

What Do European Community Oncologists Expect from ESMO?

Results from Surveys among Community Oncologists in Germany, Greece, Romania, Hungary, and Luxembourg

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1 - 6 Members of the ESMO Community Oncology Working Group

Community Oncologists

The ESMO Community Oncology WG defines Community Oncologists as

Oncologists

- working mainly outside academic institutions or comprehensive cancer centers
- often involved in clinical trials
- hospital-based and / or office-based
- treating a wide range of tumours

Data Base

All questionnaires were distributed and answers received by email and/or fax by the national WG members. All authors put much personal effort into getting a high response rate.

Germany, 2010 (RE): office based haematologists and MO only (organized in the BNHO); 164 replies from 533 BNHO members (31%) (previously published at ESMO 2010, Poster 1093 PD)

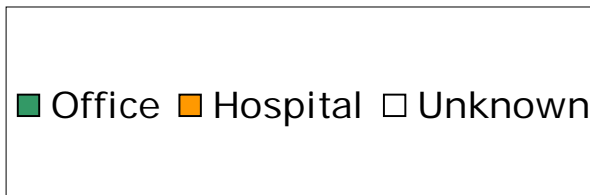
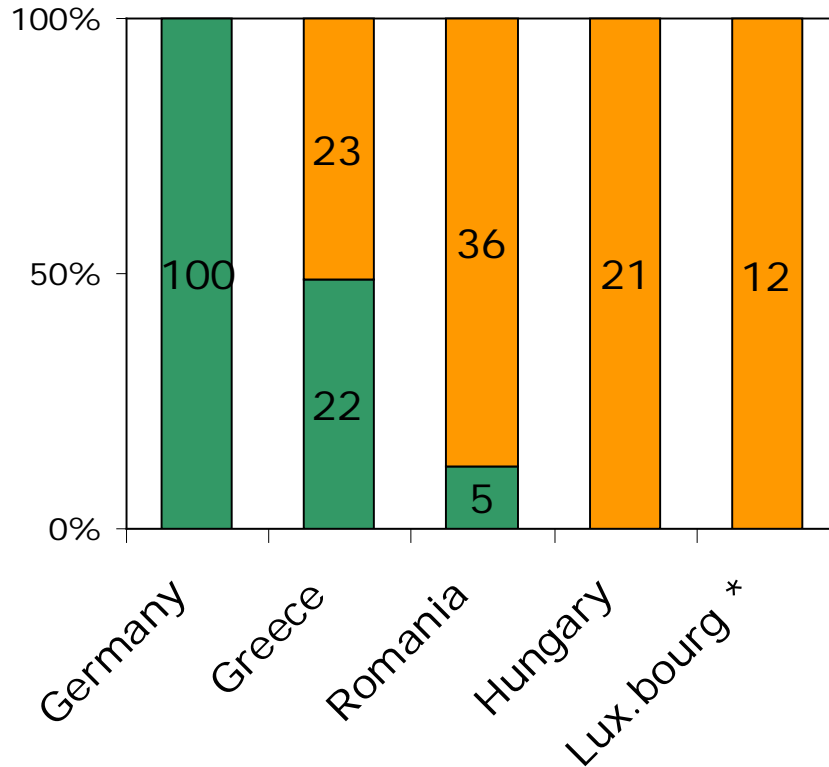
Greece, 2011 (DM): 90 Community Oncologists identified and contacted; 45 replies (50%)

Romania, 2011 (RC): 148 of ca. 300 oncologists questioned (102 from mailing list of prof. soc. and additional 46 were author's personal contacts; 41 replies (27,7%)

Hungary, 2010 (KT): questionnaires distributed / received at Biennial Congress of the Hungarian Society of Clinical Oncology (Magyar Klinikai Onkológiai Társaság); 36 of ca. active 300 oncologists replied (12%); of these 21 identified as COs

Luxembourg, 2011 (SR): 13 oncologists contacted, 12 replies (92,3%)

Data base: Survey of Community Oncologists hospital vs. office

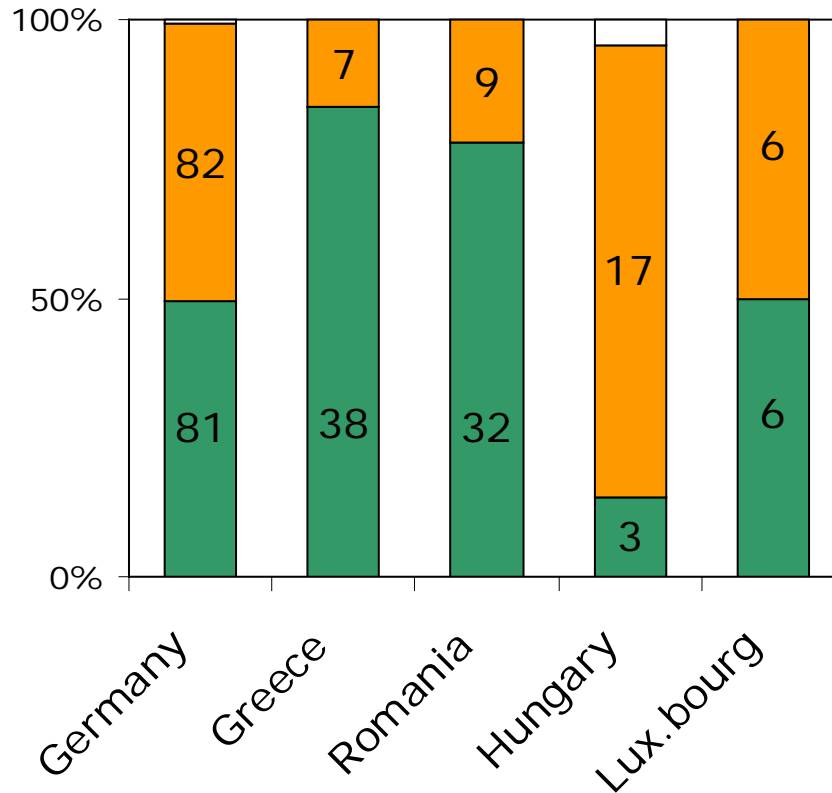


German survey was done on office based oncologists only

Greek survey shows no statist. sign. difference between office and hospital based oncologists

* **Luxembourg**: all chemos are applied at one of 7 hospitals; part of oncologists see pts. at private offices

ESMO membership among Community Oncologists



ESMO members,
Sept. 2011:

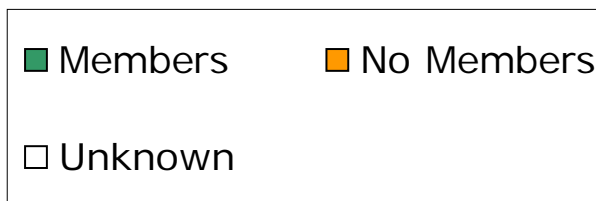
Germany: 717

Greece: 166

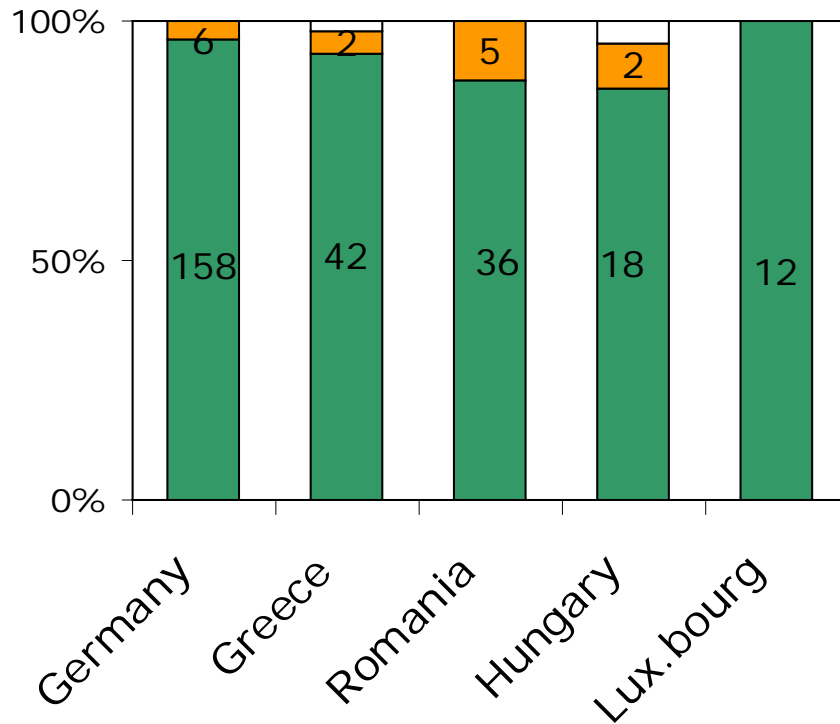
Romania: 143

Hungary: 47

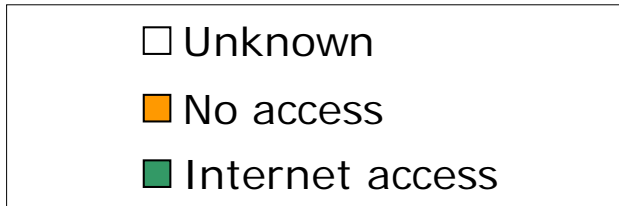
Luxembourg: 10



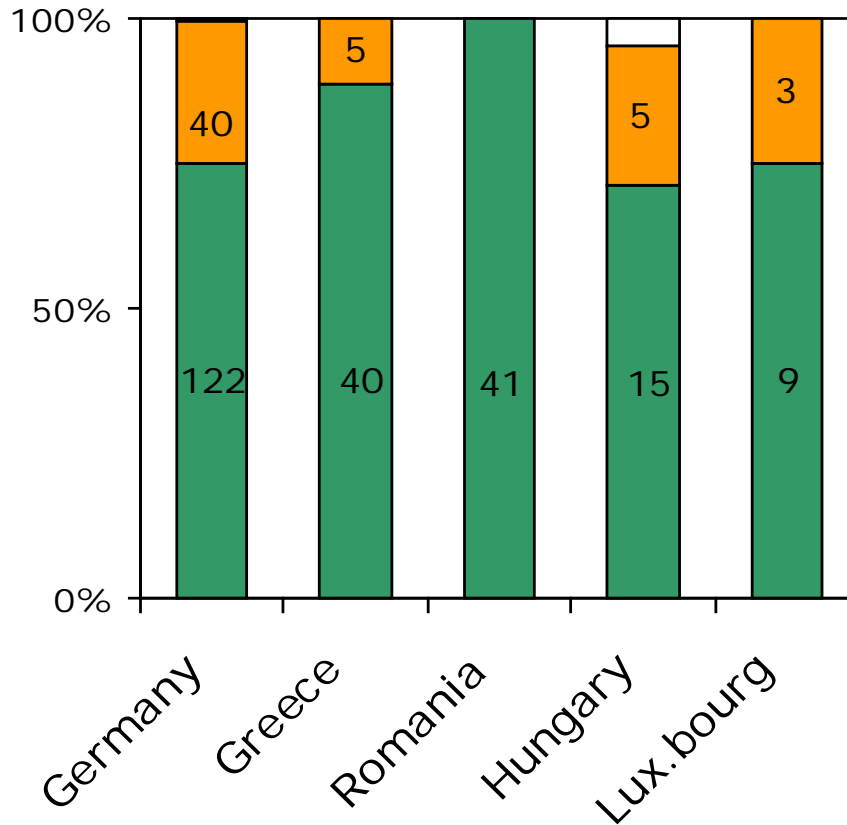
Internet access at work place



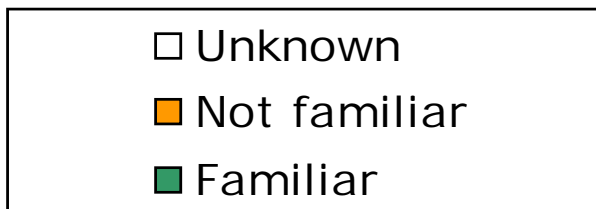
A large majority of COs have internet access at work



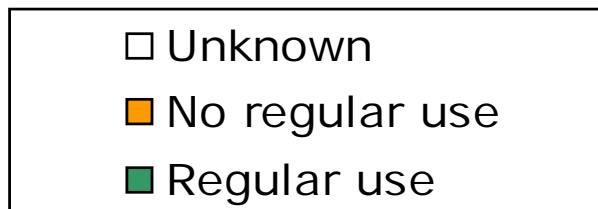
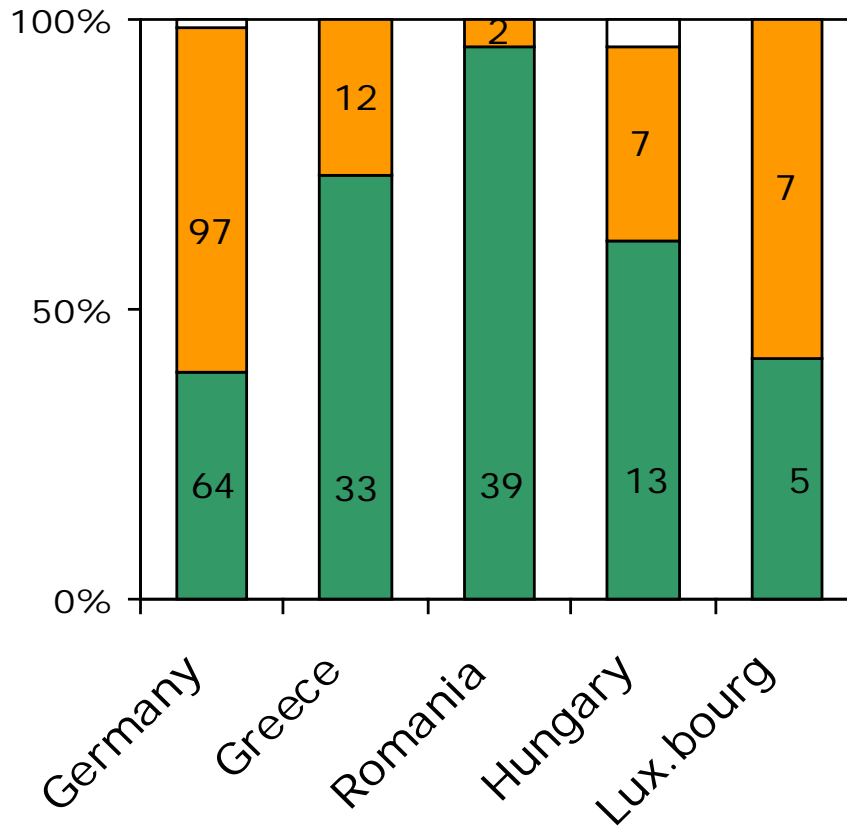
Familiarity with ESMO homepage



Majority of COs know ESMO's home page

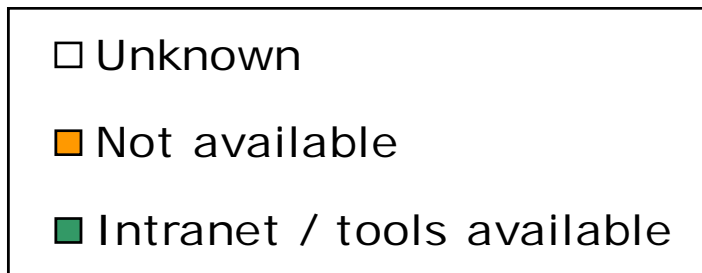
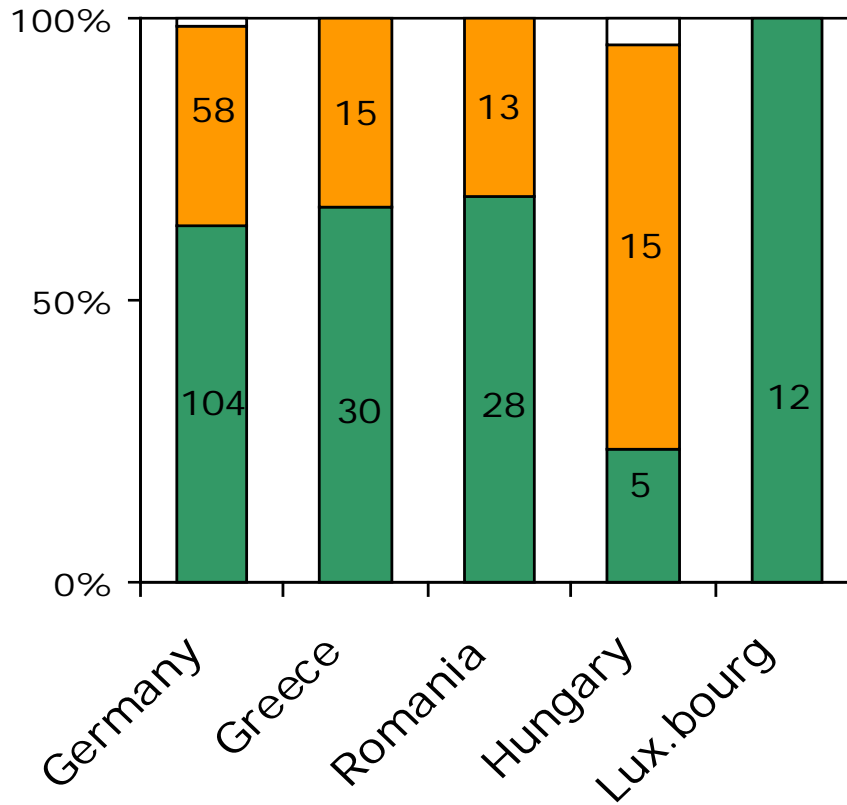


Regular use of ESMO Clinical Practice Guidelines

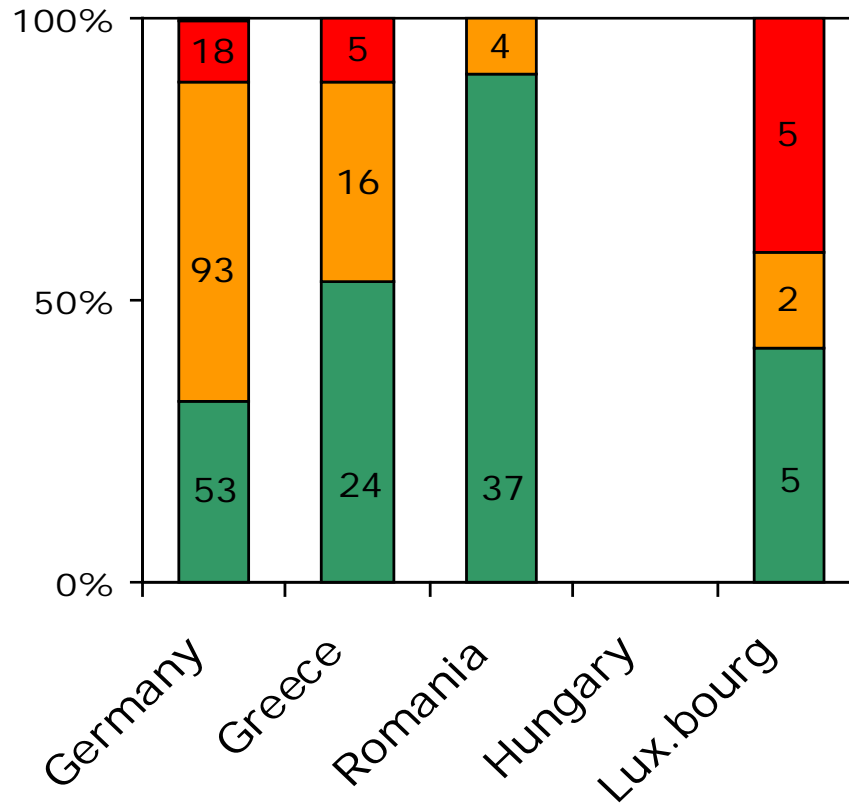


Great variation of ESMO CPG use among countries. Depending on availability of national guidelines?

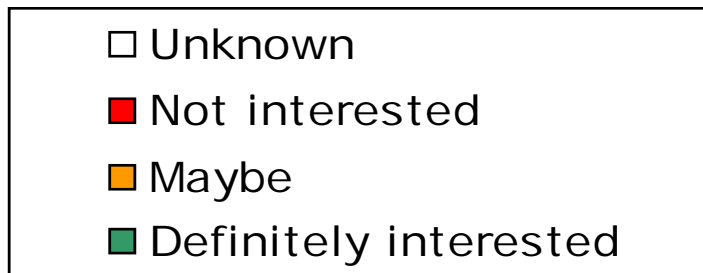
Availability of intranet / electronic planning tools at place of work



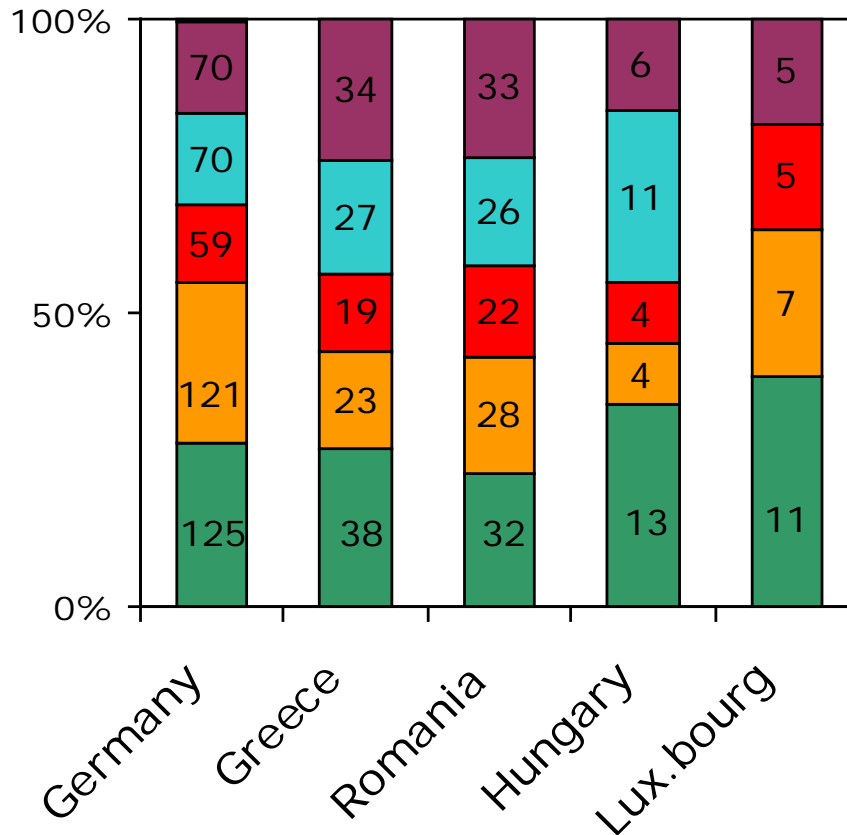
Interest in electronic tools on the ESMO homepage



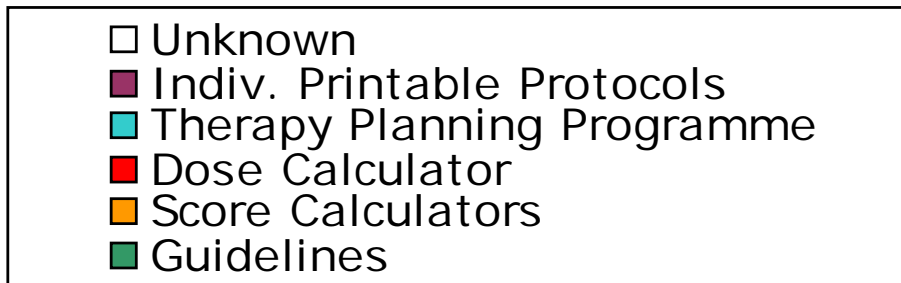
Hungary: n.k.



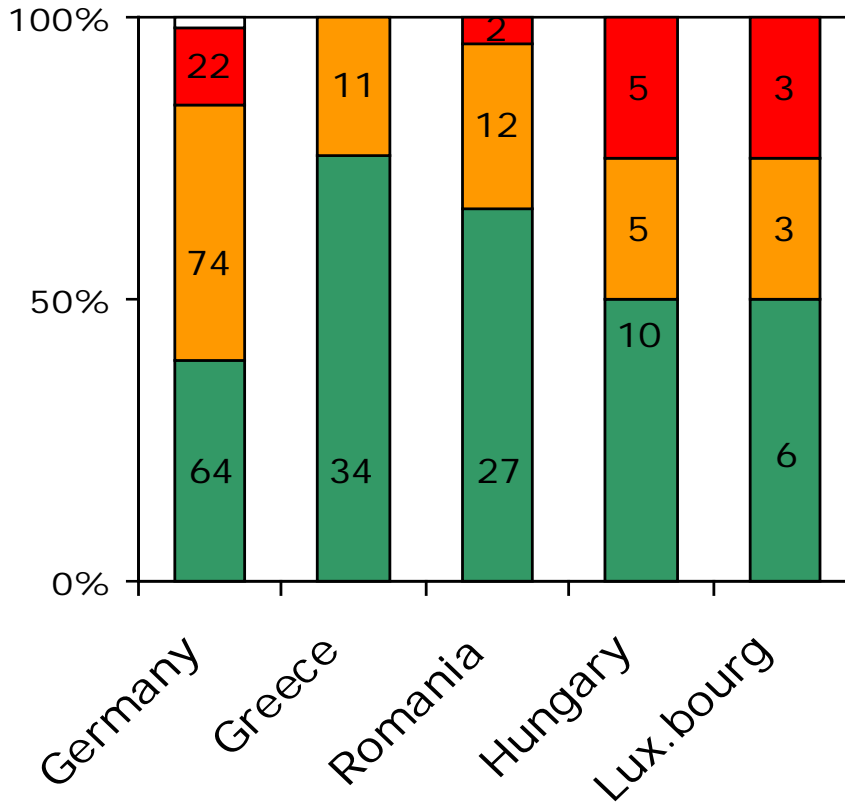
Interest in which electronic tools?



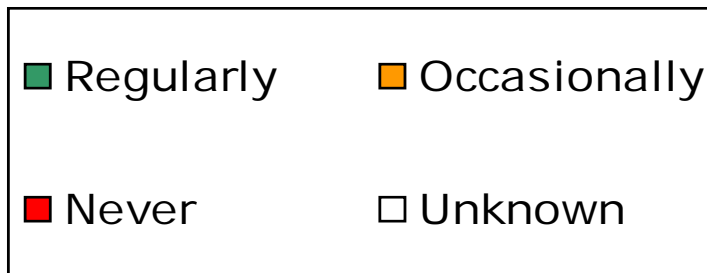
Multiple answers were possible, adding to >100%!
Figure given as 100% for better comparability only!



Attendance at ESMO conferences

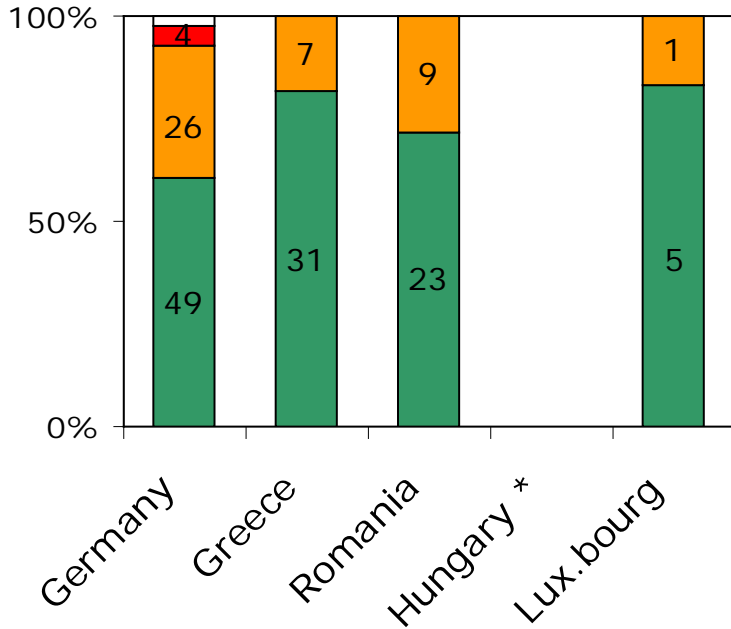


(Comment: A large proportion of German COs are (also) ASCO members and attend ASCO conference)

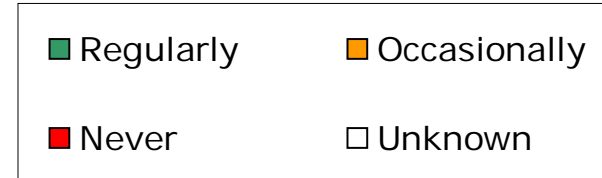
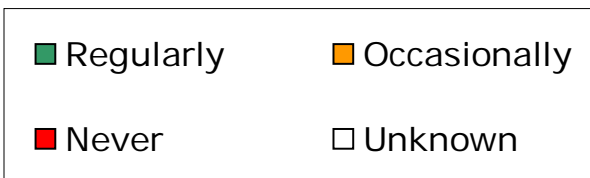
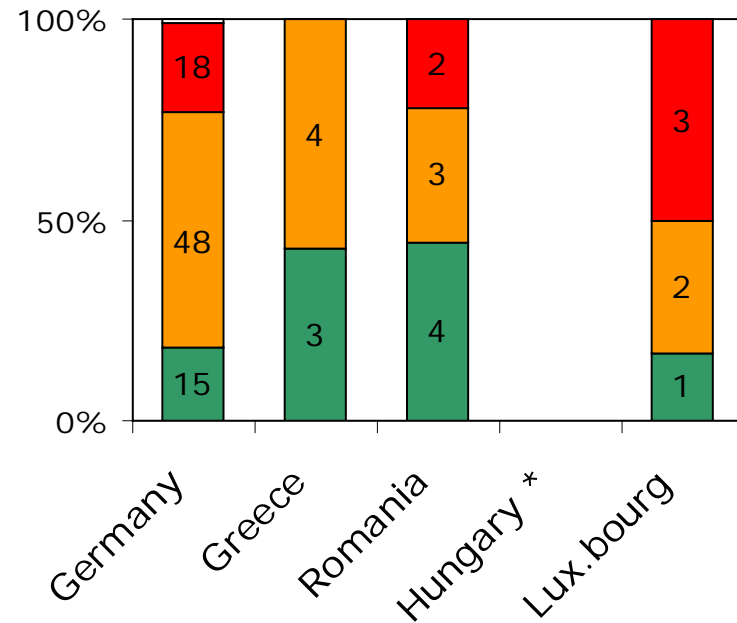


Attendance at ESMO conferences: ESMO members vs. non-members

ESMO Members

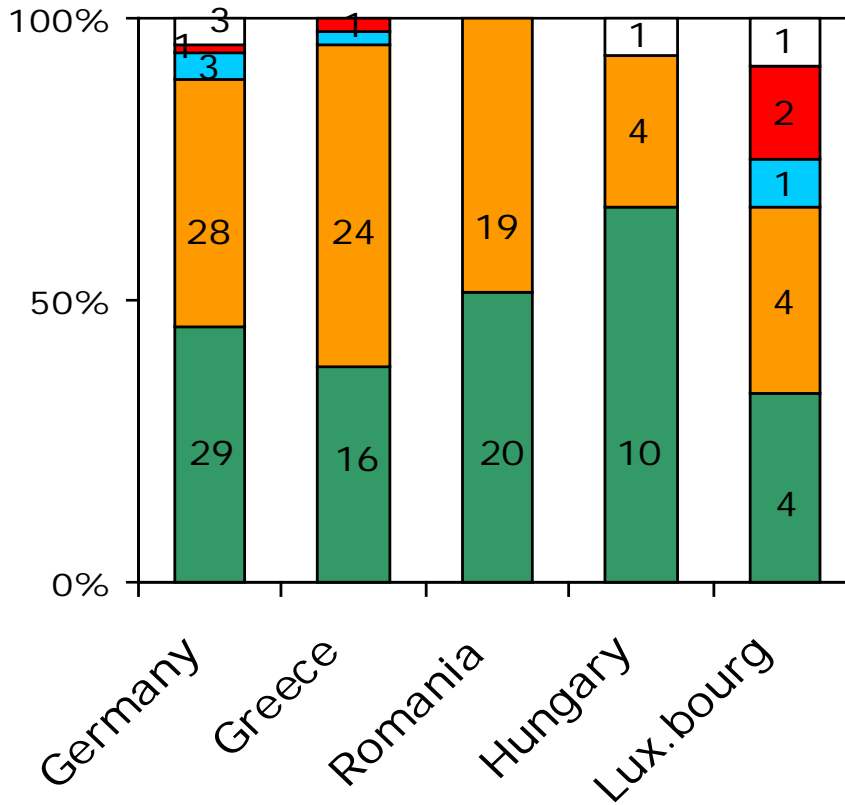


ESMO Non-Members

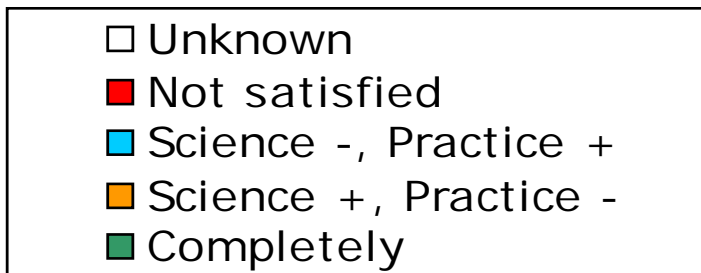


* Hungary: n.k.

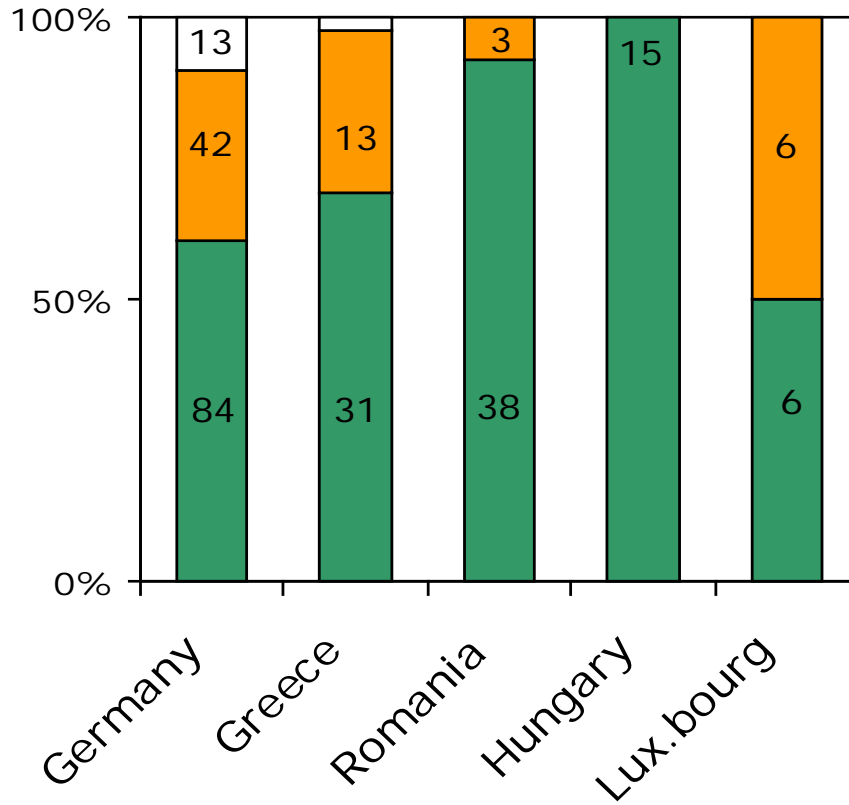
Satisfaction with ESMO conferences



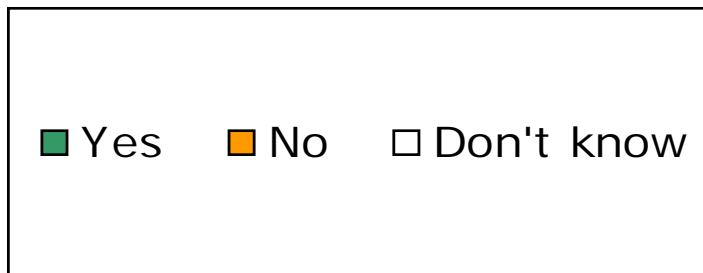
Answers from regular or occasional ESMO conference attendees



Wish for CO sessions at ESMO conferences



Answers from regular or occasional ESMO conference attendees



Conclusions I

In these surveys among Community Oncologists (COs) in 4 European countries, we find a surprising homogeneity across countries for all but a few questions.

In particular, the surveys show that:

- a substantial proportion COs are ESMO members;
- nearly all COs have internet access at their office;
- most COs know the ESMO homepage;
- The use of ESMO clinical recommendations varies greatly among countries, maybe depending on the availability of established national guidelines;
- there is a large interest in easily accessible web based tools on the ESMO homepage, particularly guidelines, score calculators and therapy protocols.

Conclusions II

Concerning ESMO conferences, the surveys show that:

- A large majority of Community Oncologists (COs) regularly or occasionally attend ESMO conferences – ESMO members much more often than non-members;
- Almost half of COs attending ESMO conferences regularly or occasionally are satisfied with the scientific content, but miss practice relevance;
- A majority of all regular and occasional conference attendees would like to have sessions particularly for COs.

Conclusions III

These surveys, and respondents' additional comments, among Community Oncologists (COs) clearly show:

- an interest in ESMO by COs;
- the need for representation of COs within ESMO;
- a wish for more practice relevance of ESMO conferences whilst maintaining a high scientific standard, possibly through special sessions tailored to COs' needs and interests;
- a great interest in more service provided by ESMO to its members, particularly providing guidelines and online tools.

Conclusions IV

- ESMO should have a chance to attract more membership among community oncologists through the implementation of - at least some of - these topics, as COs strive to deliver the same quality of care as cancer centers, and need practice-relevant, up to date knowledge;
- ESMO has already been coming this way over the last 2 years (e.g. OncologyPro, CO Symposium at ESMO 2012);
- A practice oriented ESMO Community Oncology Journal - on its own or as a supplement to AO - seems worth further discussions;
- ESMO's Community Oncology WG will continue to work with and give feedback to ESMO.