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Balancing Risks and Outcomes: Determining the Optimal Timing for Breast Cancer Surgery after COVID-19 Infection

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DESCRIPTION

The optimal timing of breast cancer surgery following a COVID-19 infection has become an important clinical consideration as both diseases present significant challenges in terms of patient care and outcomes. The COVID-19 pandemic has disrupted many aspects of healthcare, including the diagnosis, management, and treatment of cancer. Breast cancer patients who have contracted COVID-19, particularly during or after their diagnosis, face a complex decision regarding the timing of surgical intervention. This decision requires careful consideration of multiple factors, including the patient's recovery from COVID-19, the risk of complications, and the potential impact on cancer prognosis. COVID-19 primarily affects the respiratory system but can also lead to widespread organ dysfunction and inflammatory responses that could complicate the course of surgery and recovery. In the context of breast cancer surgery, patients who have recently experienced COVID-19 may have a higher risk of perioperative complications. Studies have shown that COVID-19 infection can exacerbate pre-existing conditions such as cardiovascular disease, diabetes, and hypertension, all of which are common in cancer patients. Additionally, COVID-19 can lead to long-lasting symptoms like fatigue, breathlessness, and immune suppression, which may hinder the body's ability to heal effectively after surgery. A critical factor in determining the optimal timing for surgery is the degree of recovery from COVID-19. Most patients who contract COVID-19 experience mild symptoms or are asymptomatic and recover within a few weeks, but some develop more severe complications, such as pneumonia, myocarditis, or blood clotting disorders, which may delay recovery and increase surgical risks. Guidelines generally recommend that elective surgeries, including breast cancer surgery, be postponed for a period following a positive COVID-19 diagnosis, particularly in patients who experience moderate to severe illness. For patients who have had mild symptoms and are fully recovered, surgery might be scheduled once the patient has been symptom-free for at least 2 to 4 weeks, depending on individual health assessments However, there is an important caveat when it comes to the timing of breast cancer surgery: the potential consequences of delaying surgery in breast cancer patients. Breast cancer is a time-sensitive disease, and delays in surgery can result in progression to more advanced stages, which may affect overall prognosis. The tumor's stage at diagnosis, as well as the tumor biology (e.g., hormone receptor status and HER2 status), are critical determinants in the risk of progression. For early-stage breast cancer patients, a delay of a few weeks or months may not significantly affect long-term outcomes, but for more advanced cases, such delays could potentially lead to worse outcomes, including a higher likelihood of metastasis. Thus, the decision on the optimal timing for surgery should be personalized, balancing the risk of disease progression with the potential risks of surgical complications due to COVID-19. In cases where surgery is urgently needed, such as for patients with locally advanced breast cancer, delaying surgery due to COVID-19 recovery may not be an option. In these situations, careful preoperative screening and multidisciplinary discussions involving oncologists, anesthesiologists, and surgeons are critical to minimizing risks and ensuring that the patient is in the best possible condition to undergo surgery. Moreover, the timing of surgery may also be influenced by the local healthcare situation.

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CONFLICT OF INTEREST

The author declares there is no conflict of interest in publishing this article.

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