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both patient factors, such as age and frailty, and tumour factors, such as staging information, was used. A prototype web interface to view these data was built.

Results: We present a prototype web-based tool to predict the benefits of adjuvant chemotherapy, with appropriate confidence intervals, based on a large dataset of real-world data.

Conclusions: Quantitative, user-friendly tools such as PREDICT are invaluable for empowering patients to make informed decisions regarding adjuvant treatment. Here we use real-world data at unprecedented scale to provide a proof-of-concept tool for colorectal cancer. Following further validation, this could be transformative for adjuvant treatment decision making.

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332P Impact of the COVID-19 pandemic in the early-onset colorectal cancer (EOCRC)

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Background: The COVID19 pandemic has affected the spectrum of cancer care worldwide. EOCRC is defined as diagnosis below the age of 50. Patients (pts) with EOCRC face multiple challenges, while the COVID19 pandemic caused disruptions in cancer diagnosis and care delivery. Our study aims to identify the clinicopathological features (CF) and outcomes of pts with EOCRC in our Centre during the first wave (FW) of the pandemic compared to the same period in 2019 and 2021.

Methods: Consecutive pts with EOCRC visited for the first time at Vall d'Hebron University Hospital in Spain from the 1 March-30 June 2019, 2020 and 2021 were included in the analysis. Data of CF and treatment were collected from medical records. Data were summarized using descriptive statistics. Quantitative and categorical variables were compared using Wilcoxon rank-sum test and Fisher's exact test.

Results: 136 pts with EOCRC were visited for the first time between 2019 and 2021, of which 53% met the inclusion criteria (2019: 19%, 2020: 40%, 2021: 41%). Table summarizes CF and outcomes. Of note, indication of systemic therapy in the adjuvant or metastatic setting was not altered during the FW. No statistical differences (SD) were found when comparing stage at first visit in 2019, 2020 and 2021 (p=0.7). Of 29%, 38% and 40% of pts starting treatment for the first time in our Centre in the given period in 2019, 2020 and 2021 respectively, median (M) days to treatment initiation (TI) was 18.5, 20 and 23. No SD were found when comparing frequency of pts starting treatment (p=0.6) and days to TI (p=0.4) in 2019, 2020 and 2021. 4 (29%), 7 (24%), and 7 (23%) pts were included in clinical trials (CT) in 2019, 2020 and 2021, respectively. No SD were found (p=0.70).

Table: 332P

	2019	2020	2021
Age, M (range)	41 (27-49)	43 (29-49)	44.5 (30-49)
Female, n (%)	7 (50%)	14 (48%)	15 (50%)
Stage at diagnosis (localized/metastatic), %	36%/64%	28%/62%	43%/57%
Stage at visit in our Centre (localized/metastatic), %	22%/78%	11%/89%	17%/83%
Site of primary tumor (right/left/rectum), %	28%/44%/28%	14%/69%/17%	37%/40%/23%
KRAS/NRAS/BRAF/Unknown, %	64%/7%/7%/7%	45%/0%/4%/14%	34%/4%/4%/26%
MSI, n (%)	1, 7%	2, 7%	2, 7%
Patients starting treatment, n (%)	4 (28%)	11 (38%)	12 (40%)
Days to treatment initiation, M (range)	18.5 (17-23)	20 (7-76)	23 (2-69)
Inclusion in clinical trials, n (%)	4 (28%)	7 (24%)	7 (23%)

Conclusions: Our study shows a progressive increase in EOCRC, despite COVID-19 pandemic. Fortunately, no SD in stage of the disease, treatment indication and TI were found during the FW of the pandemic compared to the same period in 2019 and 2021. Rate of inclusion in CT in this subpopulation with unmet clinical needs is relatively high.

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333P Pharmaceutical agents as potential drivers in development of early-onset colorectal cancer (EOCRC)

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Background: The Incidence of EOCRC rose abruptly starting in the mid-1990s. Inherited genes and inflammatory bowel disease (IBD), known risk factors, are not the causes of most EOCRC. We hypothesized that the increasing incidence may be an off-target effect of a medication (meds) not previously widely used in a genetically susceptible subgroup of young adults. To identify potential pharmaceutical agents as risk factors in EOCRC, we employed novel machine learning methods using a large Israeli electronic medical records (EMR) database, with digitized pharmacy records.