

A Changing World

Until a few weeks ago the terms self-isolation and social distancing were virtually unheard of in Europe. Now they are mentioned routinely on the news and a google search of the term social distancing returns over 600 million results! Many people across the world are working from home where possible, avoiding close contact with others and living in isolation because of a virus that until a few months ago was unheard of. A pneumonia of unknown cause detected in Wuhan, China was first reported to the WHO Country Office in China on 31 December 2019. That is less than 3 months ago as I draft this. This new corona virus was only given a name on February 11th 2020.



Wayne Spencer
Editor

Normally when I draft my editorial I am conscious of the fact that by the time it goes to print and is distributed, an event or situation I have referred to may have passed or become irrelevant. I am always uncertain about how our world might have changed slightly in that gap between drafting and publication and am careful to write my words accordingly. Well readers, this time there is a great dichotomy - there is both a risk that things will change much in our working lives over the few weeks but also the likelihood that we'll still be facing this same challenge. COVID-19 and irrelevance are not words that go together at the moment.

As is so often the case with new diseases of great public concern and impact (with the exception of prions obviously), this rapidly spreading virus seems to present no particular issue for robust sterilization processes. Current thinking seems to suggest it is of no more a challenge to our existing sterilants than other envelope type viruses. The current UK government advice (23/03/2020) for confirmed or possible COVID-19 positive cases is that instruments and semi-critical devices should be decontaminated in the normal manner in accordance with manufacturers' advice. It is for non-invasive devices that do not normally undergo sterilization or high-level disinfection processes that the advice is changing.

It is with respect to staffing that there are likely to be challenges and changes to be made. Hospitals in the UK are already cancelling or postponing routine surgery to free up beds and allow staff to be reallocated to more urgent tasks. Whilst this potentially increases the staffing pool for dealing with COVID-19 positive cases, at the same time there are members of staff that may be told to stay at home as they are themselves within high-risk groups due to underlying health conditions. With a reduction in routine surgery and perhaps gastro-endoscopy, reprocessing technicians may be asked to do other tasks. Flexibility could be key because whilst all this change is happening, there will still be emergency surgery being performed and a likely increase in bronchoscope reprocessing.

Therefore, protecting our technicians' health is essential and correct use of personal protective equipment is more important than ever. In this edition there is a discussion paper on the danger of contamination for endoscope processing staff due to the excessive number of manual steps and how the process could be optimized using boroscopes and better washer-disinfectors. We can still go further in reducing risks for staff at the frontline of decontamination and must not get complacent.

Whilst dealing with these new challenges, none of the old problems go away and this is highlighted perfectly in the paper by Burian et al published here which suggests to me we will still be debating narrow lumen PCD usefulness for some considerable time yet.

These devices are often being debated at international standard meetings but it will be interesting with the current restrictions on travel how the standards drafting process itself will adapt to these meetings all being held by conference call. Maybe if it is a success and we can still produce state of the art documents we will see less international travel and a more "eco-friendly" way of authoring standards! I suspect after this outbreak has ended and we return our lives to "normal", normal might be different and some things will never be the same again.