

# Medical Innovation in 2020: What's Old is New Again



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**T**he COVID-19 experience has clearly spurred significant advancements in healthcare in just the last year. However, not all of these advancements have been particularly new, or even “fancy” for that matter. First, when it comes to effective therapeutics, while acknowledging no silver bullets exist as of yet, researchers have been able to re-tool a medication (Remdesivir) designed for Ebola, while gleaming new utility from a medication used for many decades, by many physicians – dexamethasone. Along with reformatting established therapeutics, we have also witnessed never before seen collaboration of physicians and researchers on an international basis. The result improved ICU mortality rates based on lessons learned in the trenches.

Another modality in the provision of care that many have been harkening for some

time now finally found its opportunity to step into the spotlight – telemedicine. If it were not for the ability to connect with patients using this technology, it is almost certain that many physician practices would have experienced even more dramatic hardships than what was felt in the early months of the pandemic. It has demonstrated its worth for unique patient encounters not to ever replace the value of an in-person visit and exam. Now, the mission for organized medicine will be to ensure that we advocate for the maintenance of reimbursement for this delivery of care through the pandemic and beyond.

Another old tool that became new again was right in front of our face all the time – masks. Specifically, universal mask wearing. What we would give to have had all the understanding of the behavior pattern of COVID-19 at the outset. Yet what the literature has, and will continue to tell us, is

the utility, safety, and efficacy of universal mask wearing is our tickets to “quasi-normalcy” while we await vaccination.

Lastly, while innovation both old and new have played a significant role in our response to COVID-19, we must not forget the importance of the “who” while we focus on the “what.” The “who” simply is us – physicians. It’s also the healthcare teams that we lead. It’s our dedication and relentless drive to care for our patients, pandemic or no pandemic. It’s the solitary focus to do all that we can with all that we have for as long as we are physically able to save as many lives as possible. So next time you are appropriately feeling grateful for the bench scientists working on vaccines, the tech experts perfecting telemedicine platforms, and the drug researchers performing clinical trials, take a minute to thank a fellow colleague. While you are at it, thank yourself! Be well. **DMJ**

