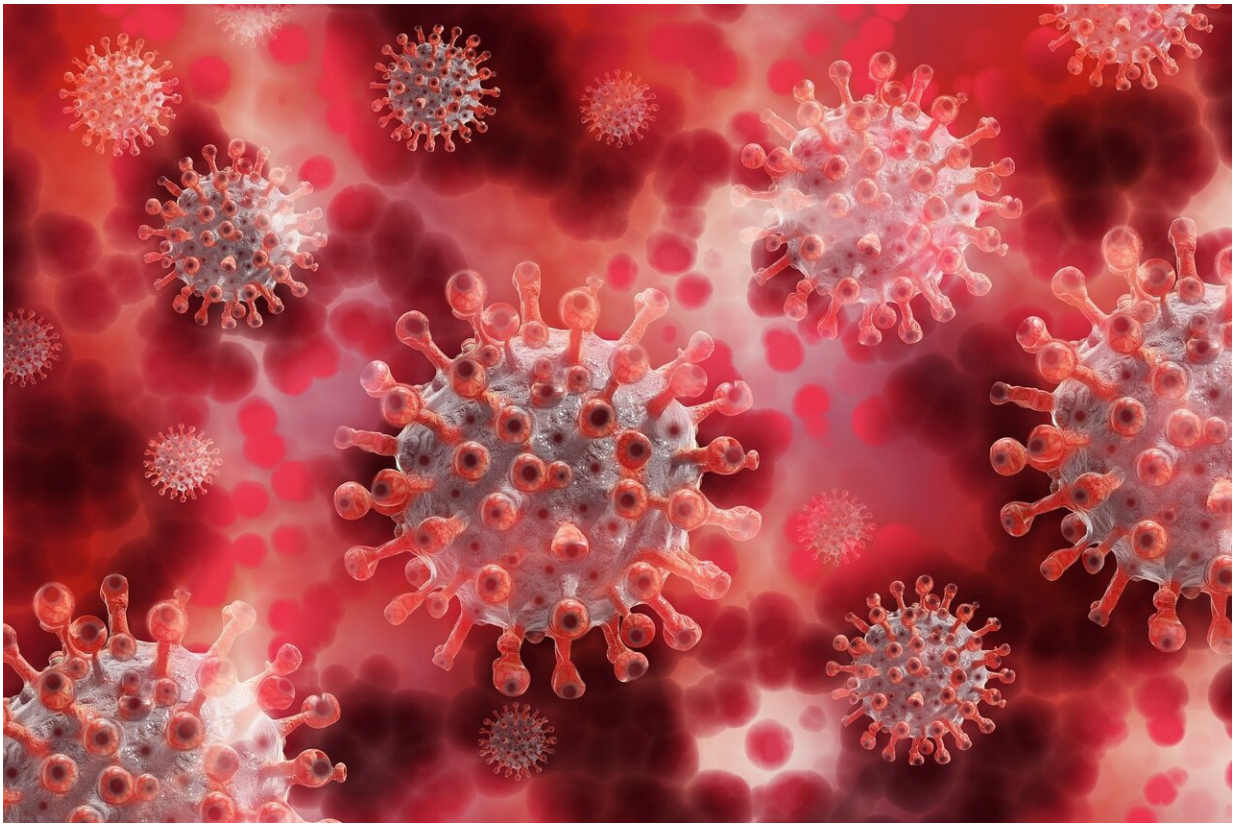
Registry tracks outcomes among thoracic cancer patients sickened by COVID-19

June 16 2020



Credit: Pixabay/CC0 Public Domain

New data from TERAVOLT, a global consortium that tracks outcomes of people with thoracic cancers affected by COVID-19, offers clues as to why they experienced a high death rate of 33% when the coronavirus

swept across Europe.

While the majority of those who died were hospitalized, only 9% were admitted to intensive care units, according to a study published in *The Lancet Oncology.* Most died from complications of COVID-19, not the progression of cancer.

"Just having a lung cancer diagnosis in and of itself shouldn't exclude patients from care," said Leora Horn, MD, MSc, Ingram Associate Professor of Cancer Research at Vanderbilt-Ingram Cancer Center, who is a senior author of the study and a TERAVOLT consortium steering committee member.

The study is based on the first 200 patients for which TERAVOLT received outcomes data. Of the 152 hospitalized patients, 134 or 88% met the criteria for ICU admission, but only 13 of those patients were admitted to an ICU. Only 5 were mechanically ventilated.

Most of the patients were hospitalized in Italy, France and Spain, which were "particularly hard hit" by the pandemic, the study noted. The study's lead author, Marina Garassino, MD, of the National Cancer Institute of Milan, Italy, initiated the idea for the registry, which led to the TERAVOLT consortium (Thoracic cancERs InterAtional coVid 19 cOLlobaraTion).

"We tried to capture the reasons for the lack of ICU admission," the authors noted in the study. "Difficult decisions were made limiting ICU admissions to cancer patients and others with terminal illness due to equipment and personnel shortages. However, we are aware that behind these choices there may also be patients' decisions, cultural and institutional choices that our work is unable to properly capture."

"Not all lung cancer patients are at risk for hospitalization," Horn said.

Initial data indicated that patients on tyrosine kinase inhibitors appeared to be at decreased risk for hospital admission. This remained true when Horn presented updated data from the TERAVOLT registry last month at ASCO20 Virtual, the annual meeting of the American Society of Clinical Oncology. The data presented at the ASCO meeting were based on those first 200 patients in *The Lancet Oncology* study, plus an additional 200, including many from the United States.

That data revealed that patients treated with chemotherapy within three months of a COVID-19 diagnosis had a significantly increased risk of 64% of dying from the coronavirus. Patients treated with anticoagulants to prevent blood clots and corticosteroids to reduce inflammation also had a greater mortality risk. Patients treated with immunotherapies had no increased risk of mortality.

In *The Lancet Oncology* paper, the authors noted that at this point it remains unclear if intubation and more aggressive care could improve survival for people with thoracic cancers sickened by COVID-19, but the integration of patients' preferences could provide guidance for clinicians while uncertainty is high.

More information: Marina Chiara Garassino et al, COVID-19 in patients with thoracic malignancies (TERAVOLT): first results of an international, registry-based, cohort study, *The Lancet Oncology* (2020). DOI: 10.1016/S1470-2045(20)30314-4

Provided by Vanderbilt University Medical Center