



Clinical Correspondence

Management of chronic orofacial pain in pandemic of COVID-19

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COVID-19 whose etiological factor is the SARS-CoV-2, is a new disease that plagues humanity and brings with it a real threat to physical integrity and profound repercussions on the individual's mental health, especially in the face of doubts and uncertainties of the future.¹

Global governments are adopting social detachment and isolation as measures in order to mitigate this pandemic. This tactic has revealed an exacerbation of important psychiatric disorders, such as: anxiety, depression and phobias to the most vulnerable groups.²

The impact of these protective measures were studied by Wang et al and coworkers³ during the initial phase of the COVID-19 outbreak in China, and revealed that 53.8% of respondents rated the psychological impact of the outbreak as moderate or severe; 16.5% reported moderate to severe depressive symptoms; 28.8% reported moderate to severe anxiety symptoms; and 8.1% reported moderate to severe stress levels.³

It is already known that there is a bidirectional relationship between chronic orofacial pain and psychosocial conditions and/or psychiatric disorders, forming a two-way street, where neural markers for fear and anxiety show the existence of an exacerbation process of painful symptoms⁴, being itself social isolation and mitigation methods the possible catalysts of pain events.

It is estimated that chronic orofacial pain (COP) affects 7% of the population⁴, a vulnerable group that is in social confinement and at the mercy of television news and social media that evoke fear and chaos in the face of the unknown.

The Brazilian government, after the World Health Organization (WHO) decreed a pandemic by COVID-19, considered that only activities called urgency/emergency should be attended to, and this caused all elective appointments to be canceled.

Most of the patients with COP who were seen on an outpatient basis at the Chronic Pain Services (CPS) were considered non-urgent. Thus, in the face of this pandemic scenario, it is important to note that care for patients with chronic pain is extremely relevant to the individual's quality and well-being, in addition to the fact that a large part of this group presents psychosocial changes as comorbidities in which the possible interruption pharmacological treatment can exacerbate such problems.

In order to assist the patient with COP in a complete and safe way, we encourage the use of telemedicine and online prescriptions with digital certification, and face-to-face assistance in selected urgent cases is recommended.

We consider this moment, that humanity is passing through, unique and with a great opportunity to implement and execute new clinical care tools, developing interpersonal and virtual skills.



References

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