Dear Colleagues:

Thyroid Cancer: Radioactive Iodine Treatment during COVID19 pandemic

In these unprecedented times we have been considering how to optimally manage our patients with differentiated thyroid cancer. We have put together the following guidance taking in to account both the risk patients face from cancer and from infection.

We recommend that all radioactive iodine treatments be halted during the COVID 19 pandemic based on the following rationale:

Low risk patients: (adjuvant setting)

- A delay in RAI is not expected to alter prognosis from DTC.
- This cohort of patients are expected to be cured and should they fall ill with severe COVID19 infection whilst radioactive their care and subsequent prognosis may be compromised.
- Once the COVID19 situation resolves, some of the patients who have had their treatment delayed may be suitable for 1.1GBq as an outpatient, thereby taking some demand off inpatient isotope facilities.

High risk patients (metastatic disease):

- The risk/benefit scenario in these clinical situations are harder to determine.
- This cohort are likely to have longer radiation protection restrictions following RAI and are also at higher risk for COVID19 infection. If a patient in this situation was to fall ill with COVID19 whilst radioactive their immediate care may be detrimentally affected.

We must also take in to account the service delivery aspects of patient care.

Resources (Staffing, room availability, supply chain):

- Most centres have limited numbers of clinical scientists able to administer, monitor, scan and calculate radiation protection restrictions. With likely imminent reduced staff levels it may not be safe to administer radioactive substances.
- With widespread travel restrictions and the potential for staff shortages affecting drug manufacture, it is uncertain if our RAI supply chain will be affected.

The recommendations have taken in to account discussions amongst UK thyroid cancer clinicians as well as general COVID19 oncological advice at local and national levels.

Recommendations will be kept under review.

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