significance of p constant with a mean difference of just 11.3 mm of Hg while non-yoga group recorded and on medications. During the course of chemo-radiation 4 yoga and 6 non-yoga patients were found to be known case of hypertension given loosening, breathing, chanting and meditation for 5 days/week for 6 weeks.

**Disclosure:**

The control achieved in RBS is highly significant. Considerable effect in hypertensive ones. RBS data reveals 5 yoga and 6 non-yoga subjects.

**Research questions:**

1. Is there a difference between the two groups as a whole (p value)?
2. What is the effect of RBS in treating hypertension among yoga and non-yoga patients?
3. Can yoga be an effective alternative therapy for treating hypertension?

**Conclusions:**

The study found that yoga may be an effective alternative therapy for treating hypertension. Further research is needed to confirm these findings.

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**Disclosure:**

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**Fatigue prevalence and adherence to treatment: A real-world data survey and mathematical model application**

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**Background:**

Fatigue is a common symptom reported by cancer patients (pts) and has been previously documented to affect patient’s quality of life.

**Methods:**

A real-world data survey was designed to evaluate, from the pts perspective, the fatigue effect and treatment adherence. A survey was created in a digital format. This was sent randomly and replied anonymously by users of the Belong app a dedicated social network for cancer pts and their caregivers. Belong leveraged both push notifications as well as DPROs (Digital patients reported outcome feature) which appeared on user’s apps dashboards for their increased engagement.

**Results:**

605 replies were received from pts (85%) and caregivers (15%). The data was then extracted from the digital platform and analysed. A statistical mathematical predictive model was utilized. A machine learning analytical model was programmed to obtain the results. The most common diagnoses were Breast Cancer (all stages, 34.5%), lung (10.1%) and colorectal cancer (7.2%). 67.1% of the pts were on active treatment at the time of the survey and 11.5% finished the treatment less than 6 months before. 66% of the pts experienced daily fatigue (described as mild, moderate and severe) and 17.2% experienced it weekly. As a direct result of fatigue, 10.1% of all pts reported that their ongoing treatments were delayed, stopped or changed (poor adherence). 137 (27%) of the total number of replies (mainly advanced breast and lung cancers pts) reported severe fatigue and 19% of them confirmed poor treatment adherence. However, better adherence was seen in the subgroup of pts which experienced mild to moderate fatigue.

**Conclusions:**

This survey describes the prevalence and adverse impact of severe fatigue present in certain cancer pts subgroups (advanced breast and lung cancers) which can alter significantly their adherence to planned treatments. Uniquely, while poor treatment adherence was observed in some cancer diagnosis, most of patients who experienced mild to moderate fatigue maintained their treatment schedule. Effective strategies and efforts should aim to solve this common side effect and its deleterious consequences.

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