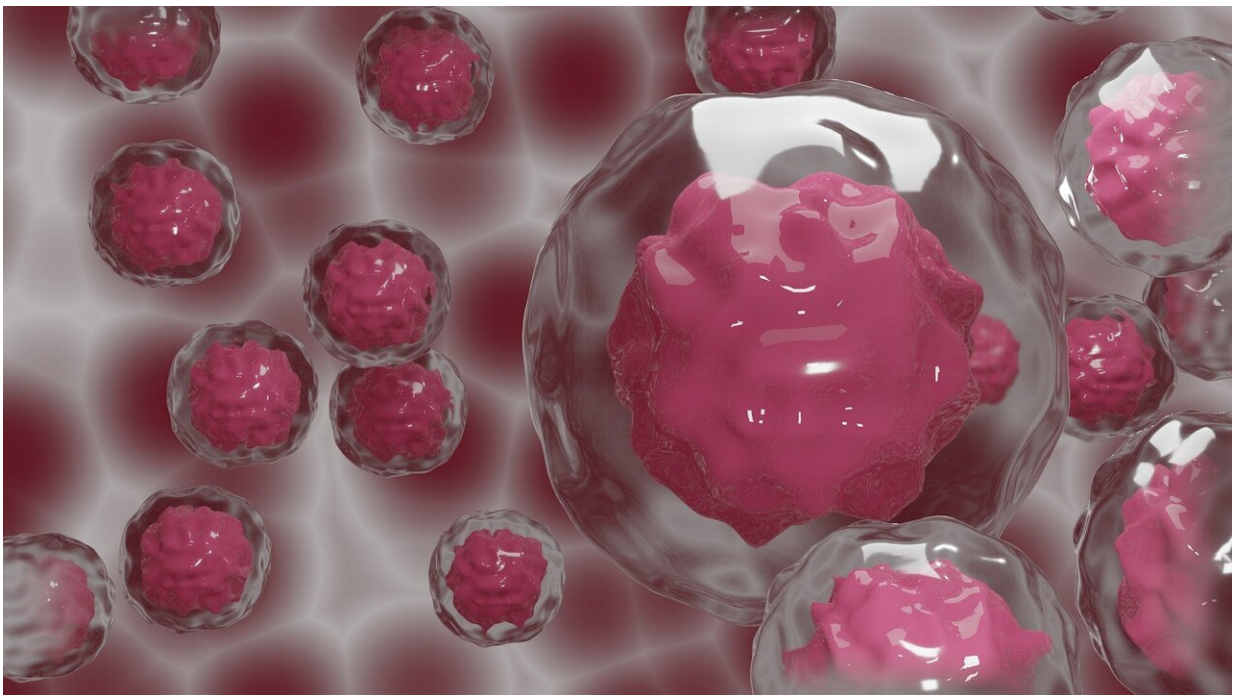


Researchers find that common cancer treatments don't worsen coronavirus infection

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A team of researchers at Memorial Sloan Kettering Cancer Center (MSK) reported on the epidemiology of COVID-19 illness experienced at an NCI-designated cancer center during the height of pandemic in New York City.

The characterization of COVID-19 in patients with cancer remains limited in published studies and nationwide surveillance analyses. Reports from China and Italy have raised the possibility that patients with cancer on active therapy have a higher risk of COVID-19 related severe events, although there is a knowledge gap as to which aspects of cancer and its treatment increase the risk of severe COVID-19 [disease](#).

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According to a new study from Memorial Sloan Kettering published June 24 in *Nature Medicine*, patients in active [cancer treatment](#) who develop COVID-19 infection don't fare any worse than other hospitalized patients. Notably, [metastatic disease](#), recent chemotherapy, or [major surgery](#) within the previous 30 days did not show a significant association with either hospitalization or severe respiratory illness due to COVID-19. Researchers say their findings suggest that no one should delay cancer treatment because of concerns about the virus.

"If you're an oncologist and you're trying to figure out whether to give patients chemotherapy, or if you're a patient who needs treatment, these findings should be very reassuring," says Ying Taur, MD, Ph.D., an Infectious Disease Specialist at MSK.

"The course and clinical spectrum of this disease is still not fully understood and this is just one of many studies that will need to be done on the connections between cancer and COVID-19," explained Mini Kamboj, MD, Chief Medical Epidemiologist, Infection Control at MSK. "But the big message now is clear: People shouldn't stop or postpone cancer treatment."

The study looked at 423 MSK patients diagnosed with COVID-19 between March 10 and April 7. Overall, 40 percent were hospitalized for COVID-19, and 20 percent developed severe respiratory illness. About 9 percent had to be placed on a mechanical ventilator, and 12 percent died. The most frequent cancer types included solid tumors such as breast, colorectal, and lung cancer. Lymphoma was the most common hematologic malignancy. Over half of the cases were metastatic [solid tumors](#).

Similar to other studies in the [general population](#), the researchers found that age, race, cardiac disease, hypertension, and chronic kidney disease correlated with severe outcomes. The investigators found that patients taking immunotherapy drugs called immune checkpoint inhibitors were more likely to develop severe disease and require hospitalization. Further research is required to look at the effects of these drugs. But other [cancer](#) treatments, including chemotherapy and surgery, did not contribute to worse outcomes.

"Determinants of Severity in Cancer Patients with COVID-19 Illness" published in *Nature Medicine* on June 24, 2020.

More information: Elizabeth V. Robilotti et al, Determinants of COVID-19 disease severity in patients with cancer, *Nature Medicine* (2020). [DOI: 10.1038/s41591-020-0979-0](https://doi.org/10.1038/s41591-020-0979-0)

Provided by Memorial Sloan Kettering Cancer Center

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