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# American Journal of Otolaryngology–Head and Neck Medicine and Surgery

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## In reply to: Impact of COVID-19 on head and neck mucosal squamous cell carcinoma: Correspondence

The authors appreciate the opportunity to reply to the recent commentary [1] that notes that the increase in patients presenting with head and neck malignancy found in our study population [2] was not reflected in a similar European study [3]. Our key finding of mucosal squamous cell carcinoma patient's presenting with more advanced disease during the pandemic (specifically, more advanced N staging) has direct impact for treatment choice and long-term outcomes. A similar study by Solis et al. reported more advanced T classification [4]. Taken together, these reports have implications for overall and disease-specific survival of head and neck cancer patients treated during the COVID-19 pandemic and highlight the need to better understand the changing referral and treatment patterns as the pandemic continues.

Regional differences in patient demographics and access to care are not unexpected, particularly with varying responses to the pandemic. The patient population described in our initial study includes a catchment area of the mid-southern United States. We found that despite more advanced disease, there was faster initiation of treatment during the pandemic than during a similar pre-pandemic timeframe. When comparing all newly diagnosed head and neck cancers seen in a tertiary care clinic, there was significantly decreased time from referral to first clinic appointment (11 days v 9 days,  $p < 0.001$ ) and time from referral to surgery (38 days v 27 days,  $p < 0.001$ ) [5]. We hypothesize that this was due to increased availability of clinic appointments and operating rooms. We agree that there are clear differences in accessibility and treatment during the pandemic, and this data suggests head and neck oncologic care can still be delivered quickly and efficiently, even during the ongoing COVID-19 pandemic. It will be important to continue to follow these patients to determine the true effect that advanced clinical presentation during the COVID-19 pandemic has on oncologic outcomes.

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### Declaration of competing interest

None.

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