

substantial bulk of real-world evidence regarding the use of RFA as a beneficial strategy for use in the treatment of chronic pain.

B364 PAIN AND PALLIATIVE CENTER IN COVID-19 ERA

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Background and Aims Pain management is part of the holistic care of cancer patients. During the covid-19 pandemic, the limited access to public health facilities resulted in many patients with chronic pain remaining undiagnosed and without treatment. The purpose of this study is to highlight the work of the Pain and Palliative Care Center of Thegeneio Cancer Hospital of Thessaloniki.

Methods We recorded for a period of one year and specifically from March 2020 to March 2021, the total number of visits to the Pain Clinic and the number of new patients.

Results In the period of March 2020-March 2021, a total of 7508 patients visited our pain management center, of which 303 were new cases. Last year visits (March 2019-March 2020) were 7626 patients, of which 384 were new. In our Pain Center we used various forms of telemedicine including, email, instant messengers and online prescriptions for the remote monitoring of patients with chronic pain, while for acute pain the patients visited the Clinic after a scheduled appointment and abiding by the measures of the pandemic

Conclusions Timely access to specialized help and treatment is an important part of the holistic treatment of chronic or acute cancerous or non-cancerous pain. The operation of the Pain and Palliative Care Center of Thegeneio Cancer Hospital of Thessaloniki was not affected by the conditions of the pandemic and continued to serve the needs of the vulnerable group of patients with pain.

B365 ASSOCIATION BETWEEN REFERRAL TO PAIN CENTERS AND DEATH IN CHRONIC PAIN CANCER PATIENTS

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Background and Aims Pain is a common symptom among cancer patients. However, it is not adequately controlled in a large portion of patients. Possible causes are delayed referral to a specialized pain center as well as not administering of strong opioids. The aim of the study is to highlight the association between delayed referral to the Pain Clinic and the patient's death.

Methods In a period of 3 months (01/12/21–01/03/22) we logged the patients of the Pain Clinic who died, the number of visits and the administration or not of strong opioids before their death

Results We recorded a total of 29 cases (17 males 58.6% and 12 females 41.4%). 10 (34.48%) of them did not receive strong opioids before their first visit to us. The average number of visits to the Pain Clinic was 6, while the time between the first visit and the death of the patient was 130.82 days

Conclusions Cancer is a major global health problem. As per the World Health Organization(WHO) cancer is the second

leading cause of death all over the world. Majority of these patients live with chronic pain due to malignancy. The management requires a step wise multimodal therapies to control this complex process. Often our cancer patients remain undertreated for their pain resulting in a poor quality of life. Thus managing pain is a priority in cancer patients not only for physical well-being but also for psychological and ethical needs of the patients.

B366 SUPRASCAPULAR NERVE BLOCK IN CHRONIC SHOULDER PAIN

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Background and Aims This is a retrospective study to assess the effectiveness of suprascapular nerve block to relieve pain and improve the range of movement in degenerative disease of shoulder.

Methods We studied 954 adults within a period of four years, 275 men and 679 women aged from 37 to 87 years old with chronic shoulder pain. The patients were in pain and had junctional disability due to degenerative disease. We performed suprascapular nerve block with 10 ml of levobupivacaine 2.5 mg/ml using anatomical landmarks and a nerve stimulator to determine needle placement or an ultrasound technique if it was difficult to identify the nerve. Thirty minutes later the patients had a physiotherapy session. They were given instructions to do specific exercise for as long as the block lasted. A series of 4 suprascapular nerve blocks were performed to the patients. We recorded pain score and range of movement for 12 weeks.

Results The success rate of the block was 99.5%. There was significant improvement in all pain scores (pain at rest, at night and at movement) 90% in all patients. Pain VAS score was 2–3 occasionally, during the follow up. The range of movement improved 80–90% in all patients. There were no significant adverse effects in the patients due to the peripheral nerve block.

Conclusions Suprascapular nerve block is an easy and safe method to perform with minimum side effects and very effective in the management of chronic shoulder pain, which is a common clinical problem.

B367 ULTRASOUND-GUIDED INJECTION IN PIRIFORMIS MUSCLE

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Background and Aims Piriformis syndrome is a common cause of buttock and posterior leg pain. Diagnosis is often difficult, and it is one of exclusion due to few validated and standardized diagnostic tests. It has been described the US guided technique for piriformis muscle injections. We study the efficacy and efficiency of the above technique.

Methods We studied 24 patients 10 males and 14 females aged from 45 to 75 years old with a diagnosis of piriformis syndrome. The patients received 3 ml of 0.5 ropivacaine