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Patient concerns and disruptions in cancer care during the COVID-19 pandemic

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Introduction: The COVID-19 pandemic has uniquely impacted the lives of people with cancer, but the specifics of these impacts are not fully understood. We examined: 1) the impact of COVID-19 on cancer-related health care, and 2) patients' most prominent COVID-related concerns.

Method: From Sept-Dec 2020, 502 cancer patients completed an online survey about disruptions in cancer-related health care (types and causes of disruptions and length of health care delays). COVID-related concerns (e.g., accessing basic and medical needs, financial concerns, psychosocial impact) were assessed via 25 items rated *not at all* to *extremely* concerning, or not applicable. Group differences were examined with Pearson Chi-Square.

Sample: 75% women, 82% White, age range 20-88 years (M= 60, SD=12.1); 61% in remission, 16% experiencing cancer relapse, 13% experiencing cancer for the first time; current stage: 40% metastatic, 25% localized, 35% no stage/don't know; time since diagnosis range 0-36 years (M=8.8, SD=7.0); primary cancer diagnoses: 29% breast, 27% blood cancers, 6% prostate, 5% lung, 5% colorectal, and 28% other; 47% currently in treatment. 49% were tested for COVID-19, 3% tested positive.

Results: 40% (n=200) reported a disruption in cancer-related health care: of these, 34% reported disruption in imaging services, 30% lab service, 26% routine screening, 25% supportive services, 12% treatment session (including 46% chemotherapy, 13% radiation, 13% hormone therapy, 4% surgery), and 14% other disruption, with 10% reporting delay in cancer diagnosis. Nearly half with care delays reported a delay of 2-3 months (18%) or 3+ months (30%), with 3+ months delays occurring most often for routine screenings (40%) and supportive services (37%). Primary causes for disruptions included clinicians recommending the delay (46%) and patient fear of contracting COVID-19 via in person care (31%). The top 3 areas of COVID-19-related concerns (*somewhat* to *extremely concerned*) were: 1) others not following safety recommendations e.g., wearing masks (85%), 2) getting COVID-19 due to a weakened immune system (76%), and 3) worrying about loved ones' health (73%). Those in remission less frequently experienced delay in care (35%) than those with first time cancer (50%) or relapse (51%, $\chi^2=10.5$, $p<.05$), and those in current treatment more frequently experienced delay in care (44%) than those not in treatment (36%, $\chi^2=3.5$, $p<.10$).

Conclusion: Findings highlight the substantial impact of COVID-19 on cancer care, across various forms of care needs and health services. Patients experiencing cancer for the first time, a cancer relapse, or those undergoing treatment reported high levels of delays, with many delays in excess of 3 months. Given the unique impact of COVID-19 to cancer patients, these results highlight opportunities for care service delivery improvements as the health care community navigates competing priorities of patient safety and care quality.