

### Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/project-oncology/cancer-care-during-the-covid-19-pandemic/12158/>

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### Cancer Care During the COVID-19 Pandemic

Welcome to *Project Oncology* on ReachMD. I'm Dr. Jacob Sands, and on this program, I'm going to share how I've been caring for patients with cancer amid the COVID-19 pandemic.

The diagnosis and treatment of lung cancer care has evolved since the initial outbreak of the COVID-19 pandemic. This has been different in different regions, depending upon the surging numbers at the time, but as a thoracic oncologist practicing in Boston and the surrounding area, where our patients are mostly at this is something that we really handled early on within the U.S. experience as we had one of the earlier surges, in the country. At the time of the initial surge, there was still a lot for us to learn about COVID-19, and of course, there's still a lot we're learning, but at this time, I think we're a lot more comfortable with how this spreads and how to keep people safe in the process. Now, how we practice really depends a lot upon the numbers at the time. So at the time of the initial surge, where everything in the hospital really started becoming focused around how to manage all of these patients coming in extremely sick with COVID-19, our ICUs were being filled up, the ER had a lot of patients. At that time, one of the big aspects in oncology was making sure our patients didn't end up in the emergency room for any reason. Now, lung cancer is a pandemic in itself, as well. And so, people with lung cancer need treatment. And frankly, our screening needs to continue to detect people with lung cancer when it's early stage enough that we can still cure it. This is obviously extremely meaningful to these patients' lives, and in the midst of a COVID pandemic, for somebody who actively has lung cancer, lung cancer continues to be their biggest problem. And so, we really have to find ways to continue to treat that. But when we're treating those patients, we also wanna really minimize any risk of showing up in the emergency room. So, there are certain chemotherapy regimens that carry a little more risk of side effects that can happen, and some of which, in the worst scenarios, where patients do end up in the emergency room. So, this is a very individual thing. It's hard to make broad, sweeping statements, but for each patient, at any given time, given the surge numbers in that area, decisions are made about which regimen to then utilize in those settings. And some of those regimens do carry higher risk, and at the highest surge times, those may be enough to impact the treatment that's chosen for that individual patient at that time.

So, as we look ahead, to ongoing cancer care with the ongoing pandemic in place, there's a lot we learned from the earlier surges that I've outlined and some of the thought process – es around that. It's actually becoming a bit easier now – not that it's not complicated, but it's a bit easier now, given everything we've learned. So for one, the hospitals have increased their ICU capacity all these efforts at changing work flow and increasing capacity at the very beginning that was a brand new thing. We've now had a bit more time with that. So, being able to handle the numbers of patients of COVID coming in directly impacts our ability to handle all other aspects of care. So, in some ways, we do have a bit more capacity this time than in the initial surge. At the same time, we've also learned quite a bit more about how SARS-CoV-2 spreads, how to keep people safe, and also there's just wider adoption amongst the general public of these different, important, safety measures. For example, in the very beginning having everyone wearing masks – that was a brand-new thing. Now, this has been going on for months, and wearing a mask is not a new statement. And so, certainly within our hospital in Boston we require everyone having a mask. That is almost never a problem. Patients widely understand that and come in wearing masks as well. And so, maybe the evolution, more within the public understanding, has actually been one of the more impactful aspects of keeping people safe within the hospital. I think one of the challenges has been making sure the community understands that the hospital is actually an extremely safe place to be, and so coming in to get care is really important. As people are seeing surging numbers, and people get scared, and people with lung cancer, recognize the fact that in many cases, they have limitations to their lung capacity, and therefore they have higher risks, if they were to get the virus as well. And so, the population is understandably and very reasonably, more worried about the virus than some others within society. So sometimes people worry about coming in. So some of the challenge has been to make sure the public understands that our hospital is really one of the safest buildings in the entire city. We really do a lot of

screening ahead of time. If people are coming in, they get calls to make sure they're not having any symptoms or anything worrisome for having the virus. If they do, or if anything seems like that there's even a chance of that, then extraordinary precautions are taken. So we do all kinds of guidelines are in place to make sure that everybody is safe. And at the same time, we have decreased the number of people that come into clinic at any given time, by utilizing things like remote visits, whether that be on video or phone call visits, where that also provide excellent care. And by doing so, we minimize the number of people all in one place. All of those individuals are wearing masks, are at a distance, and so there's a lot that is in place to keep everybody safe. And so, part of the challenge is making sure the public understands that this is a safe environment. If they need care, then they need to come in. If something is going on then they need to come in to get checked out. One of the harder things to measure within this pandemic has actually been all of the non-COVID complications to people's health care, where they're worried about coming in, and so they stay at home when they have symptoms, when they have something going on, because they're worried about showing up in the hospital. And so, it's important to make sure that the public understands that the hospital is a safe environment, so that we can really take care of all other aspects of people's health care.

For ReachMD, I'm Dr. Jacob Sands. To access this and other episodes in this series, visit [ReachMD.com/Project-Oncology](https://ReachMD.com/Project-Oncology), where you can Be Part of the Knowledge. Thanks for listening!