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MDT Experience in Argentina in Nets in Times of the Covid19 Pandemic

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BACKGROUND: The ongoing COVID-19 pandemic caused 4,470,374 total cases in Argentina, and 94,304 deaths have been reported from March 2020 to June 2021. To maintain high standards of care, the ARGENTUM Group decided to strengthen decision-making through multidisciplinary virtual workshops including patients with NETs treated in different centers in Argentina.

METHODS: A Retrospective study based on multicenter series experience was conducted.

RESULTS: From March 2020 to May 2021, 12 MDT virtual meetings were conducted , including 47 patients , and 57 presentations. Total participants

median: 23(DS: +/-7.9) Specialties: Oncology: 8 (DS: +/-1.3), Gastroenterology: 3 (DS: +/-1.5), Nuclear medicine: 3(DS: +/- 1.2) Endocrinology: 2 (DS: +/-2.8), Surgery: 2 (DS: +/- 1.4), Pathology: 2 (DS: +/-0.7), Radiology: 2(DS: +/- 0.6), others: 3 (DS +/-0.8) Centers: Autonomous City of Buenos Aires: 41 patients, Province of Buenos Aires: 4. Others provinces: 2. Median Age: 50 (DS: +/- 14.53), 28 Female (60%). COVID19 Infection: 5 patients (10%), no deaths by COVID19 were recorded. Vaccination: First dose: 12, Second: 3. Tumor localization: Pancreas 17(36%), Small bowel 11(23%), Colorectal 6(13%), Gastric 3(6%), Appendix 4(9%), Others: 5(10%), unknown 1(2%). Histology: NET 34(72%) NEC 6(13%) MiNEM 3(6%), others: 2(4%) unknown 2(4%). Objective presentations: Medical treatment: 28 (43%) Surgery: 8(12%) Second opinion: 7(11%) Others: 14(23%). Multidisciplinary decisions: Analogous 9(15%), Chemotherapy 9(15%), ITK 3(5%), PRRT 4(6.6%), Evaluation of Images 13(21.6%), Biopsy and/or mutations testing 6(10%), Follow-up 7(11.6%), Surgery 4(6.6%), Regional treatment 3(5%), Radiotherapy 1(1.6%), Evaluation for transplant 1(1.6%).

CONCLUSION: Given the delay in both diagnosis and treatment of malignancies due to the transportation and travelling restrictions established during the pandemic, the ATENET (Multidisciplinary Athenaeum of NET) meetings were speedily adapted to the virtual modality. This proved to be a safe, viable and effective option, removing barriers that facilitate an interdisciplinary vision useful to make complex decisions in patients with NETs.

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