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.

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Letter

Keep Calm and Carry on: Safety, Feasibility and Early Outcomes of Head and Neck Cancer Treatment During the COVID-19 Pandemic

Madam — Evaluating outcomes in patients treated during the first wave of the COVID-19 pandemic is paramount to developing future evidence-based practice.

In early 2020 patients with cancer were thought to be particularly vulnerable to COVID-19 [1] and that anti-cancer treatments may further increase that risk [2–4]. Guidance was issued on the modification of standard treatments for head and neck cancer (HNC) [5–10].

We completed a retrospective cohort study of all patients with HNC treated in our UK tertiary level oncology centre during the peak of the first wave (1 March to 23 June 2020). In total, 200 patients were evaluated. The median age was 64 years; 65.5% had multiple comorbidities and 59.5% lived in areas of deprivation. In total, 115 received radical treatment: 46 palliative treatments and 39 supportive care.

Ninety-nine patients received standard radical radiotherapy (65 Gy in 30 fractions). Despite attending daily for 6 weeks, no patient contracted COVID-19 while receiving radiotherapy. One third of these patients received concurrent cisplatin, mean dose density 150 mg/m^2. The 30-day mortality rate for patients treated with (chemo)radiotherapy was 2.3%; comparable with previous outcomes in our centre (0.0–5.6% in 2016–2019) [11–14]. The proportion of patients not completing (chemo)radiotherapy was 3.4% or with gaps in treatment was 14.1%; also similar to pre-COVID-19.

Systemic anti-cancer treatment was delivered without modification from standard regimens to 40 patients; six received palliative radiotherapy. No patient with HNC acquired COVID-19 while attending for palliative treatments.

Our study population has multiple potential risk factors for COVID-19 and increased severity of infection. The infection rate in the region was significant with 416 cases per 100 000 population reported [15]. Despite this, our data suggest that it is feasible and safe to deliver standard treatment for patients with HNC during the COVID-19 pandemic.

We hope this provides some reassurance to clinicians and patients with HNC in these challenging times.

Conflicts of interest

The authors declare no conflicts of interest.

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