BARI 2019
GENERAL ASSEMBLY, SCIENTIFIC CONFERENCES AND RELATED EVENTS

Bari, Italy
June 19th-21st 2019
Hotel Nicolaus
The 2019 Oncology Days in Bari are a unique opportunity for our 93 Members to learn about the progress made by the OECI in the last year. Together with the governing bodies and the management of the Grouping, I tried to outline a better definition of the precise role of the OECI, perform a better dissemination of our initiatives and their results, and implement all the organisational changes deemed necessary to the growth of the Grouping.

In order to favour the building of a European Cancer Mission Initiative, as foreseen by the European Commission as a new instrument to be adopted as part of Horizon Europe, we have tried to coordinate and rationalise our efforts and we are investing to re-create a better European spirit of collaboration in the cancer field also by defining a strategic alliance with Cancer Core Europe.

We will have respected the requests of society and of our patients only when the main cancer actors will move in the same direction and will define a common agenda to improve cancer control, and to answer to the expectations of the survivors.

The OECI decided to participate more visibly and actively as a group of organisations and not as a society or scientists in the initiatives of the European Cancer Organisation (ECCO) and to involve the IT in our core business: the adoption of better organisational practices to improve quality in education, research, care and rehabilitation in our centres.

The investment paid off, as our ISQua (The International Society for Quality in Health Care) certified Accreditation and Designation Programme (A&D) is now seen as the best European approach to certify a cancer centre and it has already been adopted by about 50% of our Members. At the same time, we reached a formal agreement with the European Academy of Cancer Sciences and with the Deutsche Krebshilfe looking to normalise the access to the Designation of Excellence that will certify quality in translational cancer research.

The collaboration with other cancer centres outside EU is now a reality. A first Russian Cancer Centre in Kazan is now involved in our A&D Programme. Other centres in Latin America are already joining our Organisation and demonstrated interest in our quality approach. Interactions with cancer centres in Lebanon and Jordan are under way and we hope to welcome soon new Members from those countries.

Our objectives in the coming years include attracting our Members to EU projects both in the Horizon 2020 calls and in the incoming Horizon Europe. We are trying to converge several topics into a common cancer Mission where the outputs coming from the best European research projects may find a practical exploitation also thanks to the involvement of private companies.

The OECI main strategic objective in the coming years will be to identify and perform initiatives that may help our network of Comprehensive Cancer Centres (CCCs) to adapt to the requirements of a multidisciplinary and personalised approach to patient care and to adopt precision medicine interventions but also to focus on early diagnosis and screening. This general direction is reflected by the reorganisation and modulation of our Working Groups, which are aligned to the main OECI objectives characterizing from now on our Organisation, giving us a precise identification in the European Framework.
We intend to appeal to more Institutes from the Countries that are already represented in the Organisation, as well as to attract those that have not been involved yet.

We will publish 3 position papers before the end of 2019. It is important for us to clarify & define what a CCC is and to explain that this transversal and multidisciplinary model could be found both in a historical cancer centre or in a new organisation within university hospitals.

It is also important to point out that clinical cancer centres (CICCs) are excellent care centres (equivalent to CCC) and explain the difference in research and access to innovation. Our third paper will focus on Network: a great number of cancer patients are not treated in a CCC, but they should be connected with a CCC by a clear Network including IT, guidelines, education and a multidisciplinary discussion of difficult cases.

The developments here briefly summarised have been made possible not thanks to an increased spending that might endanger the Organisation’s financial safety, but to a larger involvement of the OECI staff, of various Member institutes and of individuals of good will. The reserves accumulated in the past years offer a guarantee to our Members but, when needed, will give us the opportunity to support all the new initiatives that are deemed indispensable for the growth of the Organisation.

However, in order to fulfil the ambitious objectives of my Presidency and if we want to obtain concrete recognition of the growing importance of the CCCs as the main infrastructures supporting a better cancer care based on the uptake of the innovation and respecting the need to offer all cancer patients the best available treatments, a deeper and broader involvement of the Members is necessary.

I thank Istituto Giovanni Paolo II of Bari and all the other Italian Organisations, in primis Alleanza Contro il Cancro, that are supporting with generosity and professionalism the Oncology Days 2019.

I hope to welcome in Bari all the Delegates of our Members as well as the Representatives of other European Cancer Societies and Organisations to Bari.

Thierry Philip
OECI President
The year 2019 marks the 41st Anniversary of the founding of the Organisation of European Cancer Institutes (OECI). Italy has been designated, after sixteen years, as the host country for OECI Oncology Days and Bari has been awarded the privilege of welcoming the prestigious event. It must be said that all is being achieved together with the collaboration and support of all the scientific directors of Italian oncological centres and with the fundamental support of Alliance Against Cancer.

The OECI 41st Anniversary is held in Bari, Italy, from June 19th to June 21st in collaboration with the Cancer Institute “Giovanni Paolo II”.

The “2019 OECI Oncology Days” covers a range of topical issues in oncology. The aim of the OECI Scientific Conference “TACKLING TUMOR HETEROGENEITY: BIOLOGICAL, LABORATORY, CLINICAL AND REGULATORY IMPLICATIONS” is to provide a basis for suggesting joint actions which will focus on highlighting tumour heterogeneity among European institutions, even considering the pivotal role of the Cancer institute of Bari in the conduction of translational researches dedicated to the “precision medicine”. The aim is the exchange of data and ideas regarding the difficulties and opportunities which will emerge from a thorough understanding of the impact of tumour heterogeneity in cancer treatment. We envision that this approach may provide ground to move to on to the next generation of cancer treatments, in which a dynamic clinical practice can provide timely adjustments of antineoplastic strategies.

During and after the conference, there will be time for the participants to relax and enjoy the surroundings. Bari is a charming city, with its origins going back 3500 years, before the Bronze Age. The City is easy to visit in that it is divided into three distinct areas: the historical centre, between the two ports, where you can steep in a centuries-old atmosphere where past domains can easily be recognized in the architecture and historical monuments; the “murattian” area with modern buildings, interesting and elegant shops and a beautiful seashore promenade; beyond the central railway station, the sprawling residential suburban area.

All who those involved in the organisation of this event hope that it will be highly successful.

On behalf of the Cancer Institute “Giovanni Paolo II” of Bari, we are looking forward to welcoming you to Bari.
Introduction to the OECI

The OECI is a non-governmental, non-profit Organisation founded in Vienna in 1979 and remodeled in 2005 into OECI-EEIG, a European Economic Interest Grouping. Today, the OECI regroups 93 Members, which include some of the most prominent European Comprehensive Cancer Centres. Several major cancer centres from the Russian Federation, Turkey, Ukraine and Latin America are also members of our Organisation in order to benefit from our Accreditation and Designation Programme.

The OECI aims to promote efficient partnership, reduce fragmentation and increase competitiveness amongst European cancer centres and institutes. This goal is being achieved by promoting and enhancing the concept of “comprehensiveness” and “multi-disciplinarity”, supporting quality in cancer care and dynamically working in crosscut expertise by involving our Working Groups, our Members and promoting synergies with other cancer Organisations.

The OECI is currently geared towards creating a “network of cancer networks” where primary prevention, screening & early diagnosis, basic, translational & clinical research, collaboration for good practices with patients, biobanks and pathobiology, supportive and palliative care, cancer economics and centralising real-life cancer patient data are included. The above goal is part of the Presidential proposal of an OECI evolution that may better answer to the need to work on a European Cancer Mission within the incoming Framework Programme “Horizon Europe”.

The OECI aim is to accelerate the application of multidisciplinary personalised care approaches, to reduce morbidity and to guarantee an equitable access to care to all cancer patients, avoiding the collapse of the National Health Systems all over Europe.

The dissemination of the OECI activities, reports, proceedings are publicised on the OECI website at http://www.oeci.eu and ecancermedicalscience, the Official OECI e-Journal at http://www.ecancer.org

The main OECI events are also announced on Cancerworld and on Tumori Journal.
The OECI Board

President
Thierry Philip
Paris, France

Past President
Dominique de Valeriola
Brussels, Belgium

Executive Secretary
José Maria Laranja Pontes
Porto, Portugal

Treasurer
Manuel Llombart Fuertes
Valencia, Spain

Elected Member
Carlos Caldas
Cambridge, United Kingdom

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Elected Member
Carlos Caldas
Cambridge, United Kingdom

Past President
Dominique de Valeriola
Brussels, Belgium

Elected Member
Gunnar Sæter
Oslo, Norway

Elected Member
Giovanni Apolone
Milan, Italy

Elected Member
Marien van der Meer
Amsterdam, The Netherlands

OECI Director
Claudio Lombardo
Brussels, Belgium - Genoa, Italy

OECI Central Office
Guy Storme
Brussels, Belgium

Working Groups and Activities

Accreditation and Designation
Simon Oberst
Cambridge, The United Kingdom

Supportive and Palliative Care
Tiina Hannele Saarto
Helsinki, Finland

Biobanks and Molecular Pathobiology
Giorgio Stanta
Trieste, Italy

Collaboration for Good Practices with Patients
Dominique de Valeriola
Brussels, Belgium

Cancer Economics and Benchmarking
Wim H. van Harten
Amsterdam, The Netherlands

Communication and Dissemination
Gordon McVie
Milan, Italy

Cancer Outcomes Research
Milena Sant
Milan, Italy

Claudio Lombardo
Brussels, Belgium

Gino Apolone
Milan, Italy
The OECI Quality Network

- OECI Members A&D certified
  Comprehensive Cancer Centre
- OECI Members A&D certified
  Clinical Cancer Centre
- OECI Members in the A&D process
- Other OECI Members
The OECI membership

Austria
- Comprehensive Cancer Center Graz, Graz
- Comprehensive Cancer Center Vienna, Vienna

Belgium
- Institut Jules Bordet (IJB), Brussels
- Kankercentrum Brussel, Brussels
- AZ Groeninge, Kortrijk
- Institut Roi Albert II Cliniques universitaires Saint-Luc, Brussels

Chile
- Instituto Oncológico Fundación Arturo López Pérez (FALP), Santiago

Colombia
- Instituto Nacional de Cancerología ESE, Bogotá

Croatia
- Klinika za tumore Klinicki bolnicki centar Sestre milosrdnice, Zagreb

Czech Republic
- Masarykův onkologický ústav, Brno
- Institut biostatistiky a analýz Lékařská fakulta Masarykovo univerzity, Brno

Denmark
- Vejle Sygehus-Patienternes Kræftsygehus, Vejle
- Køge Forskningscenter, Køge

Estonia
- Sihtasutus Tartu Ülikooli Kliinikum, Tartu
- North Estonia Medical Centre, Tallinn

Finland
- HUS Syöpäkeskus Helsingin Yliopistollinen Sairaalta, Helsinki
- TYKS Syöpäkeskus Turun Yliopistollinen Sairaalta, Turku
- TAYS Syöpäkeskus Tampereen Yliopistollinen Sairaalta, Tampere
- KYS Syöpäkeskus Kuopion Yliopistollinen Sairaalta, Kuopio
- OYS Oulun Yliopistollinen Sairaalta, Oulu

France
- Gustave Roussy, Villejuif
- Centre Léon Bérard, Lyon
- Institut Curie, Paris
- Institut Paoli – Calmettes, Marseille
- Institut Universitaire du Cancer de Toulouse-Oncopole, Toulouse
- Centre François Baclesse, Caen

Germany
- Deutsches Krebsforschungszentrum (DKFZ), Heidelberg
- Universitäts Krebszentrum Dresden, Dresden
- Charité Comprehensive Cancer Center, Berlin

Hungary
- Országos Onkológiai Intézet, Budapest
- Országos Korányi TBC és Pulmonológiai Intézet, Budapest

Ireland
- Trinity St. James’s Cancer Institute, Dublin

Italy
- Centro di Riferimento Oncologico, Istituto Nazionale Tumori, Aviano
- IRCCS Azienda Ospedaliera Universitaria San Martino - IST - Istituto Nazionale per la Ricerca sul Cancro, Genova
- Istituto Europeo di Oncologia, Milano
- Fondazione IRCCS Istituto Nazionale dei Tumori di Milano, Milano
- Istituto Nazionale Tumori Regina Elena, Roma
- Istituto Oncologico Veneto IRCCS-IOV, Padova
- IRCCS Istituto Clinico Humanitas, Rozzano (Milano)
- Istituto Tumori Giovanni Paolo II, Istituto di Ricovero e Cura a Carattere Scientifico, Bari
- Istituto Nazionale Tumori IRCCS “Fondazione G.Pascale” (INT-Pascale), Napoli
- IRCCS, Centro di Riferimento Oncologico della Basilicata (CROB), Rionero in Vulture (Potenza)
* Azienda Unità Sanitaria Locale di Reggio Emilia - IRCCS Istituto in Tecnologie Avanzate e Modelli Assistenziali in Oncologia, Reggio Emilia
  • Ospedale S. Raffaele (OSR), Milano
  • European School of Oncology (ESO), Milano
  • Fondazione IFOM - FIRC Institute of Molecular Oncology, Milano
  • Istituto Scientifico Romagnolo per lo Studio e la Cura dei Tumori [IRST] IRCCS, Meldola (Forli-Cesena)
  • Istituto di Cancrologia FPO-IRCCS, Candriolo (Torino)
  • Istituto Oncologico del Mediterraneo (IOM), Viagrande (Catania)
  • IRCCS - Istituto di Ricerche Farmacologiche Mario Negri, Milano
  • Ente Ospedaliero Ospedali Galliera, Genova
  • Istituto Dermatologico S. Gallicano, Roma

Lithuania
* National Cancer Institute, Vilnius

Norway
* Oslo Universitetssykehus (OUS), Oslo

Poland
* Wielkopolskie Centrum Onkologii, Poznan

Portugal
* Instituto Português de Oncologia do Porto Francisco Gentil E.P.E. (IPO-Porto), Porto
* Instituto Português de Oncologia de Lisboa Francisco Gentil, E.P.E. (IPO-Lisboa), Lisbon
* Instituto Português de Oncologia de Coimbra Francisco Gentil, E.P.E. (IPO-Coimbra), Coimbra

Romania
* The “Prof. Dr. Ion Chiricuta” Institute of Oncology (IOCN), Cluj-Napoca
* SC RTC Radiology Therapeutic Center Amethyst Radiotherapy, Otopeni

Russia Federation
* Tatarstan Cancer Center “TCC”, Kazan
* N.N. Blokhin Russian Cancer Research Centre, Moscow
* National Medical Research Radiological Centre (NMRRC), Moscow

Serbia
* Oncology Institute of Vojvodina, Sremska Kamenica

Slovakia
* Ústav experimentálnej onkológie SAV, Bratislava

Slovenia
* Onkološki Inštitut Ljubljana, Ljubljana

Spain
* Fundación Instituto Valenciano de Oncología IVO, Valencia
* Institut Català d’Oncologia ICO, L’Hospitalet de Llobregat (Barcelona)

Sweden
* Karolinska Institute and University Hospital, Stockholm
* Skånes Universitetssjukhus, Lund
* Uppsala University Hospital, Uppsala

Switzerland
* Comprehensive Cancer Center Zürich (CCCZ), Zürich

The Netherlands
* Netherlands Cancer Institute, Amsterdam
* Maastricht University Medical Centre, Maastricht
* Erasmus MC Cancer Institute, Rotterdam
* IKNL Integraal Kankercentrum Nederland, Utrecht
* Radboudumc Centrum voor Oncologie, Nijmegen
* Rijnstate, Arnhem
* University Medical Center Groningen Comprehensive Cancer Center (UMCG-CCC), Groningen

Turkey
* Anadolu Sağlık Merkezi, Kocaeli
* Dokuz Eylül Üniversitesi Onkoloji Enstitüsü, İzmir

Ukraine
* RE Kavetsky Institute of Experimental Pathology, Oncology and Radiobiology of National Academy of Sciences of Ukraine (IEPOR), Kijiv

United Kingdom
* The Christie NHS Foundation Trust, Manchester
* Cambridge Cancer Centre, Cambridge
* King’s Health Partners Integrated Cancer Centre, London
* Imperial College Healthcare NHS Trust, London
Director's foreword
The Institutional responsibility of the Istituto Tumori of Bari, directly depending on regional NHS and the Ministry of Health, is to develop Translational Cancer Research to guarantee innovation in all fields of cancer care.

Description of the Centre and history
The Istituto Tumori of Bari has been recognised as National Clinical Research Centre in 1985. From 2011, it has been located in a new definitive building where all the modern and innovative clinical, technological and laboratory facilities are available. It has 85 beds dedicated to solid and haemotological cancers, 3 surgery halls, 1 hybrid surgery hall, 1 stereotactic RT surgery hall, all diagnostic technologies, a complete radiotherapy pathway (2 LINAC, 1 IORT, IMRT, Arc-Therapy, etc).

Main research activities
The Institute is characterized by a strong research environment only addressed to Translational Research in Oncology. A clinical Trial Unit is taking care of about 100 clinical trials concerning: new drugs in phase IV studies, interventional radiology, new surgical approaches (H&N, GI, Breast,
Gynecology), new RT procedures. Moreover, thanks to the availability of research laboratories for cellular therapies (GMP facility), pre-clinical drug development, functional biomorphology, genetics, proteomics, metabolomics the search for new biomolecular factor of clinical relevance is intensive and productive (IF>500 points in 2012). New Projects concerning genetic risk factors, early diagnosis biomarkers, predictive and prognostic indicators are ongoing. The Institute has several responsibilities at regional level and, among them, it is the coordinator of the Regional Tumour Registry, hub of the Regional Oncological Net, reference Biobank for Region of Puglia.

Core Facilities
The clinical research is based on a Clinical Trial Unit directly managed by the Scientific Direction. New drug studies are supported in specific by a GLP Pharmacy Unit, a pre-clinical/clinical drug laboratory, a GMP laboratory for therapeutic cellular approaches, a molecular pathology laboratory.
In vitro research is performed in laboratories (pre-clinical drug development, functional biomorphology, genetics, proteomics, metabolomics) where NGS, Tissue microarrays, omics approaches and bioinformatic tools are available. The Institute has his own Biobank storing consecutive series of liquid and solid biological tissues. Within the Institute, the Regional Tumour Registry collecting data of a population of 4 million of subjects is located.

Education
Education is provided to everyone in the framework of the CME, for which the Institute has been recognised as official provider. Events organised directly by the Institute are addressed to educational needs of physicians, researchers, nurses, psychologists, supportive disciplines.

Hybrid Operation Room at the NCI of Bari

Istituto Tumori Giovanni Paolo II, Istituto di Ricovero e Cura a Carattere Scientifico
Viale O. Flacco, 65
70124 Bari
Italy

General Director:
Prof. Vito Antonio Delvino
Scientific Director (acting):
Prof. Nicola Silvestris

OECI contact persons:
Prof. Attilio Guarini
Director of Haematology Unit

Prof. Angelo Paradiso
Director of Experimental Oncology
## Whole Programme - Timetable

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<th>18 June 2019</th>
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<td><strong>MORNING</strong></td>
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<td><strong>Pathology Day</strong></td>
<td><strong>OECI Patient Day</strong></td>
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<td>Afternoon Session</td>
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**Lunch**

18 June 2019

19 June 2019

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| **Scientific Conference**  
**Tackling tumor heterogeneity:**  
Biological, Laboratory, Clinical and Regulatory Implications  
**Session 1**  
**Session 2** | **OECI General Assembly 2019**  
8.00 – 13.00  
Restricted to OECI Members Delegates | **Gala Dinner**  
Polignano a Mare |
| **Lunch** | **Lunch** | **Departure for the Sightseeing Tour:**  
“Matera European City of Culture 2019”  
(Reservation and fee requested)  
**Accreditation & Designation Session**  
**Accreditation & Designation Board Meeting** |
OECI Pathology Day

Early diagnosis in aggressive tumours

The Oncology Days 2019 include the classic appointment with the OECI pathologists that will debate on “Early diagnosis in aggressive tumours”. The general structure of the Day refers to tumours in which the diagnosis is usually difficult and late. New evidences of early diagnosis will be explored for the following three tumour types:

- pancreatic cancer, usually diagnosed in a very late stage;
- ovarian high-grade serous carcinoma, representing the major part of malignant ovarian tumours and with very poor prognosis and short survivals;
- lung cancer, where some very interesting new possibilities of early diagnosis may be discussed.

OECI Patient Day

The increased awareness and interest of OECI members to involve patients in the OECI actions and the need to define practical protocols to support the requests coming from survivors, triggered the OECI to launch for the first time a “2019 OECI Patient Day”, that will be organised in collaboration with the European Cancer Patients Coalition and other interested cancer and patient organisations.

As stated by the European Commission: “there is a growing body of evidence showing that patient-stakeholder involvement at key decision points can drive better innovation and process efficiency and quality”.

Many initiatives have recently started by OECI to more deeply involve the patient in the organisation and redefinition of care, research and education activities in cancer centres. The OECI is supporting actions that bring the patient to the table and take into account our aims to reduce inequalities between patients throughout Europe, restrain cancer costs and integrate palliative and supportive care needs.

The OECI Patient Day represents an opportunity to advance patient engagement and make it more obvious, meaningful, systematic and effective.
The aim of the Conference is the exchange of data and ideas regarding the difficulties and opportunities which will emerge from a thorough understanding of the impact of tumour heterogeneity in cancer treatment. We envision that this approach may provide ground to move to the next generation of cancer treatments, in which a dynamic clinical practice can provide timely adjustments of antineoplastic strategies.

Differences between tumours of the same type in different patients as well as genetic and epigenetic differences between cancer cells in a tumour establish the tumour heterogeneity. Heterogeneity provides the fuel for drug resistance, strongly impacting on the response to therapy and may be responsible for the persistence of some tumor cells even after cancer treatment. Therefore, an accurate assessment of tumour heterogeneity is mandatory for the development of effective therapies and the liquid biopsy, through serial characterization of genetic variants in plasma samples of cancer patients, providing reliable information on spatial and temporal heterogeneity. If we want to explain these spatial and temporal heterogeneity, we have to consider the dynamism of the tumour evolution in both its spatial (locally and throughout the body) and temporal organisation, throughout the course of the disease. In fact, analysis of different areas of the tumour would reveal different genetic and epigenetic alterations in cancer cells and the analysis of the same tumour in function of time might reveal distinct patterns of genetic evolution with respect to the clonal composition of the tumour entity with disease progression or regression. Another factor to consider in the field of tumor heterogeneity is that it could be intertumor (tumor by tumor) and intratumor (within a tumor) heterogeneity.

Intratumor heterogeneity is given by the presence of genomic and biological variations within a tumor lesion gained by tumor cell evolution under diverse microenvironments linked to different etiologies. It has been described in several solid tumours, including lung, breast, ovarian, pancreatic, kidney, colorectal, brain, thyroid and prostate cancers, as well as hematological malignancies. Intertumor heterogeneity identify the same kind of tumors from different patients whose altered genotype and phenotype are induced by diverse etiological and environmental factors. The most well-known inter-patient tumour heterogeneity may be related to host factors, such as tumour microenvironment, germ line mutations influencing treatment response, and the unique somatic mutations that can occur within the tumour of each individual patient. Moreover, metastatic lesions on different secondary sites can arise from different cellular populations within a primary tumour, resulting in heterogeneity among metastases, known as intermetastatic heterogeneity and since metastatic lesions can acquire new mutations and evolve independently with each cell division, heterogeneity within a metastasis can also exist, known as intrametastatic heterogeneity. Ultimately, the decoding of complex clonal relationships and the combinatorial approaches that pair therapies targeting both the predominant drug-sensitive cancer cells and the drug-resistant and drug-tolerant cells seem likely to induce the most-durable responses.
Tackling tumor heterogeneity: Biological, Laboratory, Clinical and Regulatory Implications

PLENARY LECTURE
TUMOR CLINICAL HETEROGENEITY: STATE OF THE ART

Session 1 - BIOLOGICAL HETEROGENEITY
• Oncogenomic landscape in tumor microenvironment: from mutational status to immunotherapeutic implications
• Personalised cancer medicine: consistency and reproducibility of next generation sequencing
• The heterogeneity of tumor microenvironment aggressive lymphomas: the model of DLBCL

Session 2 - PHASE I CLINICAL, MASTER PROTOCOLS AND REGULATORY APPROACHES
• Opportunities and Challenges of Early Phase Clinical Study
• Master Protocols in Oncology: a new cancer treatment paradigm
• The International Landscape of Regulatory Framework between affordability and sustainability of new cancer drugs

Session 3 - ROLE OF NATIONAL AND EUROPEAN NETWORKS
• Data sharing in the era of precision medicine: the European commitment
• The most farsighted view in oncology: OECI 2020 vision
• ACC: the Italian network of cancer centers bridging research and care
Comprehensiveness and Networks have become buzzwords in the European Cancer Community. But what do we mean by these terms? There are a plethora of initiatives in Europe tackling these issues, and we now have magnified potential to collect all types of data from our Centres, Health Care Providers and Research Institutes. But how do we ensure that these data and benchmarks are real indicators of quality outcomes for patients and their experience? How do we encourage trans-organ team learning and institutional quality systems? What are the true dimensions of comprehensiveness? What makes a great Cancer Network?

The OECI Accreditation and Designation Team has 10 years of experience of on the ground Peer Reviews of Cancer Centres and research, care and education for cancer patients. We will share some of this experience and data with you, and invite your input. We will share with you where our revision of the standards has got to, and invite your contributions to that process. We will talk about our proposals for accrediting Cancer Networks. We will discuss the relationship between accreditation of tumour-specific teams and the whole Cancer Centre. And we will show how we propose to reduce the burden on centres who go through re-accreditation every 5 years with OECI.
08.00  **Registration**

08.15  **General Assembly Constitution, welcome and approval of the Agenda**
  Dominique de Valeriola

08.30  **Session 1: Administrative and financial matters**
  Chairperson: Thierry Philip

  **Point 1:** Approval of June 22\textsuperscript{nd} - 2018 General Assembly Minutes
  (vote requested - decision to be taken by simple majority of the OECI Full Members present or represented)
  Thierry Philip

  **Point 2:** Approval of the Financial Statement 2018 and discharge to the Board
  (vote requested - decision to be taken by simple majority of the OECI Full Members present or represented)
  José Laranja Pontes

  **Point 3:** OECI 2019 and 2020 Provisional Budgets
  (vote requested - decision to be taken by simple majority of the OECI Full Members present or represented –only for Provisional 2019)
  Manuel Llombart Fuertes

  **Point 4:** OECI Board composition for the coming years
  (vote requested - decision to be taken by simple majority of the OECI Full Members present or represented)
  Thierry Philip

  **Point 5:** Working Groups and Co-opted Board Members update
  (vote not requested)
  Thierry Philip

  **Point 6:** Membership
  Claudio Lombardo

    New applications for membership
    (vote requested for full membership - decision to be taken by unanimity of the OECI Full Members present or represented; for associate membership - decision to be taken by simple majority of the OECI Full Members present or represented)

  **Point 7:** Oncology Days for the coming years
  Thierry Philip

10.45  **Coffee break**
Session 2:
The OECI European Cancer Mission and the Working Groups activities
Chairperson: Thierry Philip

The European Cancer Mission
Thierry Philip
Accreditation & Designation
Simon Oberst
Biobanks and Molecular Pathobiology
Giorgio Stanta
Collaboration for Good Practices with Patients
Dominique de Valeriola
Cancer Outcomes Research
Milena Sant
Cancer Economics and Benchmarking
Wim H. van Harten
Supportive and Palliative Care
Tiina Saarto

Closure of the 2019 General Assembly
Thierry Philip

13.00 Lunch
The Nicolaus Hotel****
Via Cardinale Agostino Ciasca, 27 - 70124 Bari - Puglia - Italy
Tel.: +39 080 568 21 11 Fax: +39 080 504 20 58
Reservations: info@nicolaushotel.com
https://www.thenicolaushotel.com/

Located in the most lively and modern neighbourhood of Bari, The Nicolaus Hotel is the perfect destination for those who desire a business and leisure stay rich of comfort and exclusive services. The hotel was last renewed in 2017.

Distances
Central Station - 10 minutes (3 km) City Centre - 10 minutes (4 km)
Highway A14 - 5 minutes (6 km) Bari Airport - 15 minutes (12 km)

Highlights
174 Rooms
15 Meeting Rooms
4 Banqueting Locations from 50 to 400 seats

The perfect space for your events
A conference centre with 8 modular spaces, a maximum capacity of over 1000 seats, 6 meter high ceiling, expo area and the latest A/V technologies, 15 meeting rooms, with daylight, including a conference centre with up to 1000 seats and a 6 metres high roof.

The season restaurant
The best of the Apulian cuisine with an international twist served in an elegant and quiet atmosphere.

The haus bar
A unique selection of spirits and cocktails served in an indoor/outdoor space for your business and relax.
**General information about Bari**

**Bari** is the capital city of the Apulia region, on the Adriatic Sea, in southern Italy. It is the second most important economic centre of mainland Southern Italy after Naples, a port and university city, as well as the city of Saint Nicholas. The city itself has a population of 326,799, as of 2015. Bari is made up of four different urban sections. In the north you can find the closely built old town on the peninsula between two modern harbours, with the Basilica of Saint Nicholas, the Cathedral of San Sabino (1035–1171) and the Hohenstaufen Castle built for Frederick II, which is now also a major nightlife district. In the south you can find the Murat quarter (erected by Joachim Murat), the modern heart of the city, which is laid out on a rectangular grid-plan with a promenade on the sea and the major shopping district (the via Sparano and via Argiro).

**Transport**

Bari has its own airport, Bari Karol Wojtyła Airport, which is located 10 km north-west from the centre of Bari. It is connected to the centre by train services from Bari Airport railway station.

The Bus N.16 connects also the airport to the City. The cost of the ticket is 1.50 Euros and the trip last 30 minutes.

It is also possible to use the airport shuttle, more expensive but faster than the regular bus.

The cost of a taxi to the city centre is about 25 Euros.

The Bari Central Station is connected to cities such as Rome, Milan, Bologna, Turin and Venice. Regional services also operate to Foggia, Barletta, Brindisi, Lecce, Taranto and other towns and villages in the Apulia region.

**Climate**

Bari lies in a very stable temperate zone with a very hot summertime. The hottest months are July and August (when temperatures exceed 30 °C). The average temperature in June is between 19 °C and 23 °C without rain.

**Currency**

The Italian currency is Euro. The majority of shops and restaurants accept credit cards. The most popular are VISA, MasterCard, Maestro, American Express and Diners.

**Health & Emergency**

In case of emergency, dial 112 as a general number that may redirect to all the other emergencies.

Police: 113, Emergency Room: 118.
The city was probably founded by the Peucetii. Once it passed under Roman rule in the 3rd century BC, it developed strategic significance as the point of junction between the coast road and the Via Traiana and as a port for eastward trade; a branch road to Tarentum led from Barium. Its harbour, mentioned as early as 181 BC, was probably the principal one of the districts in ancient times; as it is at present, and was the centre of a fishery. The first historical bishop of Bari was Gervasius who was noted at the Council of Sardica in 347. The bishops were dependent on the Patriarch of Constantinople until the 10th century.

**Middle Age**

After the devastations of the Gothic Wars, under Longobard rule a set of written regulations was established, the Consuetudines Barenses, which influenced similar written constitutions in other southern cities. Until the arrival of the Normans, Bari continued to be governed by the Longobards and Byzantines, with only occasional interruption. Throughout this period, and indeed throughout the Middle Ages, Bari served as one of the major slave depots of the Mediterranean, providing a central location for the trade in Slavic slaves. The slaves were mostly captured by Venice from Dalmatia, the Holy Roman Empire from what is now Prussia and Poland, and the Byzantines from elsewhere in the Balkans, and were generally destined for other parts of the Byzantine Empire and (most frequently) the Muslim states surrounding the Mediterranean: the Abbasid Caliphate, the Umayyad Caliphate of Córdoba, the Emirate of Sicily, and the Fatimid Caliphate. For 20 years, Bari was the centre of the Emirate of Bari; the city was captured by its first emirs Kalfun in 847, who had been part of the mercenary garrison installed there by Radelchis I of Benevento. The city was conquered and the Emirate extinguished in 871, due to the efforts of Emperor Louis II and a Byzantine fleet. Chris Wickham states Louis spent five years campaigning to reduce then occupy Bari, “and then only to a Byzantine/Slav naval blockade”; “Louis took the credit” for the success, adding “at least in Frankish eyes”, then concludes by noting that by remaining in southern Italy long after this success, he “achieved the near-impossible: an alliance against him of the Beneventans, Salernitans, Neapolitans and Spoletans; later sources include Sawadān as well.” In 885, Bari became the residence of the local Byzantine catapan, or governor. The failed revolt (1009–1011) of the Lombard nobles Melus of Bari and his brother-in-law Dattus, against the Byzantine governorate, though it was firmly repressed at the Battle of Cannae (1018), offered their Norman adventurer allies a first foothold in the region. In 1025, under the Archbishop Byzantius, Bari became attached to the see of Rome and was granted “provincial” status.

In 1071, Bari was captured by Robert Guiscard, following a three-year siege. Maio of Bari (died 1160), a Lombard merchant’s son, was the third of the great admirals of Norman Sicily. The Basilica di San Nicola was founded in 1087 to receive the relics of this saint, which were surreptitiously brought from Myra in Lycia, in Byzantine territory. The saint began his development from Saint Nicholas of Myra into Saint Nicholas of Bari and began to attract pilgrims, whose encouragement and care became central to the economy of Bari. In 1095 Peter the Hermit preached the first crusade there. In October 1098, Urban II, who had consecrated the Basilica in 1089, convened the Council of Bari, one of a series of synods convoked with the intention of reconciling the Greeks and Latins on the question of the filioque clause in the Creed, which Anselm ably defended, seated at the pope’s side. The Greeks were not brought over to the Latin way of thinking, and the Great Schism was
inevitable.
A civil war broke out in Bari in 1117 with the murder of the archbishop, Riso. Control of Bari was seized by Grimoald Alferanites, a native Lombard, and he was elected lord in opposition to the Normans. By 1123, he had increased ties with Byzantium and Venice and taken the title gratia Dei et beati Nikolai barensis princeps. Grimoald increased the cult of Saint Nicholas in his city. He later did homage to Roger II of Sicily, but rebelled and was defeated in 1132.

Bari was occupied by Manuel I Komnenos between 1155 and 1158. In 1246, Bari was sacked and razed to the ground; Frederick II, Holy Roman Emperor and King of Sicily, repaired the fortress of Baris but it was subsequently destroyed several times. Bari recovered each time.

Early modern period
Isabella d’Aragona, princess of Naples and widow of the Duke Gian Galeazzo Sforza of Milan, enlarged the castle, which she made her residence, 1499–1524. After the death of Queen Bona Sforza, of Poland, Bari came to be included in the Kingdom of Naples and its history contracted to a local one, as malaria became endemic in the region. Bari was awakened from its provincial somnolence by Napoleon’s brother-in-law Joachim Murat. As Napoleonic King of Naples, Murat ordered the building in 1808 of a new section of the city, laid out on a rationalist grid plan, which bears his name today as the Murattiano. Under this stimulus, Bari developed into the most important port city of the region. The legacy of Mussolini can be seen in the imposing architecture along the seafront.
Tourist attractions

**Basilica of Saint Nicholas**
The Basilica di San Nicola (Saint Nicholas) was founded in 1087 to receive the relics of this saint, which were brought from Myra in Lycia, and now lie beneath the altar in the crypt, where are buried the Topins, which are a legacy of old thieves converted to good faith. The church is one of the four Palatine churches of Apulia.

**Bari Cathedral**
Bari Cathedral, dedicated to Saint Sabinus of Canosa (San Sabino), was begun in Byzantine style in 1034, but was destroyed in the sack of the city of 1156. A new building was thus built between 1170 and 1178, partially inspired by that of San Nicola. Of the original edifice, only traces of the pavement are today visible in the transept.

An example of Apulian Romanesque architecture, the church has a simple Romanesque façade with three portals; in the upper part is a rose window decorated with monstrous and fantasy figures. The interior has a nave and two aisles, divided by sixteen columns with arcades. The crypt houses the relics of Saint Sabinus and the icon of the Madonna Odigitria.

The interior and the façade were redecorated in Baroque style during the 18th century, but these additions were removed in a 1950s restoration.

**Petruzzelli Theatre**
The Petruzzelli Theatre, founded in 1903, hosted different forms of live entertainment, or nineteenth century “Politeama”. The theatre was all but destroyed in a fire on October 27th, 1991. It was reopened in October 2009, after 18 years.

**Swabian Castle**
The Norman-Hohenstaufen Castle, widely known as the Castello Svevo (Swabian Castle), was built by Roger II of Sicily around 1131. Destroyed in 1156, it was rebuilt by Frederick II of Hohenstaufen. The castle now serves as a gallery for a variety of temporary exhibitions in the city.

**Pinacoteca Provinciale di Bari**
The Pinacoteca Provinciale di Bari (Provincial Picture Gallery of Bari) is the most important art gallery in Apulia. It was first established in 1928 and contains many paintings from the 15th century up to the days of contemporary art.

**The Russian Church**
The Russian Church, in the Carrassi district of Bari, was built in the early 20th century to welcome Russian pilgrims who came to the city to visit the church of Saint Nicholas in the old city where the relics of the saint remain.

**Barivecchia**
Old Bari, is a sprawl of streets and passageways making up the section of the city to the north of the modern Murat area. Barivecchia was until fairly recently considered a no-go area by many of Bari’s residents due to the high levels of petty crime. A large-scale redevelopment plan began with a new sewerage system, followed by the development of the two main squares, Piazza Mercantile and Piazza Ferrarese.
Sightseeing Tour Friday June 21st

Matera European City of Culture 2019

A daily tour to Matera will take place on Friday 21st afternoon after the OECI General Assembly 2019. The payment of a fee is requested.

Departure at 2.00 PM by bus from Nicolaus Hotel. Transfer to Matera and guided visit of the “Sassi di Matera”. Dinner in a typical restaurant and back to the Nicolaus hotel by bus.

Matera, located in the Southern Italian region of Basilicata has been awarded the title of the 2019 European Capital of Culture.

For over 9,000 years people have lived in Matera. The Romans founded the city in the third century BC. From its beginning, people inhabited “Sassi” in Matera. Sassi are buildings and caves carved from stone and cliffs. The roof of one building is often the floor of another.

The ancient city of Matera is steeped in history and is home to the famous Sassi, a designated UNESCO World Heritage Site. While part of the town spreads out across the Murgia Plateau, the famed Sassi comprises cave dwellings and rock churches built on and dug into the sides of the Gravina Gorge which drops dramatically away beneath it. The cave dwellings of the Sassi are the most extensive example of their kind in the Mediterranean.

Life in Matera in the past

Families of as many as 10 people and their animals would live together in one of the cave structures. The residents did devise a system of rainwater channels and cisterns dug beneath homes. It was in part this ingenious water system that earned Matera a place on Unesco’s World Heritage list in 1993.

Life in Matera now

Matera was deserted after the inhabitants were resettled. But in the late 1970s artisans began to come back to the area and over the years a group of young professionals and others spearheaded the restoration of the city. The Sassi district has gone through extensive re-development and hosts some incredible cave hotels, private homes and restaurants, lovingly restored to enhance their original features. Explore this complex and beautiful network of caves, churches, streets, stairways, archways and terraces on foot to best experience this atmospheric city.
Cuisine and gastronomy

Bari’s cuisine is based on three typical agricultural products found within the surrounding region of Apulia, namely wheat, olive oil and wine. The local cuisine is also enriched by the wide variety of fruit and vegetables produced locally. Local flour is used in homemade bread and pasta production including, most notably, the famous orecchiette, recchietelle or strascinate, chiancarelle and cavatelli.

Homemade dough is also used for baked calzoni stuffed with onions, anchovies, capers and olives; fried panzerotti with mozzarella, simple focaccia alla barese with tomatoes, little savoury taralli, friselle and sgagliozze, fried slices of polenta, all make up the Bari culinary repertoire.

Vegetable minestrone, chick peas, broad beans, chicory, celery and fennel are also often served as first courses or side dishes.

Meat dishes and the local Barese ragù often include lamb and pork.

Pasta al forno, a baked pasta dish, is very popular in Bari and was historically a Sunday dish, or a dish used at the start of Lent when all the rich ingredients such as eggs and pork had to be used for religious reasons. The recipe commonly consists of penne or similar tubular pasta shapes, a tomato sauce, small beef and pork meatballs and halved hard-boiled eggs. The pasta is then topped with mozzarella or similar cheese and then baked in the oven to make the dish have its trademark crispy texture.

Fresh fish and seafood are often eaten raw. Octopus, sea urchins and mussels feature heavily. Perhaps Bari’s most famous dish is the oven-baked patate, riso e coze (potatoes with rice and mussels).

Bari and the whole Apulian region have a range of wines, including Primitivo, Castel del Monte, and Muscat, notably Moscato di Trani.
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