



Letter

COVID-19 Outbreak and Cancer Radiotherapy Disruption in Lombardy, Northern Italy

Madam — Italy has been experiencing one of the world's deadliest COVID-19 outbreaks, and all healthcare facilities, including radiotherapy departments, have faced the unprecedented emergency. In order to investigate how radiotherapy directors in Lombardy (northern Italy) have managed the crisis, an online questionnaire (27 questions) via Google Forms, based on the first published COVID-19 reports, was sent to 34 CODRAL (Board of Directors of Radiation Oncology Departments in Lombardy) directors. Thirty-one (91%) specialists anonymously completed the survey. Within a few days of the outbreak, more than 75% of hospitals became COVID-19 centres. Following institutional indications, more than 80% of directors decided to interrupt or modify radiotherapy for some pathologies, preferring short treatments and home assistance where possible. About a half of centres reduced their clinical activity by 10–50%. Most hospitals (84%) cancelled out-patient follow-up visits and some (68%) activated telematic consultations. Triage procedures were adopted in virtually all centres. Almost a half of centres registered COVID-19-positive or suspected patients, and for some of them treatment was suspended. Nearly all radiotherapy centres declared that they would provide healthcare staff with surgical masks and gloves, while only a few of them also made other personal protective equipment available, including class II and III filtering facepieces (FFP2 and FFP3). Working from home solutions were adopted in about 30% of facilities. More than a half of centres had personnel in quarantine (between one and 12 persons off service). A considerable proportion of hospitals activated psychological support for patients and/or personnel. Our report shows how Lombardy radiotherapy departments have rapidly coped with the COVID-19 disruption. Significant reorganisation has been carried out in a short time with conversion to COVID-19 activities (wards, physicians transfer) and changes in radiotherapy practice. The priority was a balance between cancer patient care and safety, while protecting the healthcare professionals and providing any possible support in COVID-19 activities.

Conflicts of Interest

The authors declare no conflict of interest.

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network

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