

COVID-19: Guidance for People being Treated for Melanoma



Melanoma Focus operates a dedicated Helpline run by Clinical Nurse Specialists who are here to support you and discuss your concerns. To contact them please go to:

<https://melanomafocus.com/support/melanoma-helpline/>

or use our confidential freephone number: 0808 801 0777

Note: these FAQs have been suggested by patients and nurses but they will not cover every situation. If in doubt, you should always refer to your Clinical Nurse Specialist or other member of the treatment team for clarification. You may also wish to discuss matters with our Helpline nurses (see box above).

1. What happens if I'm having treatment and I get virus symptoms?

One of the more frequent side-effects of melanoma therapies can be fever, which is also a common symptom of the COVID-19 infection.

If you develop symptoms of COVID-19 – for example fever, cough or other flu-like symptoms – you should contact your treatment team or the acute oncology service urgently for advice.

2. I'm worried that my treatment might be delayed

Some people who are due to have hospital treatment – both surgery and medical therapy – for melanoma might find their treatment is delayed. This could be to help minimise their risk of contracting a COVID-19 infection or because the NHS is trying to cope with the unprecedented demands of the pandemic, which are greater in some areas of the country than in others.

If you're concerned about a delay to your treatment, it's best to speak to the team who are treating you. Your Doctors will decide whether to delay your treatment, helped by advice from their colleagues in all relevant disciplines. They will discuss these decisions with you in full.

3. What should I do if I am being seen less frequently in clinic?

As always, it is important to keep self-examination going and report any changes to your treatment team. Please continue to be vigilant for any changes in your skin or around your operation site, or any persistent worrying symptoms. If in doubt, please contact your treatment team or the Melanoma Focus Helpline (details at the top of this guidance).

4. I'm currently having immunotherapy. Am I more at risk from COVID-19?

Having certain treatments for melanoma – or the therapies given to manage side-effects from immunotherapy – might mean you're more at risk of becoming seriously ill if you do become infected by COVID-19.

Because of this, it's best to contact your hospital team to check your individual risk and any specific treatment plans that might be relevant for you.

5. I'm worried that during the COVID-19 pandemic I won't be offered the same melanoma treatment and it might not be as good as usual

Doctors have been asked to draw up plans to try to minimise the impact on patients and the healthcare system during this pandemic. This includes the services for melanoma. It might mean prioritising certain aspects of treatment over others. If this affects you then the team treating you will discuss this with you and the reasons for the decision will be recorded.

6. I've had lymph node removal. Does this affect my immunity?

It's common for lymph nodes to be removed as part of surgery for melanoma. Having your lymph nodes removed or biopsied does not affect your body's ability to fight infections such as the COVID-19 coronavirus.

Lymph node surgery increases the risk of a condition called lymphoedema (a swelling of parts of the body, generally the arms or legs). But neither lymph node removal nor lymphoedema will affect the overall ability of your immune system to fight a viral infection such as COVID-19.

7. I'm taking targeted therapy. Am I more at risk from COVID-19?

It is likely that taking targeted therapy, such as the combinations dabrafenib/trametinib and encorafenib/binimetinib, will not affect your immunity. However it is not yet known if such treatments are likely to affect the severity of a COVID-19 infection. One of the side effects of this treatment is a fever, which may be confusing as this is also a symptom of COVID-19. Contact your treatment team if you have a fever and they will be able to advise you.

8. I'm worried that my scans or follow-up appointments might be cancelled

Some people who are having follow-up appointments might find that these are now being done by telephone and that scans are being delayed. This could be to help minimise their risk of contracting a COVID-19 infection and to allow the hospital to manage its patient services.

For the vast majority of melanoma patients, delays in scans or follow-up will have little impact on their care. Many hospitals are finding that telephone or video consultations are a very good substitute during these difficult times.

If you have a fixed date for a scan or clinic appointment that has not yet been cancelled or postponed, you should contact your treatment team to confirm whether the appointment is still going ahead.

9. I have a suspicious mole which I would normally want to show my doctor. Should I still do this, with the NHS under so much pressure?

Yes, you should. It is important that things like moles (or 'lesions') you are worried about should be discussed with a doctor, especially if they are changing in some way or have been there for several weeks. The same goes for any potentially serious problem you are concerned about. It may turn out not to be serious but you should still get the reassurance of a consultation with your doctor.

Where skin cancer is concerned – as with all cancers – it is vital that the first signs are picked up as early as possible. The Coronavirus pandemic doesn't alter this advice, though it may be more difficult to arrange an appointment: all the more reason to start the process as soon as possible.

As a first step you may be asked to describe the lesion over the phone or perhaps provide a photograph, if you are able to do so.

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