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P30.04

Clinical Research on Patients With Surgically Resected Lung Adenocarcinoma Lesions: Are Heterogeneous GGNs Different From Part Solid Nodules?

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Introduction: To evaluate the natural course of patients with surgically resected lung adenocarcinoma (Ad) lesions with heterogeneous GGN, and clarify the difference between heterogeneous GGNs and part solid nodules. **Methods:** 507 patients with proven lung Ad were retrospectively reviewed. Preoperative lung Ad lesions were investigated, and were classified into pure GGN, heterogeneous GGN, part solid nodule and solid nodule group. The disease-free survival (DFS) and Overall survival (OS) of the patients were also investigated. **Results:** All of the 58 heterogeneous GGNs were found only in patients with postoperative stage IA. The numbers of the other types including solid nodule, part solid nodule, and pure GGN in stage IA were 55, 197, and 11, respectively. In part solid nodule group, recurrence of lung Ad and death from the primary disease was observed in 13 (6.6%) and 7(3.6%) of 197 patients, respectively. There was no recurrence of lung Ad in heterogeneous GGN group. Heterogeneous GGNs were significantly associated with longer DFS than part solid nodules ($p=0.042$). On the other hand, there was no significant difference between heterogeneous GGNs and part solid nodules ($p=0.134$) in OS. **Conclusion:** Heterogeneous GGNs were associated with longer DFS than part solid nodules. **Keywords:** computed tomography, Lung adenocarcinoma, Heterogeneous ground glass nodule

P31 MANAGEMENT OF LUNG CANCER IN THE ERA OF COVID-19 - IMPACT OF COVID-19 IN LUNG CANCER MANAGEMENT

P31.01

Impact of COVID-19 on Lung Cancer Diagnosis and Treatment: A Retrospective Chart Review

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Introduction: The large burden of COVID-19 on health care systems worldwide raised concerns among medical oncologists about the impact of COVID-19 on the diagnosis and treatment of lung cancer patients. In this retrospective study, we investigated the impact of the COVID-19 pandemic on lung cancer care using a set of quality indicators before and during the COVID-19 era. We assessed diagnosis and treatment patterns. We also examined the timeliness of lung cancer care. **Methods:** This retrospective chart review was conducted at the Peter Brojde Lung Cancer Centre, Montreal. We compared patient diagnoses and treatment patterns before the COVID-19 pandemic (01-03-2019 to 01-03-2020) and during the pandemic (30-03-2020 to 28-02-2021). The study was approved by the Research

Ethics Board (REB). **Results:** New lung cancer diagnoses decreased by 34.7% (170 vs. 111) during the pandemic. Demographics revealed slightly more advanced stage disease diagnosed during the pandemic (56%) versus before the pandemic (52%). Treatment patterns revealed an increase in the utilization of radiosurgery as the first definitive treatment (23%) during the pandemic vs. before pandemic (4 %) and a decrease in both systemic treatment (47% vs. 57%) and surgery (30% vs. 39%) during COVID-19. There was no significant delay in starting chemotherapy and radiation treatment during the pandemic compared to pre-COVID time. However, we observed a delay to lung cancer surgery during pandemic time. **Conclusion:** COVID-19 seemed to have a major impact at our lung cancer centre on the diagnoses and treatment patterns of our lung cancer patients. Diagnoses of lung cancers dropped off significantly during the pandemic. Many oncologists fear that they will see an increase in newly diagnosed lung cancer patients in the coming year as vaccination rates continue to increase. In addition, treatment patterns seemed to indicate a decrease in surgery and an increase in radiosurgery. This study is still ongoing and further data will be collected and analyzed to better understand the total impact of COVID-19 pandemic on our patient population. **Keywords:** covid-19, lung cancer, chart review

P31.02

Impact of COVID-19 Pandemic in Spanish and Portuguese Lung Cancer Patients

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Introduction: In late 2019 a new pandemic disease was identified, COVID-19, caused by a new coronavirus - SARS-CoV-2. Among the risk population are cancer patients but the repercussions on these patients were probably greater because of diagnosis and staging delays. Thus, the objective of this study will be to assess the impact of COVID-19 on lung cancer patients (pts) newly diagnosed in three Portuguese and three Spanish general hospitals, in 2020 and to compare the data with the previous two pre-pandemic years. **Methods:** Newly diagnosed lung cancers pts were evaluated, between the years 2018 and 2020, in 6 hospitals (3 Portuguese and 3 Spanish). The pts's age at diagnosis, performance status, exposure to tobacco, date of diagnosis, stage of the disease, histological type of tumour, first therapeutic decision and date of death were evaluated and were compared. **Results:** A sample of 2419 pts was collected, 1334 from Portugal (55,15%) and 1085 from Spain (44,85%). We observed a decrease in lung cancer diagnosis in 2020 compared to previous years, mainly in Spanish hospitals - 855 in 2018, 829 in 2019 and 735 pts in 2020. The median age at diagnosis was 68 years old, being the majority men (73,7%), with active or prior smoking exposure (83%), adenocarcinoma as tumour histologic type (57,5%), and the samples were remarkably similar regarding these characteristics, and the only difference between years observed was the smoking history with less smokers and an increase of ex-smokers in 2020. Most pts had advanced disease at diagnosis (stage III, 22,6%, or IV, 59,4%), without an increase in 2020. In 2020, Portuguese pts