

# A Review of Guidelines for Follow-Up of Cancer Patients During the COVID-19 Pandemic

Natalie Wang<sup>1</sup>; Dominic Sferrazza<sup>2</sup>; Shing Fung Lee<sup>3</sup>; Gustavo Nader Marta<sup>4</sup>; Tarek Hijal<sup>5</sup>; Jeffrey Q. Cao<sup>6</sup>; Maryam Lustberg<sup>7</sup>; Raymond Chan<sup>8</sup>; Michael Jefford<sup>9</sup>; Muna Alkhaifi<sup>10</sup>; Adrian W Chan<sup>10</sup>; Edward Chow <sup>10</sup>; Henry CY Wong<sup>11</sup>

<sup>1</sup>St. Elizabeth CHS, Canada; <sup>2</sup>Queen’s University, Canada; <sup>3</sup>National University Hospital, Singapore; <sup>4</sup>University of Sao Paulo, Brazil; <sup>5</sup>McGill University, Canada; <sup>6</sup>Alberta Health Services, Canada; <sup>7</sup>Yale School of Medicine, USA; <sup>8</sup>Flinders University, Australia; <sup>9</sup>Peter MacCallum Cancer Centre, Australia; <sup>10</sup>Sunnybrook Health Science Centre, Canada; <sup>11</sup>Princess Margaret Hospital, Hong Kong

Contact Email:  
natwang2007@gmail.com

## INTRODUCTION

- In response to the COVID-19 pandemic, regional and international follow-up guidelines aimed at reducing the risk of COVID-19 were published
- This study aimed to identify weaknesses within existing guidelines and provide suggestions for potential future use

## METHODS AND MATERIALS

- Systematic search of PubMed performed to identify relevant guidelines published on recommendations surrounding follow-up cancer care during the COVID-19 pandemic
- Separate search conducted on Google targeting guidelines published on websites of regional and international cancer agencies
- Recommendation and consistency between guidelines evaluated

Table: Summary of guidelines identified for the management of follow-up care during the COVID-19 pandemic

	Virtual Care (Telephone & Video Conferencing)	Delaying/ Reducing Follow-Up Appointments	Tiered Prioritization	Shared Follow- Up Between GPs & Cancer Specialists
the American Society of Clinical Oncology	✓			
the European Society of Medical Oncology	✓	✓	✓	
BC Cancer	✓	✓	✓	
Cancer Care Ontario	✓	✓		
Cancer Australia	✓	✓		✓
the German Society for Haematology and Medical Oncology	✓	✓		
the US National Institutes of Health	✓		✓	

## RESULTS

- Guidelines from seven different cancer agencies were identified
- 7/7 agencies suggested the implementation of virtual care to replace physical appointments
- 5/7 agencies suggested delaying or reducing physical follow-up appointments
- 3/7 agencies suggested the implementation of a tiered prioritization system to help determine the clinical need of patients
- 1/7 agencies suggested shared follow-up care between specialists and GPs
- Instructions on how to implement virtual follow-up were poorly specified across guidelines, often emphasizing the judgement of individual physicians

## CONCLUSIONS

- Existing suggestions were vague, with limited detail that could have varying interpretations by practising clinicians
- Real-world studies should be performed to evaluate how virtual follow-up was delivered in different healthcare settings to provide more robust evidence for its use in the future