

## **Abstract: PB2671**

### **Title: AN INVESTIGATION INTO THE PREFERENCES OF PATIENTS REGARDING THE USE OF TELEMEDICINE STEMMING FROM THE COVID-19 PANDEMIC.**

**Abstract Type: Publication Only**

**Session Title: Quality of life and palliative care**

#### **Background:**

Telemedicine has become increasingly crucial for remote healthcare delivery, with telephone consultation (TC) and video consultation (VC) being two crucial modalities. However, there is limited knowledge about the preferences and experiences of patients with lymphoma or CLL. Understanding patient preferences and experiences is vital for successfully integrating telemedicine into clinical practice beyond the COVID-19 pandemic.

#### **Aims:**

This study aimed to investigate patient preferences and experiences for TC and VC among patients with lymphoma and CLL, focusing on regional and age differences.

#### **Methods:**

The 2022 Lymphoma Coalition (LC) Global Patient Survey (GPS) was completed by 8,637 participants from 84 countries, including 7,113 patients and 1,524 caregivers. The analysis for this study considered responses from patients only. Responses to questions regarding the use of telemedicine were stratified across core demographics and tabulated. The likelihood chi-square statistic was used to test for significant differences across strata which displayed subjectively large differences. All analyses were computed with JMP Pro v17.

#### **Results:**

There is a mixed response among patients with lymphoma or CLL regarding the continued use of telephone consultation (TC) or video consultation (VC) after the pandemic. Overall, 25.7% of patients definitely agree they would like to continue using TC/VC and 44.8% disagree. 29.5% are neutral (Table 1a). In general, respondents in the younger age groups (18-34) are more likely to agree that they would like to continue using TC or VC, while older age groups (55+) are less likely to agree ( $p < 0.0001$ ). When looking at the level of satisfaction with TC or VC, 26.7% agreed they were satisfied and 39.6% disagreed and 33.6% were neutral. Similarly, younger age groups (18-34) are more satisfied than older age groups (55+) ( $p < 0.0001$ ) (Table 2). Regional data also show some variation, with only 20% of respondents in Europe indicating a desire to continue using TC or VC after the pandemic ( $P < 0.0001$ ) (Table 1b).

#### **Summary/Conclusion:**

This study highlights the significance of considering patient preferences and experiences with TC and VC in healthcare delivery, specifically for patients with lymphoma or CLL. The findings indicate that generally, in-person visits are preferred. However, respondents who were younger tended to be more open to accessing care via TC or VC. Regarding age, a visible inverse relationship exists between age and the acceptance of TC and VC. Amongst the regions with the highest rates of response, those in Asia-Pacific Region were the most open to the use of TC and VC. However, the data indicate that nearly half of respondents would prefer not to use TC or VC in the future. These data indicate that to meet the needs of patients with lymphoma, a hybrid system of assessment and follow up may be warranted. The integration of TC and VC into routine care will require monitoring patient preferences with a reflexive system that can adapt to changing needs and expectations.

Table 1. Regarding your use of telemedicine (Telephone consultation (TC) or video consultation (VC)), how much do you agree or disagree with the following statements: --I would like to continue to use TC / VC even after the pandemic is over.				
Table 1a				
Age Groups	Agree	Neither Agree Nor Disagree	Disagree	P-value
18 - 34	220 (35.4%)	169 (27.2%)	232 (37.4%)	<0.0001
35 - 54	369 (29.7%)	377 (30.4%)	495 (38.9%)	
55 - 64	244 (22.2%)	332 (30.2%)	524 (47.6%)	
65 +	345 (21.4%)	473 (29.3%)	797 (49.3%)	
Total	1178 (25.7%)	1351 (29.5%)	2048 (44.8%)	4577 (100%)
Table 1b				
Regions	Agree	Neither Agree Nor Disagree	Disagree	P-value
Asia-Pacific	492 (33.7%)	446 (30.5%)	523 (35.8%)	<0.0001
Europe	421 (19.8%)	624 (29.4%)	1080 (50.8%)	
Middle East and Africa	8 (44.4%)	2 (11.1%)	8 (44.4%)	
North America	242 (26.0%)	272 (29.2%)	418 (44.8%)	
South America	16 (35.6%)	8 (17.8%)	21 (46.7%)	
Total	1179 (25.7%)	1352 (29.5%)	2050 (44.8%)	4581 (100%)
Table 2. Regarding your use of telemedicine (Telephone consultation (TC) or video consultation (VC)), how much do you agree or disagree with the following statements: -- I am satisfied with receiving my care via TC / VC.				
Age Groups	Agree	Neither Agree Nor Disagree	Disagree	P-value
18 - 34	206 (33.1%)	224 (36.0%)	192 (30.9%)	<0.0001
35 - 54	349 (28.1%)	453 (36.5%)	439 (35.4%)	
55 - 64	270 (24.6%)	376 (34.2%)	453 (41.2%)	
65 +	400 (24.7%)	486 (30.0%)	773 (45.3%)	
Total	1225 (26.7%)	1539 (33.6%)	1817 (39.6%)	4581 (100%)

**Keywords:** Follow-up, COVID-19