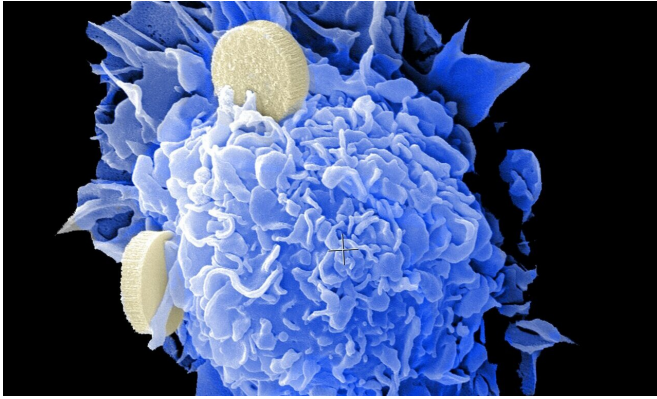


After coronavirus delays, health experts urge return to cancer screenings

2 April 2021, by Natalie Weber



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At first, the symptoms just seemed like hemorrhoids.

Stephanie Luke was a healthy 38-year-old, so she chalked up the blood in her stools to rectal inflammation. But after a month, at the end of November, she underwent a colonoscopy and was diagnosed with stage II colorectal cancer—a progression of the disease into nearby tissues.

The Valrico woman went into planning mode, asking her doctor what came next. Later, by herself, she would have moments where she asked, "Why me?" She underwent [genetic testing](#) that proved what she already knew: Her family had no history of the cancer.

"I was kind of in shock but stuff doesn't hit me until later, usually," she said.

Now, Luke urges anyone who notices potential symptoms to get screened right away.

"If you know something's not right with your body, you have to be your own advocate and make sure you go and get it checked out," she said.

It's a message cancer experts always emphasize, but one that carries new urgency during the COVID-19 pandemic. They've seen improvement as coronavirus cases and deaths decline, but they still fear people are reluctant to leave their homes—ignoring routine screenings and even possible symptoms.

This reluctance may delay detection and treatment until the cancer reaches a later, more dangerous stage.

According to provisional data from the Centers for Disease Control and Prevention, cancer was the second-leading cause of death nationwide in 2020. Heart disease was No. 1 at 690,000 deaths, followed by cancer at 598,000 deaths and COVID-19 at 345,000 coronavirus deaths.

In 2019, the latest full year that data was available, cancer was the second-highest cause of [death](#) in Florida, claiming the lives of 45,562 people.

The pandemic's impact on screenings and treatments could cause 10,000 "excess deaths" from colorectal and breast cancer, according to the National Cancer Institute. Another study from the United Kingdom predicted an increase in cancer deaths during the next five years compared to deaths before the pandemic—up to 10 percent in [breast cancer](#) deaths, up to 17 percent in [colorectal cancer](#) deaths, and up to 5 percent in lung cancer deaths.

"We missed a very large number of screenings, more so than I think we can really hope to make up," said Dr. Ned Sharpless, director of the National Cancer Institute. Even if [medical professionals](#) boosted cancer screenings beyond historic levels, it would be difficult to make up the difference, Sharpless said.

"We've definitely seen an improvement in the rate of screening and diagnosis and treatment, but it's

not obviously fully back to normal," he said.

Local cancer experts have also seen a return to screenings, and they're seeing signs of screening delays. Dr. Bhavtosh Dedania at the Gastroenterology Center of Tampa Bay said more patients are being diagnosed at a later stage of cancer. Likely reasons, Dedania said, include a decline in-office visits because of the pandemic and a greater reliance on telemedicine.

"No matter how good you do online, you might miss subtle physical signs," he said. "You don't have that much connection, as much as you do when you're in person."

At Moffitt Cancer Center, some patients are coming in now for screenings after the center paused elective procedures for a time last spring, said Chief Medical Officer, Dr. Robert Keenan. Others are finally feeling safe enough to make the trip.

Still, Keenan said, it's difficult to use local numbers to project trends in [cancer](#) screenings during the past year or the potential long-term impacts of screening delays.

"You need to accumulate a fair number of people to be able to understand whether we were seeing a spike in diagnosis at a later stage than we would have otherwise," he said. "So from a single-center perspective, I would say yes, we've seen some, but it's hard to say what the impact is specifically in our area."

The national trends raise enough concerns to reemphasize that patients shouldn't wait to get screened.

"At this point, we really, really want people to get those [screening](#) studies that they need," he said.

After her diagnosis late last year, Luke underwent radiation treatment and had surgery this month. She's had to make medical visits alone and, at times, to isolate from extended family who may have been exposed to COVID-19. Loved ones started a GoFundMe for Luke.

Through it all, she has relied on her loved ones and

her faith. Prayer, both her own conversations with God and the prayers of family and friends, have given her a sense of peace throughout her treatment.

Luke said she wants to spend more time with her family, and between treatments, she's been able to eat what she wants. She also wants to travel more.

She advised others "just not to ignore anything that's abnormal. Go and get it checked out."

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