

## Introduction

This issue of Clinical Liver Disease brings together eight articles to help hepatologists and other clinicians safely care for persons with chronic liver disease (CLD) during the COVID-19 pandemic. The COVID-19 pandemic demands the attention of every clinician particularly those caring for patients with CLD. In less than 120 days, SARS-CoV-2 infection, and the resulting respiratory disease, COVID-19, has grown from a outbreak of 27 cases in Wuhan, China to a pandemic of over three million SARS-CoV-2 infections and more than 200,000 COVID-19 related deaths in 179 countries. The series examines what is known about the inter-relationship between SARS-CoV-2 infection, viral hepatitis and other causes of chronic liver disease, implications of COVID-19 disease for management of patients with end stage liver disease and post liver transplantation, and prospects for COVID-19 therapies. Complicating matters,

SARS-CoV-2 is a respiratory virus readily spread from person to person particularly among health care workers and patients. The series reviews the epidemiology of SARS-CoV-2 transmission, and the non-pharmacologic interventions in place to stop community transmission pending development of effective vaccines. To limit patient exposures to health facilities, the series the merits of tele-health or "tele-hepatology" strategies for routine patient care. A synthesis of recommendations from AASLD, APASL, and EASL, reveals agreement in changes in clinical practice to prevent nosocomial transmission and best approaches for quality care of patients with CLD. The references to credible information resources provided in this series and future articles in Clinical Liver Disease will help clinicians stay abreast of the evolving understanding of COVID-19 pandemic, and innovations in prevention and treatment of COVID-19.