

## **Continuing Spine Learning during COVID Crisis: An experience from Kathmandu Nepal**

Since the report of first SARS COV-2 case in Wuhan china in December 2019, 373962 have succumbed to COVID-19 till today (June 1, 2020), millions more are infected and the new cases are increasing day by day globally. The first COVID case in Nepal was reported on 23 January 2020 when a 31-year-old student, who had returned to Kathmandu from Wuhan on 9 January, tested positive for the disease. Till today there are in Nepal 1572 confirmed cases and 8 people have died of COVID 19 (June 1 2020, 12:15 pm).

The COVID crisis has crippled the whole world and life has come to a standstill. Lockdown has been enforced, schools are closed, public places are shut, public transportation is closed and a special government pass is required to go from one district to another within Nepal. The health sector is under great strain due to lack of proper public health infrastructure, lack of strong leadership and economic disparity. Health care providers are having an equally difficult time as there is insufficient testing capacity, a lack of proper PPEs, lack of financial security and the need to cover duty on odd hours keeping families at risk. On the other hand, regular inter and intra-departmental meetings are on hold, conferences and workshops are either postponed or canceled hampering the knowledge upgradation and skill acquisition.

During these changing circumstances, various professional societies are offering free webinars which remained very useful to keep up-to-date and also provide the opportunity to interact with experts albeit virtually. Most recently, **AO spine** (the leading global academic community for innovative education and research in spine care), organized a webinar on Degenerative Cervical Myelopathy (DCM) on 27<sup>th</sup> May, 2020, in which I participated virtually from my apartment in Kathmandu Nepal. It was a wonderful experience and great opportunity to learn about different aspect of the disease, its impact on patient's health and future research priorities for degenerative cervical myelopathy. Here is a brief summary of the program:

### **Program chairperson:**

Dr. Brian Kwon, a Canadian Spine surgeon from University of British Columbia, BC, Canada

### **Faculties:**

Prof. Michael Fehlings, University of Toronto, Canada

Dr. Mark Kotter, University of Cambridge, Cambridge, UK.

Dr. Benjamin Davies, University of Cambridge, Cambridge, UK.

The AO Spine RECODE-DCM study launched the top 10 unanswered research questions from their priority setting partnership. The study has the potential to change how people with DCM are diagnosed and treated in the future.

### **The top ten research priorities for DCM**

1. Raising awareness- among healthcare professionals and the public
2. Natural history
3. Diagnostic criteria
4. Assessment and monitoring
5. Pathophysiology
6. Rehabilitation
7. Novel therapies
8. Socioeconomic impact
9. Imaging technique
10. Individualizing surgery

### **Learning reflection:**

DCM is a most common cause of non traumatic spinal cord dysfunction among elderly affecting up to 5% of people over the age of 40.

Despite being so common (and the global burden is expected to increase due to increasing aging population), natural history and pathophysiology is still not fully understood.

Only 5 % get full recovery after surgery, while majority are left with problems such as pain, difficulty in using their hands or difficulty walking even after surgical intervention.

Major challenge for spinal surgeon is how to individualize surgery for patient with mild DCM. Still, there is lack of consensus when to operate on these cohort of patients and there are no proper guidelines on follow up as well.

Yet another dilemma is whether to operate or not in an asymptomatic patient with cord compression on imaging studies.

An important lesson that I have learned from this project was the need for intensive engagement of patients themselves in identifying research priorities regarding DCM. Its ultimately the patient's health that matters the most.

To summarize, this webinar was very useful to understand the major clinical spectrum and unresolved issues related to DCM. It was equally beneficial to me as I got a chance to learn the high research priorities in this field which could be applied in future in Nepalese context.

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## AO Spine Research Webinar—Defining the knowledge gaps to accelerate progress and advance outcomes in DCM, 27 May 2020

Dear Participant

Thank you very much for participating today in **AO Spine Research Webinar—Defining the knowledge gaps to accelerate progress and advance outcomes in DCM**.

Please find here further information on AO Spine RECODE-DCM Study: [https://aospine.aofoundation.org/about-aospine/news/2020/2020\\_05-recode-dcm-countdown-to-launch](https://aospine.aofoundation.org/about-aospine/news/2020/2020_05-recode-dcm-countdown-to-launch)

The video recording of the webinar will be available shortly. You will be informed by email.

To evaluate the quality of the webinar, we are conducting a survey, and your response would be valuable to us.

Thanks for your participation!

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Dear Prakash Paudel,

Thank you very much for registering for

**AO Spine Research Webinar—Defining the knowledge gaps to accelerate progress and advance outcomes in DCM**

The event starts on **Wednesday, 27 May 2020 at 15:00 Central European Summer Time**, please click [here](#) to find your local time and date.

**IMPORTANT**

The webinar will run under **Adobe Connect**. Please ensure your device is compatible and download the application **before** the event. For best results, please use **Google Chrome**.

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On 27 May 2020, the webinar link will be sent to you 30 minutes before the event begins. You will only be allowed to enter the webinar room 15 minutes in advance.

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