Some reflections on the current COVID-19 pandemic

Philip Wiffen

I am writing this editorial in the third week of the latest lockdown in the UK. We are all learning to live with the ongoing impact of a virus that appeared some 12 months ago. I doubt any of us imagined what this year, 2020, would be like. The impact has been felt in every area of life. Many of our editorial team and our readers have been hugely impacted in their work life and some are now coping with the latest wave of hospitalisations. Home life has also been greatly impacted with restrictions on who we can meet and what we can do day to day. Here in the UK, gyms are closed and so called ‘non-essential’ shops are closed. Face masks are no longer optional in many places.

There is no doubt that COVID-19 has had an impact on the journal. In the first wave, in the spring and early summer of 2020 we saw a significant rise in submissions. Initially, few were on the topic of COVID-19, but perhaps authors were taking the opportunity to get some outstanding papers finalised and submitted. Of course, this occurred at a time when editors and peer reviewers were coping with the crisis and so less available.

News has arrived recently that the European Association of Hospital Pharmacists Congress will not be the face-to-face event planned for Vienna but will be online. Many of us will miss the face-to-face opportunities that Congress brings and I will miss the opportunity to meet friends and authors. That said, this is an opportunity to increase the impact of the science presented. I recently had the privilege of presenting online at one of the major international pain conferences. While the initial audience was a little below 100, this has risen steadily to somewhere over 600 as I write and that is far greater than I would normally expect for such a session.

Science is important and the journal continues to insist that what we publish is evidence-based. One of the mantras of the UK government has been to state that its decisions are based on the science. Such an approach may seem laudable but what if the science is wrong? Hindsight is a wonderful thing and it is now clear that decisions made early on were made on an inadequate understanding of the situation. Much of this was probably due to inadequate modelling systems. Some of these wrong decisions have impacted certain sectors such as care homes for the elderly and vulnerable and led to a considerable number of COVID-19-related deaths.

The really good evidence-based news in the past couple of weeks is the announcements around the effectiveness of three different COVID-19 vaccines. These still have to gain licensing approval but there does seem to be hope on the horizon that 2021 will give the opportunity to return to a more normal existence.

Many journals have seen a rise in submissions on the topic of COVID-19 and so as an editorial team we are determined to ensure what we publish is helpful, reliable and evidence-based. Such a view has been expressed by others. The Faculty of Pharmaceutical Medicine published the following guidance some months ago:

Dr Stuart Dollow, lead author of the guidance said: “COVID-19 is a public health emergency, where evidence-based guidelines from well designed and conducted studies are urgently needed. The urgency of a pandemic should not distract us from undertaking high quality research, but act as a prompt to ensure it is undertaken with due care and attention. All of us as researchers owe it to patients, their families and friends, as well as the wider population, to ensure that recommendations relating to COVID-19 are based on good evidence”.1

Concerns have also been expressed about research waste particularly where participants have taken part in trials and surveys which then never get published.2 This means that we need to choose carefully what we publish ensuring that articles are helpful, cover a topic that is novel and is evidence-based. We publish three such studies in this edition. That does not mean that all rejected articles are poor science as we continue to need to reject a significant proportion of what is offered. Such a position is one sign of the good health of the European Journal of Hospital Pharmacy.

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