



Implications of SARS CoV-2 positivity in amniotic membranes for ophthalmologists

Vidhi Jain ¹ · Tanuj Kanchan²

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To the Editor:

We read with interest the article by Seah et al. [1] and correspondence thereof by Yeung [2] regarding the potential dangers of COVID-19 in ophthalmologic practice. While the former highlighted the importance of human secretions like tears as a potential source of transmission of the virus, the latter explored the possibility of SARS-CoV-2 in amniotic membrane grafts.

The amniotic membrane, while having great potential for healing ophthalmologic wounds, was recently shown to be RT-PCR positive for viral RNA in two critically ill pregnant females with COVID-19 [3]. Amniotic fluid specimen too, tested RT-PCR positive in an earlier case report of possible maternal-foetal transmission [4]. While there is no confirmed data on the survival of SARS CoV-2 in cryopreserved amniotic membranes, it is clear that temperature strongly influences viral persistence (>2 weeks survival at 4 °C vs only 2 days at 20 °C) [5].

In light of these findings, we strongly suggest ophthalmologists to observe extreme caution while handling body fluids and placental membranes during the current COVID-19 pandemic. The approach of testing a pregnant female donor for the disease by throat swab RT-PCR may be augmented by placental and/or membrane PCR. Amniotic membranes cryopreserved during this period (January 2020 onwards), from asymptomatic donors must be confirmed to be free of this infection before being used to treat

immunocompromised patients like those of Steven Johnson syndrome etc.

Compliance with ethical standards

Conflict of interest The authors declare that they have no conflict of interest.

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✉ Vidhi Jain
jainv@aiimsjodhpur.edu.in

¹ Department of Microbiology, All India Institute of Medical Sciences, Jodhpur, India

² Department of Forensic Medicine, All India Institute of Medical Sciences, Jodhpur, India