

The COVID-19 Pandemic's Impact on Otolaryngology Training: A Systematic Review

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INTRODUCTION

Background: In response to the **COVID-19 pandemic**, **Otolaryngology residencies** globally **altered curricula** on an institutional basis.¹⁻²⁹

Aim 1: To present a comprehensive systematic review summarizing educational changes to Otolaryngology curriculum during COVID-19.

Aim 2: To evaluate implications on clinical and surgical training, didactic education, and well-being.

METHODS

Cochrane, Embase, Google Scholar, PubMed, Scopus, and Web of Science were queried for English articles from 2019-2023.

The search terms used were (COVID-19 OR Pandemic) +/AND (ENT OR Otolaryngology) +/AND Resident +/AND Residency.

Two reviewers extracted data on country of origin, study type, and changes to training, didactics, and residents' well-being.

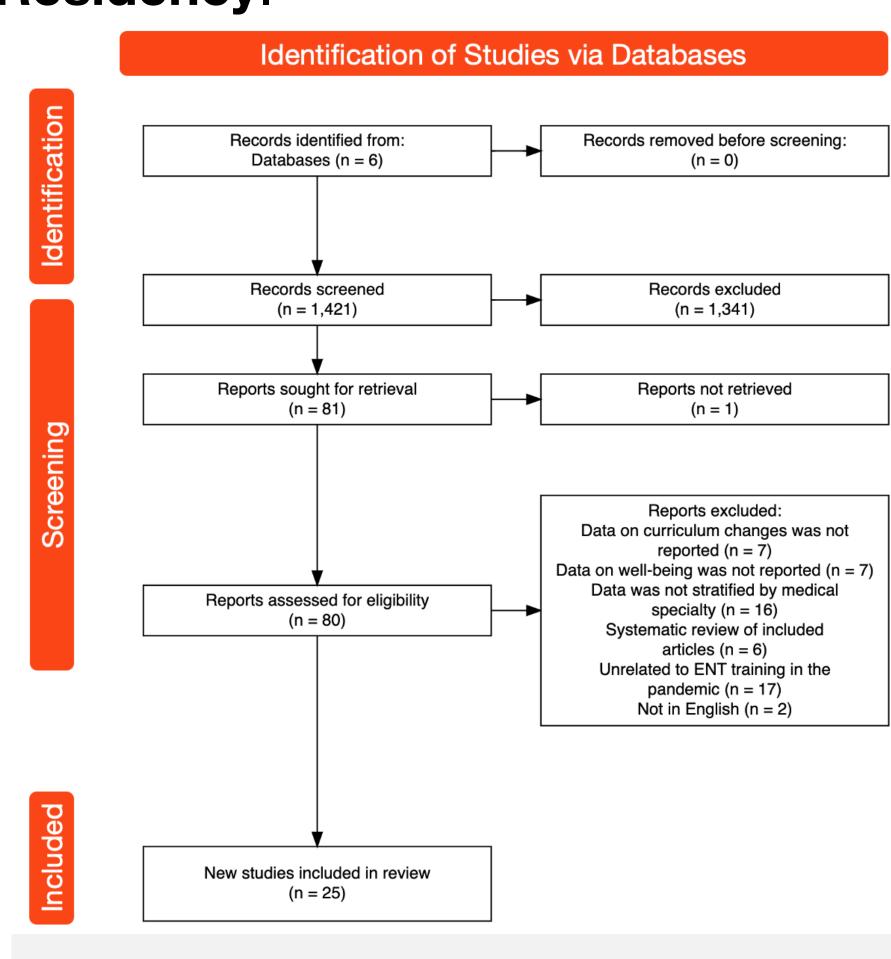


Figure 1: PRISMA Flow Diagram.

Of 25 articles, the majority were cross-sectional studies from residency programs in the United States, multiple

European Union nations, and Saudi Arabia (Fig. 2, 3).

14 articles reported changes to residents' well-being and 2 articles discussed future employment (Fig. 4).

13 articles reported changes to clinical and/or surgical training and 13 discussed didactic changes (Fig. 5).

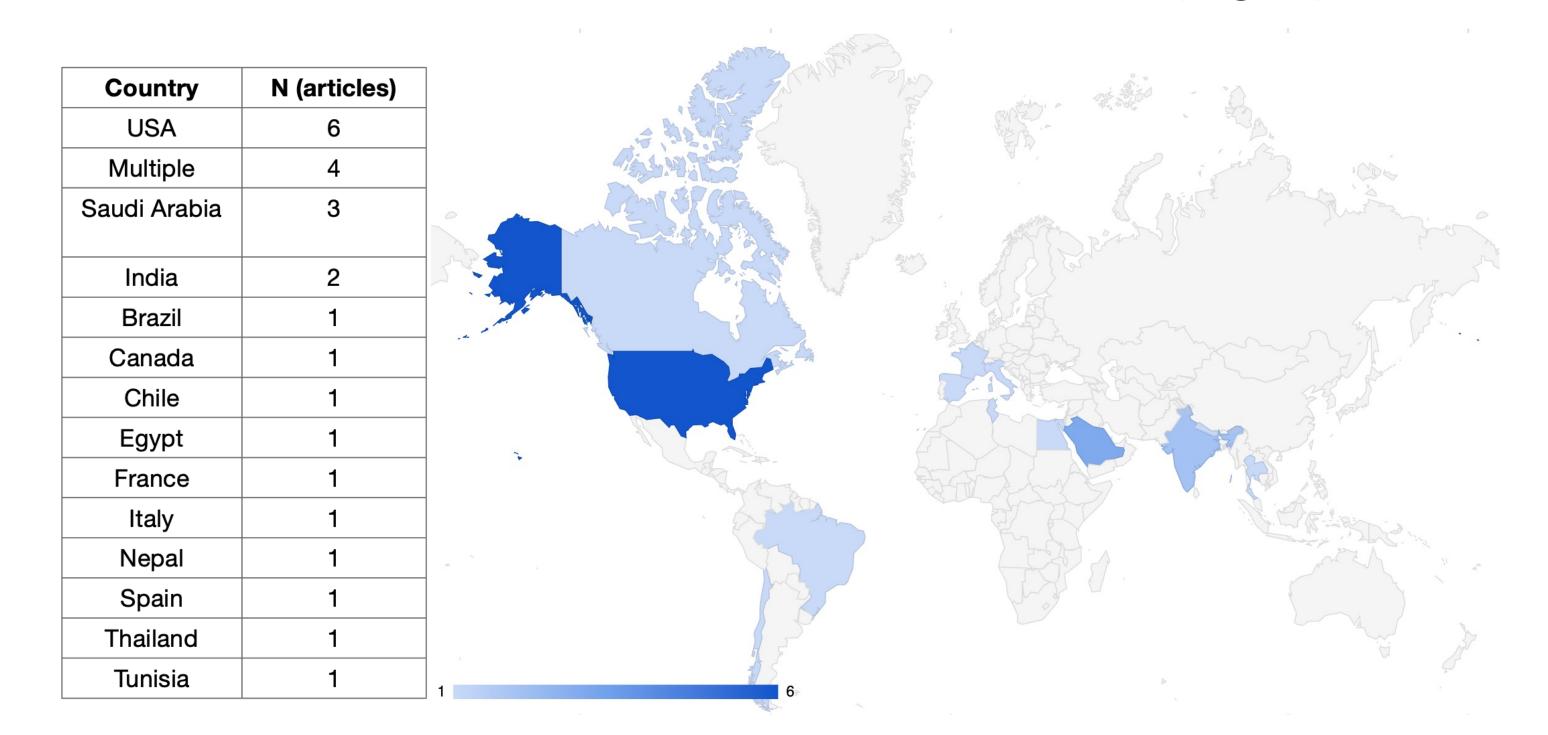


Figure 3: Table and global heat map showing country of origin for included studies.

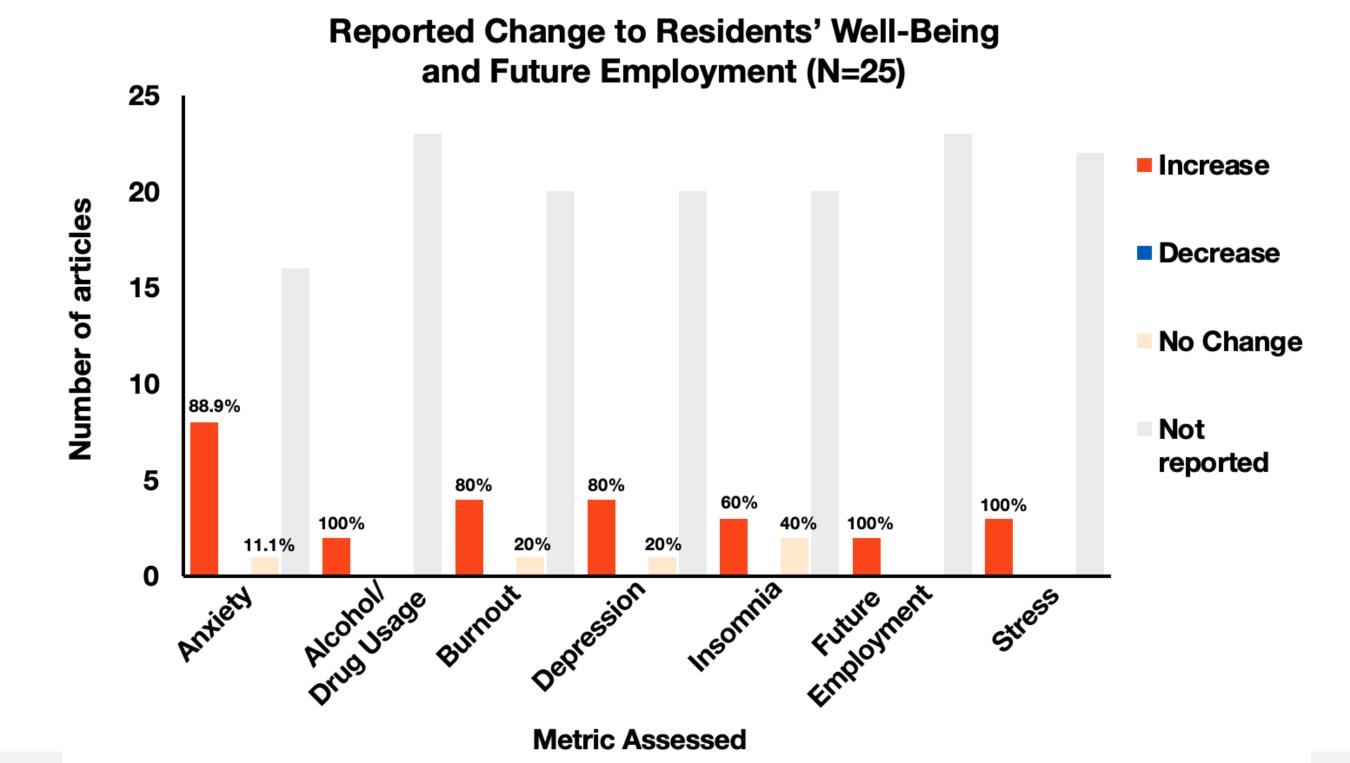


Figure 4: Comparison of changes to residents' well-being and employment. Percentages above exclude unreported data.

RESULTS

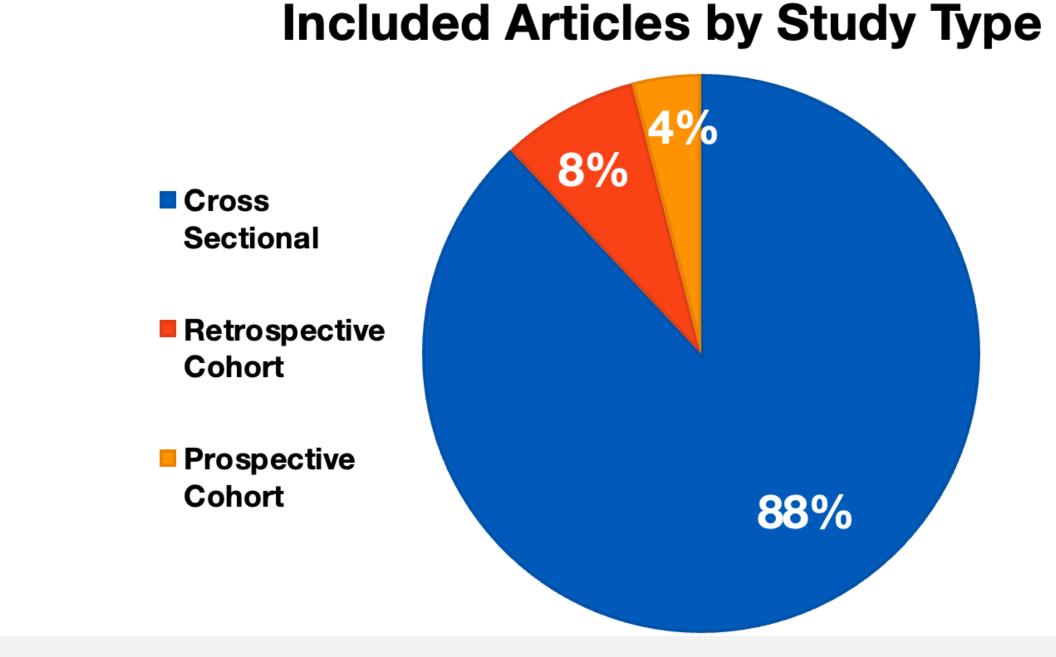


Figure 2: Articles divided by study type.

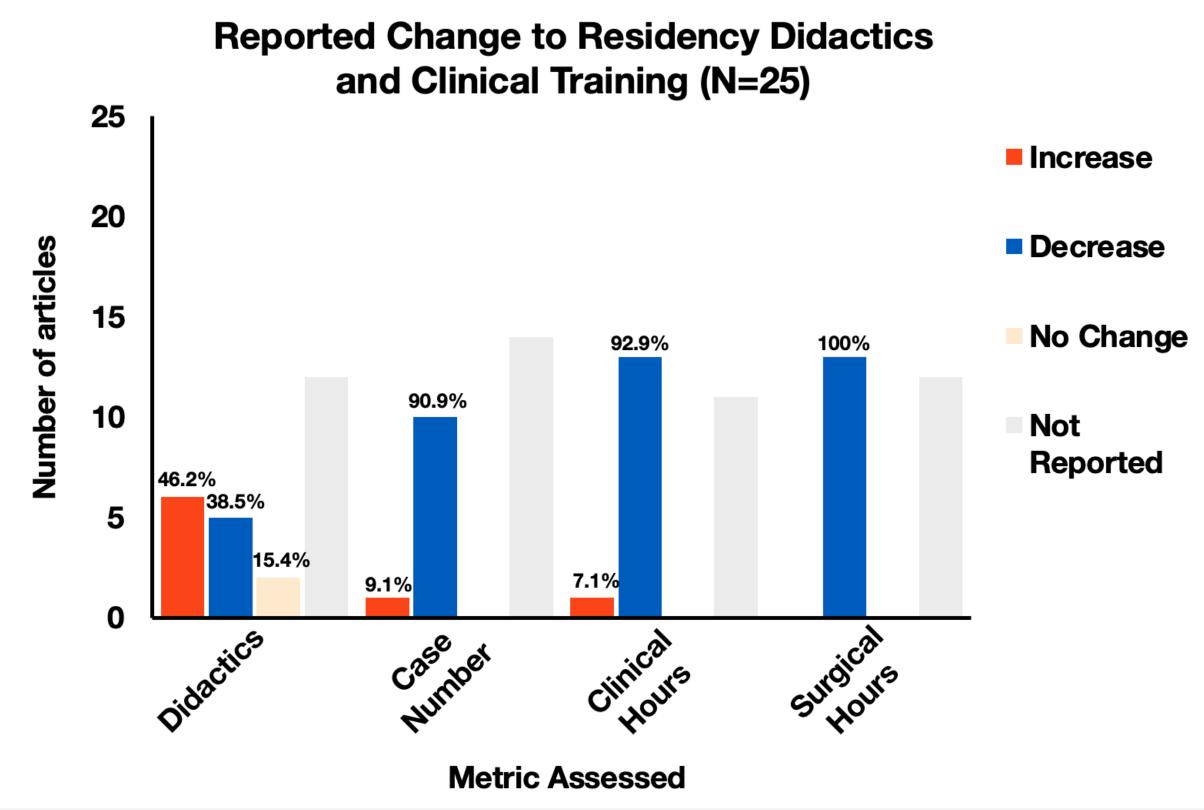


Figure 5: Comparison of changes to otolaryngology didactic education and clinical training. Percentages above exclude unreported data.

CONCLUSION

Residents had less training opportunities and worsened wellbeing during the pandemic.

Didactic changes depended on access to technology and may highlight global disparities.



