

Study finds nearly half of top cancer centers required universal masking during last winter's COVID-19 surge

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Nearly half of the nation's National Cancer Institute (NCI)-designated cancer centers required universal masking in key clinical areas during

the winter 2023–2024 COVID-19 surge, according to a study by Tulane University researchers.

Overall, 41.8% of these 67 centers required some universal masking, according to the study, which was published in *JAMA Network Open*. Further, 12 NCI-designated centers (18%) required universal masking in all areas. Masking policies were even more common in northeastern states and in centers with longer NCI designation, more funding and higher care rankings.

Those with cancer face higher risks from COVID-19 infections, long COVID, infection-related delay of treatment and mortality, and these findings illuminate the divide that remained about COVID masking policies as the U.S. saw its second-largest COVID wave last winter.

Still, Tulane researchers said the numbers were higher than expected and an encouraging sign that the nation's top cancer centers continue to work to limit the transmission of COVID among patients.

"Requiring universal masking is a new marker of health care quality," said lead study author Michael Hoerger, Ph.D., MSCR, associate professor of psychology, psychiatry and oncology at Tulane University School of Medicine.

"These numbers were higher than expected, but we were surprised that even among this prestigious group, centers with higher care rankings or longer tenures with NCI designation had even greater rates of universal masking policies—about 80%."

Hoerger's research team used viral wastewater surveillance data to forecast when COVID would peak last winter.

"That allowed us to review websites and call cancer centers near the

exact day of the peak to get up-to-date information on their current masking policies, if any," said Brenna Mossman, Ph.D., a Tulane health psychology graduate and postdoctoral fellow at Georgetown University.

The study also found that some center's websites (12%) lacked up-to-date COVID-19 [policy](#) information.

"Many people would prefer to believe that COVID is over. They refer to it in the past tense. We are entering a ninth COVID wave right now, with Americans getting infected an average of about once a year," Hoerger said.

"People undergoing [cancer treatment](#) are extremely vulnerable to serious outcomes of COVID, as are many others with known and unknown medical vulnerabilities. Well-fitting, high-quality masks in health care protect our communities. We need to get more resources to hospitals so they can monitor transmission, explain it to people, and fund personal protective equipment."

The research was conducted as a part of the Tulane University Psycho-Oncology Research Program's Martin Luther King, Jr. Day writing retreat on health disparities.

The article is the fourth in a series of publications in *JAMA* journals by the research team since 2023 to explore policy perspectives on how to improve equity, inclusivity, and quality in health care.

More information: Masking Policies at National Cancer Institute–Designated Cancer Centers During Winter 2023 to 2024 COVID-19 Surge, *JAMA Network Open* (2024). [DOI: 10.1001/jamanetworkopen.2024.24999](#)

Provided by Tulane University

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