



"Research Collaboration and Education opportunities and challenges"

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Secretary of the Israeli Association for Clinical Oncology and Radiation Therapy (ISCORT)



ISCORT represents 240 oncologists who work in 8 integrated cancer centers with both medical oncology and radiotherapy departments, and ten additional centers with medical oncology departments.

ISCORT is the official representative of Israeli oncologists within the Israel Medical Association (IMA) and has collaborative agreements with ESMO and ESTRO.



- Within ISCORT there are several groups representing the common tumor types Breast, GI, GU, lung melanoma, sarcoma and groups for radiation oncology and palliative care.
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- These groups have scientific meetings several times each year
- Each year in January ISCORT holds an annual oncology meeting

- ISCORT, together with the scientific council of the IMA, is responsible for the residency program and for qualification exams in Medical and Radiation Oncology.
- The 5 ½ year residency program includes a joint residency for the first two years during which residents are exposed to both medical and radiation oncology following which they choose which subspecialty to follow and continue in that program.
- The medical oncology training is recognized by ESMO and the radiation oncology training follows the ESTRO guidelines to ensure that the residents receive adequate training.

Log Book – Edition 2017
(Third Edition)
referring to

ESMO / ASCO
Recommendations for a
Global Curriculum in Medical Oncology
Edition 2016

- Israeli oncology departments participate in international collaborative trials and ISCORT runs a database of open trials for all the common indications.
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- ISCORT provides grants to young oncologists for sub-specialty training and seed grants for clinical and pre-clinical research.
- ISCORT has collaborated with the European School of Oncology in arranging international oncology courses in Israel. (course on multidisciplinary therapy in Feb 2019)
- Radiation Oncologists actively participate in AROME (Association de Radiotherapie et d'Oncologie de la Mediterranee)



Once-Bridge: Next Step



Board of Country representatives base on the
National Associations for Medical Oncology



The association will be supported by the National
Oncology Associations



Goals:

- Promote and support oncology research and training throughout the Mediterranean area.
- Promote exchanges between scientific centers, and Medical societies throughout the Mediterranean area
- Participate in scientific meetings, courses, and conferences in the Mediterranean area countries
- Collaborate with other groups of experts in oncology



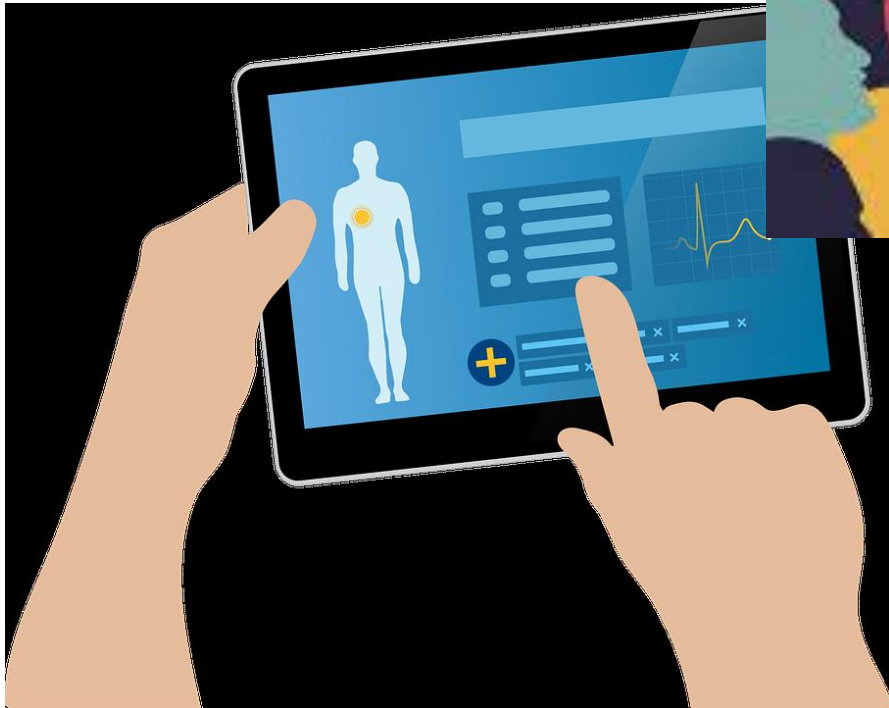
Where to continue:

- Research grants for collaborations studies by young oncologists
- Preceptorships in specific fields of oncology in the collaborate countries with industry support



YES WE CAN!

Research proposal: Real life patient-reported outcomes



Oncology today:



- Multiple new drugs and interventions
- Several treatment options
- Most clinical trials today assess QOL as important secondary end point.
- Patient-reported outcomes (PRO) can predict morbidity and mortality better than physician reported outcomes in clinical trials (Basch et al).
- Routine assessment of PRO can prolong survival across multiple cancer types.
- No routine assessment of PRO in cancer patients in Israel (and most other countries)

PRO can be used for Measuring Health Outcomes



- **Clinical Decision Analysis**

- drug choice, specialty care, disease management program

- **Cost Effectiveness Analysis**

- economic aspects
- QALY- quality adjusted life year

- **Health Technology Assessment**

- Drug evaluation, screening tests, surgical interventions, medical devices, health promotion technology

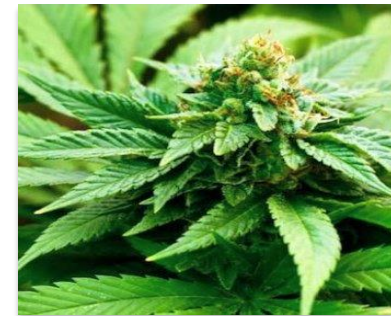
PRO in oncology- where the QoL was not evaluated as part of studies



Rare disease



Advanced lines of
oncology treatments



Supplements drugs and
treatments (cannabis for
instance in advanced
disease)

Indirect utility assessment

- HUI, EQ-5D, AQoL, 15D, Rosser index- the most validated in all languages and cultures



MOBILITY

- ☐ I have no problems in walking about
- ☐ I have some problems in walking about
- ☐ I am confined to bed

SELF-CARE

- ☐ I have no problems with self-care
- ☐ I have some problems washing or dressing myself
- ☐ I am unable to wash or dress myself

USUAL ACTIVITIES (e.g. work, study, housework family or leisure activities)

- ☐ I have no problems with performing my usual activities
- ☐ I have some problems with performing my usual activities
- ☐ I am unable to perform my usual activities

PAIN/DISCOMFORT

- ☐ I have no pain or discomfort
- ☐ I have moderate pain or discomfort
- ☐ I have extreme pain or discomfort

ANXIETY/DEPRESSION

- ☐ I am not anxious or depressed
- ☐ I am moderately anxious or depressed
- ☐ I am extremely anxious or depressed

Research
proposal-
real life PRO
and Utility
assessment

Routine assessment of utility
such as EQ-5D questionnaire
in oncology outpatient clinics.

User-friendly touch-based
questionnaires in the waiting
rooms.

Questionnaire results can be
transferred to the electronic
patient record.

Study aims



ROUTINE QOL
ASSESSMENT



REAL LIFE ASSESSMENT OF UTILITY
SCORE OF MULTIPLE
INTERVENTIONS- CALCULATION OF
COST-BENEFIT



COMPARISON OF UTILITY
SCORES BETWEEN
REGIONS AND COUNTRIES

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2007

Thank you for your attention.
İlginiz için teşekkür ederim.

