

Transcript Details

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The COVID-19 Pandemic & Dangerous Delays in Cancer Screenings

Dr. Sands:

Sadly, it's no exaggeration to say that the COVID-19 pandemic has affected every aspect of healthcare and society as a whole. But if we zero in on the field of oncology specifically, could missed cancer screenings be just one of the many fatal consequences of this global pandemic?

Welcome to *Project Oncology* on ReachMD. I'm Dr. Jacob Sands, and joining me to discuss the impact of COVID-19 on cancer screenings is Dr. Therese Bevers, medical director of the Cancer Prevention Center at the University of Texas MD Anderson Cancer Center. Dr. Bevers, welcome to the program.

Dr. Bevers:

Thank you, I'm very excited to be joining you.

Dr. Sands:

So, Dr. Bevers, as I've alluded to, one of the consequences of the COVID-19 pandemic is a significant decrease in the number of people undergoing cancer screenings. In the U.S., what kind of numbers are we talking about?

Dr. Bevers:

So, early in the pandemic, when major organizations, such as the American Cancer Society and other similar organizations were recommending to not get cancer screenings, we actually saw that screenings decreased by 86-94%. Now that number has rebounded some. In the summer, it was down by about a third, but with the second wave of the pandemic, it's expected that we will see a further decrease as the numbers are looked at further.

Dr. Sands:

So, what are some of the factors contributing to those declining numbers?

Dr. Bevers:

Well, a lot of people are very fearful about getting out in the public arena and getting their screenings. They're fearful of coming into contact with people that have been exposed to COVID and actually contracting it themselves. And so, as a result, what we're kind of seeing is that institutions, such as MD Anderson, actually are more impacted because we have people hospitalized with COVID, as do other hospital organizations, and that community organizations maybe are not as impacted as greatly – maybe about a 10% difference between community and institutions.

Dr. Sands:

Yeah, I found that, too. I feel like some of it is making sure that the public understands the safety of the institution, as well, and so to that point, have you noticed in your experience differences regionally, or in looking at the numbers across the country, do you see differences in these numbers?

Dr. Bevers:

Absolutely. People are very fearful about getting out in the public and tend to avoid doing anything that they feel they absolutely don't have to do. And unfortunately, many people consider cancer screenings "elective," that it can be put off. And while that is true, it can't be put off indefinitely.

Dr. Sands:

For those of you just tuning in, you're listening to *Project Oncology* on ReachMD. I'm Dr. Jacob Sands, and today I'm speaking with Dr. Therese Bevers about the impact of COVID-19 on cancer screenings. Now Dr. Bevers, based on the numbers you told us about earlier, many are expecting increases in stage four cancers in the upcoming years, particularly given these decreasing numbers in screening. So what kind of numbers can we expect?

Dr. Bevers:

Well, there are some studies that have been published that have shown an increase of, say about 12% of advanced stage cancers in 2019, but 18% of the newly diagnosed breast cancer cases this year being advanced stage. That's very alarming, because those cancers are much more difficult to treat. It's not simply cut it out and we're done.

Dr. Sands:

Yeah, those are impressive numbers. So then, looking ahead, what are the implications of these stage four diagnoses? As you point out, this is not just cut it out and be done as it is when it's earlier detection. So with these increasing stage four diagnoses, in a couple years compared to the earlier stage diagnoses this year, what are the implications of that?

Dr. Bevers:

Well, it has been estimated that we will see an increase in cancer deaths. There was a modeling study published from the National Cancer Institute earlier this year that used very conservative numbers, and so probably is a bit of an underestimation, but for two cancers only – breast and colon – they estimate 10,000 excess deaths over the next decade, with the majority of them being the next couple of years. And that's not taking into account other cancers, such as lung cancers, pancreatic cancers, etc., that tend to be even more aggressive.

Dr. Sands:

Yeah, those are shocking numbers and really highlights the impacts of the pandemic beyond, just the virus itself. Now a bright spot in all of this has really been the heroic measures of the healthcare system, and it has been inspiring to see how the healthcare system has responded in the middle of the pandemic, and handling the challenging care, across the spectrum. So, can you tell us some of the measures taken to conduct cancer screenings while keeping patients safe in the middle of this pandemic as well?

Dr. Bevers:

Intensive efforts are being made to make the cancer screening location safe for people to come into. While it's a difficult decision, that was made to limit the number of people that come into the facility, we actually find that it has helped to decrease the density of people. So we do not allow people coming into the institution for cancer screenings to bring a significant other. That was a very difficult decision, but you can understand, that decreases the numbers right there by one-half. The waiting rooms are quite empty, so you can very easily socially distance. We have screening questions when you come in. Your temperature is taken. They put an arm band on, so we know your status is red, yellow, or green. And there are different locations then that you would go to based on your arm band. We clean each area down, disinfect it for two minutes after we have had a patient in a room. There are employees that their sole job is to disinfect high-touch areas, such as elevator buttons, arm rails, things like that. We work very hard to make it a safe place to come in to, so that people will come in and get their cancer screening. Many of my patients have told me they feel incredibly safe here. They feel almost as safe here as they do at home, and much, much safer than at the grocery store.

Dr. Sands:

Lastly, Dr. Bevers, you've outlined some of the things being done to keep patients safe in the midst of this COVID-19 pandemic, while also getting screening, as well as the devastating complications that happen from people not getting a screening or delaying screening. So what can we do to make sure we're helping and encouraging patients that need screening to get it completed, and how best can we communicate that to the community as well to help encourage those screening studies that are being delayed?

Dr. Bevers:

Well, I think we first off need to help the patients to understand the importance of getting their cancer screenings. Early diagnosis means fewer deaths, also means for most patients, less intensive treatment. Many patients that are diagnosed with an early-stage cancer may not need chemotherapy, may not need radiation therapy. The places that you can get screened are making intensive efforts to make it a safe place to get screened, so that we can catch those cancers early, when they are more treatable.

Dr. Sands:

Well, that's a great call to action to take with us. And with that, I want to thank Dr. Therese Bevers for joining me to discuss the COVID-19 pandemic and its impact on delayed cancer screenings, diagnoses, and the entire field of oncology. Dr. Bevers, it was great speaking with you today.

Dr. Bevers:

Thank you for having me, and for highlighting our concern in the oncology community.

Dr. Sands:

For ReachMD, I'm Dr. Jacob Sands. To access this episode and others from *Project Oncology*, visit reachmd.com/project-oncology, where you can Be Part of the Knowledge. Thanks for listening.