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The fear of COVID — a factor affecting the functioning of emergency medical service

The COVID-19 pandemic has undoubtedly put a heavy burden on the efficacy of health care system. Recently, Paciorek et al. [1] have reported the impact of the COVID-19 pandemic on the functioning of emergency medical service (EMS). They observed a decrease in the number of emergency medical team interventions during the first year of the COVID-19 pandemic, with the lowest number recorded in the spring of 2020 when the incidence of infections was relatively low. Similar observations were reported by Nadolny et al. [2]. A considerable prolongation of the EMS response time was found in 2020 in comparison with the two-year pre-pandemic period, with the longest delay in the autumn, which corresponded to the peak of the second wave of COVID-19 infections in Poland [1]. These interesting observations complement the image of EMS functioning during the pandemic time [3–7]. Reduction in the rate of hospitalizations for acute heart failure was even more pronounced at the beginning of the pandemic in Poland during the first public lockdown from March to May 2020 [8]. It was suggested that the reluctance to seek professional medical assistance reflected the fear of in-hospital acquisition of COVID-19 [9]. Grandstrom et al. [10] showed that the COVID-19 pandemic discouraged patients from seeking medical care when presenting with an AMI. The emotion of fear reported by patients was related to the external threat to one's own health, due to COVID-19, rather than fear of symptoms related to an AMI. The media reports, describing the healthcare system as ineffective and overloaded, additionally enhanced the feeling of insecurity and may have had a detrimental influence on the delay

to medical care acquisition [10]. Considering these data, it seems advisable to undertake wide-ranging educational initiatives aimed at emphasizing the risks related to the lack of professional medical assistance in life-threatening situations [11–13]. Moreover, long-term studies on the impact of medical system efficacy and patient COVID-19-related behaviors on clinical outcome should provide a better understanding of the extent of “collateral damage” resulting from the pandemic.

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