The original article published in this issue, from the multidisciplinary team of the Hospital Fernández\(^1\) calls for reflection:

The pandemic caused by the SARS-CoV 2 virus posed an unprecedented challenge to our healthcare system. The authorities’ lack of foresight in the face of this event that first spreaded across the Northern hemisphere was added to a deteriorated, insufficient infrastructure. To deal with this challenge, the healthcare personnel provided their working and intellectual capacity and, in many cases, their own life, in order to save as many people as possible. We can never thank them enough for their effort.

The medical teams had to apply their previous knowledge together with the new skills they developed along this difficult path. The intensive use of the decubitus prone position and the ECMO were some of the resources used by the medical teams, among other things. However, the high contagiousness of the virus complicated the performance of tracheostomies and the management of the airways in general.

The article in question adresses some of the sequelae that have a long-term impact on the patient’s quality of life once the acute symptoms are resolved. Airway stenosis and swallowing disorders of local or neurologic etiology are “new” diseases whose prevalence increases and will continue to increase as long as patients undergoing prolonged MRA due to various diseases survive thanks to the effort of physicians, nurses and kinesiologists, as previously mentioned.

Therefore, this work becomes relevant because it focuses on the consequences on swallowing and on the nutritional status and lung function of affected individuals. It is reasonable to expect more research about long-term sequelae of prolonged MRA.

REFERENCES