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.

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1639P Impact of COVID-19 on ongoing oncological and hematological treatment strategy

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Background: Outcomes and risk factors associated with COVID-19 worsening among cancer patients have previously been reported. However, the actual impact of SARs-Co-V2 infection on the cancer treatment strategy remains unknown. Here, we report the Gustave Roussy (GR) experience, one year after the onset of the pandemic focusing on the impact of COVID-19 in patients with ongoing management of oncohematological disease.

Methods: All patients positively tested for SARS-CoV-2 and managed at GR between Mar 14th 2020 and Feb 15th 2021 (data cut-off) have been included. Patients underlying oncohematological disease and COVID19 characteristics have been collected. Cancer and COVID-19 management and outcomes have been assessed. Primary endpoint was the overall impact of COVID-19 on oncological and hematological treatment strategy assessed at 1, 3, 6 and 12 months.

Results: At the time of the analysis, 423 patients (median age: 62 years) were found positive for SARS-CoV-2 and managed at GR with a median follow up of 5.6 months (0-13 months). Among them, 284 (67%) were admitted due to COVID-19. Clinical deterioration occurred in 87 patients (21%), 43 patients (10%) were transferred in intensive care unit and 123 (29%) patients died, among which 47 (11%) died from COVID-19. Overall, 329 (78%) patients were on active treatment for underlying oncohematological disease at time of COVID diagnosis. Impact of COVID-19 on cancer treatment strategy in those patients is presented in the Table. The majority (N=268, 81%) had no change in oncological strategy. For those who experienced a delay, median delay in treatment was 21 days (N=99, [1-77]), 30 days (N=15, [15-56]), 7 days (N=8,[3-35]) for systemic treatment, surgery and radiotherapy respectively.

Table: 1639P Impact of COVID-19 on cancer treatment strategy in patients with active oncohaematological treatment at time of COVID-19 diagnosis

	N=329
Death from COVID-19	**36** (11%)
No change in strategy	**268**
Without delay	136 (41%)
With Delay	132 (40%)
Change in strategy	**22**
End of treatment – Surveillance	8 (2%)
End of treatment – Palliative care	7 (2%)
Change of treatment modality	6 (2%)
Change of systemic therapy	1 (<1%)
NA	**3** (<1%)

Conclusions: COVID-19 outbreak is associated with a significant mortality in patients with cancer. However, for patients who did not die from COVID-19, we provide the first report supporting that ongoing treatment was maintained or could be resumed in the majority of cases in a timely manner.

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1640P Impact of COVID-19 vaccination campaign on psychological status in cancer patients (pts)

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Background: The health emergency caused by the SarS-Cov-2 pandemic has been strongly impacting on oncological patients' (pts). The purpose of this study was to explore the emotional impact and perception of cancer pts who received the vaccine against COVID-19 at the University Hospital and Trust of Verona (Italy).

Methods: After the first dose of COVID-19 vaccine an anonymously questionnaire was proposed to cancer pts (March-May 2021). The survey investigated anxiety and depression levels using the Hospital Anxiety and Depression Scale (HADS), psychological distress with the Distress Thermometer (DT). Additionally, four specific items regarding the awareness about: i) infection risks, ii) interference with chemotherapy treatment, and iii) adverse effects, were developed. Descriptive analyses were performed.

Results: A total of 736 patients (mean age 63 yrs) completed the questionnaire. Breast (23%) and gastrointestinal (40%) were the most represented cancer sites. The majority of pts (65%) reported mild levels of distress (DT ≤4), while moderate (DT 5-7) and severe (DT ≥8) levels were identified in 26% and 9% of participants, respectively. A total of 11% and 8% of pts experienced clinically significant symptoms of anxiety and depression (HADS ≥11), whereas 15% were borderline (HADS score 8-10). Two thirds of pts (67%) thought that the vaccination may reduce the infection risks and 56% felt safer. Overall, 59% of pts did not believe that vaccine-related side effects may interfere with the oncological treatment and 49% considered the vaccination safe.

Conclusions: Most cancer pts undergoing COVID-19 vaccination presented mild levels of anxiety, depression and distress. Oncological pts undergoing vaccination felt safe and judged the benefits of COVID-19 vaccination to overweight the potential side effects.

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1641P Patient preferences towards the application of telemedicine on cancer care during Coronavirus disease 2019 (COVID-19) pandemic. ONCOTELEMED STUDY

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Background: COVID-19 became a worldwide pandemic in March 2020. To reduce virus spread and ensure continuity of cancer care, the use of telehealth was rapidly implemented. Currently, there is no mature data on patient's perception about the use of telemedicine during this period, so we sought to evaluate the opinion of patients with cancer who were attended telematically in Hospital Parc Taulí.

Methods: 646 patients were visited by an oncologist via phone call between Marc 13 and April 30 2020. A 12-question survey was conducted between February 4 and April 19 2021 during an in-person visit or by telephone. The study was approved by the Research Ethics Committee of our hospital.

Results: 487 patients (75.4%) responded; 57% by phone call. Median age was 68 years [27-90]. 65.7% of patients had a follow-up visit and 34.3% were receiving treatment. Most patients (>80%) were satisfied with the telephonic visit and believed that it was useful to solve their concerns. Around 60% said that they would agree to continue with some virtual visits following the COVID-19 pandemic. 62% of patients would agree to be informed telematically of radiological results while 82% would agree for analytical results. 52% would agree to be visited virutally if they were