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Title of Abstract:	Preliminary findings from a pilot trial examining the feasibility of a brief guided-imagery intervention to address radiotherapy-related distress in patients with head and neck cancer.
Please copy and paste your abstract here: (no more than 300 words):	Objective: The aim of this study is to evaluate the feasibility of a guided-imagery (GI) intervention to reduce radiotherapy-related distress symptoms (i.e., anxiety and depression) in patients with head and neck cancer (HNC). Methods: Patients with HNC were recruited from a radiation oncology clinic prior to initiating radiotherapy and were randomly assigned to either the GI intervention or the control condition. Recruitment approaches were primarily conducted in-person at the time of radiation-oncology appointments through coordination with the medical team, or by telephone. Intervention sessions were conducted in person in the clinic, and surveys were administered electronically via RedCap. Participants also had the option to complete them by phone or in person during clinic appointments. Feasibility was assessed by examining numbers of eligible, approached, screened, and enrolled individuals,

reasons for non-enrollment, adherence to survey completion, GI session attendance, and self-reported use of GI outside intervention sessions.

Results: From November 2018 to March 2020, a 267 patients were screened for eligibility, 118 (44%) were eligible for participation, and 105 were approached regarding their interest in the study. A total of 41 patients were enrolled in the trial, with 18 randomized to the GI intervention and 23 to the control condition. Reasons for non-enrollment included receiving treatment at a location other than the study site, or not being interested because they either were not distressed or were too overwhelmed to participate. Regarding survey completion, 26% of control participants and 50% of intervention participants completed surveys at all timepoints. Among participants in the GI intervention group, 100% attended both sessions.

Conclusions: The data suggest mixed findings related to feasibility of this trail. Enrollment was low and patients struggled to self-administer online surveys, but session attendance was good. Considerations for future trials will be discussed.