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Background: The COVID-19 pandemic has led to substantial deviations in all sections of cancer care, including temporarily reduced capacities for tumor surgery or inpatient treatment as well. As preventive examinations and follow-up care. We present data on cross-sectoral care, focussing on patients with colorectal cancer in the German health care system that defines three major, sectors of care (inpatient, outpatient and rehabilitation treatment).

Methods: The CancerCOVID consortium did a selective literature review and analyzed international guidelines on allocation of resources in cancer care. For empirical analyses, to address possible shifts among sectors of and deviations in care, data from AOK Plus, the main health insurance in Saxony, AIO cancer centers, the institute of Pathology of Bochum and the ColoPredict Registry, as well as data from outpatient, provided by the BNHO and Onkotraekt AG were analysed. By this cross-sectoral approach, cancer care structures in Germany were evaluated with regard to their flexibility and resilience during times of scarce resources.

Results: Substantial alterations in cancer care were detected, predominantly concerning preventive and follow-up examinations. Patients already diagnosed with cancer could be provided with standard of care therapies on regular basis during the first and second wave through the transsectoral possibility of cancer care in the German health care system Guidelines based on a broad multidisciplinary consensus were designed and approved, aiming for ethically and empirically based support in medical decision making when resources are scarce.

Conclusions: We display cross-sectoral data of cancer care in Germany, focussing on resilience and flexibility of these structures in the pandemic context. Detailed data about cross-sectoral colorectal cancer care will be presented in autumn.

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