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P083**Clinical progression of SARS-CoV-2 infection in people with cystic fibrosis: a global observational study**

E. McClenaghan¹, R. Cosgriff¹, K. Brownlee¹, S. Ahern², P.-R. Burgel³, C.A. Byrnes⁴, C. Colombo⁵, H. Corvol⁶, S.Y. Cheng⁷, G. Daneau⁸, A. Elbert⁹, A. Faro⁹, C.H. Goss¹⁰, V. Gulmans¹¹, H. Gutierrez¹², I. de Monestrol¹³, A. Jung¹⁴, L. Nährlich¹⁵, N. Kashirskaya¹⁶, B.C. Marshall⁹, E. McKone¹⁷, P.G. Middleton¹⁸, P. Mondejar-Lopez¹⁹, M.D. Pastor-Vivero²⁰, R. Padoan²¹, S. Rizvi⁹, R. Ruseckaite², M. Salvatore²², A.L. Stephenson⁷, L.V.R. da Silva Filho²³, J. Melo²⁴, M. Zampoli²⁵, O. Abdrakhmanov²⁶, S. Harutyunyan²⁷, S.B. Carr²⁸,

Cystic Fibrosis Registry Global Harmonization Group. ¹Cystic Fibrosis Trust, UK CF Registry, London, United Kingdom; ²Monash University, Melbourne, Australia; ³Université de Paris, Inserm U 1016, Institut Cochin and Cochin Hospital, Assistance Publique Hôpitaux de Paris (APHP), Paris, France; ⁴Starship Children's Hospital and University of Auckland, Auckland, New Zealand; ⁵Fondazione IRCCS Ca' Granda Ospedale Maggiore Policlinico, University of Milan, Milan, Italy; ⁶Sorbonne Université, Inserm, Centre de Recherche Saint-Antoine, Assistance Publique Hôpitaux de Paris (APHP), Hôpital Trousseau, Service de Pneumologie Pédiatrique, Paris, France; ⁷Cystic Fibrosis Canada, Toronto, Canada; ⁸Sciensano, Brussels, Belgium; ⁹Cystic Fibrosis Foundation, Maryland, United States; ¹⁰University of Washington, Seattle, United States; ¹¹Dutch CF Foundation NCFs, Baarn, Netherlands; ¹²University of Alabama at Birmingham, Alabama, United States; ¹³Stockholm CF Center, Karolinska University Hospital, Karolinska Institutet, Stockholm, Sweden; ¹⁴University Children's Hospital Zurich, Zurich, Switzerland; ¹⁵Justus-Liebig-University Giessen, Department of Pediatrics, Giessen, Germany; ¹⁶Research Centre for Medical Genetics, Moscow, Russian Federation; ¹⁷St Vincent's University Hospital, Dublin, Ireland; ¹⁸Westmead Hospital, Sydney, Australia; ¹⁹Hospital Clínico Universitario Virgen de la Arrixaca, Murcia, Spain; ²⁰Hospital Universitario Cruces, Bizkaia, Spain; ²¹Cystic Fibrosis Support Center, Department of Paediatric, University of Brescia, Brescia, Italy; ²²National Center Rare Diseases Undiagnosed Rare Diseases Interdepartmental Unit Istituto Superiore di Sanità, Rome, Italy; ²³Instituto da Criança HCFMUSP, São Paulo, Brazil; ²⁴Instituto Nacional del Tórax, Santiago, Chile; ²⁵University of Cape Town and Red Cross War Memorial Children's Hospital, Cape Town, South Africa; ²⁶The Second Children's Hospital, Almaty, Kazakhstan; ²⁷Yerevan State Medical University, Yerevan, Armenia; ²⁸Royal Brompton Hospital and Imperial College London, London, United Kingdom

Objectives: As the novel coronavirus (SARS-CoV-2) pandemic continues, people with cystic fibrosis (CF) have been identified as being a vulnerable group. It is essential that people with CF, their families and their clinical teams have the most up-to-date information on the impact of SARS-CoV-2 on their health. This study aims to characterise the impact of SARS-CoV-2 infection in people with CF throughout 2020, identify factors that predict clinical progression of COVID-19, and to describe medium-term follow-up of people who have been infected.

Methods: The 'Cystic Fibrosis Registry Global Harmonization Group' is a worldwide network of CF Registries that each contributed data on people with CF diagnosed with SARS-CoV-2 infection. In this analysis, we will report on cases contributed from 22 countries diagnosed between 1st February and 13th December 2020. We will present demographic, pre-infection clinical characteristics, symptoms, infection management and outcomes. We will use multivariable logistic regression to assess predictors for hospitalisation with respiratory support and intensive care admission as the outcomes of interest representing clinical progression of COVID-19. Descriptive analysis of medium-term follow-up BMI and FEV_{1%} predicted values will also be undertaken.

Results: Results pending. Expected cohort size >1,000, including the 181 previously reported in our paper "The global impact of SARS-CoV-2 in 181 people with cystic fibrosis."

Conclusion: It is expected that the findings of this study will have important implications for shielding advice, clinical care and vaccine prioritisation for people with CF.

P084**The impact of the SARS-CoV-2 pandemic on people living with cystic fibrosis in Ireland: real-world data from the Irish cystic fibrosis registry**

H. Rees¹, S. Babu¹, G. Fletcher¹, L. Kirwan¹. ¹Cystic Fibrosis Registry of Ireland, Dublin, Ireland

Objectives: The impact of the SARS-CoV-2 pandemic on people living with cystic fibrosis (PWCF) in Ireland was investigated by comparing the utilisation of regular hospital facilities in 2020, with data collected in 2019.

Methods: All data were collated by the Cystic Fibrosis Registry of Ireland (CFRI). Comparisons were made between PWCF's access to regular hospital facilities utilised for the treatment and management of their condition prior to the outbreak of the pandemic in 2019, and preliminary data during the pandemic in 2020. A descriptive analysis of the differences between key outcome measure data was conducted. The outcome measures analysed were (i) the number and type of encounters, (ii) the number of virtual clinics, (iii) the number of pulmonary function tests (PFTs) carried out, (iv) the number of hospital admissions, and (v) the number of individuals receiving home intravenous antibiotic treatment.

Results: In 2019, encounter data were recorded for 1,254 individuals, compared to 1,143 in 2020. Overall, fewer encounters took place in 2020 (5,346) than in 2019 (7,947). Decreases were observed across all in-person hospital encounter types in 2020, when compared with 2019 (annual review: 273 vs 747; day-unit review: 1,792 vs 2,864; drop-in: 115 vs 277; OPD appointment: 1,064 vs 3,289). However, since the outbreak of the pandemic, 1,696 virtual encounters occurred. Significantly, the number of PFTs carried out decreased by 58% in 2020 (2,283), when compared with 2019 (5,458). Of the 1,696 virtual encounters, only 183 (10.8%) saw PFTs carried out.

Conclusion: Our analysis has shown a clear reduction in the utilisation of usually regular hospital resources by PWCF in 2020 when compared with 2019. In-person hospital encounters have decreased by 55% in total, highlighting the significant impact that the SARS-CoV-2 pandemic has had on PWCF.

P085**Impact of COVID-19 on hospital services and specialist care of adults with cystic fibrosis**

R. Bhatnagar¹, S. Tecklenborg², R. Segurado¹, P. Fitzpatrick¹. ¹University College Dublin, School of Public Health, Physiotherapy and Sports Science, Dublin, Ireland; ²Cystic Fibrosis Ireland, Dublin, Ireland

Objectives: The aim of this study is to examine the impact of the COVID-19 lockdown on hospital services and specialist care of adults with cystic fibrosis (PWCF) in Ireland.

Methods: A cross-sectional survey was undertaken. The consent and questionnaire were hosted on SmartSurveyUK. The survey was advertised widely by Cystic Fibrosis Ireland to the CF community via CF website, Twitter, Instagram, Facebook and through WhatsApp groups during September/October 2020.

Results: 118 PWCF responded and 56 (47.5%) indicated a deferral of hospital visits for CF care. The period of delay ranged from 1 to 6 months, with 57.4% to three months and 42.6% to over 6 months. Key reasons for deferral amongst those who deferred (n = 56) were fear of infection from coronavirus (69.8%) and hospital unit closed (11.5%). Amongst PWCF who deferred, deferrals impacted rehabilitation therapies (n = 25%), medical care at hospital (n = 65.6%), surgery (n = 6.3%), and appointment with GP (n = 34.4%). More respondents aged 35 and over had to cancel/postpone diagnostic tests compared to those <35 years (64% vs 36%: NS). Non-significantly greater proportions of females postponed therapy and tests. Online consultation was new for more than half of the participants (51.7%) and the majority (88.8%) found it useful. Little over half of the participants (53%) had access to prescription via email and majority of those who used (98.4%) found it useful.

Conclusion: The COVID-19 pandemic has impacted many PWCF in terms of access to tests and specialist care. Time will tell how this will impact on future hospital admissions and survival. Online consultation and emailed prescriptions were both positively received by many. Prescription renewal via email is certainly a consideration to be continued post-pandemic.