

Paediatric Cancer in the Philippines: The Losing Battle in the War against COVID-19

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Description

COVID-19 has spread rampantly as a worldwide pandemic, precipitating abrupt international and national policies. In the Philippines, there was immediate implementation of community quarantine to control the viral spread and people were generally supportive of all government initiatives. Unfortunately, the overwhelming 'unknowns' of the issues pertaining to the virus has instilled public fear, essentially causing panic, resulting in unsound medical decisions and devastating consequences for children with cancer.

Since parents or guardians are afraid of bringing child with cancer to the hospital because of possible exposure to COVID-19, chemotherapy treatments are disrupted, and off-therapy monitoring is no longer followed. Furthermore, because of late diagnosis of new cancers, children tend to present with more severe disease.

Despite of the havoc that COVID-19 has caused in society, parents and guardians should be encouraged to seek consult for cancer symptoms and adhere to treatment protocols for paediatric cancer since the impact of severe disease, complications, treatment failure, and relapse are detrimental to the condition of the children, even fatal.

The Philippine government and medical community have certainly put a tremendous amount of effort in combatting COVID-19, addressing a broad range of issues, namely testing, contact tracing, and providing medical aid / quarantine facilities. Furthermore, both the government and the medical community is still dealing with the challenges of supply and demand of hospital beds and medical supplies, including mechanical ventilators and personal protective equipment (PPEs), as well as the protection and well-being of healthcare 'frontline' workers. It is also important to note that the economic implications of community quarantine have drawn a considerable amount of attention since many businesses, including hospitals and private clinics, have experienced major financial losses.

Unfortunately, the narrow focus on the 'war' against COVID-19 has placed the battle against paediatric cancer in the shadows. A lot of energy has been spent on the implementation of basic guidelines to limit the spread of the virus (eg social distancing, wearing of face masks, hand hygiene, etc.), but not enough emphasis is being placed on the importance of adhering to paediatric cancer treatment and management.

Parents and guardians are complacent if their child is asymptomatic or is in remission. Even if the child has symptoms that may be related to their disease, parents opt to observe in fear of contracting COVID-19 which they perceive to be an even 'more deadly' illness. This is in contrast to pre-pandemic times when parents and guardians are anxious about cancer-related symptoms and promptly seek consult.

Parents and guardians even decide to delay consult for those children who present with new tumours, to the extent that children come in with disfiguring appearance. As an act of desperation, many resort to herbal supplements or alternative medication as a substitution to chemotherapy. Moreover, deferrals of off-therapy follow-up care have become a problem; children are not being monitored closely for long-term effects or relapse. Another issue linked to the lack of initiative to continue pediatric cancer care is delayed research data collection and reporting.

To avoid these serious consequences of the pandemic, social media should be used to disseminate information on pediatric cancer and urge parents and guardians to weight the risk versus benefit of delaying consult and treatment. The decades of progress in the advancement of treatment and management of pediatric cancers would be wasted during these months of the pandemic if the government and medical community does not take action and give importance on this issue. Hospitals could also develop a system to contact and educate those patients who have been lost to follow-up, by resorting to either telephone calls or social media options such as Viber, Facebook, or Messenger, or perhaps even have a door-to-door contact system.

The Philippine government and medical community should have emphatically emphasized to the public via a social media campaign, that adherence to treatment protocols to combat pediatric cancer is still a priority in the midst of the pandemic. Since telemedicine was not readily available during the early weeks of the pandemic, more effort should have been done to reach out to the public and better educate parents and guardians on how to cope and deal with pediatric cancer. The battle against pediatric cancer will remain whether or not we win the war against COVID-19. Let us not abandon our fight for the children who are considered highly vulnerable, both in pre-pandemic and pandemic times.

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Received July 25, 2020; Accepted July 29, 2020; Published July 31, 2020

Citation: Dujua ACC (2020) Paediatric Cancer in the Philippines: The Losing Battle in the War against COVID-19. J Palliat Care Med 10: 371.

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