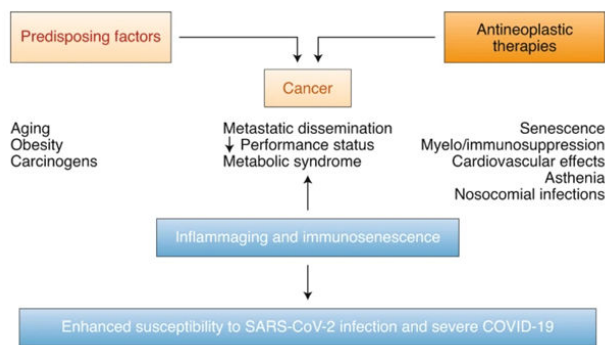








prompt recognizable release of chemokins, cytokines and/alarmins (Figure 1) [13].



**Figure 1: Intertwined relationships between cancers and its comorbidities or therapies in relation to COVID-19 susceptibility.**

### Preventive measures

In one of the studies of 2020 it was found that “cardiovascular toxicities of cytotoxic agent counter balances the tumor control attained by oncological treatments, often this also brings hindrance in an effective therapy in patients or undermines the overall treatment and survival of the patients [14]. Bone marrow progenitors are stimulated by cytotoxic drugs administration through ablative or non-myeloablative dosages, this also stimulates both mature and immature cells.

Theoretically, the side effects of cancer treatment complicate the prognostication of COVID-19. There is no proper research and evidence which suggests that COVID-19 and cancer can be treated parallel and medicines of both the disease will work simultaneously. The researchers are still trying to figure out a way, until then for a cancer patient prevention is the only best option available. The better cure is better and in time diagnosis of the disease [15].

### CONCLUSION

The COVID-19 is a disease which causes congestion in lungs and seizes the air passages to various parts of the body and causes death too quickly. The cancer treatment and side effects of it doesn't let the immune of a person grow and reduces the body's immune drastically making it vulnerable to many other diseases. People with comorbidity are more prone to catch COVID-19 and cancer is one of the most deadly diseases making its patients most vulnerable to COVID-19. The research suggests that the association between cancer, the factors which causes it and the other associated diseases makes the patients more vulnerable to COVID-19. The vulnerability of the cancer patients towards the COVID-19 depend on the types of cancer they have got.

The research and trials of vaccination have also been biased towards the cancer patients; they were not included in any of the trials. No governments in any country took any significant initiative towards the

vaccination or treatment of cancer patients against COVID-19 may be because they have had this idea in their head that anyway they are dying and it's better to focus on a healthy citizen rather than a person who might be a liability and won't prove to be beneficial. The deliberate exclusion either in fear or anxiety is not good for a large number of cancer patients.

There is need for more and more research and investment in studying what would be the way for a cancer patient if caught COVID-19. A better and profound research and development accompanied with technology is the only hope for the cancer patients. As a saying goes 'prevention is better than cure' is what seems to be the only hope for time being for a cancer patient to protect himself/herself from COVID-19.

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