

Correspondence

Reply

To the Editor:

As the coronavirus disease 2019 pandemic is expanding globally, sharing experiences and strategies in different programs is an essential way to communicate and empower the global allergy/immunology community. The correspondence by Malipiero et al¹ on our recent article² in the *Journal* is a great example of such communications and is well appreciated.

This commentary shows how telemedicine has helped programs across the world to overcome the otherwise debilitating gap of communication between patients and physicians. In our division, although all faculty and fellows were trained emergently to perform virtual medicine, it took a few weeks to troubleshoot and maximize the potential of these modalities. These experiences suggest that training on the optimal use of virtual visits and telemedicine should be added to the educational curriculum of training programs and annual meetings on a regular basis. In this day and age, technology is an inevitable part of our daily lives and we should be able to use it to its maximum potential for the sake of our patients and trainees. We have learnt that in some scenarios, especially for follow-up visits, virtual clinical encounters could be effectively done through telemedicine. Therefore, the use of telemedicine could be expanded beyond the pandemic times for patients who live far away from tertiary clinics to avoid frequent travels while re-enforcing management plans. Furthermore, use of more advanced teleconferencing for departmental educational meetings can be expanded to

increase participation of faculty and providers who work from distanced locations.

Another point brought up by Malipiero et al¹ was the broad use of sublingual immunotherapy (SLIT) in their practice, which was not suspended despite the limitation of in-person clinic visits. We acknowledge that their experience proved an advantage of SLIT over subcutaneous immunotherapy in current circumstances. Increasing allergists' experience and comfort in using SLIT seems to be advantageous not only during the pandemics but as a preferred modality of immunotherapy for patients with limited physical access to allergy clinics.

Finally, we would like to echo that the coronavirus disease 2019 pandemic has had a profound impact on modern medicine and the patient-physician relationship. We should learn from these experiences to come out of this pandemic stronger and more resourceful.

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