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**Severe acute respiratory syndrome coronavirus 2 pandemic and surgical diseases: Correspondence**

Sookaromdee P *et al*. SARS-CoV-2 pandemic and surgical diseases

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**Abstract**

This letter to editor discussing on the publication on severe acute respiratory syndrome coronavirus 2 pandemic and surgical diseases. Concerns on procedures are raised and discussed.

**Key Words:** Pediatric; Surgery; COVID-19

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**Core Tip:** This letter to editor discussing on the publication on severe acute respiratory syndrome coronavirus 2 pandemic and surgical diseases: Concerns on study techniques and clinical implication are raised and discussed.

**TO THE EDITOR**

We read with interest a case report on “Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) pandemic related morbidity and mortality in patients with pediatric surgical diseases: A concerning challenge” by Vaos and Zavras[1]. We would like to share ideas on this report. Basically, the adaptation of medicine to the coronavirus disease 2019 (COVID-19) is necessary. For surgery, to save lives while maintaining excellent surgical standards, dynamic prioritizing of SARS-CoV-2 infected and surgical patient groups is critical [2]. In emergency departments, non-intensive care wards, and operating rooms, strict segregation of patient groups inhibits virus spread, while appropriately training and carefully selecting hospital staff allows them to confidently and successfully perform their respective clinical roles[2]. How to find a solution in surgery need a good systematic study.

In this report, a literature retrospective review is done. However, there is no clear information on searching technique and extracting of data. There is no interrelationship network analysis of recruited literatures and it does not follow standard meta-analysis technique, bioinformatics interrelationship analysis and bibliometric analysis. The summarization is based on crude summary on surgical cases, without adjustment to the background condition of the cases (age, underlying disease, surgical intervention, *etc.*). Also, there is no study on the correlation with the stages of COVID-19 background in different recruited publication. It should not possible to recommend the new guidelines for management of pediatric surgical cases. For pediatric surgery, a meta-analysis on each specific condition with specific aim or target for study, such as comparison of surgical approach, should be the best method to find out the solution during the current COVID-19 crisis. Good example of the studies in this kind are reports by Chan *et al*[3,4].

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**Footnotes**

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