

6. Bölüm

ULUSLARARASI ONKOLOJİ KLAVUZLARINA COVID-19 PANDEMİSİ YANSIMALARI

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GİRİŞ

Son 2 yıldır hayatımızın orta yerine yerleşen COVID-19 enfeksiyonu, gerek normal yaşantımızı gerekse de kanser hastalarının takip ve tedavisini doğrudan etkilemiştir. Bu süreçte, kanserden ölme riskinin ölümcül COVID-19 hastalığı riskinden daha yüksek olması hasta ile tartışılması gereken bir gerçektir. Hastaların takip ve tedavilerinde her zaman kar-zarar hesabı yapılması temel prensip olmalıdır. Her tümör bölgesiyle ilgili öneriler ilgili bölümlerde değinileceğinden dolayı, bana ayrılan bu bölümde kanser hastalarına klavuzlarındaki öneriler genel hatlarıyla özetlenecektir. Bu konuda genel anlamda ESMO (Avrupa Onkoloji Cemiyeti) klavuz önerileri dikkate alınmıştır.(1)

Dijital Hekimlik- Telesağlık

Onkolojide telesağlık ve dijital sağlık, birinci basamak triaj ve müdahaleleri için gerçek zamanlı video konsültasyonları için iyi bir araç olarak olabilir. Ayrıca sağlıklı yaşam müdahaleleri için ve sağlık eğitimi, fiziksel aktivite, diyet izleme, sağlık risk değerlendirmesi, ilaç uyumu ve bilişsel uygunluk gibi alanlarda iyi bir araç olabilir.

Ancak, kanserle ilgili temel bilgilerin (örn. yeni kanser teşhisi/tedavi planı, hastalık nüksü/ilerlemesi ve başka kanser tedavisi kararı verilmemesi) sağlanmasını kapsayan yüz yüze danışmalar, uzaktan danışmalardan (video veya tele-

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kanseri gibi hedeflenebilir, onkogen bağımlı tümörleri olan hastalarda TKI'ler kesilmemelidir (15).

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