

# COVID-19 pandemic halts cancer care and damages oncologists' well-being

September 14 2020

---



Credit: CC0 Public Domain

Delays and cancelation of cancer treatments and other safety measures undertaken to minimize the risk of exposure to the coronavirus (COVID-19) have generated a huge backlog in oncology care and

research. The threat of delayed diagnoses looms while oncology professionals face burnout, according to new studies discussed at the ESMO Virtual Congress 2020.

## **But is only COVID-19 to blame?**

"Whether the risk for dark statistics is real or not will only become evident in the future when more robust results from real-world studies and registries are available," said Dr. Stefan Zimmermann, ESMO Press Officer, at the congress opening press conference. "For now, it is legitimate to ask ourselves if there are other factors beyond COVID-19 that currently put strain on oncology as the pandemic has also revealed some weaknesses in how cancer care is resourced and organized," he added.

Prior to the pandemic, Europe's cancer burden was estimated by the ECIS—European Cancer Information System (1) to reach 2.7 million new cases and 1.3 million deaths in 2020. However, the COVID-19 outbreak has placed unprecedented pressures on healthcare systems around the world.

A study (2) to be presented at the ESMO Virtual Congress 2020 highlights the extent to which COVID-19 has challenged the organization and delivery of cancer care. Responses were obtained from oncology centers in 18 countries. Overall, 60.9% reported that clinical activity was reduced at the peak of the pandemic, while nearly two-thirds (64.2%) cited under-treatment as a major concern and 37% expected to see significant reductions in clinical trials this year.

Study author Dr. Guy Jerusalem, Center Hospitalier Universitaire Sart Tilman, Belgium, said: "COVID-19 has had a major impact on the organization of patient care, on the wellbeing of caregivers and clinical trial activities. There is a risk that the diagnosis of new cancer cases will

be delayed and that more patients will be diagnosed at a later stage of their disease."

The data also revealed that the cancer treatments most likely to have been canceled or delayed were surgery (in 44.1% of centers), chemotherapy (25.7%) and radiotherapy (13.7%), while an earlier end to palliative care was observed in 32.1% of centers.

The impact of COVID-19 on patient care worldwide is also highlighted in another study (3) which gathered data from 356 cancer centers across 54 countries during April 2020. The vast majority (88%) reported facing challenges in providing care during the pandemic, with 54% and 45% reporting cases of coronavirus among their patients and staff, respectively. And while half (55%) reduced services pre-emptively, others were forced to do so after being overwhelmed by the situation (20%) or following a shortage of personal protective equipment (19%), staff (18%) and medicines (9.8%).

As a result, 46% of centers reported that more than one in 10 patients missed at least one cycle of treatment, with some estimating that up to 80% of patients were exposed to some harm.

To continue providing treatment to patients throughout the pandemic, most centers (83.6%) adapted, by implementing virtual clinics and virtual tumor boards (93%), with more than half of respondents suggesting that both will continue beyond the pandemic (55.5% and 60%, respectively). Centers also performed routine tests in laboratories close to patients' homes (76%) and shipped medication to patients (68%) so that treatment could continue.

Study author Dr. Abdul-Rahman Jazieh, King Abdulaziz Medical City in Riyadh, Saudi Arabia, said: "The detrimental impact of COVID-19 on cancer care is widespread, with varying magnitude among centers

worldwide. The pandemic has impacted healthcare systems globally, interrupting care and exposing cancer patients to significant risks of being harmed."

"Even before the pandemic, pressure on healthcare professionals and systems was mounting as a result of the growing cancer burden in Europe and globally," said Dr. Rosa Giuliani, ESMO Director of Public Policy. "A harmonized EU action that provides comparable cancer burden indicators across European countries is extremely important. In this context, the JRC-IARC scientific collaboration has resulted in the computation of up-to-date figures for 2020 new cancer occurrences and cancer deaths. These numbers help to support the development of national policies, tackling the rising burden of cancer with prevention measures as well as with the provision of the necessary resources."

Cancer patients are not the only ones at risk. The results of two online surveys undertaken by the ESMO Resilience Task Force in May 2020 (4) – the largest ever COVID-19 survey of the oncology workforce—reveals the impact of the pandemic on oncology professionals. The first survey showed that more than one-third (38%) experienced feelings of burnout and 25% were at risk of distress, while two-thirds (66%) said they were unable to perform their duties as well as they could prior to the pandemic.

This survey, involving 1,520 participants from 101 countries, also found that levels of well being and job performance declined as national COVID-19 mortality rates rose. A follow-up [online survey](#) undertaken in July-August 2020 showed that while job performance had improved compared to the first study, indicating early signals of taking control of the emergency, both wellbeing and burnout rates had worsened.

The main factors associated with distress and burnout were increased working hours, feeling worried about wellbeing, less resilience and

oncologists' concerns about training and career.

"The ESMO Resilience Task Force surveys indicate that COVID-19 is having an impact on wellbeing, burnout and job performance," said Dr. Susana Banerjee, ESMO Director of Membership, lead author of the surveys. "As an oncology community, we must work collaboratively, individuals and organizations, to ensure that resources are used in the best way possible to support oncology professionals and make sure that distress and burnout do not increase. The ESMO Resilience Task Force will look into developing more specific interventions so that we can further help and support oncology professionals during and beyond the pandemic."

Dr. Giuseppe Curigliano, ESMO Guidelines Committee Chair, added: "ESMO has responded quickly to the crisis brought by the [pandemic](#), developing a series of specific recommendations across different diseases, to guide oncologists in providing [cancer care](#) under unprecedented circumstances. (5) It is now crucial to avoid delays to any treatment which could impact survival by re-allocating resources to [cancer](#) patients and continuing to deliver the best possible treatment."

Provided by European Society for Medical Oncology

Citation: COVID-19 pandemic halts cancer care and damages oncologists' well-being (2020, September 14) retrieved 5 May 2024 from <https://medicalxpress.com/news/2020-09-covid-pandemic-halts-cancer-oncologists.html>

|  |
|--|
| <p>This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.</p> |
|--|