



Guest Editorial

Post-COVID-19 era: A “New Normal” for oral health-care professionals

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Severe acute respiratory syndrome coronavirus (SARS-CoV2) infection has been declared a pandemic (COVID-19) by the WHO in March 2020. In modern history, this COVID-19 outbreak created havoc and inflicted despair across the globe. In the absence of proven anti-viral drugs and vaccines, the rapid and perfect diagnosis, respiratory hygiene, physical distancing, and home quarantine are the only options to hold the community spread of the infection. Alas, in spite of extensive screening using a real-time-PCR-based assay, and considering all the preventive measures to prevent the spread, the number of COVID-19 cases is growing exponentially. But, besides the unprecedented adverse scenario, the other prospective of the COVID-19 outbreak provides an opportunity to handle the challenges with our unique wisdom and ways to overcome from a limited window. Being a scholar of dental sciences, my wisdom says that we should view this COVID-19-mediated challenge as an opportunity for a philosophical change in experience for the dental professional and patients as well. We have to retrospect ourselves and learn the art of prioritizing to work with preparedness, parity, and pace, along with the personal safety, emotions, and work ethics.

In the early 1990s, there was a panic among the dentists regarding treating HIV-infected/AIDS patients. In due course of time, modalities have been decided, and we are treating such patients without any fear following the guidelines framed. Similarly, in the post-COVID-19 era too, we are not going to be out of the road, simply, we need to change the gear and lane by reforming the ways of dental care with changing societal expectations. The same will be stamped by changing the clinical approach, time optimization with patients, and integration of holistic team of dental professionals. The need of the hour is to amalgamate the conventional philosophy of clinical attitude with newer approaches, such as minimal invasive oral care in routine practice, avoid aerosol-generating procedures, explore our potential to transform a predominant surgical intervention to oral physicians, identify the link between oral and systemic health, use of adequate personal protective equipment, and application of telemedicine as part of routine practice.

Nowadays, the common queries in the debate are: How and when dentistry will ease out? How safe is to work with a patient? What sort of treatment can we provide? How many patients can we see? Will they want to come to see us?, etc. We have to look forward optimistically, not with a sense of anxiety. Since the past 7 months, things have been happening at such a stride that we have not had time to respond with adequate preparedness. But surely, this unprecedented adverse period will not determine the fate of dental practices in the years to come. Hence, even with a backdrop of uncertainty, we must ensure that no patient in need is left behind. Of course, we

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have to prioritize the vulnerable and marginalized groups to treat under these changed scenarios of limited resources and capacities. Under these evolving situations, the pragmatic innovations and scientific facts will guide us to act, but we require solidarity to deliver a better normal. It is our call to

take a simple pledge to consider, decide, and act, which will create a “New Normal” for the oral health-care profession.

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