

## Headlines from COVID-19 BNMS Survey (part I)

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We are incredibly thankful to 138 BNMS members who responded to the COVID BNMS survey part I, covering the period from 23<sup>rd</sup> March to mid-May 2020. Nearly all participants (98 %) reported a decline of nuclear medicine diagnostic procedures in this period. This is a quick summary of the major points we thought you as members should be aware of. A full scientific paper detailing the results of the survey are in preparation.

Overall, 85% worked with reduced workforce during the pandemic. 46% of staff have been

- deployed to different roles within their own department or Radiology (e.g. from therapy service to diagnostic, from conventional NM to PET -CT centre or from NM to Radiology such as CT and general X ray)
- re-deployed within their Trusts e.g. to medical and surgical wards, A&E, theatres, ITU, Field Hospitals, Fit testing and PPE marshalling, HR, critical care, logistics, mortuary work, administration, pharmacy manufacturing, phlebotomy
- deployed to Nightingale Hospital.

On average the reduction in total workload was 65% (range from 0-100%) with large regional variations and variations during the different stages of pandemic. During the peak of the epidemic, there was a significant decline in diagnostic conventional nuclear medicine procedures on average by 66% and in PET-CT on average by 32%.

The most affected area of NM in conventional diagnostic NM was thyroid, parathyroid and renal imaging, they were all reduced by more than 75%. Oncological PET-CT and some therapies such as SIRT and Ra-223 were the least affected.

Interestingly, a small increase in service provision by as much as 10% was reported in a few centres, this was reported in a variety of scans including as expected lung perfusion studies.

Lung imaging has however, undergone the most significant changes and variations in protocols. This prompted the BNMS Council to further review Lung Imaging guidelines in relation to the COVID situation.

81% of participants did not experience any problem with radiopharmaceutical supply, 14% had occasional problems and 5% had significant disruption to radiopharmaceutical supply.

There is an increasing concern about the current backlog due to postponement of routine NM procedures. Elective work is significant and also variable with an approximate expected time required to clear the backlog being as little as 1 month to as long as 12 months.

As has been reported there were issues with the provision of appropriate PPE. Just 65% of participating members had PPE readily available all the time. Of concern 8% of our members had little or no access to appropriate PPE during the pandemic.

We are pleased 71% of members have found the BNMS guidelines helpful with development of new SOP and pathways.