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## Training for a Marathon – Responding to a Pandemic

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## Training for a Marathon – Responding to a Pandemic

Editor's Message: Mary I. Fisher, PT, PhD

More than six months along in the coronavirus COVID-19 pandemic, it may be tempting to give up the fight. But the world, and with it the research community, is in this for the long haul. Finding solutions to reducing risk, preventing transmission, curing severely ill, managing the long-term sequelae of COVID-19, and protecting vulnerable populations from this seemingly unstoppable adversary is more like a marathon than a sprint. We must continue along the course until we reach the finish line.

This month we bring to our readers a special issue focusing on providing care to those with cancer and other chronic disease during the time of COVID-19. I commend all of the authors of this special issue for quickly rising to the challenge of the call to submit manuscripts to this journal; the ability to pivot research to address contemporary challenges has never been easy, and in these times, surely a miracle. A typical research study can take more than a year from inception through data collection to write-up; and several more months beyond that to move through the peer review process. The manuscripts collected in this issue represent herculean efforts on the part of the authors to write and revise them, the reviewers to provide thoughtful, in-depth but efficient reviews to address important flaws in manuscripts, and to the editorial and production teams, who together made this happen. A simple thank you hardly seems enough for all of the efforts put forth, nonetheless, *a sincere thank you to all.*

Over the past half-year we have watched the need for innovations in care transform healthcare delivery at a pace seldom, if ever, seen before. Many clinicians transformed to critical care workers to assist in the care of those gravely ill with COVID-19, some of whom had a diagnosis of cancer as a comorbidity. Others worked to transform in-person care to e-health (electronic health/telehealth/telerehabilitation/videohealth) strategies to protect vulnerable immune systems

while not sacrificing continuity of care. Physical therapists and other rehabilitation providers are among the healthcare providers considered essential workers during this pandemic.<sup>1</sup> As such, the important work of rehabilitation continues, and the clinicians with boots on the ground are among the first to find solutions to the hurdles of providing care in this new reality. These problems faced by healthcare providers in delivering care to those with cancer is the same the world over. The manuscripts in this issue provide important information as we navigate how to provide safe and effective care in the time of COVID19. We see in Helm, et al,<sup>2</sup> the risks and results of disrupted care for adults with cancer, and the work by Drouin, et al,<sup>3</sup> provides a world-view of how international physiotherapists adapted patient care during the pandemic with suggested evaluation criteria and decision-making processes for providing uninterrupted care in new ways. Other contributions highlight possible solutions to meeting the varying needs of those with cancer, including children. The lessons learned are that creativity and flexibility are required to continue our services uninterrupted.

While the finish line for this marathon is not yet in sight, we must continue to move forward, taking the necessary steps to provide our essential care to those who rely on our expertise during this pandemic. As Pheidippides, the Greek soldier who ran to Athens to report the victory at the Battle of Marathon, we, too, must run toward our victory over COVID-19.

1. Krebs CK. Advisory Memorandum on Identification of Essential Critical Infrastructure Workers during COVID-10 Response. Cybersecurity and Infrastructure Security Agency, US Department of Homeland Security. Washington DC. 5.19.2020. Accessed 8.12.20 [www.cisa.gov](http://www.cisa.gov).
2. Helm E., Kempinski KA, Galantino ML. Impact of Disrupted Rehabilitation Services on Distress and Quality of Life in Breast Cancer Survivors during the COVID-19 pandemic. *Rehabil Oncol*. 38(4).

3. Drouin JS, Chigbo NN, Newstead AH. Physiotherapist Adaptations for Cancer, HIV/AIDS, Hospice and Palliative Care in the COVID-19 Era: A Global Perspective Paper. *Rehabil Oncol.* 38(4)

pre pub accepted manuscript