

Current Issue: COVID-19 and Dietetics**The Indispensable Role of Dietitians in Asia during the COVID-19 Crisis***Chwang Leh-chii**Honorary President, The Asian Federation of Dietetic Association**President, The Chinese Dietetic Society (Taiwan)**4F-9, No.151, Section 5, Ming Sheng East Road, Taipei, Taiwan, 10582*

**Dear Editor:** The coronavirus disease (COVID-19) pandemic has rapidly spread to at least 200 countries and territories around the world. According to the WHO Situation Report, there were more than 3.4 million confirmed cases and 240 thousand deaths as of May 4, 2020.

We, as dietitians, must stay alert while fighting this coronavirus infection. Although the current morbidity and mortality rates in Europe and North America are higher than those in Asia, there is no room for complacency. Because the outbreak of COVID-19 occurred in Asia weeks ahead of its appearance on other continents, successive waves of its reoccurrence may surface sooner in Asia than in Europe and North America, for example.

As the pandemic spreads, countries have declared states of emergency. Measures have been taken to contain the transmission of the coronavirus such as: self-quarantine, isolation, staying at home orders, lockdowns, social-distancing, and the closing of businesses and schools. All of these measures have impacted daily life with changes in diet and food availability, in many instances causing panic buying.

People have become instantly vulnerable during this pandemic, thrust into a situation in which they have limited preparation, limited resources, and little to no experience. This is the time for dietetic organizations to step forward and to provide reliable nutrition advice to the general public and to practicing dietitians.

"Never let a good crisis go to waste". Nutrition is vital in managing any health crisis. Let's team up to share information and tactics, which can better prepare us as nutrition care professionals to combat the unprecedented pandemic.

**Inspire the public about proper nutrition to support strong immune systems in order to safeguard health**

Openly discussing topics dealing with everyday dietetic issues is most helpful, such as: healthy meal planning, grocery shopping tips during long-term home stays, meal preparation, easy and affordable recipes, proper hygiene, and safe food handling in the kitchen and food delivery services. Specific nutrition advice should also be readily available to the elderly, pregnant women and breastfeeding mothers, as well as to people at risk of malnutrition and those suffering from chronic diseases who are especially vulnerable to infection.

**Support dietitians with guidance on medical nutrition therapy for COVID-19 patients**

**In the field:** Health care providers and patients alike are overwhelmed by the sudden outbreak and the soaring number of suspected and confirmed cases. Among the many challenges are the demand for food services to supply the mobile hospital units which have been erected to accommodate the swarm of patients. The need for appropriate dietary recommendations and interventions is critical.

**In hospitals:** Among severely infected hospitalized patients, there is higher morbidity and mortality among the malnourished, the immunocompromised and the elderly with comorbidity. These patients require specialized nutrition considerations. The dietitian is an important member of this treatment team.

The Handbook of COVID-19 Prevention and Treatment edited according to the clinical experience in China, published online in ten languages, points out that in some COVID-19 patients, the intestinal microbiological balance is broken. This may lead to secondary infection. In this case, probiotics and nutrition support are important means to restore this intestinal balance.

Recommendations proposed by both the European Society for Clinical Nutrition and Metabolism (ESPEN) and the American Society for Parenteral and Enteral Nutrition (ASPEN) suggest nutrition assessment and nutrition intervention are essential to sustain adequate nutrition and to overcome malnutrition for COVID-19 patients in hospitals and those recovering at home.

Dietitians should apply the best available evidence-based guidance and resources in practice. Information from diversified sources, however, is often hard to follow, as when information is written in a foreign language. The Indian Dietetic Association (IDA) and the Thai Dietetic Association (TDA) have websites with user-friendly documents about safety and protocols of medical nutrition therapy for COVID-19 patients. The TDA also sends messages to its members through LINE, a free app, which can instantly communicate with members on their mobile devices.

As COVID-19 is a new health issue, dietitians are encouraged to submit AJD journal papers about firsthand nutrition care experiences of COVID-19 patients.

### **An Action Plan to Cope with the New Normal**

To a large extent, COVID-19 has changed our lives, regardless of our age, gender, race and culture. Family reunions, holidays, special events and festivals are always occasions for gatherings - but not this year. Beginning with the lockdown of Wuhan, China, on January 23, 2020, a day prior to Chinese New Year's Eve, there have been strict measures in place to curtail the spread of the pandemic. Social gatherings related to significant events all over the world have been canceled or restricted, including, but not limited to: Holi in India, Cherry Blossom Festival in Japan, Buddha's Birthday and Songkran in Thailand, Holy Week and Easter in the Philippines, and holy month of Ramadan in Indonesia and Malaysia, only to name a few. There is virtually no public gathering allowed, no travelling, no homecoming, no pilgrimage, and no mass gatherings in temples, churches, mosques, concert halls, stadiums, etc., until further notice.

Social distancing is a new etiquette. Face masks have become an integral piece of fashionwear and the Thai "Wai" greeting has replaced handshaking and hugging. Looking to the near future, we probably will continue living this way until all restrictions are lifted.

Having been constrained for so long, people everywhere desperately want to go back to a normal way of life. How can we turn the worst of times into the best of times? We can approach this in three ways.

#### **1. Be prepared with emergency relief schemes**

In Asia, we often suffer from natural disasters such as earthquakes, tsunamis, typhoons, floods, and volcanic eruptions, which claim thousands of victims in need of emergency feeding and nutrition care.

The Japan Dietetic Association (JDA) formed the Japan Assistance Team after the Tohoku earthquake and tsunami occurred in 2011. Trained dietitian volunteers are now at the ready to be dispatched for emergency relief. Dietitians in Asia could also be trained and organized to serve as an extra workforce for urgent epidemic outbreaks.

With the emergence and rapid spread of COVID-19, there was an urgent call in North America and in Europe for retired medical staff and new graduates to supplement the much-needed supply of specially trained hospital personnel. There is an apparent and pressing need to expand nutrition care capacity and preparedness for large-scale emergencies.

#### **2. Apply new technology at work**

The COVID-19 pandemic has seen a rapid change in the way health care professionals communicate with their patients. Telehealth visits and nutrition counseling via audio and video equipment provide a safe way to communicate and to interact with sick patients while eliminating the risk of infection.

Applying new technology is an inevitable trend. The widespread COVID-19 pandemic has accelerated the application of artificial intelligence (AI) devices in healthcare facilities. With regards to dietary services, for example, using a robot to deliver patient meals in a hospital minimizes person to person contact and the likelihood of disease transmission.

#### **3. Increase professional competency**

The Deep Knowledge Group recently ranked Korea, Taiwan, Singapore, Hong Kong and Japan among the top ten countries displaying safety and treatment efficiency related to the COVID-19 pandemic. This could be greatly attributed to the lessons drawn from precious combat experience in Singapore, Taiwan and Hong Kong with 2003 SARS, and in Korea with 2015 MERS.

Since 2007, postgraduate and licensure programs for all healthcare professionals in Taiwan, including dietitians, have required classes related to infection control. Considering the frequency and magnitude of epidemic outbreaks and natural disasters in recent years, it is imperative to incorporate these subjects into curricula to educate dietitians who will be competent in dealing with crisis. No one knows how long the pandemic will last. Hopefully, with confidence and solidarity, no matter how long the night may be, the arrival of the morning is soon to come.