Rheumatology Residency Training During the COVID-19 Pandemic

By Adam Kovacs-Litman, MD, FRCPC

hile coronavirus disease 2019 (COVID-19) hasn't disappeared, we are no longer in the throes of a pandemic. At the time of this writing, there have been more than 4.9 million Canadian cases of COVID-19 and 58,000 deaths. There are still over 5,000 incident weekly cases of CO-VID-19 across Canada, but this is more manageable compared with the highs of the early pandemic.1 Travel restrictions, quarantines, isolation, and widespread testing are no longer a major part of our COVID-19 response. With widespread adoption of vaccinations, CO-VID-19 has become less deadly and

something we're more used to living with.²

I completed my rheumatology residency at the University of Toronto (U of T) in June 2023. My residency experiences in rheumatology and internal medicine (also at U of T) were marked by the COVID-19 pandemic. My internal medicine residency was punctuated with what felt like mandatory electives in COVID-19 care. I recall the fear and uncertainty among residents in the pre-vaccine pandemic era following the first Canadian case of COVID-19 diagnosed at Sunnybrook Health Sciences Centre.3 Later, I recall admitting countless patients with COVID-19 on internal medicine call shifts, carefully donning and doffing personal protective equipment. I recall rotating through the Intensive Care Units of Toronto Western and Toronto General Hospitals and becoming used to the routine of proning and un-proning young, intubated patients requiring extracorporeal membrane oxygenation.4 More selfishly, I recall being frustrated when my away-rheumatology electives were cancelled and many of us were redeployed from elective rotations to fill critical gaps in patient coverage related to resident illness and burnout.

As I began my rheumatology residency, I felt more insulated from the front lines of providing COVID-19 care, but the pandemic continued to affect my training in other ways. One of the concerns I've heard levied is the fear that rheumatologists who trained during the COVID-19 pandemic may lack core rheumatology physical examination skills. While many clinics converted to virtual care, I'm



grateful that rheumatology clinics across U of T hospitals maintained predominantly in-person across all stages of the pandemic. The pandemic did however necessitate changes in educational design. Virtual teaching sessions over Zoom became the norm, and even major rheumatology conferences such as the Canadian Rheumatology Association Annual Scientific Meeting adopted virtual or hybrid formats. Rheumatology residents increasingly turned to burgeoning and excellent online educational materials such as Dr. Raj Carmona's rheumtutor.com, Dr. Andy Thompson's rheuminfo.com, Dr. Ahmed Omar's rheumguide.ca,

and Dr. Lori Albert's *rheumexamatlas.com*, to name a few. While virtual learning is not without limitations, I am of the view that the COVID-19 pandemic catalyzed transformational educational change for the better. Having access to learning-on-demand improved my educational journey and not having to commute for every teaching session bolstered my wellness, which is especially important in light of the high rates of burnout among rheumatology practitioners at all levels. ^{5,6} As our focus shifts to moving beyond the COVID-19 pandemic, I hope that those involved in educational design recall not just the challenges of the pandemic, but the benefits of incorporating hybrid and virtual teaching on an ongoing basis.

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