



COVID-19 Infection after Major Head and Neck Oncologic Surgery

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Besides the possibility of post-admission nosocomial transmissions, we have to maintain a high index of suspicion even when the reverse transcriptase-polymerase chain reaction (RT-PCR) for severe acute respiratory syndrome-related coronavirus 2 is negative among patients admitted for major surgery as false negativity to the tune of 30 to 40% is still possible.¹ A gentleman aged 66 years with cancer of the left buccal mucosa (yT4aN3b M0), post-neoadjuvant chemotherapy with two courses of methotrexate, was admitted on May 5, 2021 for radical surgery after negative coronavirus disease 2019 (COVID-19) tests, that is, the rapid antigen test (RAT) and RT-PCR. However, he had a stormy postoperative course leading to death, the root cause of which was tracked down to a plausible nosocomial transmission of COVID-19 infection or initial false-negative COVID-19 tests despite all our relentless efforts to prevent such an event. His repeat COVID-19 test with RAT turned positive on the 7th postoperative day, and the high-resolution computed tomogram (HRCT) scan showed features of COVID-19 infested lungs.

Neoadjuvant chemotherapy can help circumvent disease progression during the enhanced (COVID-19 pandemic related) waiting period for advanced head and neck cancer surgery.² HRCT of the chest can be used to diagnose a COVID-19 infection that has evaded COVID-19 tests and to detect unresolved lung sequelae in post-COVID-19 patients.^{1,3} During the second wave of the pandemic, we looked at the D-dimer values for all our post-COVID-19 surgical patients and lung HRCT for patients who needed hospitalizations during their COVID-19 infection or afterward for post-COVID-19

sequelae. Early stages would show pure ground-glass opacities (GGO), progressive stages multiple GGOs, consolidations, and crazy-paving patterns, and advanced-stage diffuse exudative lesions and lung whiteout.⁴ A radiographic scoring system practiced by COVID-19 care centers would facilitate the decision-making process.^{1,4}

Conflict of Interest

None.

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