The Interference of COVID-19 in the Oral Cancer Diagnosis and Antineoplastic Treatment

La Interferencia del COVID-19 en el Diagnóstico y Tratamiento Antineoplásico del Cáncer Oral

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Dear editor,

On March 11, 2020, the World Health Organization (WHO) declared coronavirus 19 (COVID-19) a pandemic. It severely impacted global health, public life, and the world economy (https://www.who.int/emergencies/diseases/novel-coron avirus-2019/events-as- they-happen). In response, measures to contain the outbreak and to prevent the collapse of the health system were taken. Isolation or social detachment, and the re-prioritization of services were the main strategies imposed to deal with the unprecedented crisis (Al-Quteimat; Amer, 2020; Martelli Júnior *et al*., 2020). Due to the pandemic scenario in Brazil and with the recommendations of the Federal Council of Dentistry and the National Health Surveillance Agency, dental care was limited in urgencies and emergencies, due to personal patient-dentist contact, and the aerosols produced during many dental procedures (Martelli Júnior *et al*.).

Due to the insecurity and uncertainty of the current moment, some public and private services have been suspended, such as dentistry public universities. Today in Brazil, they represent the major reference centers for pathologies diagnosis, which means that oral medicine consults are interrupted or considerably reduced in their activities, and that also means that the diagnosis of potentially malignant disorders and oral cancer has almost completely stopped (Alves *et al*., 2020; Bray *et al*., 2018; Lai *et al*., 2020; Martelli Júnior *et al*.; Al-Maweri, 2020; Esam Halboub; Saman Warnakulasuriya, 2020; Shuman; Campbell, 2020).

In light of these challenges, the purpose of this letter to the editor is to alert the scientific community of the possible side effects of the pandemic regarding the epidemiological data on the incidence of oral cancer in the year 2020 in response to the postponed elective procedures in Oral Medicine centers.

Oral cancer (OC) is the most common malignant tumor of the mouth, representing more than 90 % of cases, which means a disease with greatest clinical significance (Bray *et al*.). In 2018, it was estimated that 354,900 cases of OC occurred worldwide, with 177,400 deaths, especially in low and middle-income countries and among low socioeconomic groups. In Brazil, according to the National Cancer Institute (INCA) the estimate for epidemiological data related to oral cancer (intraoral and lip carcinomas) in 2018 was 14,700 new cases, affecting 11,200 men and 3,500 women, without differentiating the type of cancer or location (De Oliveira Santos, 2018). Unfortunately, more than half of OC cases - are mainly in developing countries. In these countries, generally, the diagnosis is made late, a fact that considerably affects the prognosis. In developed countries such as the United States, the 5-year survival is no more than 65 %(Zanoni *et al*., 2019).

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OC is often preceded by visible oral lesions known as Oral Potentially Malignant Disorders (OPMDs). They can be visually detected by a clinical routine exam or by the patient by himself through a self-exam at home during regular activities such as brushing. This type of lesion is often placed under clinical monitoring (Al-Quteimat & Amer, 2020). Both visual inspection exams remain the best method for detecting OPMDs and OC (Al-Quteimat & Amer, 2020; Alves *et al.*, 2020; Lai *et al.*, 2020; Martelli Júnior *et al.*, 2020).

The discontinuation of a dental practice can negatively affect the role of dental surgeons in the prevention and early detection of OPMDs and OC. Thus, with the pandemic most cases will be diagnosed in advanced clinical stages, resulting in high morbidity and mortality. In addition, it also might affect the incidence of OC in 2020. This pandemic threatens the diagnosis of oral cancer and the care of cancer patients, and puts morbidity and mortality of those at risk.

Health measures are complex, and even when taken to protect the population, they can have unintended consequences. The ideal is not to overburden the health system unnecessarily but if the patient already had a diagnosis, or if there is a suspicion of cancer, they must seek assistance. In our opinion, the diagnosis of oral suspicious lesions should also be treated as urgencies, and centers must be available for diagnosis and to refer the patient to treatment services. Thus, reducing the severity of unnecessary mortality and mortality.

Urgent political interventions are needed to mitigate the expected impact of the pandemic on patients with oral cancer, as the delay in diagnosis can be configured as another sequel to Covid-19 disease, since it is an oral malignancy that cannot wait to be diagnosed and treated. Communication with the patient must be transparent, and we must inform them that the hospitals and/or some referral institutions are prepared, with specific protocols to protect COVID-19, to receive, diagnose and treat the patient with an oncological disease, reducing fear demand for health professionals acclaimed by the national media.

The COVID-19 pandemic has forced many areas of society to slow down activities and has brought with it the impact on the health system that can hang on for a longer period than expected. Reflexes of the pandemic regarding the late diagnosis of OC will may be seen in the future. Now we cannot measure what the postponement of some elective appointments will mean about the incidence of oral cancer in 2020. So, until a vaccine or an effective antiviral treatment regimen is developed, we, as providers of oral health care, we will need to encourage and strengthen our patients to continue undergoing routine oral self-care. It is essential to clarify the problem and raise the population's awareness about oral cancer and the need to seek professionals when changes in the oral cavity are noticed.

REFERENCES

Al-Quteimat, O. M. & Amer, A. M. The impact of the COVID-19 pandemic on cancer patients. *Am. J. Clin. Oncol., 43(6)*:452-5, 2020.

Alves, F. A.; Saunders, D.; Sandhu, S.; Xu, Y.; de Mendonça, N. F. & Treister, N. S. Implication of COVID-19 in oral oncology practices in Brazil, Canada, and the United States. *Oral Dis.*, 2020. DOI: https://www.doi.org/10.1111/odi.13493

Bray, F.; Ferlay, J.; Soerjomataram, I.; Siegel, R. L.; Torre, L. A. & Jemal, A. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J. Clin., 68(6)*:394-424, 2018.

de Oliveira Santos, M. Estimativa 2018: incidência de câncer no Brasil. *Rev. Bras. Cancerol., 64(1)*:119-20, 2018.

Lai, A. G.; Pasea, L.; Banerjee, A.; Denaxas, S.; Katsoulis, M.; Chang, W. H.; Williams, B.; Pillay, D.; Noursadeghi, M.; Linch, D.; *et al.* Estimating excess mortality in people with cancer and multimorbidity in the COVID-19 emergency. medRxiv, 2020. DOI: https://www.doi.org/10.1101/2020.05.27.20083287

Martelli Júnior, H.; Machado, R. A.; Bonan, P. R. F.; da Cruz Perez, D. E.; Pires, F. R. & Alves, F. A. Brazilian oral medicine and oral pathology: We are here during the COVID-19 pandemic. *Oral Dis.*, 2020. DOI: https://www.doi.org/10.1111/odi.13440

AL-Maweri, S. A.; Halboub, E. & Warnakulasuriya, S. Impact of COVID-19 on the early detection of oral cancer: A special emphasis on high risk populations. *Oral Oncol., 106*:104760, 2020.

Shuman, A. G. & Campbell, B. H. Ethical framework for head and neck cancer care impacted by COVID-19. *Head Neck, 42(6)*:1214-7, 2020.

Zanoni, D. K.; Montero, P. H.; Migliacci, J. C.; Shah, J. P.; Wong, R. J.; Ganly, I. & Patel. S. G. Survival outcomes after treatment of cancer of the oral cavity (1985-2015). *Oral Oncol., 90*:115-21, 2019.

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