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### Age-based discrimination in Covid-19 patient care

Published online on July 7, 2020. DOI: 10.20529/IJME.2020.074

Although all age groups are at risk of contracting Covid-19 disease, older people are facing the highest risk due to ageing and underlying health conditions (1). According to the US Centers for Disease Control and Prevention report, 8 out of 10 deaths reported in the US have been of adults 65 years old and older (2). Therefore, the global recommendation for older populations includes social isolation, which involves staying at home and avoiding contact with other people, possibly for an extended period of up to three or four months (3). Such distancing presents serious challenges to the health and well-being of older adults, more so those who are frail or have multiple chronic conditions (4).

The elderly are among the primary recipients of healthcare and require high-quality, specialised care (5); hence it must be considered how the Covid-19 pandemic and steps taken by governments, such as lockdown, affect their human rights (6). In some areas, Covid-19 is overwhelming intensive care unit beds, mechanical ventilator capacity, and the ability of hospital personnel to care for patients. There are also several reported cases of discrimination against and neglect of the elderly, due to negative attitudes that should be combated (7). The exclusion of older persons from medical treatments has been studied, but without considering the drastic health consequences for them (8).

Ageism is defined as a systematic stereotyping of and discrimination against people who are aged. Ageism and discriminatory practices toward the elderly are prevalent not only in the general population but also among healthcare personnel, especially those in long-term care programmes for the elderly (5). Inadequate training of health service providers for the aged leads to negative attitudes, and consequently, to adverse effects on healthcare outcomes (9). Aronson also points out that "internalised ageism may be strengthened because some older adults themselves have resisted identifying as at-risk. After all, it means they are acknowledging the reality of their age" (10).

Older adults should have the same protections as other age groups, and these must be adequately implemented, especially

during the pandemic. Older people are more vulnerable and less equipped to defend themselves and to be assertive in demanding optimal medical care. Given the extent of ageist attitudes and stereotypes and the negative consequences of ageism for health and quality of care, developing effective educational interventions to sensitise both healthcare workers and the general population to ageism should be a priority.

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### Ethics for laboratory professionals during the Covid pandemic

Published online on May 28, 2020. DOI:10.20529/IJME.2020.063.

**Keywords:** laboratory medicine ethics, Covid-19, quarantine, corona heroes, microbiologists

It is not wrong to say that ethical issues have been given limited attention by professionals in laboratory medicine as compared to other fields of medicine (1). The most ethically problematic laboratory examinations are those dealing with genetic testing, autopsies, prenatal and HIV examinations and