# Letter to the Editor: "Our Response to COVID-19 as Endocrinologists and Diabetologists"

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To the Editor:

While the country and world engage the pandemic of novel corona virus disease 2019 (COVID-19) or severe respiratory syndrome coronavirus 2, it remains vital for our health care system to continue caring for all patients while mitigating their exposure to potential sources of infection. I read, with great appreciation, the Kaiser et al editorial "Our Response to COVID-19 as Endocrinologists and Diabetologists (1)," highlighting important aspects of medicine in which our specialty will provide noteworthy impact. I would like to add that our embrace of telemedicine provides the ability to safely care for those patients with adrenal disease or who are on chronic steroid therapy, patients with hypothalamic-pituitary disease, and patients with the spectrum of diabetes mellitus. For our whole health care system to take advantage of technology that allows the safe practice of medicine while in a full state of emergency, some restrictions to using telehealth have been lifted.

Keesara et al recently issued perspective in *The New England Journal of Medicine* highlighting limitations of our current "analogue health care system" and imminent necessity for "an immediate digital revolution to face this crisis (2)." Previously, Hollander et al emphasized the potential for telemedicine implementation to be a critical component in the response to COVID-19 in the United States (3).

This is an imperative transition incorporating more telemedicine that has been desired for some time, but broad utilization has been hindered due to a variety of regulatory and reimbursement barriers (4).

Endocrinologists have been at the forefront of telemedicine advocation, and perhaps a silver lining coming out of this pandemic is proving the capabilities to provide high quality care for many patients who do not physically need to be seen in a clinician's office or even seen in person during rounds while hospitalized. Many patients who require endocrinology care have special considerations regarding their increased risk of morbidity and mortality should they become afflicted with COVID-19 including those with any type of adrenal insufficiency or other condition requiring long-term glucocorticoids, hypothalamic-pituitary disorders, and certainly the spectrum of diabetes mellitus (1). Endocrinologists and diabetologists are in a unique position to provide consultation or direct care to patients via telemedicine using provided history; data mining the chart, lab, or radiology data; and using diabetes technology (5). Comprehensive diabetes care clinics can upload data from glucose meters or preferably continuous glucose monitors, continuous subcutaneous insulin infusion devices (insulin pumps), or other mobile health applications while providing virtual "dynamic diabetology" care and counseling from physicians, nurse practitioners, physician assistants, nurses, registered dieticians, and diabetes educators.

Continued progress in advancing telehealth capabilities and integration into our health care system provides the opportunity to broaden and improve patient access to care. Endocrinologists and diabetologists have the potential to be leaders in this advanced patient-centered model of care, proving that we can provide optimal treatment accompanied by patient satisfaction.

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## Additional Information

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