**Methods:** Patients who underwent CR surgeries between Feb-2020 to Aug-2022 were included in the study. All patient related, disease specific and surgical details were obtained from the prospectively collected database. Patients were divided into two groups: Surgeries before (group-A: during lockdown) and after 22/2/21 (group-B: after lockdown). Patient demographics, surgical details and postoperative complications were collected and analysed using standard statistical tests.

**Results:** A total of 528 patients underwent surgeries during this period, of which 422 had cancer resections. During lockdown 230 patients had surgery (Group-A) and 298 patients had surgery after lockdown (Group-B). The median age of patients is 72 and 73 years in group A and B respectively (p-value 0.29). In group-A, 16% of patients had emergency presentation and in group-B, 10% had emergency presentation (p-value:0.039). Emergency operations were undertaken in 21.74% of patients in group-A compared to 14.43% in group-B (p-value:0.028). Minimal invasive surgery was done in 189 (82.17%) patients during lockdown compared with 253 (84.90%) after lockdown (p-value:0.102). The complications rate was higher in group-A compared to group-B (19.56% in group-A vs 12.75% in group-B, p-value:0.032).

**Conclusions:** Emergency presentation, emergency operations and postoperative complications were higher during lockdown compared with post lockdown. There was no difference with respect to mode of surgery.

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**ThTP7.12 Effect of COVID-19 lockdown on surgical outcomes of patients undergoing colorectal surgeries**

Manoj Srinivas Gowda, Erel Mesut, Bennett Peter, Gowtham Venkatesan, Sri Thulasiraman, Madan Jha

*James Cook University Hospital, Middlesbrough*

**Aims:** When the UK entered the lockdown, the referral pathways and hospital policies changed in order to deal with the pandemic and protect healthcare staff and patients from the virus. The objective of our study is to compare the surgical outcomes of patients having colorectal (CR) surgeries during and after lockdown.