



Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.



Letter

The Impact of the Acute Phase of COVID-19 on Radiotherapy Demand in South East Wales



Madam — The coronavirus epidemic presents significant challenges to providing cancer care. Radiotherapy services need to depart from established pathways and protocols [1]. Here we summarise how COVID-19 has impacted local radiotherapy services.

On 23 March 2020, the Government announced a period of lockdown. We compared the subsequent 3 weeks with the same period in 2019.

Overall attendances to the radiotherapy department dropped by 28%. In the 2020 period, 74% of all attendances involved five tumour sites: breast (23%), urological (20%), head and neck (14%), colorectal (9%) and lung (8%). These figures were similar for 2019 except for urological sites (2019:29%) due to deferral of prostate radiotherapy +/- hormone treatment.

The biggest changes have occurred in the use of hypofractionated regimens. For breast cancer, there was an increase in the use of five-fraction regimens, with 48% of patients receiving 26 Gy in five fractions in 2020, up from 13% in 2019. This was supported by international consensus guidelines, together with the Fast-forward trial [2,3].

For head and neck patients, there was an increase in the 20-fraction regimen. These accounted for 18% patients in 2020, compared with 10% in 2019. Thirty-fraction regimens increased to 82% from 70%; 0% attended for a 35-fraction regimen (compared with 10% in 2019). The consensus advice is to consider hypofractionated regimens [4].

Short-course radiotherapy for rectal cancer has accounted for 75% of attendances in 2020 compared with 0% for 2019. International consensus guidelines advocate using short-course radiotherapy (25 Gy in five fractions) for patients traditionally treated with long-course chemoradiotherapy [5].

The coronavirus epidemic has undoubtedly led to significant changes in the treatment of patients resulting from

changing referral patterns, treatment decision making and use of shorter fractionation schedules.

We are now planning for our recovery phase, while continuing to provide the safest care possible for our patients.

Conflicts of Interest

The authors declare no conflict of interest.

E. Higgins, S. Walters, E. Powell, J. Staffurth
Velindre Cancer Centre, Cardiff, UK

References

- [1] <https://www.rcr.ac.uk/college/coronavirus-covid-19-what-rcr-doing/clinical-information/rcr-position-coronavirus-covid-19>. Accessed 26 April 2020.
- [2] Coles CE, Aristei C, Bliss J, *et al*. International guidelines on radiation therapy for breast cancer during the COVID-19 pandemic. *Clin Oncol* 2020;32:279–281.
- [3] Murray Brunt A, Haviland JS, Wheatley DA, *et al*. on behalf of the FAST-Forward Trial Management Group. Hypofractionated breast radiotherapy for 1 week versus 3 weeks (FAST-Forward): 5-year efficacy and late normal tissue effects results from a multicentre, non-inferiority, randomised, phase 3 trial. *Lancet* 28 April 2020. [https://doi.org/10.1016/S0140-6736\(20\)30932-6](https://doi.org/10.1016/S0140-6736(20)30932-6).
- [4] <https://www.rcr.ac.uk/sites/default/files/head-and-neck-cancer-treatment-covid19.pdf>. Accessed 3 May 2020.
- [5] Marijnen CAM, Peters FP, Rödel C, *et al*. International expert consensus statement regarding radiotherapy treatment options for rectal cancer during the COVID 19 pandemic. *Radiother Oncol* 2020. <https://doi.org/10.1016/j.radonc.2020.03.039>.