

EDITORIAL

The Active Covid-19 Infection and Cancer Management

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Though the life has been totally changed after the covid-19 pandemic and one has never imagined being in such circumstances. The face mask was once thought to be the beauty for operating surgeons is now globally indicated to be prevented from the covid-19 infection. Every aspect of life has been affected by the pandemic including the routine hospital services for the elective cases.¹ As the evolution is the part of life so we all are growing to make our life adjustable with it. No doubt the prevention and protection is the key to survive but along with that one should have courage to fight with it. Hence it is an unpleasant and life threatening disease and also very distressing for the one who became its victim.²

Globally the covid-19 pandemic has an alarming effects on the precious lives and its causing huge challenges to the everyday routine.³ By the April 2020, globally more than 8 lac cases of covid-19 has recorded. As the cancer patients are already immune compromised and more prone to get contacted with covid-19 infection, as is supported by a Chinese study that they are more vulnerable to develop complications as well.^{4,5}

When a cancer patient simultaneously contacted by the covid-19 infection then the treatment should be prioritize that which patient can be delayed until the control over active infection can occur. Though the risk of transmission to the health care workers (HCW) is significant while treating such patients.⁶ As there should be a balanced practice for the management of covid-19 pandemic and for the cancer patients and being HCW we need to cover both the diseases at the same time to save the precious lives. There are international guidelines to manage the cancer patients during covid-19 pandemic but the decision is still vary from patient to patient according to the stage of the cancer and also the severity of covid-19 infection. It has been observed that multi-disciplinary approach plays the major role for the cancer patient management including surgeons along with the oncologist, radiologist, pathologist, psychiatrist, councilor and nurse. Meanwhile they all are facing the major risk of being contacted to the covid-19 when their patients are being the victim of it.⁷

There is a strong evidence from recent studies that the cancer patients are more vulnerable to be attacked by covid-19 infection and more risk to develop complicated infection. There is more than 3.5-fold increase in the risk of needing mechanical ventilator support or ICU / HDU admissions and increased mortality as compared with patients without cancer⁸. Delay in the cancer treatment and its progression towards the advance staging and metastasis will decrease the survival of the patient⁹.

It is thought that all the patients should be considered covid-19 suspected cases until proven otherwise¹⁰. To decrease the rate of transmission towards the health care providers the evolutions have been made in health care systems as the physical clinics were converted to the tele-clinics and the decisions will be made according to the staging of the cancer and the priority basis to safe once life.

NHS England guidelines support the management decisions through the multi-disciplinary approach and have strategy to enhance the immune system to counter the cancer cells.¹¹ The research going on and no proper guidelines are present for the cancer patient's management who are contacting with the covid-19 infection. Though both the diseases have their own pros and cons but the main goal of a health care provider is to the decrease rate of mortality. If a patient is already in a metastatic disease and contacting with covid-19 infection, so here being a clinician we are facing certain challenges for prioritizing the treat options and further decreases the adverse effects by both the diseases. We still can't predict how the situation will be with the rising state of the covid-19 pandemic.

Thus, being a HCW we have courage to disclose the disease in front of patient in such a way that is acceptable for them and we should guide patients properly according to the state of the disease so they may become able to take a right decision for their disease accordingly. The quality of life of the patient must be precious towards the HCW. Despite of recent researches, we still focused to accept challenges to provide best evidence based healthcare facilities to all cancer patients during this lethal COVID-19 pandemic.

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