

By Regan Arendse, MD, FRCPC

Our plans for rheumatology practice in 2020 in Saskatoon were totally flipped by the COVID-19 pandemic. It started off on a high with a trip to the beautiful city of Victoria, B.C. for the Canadian Rheumatology Association (CRA) Scientific Meeting in February 2020. No sooner had we returned to the Prairies, we found ourselves in complete lockdown.

With an increasing number of in-person consultation cancellations in March 2020, it was clear that our normal practice of rheumatology was not going to be possible for much longer. Our Ministry of Health's early COVID-19 predictions were for 150K to 400K infections in the province, and an anticipated 3,000 to 8,000 deaths. So, after a flurry of consultative meetings with various stakeholders, many rheumatologists in Saskatchewan agreed to a pandemic agreement. This provided us with a monthly salary for three months and allowed us to practice virtual care while being available to be redeployed as required by the province at a time of need.

The learning curve with regard to providing virtual care in rheumatology was steep. From a predominantly tactile practice, examining people up close, we had to transition to assessing joint activity telephonically, which was not without its challenges. We also had to field many questions about this novel disease and its unique implications for our im-

muno-compromised population. Fortunately, there was excellent support from the CRA and many pharmaceutical companies for extremely informative WebEx learning sessions. These allowed us to learn from the COVID-19 experiences of rheumatologists in other parts of the world that were further along the pandemic curve. Much of the information was reassuring when faced with the anxiety of prescribing immunosuppressive therapy to immuno-compromised individuals in the midst of a pandemic. Many thanks to all those involved in making these learning opportunities possible.

At least five rheumatologists were called at various time periods during the pandemic agreement to work in internal medicine. During this time, we cancelled our community-based office work and took up duty in internal medicine. For rheumatologists with less experience in internal medicine, this was a humbling experience, with a return to managing medical conditions we had not seen in a while. Similar to the huge advances in management in the field of rheumatology, there were apparently similar advances in the management of complex internal medical conditions. Fortunately, the very competent residents were there to guide us through this adventure. However, their comments on our evaluation sheets indicated that we should keep our day jobs.



Our pandemic agreement ended with the month of June 2020 and thereafter we slowly saw a trickle of patients for in-person consultations. Fortunately, the province has continued to support our practices by maintaining the virtual consultation billing codes. At present we have approximately 60% in-person consultations and provide virtual care to about 40% of our patients. This split is driven purely by patient preference. We found that many outof-city patients and those with co-morbidities prefer virtual care due to concerns about visiting the city of Saskatoon, where we continue to have a small but steady number of positive COVID-19 cases. The fewer in-person contacts have allowed us to stagger consultations and provide the necessary disinfection between patients. It also allows us the time required to discuss the merits of wearing a mask or other suitable face covering with some of our less enthusiastic patients.

We undoubtedly live and practice rheumatology in interesting times. With determined Prairie optimism, we continue to be hopeful that 2020 will end off on a better note than it started.

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By Bindu Nair, MD, MSc, FRCPC

Greetings from Saskatchewan! 2020 has certainly ushered in plenty of surprises for all of us, and our rheumatology community has banded together to meet the challenges. There was a quick learning curve for some of us, but now a hybrid of both virtual appointments and safe in-person consultations as needed are provided to Saskatchewan patients. Earlier in the pandemic, our colleagues on hospital services required help and we had some amazing rheumatologists answer the call by working as attending physicians for the medicine inpatient teams. This fall saw the successful delivery of our undergraduate musculoskeletal foundations course by virtual teaching, which was received well by the medical students. Our provincial rheumatology group continues to remain connected and have lively discussions with weekly videoconferenced grand rounds.

We are pleased to welcome our colleague, Dr. Cairistin McDougall, who is practicing in Regina, and now brings the number of rheumatologists looking after adult patients in Saskatchewan to fourteen. We are also very excited to have Dr. Kate Neufeld and Dr. Hon Yan Ng join the Division of Pediatric Rheumatology at the Jim Pattison Children's Hospital in Saskatoon.

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