Update on EURECCA's projects and activities of the past years and future plans on behalf of the ESSO Board meeting the 15th.
EURECCA 2016

EURECCA ACTIVITY REPORT

EURECCA GENERAL

EURECCA, European Registration of cancer care, was founded in 2007 as an ESSO/ECCO initiative for Quality Assurance in Cancer Care. The president and founder of EURECCA, Prof Cornelis van de Velde, is one of the dedicated leaders of the international network of medical professionals striving to provide high quality cancer care. EURECCA is an international multidisciplinary collaborative platform of clinicians, epidemiologists and patients, aiming to improve the quality of cancer care by harmonizing data collection, providing feedback, forming plans for improvement and sharing knowledge of performance and science.

In a nutshell

At this moment, we have 4 very active tumour site groups and three groups in the starter phase, still working on the base of collaboration. The colorectal cancer (CRC) work group, was launched as the first, resulting in a several consensus meetings and documents to guide colorectal cancer care as well as retrospective and prospective studies to improve cancer care. As an example, more than 500 patients are entered in less than a year in the International Watch & Wait Database for patients clinically responding to induction chemoradiation for rectal cancer. Shifting treatment strategy from surgical resection to minimal invasive approaches or in selected patients omitting surgery under a high-frequent surveillance program. In the coming period, we will start the development of a web-based eLearning benefitting both health care providers and patients in close collaboration with patient organisation EUROPAcolon. Detecting under and over treatment and treatment of older patients are topics in the spotlight of the CRC group.

Bill Allum leads the Oesophageal-gastric (OG) cancer group, currently consisting of Upper-GI surgeons, aiming to improve outcome by collaboration and sharing knowledge. This group has recently, written down the common data set for OG cancer and has produced the first comparison of OG cancer care between 5 European countries. Moreover, they have mapped the service delivery of the clinical pathways in European countries. New projects in OG cancer will focus on differences in treatment for age groups, complete responses and definitive chemoradiation, strategies for patients with signet ring carcinoma and compliance to D2 gastrectomy.

The EURECCA Breast cancer group is led by Riccardo Audisio. As a first EURECCA project, we were honoured to work together with the EUSOMA group; studying the treatment patterns of 27 EUSOMA certified breast units in Europe, revealing less adherence to quality indicators in the young and older patients. Time to change breast cancer guidelines to age group- tailored guidance? Currently, a dataset of more than 120.000 patient
with breast cancer is being analysed, to reveal practices in breast cancer care in Europe over the past decade. The newest project around is INSPIRE, International Nipple sparing Mastectomy prospective database, the dataset is being refined to go live as soon as possible. Treatment strategies of the axillary lymph nodes in breast cancer, will be investigated using questionnaires to be sent to all participating countries in the EURECCA network.

In the pancreatic cancer group, EURECCA is currently collecting the first data sets to compare outcomes of resection at an international level.

Evidence based medicine and Quality assurance are the key themes to unravel best practices in cancer care in Europe.

Petra Boelens, CEO EURECCA

Cornelis van de Velde, Founder & President EURECCA

Riccardo Audisio, EURECCA chair Breast cancer

Bill Allum, EURECCA chair OG cancer
EURECCA Activities

- Retrospective and prospective studies. High quality data collection, study assistance and processing of international data. Analysis with SPSS, STATA, SAS, excel etc. Epidemiologists and statisticians available who are specialized in this field of merging different data bases.

- Quality in data collection. Defining uniform datasets.

- Quality in study design and methodology. Multinational studies.

- Quality in collaboration. Networking to build and maintain the multidisciplinary expert groups. Patient-centered. Objective. No conflict of interest. Ethical data handling.

- Quality in Feedback is generated by regular reports to the network.

- Manuscripts are written in collaborating with participants of the registries/audits.

- Four Newsletters per year, with updates from the different fields.

- Organizing international consensus conferences, scientific symposia and meeting with the Board per tumour site group.

- Education (development of E-learning multidisciplinary educational program/workshops), assisting in guideline formation and writing patient friendly summaries.

- Support of active patient involvement in improvement of cancer care.

- Support multidisciplinary cancer care, integrated care pathways.

- Organize international collaboration in pioneering treatments to improve cancer care and outcome analysis (International Wait & Watch database for responders to CRT and nipple sparing mastectomy (INSPIRE))

- Seeking synergy with other projects with similar ethics and interests.

EURECCA has retrospective projects usually piloting the ground for prospective successors.

Ideally prospective web-based databases are generated, however, the costs and the funds available play a role in this.
<table>
<thead>
<tr>
<th>Tumour site group</th>
<th>Number of projects</th>
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<tbody>
<tr>
<td>Colorectal cancer</td>
<td>7</td>
</tr>
<tr>
<td>Upper GI</td>
<td>6</td>
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<tr>
<td>HPB</td>
<td>2</td>
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<td>Breast cancer</td>
<td>4</td>
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<tr>
<td>Lung cancer</td>
<td>-</td>
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<td>Melanoma</td>
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<td>Prostate</td>
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Please see the project descriptions for progress and work group members.

EURECCA CRC projects

1. Octogenarians with colon cancer
2. Octogenarians with rectal cancer
3. Adjuvant chemotherapy after rectal surgery with curative intent
4. Adjuvant chemotherapy in colon cancer stage II
5. Asymptomatic stage IV colorectal cancer, role of surgery of the primary
6. IWWD
7. E-learning CRC

EURECCA OG projects

1. International comparison treatment OG
2. Audit of compliance to D2 gastrectomy
3. Exploring alternatives- complete remissions in OG cancer
4. Age-specific selection criteria in OG cancer?
5. Signet cell carcinoma – what is the best treatment
6. E-learning OG

EURECCA Breast cancer

1. Treatment patterns and relative survival for older patients with non-metastatic breast cancer
2. INSPIRE- nipple sparing mastectomy
3. Advanced and metastatic breast cancer- endocrine stage distribution
4. Axillary treatment in Europe, what did we change?

EURECCA HPB

1. Common data set in Europe?
2. First international comparison in pancreatic cancer
van den Broek CB, Boelens PG, Breugom AJ, van de Velde CJ. Improving the Outcome of Colorectal Cancer: The EURECCA-Project. Colorectal Cancer (2013) 2(4), 1-6


Beets GL, Figueiredo NL, Habr-Gama A, van de Velde CJ. A New paradigm for rectal cancer; Organ preservation Introducing the International Watch & Wait Database (IWWD). EJSO 2015 Dec 41; 1562-4


M. Messager. Description and analysis of clinical pathways for patients treated for oesophageal and gastric adenocarcinoma in different European countries involved in the EURECCA project. Accepted EJSO 2016

Before 2013


