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COVID-19 Rapid Letter

Can we prevent COVID-19 from causing victims among uninfected cancer patients? [☆]

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In 2018, 65% of new cancer diagnoses and 78% of cancer-related deaths occurred in low- and middle-income countries (LMICs) [1] and by 2040, the yearly number of cancer deaths worldwide is projected to increase by more than 70% [2].

Radiotherapy is a highly effective oncological treatment, required for management of >50% of all stages of disease. The paradox is that in all LMICs there is a serious underinvestment in radiotherapy, while political attention is focused on high cost pharmacological treatments.

Actual coverage of the requirements of radiotherapy range from 34% in Africa, to over 92% in Europe and to about 200% in North America [3]. International efforts are needed to overcome the impending "silent crisis" by LMICs.

The "Global Task Force on Radiotherapy for Cancer Control" (GTRFCC) has published the most comprehensive analysis on this topic. This report has estimated the investment and operational costs for radiotherapy across the globe in order to bridge the gap in the provision of radiotherapy by 2035; the report focused on the incremental costs to be incurred in order to cover the additional resources needed over the next 20 years [4]. The GTRFCC estimated that an additional 26.9 million life/years could be saved [5].

Currently, a terrible health and economic crisis caused by SARS-CoV-2 infection is spreading worldwide and the authorities are rightly concentrated in coming out of the pandemic as soon as possible. Just like the virus, cancer also does not respect borders and an oncological disease in LMICs often means not having access to adequate treatment. It has become imperative to take global action in the fight against inequality in medical care, a key issue of current

medical ethics, so that long-term plans to develop radiation therapy in LMICs do not lose their priority in overcoming the ongoing "silent crisis". This pandemic is teaching us that preventive measures and strategies are essential to tackle a health emergency, especially for the implementation of a radiotherapy center that requires adequate staff training. Further delays will result in unnecessary deaths, worsening inequalities and inability to deliver benefits for health, the economy and society. This ongoing challenge requires the concerted effort of all stakeholders and the support of international organizations. If these actions were postponed to the post-pandemic period, there would be the risk of adding to the victims of COVID-19 also the deaths of cancer patients not infected but undertreated.

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