

Time to bring emergency medicine to the limelight in developing countries to fight pandemics like SARS-CoV-2 effectively

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This coronavirus pandemic has revealed the vulnerable spot in healthcare of both developing and developed countries. At the start of the pandemic and later, frontline doctors have faced the brunt of the disease. Most functions of hospitals were closed, and the majority of patients were coming to emergency departments across the country. This meant that emergency department staff were exposed to risk for which they were not trained. So far, a considerable number of doctors, nurses and paramedics have been affected by COVID-19. This situation has highlighted the importance of training for emergency doctors and nurses. Owing to exposure to this pandemic, these untrained doctors and nurses were at risk of burnout, anxiety and depression.

The number of affected people is steadily increasing and in all likelihood will continue. At the same time, easing of lockdown is seen as a precursor to the next wave of infection, potentially overwhelming emergency departments across the country. A better tailored and safe response requires trained individuals in the emergency department. Untrained doctors and nurses are fearful and the quality of work decreases and becomes inconsistent across emergency departments, as expertise and competence vary and are based on individuals rather than the system.

Time has come for Pakistan to invest in emergency medicine and make a marked change by improving healthcare delivery in

emergency departments. As a result, during a pandemic or any other disaster the response of a trained person would be safer and swifter. An emergency department with a training programme prepares its doctors and nurses to deal with all situations, including a pandemic, such as SARS-CoV-2.

Emergency medicine has had a place in Pakistan for the past two decades. It had a slow start and acceptance in public institutions was a big problem. All tertiary care public hospitals have large, busy emergency departments and yet no trained emergency physician or nurse. Since 2010, through the College of Physicians and Surgeons Pakistan (CPS), institutions across Pakistan started training physicians in emergency medicine. Currently, about 20 emergency medicine trainees have finished their training, and half have also passed their examination. About 10 institutions have begun training doctors for emergency medicine. At a conservative estimate, about 16 000 emergency doctors are needed, which will be difficult to achieve without intervention from the national decision-makers.

The situation needs to change in order to improve healthcare delivery. In addition to increasing the number of trained doctors, other steps are required. Through teamwork among government, emergency doctors and subject specialists we can support this important specialty.

Some key steps are as follows:

1. All emergency departments across Pakistan should have trained emergency physicians.

2. A triage system should be implemented in all emergency departments across Pakistan.
3. Emergency departments in hospitals attached to medical colleges should start emergency medicine residency training programmes.

These steps could change emergency care across Pakistan. They do not require large investment or complex decision-making, and can be done. With these steps the penetration of trained emergency doctors in the community will be expedited and produce fast and visible results.

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Contributors Both the authors were fully involved in conceiving, researching and writing the article.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Not required.

Provenance and peer review Not commissioned; internally peer reviewed.

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Handling editor Ellen J Weber



To cite Khan AS, Sattar A. *Emerg Med J* Epub ahead of print: [please include Day Month Year]. doi:10.1136/emered-2020-210089

Received 22 May 2020

Accepted 22 July 2020

Emerg Med J 2020;0:1.

doi:10.1136/emered-2020-210089

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