

Coronavirus Changes Cancer Care

Nearly one in four cancer patients have delayed care, including nonurgent surgery.

June 15, 2020 By [Liz Highleyman](#)

The coronavirus pandemic has led to dramatic changes for people living with cancer. Many are over 60, and chemotherapy and radiation can cause immune suppression, both of which are linked to poorer COVID-19 outcomes.

The American Cancer Society reports that nearly one in four cancer patients have delayed care, including nonurgent surgery. People with new cancer symptoms are avoiding care—Flatiron Health reports that visits from new patients decreased by nearly 40% from early February to late April—and screenings for breast, colon and cervical cancer have dropped by around 90%.

What's more, some clinical trials have been suspended, and even when they're not, many people are reluctant to enroll. "Trial interruptions are devastating news for thousands of patients," says American Society of Clinical Oncology president Skip Burris, MD. "In many cases, clinical trials are the best, or the only, appropriate option for care."

Cancer experts have modified treatment guidelines to adapt to the pandemic. Many centers are shifting from in-person appointments to telemedicine and home care. The National Comprehensive Cancer Network advises using oral drugs, if feasible, instead of those given by IV infusion. Some doctors favor therapies that cause less immune suppression or are less likely to cause side effects that could require hospitalization, even if they're slightly less effective. Some people may be able to start medications or radiation therapy while awaiting surgery, and those with low-risk cancer could opt for active surveillance. In some cases, radiation can be administered on schedules with fewer visits. Monitoring scans sometimes can be done less often or replaced with blood tests. But in other cases, the risk of delaying or modifying treatment outweighs the risk of COVID-19.

Questions about whether it's safe to put off treatment are causing anxiety for both patients and providers. "These postponements can be wrenching and frustrating for doctors and have forced patients into a battle on two fronts, against their disease and against the coronavirus," says Daniel Boffa, MD, of Yale School of Medicine.

For now, the best approach is to keep in touch with your care team and develop an individualized plan tailored to your specific type of cancer and its stage.

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