

NCCP advice for medical professionals on the management of Thyroid Cancer and Overactive Thyroid Disease in response to the current novel coronavirus (COVID-19) pandemic

This document relates to patients who do not have COVID-19 or are not suspected of having COVID-19.

Current events surrounding the COVID 19 pandemic are challenging and all public health bodies are placing the safety of patients, staff and communities first in all decisions.

This is an evolving situation. This advice is based on current information, it is additional to the advice of the NPHET, the HSE and the DoH, and will be updated as necessary.

The NCCP acknowledges that each hospital is working under individual constraints, including staff and infrastructure, and as a result will implement this advice based on their own unique circumstances.

The purpose of this advice is to maximise the safety of patients and make the best use of HSE resources, while protecting staff from infection. It will also enable services to match the capacity for cancer care to patient needs if services become limited due to the COVID-19 pandemic.

Any clinician seeking to apply or consult these documents is expected to use independent medical judgement in the context of individual clinical circumstances to determine any patient's care or treatment.

1 NPHET, HSE and DoH advice

Hospitals will operate under the overarching advice of the National Public Health Emergency Team (NPHET), the HSE and the DoH. Information is available at:

- HSE HPSC - <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/>
- HSE Coronavirus (COVID-19) - <https://www2.hse.ie/conditions/coronavirus/coronavirus.html>
- DoH Coronavirus (COVID-19) - <https://www.gov.ie/en/campaigns/c36c85-covid-19-coronavirus/>
- Ireland's National Action Plan in response to COVID-19 (Coronavirus) - <https://www.gov.ie/en/campaigns/c36c85-covid-19-coronavirus/>

2 Purpose

The purpose of this guidance document is to provide guidance to medical professionals on the management of patients with 1) Thyroid cancer (well differentiated, papillary carcinoma) and 2) Patients with overactive thyroid disease.

Both these conditions are treated with RAI [radioiodine (I-131)].

3 Patients with thyroid cancer (well differentiated, papillary carcinoma)

3.1 Prior to treatment

In preparation for RAI treatment usually a number of visits to the hospital is required: for thyroid function tests, unstimulated and stimulated thyroglobulin along with recombinant TSH administration prior to RAI.

3.2 RAI treatment

Admission for RAI involves an in-patient admission to an isolation room in a designated hospital with medical physics support. This admission is usually for 2-3 nights (depending on the dose administered). Prior to discharge the patient is required to attend the nuclear medicine department for thyroid nuclear medicine scan and subsequently observe radiation protection measures and isolate for 2 to 3 weeks.

3.3 Recommendations for patients with thyroid cancer (well differentiated, papillary carcinoma) during the COVID-19 pandemic

Therefore given the current COVID-19 pandemic the following is recommended:

- RAI can be deferred until such time that an admission to hospital for isolation is considered safe (Royal College of Radiologists, 2020)
- Defer RAI for three months (up to 6 months after surgery depending on clinical situation)
- It is encouraged that the decision to defer treatment be communicated to thyroid surgeon and/or endocrinologist to ensure that TSH suppression therapy is ongoing while waiting RAI.
- Good record keeping is encouraged detailing decisions taken and logic/reasoning
- For patients with metastatic disease this should be reviewed on a case by case basis

4 Recommendations for patients with overactive thyroid disease

Therefore given the current COVID-19 pandemic the following is recommended:

- RAI for overactive thyroid disease is usually non urgent treatment which can be deferred until after the surge and acute phase of COVID-19 is over.
- New patient consults can be carried out by telemedicine if available or deferred

- Note should be made for reason for deferral (ie due to COVID-19 pandemic)

5 References

- Royal College of Radiologist (2020) Thyroid cancer: radioactive iodine treatment during COVID-19 pandemic (Accessed 06/04/2020)

Version:	1	Department:	NCCP Radiation Oncology Working Group
Update date:	22/04/2020	Code:	RO_COVID19_6
Guidance Development Group:	Dr Aileen Flavin - Consultant Radiation Oncologist, Dr Cormac Small - Consultant Radiation Oncologist, Dr Carol McGibney - Consultant Radiation Oncologist, Dr Clare Faul - Consultant Radiation Oncologist, Dr Eve O'Toole - Guideline Lead, NCCP, Ms Ruth Ryan - Programme Manager, NCCP, Ms Louise Murphy - Research Officer, NCCP		