



# Advice on Coronavirus for people with cancer

10 March 2020

This set of frequently asked questions has been developed by the One Cancer Voice group of charities\*

We are reassured that the NHS will continue to provide cancer treatments as normal and, if it becomes necessary, prioritise some patients for hospital treatment. Cancer treatment plans would only be changed if there is no alternative.

We understand that the NHS has conducted extensive work on

Your clinician may advise people in these groups to minimise their risk of exposure to COVID-19 infection by avoiding crowded environments, limiting social interaction and maintaining careful hand hygiene.

Cancer treatment providers may also seek to minimise the time people in these groups spend in hospital departments, for example by enabling them to consult their hospital teams by telephone, and having blood tests done at GP surgeries or at home where this is possible.

For more information about COVID-19 and how to reduce the risk of infection people should consult the [NHS website](#).

## Q&A

### **People living with cancer now**

**Q1 Do I need to do anything differently as someone who is being treated / in**

Cancer treatment providers may advise people in these groups to minimise their risk of exposure to COVID-19 infection by avoiding crowded environments, limiting social interaction and maintaining careful hand hygiene.

If you are worried you might have been in contact with someone with confirmed coronavirus, **call 111** (England, Wales and Scotland) or **0300 200 7885** (Northern Ireland).

**Q2 The NHS website says the impact of contracting coronavirus will be more serious for cancer patients. What does that mean? Would I be more likely to die?**

Some people with cancer are more at risk of becoming seriously ill if they contract the COVID-19 infection:

- People having chemotherapy, or who have received chemotherapy in the last three months
- People having immunotherapy or other continuing antibody treatments for cancer
- People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors.
- People having intensive (radical) radiotherapy for lung cancer
- People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
- People with some types of blood cancer which damage the immune system, even if they have not needed treatment (for example, chronic leukaemia, lymphoma or myeloma).

Your clinician may advise people in these groups to minimise their risk of exposure to COVID-19 infection by avoiding crowded environments, limiting social interaction and maintaining careful hand hygiene.

**Q3 What will happen to my cancer treatment?/Will it be postponed?/Should I still go to hospital appointments?**

The NHS will continue to provide cancer treatments as normal. In the event of any disruption, clinicians will always make decisions to prioritise treatment for those most in need and in consultation with patients.

**Q4 What are the symptoms likely to be?/Will the symptoms be different because I have cancer?/What should I look out for?**

The Foreign Office has the most up-to-date information about how different countries are affected: [www.nhs.uk/conditions/coronavirus](http://www.nhs.uk/conditions/coronavirus)

## **The future**

### **Q11 Will cancer patients be a priority for the vaccine if/when it is developed?**

There is currently no vaccine for this form of coronavirus. Research is being done to develop a vaccine, but this will take many months. The BBC has written about this issue:

[www.bbc.co.uk/news/health-51665497](http://www.bbc.co.uk/news/health-51665497)

The best way to reduce your chance of infection is to follow the NHS advice on reducing the risk of picking up infections including thoroughly washing your hands frequently, practicing good hygiene and avoiding contact with people who are unwell:

[www.nhs.uk/conditions/coronavirus-covid-19/](http://www.nhs.uk/conditions/coronavirus-covid-19/)

### **Q12 If the pressure on the NHS grows, will my treatment be delayed?**

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### **Q13**