



Organisation
of European
Cancer Institutes

ecancermedicalscience

Official OECI Journal



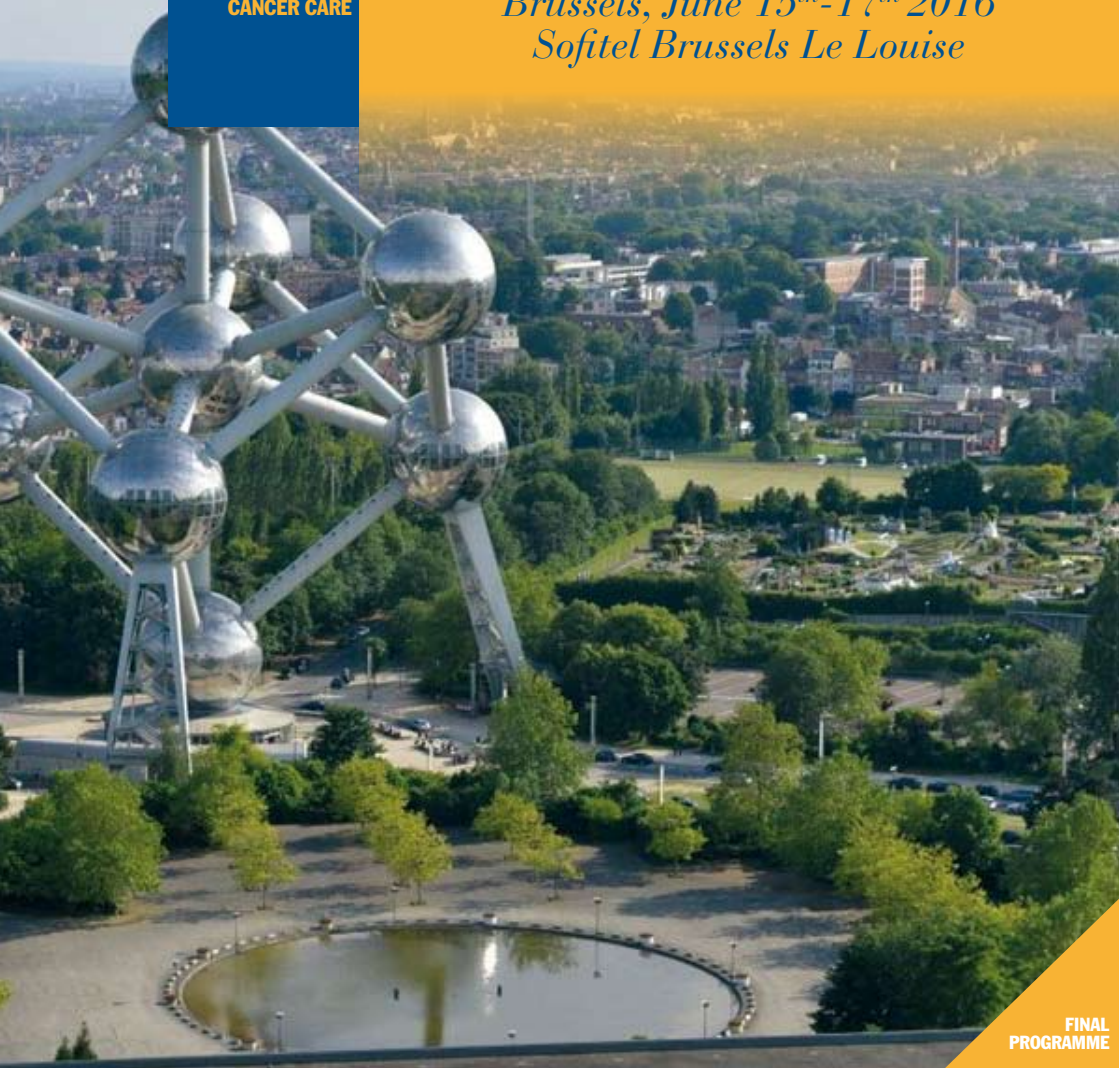
DEVELOPING
THE FUTURE IN
COMPREHENSIVE
CANCER CARE

Oncology Days

 OECI38

BRUSSELS 2016 GENERAL ASSEMBLY, SCIENTIFIC CONFERENCES AND RELATED EVENTS

*Brussels, June 15th-17th 2016
Sofitel Brussels Le Louise*



FINAL
PROGRAMME

OECI2016 ONCOLOGY DAYS

Welcome to the OECI Oncology Days 2016

For the third time, the Directors of the European Cancer Institutes convene in Brussels, and I am honoured to have the privilege of hosting the OECI Oncology Days 2016 in my city, which I would like to thank in the name of all our Members for the generous support given to the event.

The main objective pursued by the OECI under my Presidency is to reinforce and redefine the identity of our organisation through its distinctive gamut of activities on a European scale. Our focus is to continue to be Europe's unique representative of cancer centres by way of inclusivity.

OECI is an Organisation of cancer institutes for cancer institutes, whose main activity is to promote the sharing and disseminating of ideas, best practices and efficient organisation of cancer research and care services.

Our expertise in certification of quality, promoted by means of our Accreditation and Designation programme for cancer centres, is increasingly well-established and has been called upon recently, in order to help define quality criteria within the Joint Action on Rare Cancers, launched into the 2014-2020 European Health Programme.

The attention that our institutes dedicate to patients has led us to formalise a synergistic alliance with the ECPC, by the signing of a written agreement of collaboration, as well as by mapping out an ECPC-OECI Joint Declaration that I am very happy to present to our Members for their feedback.

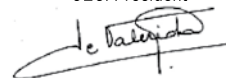
The increase in survivorship has also reinforced the issue of patient rights to access the best options for a cure and therapeutic solutions, so as to resume a dignified and active life in society, post illness. The best ways to offer such support to patients, through our institutes, need to be established with the help of the ECPC and the OECI's Working Group on Palliative Care, which participates in the group of experts coordinated by the OMS.

We are also seeking to raise our Members' awareness about the conditions of some of our colleagues working in less favourable economic regions, faced by a scarcity of financial and technological resources. This prompted us to begin collaboration with the International Union Against Cancer.

In recent years, the fast paced progress of science and technology has brought radical change to the structure of our Institutions, in order to meet the needs that personalised medicine now requires. The immunology approach to cancer care is a practical example of how our Institutions and the oncologists must continuously re-think their approach to therapy and to the internal organisation of the cancer centres. Being efficient at organisational level is an important reality, given the growing number of cancer patients and different types of treatments that we are able to offer them today. We need to think about how to organise clinical immunology and integrate it in the multidisciplinary approach to patient care, increasing interactions between lab and clinic, with the inclusion of non-oncologist specialists, to combat adverse reactions to immunotherapy medication.

The 2016 Oncology Days marks the 38th convening of the Directors of European Cancer Centres. This is a solid example of the dedication and efforts made by the OECI and its Members in the promotion of sustainable progress, with the aim of improving the level of care, by giving patients from all walks of life equal access to the best quality in cancer care.

Dominique de Valeriola
OECI President



Introduction to the OECI

The OECI is a non-governmental Organisation founded in Vienna, in 1979.

The primary objectives of its 70 Members are to reduce fragmentation and to give all European cancer patients the possibility of receiving the best available care. The OECI Members have established themselves in the innovation frontline by tailoring solutions to the individual patient, by gaining in efficiency and efficacy and with the potential to transform the way healthcare is delivered today.

To better achieve its goals, the Organisation works in close collaboration with the European Cancer Patients Coalition.

The OECI goals are achieved by promoting and strengthening the concept of Comprehensive Cancer Centres in Europe in order to improve quality in cancer care and translational research, as well as from an organisational viewpoint. In an effort to efficiently contribute towards an increase in the quality of care, about 50% of all OECI Members are already participating in the OECI Accreditation/Designation programme.

In the current year, some of the already certified Centres will be re-visited in order to confirm their Designation status, according to the revised quality standards for comprehensive and multidisciplinary cancer care in European cancer centres, as published in the Second Edition of the OECI Accreditation and Designation User Manual. So far, 32 European wide, comprehensive and clinical cancer centres have taken part in the OECI Accreditation & Designation programme.

The OECI interacts with its members in the definition of tasks of international and common interest. The common goal is to facilitate member participation in European projects and programmes, to support training activities on forefront topics, which provides a sound basis for accelerated development of expertise and future collaborative work. This in turn attracts professionals and officers from across disciplines and ultimately underlines the value of multidisciplinary actions.

Giving the crucial role to pathology departments in oncology and the expected “influx” of new markers and diagnostics, the OECI acts in close cooperation with the European Association for Cancer Research and the European Society of Pathology, in order to better disseminate the innovation process amongst its members and abroad. The EACR-OECI training course series on “Molecular Pathology Approach to Cancer” in Amsterdam, is just an examples of the OECI efforts to promote the dissemination of innovation.

Managerial support is mainly organised through the President’s Office and the Central Office in Brussels, alongside the Liaison and Director’s Office in Genoa. You can find more information about the Organisation at www.oeci.eu <<http://www.oeci.eu>>. The dissemination of the OECI activities, reports, proceedings are also publicised through [ecancermedalscience](http://www.ecancermedalscience.org), the Official OECI e-Journal at <<http://www.ecancer.org>>.

OECI2016 ONCOLOGY DAYS

The OECI Board



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Brussels, Belgium



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OECI Director
Claudio Lombardo
Genoa, Italy



OECI Central Office
Guy Storme
Brussels, Belgium

Working Groups and Activities



Accreditation and Designation
Simon Oberst
Cambridge, United Kingdom



Biobanks and Molecular Pathobiology
Giorgio Stanta
Trieste, Italy



Health Economics
Wim H. van Harten
Amsterdam, The Netherlands



Palliative Care
Massimo Costantini
Reggio Emilia, Italy



Communication and Dissemination
Gordon McVie
Milan, Italy



START-OECI
Lisa Licitra
Milan, Italy



Claudio Lombardo
Genoa, Italy

OECI2016 ONCOLOGY DAYS

The OECI Quality Network



- ★ OECI Members A&D certified
- ★ OECI Members in the A&D process
- Other OECI Members
- ★ Non - OECI Members in the A&D and membership processes



OECD2016 ONCOLOGY DAYS

The OECD membership

Austria

- Comprehensive Cancer Center Graz, Graz
- Comprehensive Cancer Center Vienna, Wien
- Zentrum für Tumorerkrankungen Linz Onkologisches Leitspital für Oberösterreich, Linz

Belgium

- ★ Institut Jules Bordet (IJB), Brussels 
- ★ Kankercentrum Brussel, Brussels 
- ★ AZ Groeninge, Kortrijk
- Institut Roi Albert II, Brussels

Croatia

- Klinika za tumore Klinički bolnički centar Sestre milosrdnice, Zagreb

Czech Republic

- ★ Masarykův onkologický ústav, Brno
- Institut biostatistiky a analýz Lékařské a Přírodovědecké fakulty Masarykovy university, Brno


Denmark

- Kræftens Bekæmpelse Center for Kræftforskning, Copenhagen

Estonia

- ★ Sihtasutus Tartu Ülikooli Kliinikum, Tartu 
- North Estonia Medical Centre, Tallin

Finland

- ★ HYKS Syöpäkeskus Helsinki University, Helsinki 

France

- ★ Gustave Roussy, Villejuif 
- ★ Centre Léon Bérard, Lyon
- Institut Curie, Paris
- Centre de Lutte Contre le Cancer Paul Strauss, Strasbourg
- Centre Henri Becquerel, Rouen

Germany

- Deutsches Krebsforschungszentrum (DKFZ), Heidelberg
- Universitäts KrebsCentrum Dresden, Dresden

- Charité Comprehensive Cancer Centre, Berlin

Hungary

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

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 
- ★ 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 
- ★ Azienda Ospedaliera Arcispedale S. Maria Nuova IRCCS Istituto in Tecnologie Avanzate e Modelli Assistenziali in Oncologia, Reggio Emilia 
- European School of Oncology (ESO), Milano
- IFOM - FIRC Institute of Molecular Oncology, Milano
- Istituto Scientifico Romagnolo per lo Studio e la Cura dei Tumori [IRST]-IRCCS, Meldola-Forlì
- IRCCS - Istituto di Ricerche Farmacologiche Mario Negri, Milano

- **Ente Ospedaliero Ospedali Galliera**, Genova
- **Nerviano Medical Sciences Group S.r.l.**, Nerviano

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
- **SC RTC Radiology Therapeutic Center – Amethyst Radiotherapy**, Otopeni

Russia

- **Tatarstan Cancer Center “TCC”**, Kazan
- **N.N. Blokhin Russian Cancer Research Centre**, Moscow
- **P.A. Herzen Moscow Cancer Research Institute**, 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**, L'Hospitalet de Llobregat Barcelona
- **Instituto Madrileño de Oncología (Grupo IMO)**, Madrid

Sweden

- **Karolinska Institute and University Hospital**, Stockholm

The Netherlands

- ★ **Netherlands Cancer Institute**, Amsterdam 
- **Erasmus MC Cancer Institute**, Rotterdam
- **IKNL Integraal Kankercentrum Nederland**, Utrecht
- **Maastricht University Medical Centre**, Maastricht
- **Radboudumc Centrum voor Oncologie**, Nijmegen

Turkey

- **Dokuz Eylül Üniversitesi Onkoloji Enstitüsü**, Izmir

Ukraine

- **RE Kavetsky Institute of Experimental Pathology, Oncology and Radiobiology (IEPOR)**, Kyiv

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

Non - OECI Members in the A&D and membership processes

Denmark

- ★ **Vejele Cancer Hospital**, Vejle

Turkey

- ★ **Anadolu Medical Centre**, Kocaeli,

Italy

- ★ **Humanitas Cancer Centre**, Milan

OECD 2016 ONCOLOGY DAYS

Institut Jules Bordet (IJB)



Pride in its past, focus on the future: synonymous with the Institut Jules Bordet

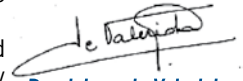
For over 70 years, the Institut Jules Bordet has been providing its patients and the general public with a wide range of cutting edge strategies for dealing with cancer.

The Institute, which is an academic one, combines three essential missions: treatment, research and education. Research activities are part and parcel with teaching, care and treatment. Its international reputation draws talented people to the Institute, who discover an environment conducive to fulfilling their human and professional qualities. Driven by a spirit of innovation, the Institute has continuously participated in the development of new diagnostic, therapeutic and preventive techniques, which are quickly made available to the public. Our teams are entirely engrossed in their missions and put respect for human life over and above other considerations. The Institute is above all, a point of contact between care givers and patients, who share a common project: to see that life wins out, by jointly taking on the multiple uncertainties and advances of science, in which they have pinned their hopes and trust.

A Comprehensive Cancer Centre

First integrated cancer centre in Belgium (since 1939), part of the Université Libre de Bruxelles and the Brussels public hospitals network (IRIS), Institut Jules Bordet (IJB) counts 160 beds devoted to the most up to date cancer care. With its yearly influx of 6,000 hospitalised patients, 78,000 outpatient consultations, 13,500 outpatient treatments, IJB is a point of reference for integrating research, care and education, in a fully multidisciplinary setting, supported by up-to-theminute facilities. Bordet brings together all the medical and paramedical disciplines at a single site, enabling it to provide the full range of cancer prevention, screening, diagnosis, treatment and rehabilitation services. The Institute employs a staff of 900, including 150 doctors and 100 researchers. Its major translational, clinical and basic research activities result in an average of 150 top-level scientific articles per year. Institut Jules Bordet works with a number of European and American cancer institutions and international organizations such as the European Organisation for Research and Treatment of Cancer (EORTC) and the Breast International Group (BIG).

To respond adequately to future demographic, epidemiological and scientific developments, it plans to move to new facilities in 2018, thereby increasing its hospital bed capacity to 250, where architecture will be at the service of Cancer Centre Comprehensiveness.



Dominique de Valeriola
Medical Director
Institut Jules Bordet



New perspectives and hopes in cancer care

Despite advances in all modalities of cancer treatment and a steady decline in cancer mortality due to earlier diagnosis and therapeutic improvements, cancer remains the second most common cause of death. And yet, we are at the dawn of a new area in cancer treatment with the emergence of targeted therapies, several forms of new highly active immunotherapy and more precise radiation by IMGR and IMRT allowing SBRT. This gives new perspectives and hopes, especially also to patients with cancers which today are still hard to treat in advanced stages. With the advent of new treatments also comes the challenge of financing, since Belgium enjoys a socially egalitarian access to any validated cancer treatment. However the progressive filling of the existing medical need with new drugs will strain the system and cost-control will be essential for maintaining equal indiscriminate access. The further fragmentation of cancer into ever smaller genotypes also poses a huge scientific and logistic challenge to effective drug development. In that context we are happy to have invested in a new in house Next Generation Sequencing platform "BRIGHT" which will allow us to systematically do broad genotyping so that we can move to "each patient his/her molecular tumor passport". Also the better understanding of radiobiology allows having new approaches in this field.

Close cooperation between fundamental, translational and clinical research by a translational approach should help overcome these obstacles. But we also need socio-economic reflection and perhaps new development algorithms within pharma, less costly (predictable) failed clinical trials by maximally exploiting what science tells us and new algorithms in the drug approval process.

Aging related cancers are sharply increasing. Fortunately the new treatments (targeted and immunotherapy) are often as applicable to the elderly as to the younger patient. Our center has put a special emphasis on cancer in the elderly and plays a prominent role in that field.

A Clinical Cancer Centre

The Brussels Cancer Centre of the UZ Brussel has evolved over more than 30 years into a comprehensive cancer center with regional, national and international resonance. Its scope goes from cancer prevention with participation in national early detection programs, to treatment with any of the available modalities and support to post-treatment care under the form of revalidation and rehabilitation. The Centre practices evidence-based medicine, setting up and participating in clinical studies. A special focus is on explorative studies and translational science. All personnel of the Centre have the ambition to excel in all aspects of its activities. In addition to providing top-level care at the different levels, innovation is a priority issue and the major development focus is on immunotherapy of cancer, genotype informed cancer treatments, genetic cancer, novel methods for tracking tumors by on line imaging and IMRT irradiation, imaging and radionuclide treatments and cancer in the elderly. Several staff of the center has leading roles in national and international

cancer organisations and are actively involved in government sponsored initiatives such as the Cancer plan and Think-tanks on the organisation and affordability of the cancer care in the future.



Mark De Ridder.

Mark De Ridder

Director Dpt Radiation Oncology
Kankercentrum Brussel

OECI2016 ONCOLOGY DAYS

The OECI 2016 Oncology Days

Oncology Days programme

Tuesday June 14th - Afternoon

- **Extended Board Meeting**

Room Elephant

Wednesday June 15th - All day

- **Pathology Day**

***Clinical Research and Applied Oncology:
an integrated and indissoluble process***

Room Metamorphose

Thursday June 16th - All day

- **Scientific Conference**

***Cancer Immunotherapy: from lab to clinical
applications - Potential impact on cancer centres'
organisation***

Room Metamorphose

Thursday June 16th - Afternoon

- **BenchCan Project Final Conference**

Room Jungle

Friday June 17th - Morning

- **OECI General Assembly 2016**

Room Jungle

Friday June 17th - Afternoon

- **COST Meeting**

Health Economics Application

Room Jungle

Social events

June 14th - Evening

- **ecancer Welcome Drink and Pathology Dinner**

Sofitel – Le Crystal Lounge and Restaurant

(restricted to invited speakers and participants to the Pathology Day)

June 16th - Evening

- **BenchCan Dinner**

and delivery of the OECI 2016 Cancer Prize

in the presence of Her Royal Highness Princess Astrid

Guided visit to the Musée Magritte and BenchCan Dinner at Salle Magritte

(restricted to BenchCan Partners, OECI members and invited participants)

General timetable

	14 June 2016	15 June 2016	16 June 2016	17 June 2016
MORNING		<p>OECI Pathology Day <i>Clinical Research and Applied Oncology: an integrated and indissoluble process</i> Room Metamorphose</p>	<p>Scientific Conference <i>Cancer Immunotherapy: from lab to clinical applications - Potential impact on cancer centres' organisation</i> Room Metamorphose</p>	<p>OECI 2016 General Assembly Room Jungle</p>
		Lunch	Lunch	Lunch
AFTERNOON	<p>Extended Board Meeting Room Elephant</p>	<p>OECI Pathology Day <i>Clinical Research and Applied Oncology: an integrated and indissoluble process</i> Room Metamorphose</p>	<p>Scientific Conference <i>Cancer Immunotherapy: from lab to clinical applications - Potential impact on cancer centres' organisation</i> Room Metamorphose</p> <p>BenchCan Final Conference Room Jungle</p>	<p>COST Meeting <i>Health Economics Application</i> Room Jungle</p>
EVENING	<p>ecancer Welcome Drink and Pathology Dinner Restricted to invited persons</p>		<p>BenchCan Dinner 18.00 Departure by bus from the Sofitel 18.30 Visit to the Magritte Museum 19.45 BenchCan Dinner and Cancer Prize 2016 Ceremony Restricted to invited persons</p>	

OECI Pathology Day Clinical Research and Applied Oncology: an integrated and indissoluble process

June 15th

Sofitel Brussels
Le Louise

Room
Metamorphose

Rationale

The rationale of this meeting is based on some goals:

1. Avoiding irreproducibility of clinical research.
2. Accelerating time for biomarker validation to give to Oncology Excellence Centres more opportunities to have better prognosis and treatment for patients.
3. Improving the use clinical tissues on the European level.
4. Pointing out that today clinical research is completely integrated with practical medical application.

Accreditation of Comprehensive Cancer Centres by OECI, improvement of the biobanking organisation in Europe for Archive Tissues by the Biobanking European Infrastructures (BBMRI-ERIC), standardisation of analysis methods by the Working Groups of the European Society of Pathology (ESP), improvement of preanalytical conditions of tissues by GEN, and handling of tumour heterogeneity are all activities that have been developed in Europe in the past years to reach these goals.

PROGRAMME

09.00-09.30 **INTRODUCTION: COLLABORATION BETWEEN PATHOLOGISTS AND ONCOLOGISTS**

Dominique de Valeriola (Belgium) and Pierre Bedossa (France)

09.30-11.00 **CLINICAL RESEARCH AND APPLIED ONCOLOGY**

Chairs: Pierre Bedossa (France) and Giorgio Stanta (Italy)

09.30-10.00 **Clinical research and oncology**

Giorgio Stanta (Italy)

10.00-10.30 **Clinical research, a BBMRI model for clinical research**

Kurt Zatloukal (Austria)

10.30-11.00 *Coffee Break*

11.00-11.30 **Applied clinical models in clinical settings**

Manfred Dietel (Germany)

11.30-12.00 **Clinical research and industry**

David Henderson (Germany)

OECI Pathology Day

Clinical Research and Applied Oncology: an integrated and indissoluble process

June 15th

Sofitel Brussels
Le Louise

Room
Metamorphose

- 12.00-15.30 **CLINICAL RESEARCH: INTERACTION BETWEEN RESEARCHERS, PATHOLOGISTS AND ONCOLOGISTS**
Chairs: Xavier Matias-Guiu (Spain) and Pierre Laurent-Puig (France)
- 12.00-12.30 **The importance of clinical verification and validation for basic research: the example of HERCULES project on ovary cancer**
Sampsa Hautaniemi (Finland)
- 12.30-12.40 **Short presentation of the activities of the on-line journal "ecancer"**
Linda Cairns (UK-Italy)
- 12.40-14.00 Lunch
- 14.00-14.30 **Clinical research development in colorectal cancer**
Pierre Laurent-Puig (France)
- 14.30-15.00 **Clinical research in breast cancer**
Philippe Aftimos (Belgium)
- 15.00-15.30 **Clinical research in gynecological cancer**
Xavier Matias-Guiu (Spain)
- 15.30-16.00 Coffee Break
- 16.00-18.00 **CLINICAL RESEARCH ETHICS**
Chairs: Marialuisa Lavitrano (Italy) and Kathi Apostolidis (Greece)
- 16.00-16.30 **The central position of the patient**
Kathi Apostolidis (Greece)
- 16.30-17.00 **Tissues and ethics**
Marialuisa Lavitrano (Italy)
- 17.00-17.30 **New ethical challenges for clinical research**
Gianni Tognoni (Italy)
- 17.30-18.00 **Privacy and data protection regulation: implication for clinical and translational research**
Gauthier Chassang (France)
- 18.00-18.45 **GENERAL DISCUSSION**

Scientific Conference Cancer Immunotherapy: from lab to clinical applications Potential impact on cancer centres' organisation

June 16th

Softel Brussels
Le Louise

Room
Metamorphose

09.00-09.20 **Welcome by the OECD President**
Dominique de Valeriola

09.20-10.00 **Opening Lecture**
**Inflammation, immunity and immunotherapy:
back to the future**
Alberto Mantovani (Italy)

Session 1: The laboratory background and current developments

Chair: Gunnar Sæter (Norway)

10.00-10.30 **The experimental evidence for immune-mediated
cell death during chemotherapy and radiotherapy**
Sandrine Aspeslagh (France)

10.30-11.00 **Technologies and current translational approaches
in immunotherapy**
Andrea Anichini (Italy)

11.00-11.30 *Coffee Break*

11.30-12.00 **Adoptive cellular therapy approaches and early
clinical results**
Jon Amund Kyte (Norway)

12.00-12.30 **Biomarkers of immune response**
Christian Blank (The Netherlands)

12.30-13.00 **DISCUSSION**

13.00-14.00 *Lunch*

Scientific Conference **Cancer Immunotherapy:** **from lab to clinical applications** **Potential impact on cancer** **centres' organisation**

June 16th

**Sofitel Brussels
Le Louise**

**Room
Metamorphose**

Session 2: Clinical immunotherapy and combinations

Chair: Manlio Ferrarini (Italy)

- 14.00-14.30 **Immune checkpoint inhibitors and combination approaches: current status and future perspectives**
Paolo Ascierto (Italy)
- 14.30-15.00 **Combining radiotherapy and cancer immunotherapy: a paradigm shift?**
Speaker to be confirmed
- 15.00-15.30 *Coffee Break*
- 15.30-16.00 **Cancer vaccines: still a viable approach?**
Per thor Straten (Denmark)
- 16.00-16.30 **Implications of modern immunotherapy on the organisation of healthcare in cancer centres**
Ahmad Awada (Belgium)
- 16.30-17.00 **DISCUSSION AND CLOSING**

Counting 7 Partners, 9 Pilot Sites and the European Cancer Patients Coalition, under the coordination of the OECD, the BenchCan project aims to improve quality of cancer patient's treatment.

With an ageing population, the burden that cancer will impose on our society is likely to increase. Cancer has replaced cardiovascular diseases as the leading cause of premature death in 28 out of 53 European countries, becoming the leading cause of death. In this framework, and in the light of an highly affecting cost-benefit analysis, the BenchCan project focuses on identifying how European providers can be assisted in order to improve services to the patients, reduce care provision inequalities, and raise a better quality of oncologic services.

The partnership of the project challenges two key topics:

1. ensuring an active engagement of European comprehensive cancer centres, clinical centres, cancer departments and units;
2. sustain the quality of treatments and outcomes of the operating environments for health services which have to adapt to co-morbidities of an ageing population, speed the technology development and related financial constraint, and reduce differences in health systems performances within EU countries.

The 9 BenchCan Pilot Sites help to define:

- the description of a cancer care organisation using an agreed number of indicator sets describing the comprehensive care context;
- the modeling performance of comprehensive cancer centres or cancer departments/units at general hospitals, by several matrices (e.g. organisational objectives/intermediaries; staff/teams; intermediaries/services; services/patient outcome enablers; translational research or medicine-related data).

Detail analyses will be performed on all Pilot Sites, for instance using data envelopment techniques and, in particular, visiting the centres with a restricted group of specialists in order to define and refine a final Benchmarking Tool that focuses on operations management and best clinical practices and which will be available and applied to all interested institutes/hospitals in Europe.

The expected BenchCan final outcomes are:

- (i) two benchmark tools planned for use in comprehensive cancer centres & cancer departments/units at general hospitals;
- (ii) the identification of areas for improvement for quality of care & patient outcomes with advanced plans adopted by the pilot sites, at first, and by a broader audience in the coming years;
- (iii) a benchmark manual with budget impact formulae for free access so to permit betterments in the management of cancer centres;
- (iv) a roadmap for future assessments of comprehensive cancer care.

At the end of the project, we expect the BenchCan tools to be adopted as a non-profit service available to cancer centres and services across the EU.

Final meeting

- 14.00-14.10 **Welcome**
Wim van Harten (The Netherlands)
- 14.10-14.50 **Experiences with Benchmarking**
Chris Harrison (United Kingdom)
- 14.50-15.10 **Introduction final/adapted BenchCan Tool and Manual related to experiences and results**
Speaker to be defined
- 15.10-15.30 *Coffee Break*
- 15.30-15.50 **Outcomes of the BenchCan project Qualitative Tool and the European Cancer Consumer Quality Index**
Anke Wind (The Netherlands)
- 15.50-16.05 **Outcomes of the BenchCan project Quantitative Tool**
Isabelle Nefkens (The Netherlands)
Joris van Dijk (The Netherlands)
- 16.05-16.35 **Experience and action/improvement plans pilot site**
Francisco Rocha Gonçalves (Portugal)
Péter Nagy (Hungary)
- 16.35-16.45 **Future possibilities/sustainability**
Speaker to be defined
- 16.45-17.20 **Discussion**
Wim van Harten (The Netherlands)
- 17.20-17.30 **Action points and closing**

June 16th

Sofitel Brussels
Le Louise

Room Jungle

08.00 Registration

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

Chairperson: *Dominique de Valeriola*

08.30 **Session 1: Administrative and financial matters**

Chairperson: *Dominique de Valeriola*

Point 1: Approval of May 2015 General Assembly's Minutes (vote requested – decision taken at the simple majority of the OECI Full Members present or represented)
Dominique de Valeriola

Point 2: Approval of the Financial Statement 2015 (vote requested - decision taken at simple majority of the OECI Full Members present or represented)
José Laranja Pontes

Point 3: 2016 and 2017 Provisional Budget (the vote is requested only for 2016 budget – decision taken at simple majority of the OECI Full Members present or represented)
José Laranja Pontes

Point 4: OECI Board composition 2014-2017 update (vote not requested)
Dominique de Valeriola

Point 5: Working Groups and Co-opted Board Members update (vote not requested)
Dominique de Valeriola

Point 6: OECI Membership
Claudio Lombardo

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

6.2 Requests of 1 Member to be dismissed from the OECI membership (vote not requested)

6.3 Proposal for discontinuing from the membership of OECI Members (vote requested - decision taken at two-thirds majority of the OECI Full Members present or represented)

**CEREMONY FOR THE DELIVERY OF THE
OECI ACCREDITATION CERTIFICATES 2016**

Dominique de Valeriola and Simon Oberst

**Kankercentrum Brussel
Brussels - Belgium**

**Istituto Nazionale Tumori Regina Elena
Roma - Italy**

**King's Health Partners Integrated Cancer Centre
London - United Kingdom**

**Vejle Cancer Hospital
Vejle - Denmark**

10.30 Coffee break

11.00 **Session 2: The OECI Strategy and Working Group activities**

Chairperson: Dominique de Valeriola

Point 7: OECI accomplishment and strategies

Dominique de Valeriola

7.1 The ECPC-OECI Joint Declaration

Patrick Miqueu

**7.2 Accreditation & Designation and the Joint Action on Rare
Cancers**

Simon Oberst

**7.3 The European Reference Networks on rare solid cancers in
adults**

Jean Yves Blay

7.4 Biobanks and Molecular Pathobiology

Paolo De Paoli

**7.5 Health Economics WG, COST application and BenchCan
Project**

Wim H. van Harten

**Point 8: OECI 2017 Oncology Days and G.A. Brno - Czech Republic
Proposals for the coming years and closure of the General
Assembly**

Dominique de Valeriola

13.00 Lunch

Chairpersons and invited speakers

Philippe **Aftimos**

Institut Jules Bordet, Brussels, Belgium

Andrea **Anichini**

Fondazione IRCCS Istituto Nazionale dei Tumori, Milan, Italy

Kathi **Apostolidis**

European Cancer Patient Coalition, Athens, Greece

Paolo **Ascierto**

Istituto Nazionale Tumori IRCCS "Fondazione G. Pascale", Naples, Italy

Sandrine **Aspeslagh**

Gustave Roussy, France

Ahmad **Awada**

Institut Jules Bordet, Brussels, Belgium

Pierre **Bedossa**

University of Paris-Diderot, France

Christian **Blank**

Netherlands Cancer Institute, Amsterdam, The Netherlands

Jean Yves **Blay**

Léon Bérard, Paris, France

Linda **Cairns**

ecancer - European Institute of Oncology, Milan, Italy

Gauthier **Chassang**

Institut National de la Santé et de la Recherche Médicale, Toulouse, France

Dominique **de Valeriola**

Institut Jules Bordet, Brussels, Belgium

Paolo **De Paoli**

Centro di Riferimento Oncologico Istituto Nazionale Tumori, Aviano, Italy

Manfred **Dietel**

Charité Comprehensive Cancer Centre, Berlin, Germany

Manlio **Ferrarini**

IRCCS Azienda Ospedaliera Universitaria San Martino – IST- Istituto Nazionale per la Ricerca sul Cancro, Genoa, Italy

Chris **Harrison**

The Christie NHS Foundation Trust, Manchester, United Kingdom

Sampsa **Hautaniemi**

University of Helsinki, Finland

David **Henderson**

Bayer HealthCare Pharmaceuticals, Berlin, Germany

Jon Amund **Kyte**

Oslo University Hospital, Norway

José **Laranja Pontes**

Instituto Português de Oncologia do Porto Francisco Gentil, Portugal

Pierre **Laurent-Puig**

University of Paris Descartes, France

Marialuísa **Lavitrano**

University of Milano-Bicocca, Milan, Italy

Claudio **Lombardo**

OEI, Belgium

Alberto **Mantovani**

IRCCS Istituto Clinico Humanitas, Milano, Italy

Xavier **Matias-Guiu**

University of Lleida, Spain

Patrick **Miqueu**

Institut Jules Bordet, Brussels, Belgium

Péter **Nagy**

National Institute of Oncology, Budapest, Hungary

Isabelle **Nefkens**

Panaxea b.v., Enschede, The Netherlands

Simon **Oberst**

Cambridge Cancer Centre, United Kingdom

Francisco **Rocha Gonçalves**

Instituto Português de Oncologia do Porto Francisco Gentil, Portugal

Gunnar **Sæter**

Oslo University Hospital, Norway

Giorgio **Stanta**

University of Trieste, Italy

Per thor **Straten**

University of Copenhagen Herlev Hospital, Herlev, Denmark

Gianni **Tognoni**

IRCCS - Istituto di Ricerche Farmacologiche Mario Negri, Milan, Italy

Joris **van Dijk**

Panaxea, Enschede, The Netherlands

Wim H. **van Harten**

Rijnstate, The Netherlands

Anke **Wind**

Netherlands Cancer Institute, Amsterdam, The Netherlands

Kurt **Zatloukal**

Medical University of Graz, Austria

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City of Brussels



and

Institut Jules Bordet



Vrije Universiteit Brussel and Kankercentrum Brussel



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European Economic
Interest Grouping

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Oncology Days



see you in Brno 2017



OECI
INNOVATIVE
HIGH-QUALITY
CANCER CARE
THROUGH
COORDINATING
RESEARCH AND
EDUCATION

THE OEI 2016 SCIENTIFIC COMMITTEE

Presidents: Dominique de Valeriola and Gunnar Sæter
Members: Carlos Caldas, Wim van Harten, Marco A. Pierotti,
José Laranja Pontes, Jozsef Lövey, Giorgio Stanta,
Guy Storme, Christof von Kalle

THE OEI 2016 LOCAL ORGANISING COMMITTEE

Jean Benoit Burrion - Institut Jules Bordet
Mark De Ridder - Kankercentrum Brussel
Maria Cummins - Institut Jules Bordet
Ariane Van de Werve - Institut Jules Bordet
Sara Barbosa - Sofitel Le Louise
Caroline Harake - Musée royaux des Beaux-Arts de Belgique

THE OEI 2016 ONCOLOGY DAYS SECRETARIATS

BRUSSELS: Lutgarde D'Hauwers
GENOA: Germana Gianquinto, Giorgia Pesce, Patrizia Sommella
TRIESTE: Valentina Melita

OEI 2016 ONCOLOGY DAYS COORDINATING OFFICE

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