

MULA KAY

Ang Sanelor...

Hindi maiwasang mangamba ngayong “New Normal” dahil wala pa ring katiyakan kung kailan magkakaroon ng gamot o bakuna laban sa COVID. Talagang masasabi natin na sa ating buhay, dilim at liwanag ang dulot ng COVID-19.

Nararamdaman natin ang pagkabalisa at pagkabagabag ng mga damdamin ng ating mga narses sa PGH habang nag-aalaga ng mga pasyenteng may COVID-19. Saludo kami sa inyong dedikasyon! Angkop ang artikulo sa pagdiriwang ng ‘International Year of the Nurse and Midwife’ sa taong 2020.

Ang mga mag-aaral na dentista naman ay puno ng matinding alinlangan sa kanilang hinaharap dahil ang mga dentista ay mas ‘high risk’ sa COVID kumpara sa ibang propesyon. Sa kanilang *Teeth Talk Webinar* para sa *dental students*, tinalakay ang mga payo para maibsan ang pangamba at maging matibay ang kalooban sa kanilang pagbabalik sa pag-aaral. Pinaghahandaan na ng administrasyon ang karagdagang PPE na gagamitin ng mga estudyante sa pagharap sa mga pasyente. Sa darating na pasukan, hindi lang *frontline health workers* ang ating aalagan, pati na rin ang mga estudyante at kanilang mga guro.

Sa kabila ng lahat ng ito, may nakatapat na liwanag. Patuloy ang SIBOL-COVID Task Force sa pagtuklas ng mga aparato na makakatulong sa atin. Ang SaniPod ay mahalagang proteksyon laban sa COVID-19 para sa ating mga *healthcare workers*. Walang patid ang paghahanap ng mga gamot para sa COVID-19 at ang *virgin coconut oil* ay nagpapakita ng pag-asa. Tila hindi napapagod ang mga kabataan tulad ng UP Physician-Scientists Association gumawa ng mga pamamaraang talunin ang COVID-19. At dahil naaantig ang mga puso ng mga karaniwang tao at mga negosyante sa nakikita nilang pagsusumikap at sakripisyo ng ating komunidad, dumarating pa rin sila upang magbigay ng ayuda.

Tuwing umaga, pinagbabago natin ang lakas at tibay ng damdamin; magniningas ang mga ito upang takpan ang gabi ng takot. Hindi tayo matatalo dahil ang makapangyarihang Ilaw ng Panginoon ang ating tanglaw ngayon hanggang wala ng COVID-19!

SIBOL-COVID Task Force rolls out the SaniPod

The Surgical Innovations and Biotechnology Laboratory (SIBOL) of the UP College of Medicine has partnered with engineers, other scientists, and artists from UP Diliman creating a SIBOL-COVID Task Force to better equip UP Manila in its fight against COVID-19. The SIBOL-COVID Task Force has three teams doing several projects to address these objectives: (1) protection e.g. personal protection equipment or PPEs, (2) disinfection, and (3) distancing e.g. telemonitoring. The SaniPod is one of 5 projects for disinfection.



What is the SaniPod?

It is a disinfection cubicle for health care workers (HCW), specifically the frontliners, which provides another layer of protection against the virus.

How does it compare with other disinfection chambers, like the SaniTents?

Unlike the Tents, the SaniPod is meant for a single person. It also provides misting, but this is only one of several disinfection processes. The UP SaniPod has not just gone through technical scrutiny by our engineer partners; it has also undergone a “pathogen challenge”, which proves its efficacy against the microbe. In other words, evidence-based disinfection!

But didn't the DOH issue a warning against misting?

This warning is for unprotected people or HCW. The DOH allows misting only when the HCW is in full PPE, which is the case with the SaniPod. The Dept of Science & Technology (DOST) endorsed this proposal to the

Dept of Health and it is very clear that the HCW is protected while inside the SaniPod.

Who made it?

Like all the other projects of SIBOL, and now SIBOL-COVID Task Force, it is a product of intense collaboration which started from conceptualization, all the way to the finished product.

Our partners are headed by the team of **Prof. Eduardo Magdaluyo**, **Jason Pechardo**, and lead technician **Don Argote** from the College of Engineering Dept of Mining, Metallurgical and Materials Engineering (or triple M); **Engr.** (now Vice Chancellor) **Mitchay Pacia**; **Prof. Joyce Ibana** (biologist); and **Prof. Fe Carino** and **Eiza Yu** (chemists) from UP Diliman. The clinicians from UP Manila are **Dr. Edward Wang**, **Dr. Catherine Co**, resident **Drs. Jom Dychioco** and **Anya Pena**, microbiologists led by **Dr. Maita Lota**, and RA Nurse **Jenna Gonzalez**.
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The COVID-19 pandemic had an encompassing effect on dental education. Uncertainties on how dental education will move forward in the coming academic year and how graduating students will continue with their pending requirements and the challenges of dentistry as one of the riskiest professions in the time of COVID-19 have brought increased anxiety to future dental professionals.

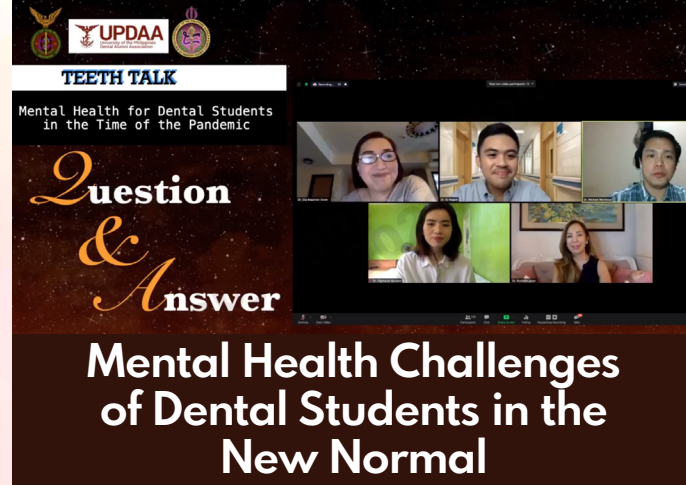
The UP Dental Association and the UP College of Dentistry (UPCD) with the UP Manila Dentistry Student Council organized the webinar **"Teeth Talk: Mental Health for Dental Students in the Time of the Pandemic"** with mental health advocate **Dr. Gia B. Sison** as speaker last 09 June 2020.

Chancellor Carmencita D. Padilla welcomed the dental students not only from UPCD but also students from 21 other dental schools. Dr. Padilla recognized the anxiety everybody was feeling and challenged all participants to rise up and reach their potential as compassionate dentists of tomorrow.

Dr. Sison shared what she called "Tips" and not hard and fast rules as many of the concerns raised by the dental students in an earlier survey pertained to uncertainty and anxiety. The pandemic generated many concerns: feelings of uncertainty over the future; dealing with the loss of lives/death of loved ones; adjustment to the changes; barriers to accessing services; heightened emotions, followed by anxiety and loss of sleep; and additional threats of isolation and loneliness.

The following were the tips shared by Dr. Sison based on the principle that "coping is individualized and each one does it in different ways":

- **Gratitude** does not mean letting go of a stressful situation; it is seeing something hopeful in time of uncertainty.



- **Maintain a daily routine of activities.**

Set a schedule and plan a variety of activities for the day.

- **Maintain social connection.**

Make brief, frequent online social interactions; create support group not just for dentistry but something you love that will allow you to unburden.

- **Limit exposure to triggering content.** Be mindful of the time spent on social media; limit this if already distressing; have a regular and allotted time for social media.

- **Provide practical help.** Engage in activities that will help you and others, e.g. join volunteer groups providing food or supplies to frontliners; volunteer in doing errands.

- **Reflect on existing coping strategies.** Examine how you can address barriers to self-care; reduce or eliminate negative coping strategies and replace with positive practices.

- **Practice sleep hygiene to boost immune system.** Avoid stimulants such as caffeine and nicotine close to bedtime; establish a regular and relaxing bedtime routine and environment.

During the open forum, Dr. Sison was joined by **Dr. RJ Naguit**, founder and chair of Youth for Mental Health Coalition, as panelist in responding to the queries of faculty and students.

Among other things, the importance of a community support and a referral and feedback system was emphasized to address the mental health issues facing the students. Both panelists explained the need for clear plans and communicating these to all sectors involved including the parents who will set the tone at home; and flexibility in the learning methods and evaluation of learning to be used. Regular consultations with them boils

down to participatory mechanisms and open feedback.

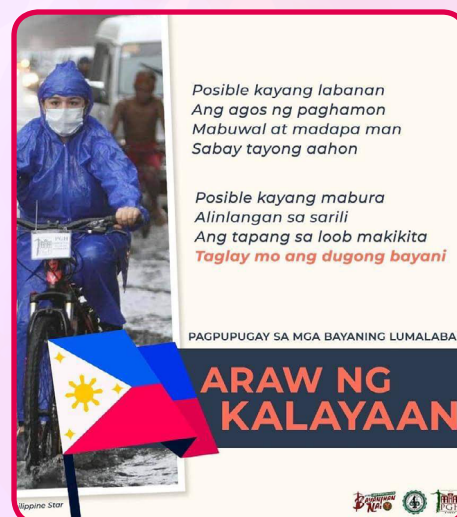
On symptoms that will require professional help, it was stressed that even with day-to-day concerns, a person can reach out to a guidance counsellor; and this will be more cost effective than waiting for the

mental health problem to worsen. Below are clues that one may be in need of professional help:

1. **Dysfunction.** *Nakaka-trabaho ka pa ba o nakaka-function sa school?* Are your relationships healthy?
2. **Deviance.** How does your behavior compare with others? Is your reaction to a stressful situation the same as others? If not, it may be time to seek additional professional help.
3. **Distress.** Do your dysfunction and deviance cause an internal distress on your part?
4. **Danger.** Does it pose a danger to oneself (self-harm) or are you at risk of being violent to other people? If so, you need to be referred immediately to a professional.
5. **Duration.** Usually, with symptoms of long duration, the actions are probably not normal reactions to a stimulus anymore.

This activity had more than 300 attendees via Zoom and about 600 participants on FB Live through the UPCD Facebook Page and various Watch Parties. So far, this has been shared 150 times and viewed 9,200 times.

Dr. Michael Antonio F. Mendoza
with Cynthia Villamor





Virgin coconut oil trials for PGH COVID-19 patients underway

Researches to determine possible benefits of virgin coconut oil (VCO) as a supplementary aid for COVID-19 patients are currently being conducted. Department of Science and Technology (DOST) Secretary Fortunato Dela Peña has announced that VCO trials on COVID-19 patients at the Philippine General Hospital (PGH) are finally underway. He stated that the Ethics Review Board of the University of the Philippines Manila National Institutes of Health approved the study on the use of VCO for moderate and severe cases of COVID-19. The PGH has started to enroll COVID-19 patients who will participate in the clinical trials.

The DOST provided a P5-million funding for two clinical studies on VCO. The other study is being conducted by the Food and Nutrition Research Institute in collaboration with the local government of Sta. Rosa, Laguna, Philippine Coconut Authority, and Medical City South Luzon. Dela Peña said the clinical study would involve 90 persons under investigation for COVID-19 who manifest symptoms of the illness.

The DOST secretary explained that the patients will be given VCO for 14 days to test whether the substance has good effect on them. He noted that while VCO trials in the Santa Rosa Community Hospital in Laguna had started almost a month ago, they are unable to meet the recommended number of 90 patients enrolled in the trial as the arrival of patients there is slow.

"What we did was to include the two other, shall we say hospitals or centers who have patients, and fortunately Medical City has set up a facility in Santa Rosa just two weeks ago and they agreed to participate," said Dela Peña. The quarantine center of Santa Rosa shall also provide additional patients for the trial, he added.

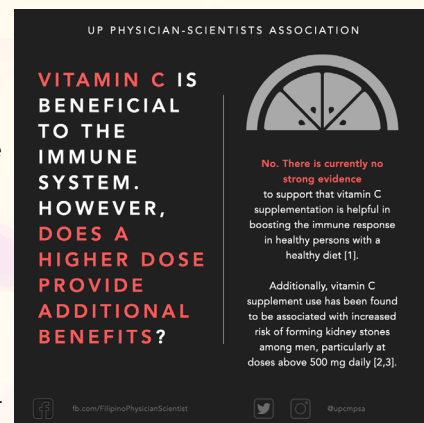
The article entitled "Coconut and COVID-19: Philippines Studying Anti-viral Properties of Coconut Oil as Potential COVID-19 Treatment" published in www.nutraingredients-asia.com on March 11, 2020 stated that coconut oil contains lauric acid and monolaurin, which the researchers believe are the potential mechanisms behind its anti-viral activity. If successful, they say that the use of VCO will be affordable and risk-free with potentially enormous benefits for COVID-19 patients.

For more information, please visit NutraIngredientsAsia.com, [CNN Philippines](http://CNNPhilippines.com), and [DOST](http://DOST.gov.ph).

UP Physician-Scientists Association: Stepping up in the COVID-19 Pandemic

In these challenging times brought about by the COVID-19 pandemic, the UP Physician-Scientists Association has stepped up to deliver accurate

and evidence-based data and to clarify misconceptions on COVID-19. Catering to laymen and the general public, an online platform is being used to extend the reach of these information.



On 9 April, we started the campaign **COVID-19 MythConceptions**, a series of infographics in both English and Filipino tackling common COVID-19-related misconceptions circulating since the pandemic began. The materials discussed current evidence on the use of high-dose Vitamin C and its effects on the immune system and prevention of COVID-19, inhalation of steam and gargling of warm salt water to kill the SARS-CoV-2, and spraying of alcohol and chlorine all over the body as an antiseptic procedure for COVID-19 prevention. All these were published in the organization's social media accounts in Facebook (The Filipino Physician-Scientist), Twitter, and Instagram (@upcmpsa); and have reached thousands on all our platforms.

Aside from this, the organization collaborated with the GlobalShapersManilaHub under the World Economic forum and with St. Luke's Molecular Medicine Society to form a science communication project which aims to make scientific articles on COVID-19 understandable to laymen.

We also participated in initiatives of other UP Manila organizations, namely the UP Manila College of Public Health Student Council and the UP Red Cross Youth, by supporting their donation drives to help provide PPEs and sanitation essentials to various hospitals in the country through sharing of publicity materials in all of our organization's social media accounts. For more details, follow us on Facebook: The Filipino Physician Scientist, Twitter and Instagram: @upcmpsa.

Nourishing bodies and hearts: Let's hear it from the food donors

In March 2020, the Pilipinas Shell Foundation, Inc. (PSFI) launched its *Ani Para sa Bayani* project as part of its bigger *Para sa Bayani* campaign that aimed to provide essential support to frontliners and communities by working together and doing our part in “flattening the curve”. The *Ani para sa Bayani* project aimed to promote good nutrition, food security, and livelihood by providing vegetables for frontliners and communities struggling to access nutritious food during the enhanced community quarantine and facilitate access to markets for local farmers that were struggling to sell their produce in the context of the ECQ. When PGH opened its doors as a COVID-19 referral hospital, we reached out to see if the hospital needed fruits and vegetables to augment the meals being provided to frontliners and patients in the facility. They confirmed this would benefit many and so we agreed to procure, transport, and donate the fruits and vegetables along with the requirements defined by the PGH team.

This donation contributed to the overall goals of the *Ani Para sa Bayani* Program: PSFI procured and transported approximately 4 tons of fruits and vegetables to PGH, supporting 14 local farmers in Rizal. PGH was able to provide meals to 22,506 frontliners and 715 patients. PSFI has always believed in the power of collaboration and we are grateful for the opportunity to work with farmers and support the frontliners.

Sebastian C. Quiniones Jr.
Pilipinas Shell Foundation, Inc.



Ako ay taga-UP at proud ako dito! Malapit sa puso ko ang UP-PGH at inisip ko kung paano makakatulong ang Franco's Friends sa Dietary Department.

Noong una, may takot kami na lumapit sa PGH dahil sa COVID, nguni't naging inspirasyon ang nakita naming pagod at hirap ng mga duktor, nars, at healthcare workers. Naghatid ako ng pagkain sa PGH—kung anu-ano ng naisip kong sintomas. Pero sa kabilang banda, naisip namin ang kapakanan ng PGH personnel, halos wala silang oras kumain.

Kalinga nami'y maghatid ng masarap, ligtas, at maayos na pagkain; at sana ay nagdulot ito ng panandaliang saya. Nawa'y busog ang mga tiyan at ang morale, para muling makasabak sa susunod na mga araw.

Mr. Ramon Eugenio
Franco's Friends PH



MORE FROM FOOD DONORS NEXT ISSUE...

SIBOL COVID TASK FORCE ROLLS OUT THE SANIPOD...

You can't imagine the intensity and the brains that went into and is still going into this collaboration!

Where did the funding come from?

Dr. Jimmy Montoya, Executive Director of DOST-PCHRD (Philippine Council for Health Research and Development) was committed from the start to fully support these urgent COVID projects. But while waiting for the DOST budget release, we were lucky to have a wealth of friends and private donors who provided initial seed money for all of our plans! One of our most generous donors was Xavier School High School batch 1975.

Will the SaniPod replace other misting apparatus?

No. We continue to learn from

other groups and we share our problems and solutions so that eventually, we can all develop the best chambers according to tried and tested plans and prototypes.

So, basically, how does the SaniPod work?

Upon exiting COVID-heavy areas, the HCW prior to doffing PPEs, enters the SaniPod for disinfection. AFTER disinfection inside the Pod, doffing occurs outside of the Pod. The Pod utilizes disinfectants whose safety has been approved by our chemists, biologists, and clinicians. There are also additional features (like air shower and UV irradiation among other things).

The big advantage of the SaniPod is the additional layer of protection for our HCW and the protection for those who clean up and dispose of our

discarded PPEs. The SaniPod is made in such a way that it allows none to minimal possible contamination not just of the HCW and people working around it, but even of the Pod itself!

How many are you making? Are they free?

As per DOST-PCHRD, we are going to make a total of 5 over the next few months to be deployed for free in PGH and hospitals requiring such disinfection units.

Note: If you want to discuss with clinicians, engineers, scientists, or artists regarding your possible solutions to a clinical problem, SIBOL is open to anyone from the University of the Philippines. Call 0917-7189948 and we will work with you to find an answer!

Dr. Edward Wang with Dr. Catherine Co (UPCM), Prof. Eduardo Magdaluyo, and Jason Pechardo (UPCE)



Learnings from COVID-19 Pandemic: PGH Nursing Experience

The Challenge

Working as nurses at the Philippine General Hospital, a designated COVID referral center, created a multitude of reactions. We were overwhelmed; there were many new protocols and policies to read and absorb and there was a new workflow. There was an escalating anxiety specially for those who will be assigned in the COVID-19 areas.

Nurses were in a “new world”; our nursing routines had to change and we must strategize to be effective. The lines that separated our personal lives from our work have also blurred with additional concerns for health and family.

Responding to the challenge: What we have done

To ensure that every nurse was aware of the situation, we needed to communicate effectively. A COVID-19 Crisis Management Team composed of doctors, nurses, and other medical professions was created. Issues and concerns pertinent to logistics, accommodation/housing facilities, infection prevention, etc were discussed and resolved together.

There was coordinative teamwork. Nurses were the vital link between the patients and the rest of the team. Our assessment and critical thinking helped determine the need for referral to subspecialists or changes in medical treatments. More importantly, nurses educated the patients and provided a listening ear or a calming touch via a gloved hand.

The use of Personal Protective Equipment (PPE) was a great discomfort; but a top priority in this extraordinary situation. Role changes were necessary for a smooth workflow. The headnurses and senior charge nurses became the Safety Officers, tasked to monitor the correct donning and doffing procedures of the PPEs. These procedures needed to be done slowly and meticulously and

the Safety Officers’ role was of utmost importance in this regard. They made sure the PPE fitted well and that there was no exposed skin; and during doffing, they closely monitored the procedure to prevent contamination.

A shift to electronic documentation utilizing Registry of Admission and Discharges developed by Dr. Homer Co, Coordinator for Services, became the communication tool for drugs and medicine needs, schedules for radiologic and laboratory procedures, documentation of doctors’ orders, and the nurses notes.

To rekindle family ties, the Telekomusta which enabled patients to communicate with relatives was launched and coordinated by nurses. This interaction via the Telekomusta computer in the wards helped decrease anxiety and fears among patients.

We had to learn Zoom as platform for meetings; and several viber message groups plus the Messenger were utilized for immediate communication, avoiding face to face interactions at all times.

The experience of providing care for COVID-19 patients and some negative outcomes created immense psychosocial disturbances. Of great assistance was the PGH C.A.R.E.(Counselling, and Assistance Towards Recovery and Empowerment) Society whose members are trained mental health nurses. Interventions were geared towards reinforcing active and positive coping skills that enable nurses to better manage their emotional and psychological reactions.

Nurses learned to identify themselves for their patient’s benefit through their creativity and innovativeness. The photographs, colorful sketches, Disney character drawings, and printed names on our PPEs were personalized approaches

for identity.

Visible and Compassionate Leadership

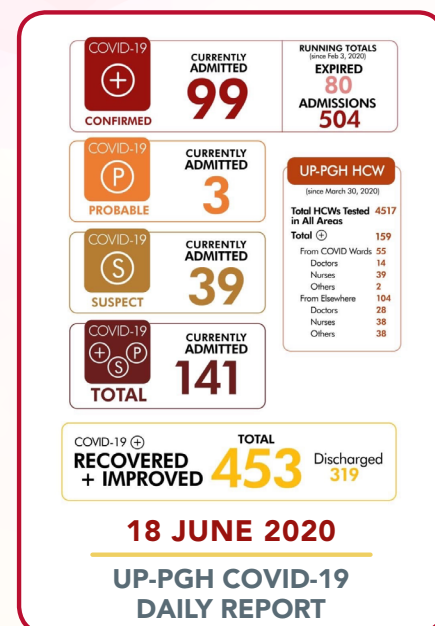
The visible leadership of PGH Director Gerardo D. Legaspi was felt by the entire community; as he made his rounds and captured what it was like in the “trenches” of the organization.

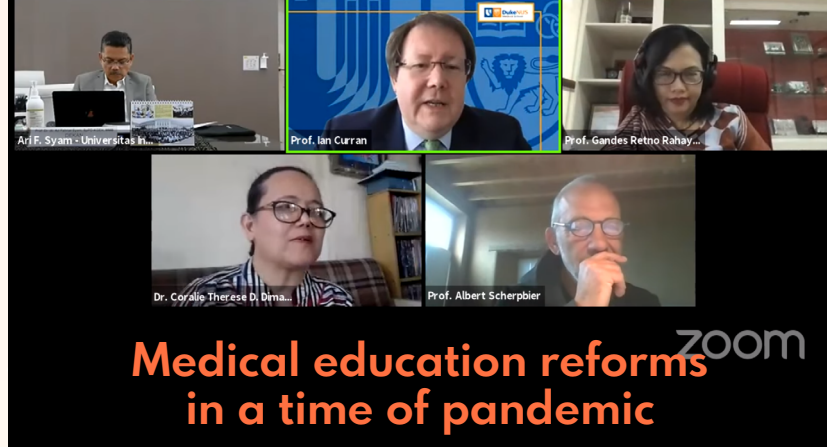
All the Headnurses and Chief Nurses were cognizant of the difficulty in managing people and building relationships from behind a desk; hence, they did rounds, interacted, assessed, and intervened together with the nursing personnel.

There was shared learning of new skills as the doctors and nurses worked together. As compassionate leaders, they shared experiences which benefitted nurses. They demonstrated commitment with their consistent involvement in the team.

The PGH community is fortunate that our leaders are truly passionate and take the time to demonstrate that passion with visible actions. We were all inspired and felt

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Medical education reforms in a time of pandemic

The COVID-19 pandemic has resulted in major changes in the education system raising critical issues and concerns especially for medical schools. Bringing together experts from ASEAN member regions, the webinar [Medical Education during the COVID-19 Era: Adapt to the Change](#) was held on 08 June 2020.

Organized by the Association of Academic Health Centers International South East Asia Regional Office, the webinar presented the varied experiences of speakers representing three SEA countries.

UP College of Medicine's Associate Dean for Academic Development **Dr. Coralie Therese D. Dimacali** spoke on the effects of the community quarantine on Philippine medical education, the challenges, and the strategies for transitioning to flexible learning.

From the rapid move to online classes, Dr. Dimacali recommended a review and redesign of the curriculum of medical schools to include outcomes to make blended learning succeed. She recommended a survey of students to identify their preferences for learning, to keep in touch with their educational needs, and to more efficiently utilize resources that they are more likely to use.

According to Dr. Dimacali, education without contact with patients is difficult. Hence, adaptability, flexibility, and discipline are important in these times to create efficient methods of learning. However, until an effective vaccine is found, she reckoned that teleconsults will have to make do for the new normal.

Finally, she stressed that the school should be able to provide reliable and supported instructional technology and train their faculty, students, and staff on flexible learning.

Prof. Ian Curran presented the Duke-National University Singapore Medical School's approach. They went on to utilize telemedicine, simulations, and simulated patients. These simulations were done to leverage for the intensive assessments their Ministry of Health requires of them to ensure that their graduates were assessed properly. These endeavors were conducted with minimal in-person student-to-examiner interactions, minimized number of simulated patients on-site, and minimized faculty and staff.

Imparting the experiences of Universitas Gadjah Mada in Indonesia, **Prof. Gandes Retno Rahayu** reported the pros and cons of online learning based on their students' feedback. Some feel that it was more flexible and relaxed. Many saw areas for improvements such as lessening the assignments and improving concentration. Some raised concerns on internet cost as well as the changing schedules.

Their methods of online learning involved synchronous lectures, recorded lectures, required reading, tutorials, and small group discussions. On the practical session, they provided video learning, quizzes to assess the comprehension, and discussions with the facilitator. They created the online platform called GaMEL (Gadjah Mada Medical ELearning) that provided resources for their student's use.

Anne Marie Alto

LEARNINGS FROM COVID-19 PANDEMIC: PGH NURSING EXPERIENCE

empowered to do more because of this.

Strategies that work

1. Share responsibility with colleagues. Nurses at all levels must share leadership and from this collective energy, strong networks can be formed that will result in excellence in nursing practice.
2. Create teams for raising more ideas. Teamwork is extremely important because it improves the quality and safety of patient care, makes the nurse's job more efficient, and helps to improve job satisfaction.
3. Provide access to information for better awareness of the nursing community through infographics.
4. Develop opportunities for experience-based learning to derive meaning and significance from actual patient care encounters.
5. Sustain safety measures for HCW protection including compliance to infection control guidelines.
6. Establish psychosocial support mechanisms to address mental health. These include group and individual stress counselling sessions, tele and email counselling, coaching, buddy systems, and staff support intervention.

Nurses are indeed heroes. As Christopher Reeve puts it, "A hero is an ordinary individual who finds the strength to persevere and endure in spite of overwhelming obstacles".

Cecilia G. Peña

