INTEREST OF TELEMEDICINE IN PLASTIC SURGERY DURING THE COVID-19 PANDEMIC

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Abstract
The covid-19 pandemic was started in Morocco on 02 March 2020, measures have been taken to contain the covid-19 pandemic, among these measures the application of telemedicine in the care of our patients, the WhatsApp© application was easy to use and accessible to our patients, non-hospitalized patients have received a fleet number to send the images and questions after care either at home or at the health center, this means reduced the number of contacts between patients and the healthcare team, telemedicine is considered more satisfactory and less expensive by patients, The goal after the end of the covid-19 pandemic is to develop telemedicine in Morocco to facilitate access to care and early care for patients.

Introduction:-
In Morocco the first case of covid-19 was declared on March 02, 2020, since the Moroccan authorities have taken several steps necessary to reduce the spread of viruses.

At the same time, the Mohammed VI university hospital in MARRAKECH and our plastic surgery department have implemented procedures to manage this pandemic situation.

For several reasons:
1. Reduce the maximum of contact between patients who may be suspicious with other patients and the nursing staff.
2. Limitation of movement of patients during confinement.
3. The majority of patients manage to use the WhatsApp© application despite an illiteracy figure in Morocco of 32.2% in 2014 according to the HCP (High Commission for Planning) [1]
4. Follow-up of plastic surgery patients, mainly based on photos.

For this our department decided to take good advantage of the easy use and accessibility of this application, we have also used telemedicine to manage patients who do not require hospitalization, as well as the follow-up of patients discharged after their hospital treatment.

Department experience:
The measures taken by our department:
1. Activity has been reduced, mainly focusing only on burn, tumors and covering loss of substance.
2. Consultation was stopped from the start of the pandemic in Morocco.

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3. Every negative Covid-19 patient seen in the emergency not requiring hospitalization is sent to the health care center with a detailed prescription with the fleet telephone number.
4. Outgoing patients are also educated; the telephone number of the fleet or of the attending doctor was communicated to them.
5. Patients presenting chronic pathologies in particular the Pressure ulcers whose care depends mainly on the family are educated and followed by telemedicine.
6. Patients questions and there photos are sent by WhatsApp© application, the answer, by medical staff is obtained as soon as possible (maximum after 4 hours).
7. Health care centers are involved in the management of burns and also in the outgoing patients living for from the city of Marrakech ;while staying in contact with us by phone calls and WhatsApp©.

**Result:-**
1. Even if nothing replaces the patient’s clinical examination telemedicine has reduced the number of patients moving while remaining well followed.
2. The awareness of the patients of the danger of Covid-19 contamination in the hospital environment facilitated the engagement of families in the care of the patients.
3. Following a questionnaire, patients find telemedicine consultation and follow-up more satisfactory, less burdensome and less expensive.
4. Telemedicine has enabled closer follow-up of patients, instead of seeing them once a week or more now they can send us the images and their questions more than 2 times a week.
5. Until now, after more than 02 months of the pandemic in Morocco, no case of Covid-19 has been reported to the plastic surgery department of Mohammed VI university hospital in MARRAKECH.

**Telemedicine after the pandemic:**
1. Apart from the pandemic COVID-19 the emergency rooms are filled with patients who can be seen in consultation.
2. A reduction in the number of these patients will reduce the wait time for urgent cases and the nursing staff will work more comfortably.
3. In plastic surgery, the follow-up of the patients sometimes requires years mainly in burns which is heavy for the patient and his family for come every time to consultation, this is why we have a lot of patients who are lost sight and who return with complications.

**For this we propose:**
1. To encourage telemedicine in the triage and referral of patients.
2. To follow up on chronic patients and answer their questions by telemedicine, this must be programmed by a single team doctor one day a week in a specific time and with a specific number of patients, Instead to see theme each 15 days it can be done each month or 2 months depending to the evolution.

**Conclusion:-**
Telemedicine is a new and beneficial way even after the covid-19 pandemic to better accompany some plastic surgery patients.

But this technique still needs to be developed for more security and more legislation.

Consultation can never be replaced by telemedicine but it can help.
Figure 1: Patient followed for contact burn that benefited from a skin graft.

Figure 2: Image sent by the family on WhatsApp® application.

References:-
1. www.rgphentableaux.hcp.ma/