

Organisation of European Cancer Institutes



In collaboration with







PROMOTING INNOVATION AND QUALITY FOR PATIENTS MILAN 2021 SCIENTIFIC CONFERENCES June 16th 2021



SECOND ANNOUNCEMENT



OECI2021 ONCOLOGY DAYS Welcome to OECI 43

Dear OECI Members,

It is our pleasure to introduce you all to the virtual edition of the OECI Oncology Day 2021.

Unfortunately, once again, due to the difficulties arisen by the COVID-19, we had to postpone our meeting in presence and organise a virtual event. We hope, however, to greet you all in person next year over in Valencia, where the OECI Oncology Days 2022 will take place, thanks to the kind support of the Fundacion Instituto Valenciano de Oncologia.

Before introducing the scientific sessions, we would like to first spend a few words and take a look together at the current European cancer landscape and its latest developments and initiatives.

Cancer is part of the humans's history and unfortunately, it is very much part of our present too – all our families have been touched in some way by the disease. Every year almost 4 million European citizens are diagnosed with cancer, which is Europe's second leading cause of death – it claimed more than 1.3 million lives last year. That is a shocking figure and this number is expected to continue to rise. The COVID pandemic is expected to contribute to worsening the figures as well.

It is only by working together, by listening to one another, and by taking practical actions, in synergy with each other, that we can effectively respond to the complex and multifaceted demands of cancer treatment, care, and research. At the same time, the requests of the healed patients must also be taken into account. It is mandatory to support them by soothing their fears, offering the best rehabilitation procedures and helping them to easily reintegrate in the social and family journey.

As the EU Commissioner for Health and Food Safety said, and I quote:

"No country alone has the knowledge and capacity to treat all rare and complex conditions."

We must therefore continue cooperating, to share life-saving knowledge at a European level, and beyond.

The European Union has recognised this societal challenge and has already made great stride: the Framework Programme Horizon Europe is, in fact, putting on the table a missionoriented approach with a Mission Board which is working with an Assembly, in order to make conquering cancer within the next 7 years a "mission possible". As you all know, the Cancer Mission Board suggested **13 Recommendations** whose ultimate goal is to transfer the best possible cancer culture **all across Europe**.

In **low-resourced countries**, in fact, there are still numerous barriers to take down. These include, for instance, poor access to health services and inadequate diagnostic facilities. Within the European Union, there are particularly worrying indicators suggesting that **survival rate inequalities are a major challenge, with worse outcomes experienced in Eastern European countries**.

So how do we transform this worrying scenario into a productive area of dynamic change? How do we pave the way to handling economic and social inequalities in countries with less developed systems?

The Mission Cancer Board answers this question by suggesting to combine innovative

prevention and treatment strategies in a sustainable state-of-the-art virtual European cancer centre/infrastructure. This way it will be possible to achieve a long-term survival of 3 out of 4 cancer patients in countries with well-developed healthcare systems by 2030. This is the ambitious challenge put forward by the European Cancer Mission.

The Mission Board and Assembly suggestions will be used as a basis for further stakeholder and citizen engagement activities during the rest of 2021. Synergies will be developed with other European Union policies and actions, in particular **Europe's Beating Cancer Plan**, which was presented by the EU Commissioner Stella Kyriakides on February 3rd 2021.

The aim of Europe's Beating Cancer Plan is to tackle the entire disease pathway, with four main action areas: (1) prevention; (2) early detection; (3) diagnosis and treatment; and (4) quality of life of cancer patients and survivors. In order to achieve this the EU will provide substantial financial support with \in 4 billion to Member States in their efforts to make their health systems more robust.

As we said before, cancer must be fought on several fronts and in order for us to realize the potential of these instruments put forward by the European Union. Health professionals, researchers, as well as entrepreneurs and non-profits must collaborate in implementing these initiatives bottom-up. We must harness these new opportunities and make sure that protecting our patients, collaborating and proactively listening to them is built into our efforts from day one.

This is a very exciting time for the entire cancer community and the OECI, the biggest worldwide cancer network. We must not forget that it is patients who have the most at stake in these efforts and we must **work with them, not only for them**. Patients cannot be on the sidelines.

The OECI intends to be an active actor of the incoming European initiatives, where I hope our massive network of Members may find a role for their running activities with some of the 13 Recommendations set out.

Let us take also the opportunity to mention the developments which marked the OECI activities and initiatives over the past year, which has been considerably burdened by the restrictions imposed by the COVID-19 pandemic.

One of the main challenges that has produced a fertile ground of debate within the OECI over the past year was the **question of multidisciplinarity in care**. As a matter of fact, the increasing complexity of cancer care raises the question of **the role assigned to multidisciplinary care**, **as opposed to the organ-based approach**, for health systems in general and for quality of care, in particular in the organisation of cancer services. The literature on the subject clearly associates a pan-cancer approach to cancer care with better adherence to clinical practice guidelines and enhanced co-ordination of hospital services.

What's more, whilst several national health system across the EU recognise multidisciplinary care as a health priority, OECI is currently the only European Cancer Organisation whose quality Programme, certified by ISQua, the International Society for Quality in Health Care, is based on a multidisciplinary approach.

OECI certified centres span all across Europe, and we are approaching the remaining ones to attract their cancer infrastructures to the OECI membership and thus endorse quality improvement in those countries where advancement is still needed. OECI is aware that the

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standards that may be certified in some of the most prominent cancer centres cannot be imposed "toutcourt" to minor centres or cancer departments located in Region/Countries with a very low PPP. This is why the Accreditation and Designation Programme is working to create the conditions to overcome this critical point.

We would hereby like to extend our gratitude to the Chairs of the Oncology Day 2021 to whom is entrusted the task to explain how OECI is approaching major cancer core objectives to increase quality, reduce the burden of the too high cost of drugs, apply the best available protocols and design the future of care with patients.

As already mentioned, we want to grow together in order to reduce present-day inequalities and offer all European citizens the same quality of care. This is the reason why OECI decided to set-up a Working Group on "Collaboration for Good Practices with Patients" working in close collaborations with Patient Organisations.

Another lingering difficulty to takle is expenditure on cancer medicines. Lack of adequate access to cancer medicines remains an issue, with high prices often considered as the main contributory factor. It is in response to this alarming scenario that OECI is a working party of the European Fair Pricing Network, an initiative that promotes activities of research and advocacy, which may help secure fairer prices of cancer medicines and enable affordable, population-wide access to cancer drugs all across Europe.

OECI's WG Biobanks and Molecular Pathobiology, a highly proactive Working Group aims to promote and disseminate molecular approaches for tumor stratification, and prognostic criteria.

Finally, it has become more and more clear to us that both the public and private sector need to be involved. This is why our Cancer Outcomes Research Working Group has been deeply involved in designing and promoting the DIGItal Institute for Cancer Outcomes REsearch, a European network open to all OECI cancer centres interested in partecipating.

DIGICORE is the result of the partnership of some 20 stakeholders which came together in a pan-EU research collaboration to study patient cancer outcomes. In a few words, an exciting opportunity designed by several prominent cancer centres, three national networks (UNICANCER, Alleanza Contro il Cancro and the German National Molecular Genomic Consortium), as well as segments of the industry (IQVIA).

We would hereby like to thank the chairs of our WGs, Dominique de Valeriola, Wim van Harten, Giorgio Stanta, Giovanni Apolone and Simon Oberst for their precious contribution to the OECI activities and initiatives.

This year, despite the difficulties linked to the pandemic, the OECI activities have not been reduced and, at least, our budget benefit from the obligation to smartwork which has been also been the case for the A&D site visit that have been realised by a virtual approach.

The reduction on regular costs gave us the opportunity to invest, part of the positive balance by **financing three "one-shot" projects**. After receiving a number of proposals from our WGs, and the A&D Programme, the OECI Board agreed to allocate \in 40.000 to the proposal put forward by the Cancer Outcome Research WG on "**Patient Reported Outcome and Patient Reported Evidence measures in Real World Data and Real World Evidence studies**". Another \in 30.000 will be allocated to the Health Economics WG and their proposal on "**Financial toxicity in breast-, colorectal-, head and neck cancer patients within a multi-country framework**" and finally, \in 40.000 have been allocated to the A&D

Programme and their proposal to carry out a Research, a Conference, and a Publication on: **"What is a comprehensive approach to cancer?**"

For all the briefly listed activities, we have to thank the Board and the Extended Board members and also the OECI Director, Claudio Lombardo and his team at the OECI Liaison Office, for their professionalism, dedication and competence.

I firmly believe OECI **is the Way to Quality** and that together we can reach the ambitious goals we set and that the interests of individuals will not prevail over the expectations of our patients who must always be at the centre of all our efforts.

Once again, I would like to thank the Fondazione IRCCS - Istituto Nazionale dei Tumori for kindly accepting to host and organise the 2021 Edition the OECI Oncology Days.



OECI thanks the **Fondazione IRCCS - Istituto Nazionale dei Tumori** for kindly accepting to organise the 43rd Edition of the OECI Oncology Days

– Sistema Socio Sanitario





OECI2021 ONCOLOGY DAYS

Fondazione IRCCS - Istituto Nazionale dei Tumori di Milano

www.istitutotumori.mi.it



Referring Number

Director's foreword

Fondazione IRCCS - Istituto Nazionale dei Tumori has always supported the OECI because we are convinced that collaboration and intensive networking among cancer institutes are essential to face the complex challenge posed by cancer to patients, healthcare stakeholders and society. Together with the other OECI members, we are proud to contribute by delineating and pursuing a common strategy in the battle against cancer and in the fight against inequalities in treatment within Europe.

Description of the Centre and history

Since its establishment in 1928, INT has always aimed to provide the highest standard of patient care while pursuing preclinical and clinical research and promoting its swift translation into better prevention, diagnosis, therapy, rehabilitation, and survival.

Main research activities

Current research includes investigation of molecular and cellular determinants and mechanisms of tumor onset, growth and progression, as well as analysis of inherited factors underlying genetic susceptibility to cancer. More therapeutically oriented studies are aimed at developing and selecting new target-specific agents. Identification of growth signals and checkpoint functions driving cell proliferation and survival is essential for the detection and validation of predictors of tumor progression and treatment response, and helps define new targets for drug therapy and novel therapeutic approaches that modulates cellular response by combining chemopreventive and anticancer agents. Antitumor immunity and the regulatory mechanisms interfering with the immune recognition of tumor cells are also being studied.

Finally, crucial in designing and conducting prospective clinical studies is the strong and continuous collaboration between the Experimental Oncology and Clinical Departments. Epidemiological and translational research aims to gain knowledge of lifestyle and genetic risk factors for use in cancer prevention. We also look out for inequalities in prevention and treatment so that corrective action can be taken.

In this field, we focus on dietary intervention studies targeting the general population, high-risk subgroups, and cancer patients to minimize the risk of recurrence; the study of inequalities in survival and cure rates of cancer patients as the systematic description of cancer incidence, prevalence, and survival explains survival differences between and within countries, to devise actions that may reduce such inequalities; research on environmental and occupational risk factors, from standard epidemiological designs to the systematic monitoring of occupational risk by linking cancer registry data and occupational history files.

Core Facilities

Core facilities and equipment for research at INT include 1) a collection of annotated biological specimens with known clinical history; 2) updated databases with clinical information on patients enrolled in clinical studies; 3) laboratories for tissue culture, molecular biology, pathology and biochemistry; 4) a functional genomics facility with Illumina and Agilent platforms, and instrumentation for next-generation and Sanger sequencing; 5) statistical support for planning correlative and integrated translational research studies.

Education

PhD studentships, postdoctoral research fellowships, graduate student training, medical, nursing, psychology and social service training as well as continuing medical education are in our portfolio of educational opportunities. We provide education and training at a postgraduate level by offering a range of highly specialised Master courses, running the PhD programme of the Open University (about 20 students), and hosting about 30 PhD students from other universities.

NAZIONALE DEI

OTUTITS

The OECI Board



Accreditation and Designation Programme



Working Groups









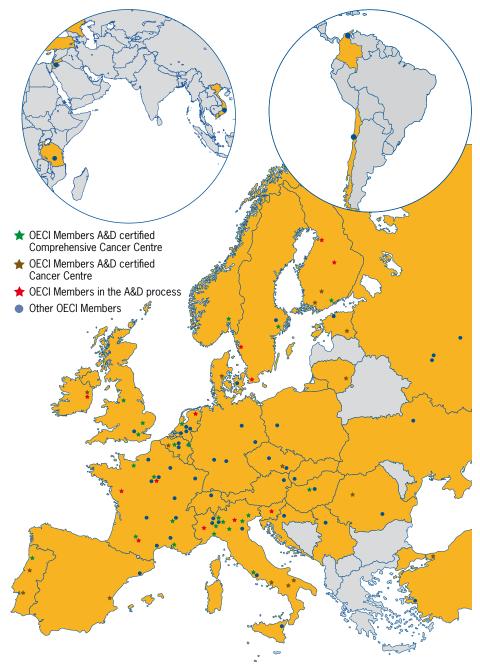




OECI-EEIG Central Office - c/o Fondation Universitaire - 11, Rue d'Egmont Phone: +32 2 512 0146, B-1000 Brussels, Belgium

OECI2021 ONCOLOGY DAYS

The OECI Network



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Slovenia

Spain

Sweden

Göteborg

(CCCZ), Zürich

The Netherlands

Amsterdam

Rotterdam

Turkey

Ukraine

Switzerland

Tanzania

* Onkološki Inštitut Ljubljana, Ljubljana

***** Fundación Instituto Valenciano de

L'Hospitalet de Llobregat (Barcelona)

* Karolinska Institute and University

* Skånes Universitetssiukhus. Lund

Uppsala University Hospital, Uppsala

Comprehensive Cancer Center Zürich

* Sahlgrenska University Hospital.

• The Aga Khan Hospital, Dar es

***** Netherlands Cancer Institute.

★ Maastricht University Medical

• Erasmus MC Cancer Institute,

IKNL Integraal Kankercentrum

* Anadolu Saglik Merkezi, Kocaeli

Pathology, Oncology and

Dokuz Evlül Üniversitesi Onkoloji

• RE Kavetsky Institute of Experimental

Radiobiology of National Academy of

Sciences of Ukraine (IEPOR), Kviv

* The Christie NHS Foundation Trust.

***** King's Health Partners Integrated

Imperial College Healthcare NHS

Cancer Centre, London

*** Cambridge Cancer Centre**, Cambridge

Viet Nam National Cancer Hospital.

Radboudumc Centrum voor

★ University Medical Center Groningen

Comprehensive Cancer Center

Salaam, Dar es Salaam

Centre+, Maastricht

Nederland, Utrecht

Oncologie, Niimegen

• **Rijnstate**, Arnhem

Enstitüsü. İzmir

United Kingdom

Manchester

Trust, London

Bênh viên K

Viet Nam

Hanoi

(UMCG-CCC), Groningen

Institut Català d'Oncologia ICO,

Oncología IVO, Valencia

Hospital, Stockholm

THE OECI MEMBERSHIP

The OECI membership

Austria

 Comprehensive Cancer Center Vienna, Vienna

Belgium

- * Institut Jules Bordet (IJB), Brussels
- **AZ Groeninge**, Kortrijk
- Oncologisch Centrum UZBrussel, Brussels
- Institut Roi Albert II Cliniques universitaires Saint-Luc, Brussels

Chile

 Instituto Oncológico Fundación Arturo López Pérez (FALP), Santiago

Colombia

 Instituto Nacional de Cancerologia – ESE. Bogotà

Croatia

 Klinika za tumore Klinicki bolnicki centar Sestre milosrdnice. Zagreb

Czech Republic

- * Masarykův onkologický ústav. Brno
- Fakultní nemocnice v Motole, Prague
- Institut biostatistiky a analýz Lékařská fakulta Masarykovy univerzity, Brno

Denmark

- * Vejle Sygehus, Patienternes Kræftsygehus en del af Sygehus Lillebælt, Veile
- Kræftens Bekæmpelse Center for Kræftforskning, Copenhagen

Estonia

- * Sihtasutus Tartu Ülikooli Kliinikum. Tartu
- North Estonia Medical Centre, Tallin

Finland

- *** HUS Syöpäkeskus Helsingin Yliopistollinen** Sairaala. Helsinki
- * TYKS Syöpäkeskus Turun Yliopistollinen Sairaala, Turku
- ***** TAYS Cancer Centre Tampere University Hospital, Tampere
- ***** KYS Syövänhoitokeskus Kuopion Yliopistollinen Sairaala, Kuopio
- * OYS Oulun Yliopistollinen Sairaala. Oulu

MEMBERSHIP France

OECI

THE

- * Centre Léon Bérard, Lyon
- *** Institut Curie**, Paris
- ★ Institut Paoli Calmettes, Marseille
- ★ Institut Universitaire du Cancer de
- Toulouse-Oncopole. Toulouse * Centre Francois Baclesse, Caen
- **★ APHP-CARPÉM Institute**, Paris
- ★ Institut de Cancérologie de l'Ouest (ICO). Angers - Saint Herblain
- * Association Toulousaine de Oncologie Publique (ATOP), Toulouse

- Gustave Roussy. Villeiuif
- Institut de cancérologie Strasbourg **Europe ICANS**. Strasbourg
- Centre Jean Perrin, Clermont-Ferrand
- Institut du Cancer de Montpellier (ICM). Montpellier
- Institut Godinot, Reims
- Institut de cancérologie
- des Hospices Civils de Lyon, Lyon
- Assistance Publique Hôpitaux de Paris Institut Universitaire de Cancérologie APHP. Sorbonne Université, Paris
- Centre de Lutte Contre le Cancer Georges-Francois Leclerc, Dijon
- Centre Henri Becquerel, Rouen Institut Sainte Catherine, Avignon
- Germany
- Deutsches Krebsforschungszentrum (DKFZ), Heidelberg
- Nationales Centrum f
 ür Tumorerkrankungen Dresden NCT/UCC. Dresden
- Charité Comprehensive Cancer Center. Berlin
- Universitäres Centrum für Tumorerkrankungen (UCT). Frankfurt
- Hungary
- * Országos Onkológiai Intézet, Budapest • Országos Korányi TBC és Pulmonológiai Intézet. Budapest
- Ireland
- * Trinity St. James's Cancer Institute, Dublin

* Beaumont Hospital, Dublin

- Italv
- * Centro di Riferimento Oncologico,
- Istituto Nazionale Tumori, Aviano ***** IRCCS Ospedale Policlinico San Martino, Genova
- * Istituto Europeo di Oncologia. Milano
- * Fondazione IRCCS Istituto Nazionale dei Tumori, Milano
- * Istituto Nazionale Tumori Regina Elena. Roma
- ★ Istituto Oncologico Veneto **IRCCS-IOV**, Padova
- * IRCCS Istituto Clinico Humanitas. Rozzano (Milano)
- * Azienda Unità Sanitaria Locale di Reggio Emilia - IRCCS Istituto in Tecnologie Avanzate e Modelli Assistenziali in Oncologia, Reggio Emilia
- * 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)
- * Istituto di Candiolo FPO-IRCCS. Candiolo (Torino)
- ★ IRCCS Ospedale Sacro Cuore Don Calabria, Negrar di Valpolicella (Verona)
- Ospedale San Raffaele (OSR), Milano
- Fondazione IFOM FIRC Institute of
- Molecular Oncology, Milano Istituto Scientifico Romagnolo
- per lo Studio e la Cura dei Tumori [IRST]-IRCCS, Meldola (Forlì-Cesena)
- Istituto Oncologico del Mediterraneo s.p.a. (IOM), Viagrande (Catania)
- IRCCS Istituto di Ricerche Farmacologiche Mario Negri, Milano
- Istituto Dermatologico San Gallicano, Roma

Jordan

- King Hussein Cancer Center, Amman Lithuania
- * National Cancer Institute, Vilnius Norway
- * Oslo Universitetssykehus (OUS), Oslo Poland
- Wielkopolskie Centrum Onkologii. Poznań Portuga
- * 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), Clui-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

Biomedicínske centrum Slovenskei

akadémie vied. Bratislava

Programme

09:00 Opening Session

Welcome from the Hosts

Giovanni Apolone - OECI President Elect **Maria Cristina Messa** - Italian Minister of University & Research **Giovanni Leonardi** - Director General Research - Italian Ministry of Health

Introduction

Thierry Philip - OECI President Walter Ricciardi - Chair European Cancer Mission Board

09.30 The role of cancer centres in the European Beating Cancer Plan Stella Kyriakides - European Commissioner DG Health and Food Safety

10.00 Rebuilding on the successful experiences of patient involvement

For OECI centres, patients are bringing a different and valuable perspective to the quality improvement process in hospitals by expressing their special needs and priorities. A true alliance of patient involvement and quality assessment in cancer centres and networks will be key to rebuild a more resilient and humanistic healthcare system.

- 10.00 Patient Involvement: OECI Centres' Greatest Asset for Quality Dominique de Valeriola
- 10.05 Patient Engagement in the Research Unit: a Current Future Chiara Barbieri
- 10.20 A 360° Look at Oncology by Patients for the Patients Emmanuelle Arfe & Amanda Olivon
- 10.35 Tools for a more Personalized Oncological Care: from Digital Narrative Diaries to a Community Sharing Digital Space Maria Cecilia Cercato
- 10.50 Discussion

11.00 Private Webinar Session

12.00 Chair: Patrick Miqueu

LINK:

https://zoom.us/j/93889080848?pwd=SStDejFJdjVaVFhDdE1Gc2EwbEdYZz09

ID: 938 8908 0848

PASSWORD: 078166

OECI2021 ONCOLOGY DAYS

11.00 Cancer Economics and Benchmarking WG Session: 12.00 "Pricing, Coverage and Access to Innovative Cancer Drugs"

This Session deals with access and pricing of innovative and expensive new cancer medicines. In view of the impressive pipeline, one can doubt the financial sustainability of the system. Sabine Vogler from Vienna/Austria will present her findings in comparing list prices and on equity in the access to drugs when comparing EU countries. Further Amithab Chandra from Harvard/Boston will expand on the issue of sustainability of the (cancer-) healthcare system in view of the drug pipeline. Last Nora Franzen from the NKI wil present a review of alternative policy options for drug pricing, views from key opinion leaders in the field as well as first results of gaming experiments in generating evidence under these policy options.

- 11.00 Welcome and Update of the European Fair Pricing Network Wim van Harten
- 11.05 Access to innovative cancer drugs in Europe Sabine Vogler
- 11.20 The drug pipeline and financial sustainability of cancer care provision Amitabh Chandra
- 11.35 Innovative policies to reduce drug pricing (review of options and scenarios) Nora Franzen Valesca Retèl
- 11.50 Discussion

12.00 Private Webinar Session

13.00 Chair: Giorgio Stanta LINK: https://zoom.us/j/99887901940?pwd=eHBSVnJjRUk2YXV1cnpHbkhWNWFNQT09 ID: 998 8790 1940 PASSWORD: 493270

12.00 Biobanks and Molecular Pathobiology WG 13.00 Session: Molecular diagnosis and clinical research reproducibility: a European Mission

Reproducibility and exchangeability of molecular results in diagnostics and clinical research is one of the main arguments of debate in clinical molecular pathology. Specific European projects and initiatives are therefore needed in order to find a large consensus guaranteeing equal approaches across countries. The OECI Biobanking and Molecular Pathobiology WG interacts with several initiatives looking to define a common language in a wider clinical network. The Pathology Day represents therefore an important dissemination step, and the place where to discuss the best approaches to standardise the diagnostic process and to guarantee the reproducibility of results. All this because we have to guarantee the reproducibility and the exchangeability of molecular analyses among European health institutions. There are already different European projects that address directly this necessity and it is extremely important to let know the results of this project to obtain a diffused spreading and application.

12.00 Welcome and Introduction

Giorgio Stanta

- 12.05 Heterogeneity of cancer: HERCULES project Olli Carpen
- 12.20 Standardization of pre-analytical procedures for diagnostics and clinical research: SPIDIA4P project Uwe Oelmueller
- 12.35 Integrated and standardized NGS workflows for personalized therapy: the INSTAND4P project for the evaluation of NGS commercial items Speaker tbd
- 12.50 Virtual Molecular Tumour Boards Gennaro Ciliberto

13.00 Break

13.00 Private Webinar Session

14.00 Chair: Giorgio Stanta

LINK: https://zoom.us/j/93775249562?pwd=ZWxYZG0zS0xaWIM3UXFaYTZDb3BBdz09 ID: 937 7524 9562 PASSWORD: 507167

OECI2021 ONCOLOGY DAYS

14.00 Cancer Quality Session:

18.00 Evaluating Quality Improvement in European Cancer Services

The Sessions will:

- Highlight case studies of centres who have improved structures and processes as a result entering the Programme
- Discuss progress in evaluating cancer networks; benchmarking; and excellent practices
- Examine quality from a patient outcomes perspective
- Focus on the place of quality improvement within the EU Cancer Mission and Europe's Beating Cancer Plan, especially regarding Comprehensive Cancer Infrastructures.

14.00 Plenary Lecture

Evaluating Quality in Cancer Care and Research in Europe *Simon Oberst*

1st Workshop

- 14.20 Developments in the OECI Quality Programme Moderator: Mef Nilbert
- 14.20 Specific developments in the OECI A&D Programme in 2020-2021:
 - Virtual audits
 - Network Standards and evaluation
 - Excellent practices project

Wim van Harten

- 14.40 Case Studies from Audited Centres: What Improvements has the OECI process driven?
 - 2 invited presentations (10 minutes each)
 - Dublin (Paul Browne)
 - Helsinki (Johanna Mattson)
- 15.00 Benchmarking comprehensiveness data from OECI's accredited centres József Lövey
- 15.15 Questions and Discussion

15

2nd Workshop

15.25 Measuring Quality outcomes Moderator: Dominique de Valeriola

- 15.25 How Quality of Life assessment can improve quality of care Lonneke van De Poll
- 15.40 Quality related to patient outcomes research Giovanni Apolone
- 16.00 Questions and Discussion
- 16.15 Break

3rd Workshop

- 16.30 Quality in the context of the aims of the EU Cancer Mission and Europe's Beating Cancer Plan Moderator: Peter Nagy
- 16.30 The Importance of integrating cancer research and clinical care Gunnar Saeter
- 16.45 The Vision of the EU Cancer Mission Board for Comprehensive Cancer Infrastructures Christine Chomienne - Vice-Chair of the EU Cancer Mission
- 17.00 IPAAC Joint Action to the finish line Tit Albreht
- 17.15 Driving up quality in Cancer Research (including the European Academy of Cancer Sciences Designation of Research Excellence) Anton Berns
- 17.30 OECI's contribution to setting up a Comprehensive Cancer Infrastructure in Member States Thierry Philip
- 17.45 **Questions and Discussion**

18.00 Closing remarks Simon Oberst

OECI2021 ONCOLOGY DAYS

Invited speakers

Tit Albreht National Institute of Public Health Ljubljana, Slovenia Giovanni Apolone Fondazione IRCCS INT Milan. Italv Emmanuelle Arfe IUCT Oncopole Toulouse, France Anton Berns European Academy of Cancer Science Brussels, Belgium Chiara Barbieri AIBAT. Italv Paul Browne Trinity St. James's Cancer Institute Dublin. Ireland Olli Carpen University of Helsinki Helsinki, Finland Maria Cecilia Cercato IRCCS Istituto Nazionale Tumori Regina Elena Rome. Italv Amitabh Chandra Harvard Business School Boston, The USA Christine Chomienne (tbc) Vice President European Cancer Mission Gennaro Ciliberto IRCCS Istituto Nazionale Tumori Regina Elena Rome. Italv Dominique de Valeriola Institut Jules Bordet Brussels, Belgium Nora Franzen Netherlands Cancer Institute Amsterdam. The Netherlands Stella Kyriakides European Commissioner DG Health and Food Safety Brussels, Belgium Giovanni Leonardi Ministero della Salute Rome, Italy József Lövev National Cancer Institute Budapest, Hungary

Johan Lundin University of Helsinki Helsinki, Finland Johanna Mattson Helsinki University Hospital Helsinki, Finland Maria Cristina Messa Italian Minister of University & Research Peter Nagy National Cancer Institute Budapest, Hungary Mef Nilbert Danish Cancer Society Research Center Denmark Simon Oberst Cambridge Cancer Centre The UK **Uwe Oelmueller** Qiagen Hilden, Germany Amanda Olivon IUCT Oncopole Toulouse. France Thierry Philip Institut Curie Paris. France Valesca Retèl Netherlands Cancer Institute Amsterdam. The Netherlands Walter Ricciardi Chair European Cancer Mission Board Gunnar Saeter Oslo University Hospital Oslo, Norway **Giorgio Stanta** University of Trieste Trieste. Italv Loonneke van De Poll Amsterdam. The Netherlands Wim van Harten Rijnstate Hospital Arnhem, The Netherlands Sabine Vogler Pharmaco-economics Department, GÖG Wien. Austria

DRAFT PROGRAMME



THE OECI 2021 SCIENTIFIC COMMITTEE

President **Thierry Philip**

Members

Giovanni Apolone, Christian Brandts, Dominique de Valeriola, Manuel Llombart Fuertes, Claudio Lombardo, József Lövey, Simon Oberst, Milena Sant, Gunnar Sæter, Giorgio Stanta, Wim van Harten, Marien van der Meer

THE OECI 2021 ONCOLOGY DAYS SECRETARIATS

GENOA: Daniela Garbarino, Giorgia Pesce, Roxana Plesoianu, Patrizia Sommella MILAN: Costanza Bono, Chiara Casati, Eleonora De Palo PARIS: Anna Fackeure UNITED KINGDOM: Kelly O'Reilly THE NETHERLANDS: Willien Westerhuis, Harriët Blaauwgeers

OECI 2021 ONCOLOGY DAYS COORDINATING OFFICE

Claudio Lombardo - OECI Director Phone +32 2 512 01 46 oeci@oeci.eu - www.oeci.eu

TECHNICAL SERVICE & BROADCASTING

Sa.Ga. Multimedia s.r.l. www.sagamultimedia.it

In collaboration with:

Sistema Socio Sanitario



Fondazione IRCCS Istituto Nazionale dei Tumori



The participation is free - registration at: http://www.oeci.eu/Assembly.aspx