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1756P Cancer patients infected with COVID-19 at La Princesa Hospital: Real-world data study

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Background: The COVID-19 pandemic has meant a change in health care worldwide, and cancer patients are a particularly vulnerable population with their own clinical and therapeutic characteristics. Due to the lack of new evidence on what the best approach should be in the context of the current pandemic, it is essential to go further in the knowledge of the characteristics of this infection in cancer patients and its outcomes.

Methods: From March 1 to April 30, 2020, we collected and analysed data of 1202 cancer patients who were under active treatment or follow-up at the Medical Oncology Department of La Princesa Hospital and had a COVID-19 PCR test due to clinical symptoms (216 patients tested).

Results: We detected a total of 50 patients with positive PCR (a 4.1% of the total number of patients in the period analysed). The mean age at diagnosis of the infection was 69, 52% were women and 16% smokers. The most frequent diagnoses were breast cancer (28%), colon cancer (26%), and lung cancer (14%) (Figure 1). 60% were localized stages, 36% were undergoing chemotherapy and 8% with immunotherapy. Fourteen of the 50 infected patients died (28%). Thirty-seven patients (74%) required hospitalization, with a mean age of 73. Twenty patients received high-dose corticosteroids and four Tocilizumab. One patient was admitted to the ICU. Hospital mortality was 35.1%, being 57% male and with a mean age of 80. Three patients presented grade 3 neutropenia at diagnosis, none of whom died. Two hospitalized patients were diagnosed of acute pulmonary thromboembolism regarding to coronavirus infection.

Conclusions: The aggressiveness of COVID-19 infection in cancer patients is high. In our center we had an incidence of 4.1%, an admission rate of 74%, an overall mortality rate of 28%, and a hospital mortality rate of 35%. These figures are higher than those described in non-oncological population. Neutropenia did not seem to be a poor prognostic factor among infected patients in our series.

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1757P Training and information during COVID-19 pandemic: The masterpiece in young oncologists

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Background: COVID-19 pandemic was a health emergency that required a rapid response by the Italian National Health System. Healthcare professionals needed to be properly trained and informed about their patients' procedures and proper management. During an emergency, the information must be exhaustive, clear and timely to allow correct diagnostic and therapeutic continuity. It is also important that all health workers are promptly and homogeneously trained to guarantee the best treatment path even during pandemic. Our survey aimed to investigate the level of information and training of health workers in oncology during the pandemic and, in particular, the difference in perception between under and over 35 years operators.

Methods: An on-line multiple choices survey was submitted to oncology health workers during the pandemic to investigate individual perception of resources, information and staff training management by hospital centers. No open questions were included.

Results: A total of 383 health workers replied to the survey (116 under 35 years versus 267 over 35 years). In the under 35s group a total of 65% declared they had been timely and sufficiently informed to understand the extent of the problem

compared to 50% of over 35 ($p=0.007$). About 80% of young professionals were adequately informed and two thirds (63%) was formed about procedures/recommendations to be followed during the pandemic. But in professionals over 35 only 56% declared to have the right information and over 65% did not feel adequately trained ($p= <0.01$).

Furthermore, 44% of over 35 felt not sufficiently prepared for the management of the cancer patient during an epidemic compared to only 28% of the under 35 ($p=0.015$).

Conclusions: The survey showed a different perception of information and training of healthcare professionals based on the age group. This could be determined by a different degree of task and responsibility but also by the greater and faster readiness of the younger operators to acquire new information and to draw a renewed ability to face an emergency by reorganizing themselves quickly and actively.

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1758P Practical issues faced by cancer patients during the COVID-19 pandemic in India

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Background: India imposed the world's largest lockdown for over 1.3 billion people in view of the COVID pandemic and this led to a tremendous impact on the treatment of cancer patients. This was due to two main reasons. The first reason was due to restrictions on elective procedures to preserve beds for possible COVID cases and the second was a restriction on private and public transport. Given that the majority of cancer centres are located in bigger towns and cities, patients found it difficult to reach the centres. Onco.com provides telehealth services for cancer patients and we analysed the practical problems faced by the patients during this period.

Methods: We analysed 482 oncology teleconsultation requests placed by patients from different parts of India and recorded issues faced by patients under different categories- stage of cancer, city of residence and preferences around place of treatment (same city or metro city). We also recorded known reasons (if any) for any delay in treatment. All records analysed were reidentified for the purpose of this study.

Results: Of the 482 telehealth requests, we recorded the following findings: with 311 (64%) patients facing the issue of access to a cancer care facility, this was the commonest complaint of cancer patients since transport services were blocked due to the strict lockdown. 92 (19%) patients reported closure or unavailability of the local cancer treatment center. 284 (59%) patients had stage 3 or advanced disease. 58% of patients lived in tier 2 or 3 cities and wanted to travel to bigger cities for treatment but were unable to do so during this period. Doctors advised a postponement of further treatment for 15% (71) of patients owing to a high risk of complications on account of advanced disease or comorbidities.

Conclusions: Most of the problems reported by patients were delays in treatment due to logistical reasons owing to strict lockdown conditions across the country. The second most common problem was a concern for high risk of complications for patients with advanced disease, especially in smaller towns. Most of the patients residing in metro cities continued their treatments with precautions. An analysis of the impact of treatment delays on survival outcomes is necessary to understand the real impact of the COVID crisis on cancer patients.

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