Has COVID Compromised Cancer Care?

PŪRONGO HAUMANU Ā TAU ANNUAL CLINICAL REPORT: Gynaecological Oncology 2021

Dr Lois Eva Clinical Director Gynaecological Oncology

Covid and All Cancers



Cancer diagnosis

Registrations

• In November and December 2021, provisional data show a higher number of registrations compared to November/December 2018/19.



For all of 2021, there has been an increase of 7% in the number of cancer registrations compared to 2018/19, with the largest increases for Asian (21%), Māori (16%) and Pacific peoples (13%).

COVID-19 and cancer services

Working report on the impact of COVID-19 on cancer services for the period ending December 2021

Released February 2022

Cancer Treatment

Faster Cancer Treatment

- The COVID-19 Delta outbreak appears to have had a minimal impact on the number of referrals with
 a high suspicion of cancer, with volumes in November and December similar to the preceding four
 months.
- The proportion of referrals meeting the 62-day target (patients receiving their first treatment within 62 days of receipt of referral) has remained stable in 2021.



The FCT data suggest that people who presented to their GP with signs/symptoms highly suspicious of cancer are still being referred through to secondary care. There are a similar number being referred as pre-COVID-19 and these people are being seen within a similar time frame.

Impact of COVID-19 on cancer diagnosis and treatment

Overall, publicly funded cancer treatment services continued during the COVID-19 Delta outbreak beginning in August 2021. The dip in cancer registrations seen during August 2021 has resolved, with similar or higher numbers of cancer registrations seen 2021 compared to previous years. The disruption to gastrointestinal endoscopy procedures seen August/September in the Auckland region has resolved. There has been some disruption to bronchoscopy procedures, not limited to Auckland. The overall impact of COVID-19 on cancer diagnoses in 2021 is considerably smaller than the disruption seen in April and May 2020.

Access to secondary care: ADHB FCT data

Reporting Month	Total Patients	Compliance (%)	Adjusted Compliance (%)
Jan 2020	7	100	100
Feb 2020	6	100	100
Mar 2020	10	83	100
Apr 2020	12	100	100
May 2020	10	100	100
Jun 2020	12	100	100
Jul 2020	10	67	100
Aug 2020	4	50	100
Sep 2020	10	100	100
Oct 2020	10	50	100
Nov 2020	10	100	100
Dec 2020	9	71	100

Reporting Month	Total 62-Day (HiSCan) Patients Diagnosed with Cancer	Reported Percentage (%)	Adjusted Percentage (%)
Jan 2021	8	62.5	83.3
Feb 2021	0	100	100
March 2021	2	50	100
April 2021	2	50	50
May 2021	5	60	75
June 2021	3	33	50
July 2021	3	66.7	66.7
Aug 2021	3	33.3	50
Sept 2021	3	66.7	100
Oct 2021	4	100	100
Nov 2021	3	33.3	100
Dec 2021	1	100	100
Overall Performance	37	62.2	79.3

Access to secondary care: Colposcopy

Demographic de	tails of	wāhin	e having	g an i	nitial col	posc	оріс еха	mina	tion in N\	NH 2	2015-2021			
	20	15	20	16	20	17	20)18	20	19	20	20	20	21
	N=1	1182	N=1	348	N=1	088	N=	1152	N=	1117	N=1	1087	n=1	092
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Ethnicity														
Māori	79	6.7	78	5.8	91	8.4	91	7.9	84	7.5	82	7.5	96	8.8
Pacific	129	10.9	114	8.5	97	8.9	101	8.8	88	7.9	91	8.4	98	9.0
Indian	40	3.4	58	4.3	39	3.6	48	4.2	56	5	57	5.2	55	5.0
Other Asian	191	16.2	223	16.5	204	18.8	203	17.6	212	19	202	18.6	238	21.8
MELAA					35	3.2	32	2.8	47	4.2	47	4.3	46	4.2
Other	39	3.3	66	4.9										
European	704	59.6	809	60	622	57.2	669	58.1	628	56.2	608	55.9	555	50.8

Cervical treatme	ents N	WH 2	014 – 2	021												
	20	14	20	15	20	16	20	17	20	18	20	19	20	20	20	21
	N=	286	N=	300	N=	310	N=	234	N=	229	N=	202	N=	211	n=	235
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
LLETZ	262	91.6	284	94.7	267	86.1	215	91.9	212	92.6	187	92.6	194	91.9	218	92.8
Cold knife cone	21	7.3	14	4.7	38	12.3	17	7.3	11	4.8	11	5.4	11	5.2	12	5.1
Hysterectomy	3	1	0		0		1	0.4	0		1	0.5	1	0.5	1	0.4
Other			2	0.7	5	1.6	1	0.4	6	2.6	3	1.5	5	2.4	4	1.7

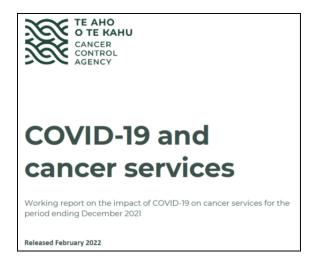
Screening suspended during level 4 in 2020 No Significant Change in numbers 2020-21

Colposcopy and COVID

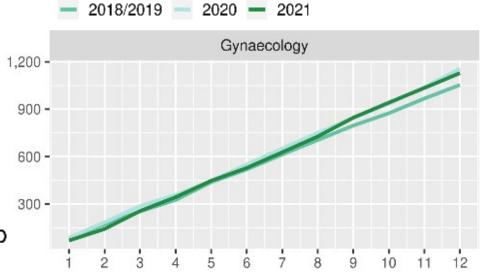
- Treatments and high grade prioritised
- Dedicated clinics
- No change in pattern of disease
- Low grade wait increased from 4.5 to 6 months

Table 203: Histology of biopsy wähine presenting for initial of NWH 2020		
		l visit 1087
	n	%
Invasive	5	0.5
High grade	158	14.5
Low grade	172	15.8
Dysplasia NOS	30	2.8
HPV	26	2.4
Inflammation	57	5.2
Insufficient sample	5	0.5
Normal	170	15.6
No biopsy taken	464	42.7

Histology of biopsy among wähi initial colposcopy NWH 2021	Histology of biopsy among wähine presenting for initial colposcopy NWH 2021						
	Initia	l Visit					
	N=	1092					
	n	%					
Invasive	4	0.4					
HG	171	15.7					
LG	177	16.2					
Dysplasia NOS	17	1.6					
HPV	27	2.5					
Inflammation	32	2.9					
Insufficient sample	11	1.0					
Normal	169	15.5					
No biopsy taken	484	44.3					

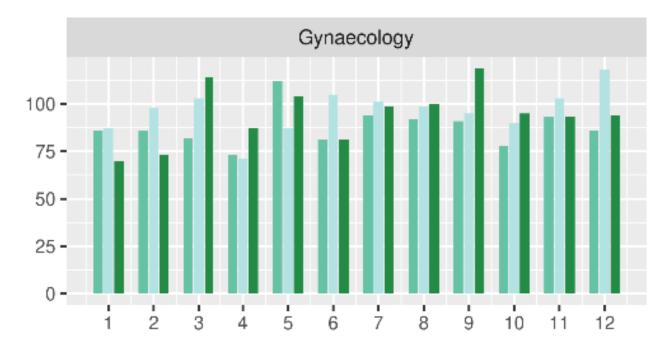


Cumulative new cancer registrations – by tumour group



New cancer registrations – by tumour group





National Data

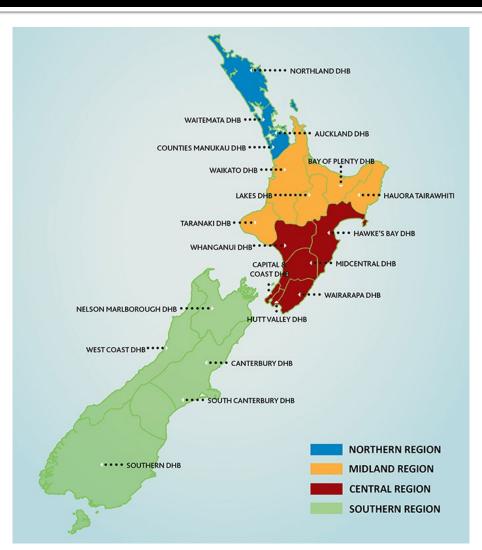
Table 3: Number of provisional cancer registrations and percentage change in 2021 compared to the 2018/19 average, by month and cumulative year to date, by tumour group

	_	October			November				Decembe	r	Cumulative January-December			
To	umour group	2018/19	2021	% change	2018/19	2021	% change	2018/19	2021	% change	2018/19	2021	% change	
	Breast	341	327	-4%	358	362	1%	265	312	18%	3,736	3,850	3%	
_	Colorectal	254	272	70/	210	205	2%	272	274	1%	2 172	2,202	10/	
	Gynaecology	78	95	22%	93	93	1%	86	94	9%	1,052	1,129	7%	

Cumulative cancer registrations by cancer type and ethnicity

		Total I	Popula	tion			_	Mãori						Non-Māori/Non-Pacific							
	Cumulati	ve Janu	uary-M	arch		e between and 2022		Cumulat	tive Jan	uary-M	arch		e between and 2022		Cumulat	tive Jan	uary-M	arch		e between and 2022	
	2018/2019	2020	2021	2022	Number	%change		2018/2019	2020	2021	2022	Number	%change		2018/2019	2020	2021	2022	Number	%change	
Brea	st 835	898	938	879	44	5%]	119	135	157	110	-9	-7%		679	703	719	711	32	5%	
Colorec	al 734	844	761	851	117	16%		46	61	67	57	11	24%		669	766	670	767	98	15%	
Gynaecolo	gy 254	287	257	269	16	6%		37	38	32	38	1	3%		187	222	193	190	4	2%	\rfloor

Gynaecological Cancer Regions



	То	tal
	N=	1383
	n	%
Mãori	228	16.5
Pacific	235	17.0
Asian	210	15.2
MELAA	19	14
European	685	49.5
Not stated	6	0.4
Age (yrs)		
≤25	36	26
26-35	151	10.9
36-45	166	12.0
46-55	255	18.4
56-65	328	23.7
66-75	272	19.7
>75	175	12.7
DHB of Residence		
Auckland	217	15.7
Counties Manukau	345	24.9
Waitemată	314	22.7
Northland	120	8.7
Bay Of Plenty	113	8.2
Waikato	178	12.9
Lakes	65	4.7
Tairawhiti	21	15
Other	10	0.7

Referrals decreased 5%

No change in referral proportions 2019/20/21:

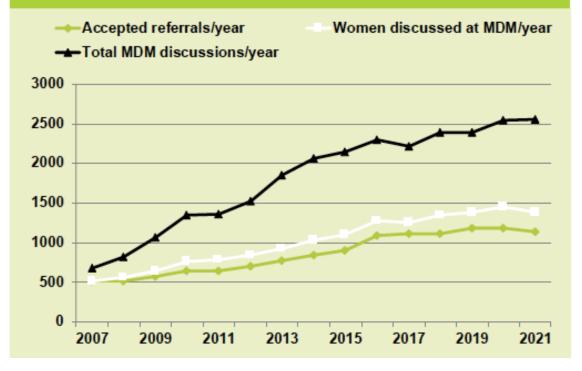
- Ethnicity
- DHB of domicile

Access to Gyn Onc

Table 213: Time from first referral to first MDM (first MDM in 2021)*

	20	20	20	2021					
	N=1	1068	N=	963					
	n	%	n	%					
<7 days	499	46.7	352	36.6					
7-14 days	444	41.6	478	49.6					
>14 days	125	11.7	133	13.8					





- Decrease MDM referrals
- Increased overall MDM discussion workload
- Diagnostic delays
- Theatre capacity unchanged
- Clinic capacity unchanged

Time to be seen

Table 214: Time from first MDM to first GO Clinic appointment (clinic in 2021)*

	2	019	20	20	20	2021				
	N=360		N=	343	N=	349				
	n	%	n	%	n	%				
<7 days	203	56.3	186	54.2	185	53.0				
7-14 days	77	21.3	58	16.9	44	12.6				
>14 days	72	20.0	94	27.4	116	33.2				
Clinic before MDM	8	2.2	5	1.5	4	1.1				

- Desire to avoid Auckland during Delta
- Effect of Omicron in 2021

Time to treatment

Surgeries 497 2021 496 2020 525 2019

Table 215: Time from first clir	nic visit to
primary surgical treatment	(surgery in 2020)*

	2020
	N=271
	n %
<14 days	221 81.5
14 - 31 days	37 13.7
>31 days	13 4.8

- 2020 2 SMOs
- 5 full day lists/week

Table 215: Time from first clinic visit to primary surgical treatment (surgery in 2021)*

surgical treatment (sur	gery in 2021)	
	20	21
	N=	271
	n	%
<14 days	168	62.0
14 - 31 days	70	25.8
>31 days	33	12.2

- 2021 3 SMOs
- 5 full day lists/week
- Delays due to patients cancelling at short notice
- DCC Capacity

Are cancers more advanced?

2020					
Total	Primary s	urgery	Interval del	oulk surgery	Surgery for recurren
1061	Stage 1/2	Stage 3/4	Stage 1/2	Stage 3/4	
N= 128	N= 50	N= 28	N= 1	N= 34	N= 15
2021					
debulking and bowe	l sugery at primary, int	erval and recurrence sur	gery for ovarian, fallop	ian tube and periton	eum cancer 2021
Total	Prim	ary treatment	Interval	debulking	Surgery for recur- rence
	stage 1/2	stage 3/4	stage 1/2	stage 3/4	
N- 140	N- 63	N- 26	N= 2	N- 46	N= 11

- 14% increase in tubovarian cancers in 2021
- 48% Stage 3 or 4 :Unchanged 2020/21

1 patient ceased NACT due to COVID

Did COVID change practice?

Primary Debulking Surgery 2020 2021 Tubo-ovarian cancers 45% 36%

	Total _	Primary	y surgery	Interval de	bulk surgery	Surgery for recurrence
	TOWN	Stage 1/2	Stage 3/4	Stage 1/2	Stage 3/4	
2020	N= 128	N= 50	N= 28	N= 1	N= 34	N= 15
	n %	n %	n %	n %	n %	n %
Residual disease						
None	110 85.9	48.0 96	220 78.6	1 100	24 70.6	15 100
<1cm	14 10.9	1.0 2	5.0 17.9	0	8 23.5	0
≥1cm	4 3.1	1.0 2	1.0 3.6	0	2 5.9	0
Bowel surgery						
Yes	20 15.6	0	9 32.1	0	10 29.4	1 0.6
No	108 84 4	50 100	19 67.9	1 100	24 70.6	14 93.3

	То	tal		Primary	treatment			Surgery re	for recur nce			
2021			stag	e 1/2	stag	e 3/4	stag	e 1/2	stag	e 3/4		
	N=	148	N=	63	N=	26	N=	2	N=	46	N=	11
	n	%	n	%	n	%	n	%	n	%	n	%
Residual diease										•		
None	129	87.2	610	96.8	22.0	84.6	2	100	33	717	11	100
<1cm	16	10.8	10	16	2.0	7.7	0	0	13	28.3	0	0
≥1cm	3	2.0	1.0	1.6	2.0	7.7	0	0	0	0.0	0	0
Bowel surgery										_	_	
Yes	18	12.2	2	3.2	2	7.7	0	0.0	10	21.7	4	36.4

2 100.0

7 636

No

130 87.8

61 96.8

Has COVID led to inequity in Gynae cancer care?

Table 217:	Demo	graphi	c cha	racter	istics	of wor	nen di	scus	sed at I	MDM	in 2	021	by pr	imary	site										
	То	tal	Ovarian		Peritone- um		Fallopian tube		Endometri- um			Uterus		Ce	Cervix		Vulva		Vagina		Placenta		Non-gynae cancer		nown
	N=	1383	N=	410	N=	12	N=	30	N=	498		=	72	N=	138	N=	52	N=	20	N=	88	N=	27	N=	34
	n	%	n	%	n	%	n	%	n	%		n	%	n	%	n	%	n	%	n	%	n	%	n	%
Māori	228	16.5	66	16.1	3	25.0	3	10.0	80	16.1		9	12.5	33	23.9	6	11.5	3	15.0	11	12.5	5	18.5	9	26.5
Pacific	235	17.0	45	11.0	0	0.0	3	10.0	125	25.1		17	23.6	22	15.9	2	3.8	0	0.0	17	19.3	3	11.1	1	2.9
Asian	210	15.2	64	15.6	2	16.7	8	26.7	58	116		15	20.8	21	15.2	1	1.9	3	15.0	27	30.7	6	22.2	5	14.7
MELAA	19	14	9	22	0	0.0	0	0.0	4	0.8		2	2.8	0	0.0	0	0.0	0	0.0	3	3.4	0	0.0	0	0.0
European	685	49.5	225	54.9	7	58.3	16	53.3	227	45.6	-	28	38.9	62	44.9	43	82.7	14	70.0	30	34.1	13	48.1	19	55.9
Not stated	6	0.4	1	0.2	0	0.0	0	0.0	4	0.8		1	1.4	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

- Total number endometrial and cervical cancers in 2021 decreased compared to 2020
- Proportion of Cervical cancers in Pacific wāhine 6.5% and Māori 20.6% in 2020

Has COVID led to inequity in Gynae cancer care?

Table 218: Demographic characteristics of wahine undergoing surgery by the Gynaecology Oncology team in 2020 by primary site (excludes surgery for complications)

	Total	Ovary	Peritoneum	Fallopian tube	Endometrium	Uterus	Cervix	Vulva	Vagina	Non-gynae cancer/ unknown	Brachytherapy
	N=484	n=159	n=10	n=18	n=144	n=8	n=40	n=50	n=15	n=13	n=27
	n %	n %	n %	n %	n %	n %	n %	n %	n %	n %	n %
Ethnicity											
Māori	69 14.3	23 14.5	1 10.0	2 11.1	23 16.0	1 12.5	6 15.0	5 10.0	4 26.7	3 23.0	1 3.7
Pacific	58 12.0	16 10.1	1 10.0	2 11.1	29 20.1	1 12.5	5 12.5	3 6.0	0	0	1.0 3.7
Asian	69 14.3	22 13.8	3 30.0	3 16.7	22 15.3	1 12.5	7 17.5	1 2.0	2 13.3	0	8 29.6
MELAA	4 0.8	1 0.6	0	0	0	0	1 2.5	0	1 6.7	0	0
European	284 58.7	96 60.4	5 50.0	11 61.1	70 48.6	5 62.5	21 52.5	41 82.0	8 533	10 77.0	17 63.0
	_	,					$\overline{}$				

Table 218: Demographic characteristics of women undergoing surgery by the gynaecology oncology team in 2021 by primary site (excludes surgery for complications)

	Total		Ovarian		Peritoneum		Fallopian tube		Endometri- um		Uterus		Ce	Cervix		lva	Vag	ina	Placenta		Non-gynae cancer		Unkı	no wn		hyther- apy
	N=	472	n=	184	n=	3	n=	11	n=	140	n=	10	n=	31	n=	47	n=	14	n=	1	n=	10	n=	2	n=	19
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Ethnicity			1																							
Māori	69	14.6	31	16.8	0	۵٥	1	91	20	14.3	1	10.0	3	9.7	3	64	1	7.1	0	۵٥	2	20	0	0	7	36.8
Pacific	58	12.3	20	10.9	0	0.0	0	0.0	23	16.4	2	200	7	22.6	1	2.1	1	7.1	0	0.0	1	100	0.0	0	3.0	157
Other Asian	65	13.8	17	92	0	۵٥	2	18.2	21	15.0	2	20.0	9	290	3	6.4	5	35.7	0	۵٥	3	30.0	0	۵٥	3	15.7
MELAA	1	0.2	1	0.5	0	QO	0	۵٥	1	0.7	0	۵٥	0	0.0	0	αo	0	0.0	0	۵٥	0	0	0	0	0	0
Europ ean	277	58.7	116	63.0	3	100.0	8	72.7	74	52.9	4	40.0	12	38.7	40	85.1	7	50.0	1	100.0	4	40.0	2	1000	6	31.5

Proportion of Māori and Pacific wāhine with high grade endometrial cancer decreased Ethnicity unchanged in proportion of all endometrial cancers, but total numbers reduced Change in pattern of early cervical cancers

Has COVID Compromised Care?

- Not if you get to us and don't get COVID
- Effect on Pacific community ?Low grade Endometrial cancer
- Access to primary/secondary care
- Access to imaging and diagnostics
- Reduction in numbers of some cancers
- No evidence of upstaging this year
- National data may hide regional variation

Thanks to the 2021 (and veteran 2020) Gyn Onc COVID Team

