Assessment #2
Research Assessment #2

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Assessment:

The article I used was the "Impact of Covid-19 on the imaging diagnosis of cardiac disease in Europe." This study surveyed centers in Europe to measure the number of cardiac disease diagnoses and considered the long and short-term effects. The study was able to provide concrete data that the pandemic did indeed result in a vast redupaction in cardiac imaging, thus cardiac diagnosis. The study also observed what areas it affected most, the highest reduction being in Southern Europe.

As an aspiring cardiologist, I found it worrisome that the pandemic is having such a far reach into other branches of medicine, now including cardiac imaging and decreasing the amount of life-saving diagnoses being made. However, it is not surprising as hospitals' main priority is to deal with covid, thus cardiac diagnosis, and probably other medical treatments, are being pushed to the side in order to accommodate for the volume of the pandemic.

Reading this article makes me more interested in helping provide more accessibility to cardiac imaging and diagnosis resources. The overall reduction in cardiologic care is worrisome

as cardiac disease can be fatal. A reduction in this type of care will result in more cardiac disease-related deaths. I am also really interested in learning about patients with both cardiac disease and covid, as that is very pertinent to our current global situation. Beforehand, I did not even consider the implications of the two coinciding; this article has definitely made me realize how important accessibility is and also how connected the medical field truly is. Many patients could have underlying cardiac issues and then contract covid, making their outlook even worse.

After reading this article I wonder about the long-term effects of the reduction of cardiology disease care. Even the article mentions that it is impossible right now to know for sure, but the survey does show that there are many that had their diagnosis delayed. This disease for many will most likely evolve into something more severe, which is very distressing. I also wonder if having covid and cardiac disease can lead to further complications in the body and if so how do doctors treat that. Lastly, I wonder what is the best way to optimize the access for cardiac disease testing. As resources are being filled up, I question what is the best way to get more imaging, to get more patients treated.

The article also touches on the variability in the study due to the different covid-19 responses throughout Europe. I think that is very important to consider and mention due to the various factors that impacted covid response, thus the amount of covid cases and deaths. The reduction in diagnosis corresponds to the covid cases: the more cases, the less cardiac imaging.

Despite this troublesome data, it is encouraging that this was recorded during the peak of covid. As we are past the peak, that means more cardiology resources are opening up for the public to get treatment. It is still a huge problem as the pandemic is ongoing, but the reduction in imaging is most likely starting to become less and less, allowing for more people to get diagnosed and treated.

Article with Annotations:

https://drive.google.com/file/d/1fOWWlyRo7CtqxPLt0ndohZSrryMe1sRN/view?usp=sharing