

EP600 / #1286 | QUALITY OF LIFE OF CHILDREN AND ADOLESCENTS WITH CANCER BEFORE AND DURING THE WAR IN UKRAINE

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Background and Aims: Oncology, COVID-19, war... what is the biggest impact on a child's mental health? May be all three factors at once? Can we talk about the quality of life in such conditions? Turning to the famous works of Victor Frankl, let's try to assume our capabilities. We prioritize understanding the assessment of quality of life in children with cancer, as the idea that it is primarily the disease affects human life. The war in Ukraine has significantly changed the medical services for children with cancer, so it is important now to investigate how the quality of life of a child with cancer has changed.

Methods: The Pediatric Quality of Life Inventory (PedsQL 3.0 Cancer Module) questionnaire was used for 131 people (children aged 5 to 18 and their parents) and divided on two groups: before war in Ukraine (n1 = 64) and another during war (n2 = 67).

Results: Indicators of the average value according to the scales of the group n1 and n2, respectively (where Xnorm.=100): pain (55.2/79.8); nausea (51.9/79); anxiety associated with procedures (42.8/32.3); anxiety associated with treatment (65.2/56.8); general anxiety (39.6/32.5); cognitive problems (63.9/42.1); physical perception of appearance (68/74.2); communication (71/40). The overall quality of life index x group n1 is the lowest in children/adolescents 13-18 years (x = 52.26) compared to 5-7 years (x = 58.3) and 2-4 years (x = 63.5). In group n2, in general, the quality of life in all age groups of children decreased significantly: 5-7 years (x = 47.7), 8-12 years (x = 54.3), 13-18 years (x = 45.9).

Conclusions: Self-assessment of health is a more powerful predictor of mortality and morbidity than many objective indicators of health. A structured assessment of the quality of life of children with cancer during the war is an important final point for further correct treatment and rehabilitation.

E-Poster Topic: AS05 SIOP Scientific programme / AS05.r Epidemiology, Policy and Advocacy

E-POSTER VIEWING

EP601 / #412 | MICROORGANISM PATHOGEN PATTERN IN PEDIATRIC ONCOLOGY PATIENTS WITH FEBRILE NEUTROPENIA ADMITTED TO TERTIARY REFERRAL HOSPITAL DURING PANDEMIC CORONAVIRUS-19

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Background and Aims: Almost 700,000 deaths attributable to multidrug-resistance (MDR) occurring each year with *Enterococcus* spp., *Staphylococcus aureus*, *K. pneumoniae*, *Acinetobacter baumannii*, *P. aeruginosa*, and *Enterobacter* spp. (ESKAPE) pathogens became main concern mainly because of risk to become resistance pathogen, while COVID-19 pandemic presents an unprecedented global threat to the safe and effective care for children with cancer, one of the reason they were more prone to be infected and treated with antibiotic irrationally. Aim of this study to describe the incidence of MDR, extensively drug-resistant (XDR) and pan drug-resistant (PDR) in febrile neutropenia patient that admitted during pandemic period that could be present many difficulties come to hospital to seek treatment.

Methods: All pediatric oncology patients diagnose with febrile neutropenia from January 2020 to Februari 2022 were retrospectively studied. Data consists of demography pattern, underlying disease, number of drawn blood culture and positive results, type of bacteria, sensitivity pattern. International standard definitions for acquired resistance by ECDC and CDC was used as definitions for MDR, XDR and PDR bacteria

Results: Most of patient came to hospital in severe neutropenia stage (74,6%). Main underlying oncology cases are ALL (38,1%), from 153 specimen collected out of 189 subjects, there were 26 (17%) growth founded from culture. 13, 6, 6, 1 founded in blood, urine, pus, sputum respectively. ESKAPE pathogen dominantly founded in blood with *E. Coli* is the most (46,2%), 11 (84,6%) of them are MDR pathogen while 1(7,6%) is XDR pathogen, there were not any possible PDR pathogen founded.

Conclusions: The prevalence of MDR pathogens is quite high, but the XDR and PDR pathogen is still low, antibiotic for treatment based on guideline and local antibiogram pattern could be rationally use, however, despite the low number, antibiotic resistance remains one of the main challenging issues demanding for further attention especially in pandemic era.

EP602 / #1827 | LEVERAGING THE PROFILE TOOL TO IDENTIFY NATIONAL PRIORITIES AND SUPPORT GLOBAL INITIATIVE FOR CHILDHOOD CANCER (GICC) COUNTRY STATUS IN CAMEROON

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