



Editorial

Practicing Clinical Hematology During the COVID-19 Outbreak: A Challenge Like No Other

This is a very special issue of *Clinical Hematology International*, the official peer-reviewed open access journal of the International Academy for Clinical Hematology (IACH). This issue is being released during some extraordinary circumstances, namely, the infection called Coronavirus Disease 2019 (COVID-19), which has now spread worldwide. COVID-19 has been a challenge like no other. As hematologists, we are used to seeing a lot of critical illnesses in patients with advanced and refractory malignancies. However, when thinking of COVID-19, we can feel around us a general sense of hopelessness, and a constant self-questioning as to how we can help things get better. It is not an exaggeration to state that the whole COVID-19 experience “feels” simply surreal. So, for now, what is there to do?

Overall, the management of hematology patients may pose several special challenges during the current COVID-19 outbreak. While it is important, for consistency, that clinical hematology departments apply homogeneous guidelines for patients’ management, it appears that some decisions need to be taken on an individual basis, according to disease characteristics and the patient’s history. Above all, we must carefully weigh the cost-benefit of changing an individual patient’s prescribed best line of treatment when trying to offset the “new” risk that the patient may get infected with COVID-19. This is, obviously, no easy task at present, in views of the many uncertainties regarding the virus pathogenesis and immunogenicity. However, we must not lose sight of the fact that, particularly for patients with hematological malignancies, a missed opportunity for them to receive the most efficacious treatment on a timely basis may result in relapse or progression of their disease.

At the IACH, we have rapidly worked on a variety of fronts, to help the clinical hematology community cope with this terrible crisis. A special emphasis was put on a speedy sharing of experience and knowledge across the globe. We have immediately started running a special series of weekly high-profile webinars featuring top experts in the field, which proved to be extremely useful, and were able to reach a very large audience worldwide. Each webinar attracted more than a thousand participants, who all praised the rich and diversified scientific content. All IACH webinars remain freely accessible anytime to all, in order to reach the highest number of colleagues and stakeholders (<http://clinical-hematology.org/video-library/>). Also, despite the international closure of borders and the national confinement measures, the IACH remains committed to promoting good clinical practice. Therefore, we established several international virtual meetings, which were highly successful in terms of both content and participation. All these meetings are freely accessible to all (<https://iachlive.cme-congresses.com/>).

The IACH is always seeking and supporting innovation, and this was the spirit of the founders of this international organization [1]. Looking further into the COVID-19 outbreak, our pioneering strategy to promote digital and web-based educational activities, proved to be in the right direction. More than ever, we need to strengthen the links between the different stakeholders involved in clinical hematology worldwide, because this is the only way to make a difference for all the hematology healthcare professionals and, most importantly, for patients, wherever they are. The ongoing lessons from the COVID-19 outbreak suggest that the time has come for us all to think differently in the way we deliver and disseminate knowledge. To win the battle against a pandemic, we need to experience a sense of global solidarity and fraternity.

In this new issue of *Clinical Hematology International*, you will read some high-level clinical reviews [2,3] and original reports [4–5], in addition to a diverse set of material. We hope you will continue to enjoy the IACH activities. We always welcome your suggestions and contributions, and thank you for your trust.

REFERENCES

- [1] Mohty, M, Nagler, A, Savani, B. Looking ahead: *Clinical Hematology International* turns one. *Clin Hematol Int* 2020;2;1.
- [2] Shreve, J, Nazha, A. The evolving landscape of myelodysplastic syndrome prognostication. *Clin Hematol Int* 2020;2;43–48.
- [3] Cytryn, S, Abdul-Hay, M. Haploidentical hematopoietic stem cell transplantation followed by ‘post-cyclophosphamide’: the future of allogeneic stem cell transplant. *Clin Hematol Int* 2020;2;49–58.
- [4] Dholaria, B, Moreno Vanegas, YA, Diehl, N, Spaulding, AC, Visscher, S, Tun, HW, et al. Cost analysis of R-CHOP versus dose-adjusted R-EPOCH in treatment of diffuse large B-cell lymphoma with high-risk features. *Clin Hematol Int* 2020;2;Forthcoming.
- [5] Shabbir, E, Farooq, U, Yanes, B, Magalhaes-Silverman, M. Repeat endoscopy affects patient management in gastrointestinal graft-versus-host disease. *Clin Hematol Int* 2020;2;69–73.

Mohamad Mohty^{1,*}, Arnon Nagler², Bipin Savani³

¹Sorbonne University, Service d’Hématologie Clinique et Thérapie Cellulaire, Saint Antoine Hospital and INSERM UMRs 938, Paris, France

²Chaim Sheba Medical Center, Tel Aviv University, Tel-Hashomer, Israel

³Division of Hematology and Oncology, Vanderbilt University Medical Center, Nashville, Tennessee, USA

* Corresponding author. Email: mohamad.mohty@inserm.fr

Peer review under responsibility of the International Academy for Clinical Hematology
