analysed as moderate or severe and who underwent IMV and prone position. The BMI of each individual was identified and analysed to identify alterations. Comorbidities were also identified.

**Results:** 512 individuals were included in the study. 05 (0.9%) had low weight, 119 (23.2%) had normal weight, 183 (35.7%) were overweight, 131 (25.6%) had class I obesity, 44 (8.6%) had class II obesity, and 30 (5.9%) had class III obesity. 307 (59.5%) had a BMI < 30 (NOG) and 205 (40.4%) had a BMI > 30 (OG). The NOG and OG had similar characteristics concerning sex and height, but age was higher in the NOG (p < 0.01). The NOG had, as expected, higher values of weight and BMI than the NOG (p < 0.01). The most prevalent comorbidities in hospitalized COVID-19 patients undergoing prone position were diabetes, hypertension, and cardiovascular diseases. Both groups had similar values regarding diabetes and hypertension. Other cardiovascular diseases were more prevalent in the NOG. Regarding the previous lifestyle, both groups had similar values for alcohol consumption (p=0.22) and smoking (p=0.25).

**Conclusion:** From the results found, it can be concluded that individuals with COVID-19 who developed severe ARDS and underwent IMV, and prone position were from all BMI ranges. However, there was a high proportion of individuals with obesity when considering the BMI of the general population.

**Implications:** Knowing that COVID-19 affects patients of all BMI ranges, especially obese individuals, is important for individual and collective decision-making in health and serves as a warning for authorities to anticipate adjustments in ICUs to receive this patient profile.

**Keywords:** Acute Respiratory Distress Syndrome, Invasive Mechanical Ventilation, Obesity

**Conflicts of interest:** The authors declare no conflict of interest.

**Acknowledgments:** To all hospitals that participated in the data collection of this research.

**Ethics committee approval:** The project was approved by the Research Ethics Committee of the Hospital Irmandade Santa Casa de Misericórdia in Porto Alegre through CAAE 31881320.3.1001.5335 and amendment n° 4.237.704.

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### 12

**FUNCTIONALITY OF ONCOLOGICAL PATIENTS IN PALLIATIVE CARE HOSPITALIZED IN A REFERENCE HOSPITAL IN PARÁ**

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**Background:** Palliative care is intended for any patient with a life-threatening illness, ideally combined with curative care, regardless of age and prognosis. This care does not depend on the prognosis and clinical conditions; it is possible to be provided by the same health team. A desire often expressed by patients in palliative care is to remain physically independent until the end of their lives. Performing daily life tasks and maintaining mobility are areas subject to intervention that result in significant gains in quality of life.

**Objective:** To evaluate the functionality of hospitalized cancer patients under palliative care.

**Method:** This is a prospective, quantitative, and descriptive study. The functionality of patients hospitalized in the palliative care clinics of Hospital Ophir Loyola, a reference in oncology in Pará, was...