AUA Inside Tract Podcast Transcript Episode 97

COVID-19's Impact on Italy and the Global Healthcare Community with Dr. Francesco Montorsi

Host: Welcome back to the "AUA Inside Tract" podcast. Today, we have a very special guest joining us from Milan, Italy, and I'm going to have him introduce himself right now.

Dr. Montorsi: Good afternoon, everyone. My name is Francesco Montorsi. I am the chief of urology at San Raffaele University Hospital in Milan, Italy. I had been a member of the AUA for 30 years or so, and I'm very pleased to be with you this afternoon.

Host: Welcome, Dr. Montorsi, and thank you for making the time for us. Of course, we're very interested in your experience in Milan right now, so I wanna ask you a little bit about COVID-19.

Dr. Montorsi: Well, I think that, all over Italy, we became aware of the virus when everybody else in the world also became aware of it, because [inaudible 00:00:48] it was a news in the major magazines and TV shows reporting the first cases in China. And that, unfortunately, was something that, at that time, was considered to be very far away, happening only there. And that was probably the mistake because we did not become ready to face what became a pandemic event soon enough.

Host: So, at what point did you realize that COVID-19 had really taken hold of Milan? What were those first few weeks like, perhaps, before the lockdown? Were you anticipating that things would get to the point that they got to?

Dr. Montorsi: Good question. Not really. And I think that the very cases became evident in our country first half of February, and those happened in two small towns 20 kilometers away from Milano. And so there was information on TV news that say, we now have those patients in those towns, but no one had the real feeling that it would have become so big. I remember that, still in the second half of February also, we were allowed to go out to walk, and we had a very good friend from Canada, a visiting professor here with us at the end of February, Dr. Neil Fleshner. He gave excellent talks. We had dinner with him. Everything was quite normal. And then, all together, things started changing the first week of March, and the first lockdown was declared on March 8th. It was a Saturday evening.

Host: Dr. Montorsi, how did COVID-19 impact the urologists at your hospital? At what point did the urology department and urology personnel begin to play a role in combating the COVID-19 outbreak?

Dr. Montorsi: Well, listen, the impact of the COVID-19 has been really severe and bad. First of all, urology is a surgical discipline, so we work in the operating theaters and our days are so busy. From having 17 sessions of surgery for us every week devoted to our patients, we came down to have 1 every 10 days now. Why is this? Because the anesthesiologist, all those working with us in the operating theaters were converted to work in the units that were developed to take care of the COVID-19 patients. So we do not have enough number of anesthesiologists to run our theaters. So that was the very first impact. And not only that, because the number of patients with COVID being referred to our emergency room was so much escalating up in terms of numbers that the doctors working in the infectious diseases area and in the internal medicine are were not enough to take care of all of them. So we were asked to volunteer and to be working only with the COVID-19 patients and leave the urology department at least for a while. At this moment in time, I had six young staff members and three residents who are part of our group who are working 24 hours a day with the COVID patients, and that's been an experience which is indeed different. And we have been learning ourselves so much by talking to our colleagues who are now working with the COVID patients.

Host: I wanna ask you about elective surgeries and elective procedures. When did your hospital and your institution begin to manage these differently?

Dr. Montorsi: Well, this happened three weeks ago, more or less, because the region Lombardy issued a new rule stating that we could do only emergency procedures or cancer cases that could not be postponed, and also the most important requisite to use the operating theater would be that that specific patient to operate upon should not need for sure any intensive care unit assistance, because every single bed in the intensive care unit was already occupied by COVID patients. And nowadays, our situation is the following. There are 11 different surgical disciplines at San Raffaele. Each of us has its own operating theaters. But as I said, there are only two available every day so that we have to share that space, which means that we have 1 session, more or less, every 10 days, no more.

Host: What advice would you have for your colleagues around the world that are also battling this pandemic? What would you say to them?

Dr. Montorsi: Well, to be very cautious, to be protective on themselves. This is not a joke. I have seen with my eyes colleagues younger than myself going

straight to the intensive care unit because of respiratory distress syndrome. So use the mask, use the gloves, and do act as everybody you are seeing is a COVID-19 patient, exactly like we would do at the time of the very first cases of HIV patients coming to our ORs or patients who may be positive for hepatitis. So the very first and straightforward message to my colleagues at the AUA circle is to be very much protective on themselves. And clearly, if I think back about the last three weeks, I have been seeing patients every day, I do see them trying to do all I can to help them but, again, in a different perspective. And so I use all the protections that I have available. And when I go back home now, in the evening, to my home, although, until today, I have not had symptoms, I have never been positive for COVID-19, but we use all the necessary precautions at home as well. So I think that these are the rules that are known all over the place and that should be considered by every single urologist that is listening to this conversation.

Host: Can you discuss how morale has been in Italy. For the rest of the world that's not there right now, how are Italians dealing with this new reality as far as you've observed?

Dr. Montorsi: Well, listen, the real question mark today, as in Italy, we have finally started to see a level off of the number of cases, so which means that we are probably at the peak of this infectious state. And hopefully cases would start to decrease during the next few days and weeks. We are now wondering, "What are we going to do afterwards? How can we start again?" Because we all understand that we are still in lockdown, and lockdown will be there...the government is saying until made April. I am personally convinced it will be like this until the end of April, at least. And so, what happens on May 1st? It is impossible to foresee that everybody goes out at the same time, because as we all know, there are people who are COVID-19 positive and they are asymptomatic. So if that happens, if that happens inevitably, we will have a second birth of cases, and the ICU would become full again.

So the government is elaborating strategies, although I understand it's not easy and I understand that it will be a problem all over the world. We must be optimistic. Summer is coming. So that is, in a way, another question mark, because in my country, typically, Italy is not really closing down in July and August. But the rhythm is very much reduced. Vacation is there. Children are out of school. How are we going to manage the new situation? Time will tell. Hopefully, it will be a smooth transition. I hope that other countries who are now two or three weeks later than ourselves in facing the virus, we look at our mistakes, they will learn from mistakes, and also if we have done as a country something good, they will be able, also, to learn from ourselves.

Host: Are there any mistakes, specifically, that you would encourage colleagues to learn from?

Dr. Montorsi: The mistake that many of us, I think, have done at the begging was not to take this 100% seriously, not to think that the safety measures that were highlighted really needed to be taken, like wash your hands 15 times per day. Use the mask. Use the gloves. When you are around, try not to sit down or stay too close to the others, maintain a distance. And so those sort of things that, being said today, they seem foolish. They seem stupid things. But if we go back two or three weeks with our memory and we think about governments all over the world, the very vast majority were denying the existence of COVID-19 and the influence that this virus would have had on their own country. So that is the mistake that should not be done. We have in front of us an enemy which is indeed very dangerous, and if one is following the safety measures, he or she has the real option not to get sick and to come out completely free of any type of symptoms. And so that would be the real rule that I would recommend everybody to follow.

Host: As a best case scenario, what do you think will be the permanent changes in delivering health care after things return to somewhat normal and stable environment? What do you think we've learned from this that is going to impact things in the future?

Dr. Montorsi: Good question. I think that we have learned that we should be ready for the next virus thing that might happen in 5 to 10 years or whatever that we have learned that the intensive care units are important, and they should become available in a quick period of time in case of a special need. That is, I think, the very first lesson. And also, more than in the medical arena, I think that by being locked down, all of us have had the time to think about the real value of life, of the family, of being together, and also the importance of respecting the rules. No one is different from the others. And if one thinks, "It will not happen to me," that is a major mistake. So we should all be aware that something really bad and dangerous is happening. But again, be optimistic, follow the rules, and everything will be okay at the end.

Host: Dr. Montorsi, do you have anything else you would like to comment on or anything else you'd like to add for our audience before we wrap up here?

Dr. Montorsi: Well, yes, of course. I would like to say hello to all my friends in the United States, a country that I love very much where I did part of my training. My friends are members of the AUA, and I look forward to seeing you all guys at the next scientific event, the next AUA 2021, but of course, earlier. And I wish you all the best. Please be safe yourselves.

Host: Our guest today has been Dr. Francesco Montorsi. Thank you, again, Dr. Montorsi for making time for us and thank you for everything that you've been able to do for Italy.

Dr. Montorsi: Thank you very much.