Routine Preventative Cancer Screenings and COVID-19: Important to talk to your health care team

It’s estimated that more than 606,000 people are expected to die from cancer this year, one each minute. Regular screening can help find certain cancers early, when they are most likely to be treated successfully.

As the COVID-19 pandemic rolled out across the country and government orders paused all but essential services, the US healthcare community recommended that individuals put routine cancer screenings on hold.

Recent research has estimated more than 22 million screening tests may be cancelled or delayed from March through June 2020, resulting in 80,000 missed diagnoses of breast, prostate, colorectal, cervical, and lung cancers. The data suggest that these missed diagnoses may include 36,000 breast cancers, 18,800 colorectal cancers, 22,600 prostate cancers, 450 lung cancers and 2,500 cervical cancers.

State-by-state, region-by-region, some shelter-in-place orders are now being lifted and healthcare facilities are developing new safety protocols to protect both providers and patients during routine care, including preventative cancer screenings. In some states and communities, the number of COVID-19 infections and hospitalizations continue to rise. Given the different conditions across the country, it’s very important that the decision to proceed with routine cancer screenings should be made in collaboration with your healthcare provider. Most importantly, be sure to share any symptoms you have, as well as your family history of cancer, so your doctor can provide the best recommendation for you.

Stand Up To Cancer offers some questions to discuss with your health care team to get answers specific to your circumstances.

- Does my family or personal health history place me at higher risk of a cancer, and should I get screened now?
- Is there any screening that might be conducted at home that’s right for me and my family and health history, such as Cologuard or other stool FIT testing for colorectal cancer?
- Can my dermatologist provide a preliminary skin examination using my cell phone and telehealth if I have someone to help aim the phone on difficult to reach areas?
- Some screening procedures have often involved a pre-screening appointment. Can that be done via telehealth?
- If the necessary screening can only be conducted in a healthcare setting, can you provide a “COVID-free” environment? For example, if screening takes place at a community or major hospital, is there separation of COVID and non-COVID activities, separate entrances, registration and waiting areas, etc.?
• If screening takes place in a provider’s office, what COVID-preventative measures have been implemented?
• For procedures that require less than six feet of separation, what measures have been designed to minimize exposure and risk?
• If I need a colonoscopy due to personal or family health history, I’m required to have someone drive me. What are the new procedures or precautions for my driver?
• Are there special precautions I should take?
• Can I receive my results via telephone or telehealth?