

Treatment guidance for lung cancer patients during the COVID-19 pandemic

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Lung cancer patients are at heightened risk for COVID-19 and the reported high mortality rate among lung cancer patients with COVID-19 has given pause to oncologists who are faced with patients with not one,

but two severe, life-threatening diseases.

To help oncologists address the many challenges COVID-19-positive [lung cancer](#) patients present, a team of global lung cancer specialists this week published a review of lung cancer treatments for patients with COVID-19 in the current issue of the *Journal of Thoracic Oncology*, the official journal of the International Association for the Study of Lung Cancer (IASLC).

"The purpose of this manuscript is to present a practical multidisciplinary and international overview to assist in treatment for lung cancer patients during this pandemic, with the caveat that evidence is lacking in many areas," said lead author Chandra Belani, MD, chief science officer for the IASLC, Professor of Medicine and Oncology at the Penn State College of Medicine and Penn State Cancer Institute.

As a group, lung cancer patients tend to be older and have an increased risk of relative immunosuppression from the underlying malignancy and from anti-cancer treatments. Furthermore, patients with lung cancer may have additional comorbidities, including a history of smoking and pre-existing lung disease.

"A major consideration in the delivery of cancer care during the pandemic is to balance the risk of patient exposure and infection with the need to provide effective cancer treatment," Belani writes.

The rapid onset of the COVID-19 infection requires careful consideration of urgent decisions to treat lung cancer. Treatment decisions balancing the risk of exposure with effective care require close multidisciplinary discussions and thorough deliberation between caregivers and patients. The duration and severity of the COVID-19 pandemic are unclear, and treatment delay alone will be insufficient to provide optimal treatment to cancer patients.

"In combination with determining a treatment path for lung cancer, physicians should educate patients to help them prevent further spread of COVID-19 according to WHO and CDC guidelines," Belani urged colleagues.

COVID-19 complicates cancer care further by forcing patients into self-isolation to protect themselves, other patients, providers, and family members.

"Self-isolation goes against best practices for treating cancer patients, which often calls for joining support groups, reaching out to loved ones and family members for assistance and remaining active," Belani said. "The decision regarding immediate vs. delayed treatment during the COVID-19 pandemic should balance the delay of treatment in the presence of existing co-morbidities vs. the possible harm from COVID-19."

Belani and his co-authors include advice to clinicians that intersects with virtually all [lung cancer patients](#), including those with early-stage lung cancer, locally advanced lung cancer, COVID-19 and immunotherapy, advanced stage non-small cell lung cancer and small cell [lung cancer](#).

More information: *Journal of Thoracic Oncology* (2020). [DOI: 10.1016/j.jtho.2020.05.001](#)

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