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risk assessment of admission procedures for cancer patients during the convalescence of COVID-19

J. Xu1, S. Jiuling2, W. Ouyang1, L. Gui1, J. Zhang, Y. Zhong, H. Qiu2, F. Zhou2, Y. Wei2, C. Xie1
1Department of Radiation and Medical Oncology, Zhongnan Hospital Wuhan University, Wuhan, China; 2Department of Radiation and Medical Oncology, Zhongnan Hospital of Wuhan University, Wuhan, China

Background: Through great efforts, the outbreak of 2019 novel coronavirus disease (COVID-19) has been slowing down in Wuhan. This study was to assess the potential errors of established admission procedures from a tertiary cancer center.

Methods: A multidisciplinary team of eight frontline nurses and oncologists would conduct a failure mode and effects analysis (FMEA) to our established procedures. The FMEA consisted of 4 main steps, including a detailed review of the on-going admission processes and the drawing of the corresponding flow chart, followed by repeated discussions of the possible errors among those processes, and then evaluation of the occurrence (O), detectability (D), effectiveness (E), and severity of impact (S) of each failure mode according to a scoring criteria (a five-point scale). Finally, the risk of errors were determined through a calculation of risk priority number (RPN:=O*D*S).

Results: From March 24, 2020 to May 14, 2020, based on the established procedures, our center has screened 1,214 cancer patients in the oncology outpatient department and subsequent buffer wards. No nosocomial infection (among doctors or patients, or between patients and doctors) occurred. On the scale of RPN from high to low, ten high-risk steps were identified by FMEA, involving a failure of scheduled screening for particularly vulnerable populations, the failure of hand hygiene in outpatient and buffer wards, and the incorrect disposal of clinical waste by clearing service staff. In addition, the psychological burden to cancer patients might increase the risk of buffer ward management failure.

Conclusions: Self-review and continuous improvement for established procedures can minimized underlying mistakes. Increasing the approaches to treatment appointments, reasonably optimizing the working during for outpatient physicians, strengthening the awareness of hand hygiene (both physicians and patients), and setting up oncological psychological counseling groups will likely improve the potential error steps.

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Cancer patients' perceptions, opinions and feelings during the COVID-19 epidemic in the most affected Italian areas: Serial cross-sectional study

R. Passalacqua1, G. Maglietta1, M. Ratti1, A. Gobbi1, M. Bonomi1, J. Saleri1, G. Gritti1, F. Barbini1, L. Bonassi1, L. Buffoni1, L. Cavanna1, F. Gallina1, E. Gervasi1, C. Iridile1, V. Lonati1, R. Maddalena1, F.A. Meriggi1, S. Piloni1, F. Campione1, C. Caminiti2
1Oncology, ASST Cremona, Cremona, Italy; 2Ricerche e Innovazione, AOU Parma, Parma, Italy; 3Dipartimento di Oncologia, Istituti Ospitalieri di Cremona, Cremona, Italy; 4Oncology, ASST Bergamo est, Alzano Lombardo, Italy; 5Oncology, Humanitas Gradenigo, Turin, Italy; 6Oncology Department, Azienda Ospedaliera Piacenza, Piacenza, Italy; 7Oncology, ASST Monza, Monza, Italy; 8Oncology, ASST IRCCS Reggio Emilia, Reggio Emilia, Italy; 9Oncology, ASST Mantova, Mantova, Italy; 10Oncology, ASST Bergamo ovest, Treviglio, Italy; 11Oncology, ASST Vimercate, Vimercate, Italy; 12Oncology, Fondazione Poliambulanza, Brescia, Italy; 13Oncology, ASST Crema, Crema, Italy; 14Medicina e Chirurgia, Università di Bologna, Bologna, Italy

Background: Risks associated with COVID outbreak and consequent restrictive measures taken by the Government can cause concern and anxiety. The impact on cancer patients (pts) may be even greater. We investigated the influence of COVID pandemic on pts' perceptions, opinions and feelings during the peak of the epidemic and after the loosening of the Government restrictions.

Methods: Multicenter, serial cross-sectional study conducted in 11 cancer centers located in the hardest hit Italian areas. The study is composed by 2 surveys administered to unselected adult pts receiving onsite oncologic treatments: the first during the enforcement of containment measures against COVID spread; the second upon the loosening of Government restrictions. A self-administered questionnaire composed by 11 closed questions (only 1 answer) was used. At least 1000 pts per each survey were deemed necessary. Multivariable logistic regression models will be used to identify factors associated to recorded perceptions and opinions. Main outcomes are 1) perception of the pandemic effect on feelings 2) perception of changes in the relationship with the medical team 3) opinions on healthcare reorganization.
Disclosure: MEDEA, Medicina e Arte, Onlus, Cremona.

Legal entity responsible for the study: communication with doctors and nurses. Due to the epidemic course, the second survey could not yet be performed and data will be available by June.

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The presence of COVID-19 makes more cancer patients distressed and time perception may distinguish them

N.V. Conev1, M. Petrotova2, E. Dimitrova2, K. Zhelev3, Z.I. Zahariiev3, K. Nikolov3, T. Popov2, M. Ivanova4, N. Evgeniev5, I. ShiterevDonev6

1Clinic of Medical Oncology, St. Marina University Hospital, Varna, Bulgaria; 2Medical Oncology, MHAT Nadezhda, Sofia, Bulgaria; 3Department of Radiology, University Hospital Pamukkale, Bulgaria; 4Clinic of Medical Oncology, Complex Oncology Center, Burgas, Bulgaria; 5Medical Oncology, Complex Oncology Center, Burgas, Bulgaria; 6Medical Oncology, Complex Oncology Centre-Ruse, Ruse, Bulgaria; 7Medical Oncology, MHAT Nadezhda, Varna, Bulgaria

Background: Our multicentric study explores the potential relationship between time perception, level of distress and fear of infection with COVID-19 in cancer patients undergoing chemotherapy.

Methods: Perception of time was assessed in 300 cancer patients with solid tumors by evaluating each subject's prospective estimation of how fast one minute passed compared to the actual time. The median value (25 sec) of time perception was used to group cases into two categories of fast and slow perception of time. The National Comprehensive Cancer Network Distress Thermometer was used to evaluate levels of distress on a scale from 0 to 10. Patients scoring 4 or above were 173 (57.7%) and were regarded as having high levels of distress. Analogue thermometer was created for the fear of COVID-19 infection.

Results: Significantly more patients were distressed in the presence of COVID-19 than historically controls. Patients with lung, breast and colon cancer were most distressed and worried about possible COVID-19 infection. Median value of both thermometers was 5. The pattern of the time perception distributions significantly changed over levels of distress and fear of COVID-19 infection (both p<0.05). There were significant negative correlations between time perception and values of Distress and COVID-19 thermometers (rho=-0.341 and rho=-0.169) and positive correlation between values of both thermometers (rho=0.601). Patients with a fast perception of time had significantly higher levels of distress (5.4±3.1) and fear from COVID-19 (5.3±3.3) infection than patients with a slow perception of time (3.2±2.8 and 4.2±3.2; respectively, both p<0.001). Moreover, in a multivariate analysis of covariance, time estimation, was significantly related to the reported values of both thermometers (V = 0.13, F (2, 297) = 21.2, p <0.001).

Conclusions: Significantly more patients with cancer disease experienced distress in the presence of possible COVID-19 infection. Perception of time is a novel potent indicator for high levels of distress and fear of COVID-19 infection in cancer patients.

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Perception and attitudes of Italian physicians towards the management of checkpoint inhibitors in oncology during COVID-19 outbreak: Results from a national survey

M. Tagliamento1, F. Spagnolo2, F. Poggi3, D. Soldato3, B. Conte3, T. Rueille3, E. Barsine4, A. De Maria5, L. Del Mastro6, M. Di Maio7, M. Lambertini8

1Medical Oncology 2, University of Genova and IRCCS Ospedale PoliClinico San Martino, Genoa, Italy; 2Skin Cancer Unit, IRCCS Ospedale PoliClinico San Martino, Genoa, Italy; 3Medical Oncology 2, IRCCS Ospedale PoliClinico San Martino, Genoa, Italy; 4U.O.C. Clinica di Oncologia Medica, University of Genova and IRCCS Ospedale PoliClinico San Martino, Genoa, Italy; 5Interventional Pneumology Unit, IRCCS Ospedale Policlinico San Martino, Genoa, Italy; 6Infectious Diseases Unit, University of Genova and IRCCS Ospedale Policlinico San Martino, Genoa, Italy; 7Breast Unit, University of Genova and IRCCS Ospedale Policlinico San Martino, Genoa, Italy; 8Department of Oncology, University of Turin and Mauriziana Hospital, Turin, Italy

Background: During the COVID-19 outbreak oncological care has been reorganized to face the emergency. Cancer patients have been reported to be at higher risk of severe events related to SARS-CoV-2. Moreover, there are concerns of a possible interference between immune checkpoint inhibitors (ICIs) and the pathological course.

Methods: A 22-item questionnaire was shared with Italian physicians managing ICIs, between May 6 and 16, 2020. This survey aimed at exploring the perception about SARS-CoV-2 related risks in cancer patients receiving ICIs, and whether the management of these patients has been modified during COVID-19 outbreak.

Results: Respondents were 104, with a median age of 35.5 years, mainly females (58.7%), mainly working in Northern Italy (71%). 47.1% of respondents were afraid that a synergism could exist between ICIs mechanism of action and SARS-CoV-2 pathogenesis, leading to worse outcomes. 97.1% of respondents would not deny an...