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The impact of COVID -19 on head and neck cancer treatment: a comparison of patients before and during the pandemic



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Introduction

The current coronavirus (COVID-19) pandemic has had a profound impact on patient care due to delays in healthcare delivery. We aim to compare wait times of definitive treatment in patients newly diagnosed with HNSCC before the pandemic versus those seen during the pandemic at a single academic institution.

Methods:

Patients with newly diagnosed HNSCC who initially presented to a single tertiary care institution between September 10, 2019 – September 11, 2020 and ultimately underwent primary surgery based on tumor board recommendations were retrospectively analyzed. Patients who presented to us before COVID-19 was announced a pandemic (March 2020) were compared to patients who presented during the first six months of the pandemic. Symptoms onset, time from biopsy to the operating room (OR), time from first diagnostic scan to OR, and time from first clinic visit with us to the OR were compared between groups as well as pathologic T staging.

	Before March 2020 (n=51)	After March 2020 (n=41)
Sex (n=92)		
F	30%	24%
M	70%	76%
Age (average)	65.62	64.48
Miles to UCD	50.35	58.0

	Before March 2020 (n=51)	After March 2020 (n=41)	P-Value
Time to symptom onset	23.3	17.6	0.31
Time from first biopsy to OR	54.3	57.3	0.68
Time from first diagnostic scan to OR	51	57.3	0.28
Time from first clinic visit to OR	31.6	27.7	0.30

T-staging	Before March 2020 (n=51)	After March 2020 (n=41)	P-Value
T1/T2	60%	40%	P=0.07
T3/T4	40%	60%	

Results:

51 patients who presented before the start of the pandemic (pre-COVID) versus 41 patients who presented during the pandemic were compared. The pre-COVID group and the COVID group had no significant differences between symptom onset (mean [SD], 23.3 [28.8] vs 17.6 [13.5] weeks; p=0.31), time from first biopsy to OR (54.3 [25.4] vs. 57.3 [39.8] days; p=0.68), time from first diagnostic scan to OR (51.0 [38.9] vs. 57.3 [39.8] days; p=0.28), and time from first clinic visit to OR (31.6 [19.9] vs. 27.7 [14.1] days; p=0.30), respectively. In comparing T staging, 60% of the pre-COVID group had T1/2 tumors and 40% T3/T4 tumors, while the COVID group had 40% T1/2 tumors and 60% T3/T4 tumors (p=0.07).

Conclusion:

When comparing patients in the pre-COVID time period and during the first six months of the pandemic, there were no differences between waiting times for primary surgery as definitive care in newly diagnosed HNSCC.

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