Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

appointments. **Conclusions:** Our survey highlights that despite a high degree of concern about COVID19 among lung cancer patients on active therapy, their treatment decisions were seemingly not affected by their fears/anxiety. Our patients were satisfied with the transition to virtual care during the pandemic. The interaction between oncologists and patients should be persistent and augmented with effective platforms for continuous and improved health outcomes. **Keywords:** COVID19, lung cancer, treatment decisions

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Lung Cancer Resection During the Covid-19 Pandemic: A Single Centre Study

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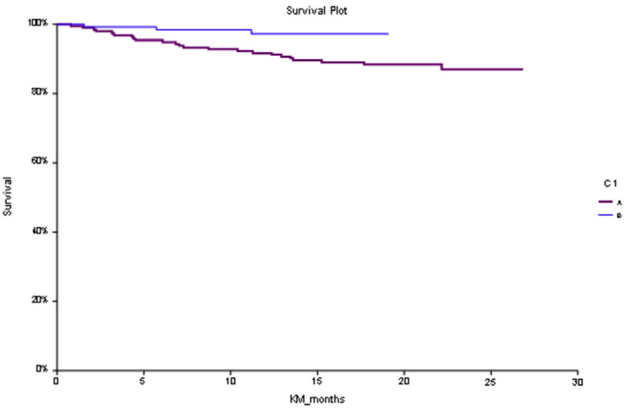
Introduction: During the Covid-19 pandemic, less invasive alternatives to surgery were recommended to minimise the risk of patient exposure to the virus. Therefore, this study aimed to assess the impact of covid-19 on lung cancer resections. **Methods:** We retrospectively analysed lung resections between March 2019 and May 2021. Eligibility criteria included patients with confirmed non-small cell lung cancer. We divided the patients into Group A (lung cancer resection between March 2019 and February 2020 and Group B (lung cancer resection between March 2020 and May 2021. The WHO declared Covid-19 a pandemic on 11th March 2020. The outcome measures were (1) the number of lung resections, (2) the completed waiting period and (3) Survival between the two groups **Results:** In Group A, 192 (78.7%) were for primary lung cancer, while in Group B, 133 (71%) were for primary lung cancer ($p<0.05$). The mean completed waiting period for Group A patients was 71.85±60 days (median 58 days; R 5-449 days), while the mean completed waiting period in Group B patients was 45.2±34 days (median 38 days; R 4-213 days) ($p<0.0001$). The mean survival times for Group A & B were 17.8 and 18.7 months, respectively (Logrank = 0.015). In Group A, survival at 30-days, 90 days and 1-year was 99.48%, 98% and 91.67%) respectively. In Group B, survival was 100%, 99.25%, and 97.1% at 30-days, 90 days, and 1-year **Conclusions:** We found a 30.7% decrease in the lung cancer resection volume. Also, the completed waiting times for lung cancer resection decreased by 26.51 days during the study period. Early survival was better in Group B patients than Group A. Recoded staging figures reflected higher pathological stages in the latter group ($p=0.04$). Additionally, subgroup analysis showed that we operated on more stage-1 lung cancers in Group B vs Group A (63.4% vs 54.2%).



Keywords: Lung cancer resection, Covid-19, Survival

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COVID-19 and Post-COVID Outcomes in Lung Cancer Patients: Experience from an Indian Cancer Center

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Introduction: Patients with lung cancer appear to be at higher risk of COVID-19 related complications and mortality. There is limited data on COVID-19 outcomes in lung cancer patients, particularly from India. Studies have rarely included post-COVID morbidity and mortality in cancer patients. **Methods:** In this single center study, a prospectively maintained database of lung cancer patients who were diagnosed with COVID-19 infection between May 1, 2020 and November 30, 2021 was used to assess the outcomes, and to identify the factors associated with mortality and intensive care unit (ICU) admission. 30-day post-COVID mortality was assessed in patients who recovered. **Results:** A total of 54 lung cancer patients with COVID-19 were identified (mean [SD] age, 61.8 [8.5] years; 20.4% women, 79.6% men), of whom 74.1% had advanced stage disease. Recent treatment (within 30 day preceding COVID-19 diagnosis) was received by 77.8% of the patients (53.7% with systemic chemotherapy, 23.8% with tyrosine kinase inhibitors, and 5.6% with immune-checkpoint inhibitors). Patients requiring hospitalization and ICU admission were 59.3% and 16.7% respectively. In-hospital mortality during the same admission was 24.1%. Total

Figure 1: Operations done between 2019 and 2021