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Informing Our Response to 3 Pandemics

The literature about the impact of COVID-19 on primary care and psychiatry—the domain of the *Primary Care Companion for CNS Disorders*—is growing rapidly. The PCC has published a portfolio of reports on numerous aspects of the pandemic, with an emphasis on including literature from all parts of the globe. These reports have included insightful cases from community, ambulatory, and inpatient settings, as well as articles about psychiatric aspects of social phenomena such as the experiences of migrant workers in India and approaches to their care and the stresses on and responses of health care providers in many different cultures. Authors have shared clinical wisdom about treatment of patients at a time when the science is still emerging. While this has been an important addition to the information that the PCC is providing, I have been impressed that authors have been able to continue research and scholarly activity *not* related to the pandemic. We welcome and encourage submission of manuscripts that inform our readers to address the myriad issues that arise relevant to the overlap of primary care and psychiatric and neurologic practice.

But, we are experiencing multiple related pandemics in addition to that of COVID-19. In the United States and globally, the second related pandemic, not as well characterized and curiously almost missing from the literature, is that of extremism and related social media–promoted misinformation (otherwise known as “fake truths” or “lies”) that fan conspiracy theories, polarization, and increasingly dangerous social and political movements. We know that patients with psychiatric vulnerabilities may be particularly susceptible to such influences, which also may exacerbate certain psychiatric conditions and affect our patients’ functioning.

A third and unfortunately long-term pandemic of poverty and deprivation has been worsened by the disruptions caused by COVID-19 and those resulting from extremism. These 3 pandemics contribute and exacerbate each other. As health care professionals, and particularly as health care professionals engaged with patients and populations very vulnerable to all 3, we can have a major role in responding to them.

We will continue to accept manuscripts that add new clinically valuable information to the COVID-19 pandemic literature relevant to those with psychiatric conditions. I also invite you to submit manuscripts that consider how the other interrelated pandemics are influencing your patients, your practices, and systems of care. Please share insights that may help others recognize these interrelated pandemics and their effects as well as clinically effective strategies for responding to them so as to minimize the damage they are causing patients with psychiatric disease. As health care professionals, we hold important and potentially influential roles in our societies. Evolving a literature regarding our experiences and insights into how we can provide benefit related to these additional pandemics can help guide and increase the effectiveness of the care we provide.

I am delighted with the new web presence of the PCC. Please explore the new site at Psychiatrist.com/pcc—it is loaded with additional material that you might find valuable, including easy to access CME and news updates.

This past year, we have all benefited from the reviews submitted by our peer reviewers. In a period of great stress and numerous demands, I am particularly appreciative for their time and the thoughtful assessments and manuscript improvements resulting from their service. We are fortunate to be able to draw from generous and expert peer reviewers from around the world. As a way of recognizing their efforts, we now offer CME credit to our peer reviewers; to learn more about the peer review process, please visit Psychiatrist.com/reviewers. I also want to acknowledge the staff at Physician’s Postgraduate Press, Inc. and particularly thank our managing editor, Sallie Gatlin, for the amazing work they have done this past year in the midst of all the turmoil in our collective lives.

Larry Culpepper, MD
Editor in Chief



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