The members of the Transforming Breast Cancer Together initiative welcome the efforts and collaboration by EU Member States and the EU institutions in managing a coordinated and effective response to the COVID-19 global pandemic. In these unprecedented times of uncertainty, we salute the enormous efforts by healthcare professionals and other health systems workers in working tirelessly, putting their own lives and of their loved ones at risk, to tackle the outbreak and provide the best possible care to EU citizens. We are all united in this global fight against the new coronavirus and we call for the highest level of global, European, national, regional and individual cooperation.

The COVID-19 outbreak also poses a direct threat to Europeans’ lives by disrupting the continuity and quality of care in other disease areas. As a multi-stakeholder initiative deeply committed to improving breast cancer care in Europe, along the entire pathway, we would like to underline the important issues which the outbreak of COVID-19 creates for breast cancer patients. In doing so, we aim to support the outstanding work currently done in Europe by all competent authorities and make sure that all patients affected by serious conditions, such as breast cancer, are protected and their needs are addressed in an appropriate manner. In these difficult times, it is crucial to ensure that those affected by breast cancer can access safe and quality procedures throughout the whole care pathway, from early diagnosis to treatment.

**CHALLENGES IN ACCESSING APPROPRIATE TREATMENT AND CARE**

**Challenge 1: Diminished resources to care for breast cancer patients**

With great efforts being shifted towards the response to address the COVID-19 pandemic, and due to increased demands on national health care systems, breast cancer patients and oncologists face increasing challenges to ensure the continuity of services and assistance.

As the redistribution of resources is currently focused on intensive care units, the shortages, in various degrees, across the EU of personal protective equipment for health workers, which are crucial to containing the spread of COVID-19, such as face masks, gloves, and sanitising products compromise the ability to provide high-quality care and access to services for breast cancer patients. Added to this, the closure of borders and limitations on exports and imports could threaten access to certain treatments for breast cancer. In some areas, physicians are being redirected for the care of COVID-19 patients. It is crucial that the majority of oncologists can remain available to treat cancer patients.

In the spirit of European solidarity, it is of the utmost importance for the European Union and its Member States to ensure equitable access to treatments for breast cancer patients by avoiding any obstacles to the production and access of medical equipment, devices and medicines, as well as their circulation across the European Member States.

**Challenge 2: Delays in screening and diagnosis**

In the current climate, it is difficult for patients who are experiencing early symptoms of the disease (e.g. when detecting a lump in their breast) to seek medical attention, due to both lack of available care facilities and the fear of contracting the virus in high-risk places. Added to this, the majority of screening programmes are currently on hold and medical consultations not deemed to be urgent are delayed.

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2. [https://www.thelancet.com/action/showPdf?pii=S1470-2045%2820%2930217-5](https://www.thelancet.com/action/showPdf?pii=S1470-2045%2820%2930217-5)
Patients who have tested positive to the new coronavirus and find a lump have to wait to finish the quarantine to undergo the appropriate diagnosis procedures as hospitals have been divided in “clean” and “infected” areas, so a COVID-19 positive patient access essential oncological services in a “clean” area.

This is problematic as the early diagnosis of the disease is a key element in successfully treating breast cancer. As such, it can lead to a later-stage diagnosis which is more difficult to treat, requires more resources and might have an impact on survival. Therefore, we call on public authorities to ensure that the public has reliable information around the ongoing situation and access to medical consultations and screening.

Challenge 3: Delays in breast cancer treatment

Due to the challenging situation, hospitals are delaying some services, including surgeries that are considered not life-threatening or urgent. These decisions were made mainly because of the lack of hospitalization beds and respirators in the operating rooms that were transferred to the intensive care units. This led to the cancellation of numerous medical checks, and follow-ups.

Breast cancer patients are being assessed on a case by case basis to delineate the best treatment when surgery cannot be performed. This leaves patients, diagnosed with breast cancer, wondering when they will be able to receive needed care, such as important surgical procedures and radiotherapy sessions. This is complicated by the fact that, where surgeries are still scheduled, patients have been and will be reluctant to follow through as they will be hesitant to spend several nights in a hospital for fear of contracting the coronavirus during the whole process. And for those patients requiring a mastectomy, reconstruction becomes an issue as re-operations and longer hospitalization stay are not warranted.

Early breast cancer patients requiring chemotherapy or targeted therapy and patients with advanced breast cancer require ongoing treatment that is prescribed at set time intervals. Given the situation, in some areas, they may be redirected to other facilities and/or skip important treatment sessions. This potentially puts these patients at higher risk of disease relapse or progression and therefore poorer outcomes. It also adds enormous psychological distress for patients who are already fragile.

It will be essential for policymakers across the EU to guarantee that both patients and health professionals have clear information and guidelines around quality care for breast cancer patients during the pandemic.

Challenge 4: The discontinuation of clinical trials

In many areas, there has been a temporarily suspension of numerous clinical trials due to trial subjects having to self-isolate, restricted access to clinics and hospitals, and healthcare professionals being committed to COVID-19 related tasks. This is critical as these trials often represent an important line of treatment for patients with advanced breast cancer or patients not responding to standard treatments, and leaves patients without an option or hope for a treatment. Often, these are the most vulnerable patients, for whom access to timely treatment is crucial.

We salute the European Medicines Agency for issuing guidance on the Management of Clinical Trials during the COVID-19 pandemic and we encourage Member States to follow the suggestions in order to keep clinical trials running.

5. [https://www.thelancet.com/action/showPdf?pii=S1470-2045%2820%2930217-5](https://www.thelancet.com/action/showPdf?pii=S1470-2045%2820%2930217-5)
PSYCHOLOGICAL AND SOCIAL CHALLENGES

Challenge 5: Emotional distress caused by uncertainty of treatment and follow up

The above-described delays to scheduled procedures and surgeries can cause considerable emotional distress to breast cancer patients, who often find themselves in difficult situations when they have to digest an announcement that their surgical procedure or treatment are going to be delayed. This also causes particular strain on their families and carers.

In addition, breast cancer survivors will be experiencing significant concerns about recurrence given the cancellation of their regular, follow up examinations, creating enormous anxiety.

Challenge 6: Emotional distress caused by COVID-19 fear

Current scientific evidence suggests that people with underlying conditions, including cancer, are more vulnerable and likely to develop complications due to the virus. Breast cancer patients undergoing chemotherapy, targeted or biological therapy or radiation have weakened immune systems which puts them at a much higher risk of complications if infected. This further increases the burden of distress that breast cancer patients already experience due to their condition.

As such, these patients need to be confined at home, and scrupulously respect social-distancing rules, by avoiding any contact with potentially at-risk people. This can lead to a situation of isolation and loneliness, where patients do not receive the support and encouragement from their loved ones, which is difficult to bear for many patients who are undergoing treatment.

Challenge 7: Emotional distress for cancer survivors

Cancellations of regular follow-up exams, mammographies, ultrasounds and rehabilitation services create enormous anxiety for breast cancer survivors.

For those breast cancer survivors who are employed and who have returned to work, whether they are in social isolation due to a weakened immune system or not, the emotional distress can be just as severe. Work can provide a sense of purpose and be an excellent distraction in worrying times, but for those who have limited contact with their employer or colleagues it can seem a backward step, made worse when there is limited access to advice from a breast cancer nurse or specialist.

Those who are out of work or furloughed or self-employed will, in addition, be experiencing significant economic and social burdens on top of their cancer diagnosis, and the ‘ripple effect’ will be affecting them and their families.

RESOURCES ON HOW TO TACKLE THE CHALLENGES

In outlining the above issues, our aim is to shed light on the new reality brought about by the COVID-19 outbreak on breast cancer patients and we call on all authorities, both at EU and national levels, to take the necessary measures to tackle the above issues and to ensure the minimum level possible of disruption to the treatment and lives of all patients suffering from difficult conditions, such as breast cancer.

All the members organisations of the Transforming Breast Cancer Together initiatives are committed to working together to address the challenges that breast cancer patients are facing during the outbreak and to ensure continuous high-quality care throughout their cancer pathway. To this end, each member is leading the effort in their area of expertise, whether it is by disseminating important information to patients, providing medical equipment and medicines, coordinating EU-wide responses and supporting EU Member States in addressing this crisis. Additionally, the European Society of Medical Oncology (ESMO) is issuing guidelines on how to treat each type of cancer during this pandemic \(^{11}\) and a group of respected breast cancer experts has published recommendations on how to prioritise and treat breast cancer patients during COVID-19 pandemic.\(^ {12}\) These recommendations represent the best current knowledge on how to maintain the highest possible quality of care while facing these unprecedented times.

We would like to highlight the below the resources, developed by members of the Transforming Breast Cancer Together initiative, which aim at providing patients, healthcare professionals and policymakers with guidelines and information on how to best limit the potential stress and disruption outlined above.

- **ABC GLOBAL ALLIANCE**

- **THE UNION FOR INTERNATIONAL CANCER CONTROL (UICC)**
  [https://www.uicc.org/resources/access-all-resources/cancer-and-coronavirus-resources](https://www.uicc.org/resources/access-all-resources/cancer-and-coronavirus-resources)

- **EUROPEAN CANCER PATIENT COALITION (ECPC)**

- **EUROPEAN SOCIETY OF SURGICAL ONCOLOGY**

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