



#### PRESIDENT'S EDITORIAL

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#### Promising developments at OECI's Oncology Days



This Newsletter reports on recent improvements of the OECI activities as discussed at the 2013 OECI Annual meeting and General Assembly held in Brussels. From May 13th to 16th various pursuits marked the start of new developments.

A major highlight was the handing over of the European Cancer Prize by Her Royal Highness Princess Astrid of Belgium to Professor Ulrik Ringborg for his numerous activities and merits in the European cancer field. He has decided to devote the amount of € 20,000 to young researchers aiming to attend a training course in translational research.

The OECI Board dedicated a special meeting to the developments in the Accreditation & Designation programme. We are at the stage that the first series of the Accreditation and Designation exercises have been evaluated and the Report of this evaluation was formally handed over to Tom Hudson, President of the ECPC. He appreciated both the development and the gesture, as patients are very keen on knowing what quality is provided by the cancer institutes all over Europe. In the coming months, the Report will also be presented to the European Agency of Healthcare and Consumers. Furthermore, a presentation of the A&D activities is planned at the European Parliament. With the agreement that was established with the Italian Government and interest from various institutes all over Europe, the A&D programme is steadily growing and – after years of investment - financially viable. Based on the evaluation an update of the programme is presently going on. Considered aspects are involving relevant external stakeholders in the governance and obtaining outside accreditation certification.

A special session of the Oncology Days, held in collaboration with the European School of Oncology, was dedicated to presentations and discussions on the activities of the OECI in Central and Eastern Europe. Furthermore, the Bench-Can kick off meeting focussed on the benchmarking of Comprehensive Cancer Care, sponsored by the European Agency for Healthcare and Consumers. Twelve OECI members are involved in this project and the Consortium had the first working session and launched the programme of activities.

A very interesting Forum, co-organised with INCA, ECCO and Alleanza



Contro il Cancro, was dedicated to information and exchange on the various national cancer research plans. The OECI could prove to be a very useful platform for this activity. Many OECI members are involved in the Eurocan Platform Network of Excellence and a symposium was dedicated to information exchange and discussion on this coordination project.

Inspired by its active chairman, Professor Stanta from ICGEB and University of Trieste, a “Pathology Day”, attracting more than 80 pathologists from all over Europe, was devoted to introduce and discuss new technologies in pathology services. The meeting has been organised in collaboration with EORTC, ESP and the Impacts Network.

During the General Assembly two new Board Members were elected; Carlos Caldas from Cancer Research UK - Cambridge Institute – University of Cambridge and Emmanuel Mitry, from the Institut Curie, Paris. A decision was taken on a procedure to attract and elect the new OECI President to start his office in 2014. Unfortunately, we had to skip few Members from our membership list but, at the same time, we were very positive about the number of new Members that joined the OECI.

As a President, I want to express my appreciation to all those involved in organizing the various activities of OECI, and especially to Dominique De Valeriola, Guy Storme and Jean Benoit Burrion who, together with Claudio Lombardo, organized the successful event in Brussels.

**Wim H. van Harten**  
OECI President



**OECI  
CANCER PRIZE**

## OECI Oncology Prize 2013

For the first time ever, the OECI Board handed out the OECI Cancer Prize. The Prize has been assigned to a person that contributed in a significant way to the development and improvement of the European Cancer field. A Committee including Chris Harrison, Dominique De Valeriola, Jean Pierre Armand, Vasyl Chekhun, Gunnar Folprecht and Aurelia Martins had to select within a group of candidates previously nominated by the OECI members following these criteria:

- a person who has made a major scientific discovery in basic cancer research OR a person who has made significant contributions to translational cancer research;
- a person still active in cancer research and with a record of recent, noteworthy publications;
- a person who demonstrates a particular political commitment at international level and significantly involved in the increasing of public awareness on the cancer problem and on the practical achievement of specific actions supporting, both at public and private levels, the fight against cancer.



**The OECI Treasurer grants the 20,000 Euros check**



**Her Royal Highness Princess Astrid delivers the Prize**



**The Winner with the sculpture**



The OEI Directors at the Brussels City Hall.

The Committee selected and presented the top 3 candidates to the OEI Board which, finally, decided to follow its advice and hand over the OEI Oncology Prize to professor Ulrik Ringborg from Karolinska Institute Cancer Center, thanks to his several merits in the European Cancer field. The Award, which comprises a sculpture, designed and produced by Renée Otter, and a prize of € 20,000 was handed over in the ancient City Hall of Brussels by Her Royal Highness Princess Astrid of Belgium. Moreover, there was a representative of the European Parliament, Mrs. Patrizia Toia, who was very positive and proud about the assignment of the prize and also invited the OEI Board to present the OEI Activities to the European Parliament during the next months.

The Board congratulated Professor Ringborg for the award and the winner informed the presents that the prize will be employed on scholarships for young scientists so to enable them to attend a training in translational cancer research. Furthermore, this positive experience underlines the growing importance of relations between the OEI and the European Commission and the visible presence of the Organisation in Brussels. For this reason, the OEI Board is considering to have at least one meeting in Brussels every Presidency in which the award could be handed over.

### The sculpture: “POINT & COMMA”

Renée Otter, former Director of the Groningen Cancer Centre, is the author of the sculpture “Point & Comma”. The OEI thanks the artist for her kind support and hopes to have again in the future her extraordinary collaboration.

Following, a brief explanation of the sculpture.

*“Research is only recognized when published, so when written down in a journal. All texts are made up by sentences, separated and putted together by points and commas. The place of the points and commas, double points and semicolons are essential to make the message clear, comprehensive and punctual.*

*Researchers need sometimes to make some steps backwards to better proceed. «Reculer pour mieux sauter», to set a point, to go backwards for going forwards after. In fact, researchers neither articles can do without points and commas.*

*In addition, for the winner this price set a point to his recognition, but for the OEI, it will just be a comma or semicolon (point-comma) as research will never end and the OEI will always goes on. So the sculpture POINT & COMMA is as inextricably bound up to research as the OEI is”.*

**Renée Otter**



## Launch of the BENCH-CAN project



BENCH-CAN was launched on May 14th 2013 with a kick-off meeting in Brussels as part of the Oncology Days Programme. Dr. Guy Dargent, from the Executive Agency for Health and Consumers (EAHC) and Officer of the project, attended the meeting and stressed the importance of BENCH-CAN in the framework of cancer care.

Partners and representatives from the pilot sites participated at the kick off meeting and defined the activities to be further developed within Bench-Can, which has the aim to benchmark comprehensive cancer care and yield best practice examples in a way that contributes to improve the quality of interdisciplinary patient treatment.

OECI, the Lead partner is currently working together with 6 Partners, part of which are already OECI members: the Netherlands Cancer Institute, The Netherlands; Institute Gustave Roussy, France; the National Institute of Oncology, Hungary; Alleanza Contro il Cancro, Italy; Health ClusterNET, UK; PANAXEA B.V., The Netherlands; as well as with 10 pilot sites and 2 other collaborating organisations.

The project has 2 key challenges: (i) ensuring that cancer centres & cancer departments/units in general hospitals in the EU12 are actively engaged & benefit; (ii) sustaining quality of patient treatment & outcomes as operating environments for health services adapt to ageing populations, compression of co-morbidity, rapid speed of technology development & financial constraints.

Ultimately, by developing a benchmarking tool piloted in comprehensive cancer centres and tumour services, BENCH-CAN will help achieve quality improvements in clinical practice, patient-centred care and in the management of cancer care facilities.

The web site of the project will soon be launched within the OECI home page.

## The EurocanPlatform Network of Excellence



On May 14th, as part of the OECI 2013 Oncology Days, the EurocanPlatform Symposium took place at the Institut Jules Bordet.

The EurocanPlatform aims to the building of a translational cancer research platform by linking Comprehensive Cancer Centres and basic/preclinical cancer research centres. A majority of the research centres participating to the Platform are OECI Members.

During the Symposium, the strategies for innovative research on prevention, early detection and therapeutics were presented. The discovery of biomarkers for identification of risk individuals will open up for new types of prevention strategies. Marco Pierotti reported on biomarker discovery for early detection with focus on breast and lung cancer. Workpackages for identification of new targets and treatment predictive biomarkers were presented as well as strategies for innovative clinical trials. Maria Grazia Daidone reported on the Biobank work while Angelo Paradiso reported on educational activities among which an international translational cancer research course has a priority. Gordon McVie presented the Communication and Dissemination programme, in which OECI is active. Wim van Harten presented the next step of the OECI accreditation methodology aiming at identifying criteria for Cancer Research Centres of Excellence. Finally, Julio Celis discussed potential activities which may help the EurocanPlatform Consortium becoming sustainable.

The Symposium was open by Jan-Willem van de Loo, the EC Officer of the EurocanPlatform project. He updated on-going work in front of Horizon 2020. Even though the research calls will probably not focus on specific diseases, personalised medicine and chronic diseases will be a priority.

## Cancer Education and Training in Central and Eastern EU Countries



The Symposium has been organised by the Education & Training WG, in collaboration with the European School of Oncology. The meeting was held in order to try to gain a better understanding of the peculiarities of the E&T scenario in emerging countries in central and eastern Europe where new technologies and tools allowing a shift towards the application of more personalised therapies are being developed at a fast rate.

**Angelo Paradiso** (NCRC Bari, E&TWG Chair) opened the Symposium with an overview of the main issues in this area. He stressed that education issues in these countries have been an interest of the OECI for many years now, starting from the first Symposium on this topic held in Budapest in 2010 and leading to the elaboration of the OECI 3-year CE Europe education event programme 2013-2015.

**Ernestas Janulionis** of the Institute of Oncology, Vilnius University, Lithuania and **Vasyliy F. Chekhun** of the R.E. Kavetsky Institute, Kiev, Ukraine, introduced the cancer education programmes in their respective Countries which further highlighted the often great differences that exist between these countries and the specific problems they face as compared to many Western European Nations. The final presentation came from **Bodo Richter** of the European Commission, who spoke to participants about training and mobility opportunities for oncologists in Europe in the coming years. The session ended with a very stimulating discussion involving all speakers and audience which stressed the great interest in further developing collaborations in these areas, particularly on opportunities for researcher and clinician exchanges between countries in the near future and elaboration of ad hoc education programmes which target these emerging but often overlooked countries.

### Quality of CCCs and accreditation development

The Symposium has been organised by the Accreditation and Designation WG, in collaboration with the European School of Oncology.

OECI Accreditation and Designation is the first oncology-specific accreditation and designation programme in Europe focussing on integrated cancer centres and comprehensiveness in their organisational performances. Ten years after its start, time has come for a thorough reflection on strengths and opportunities of the Programme. This was the overall objective of the session that took place in Brussels, with participants from the whole oncology community, as well as quality experts and policy makers from all over Europe.

**Thomas Tursz** introduced the session and presented the strategic role of the programme. A discussion was held on the necessity of such a programme for patients, the need to involve the EU and Members States and move toward the validation of outcome indicators.

**Mahasti Saghatchian** presented the pioneering years of the OECI Accreditation and Designation Programme.

The next steps are: to revise the standards for updating and improvement; to assess the feasibility of a certification of prostate units; to create an excellence designation system and to develop indicators to measure the outcome of translational research carried out in the comprehensive cancer centres. Quality indicators are the ultimate way for allowing comparability between caregivers, which is of interest to the patients and also to regulators/payers and policy makers.

**Melvin Kilsdonk** presented his results in research of the Dutch visitation system. The core of his message was to keep an accreditation programme interesting for centres on the long term.

**Riccardo Valdagni** presented the OECI-ESO-DKG Prostate Cancer Units Initiative in Europe. The task force has been successfully established in order to agree on the standards and process to be submitted to the OECI.

**Donata Lerda** presented the European Commission Breast Cancer Accreditation Services. Built, where possible, on evidence based guidelines, the concept for breast cancer services accreditation foresees that it will cover all aspects from diagnosis, surgery and treatment to post-treatment and palliative care. It will ensure a multi-disciplinary approach and always put the patient at the centre of the process. Collaboration with the OECI is already in place.



### National Programs for Translational Cancer Research and Translational Oncology

The Forum has been co-organised by the OECI, the Institut National du Cancer, the European Cancer Organisation and the Italian Cancer network, Alleanza Contro il Cancro as part of the OECI 2013 Oncology Days.

The National programs presented by Belgium, Italy, INCa (France), UK and Portugal covered their approach of the Cancer topic in general, but focused on the translational research and oncology. Belgium has actually a 100% coverage of outcome of patients linked with the Registry and this for a 10 year period. Since the National Cancer Plan was introduced in 2008, biobanking, and



innovative projects on translational research were assigned to the different Universities in collaboration with regional hospitals.

Italy has launched programs, stimulating the different National cancer centres to work together, mainly using biobanking material and granting preferentially those who do so. Links with the industry are also stimulated as done in the Lombardia Region. Telepathology is developed to ensure the expertise of difficult diagnosis and rare cancers assuring the best approach for the patients.

France has the same approach, but on top has introduced the WIN Project with the pharma industry allowing new drugs to be introduced in early clinical setting for scientific evaluation and allow to accept a fast personalized medicine on the basis of validated molecular knowledge. Partially the cost are covered by this program till a bonus for patients outcome is shown.

UK focuses on the basic molecular data and new drugs with a stimulating national approach. Nevertheless the clinical data remain behind the other Western Europe ones, showing that basic availability of good clinical practice remains mandatory.

The Portuguese program is mainly concentrated in 3 major clinical Cancer Centres, but with a new approach of linking at each one at least 3 peripheral hospitals to their own common program with as only goal to improve the overall outcome which will be evaluated soon.

The role of ECCO, in coordinating the Cancer Research in general, is mainly facilitating the between in cancer world to be connected and known with each other in a global view.

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### Personalised and sustainable oncology care: health economic perspectives

**Scott Ramsey** presented how CCCs in the US are organized and emphasized their important role in stimulating and facilitating health economic research of innovative cancer treatments. He thereafter posed the question “Are CCCs cost-effective?” and discussed ways of measuring costs and benefits of CCCs. He explained why it is complex to analyze in a standard manner, given challenges such as caused by population case mix, patient self-selection (specific patient groups who choose to go to CCCs themselves), and clinical training. In a study based on the SEER database in 2006, it was observed that the CCCs spend 50% more than general hospitals, but higher survival is observed in CCCs. Moreover, CCC can generate additional, so called “spill-over”, value to other hospitals by being the frontrunners in objective research towards effectiveness and cost-effectiveness of innovative cancer care from which other cancer hospitals in the region may benefit.

**Andrea Ciarmiello** gave a comprehensive overview of the developments in molecular imaging and associated cost impacts in Italy, as well as in an international context. He showed that better imaging leads to an initial increase in health care costs, which to a certain extent, may be paid off by better targeted therapies for patients, although this is typically not studied with sufficient rigor or in required detail in most countries. OECI centres could set an example investigating the cost of a full patient episode instead of just fragments of that.

**Yolande Lievens** presented an overview of several cost calculations in radiation oncology departments in Belgium, collected by the Health Technology Assessment organization in Belgium (KCE). In subsequent studies, she showed that treatment time in radiation is the main cost-driver. Therefore, she started a project called “Health Economics of Radiation Oncology (HERO)”, where the Activity Based Costing (ABC)-method is used to calculate the treatment time in more detail in radiation departments all over Europe.

**Maarten IJzerman** presented personalized medicine from the viewpoints of patients. He started off his presentation by saying that cost-effectiveness does not equal “value”. He continued by noting that “value for one, may be not for others” as factors such as phenotypes, clinical response, patient and clinician preferences and their associated behavior all play a role, specifically in the field of Personalized Medicine. Shared decision making in this view may improve adherence, satisfaction, and lower adverse events. He also remarked that although most cancer hospitals are not so much involved in patient preference studies, CCCs should take up their responsibility in this area. Only by doing so, they can continue to provide the highest quality care in the eyes of the patients and clinicians and obtain a leading role in the emerging field of Personalized Medicine.

## Molecular Pathology Day

On 16th May 2013, the OECI pathologists met in Brussels to resume an old OECI tradition. The meeting started with a presentation and further discussion on the new problem related to drug resistance in lung cancer therapy, presented by Raffaella Sordella of Cold Spring Harbor (U.S.). Giorgio Stanta introduced the new research line of the Biobanking and Molecular Pathobiology Working Group, defining the new clinical research and validation activity in the field of Molecular Analysis in Fixed and Paraffin Embedded Tissues. The huge deposits of these archive tissues can be used with properly designed retrospective survival studies to accelerate clinical prognostic and predictive biomarker applications.

Anna Sapino (Turin), Andreas Jung (Munich), Erik Thunnissen (Amsterdam) and Guido Henning (Eschborn) presented their recent approaches and perspectives in Cancer Molecular Diagnostics of breast, colon and lung. Nina Gale (Ljubljana), Giorgio Stanta (Trieste) and Anna Sapino (Turin) then discussed the proposal of validation of new biomarkers in head and neck, colon and breast cancer. The day ended with a round table about quality assessment for molecular diagnostics in Fixed and Paraffin Embedded Tissues.

This last Pathology Day has been useful to start developing a European network among the different cancer institutes for clinical research, biomarker validation and the development of more efficient internal and external quality controls.



## Renewal of the OECI Board

At the 2013 General Assembly, upon proposal of the OECI President and of the Board, two new Members have been elected to the OECI Board.

The OECI is honoured to welcome Professor Carlos Caldas and Professor Emmanuel Mitry, who will cover the positions of Elected Members for the period 2013-2016.

**Carlos Caldas** heads the Breast Cancer Functional Genomics Laboratory at the Cancer Research UK Cambridge Research Institute. He is an Honorary Consultant Medical Oncologist at Addenbrooke's Hospital, Lead of the Cambridge Experimental Cancer Medicine Centre and Director of the Cambridge Breast Cancer Research Unit which opened at Addenbrooke's Hospital in 2008. He is Fellow of the American College of Physicians, the Royal College of Physicians and the Royal College of Pathologists. Professor Caldas holds the Chair of Cancer Medicine at the University of Cambridge since 2002.



**Emmanuel Mitry** covers the position of Medical Director for Gastro-intestinal, gynaecological and urologic tumors at the Institut Curie in Paris.



He is the President of French Group for the endocrine cancer studies and member of the Scientific and Steering Committee of the Federation of the French Digestive Oncology.

Professor Mitry collaborates with several European and International Organisation such as EORTC, ASCO, SIOG, ESMO and is also Professor of hepato-gastroenterology.

The OECI thanks Professor **Julio Celis** and Professor **Alexander Eggermont** who left the OECI Board at the last General Assembly. In the past years, their contribution played a central role to the definition of the OECI international dimension and helped to better address the OECI mandate. Julio and Lex will continue to support the Organisation and to give their advices for the positions covered in international bodies to which the task to define the politics supporting the coordination of cancer research and the sustainability of quality approach to cancer care is assigned.

## The OECl welcomes six new members

The OECl General Assembly unanimously approved the candidacies of 4 new Full Members and of 2 New Associated Members.

The UK is strengthening its participation to the OECl taking, after Italy, the second position together with France as number of cancer centres participating to the membership. UK is also demonstrating a particular interest to the OECl approach to the accreditation.

We notice an increase in the membership from Central and Eastern European Countries and, therefore, the OECl is called to evaluate with particular emphasis the building of specific programmes and activities addressed to meet the expectations from those Countries.

Following, a brief introduction to the six New Members.

### Cancer Research UK Beatson Institute Glasgow, UK

#### Full Member

The mission of the CR-UK Beatson Institute (BI) is to deliver cancer discovery for patient benefit. It aims to carry out world-class research and translate this knowledge to new anti-cancer therapies. Core-funded by Cancer Research UK, the BI is one of the UK's leading cancer research institutes, providing outstanding facilities and support services for its scientists. It has invested heavily in the development of cutting-edge technologies – imaging, transgenic models of cancer, proteomics/metabolomics and drug discovery - to underpin its two key research themes that focus on the regulation of invasion and metastasis, and cancer metabolism, growth and survival. Currently, there are 14 research groups and around 220 scientists at the BI working on these important aspects of cancer cell behaviour in areas spanning basic research programmes to translational projects that encompass drug discovery and preclinical studies. Details of these can be found at [www.beatson.gla.ac.uk](http://www.beatson.gla.ac.uk). The BI has open plan laboratories and modern social spaces to maximise interaction between researchers, creating a highly collaborative environment as well as an excellent training one for junior scientists. Collaborations extend beyond the BI to include both local and international research groups, and the BI is a key partner in the Cancer Research UK Glasgow Centre (known as WeCAN) along with the Universities of Glasgow and Strathclyde, the Beatson West of Scotland Cancer Centre (the major treatment centre for cancer patients in the region) and the National Health Service. This virtual Centre aims to integrate Glasgow's considerable strengths in cancer research.



### Imperial College Healthcare NHS Trust - London, UK

#### Full Member

Imperial College Healthcare NHS Trust is one of the largest acute trusts in the UK and in partnership with Imperial College London was the UK's first academic health science centres (AHSCs). The creation of the AHSC is a major advance for patient care, clinical teaching and scientific invention and innovation. The Trust consists of Charing Cross, Hammersmith, Queen Charlotte's & Chelsea, St Mary's and Western Eye hospitals.

The organisations within Imperial have a long history of medical breakthroughs including the discovery of penicillin by Alexander Fleming at St Mary's Hospital in 1928. Excellence in translational medicine continues and The Trust is now one of five generic biomedical research centres (BRCs) in the UK. The Imperial was awarded this status by the National Institute of Health Research (NIHR) in recognition of its excellence in translational and clinical research.

Cancer care at Imperial is organised as a separate entity with services provided across the three main hospital sites. The Institute is the provider of a range of national and internationally recognised cancer services as well as providing comprehensive cancer care to our local communities in north west London. It works as part of the London Cancer Alliance - the network of cancer services - covering the south and west of London.



Chris Harrison

## Comprehensive Cancer Center - Graz, Austria

### Full Member

In May 2013, the Medical University of Graz, together with the University Hospital Graz, founded Austria's second CCC, focusing on research, education and training as well as on patient care. Apart from education of health professionals and first class patient care the Medical University and the University Hospital of Graz aim at gaining knowledge on cancer diseases and their origin as well as on prevention and therapies. The scientific research, which is carried out at the Medical University of Graz by way of investigation of physiological processes, decoding of genes and their functions, development of new surgery techniques and the development and testing of pharmaceuticals for new drugs, contributes to progress in cancer medicine. The CCC Graz is working together with Biobank Graz, a facility of the Medical University of Graz which supports investigations of the causes of diseases and the development of improvements in disease diagnosis and treatment. The goal of Biobank Graz is to contribute to the provision of improved healthcare for the general population. The CCC Graz works on current topics with state-of-the-art methods and thus contributes to medical and biotechnological progress every day.

Facts:

- 11 tumor boards - more than 3000 patients with new cases of cancer p.a.
- More than 10 operative facilities specialized in cancer disease
- State-of-the-art radiotherapy, cancer drug therapy and supportive care
- 17 University Departments certified in Pain Management
- Palliative care unit and psycho-oncological expertise
- More than 120 clinical trials p.a.
- Center for Medical Research - University facility providing a first class biomedical research infrastructure for both clinicians and basic research scientists
- Center for Knowledge and Technology Transfer in Medicine which aims to enable the seamless cooperation between scientific research at the Medical University of Graz and economic realization in cooperation with specific enterprises.



*Head of the CCC Graz: f.l.t.r.: Assoc. Prof. PD Dr. Dr. J. Haybaeck, DKKS Ch. Tax Msc., Mag. G. Falzberger, Univ. Prof. Dr. K. Kapp, Univ. Prof. Dr. H. Samonigg, ao.Univ. Prof. Dr. A. Langmann, Univ. Prof. Dr. J. Smolle, ao.Univ.-Prof. Dr. G. Brunner*



## Amethyst Radiotherapy Center - Bucharest, Romania

### Full Member

Opened since September 2012 in Bucharest, Amethyst Radiotherapy Center offers to Romanian oncological patients high tech radiation treatments. Professor I.C. Chiricuta, Amethyst Medical Director and his team, operate 100% of the cases with IMRT technology.

Romanian radiotherapy is very undeveloped: we estimate that less than 25% of the 70,000 new cancer cases diagnosed yearly will benefit radiotherapy treatment. Indeed with only 15 LINACs installed for 21,5 million inhabitants, Romania has one of the lowest equipment rate in Europe (<1 LINAC/ million inhabitant vs 6-7 for France or Germany).

Amethyst intends to open 2 more centers in Romania by the end of 2013.



## Institute of Biostatistics and Analyses, Masaryk University, Brno, Czech Republic (IBA MU)

### Associate Member

IBA MU was established in 2002 and since 2006 it works as university research institute focused on computational biology and health care informatics. Its research activities attempt to bridge the gap between informatics and mathematics on one side and biology and medicine on the other side. The institute develops in-house software solutions for health care programmes and provides comprehensive IT support optimized for all types of clinical trials and registries.



Ladislav Dusek

The system of service quality and information security is certified according to the following standards: ISO 9001:2009, ISO/IEC 20000-1:2006 and ISO/IEC 27001:2006. IBA MU participates in more than one hundred clinical projects and forms information base of the Czech National Cancer Control Programme including The Czech National Cancer Registry and all cancer screening programmes. Within the network of all the Czech and Slovak medical faculties ([www.mefanet.cz](http://www.mefanet.cz)), IBA MU coordinates professional e-learning in the cancer-related health care study disciplines. More information about IBA MU is available at [www.iba.muni.cz](http://www.iba.muni.cz).



## P.A. Herten Moscow Cancer Research Institute - Russia

### Associate Member

The Moscow Herten Cancer Research Institute, one of the oldest oncologic scientific organisations in Europe, was founded in 1898. The Institute is the head oncologic organisation of the Russian Federation since 1935. The organisational structure of the Institute includes 4 epidemiological and statistic departments, 20 clinical departments, 9 diagnostic and 7 basic research and translational departments. The medical staff of the Institute includes more than 300 specialists. Up to 410 patients can be simultaneously treated in the Institute. The main directions of the clinical scientific work consist of development of organ-sparing and function-preserving methods of treatment of patients with malignant tumors including reconstructive and plastic surgery applying microsurgical technologies and biotechnologies, physical factors (such as laser, cryodestruction, hyperthermia), extended and cytoreductive surgery, photodynamic diagnostics and therapy. Basic research and translational units develop cell technologies, new biological markers, modifiers and protectors of anticancer therapy, predictive methods of treatment efficacy, and evaluate genetic and protein models.



## Four OECI Comprehensive Cancer Centres received the accreditation certificate

During the OECI 2013 General Assembly, the OECI accreditation certificate has been assigned to four OECI Members.

Actually, 15% of the OECI Members passed the accreditation procedure and 25% (15 Institutes) of the remaining Members entered already the process.

We foresee that in the next three years, about 60% of our centres will receive the accreditation certificate becoming the starting point of a formal recognized European Cancer Network of Quality based on cancer related and verified criteria of excellence which have been defined by the OECI with a 10 years of scientific work done on voluntary basis by qualified Members of the Organisation.

The OECI thanks the Chairperson of the WG Accreditation and Designation, Mahasti Saghatchian, and the Accreditation Board for the outstanding job they did.

Following, few pictures related to the award of the OECI Accreditation Certificates to:



*The certificate awarded to the Director of the Institute of Oncology of Vilnius University, Lithuania, Professor Narimantas Evaldas Samalavičius*



*The certificate awarded to Dr. Mahasti Saghatchian, representing the Institut Gustav Roussy, Villejuif, France*



*The certificate awarded to the Medical Director of the Institut Jules Bordet, Brussels, Belgium, Dr. Dominique De Valeriola*



*The certificate awarded to Professor Carlos Caldas, representing the Cambridge Cancer Centre, United Kingdom*

## 2014 OEI Oncology Days and General Assembly Cluj Napoca, Romania



**CLUJ 2014**  
GENERAL ASSEMBLY,  
SCIENTIFIC CONFERENCE  
AND RELATED EVENTS

The 2014 OEI Oncology Days and General Assembly will take place in Cluj Napoca, Romania, on June 11<sup>th</sup> – 14<sup>th</sup>, hosted by the Oncology Institute Ion Chiricuta. The scientific programme will include the Pathology Day 2014, and two Scientific Sessions on Basic Clinical Care and Delivering Cancer Care in 2014.

The General Assembly will be held in the morning of June 14<sup>th</sup>.

A sightseen tour will follow the 2014 Event. It will include trips around the most popular places such as Sighisoara in Transylvanian Alps where the Bran Castle (Dracula's Castle) is located and to the Turda Salt mine.

Cluj is the second city in Romania after Bucharest, first in number of students. Its history is very rich, particularly in light of the fact that it has always been a meeting place of different cultures, languages and

religions, Hungarians, Saxons, Jews, Romanians, Armenians, Slavs and other. The name Cluj probably derives from the Latin Castrum Clus used for the first time in the twelfth century. The term Clus means "closed" and refers to the hills that enclose the city.



*The Oncology Institute "Ion Chiricuta"*



*The Dracula's Castle in Transylvania*

## OEI WORKING GROUPS

### ACCREDITATION AND DESIGNATION



*Mahasti Saghatchian*

Twenty-six cancer centres in Europe participate in the OEI A&D programme, which means that the programme has more than doubled within two years time. Italian Centres have joined the programme based on a National initiative funded by the Italian Ministry of Health. The certification of the first ten centres that ran the full OEI A&D programme encouraged the working group to start a broad evaluation. The data and experiences gathered is used to aim for improvement and professionalising of the programme and overcoming threats for a sustainable programme in the future, and to strengthening commitment for the programme in wider range of influencing European stakeholders. We learned from the evaluation that OEI A&D can be a tool to promote collaborations among cancer centres provided that the data is gathered in an equal way and is put in perspective to the context of national health systems. Furthermore, we learned that participating in the programme,

and being certified, has added value in internal communication, critical thinking, role dynamics of different disciplines, and credibility. The studies showed the willingness of centres to benchmark themselves against other cancer centres across Europe. That emphasizes the need for similar quality standards, which the OEI is providing, including the tool for gathering the needed data. This is an important message to all centres considering participation and for national and European policy makers who are in position of encouraging cancer centres to take part in the OEI A&D programme.

There is also an important message to patients showing the value of accreditation in demonstrating equivalence of care; a patient could be treated anywhere in Europe. As of 2013, a close cooperation will be established with the European Cancer Patient Coalition, under the Presidency of Professor Francesco de Lorenzo.

## BIOBANKS AND MOLECULAR PATHOBIOLOGY



Giorgio Stanta

This year the OECl Biobanking and Molecular Pathobiology Working Group started new activities. Specific research groups were set up to prepare guidelines for internal controls in the extraction of nucleic acids from Fixed and Paraffin Embedded Tissues, for diagnostic sequencing and for pre-analytical conditions of clinical tissues. These activities were set up with the collaboration of other European Organizations like the European Society of Pathology. The OECl pathologists also joined the ESMO-ESP initiative about external quality assurance and a new e-publication was prepared to collect case reports about unusual findings in clinical molecular pathology, as a reference archive for the development of molecular diagnostics.

The group is also developing a very wide European Network to improve the design and the technical quality of cancer retrospective survival studies, using archive tissues from residual clinical procedures. These studies are devoted to accelerate the process of clinical biomarker verification and validation.

A specific interest of the group is training of young pathologists and molecular biologists in Molecular Pathology and, for this reason, in May 2013, a course in Advanced Molecular Pathology in Cancer has been organized in Amsterdam together with EACR and the EurocanPlatform. Further teaching and training courses will also be developed in collaboration with the European Society of Pathology.

## START-OECl



Lisa Licitra

During the past year the START – OECl focussed its activity on giving new life to the whole project. Both the website and its contents have been renewed. The website will be update with a new design and new features and all the contents will be updated as well. START-OECl will improve its

efforts to develop new chapters on rare tumors and it is planned to revise all the existing ones. The ultimate goal is to become more and more the core group of a network providing information on rare cancers to the community, developing a laymen section at the same time.

## PREVENTION AND EARLY DIAGNOSIS



Chris Harrison

The OECl Prevention and Early Detection working group has several objectives:

1. To define standards for cancer prevention and early detection which can be incorporated, in due course, into the OECl's accreditation programme for the full range of types of cancer institutes.
2. To represent the OECl in its relationships with other European groups concerned with cancer prevention and early detection.
3. To create a network of individuals within OECl member organisations with an interest in cancer prevention and early detection.
4. To identify potential research, educational or service collaborations between OECl member organisations in the field of cancer prevention

and early detection.

To pursue these objectives the working group has been established with membership from 10 OECl member organisations. The membership is open to other interested cancer centres which aims to join the already constituted steering group. A seminar will be held in November 2013 and a baseline survey of activities relating to cancer prevention and early detection amongst OECl member institutions will be complete by the end of 2013 in order to be ready also for the first calls of Horizon 2020. The WG will strongly interact with the other OECl WGs and educational activities will be planned among physicians, nurses and other health care providers.

## EDUCATION AND TRAINING



Angelo Paradiso

In 2013 the OECl Education and Training WG has been involved in planning the first events of the OECl Central and Eastern Europe education programme, elaborated for the years 2013-2015 as part of the OECl's commitment to better meet the needs of members in these countries. Many of these events will be in collaboration with the European School of Oncology. The event "Nuclear and Personalised Medicine Development in the

Diagnosis and Treatment of Cancer" will take place in Kazan, Russian Federation in October 2013, and preliminary discussions are under way for events in Cluj, Romania and Kiev, Ukraine in May and September 2014. Furthermore, the OECl will contribute to the organisation of the 2nd EurocanPlatform Summer School in Translational Cancer Research which will be held in Portugal in October 2014.

## 3rd EACR-OECI Molecular Pathology Course

The 3rd EACR-OECI Joint Training Course on the 'Molecular Pathology Approach to Cancer' was held in Amsterdam from 6th to 8th May 2013, and was another successful edition of what is increasingly becoming a key event for those working in, or with a connection to, the field of molecular pathology.

The Third course was held in collaboration with the EurocanPlatform Network of Excellence.

Participants heard informative lectures from a renowned faculty of international speakers, with a keynote lecture from Richard Marais on "Targeted therapies for melanoma patients". Overall the course successfully provided an up-to-date review of current molecular pathology concepts and molecular biomarkers, along with recent advancements and challenges for their assessment and interpretation.

The course welcomed 140 participants from 27 countries and feedback received after the course was very positive. In the post-course feedback survey, 92% of participants rated the quality of the education offered at the course as Very Good or Excellent and 94% said that the information provided would be 'useful' or 'very useful' in their work and practice. Immediately after the course participants received material relating to presentations to help underpin the learning that took place at the course itself.

Over half of the participants heard about the course from a colleague, which reinforces the importance of sharing knowledge of the event through all of our networks.

The organisers expect to build on the success of the previous courses with a 4<sup>th</sup> edition of the event planned for May 2014 and it is foreseen the involvement of other major cancer Organisations.

The OECI has granted 5 awards of 500 Euros each to young pathologists.



*The OECI and EACR fellows at the 2013 Edition of the training Course*

## Nuclear and Personalised Medicine Development in the Diagnosis and Treatment of Cancer

On October 4<sup>th</sup>-5<sup>th</sup>, 2013 the OECI will be holding its first education event in Kazan - Russian Federation, with the conference "Nuclear and Personalised Medicine Development in the Diagnosis and Treatment of Cancer".

The conference is jointly organised by the OECI, the Tatarstan Cancer Centre in Kazan, the Association of Oncologists of Russia and the Ministry of Health of the Republic of Tatarstan with the participation of ESTRO. It was inspired by the opening of a Nuclear Medicine-PET facility in the host Cancer Centre, which is witnessing a shift towards a more personalised approach to the management of cancer patients. The meeting will be opened by the local representative of the Russian Ministry of Health, which is currently implementing a national network of PET centres (7 opened in the last 2 years, 6 more to open shortly) that it would like to develop in close collaboration with the European clinical-scientific world.

The conference will be an opportunity for local health professionals to meet with other European experts in both Nuclear and Personalised Medicine to discuss the state of the art and future developments in these fields. The first day will consist of 3 Plenary sessions on the themes of "National Cancer Plans in the Russian Federation and Western Europe", "Bioimaging - Needs & Challenges" and "Personalised Medicine: New Horizons in Oncology". The second day scientific conference will give attendees the choice between two parallel sessions, one on "Nuclear/Bioimaging: Practical Problems" and the other on "Personalised Medicine". All sessions will see a mix of Western European speakers and others from throughout the Russian Federation.

## OECl training course for Accreditation and Designation auditors

On July 3rd-4th, the fourth training course for accreditation auditors took place in Bari, kindly hosted by the Giovanni Paolo II Comprehensive Cancer Centre.

The training has been held by Patrick Corstiaans, Director of Kerteza, a Belgian consultancy company that offers bespoke services which support and guide healthcare organisations to design, develop, implement and maintain quality, safety and process management systems.

The attendees were mainly from Italy, a Country which is participating with 11 CCCs to the Accreditation and Designation process, also thanks a special project supported by the Italian Ministry of Health, coordinated by the National Institute of Health (ISS).

The other Countries represented were Lithuania, The Netherlands and United Kingdom.

The course has been successfully, and the OECl congratulates the 16 new "Accreditation Auditors Diplomats". The OECl thanks Femke Boomsma, OECl Coordinator, who assisted to the training.

A special thanks to the local organisers and particularly to Angelo Paradiso and to Rosanna Lacalamita which followed step by step all the local management tasks.



### The new "Diplomates"

Country	City	Centre	Name auditor	Position
Italy	Aviano	Centro di Riferimento Oncologico Istituto Nazionale Tumori	Paolo De Paoli	Scientific Director
Italy	Meldola Forli	Istituto Scientifico Romagnolo per la Cura dei Tumori	Elena Prati	Medical Doctor in Health Care Management
Italy	Meldola Forli	Istituto Scientifico Romagnolo per la Cura dei Tumori	Anita Zeneli	Research Nurse
Italy	Reggio Emilia	Azienda Ospedaliera Arcispedale S. Maria Nuova	Elisa Mazzini	Medical Doctor Medical Direction Staff
Italy	Bari	Istituto Tumori Giovanni Paolo II	Vito Lorusso	Chief of Medical Oncology Operative Unit
Italy	Bari	Istituto Tumori Giovanni Paolo II	M. P. Trisorio Liuzzi	Medical Director
Italy	Genoa	IRCCS Azienda Ospedaliera Universitaria San Martino- IST – Istituto Nazionale per la Ricerca sul Cancro	Letizia Canepa	Hematological Day Hospital Chief
Italy	Genoa	IRCCS Azienda Ospedaliera Universitaria San Martino- IST – Istituto Nazionale per la Ricerca sul Cancro	Francesco Monetti	MD, Quality Manager Dept. of Radiology, Breast Imaging Section
Italy	Naples	Istituto Nazionale per lo Studio e la Cura dei Tumori Fondazione 'G.Pascale'	Jane Bryce	Research Nurse Clinical Trials Unit
Italy	Naples	Istituto Nazionale per lo Studio e la Cura dei Tumori Fondazione 'G.Pascale'	Gianfranco De Feo	Quality Manager/monitoring of clinical trials
Italy	Rome	Istituto Regina Elena	Ramy Kayal	Radiologist
UK	Cambridge	Cambridge Cancer Centre	Simon Oberst	Director of Clinical Development
Lithuania	Vilnius	Oncology Institute Vilnius University	Teresa Cesiuliene	MD, head internal medical audit
Netherlands	Netherlands	Comprehensive Cancer Centre The Netherlands (IKNL)	Marjet Docter	OECl / consultant IKNL
Netherlands	Amsterdam	The Netherlands Cancer Institute Antoni van Leeuwenhoek hospital	Margot Tesselaar	MD, Staff medical oncology
Netherlands	Amsterdam	The Netherlands Cancer Institute Antoni van Leeuwenhoek hospital	Marianne Keessen	Nurse practitioner



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Porto, Portugal



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