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receiving an oral treatment whereas only 33.5% would agree if the treatment was endovenous. In general, younger patients (<50 years old) feel more comfortable with virtual visits than older ones (>70 y) (77.4% vs 62%, p=0.07). Only 20% of patients older than 50 believe that they can handle new technologies as opposed to 58.5% of younger ones (p=0.001). 60.4% of the younger patients would like to have different technological tools to contact their oncologist whereas most patients (47.6%) older than 70 prefer only phone calls (p=0.001). Regardless of the type of visit (treatment or follow-up) patients felt comfortable with virtual attendance (58.7% and 65.6% respectively, p=0.2).

Conclusions: As a whole, patients surveyed believed that telehealth could have a role following the COVID-19 pandemic. However, telemedicine is not applicable in all cases. Visits to older patients, to inform about radiological results and to patients recieving treatment should be assessed case by case.

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1642P Improve the conditions of lockdown may decrease anxiety among cancer patients during the COVID-19 pandemic

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Background: The COVID-19 pandemic is a highly traumatic event that may lead to a greater risk of developing psychological disorders, especially in cancer patients who are more likely to be infected with the virus and to develop complications. The objective of this study was to measure anxiety levels among cancer patient during COVID-19 pandemic and the associated factors including patients' conditions of lockdown.

Methods: A cross-sectional study was conducted among adult cancer patients (hematological and solid tumors) receiving outpatient treatment or during follow-up in a French Comprehensive Cancer Centre. A postal self-administered questionnaire was sent to 4000 patients in June 2020, including Anxiety (Stait Trait), Fear of a cancer recurrence (FCR) as well as questions relative to socio-demographics, management of cancer care during the pandemic and the conditions of lockdown.

Results: A total of 1097 patients completed the questionnaire (63.2% female; mean age 64.7 years ±12.3 years, 24.3% haematological cancers). Mean IES-R score was 15.7 ([0-81]) and 14.7% of patients had moderate or severe post-traumatic stress (score ≥33). Mean anxiety score was 39.0 (SD=13.6, range: [20-80]) with 30.5% of patients having anxiety symptoms. In the multivariate analysis we found that anxiety level was significantly increased for younger patients (OR=1.69, 95%IC [1.01-2.82]), female (OR=1.65, 95%IC [1.05-2.59]), patients with a high FCR score (OR=4.90, 95%IC [2.84-8.44]), patients unsatisfied with the current management of their cancer (OR=2.4, 95%IC [1.58-3.66]) and patients afraid of coming to hospital for fear of COVID (OR=2.10, 95%IC [1.32-3.35]). Protective factors against anxiety were staying busy during the lockdown period (OR=0.46, 95%IC [0.30-0.72]) and seeing the positive aspects of lockdown (OR=0.43, 95%IC [0.28-0.66]).

Conclusions: These results contribute to a better understanding of the psychological consequences of COVID-19 pandemic in the context of cancer and highlight the need to better support patients at high risk of developing high anxiety levels. Conditions of lockdown are important to contain anxiety among cancer patients.

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1643P Knowledge and attitude of cancer patients towards COVID-19 pandemic: A study from Pakistan

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Background: Pandemic spread, rapid transmissibility and currently incurable status has made COVID-19 a major concern of today. Old age and weak immunity make cancer patients highly susceptible to get infected.

Methods: A questionnaire-based study was conducted to determine knowledge of cancer patients about COVID-19 and resulting response in terms of preventive measures, delays in scheduled cancer management and impact of delay on cancer. Data was analyzed using SPSS version.23. Descriptive variables were reported as means and frequencies. Intergroup analysis was done using Chi square test with p<0.05 taken as significant.

Results: Of 269 enrolled patients, the majority had advanced/metastatic disease (82.4%) and were being treated on an outpatient basis (71.6%). Almost all (99.6%) were aware of COVID, electronic/print being the most common source of information (62.7%). Though having different views, 81.5% took it as a natural calamity. 71.3% considered themselves among the highrisk population. During first and second wave, 22.4% had delayed their investigations while treatment interruptions were seen in 34.7% patients, with average duration of delay being 55±27 days and traveling difficulties due to lockdown commonest reason of delay (54.8%). During this period 62.4% either noted worsening of symptoms or new symptoms. Despite all the chaos, 89.9% selected for treatment continuation if provided with a chance and appropriate facilities. Correlation of delay in therapy with high level of education (p=0.013) and perception about COVID-19 as a natural calamity (p=0.041) was found to be statistically significant.

Table: 1643P Knowledge of cancer patients towards COVID-19

	Number	%age
Source of Information:		
Electronic/print media	168	62.7
Social media	29	10.8
Relatives/friends	66	24.6
Health care worker	4	1.5
View about COVID-19		
Natural calamity	212	81.5
Plot by government	12	4.6
Man-made virus	17	6.5
It has no existence	16	6.2
Is it a threat to life?		
Major threat	123	45.9
Mild threat	86	32.1
No threat at all	20	7.5
Mode of transmission		
Via droplets	153	57.1
Air borne transmission	21	7.8
Person to person	68	25.4
Via contaminated food	12	4.5
COVID case in friends/relatives		
Yes	69	25.7
No	200	74.3
Death due to COVID in friends/family		
Yes	16	6
No	253	94.05