complications noted in our country."



Dr Nur Nadiah Jeludin, a first year resident, and **Dr Helena Hurairah**, a consultant ophthalmologist, give us an account of COVID-19 situation in **Brunei**:

"The current COVID-19 pandemic has impacted Brunei Darussalam, a country with a population of about 450,000, affecting the way of living, education, and the economy. Brunei Darussalam is fortunate that the number of new cases has declined. However, we cannot put our guard down or become prematurely complacent.

We have greatly reduced the eye care services in Brunei Darussalam to non-essential clinical work including temporarily suspending all elective surgical procedures to allow ophthalmic doctors, nurses, and other allied health care professionals to aid with the screening process for COVID-19 suspect cases and to assist in increasing the

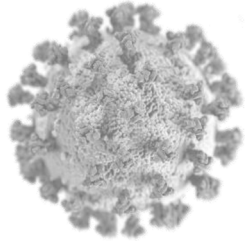
awareness of public health practices.

As a young ophthalmologist in training, COVID-19 has directly impacted our training due to the increased demand for deployment of manpower towards combating and managing the current pandemic. As young

ophthalmologists, we have been deployed to render our services whenever the need arises.

This has resulted in time away from training and less emphasis on teaching. It is quite unclear when the situation will improve. However, we continue to remain optimistic and more importantly, now, our priorities lie in assisting in Brunei's efforts and initiatives to continuously combat and contain the COVID-19 pandemic."





Dr Chansathya Khiei, a consultant ophthalmologist from **Cambodia**, writes about his struggle during the COVID-19 times:

"I had recently finished my fellowship in 2019 and 2020 was supposed to be my year in ophthalmology and never would I imagine that 4 months into 2020, life, as we know it, has changed so drastically.

The first case of COVID-19 reported in Cambodia was in late January, at that time I didn't think it would be causing the damage it is doing right now. Fast-forward 3 months, schools are closed, traffic ban are instated, social distancing is implemented, and ophthalmology clinics are accepting mostly emergency cases only. Personally, for me, the impact is on how to maintain a routine workflow amid this global

pandemic, which can impact both academically and financially.

The biggest negative impact in our country is the residency training program. Our program is a tight three-year training but with the current situation, our batch of first years has not been able to start, while the third-year residents are struggling to get sufficient surgical practice in their final year of training. I would also like to emphasize the impact it has on our psyche, which will cause distress to our daily lives and will stay with us for a much longer period."

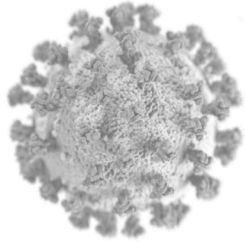


Dr Tian Tian from Xinhua Hospital, affiliated to Shanghai Jiaotong University, **China**, writes:

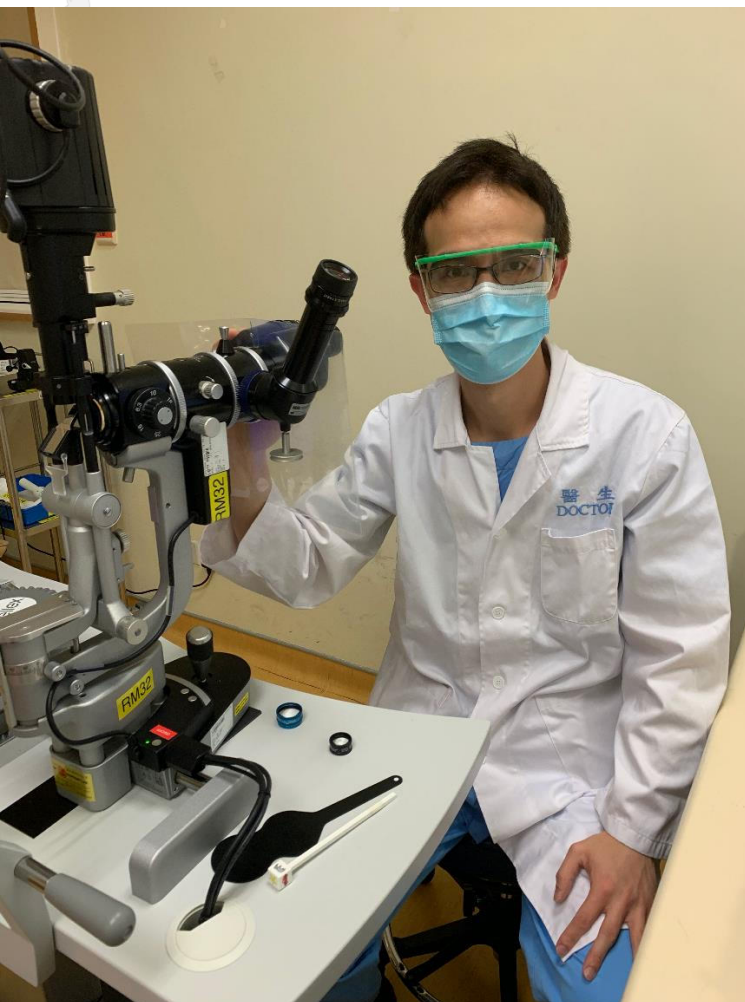
"Due to the COVID-19, the number of patients decreased significantly in our department because most of the patients came from other cities for hospitals in big cities, such as Beijing and Shanghai. For this perspective, young ophthalmologists have fewer chances to practice clinical skills. On the other hand, they got more time to process the clinical or basic research data for studies.

In addition, conferences cannot be held as scheduled in China due to the COVID-19 and have been transformed to

virtual. In my point of view, virtual meetings are more efficient, and the young ophthalmologists can learn from experts everywhere. the pandemic also inspires me to think more about the meaning of life. Life is so fragile when facing diseases and natural disasters. Now the world is suffering from the COVID-19. We human beings should unite and fight together. As a young ophthalmologist, we should step forward bravely when the country calls for us."



Dr Lawrence Lu, Associate Consultant at Prince of Wales Hospital, Hong Kong, and Committee Member of YO Chapter, HKOS, and **Dr Joy See Leung**, Associate Consultant of Tung Wah Eastern Hospital, and founding and current President of YO Chapter, HKOS, describe the COVID-19 situation in **Hong Kong**:



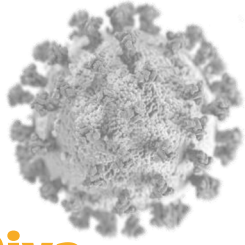
"While we have not forgotten the SARS epidemic, which affected Hong Kong 17 years ago, the COVID-19 came in a much greater and unprecedented scale.

Multiple new infection control measures were implemented to minimize COVID-19 infection in healthcare workers and patients.

The impact on training of our YOs was tremendous. All overseas training activities including electives, observerships, and conferences were suspended to retain manpower locally, in case support to other medical departments were needed. Educational activities such as revision courses, grand rounds, and tutorials were called off. Inter-hospital rotations were stopped, and training opportunities were reduced as clinical work decreased. Fellowship and membership examinations were postponed till further notice. Research activities were also suspended.

While there were many negative impacts from the crisis, it has also intensified our sense of responsibility and passion. It was touching to see some YOs volunteer for deployment to medical department to combat the battle.

We sincerely hope our YO friends from all over the world would stay strong and safe, and overcome the COVID-19 together!"



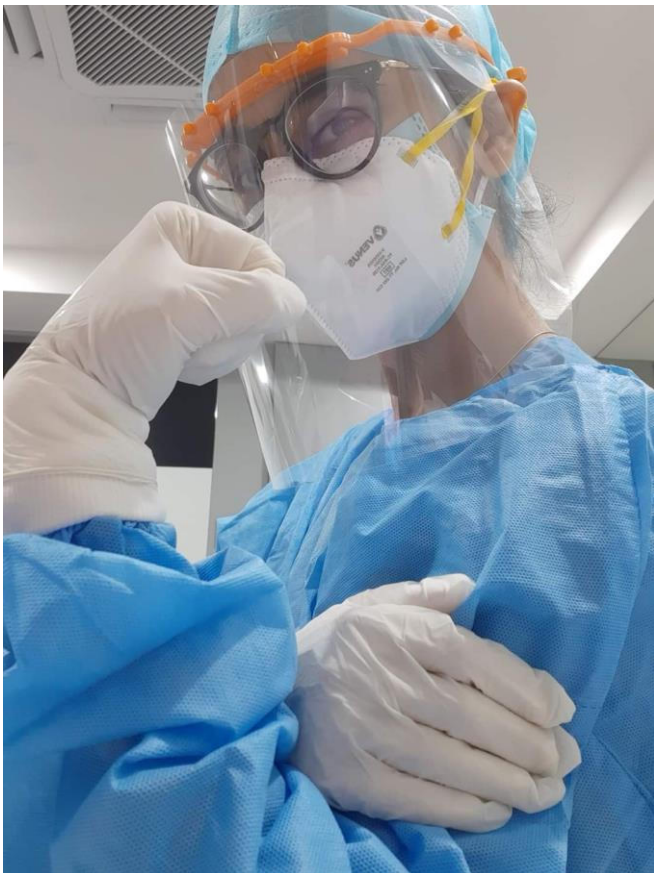
Dr Digvijay Singh, President of Young Ophthalmologists Society of India (YOSI) and **Dr Diva Kant Misra**, Secretary of YOSI, tell us the **Indian** part of the COVID-19 story:

"On the day of writing this report, India had over 30,000 cases with more than 1,000 deaths. The country of 1.3 billion people has been under complete lockdown for 40 days and the end is not seeming near. All elective procedures have been put on hold and only emergency cases are being catered. Hospitals and clinics are on standby for a possible surge in COVID-19 cases and over 1 lakh (hundred thousand) isolation beds are ready for use.

It is the young ophthalmologists who have been amongst the hardest hit. Many are on the frontline battling both the disease and the shortage of PPEs. Their training has been affected severely, though academic teaching continues online. Many trainee ophthalmologists, who were preparing to appear in examinations, now face an agonizing wait due

to indefinite postponements. The career of ophthalmologists who had recently completed training and were looking for jobs or fellowships are at a standstill. Opportunities are likely to shrink and remuneration may not be the same anymore. Those in jobs are surrounded by uncertainty in terms of pay cuts and layoffs. Those who had recently invested in a new practice find themselves under huge financial burden and it might be difficult for them to sustain the practice.

Considering that we are facing a new world post-COVID, we are busy preparing ourselves in every way we can and know that with team effort and collective intelligence, we will all succeed. Young ophthalmologists of India look forward to collaborating with others, from Asia-Pacific and the world, to grow stronger than ever."





Dr Chairissy MD, Dr Laksmi YA, Dr Prasetyo K, Dr Sastradiwirja RPP, Dr Vera IS, Dr La Distia Nora R and Dr Sasongko MB apprise us of the current situation in **Indonesia:**

"The global pandemic of COVID-19 has shifted the equilibrium of health care services in Indonesia.

A quick survey of 187 young ophthalmologists in Indonesia has documented that the overall number of outpatient visits and elective surgeries were reduced by almost 75%, raising multiple consequences in many aspects. From the perspective of the care provider, this pandemic hit hospital/clinic revenue, with the possibility of layoffs or salary cuts, thus forcing several eye care facilities to stop operating temporarily.

Nevertheless, this circumstance elicits two possibilities: first, a potential 'outbreak' of ophthalmic patients upon the

resolution of this pandemic era; and second, if the pandemic persists, there is an urgent need to introduce a new model of eye care adapting to the new 'homeostasis'. Many have iterated the promise of teleophthalmology to sustain the eye care following the uncertainty of this pandemic. Indonesia, with its unique characteristics of dense population and extensive islands, may exhibit the virtue of teleophthalmology in the near future.

As the young generation of ophthalmologists in the country, we have strong confidence to initiate this change!"



Dr Sudhashini Chandrasekaran, a consultant ophthalmologist at Ampang Hospital, Malaysia, and President of Malaysian Young Ophthalmologists Special Interest Group, writes about the impact of COVID-19 in **Malaysia:**

"Since the outbreak of COVID-19 in Malaysia, ophthalmologists have only been handling urgent and emergency cases. For the young ophthalmologists who started this year enthusiastically, it has been quite a blow with postponements and cancellations of conferences, fellowships, surgical trainings, examinations, and gazettements.

As disappointing as it may seem, we are also aware of the fact that this is the time when we respond to our calling as healthcare workers. Despite the constant fear of bringing the notorious SARS-COV-2 home to our loved ones, there is also a sense of fulfilment in doing what we set out to do.

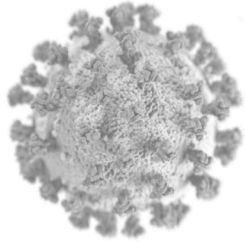
The Malaysian health ministry has been acting swiftly and brilliantly in managing this unprecedented situation.

Currently, each state has a designated COVID-19 hospital and non-COVID cases are referred to other centers. All non-urgent cases are postponed and strict screening procedures are undertaken before any patient is seen. Our daily cases are reducing in number but it is too early to conclude it will remain so.

The situation appears uncertain but we believe it is a battle we will win."

@ Malaysia





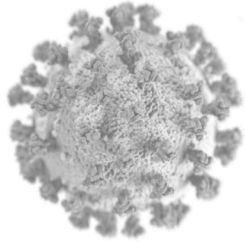
Dr Undarmaa Tumurbaatar, Dr Uyanga Enkh-Amgalan, Dr Sarangerel Enkhsaikhan, Dr Khostuya Byambasuren, Dr Khash-Erdene Tovuujav, Dr Oyunzaya Luvsantseren, Dr Munkhtsatsral Lundas, Dr Altantuya Sanjjav and Dr Ijilmurun Enkh-Amgalan write about the **Mongolian** experience with COVID-19:

"Since Mongolia announced its first COVID-19 case on 10th March, the number has risen to 38 at the time of this report, all being import cases. Mongolia has taken early measures to limit movements of public and grounding international flights, and close down schools and education centers. Scheduled surgeries have been postponed and emergency surgeries are being prioritized. There has been an increase in trauma cases due to alcohol and domestic violence. Mongolia does not manufacture vital surgical supplies and medicine, which could potentially lead to deficiency. There is an impact on learning with limitations to travel, expert visits, and group learning, and YOs are not being exposed to

challenging and unique cases. YOs with children have been offered leaves and flexible working arrangements. Rural doctors are working overtime and are prohibited to take leaves. Workload is increasing despite government restrictions. Due to excessive sterilization and disinfections, allergic conjunctivitis cases are increasing. There is a lack of PPEs leading to usage of self-made masks in surgeries. Overall, the impact of COVID-19 on Mongolian YOs has not been particularly unique to countries with no community spread. We expect the impact to be severe if Mongolia has community spread."

@ Mongolian





Dr May Zun Aung Win, Dr Aye Chan and Dr Yee Yee from Aung Department of Ophthalmology, University of Medicine, Yangon, Myanmar, write:

"There are a total of 146 confirmed COVID-19 cases and five deaths in Myanmar as of 26th April, 2020. The Government issued an emergency order to prohibit gatherings of more than five people in Myanmar, unless otherwise stated. Dusk-to-dawn curfew was declared from 10 pm to 4 am in Yangon, immediately in action from 18th April onwards until further noticed. A 200-bedded temporary hospital was just built for COVID-19 patients in Yangon.

All routine follow-up clinics and elective surgeries have been postponed. Only urgent operations are allowed to take place and it is recommended to avoid general anaesthesia use, if possible. Protocol-based disinfection of the operation theater

is performed after every surgery. Local and international guidelines are strictly followed in screening of COVID-19 to protect the patients and medical personnel in our ophthalmology clinics.

All lectures have become online and there is web-based learning for residents and junior ophthalmologists. Many young ophthalmologists have also volunteered to serve at the frontline.

April is the time of water festival and new year in Myanmar. Unlike any other years, we celebrated a very quiet and different new year this time around. However, we all are certain to fight against this pandemic in unity."

@ Myanmar





Dr Shaym Vyas, a young ophthalmologist from **Nepal**, writes his account:

"Being one of the poor counties with evolving health care delivery system, Nepal is struggling to fight against the current pandemic.

Eye health providers in Nepal are mostly NGOs and few private hospitals, so a uniform policy is difficult to formulate. Majority of secondary and tertiary eye hospitals are situated along the border between India and Nepal. Cataract surgery, which contributes maximum share in revenue generation in these hospitals, has been completely stopped for now due to its elective nature and no influx of patient from sealed border. The residents, fellows, and young ophthalmologist are the backbones of emergency eye care services and are trying their best to strive with available resources.



@ Nepal

It is likely that there will be pay cuts for the next few months and if condition worsens, one may be called to take unpaid leaves as well. With all happening around, academic activities cannot remain spared and resident classes have gone online. Enrolled fellows are uncertain about the start of their fellowship and those who recently completed may go jobless. Many young ophthalmologists have volunteered to attend calls from patients and explore to strengthen telemedicine services in the lockdown period.

In the midst of limited resources, the lack of standard protocol, threat to job security, and mental stress, young ophthalmologists

are fighting against the situation with pride."



Dr James Abraham B. Lee from UP-Philippine General Hospital, **Dr Jubaida M. Aquino** and **Dr Camille Elaine L. Zabala** from East Avenue Medical Center, write about the COVID-19 situation in **Philippines:**

"In the Philippines, as in the rest of the world, turmoil, unrest, uncertainty, and loss seem to be the recurring theme. The Philippine Academy of Ophthalmology has recommended all its members to postpone all elective outpatient visits and surgeries. Though necessary, this translates into loss of income and opportunities because for the typical Filipino doctor, it's 'no work, no pay'.

The momentum of fresh graduates from ophthalmology residency programs is placed on hold, with the indefinite postponement of the certifying board examinations. This may result to delays in scheduled fellowship plans as well.

YO's are playing a key role as they have set aside their ophthalmoscopes in exchange for their old trusty stethoscopes. Like soldiers in battle, they don hazmat suits and personal protective equipment, and start to go on regular duties at the COVID-19 wards.

Ophthalmology training has been reduced to online lectures and consultations are being done electronically. Some research has been temporarily paused for a lack of subjects, while others involving COVID-19 and the eye have been started.

The YOs are at the frontline in the battle against COVID-19, 'Eyeliners' as some residents would like to call themselves. But more than this, the young ophthalmologists of today are also in the forefront of developing creative strategies to usher us into the 'new norm' of ophthalmology practice.

While the future holds more questions than answers and with so much uncertainty, by God's grace, the Filipino bayanihan spirit and resilience will reign in these young, selfless doctors."





Dr Chee Wai Wong, Chair of Singapore Society of Ophthalmologists YO, and **Dr Marcus Ang**, Secretary of APAO YO Committee, from Singapore National Eye Center and **Dr Nicola Y Gan** from National Health Group Eye Institute, write about **Singapore's** battle with COVID-19:

"Barely two weeks after meeting YOs from all over the world during our inaugural global YO symposium in January 2020, YOs in Singapore experienced a dramatic turn of events. Singapore was one of the first countries outside China to be affected by the COVID-19 pandemic and accordingly, our YOs were among the first in the world to experience severe disruption to their training, practice, and daily lives. To prevent cross-hospital contamination, some of our YOs

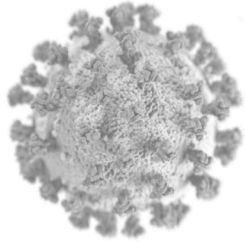
could not continue their residency or subspecialty training. Even those lucky enough to stay in their primary training hospitals were not spared from a sharp drop in surgical numbers. Some had to leave their ophthalmic practice behind to care for COVID-19 patients at the frontline. Singapore was hit by a second wave of infections that brought about even stricter restrictions on our ophthalmic practice nationwide. Our country has entered a month long 'circuit breaker' with all non-essential surgeries and clinic

appointments deferred since early April 2020. Nevertheless, many YOs have answered the call to serve the nation by volunteering to screen and manage patients with COVID-19 in high risk areas. At the same time, our YOs have supported each other by sharing educational resources, participating in webinars, and keeping in touch virtually over Zoom. We are grateful for this camaraderie to weather us through the COVID-19 pandemic and many more months of rebuilding our practice, training, and lives in the aftermath.

Living through such a crisis reveals the importance of a strong and closely knit YO community. Be strong and stay safe, colleagues!"



@ Singapore



Dr Hung-Da Chou, a vitreoretinal attending surgeon at Chang Gung Memorial Hospital, Linkou Medical Center, describes the situation in **Taiwan**:

"Due to our previous haunting experience of Severe Acute Respiratory Syndrome (SARS), Taiwan people and government have responded to COVID-19 swiftly and cautiously.

We are fortunate that most of our public facilities and hospitals are still running. However, to cope with the virus, unconventional measures have to be considered and our young ophthalmologists have been very helpful and creative. The face shields offered by the hospital are fine for most specialties, but for ophthalmologists, it is not practical since we need to utilize the BIO intermittently in a regular manner. Therefore, our YOs brainstormed and brought up some revised versions. Our young doctors adopted in-hospital

telemedicine by setting up a video clinic using online meeting and remote control applications.

As for the training of our YOs, since our clinics and surgical operation still run as usual, it has not been greatly affected although there were slightly lesser elective surgical listings. Unfortunately, our international fellows are the ones affected most as some had to return back and the ones who stayed have been away from their family.

We pray for this global pandemic to be over as soon as possible. Despite all the drawbacks, we are pleased to say that the APAC YOs have been more acquainted with each other. APAC YO will rise from this tough situation and united we stand, together we will contribute to the society in many years to come."

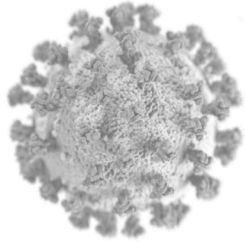
Telemedicine clinic:
Patients sit in front of the computer,
doctors can control the video/audio
from distance and talk to patients



Home-made face shield



Easy to use with BIO!!!



Dr Susama Chokesuwattanaskul and Dr Phit Upaphong from Department of Ophthalmology, Faculty of Medicine, Chiang Mai University, Thailand, update us with the situation in **Thailand**:

"In Thailand, as several measures have been established to control the disease mainly by limiting the non-emergency cases visiting the hospital, the number of patients at either the out- or in-patient clinics are markedly reduced. The non-emergency surgeries are postponed.

However, at the time of crisis, some opportunities are being offered as well. A great variety of innovations/applications are being developed via fast track, in order to avoid the spreading. However, with the reduction of elective cases, the opportunity of residents for practicing their surgical skills are limited and these skills are somehow irreplaceable by other means. As the fact that the skills require a continuum of learning throughout our professional life, the problem is dramatically but not permanently affecting the training.

In general, the situations of patient overload happen in most out-patient clinics in Thailand. At the university hospital, most residents are responsible for 20 to 40 patients per day. Optimistically, with the limited number of patients, more time is available for spending thorough examinations. This also allows more friendly environment of teaching and learning at the out-patient clinics. For the COVID-19 infection itself, as the conjunctivitis has been reported as one of its clinical manifestations, all ophthalmic examinations are performed with highly cautions. However, all confirmed cases (2 cases) of COVID-19 at Chiang Mai University have reported no ophthalmic symptoms, so we have no experience in examining the eyes of the COVID-19 patients. Hopefully, the situation will soon pass and everyone can safely return to their normal life."

- All of us are facing a rather gloomy time battling the deadly enemy in different ways according to our country's situation, yet the common thread of hope, optimism and determination to emerge victorious out of this crisis binds us all. This hope and our efforts are going to bring back relatively normal and certainly happier times again in our lives.