



Advances in COVID-19 – Facial Trauma – Editorial on the Impact on Facial Injury

Gary R Hoffman*

Department of Maxillofacial Surgery, John Hunter Hospital, Australia

Editorial

Trauma is a constantly evolving public health concern. Irrespective of its etiology, injury can be conveniently classified as being accidental, non-accidental or recidivistic. The epidemiology of trauma can vary according to psycho-social, geo-political and ethno-cultural influences, and can be modified by a range of environmental factors. The world is currently 20 months into a coronavirus driven Severe Acute Respiratory Syndrome pandemic (SARS-CoV-2). The nominal 'COVID-19' pandemic has had a profound humanitarian effect, and in addition to its resultant morbidity and mortality, it has ravaged the economic stability and social fabric of the international community. Although an aggressive vaccination program is underway, its uptake has been slow and compromised to an extent by the evolution of the emergence of viral variants. An emerging literature has highlighted that various national government's implementation of COVID-19 social distancing and lockdown legislation, primarily to reduce the community transmission of the virus, serendipitously has had a secondary 'spin off' public health effect in altering the frequency and characteristics of facial injury that presents to tertiary referral hospitals. As a result, the literature has witnessed the emergence of initial studies conducted over very short investigative periods (China and Italy) and the subsequent emergence of more robust individual and comparative studies conducted over longer periods and using pre-COVID-19 similar time periods as baseline comparisons (United Kingdom, Australia, United States, France). As a broad generalization, these studies have identified that: The frequency of facial injury presentation has decreased, is associated with an increase in soft tissue trauma and a decrease in skeletal trauma, demographic age skewed to the very young or very old, the location of the injury increasingly occurred in the home. There was anecdotal evidence of potential or actual increases in domestic violence and self-harm, as populations were confined to their homes and individuals suffered from socio-economic stress and isolation. There also seemed to have been a universal trend towards non-operative or simple operative treatment, most likely to avoid the aerosolization of virus and secretions from the upper aero digestive tract that can occur during surgery, as well as to consider preservation of Personal Protective Equipment (PPE). Interestingly, as social distancing and lockdowns were rescinded, the epidemiology of facial injury normalized to baseline characteristics. In short, the COVID-19 pandemic has had a unique and profound public health effect in altering the expected frequency and characteristics of facial injury, and which has progressively caught the attention of a number of research teams.

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*Correspondence:

Gary R Hoffman, Department of Maxillofacial Surgery, John Hunter Hospital, Newcastle, Australia,
E-mail: garyhoffman_au@hotmail.com

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