Closing Remarks/Conference Highlights & Awards from 16:00-16:45 – 3rd floor – Hall Z

wo years have passed but we have worked more than before for cohesion in oncology pharmacy. Communication is the key word. As we present the awards today, we honour those who have made a difference to our society. Who have worked tirelessly to turn our visions into practical action.



Christoph Bardin has shouldered the burden of education and cut a diamond from the existing gemstone.

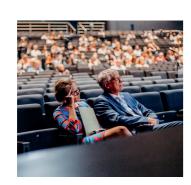


Mirjam Crul has set out to cut a path of clarity in the web of European administrations and let the face of oncological pharmacy shine.



Kristjan Kongi has done the miracle of bringing together the countless scientific commentaries and making QuapoS, in its 28 languages, the world standard work of oncology pharmacy, available to all, so that in their daily work they experience anew the importance of a scientific professional society that continuously faces up to the changing challenges.

Together, we are ESOP in 64 countries around the world. Together we face the needs of our cancer patients ceaselessly.









Safe Labelling Partner 2022-2024 We appreciate our safe labelling partners for their contribution to the safe handling of CMR substances:

Accord Merck Amgen Mundipharma Astra Zeneca MSD BMS Mylan Baxter Organon **Bendalis** Paxxo Celgene Pfizer CIPLA (Algeria) Puren Fresenius Runge Hexal (Switzerland) Hikma Sandoz Janssen-Cilag Seagen Medac Sanofi-Aventis

Servier STADAPHARM Takeda Teva/Ratiopharm Viapharma (Czech Republic)





Practical Symposium - Covid-19 - impact in cancer patients from 11:30-13:00 - 1st floor - Hall X1

mmunocompromised persons ICPs, including cancer patients (with active immunosuppressive treatment) often fail to mount an adequate response to a primary series of COVID-19 vaccine, as reflected by lower protective immune response rates and vaccine effectiveness, leaving them more susceptible to COVID-19. And when infected, ICPs are more likely to become severely ill from COVID-19 than non-ICPs. The current evidence suggests that an additional dose increases the immune response rate of the primary vaccination series in ICPs (third dose of mRNA vaccine) at an interval of 1-3 months after a homologous primary vaccination series. This includes induction of an anti-

body response in a portion (typically 25-50%) of individuals (with high variability depending of patient groups) with a low or undetectable antibody response after the standard primary vaccination series. Booster doses after primary vaccination (2 or 3 doses) in cancer patients resulted in a significant increase in patients with neutralizing Ab titres against omicron variants. Moreover, immune responses following third COVID-19 vaccination are reduced in patients with hematological malignancies especially those on B-cell-depleting therapies compared to patients with solid cancer. The aforementioned data will be presented thoroughly during this session.



Mark Lawler, UK



Christophe Bardin, France

Quick info Poster Viewing: 07:45-14:30 3rd floor – Foyer Z

Exhibition: 07:45-14:30

2nd floor - Hall Y

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Impressions from ECOP 5

Joint ESOP- EAPC Symposium — Drug management in the palliative phase from 11:30 - 12:30 — 1st floor — Hall X3

atients who are no longer eligible for curative treatment in an oncology setting are often complex and require a multidisciplinary approach. For this reason, many hospitals have set up integrated palliative treatment teams, generally including a specialised nurse, oncologist, psychologist, pain specialist (anaesthetist) and dietician. In this session, you will learn how the oncology pharmacist can aid in such a team in deprescribing of drugs. This process of "deprescribing" is defined as the process of identifying and discontinuing drugs for which existing or potential harms outweigh existing or potential benefits within the context of an individual patients' goals, current level of functioning, life expectancy, values and preferences. An overview of available deprescribing tools and guidelines will be presented in this session and case di

scussions will be used to examine the practical use of these tools and guidelines. It has been demonstrated in several trials that reducing the pill burden for palliative patients can increase the quality of life while decreasing the risk of side effects or worse clinical outcomes. Thus, optimizing the pharmaceutical care plan represents an important stage in the oncology patient's journey where the pharmacist can play an important role. This session, also, focuses to the importance of managing symptoms of patients in palliative care, in order to improve their quality of life. More specifically, the management of the five most common and distressing symptoms, experienced by people with advanced cancer (pain, breathlessness, nausea and vomiting, fatigue and delirium) by opioids are analyzed in this Joint ESOP-EAPC symposium.

Lecture – Economic consideration about the past and future treatment in oncology? from 14:00 - 14:45 – 1st floor – Hall X2



Elena Pizzo, UK

den for healthcare systems, patients and societies due to healthcare spending and productivity losses from morbidity and early mortality. If on one hand in the last 20 years the newly cases of cancer are increased by 50% in Europe due to aging, on the other hand death rates and health outcomes have improved significantly thanks to oncological research progress. In the last 10 years we have seen the most extraordinary advances in prevention, diagnosis, treatment and

survival of cancer. This includes immunotherapy, precision medicine, epigenetic, personalised treatment, machine learning and artificial intelligence. All these developments are certainly promising in preventing new cancer cases, yielding more cures and long term remissions, but at the same time healthcare systems worldwide are struggling to deliver the benefits. Cancer treatment is increasingly complex and, even in the wealthiest countries, it requires oncologists to work across specialties to achieve optimal outcomes for their patients. There are indeed unique challenges to provide comparative clinical and economic evidence to justify an efficient use of limited healthcare resources to society. In this debate we provide a description and vision about the past, present and future of the economic evidence in the space of oncology treatment.

Certificate of Attendance

will be available at the registration today from 12:30-17:00. Please note that Certificates of Attendance, that have not been collected will only be sent out if a stamped return envelope is provided.



Danila Valenti, Italy



Mirjam Crul, Netherlands

Mini Congress survey ECOP5

At ECOP5 a mini survey was performed among the attendees. This questionnaire should help the organizers to improve the content and implementation of future activities of a similar nature. The questionnaire, which was answered by many participants, revealed interesting points.



Overall judgment



ESOP research projects and actuality updates from 14:45-15:45 – 1st floor – Hall X2

Covid - Agnieszka Bienert, Poland

We must prevent the situation that health care workers think about leaving profession. We need to support their mental health and well-being as they are key to success in fighting diseases. Covid crisis like all other crisises was a kind of wake-up call. It has taught us what is most important and that is in our hands. It is interdisciplinary collaboration in patient care.

QuapoS 7 - Kristjan Kongi, Estonia

The constant developments and new challenges in the field of oncology shows that there is also need to develop and complete our quality standards - QuapoS. With the latest version published and out it is time to start working on the 7th version of it. As this is not done by one man alone we will start as always by collecting interested colleagues who are willing to take part of the updating and writing process of a new version. Come join us!

Oral Drugs - Franziska Ockert-Schön, Austria The German "Oralia-iniative" is developing each year in many different way (database,

eduacation programm, etc.). We will present the changes of the last two years and our plans for the future. There we especially would like to learn from others and work together with colleagues from all around the world.

Essential requirements - Marko Skelin, Croatia

- Position statement on integrated cancer care
- Various healthcare experts from different fields, including the oncology pharmacist
- Improve outcomes for cancer patients in Europe through the adoption and the implementation of essential requirements for quality cancer care in Europe
- Complement existing clinical guidelines and improve their efficacy
- Shape the policy environment at European and national levels to improve quality of cancer care across Europe and decrease inequalities in cancer

Future plans are to emphasize position of pharmacist as a part of multiprofessional team involved in the treatment of cancer patients. Also additional aim is to promote measuring outcomes that are important for the patients.

EUSOP - Mina Kovacevic, Slovenia

At ESOP we aim to deliver high quality educational material. With EUSOP you can gain a lot of knew and useful knowledge on international as well as national level, and get the title as a specialist in oncology pharmacy. With international webinars, national based lectures and face-to-face meetings we tend to deliver the latest guidelines in cancer treatment.

Outcome accreditation - Sherif Kamal, Egypt

The certificate is proof of the independent review of the Implementation of the quality standards for the pharmaceutical-oncological service/ QuapoS into everyday work.

The purpose of a certified quality management system is:

- Ensuring consistently high quality of the proper supply of the population with ready-to-use cytostatics
- Ensuring and improving the quality of advice on the in the Drugs used in oncology, especially for cytostatics
- The increase in drug safety from the point of view of the user and patient protection
- The introduction, expansion and further development of pharmaceutical care of cancer patients as well

The consistent further development of a professionally high-quality professional practice in health professional responsibility.



Mini Congress survey ECOP5

Thank you for taking the time to participate in our survey. Here you find the results:

Which other topics should be covered at possible future conferences?

"Gene therapy manufacturing"

"Follow up clinical outcomes after covid19"

"More details about survival Oncology"

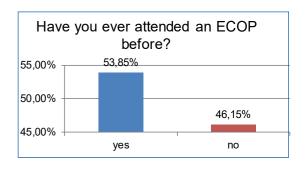
"Closed loop oncology patient care, Clinical oncology pharmacy models in coopdration with medical oncology practice"

"Pharmacogenetics in oncology"

"Supportive care in Cancer, nutrition"

"Pharmacogenomics Prognostic factors"

"More clinical case reports, regulation, off label drug use, compounding, drug evaluation across countries beyond the EMA, pharmacogenetics"



Which lecture/workshop you like most?

- Therapeutic drug monitoring
- Evolution of pharmaceutical care
- Practice issues
- Immunotherapy
- Drug shortages
- Automation in aseptic preparation
- Breast Cancer
- Lung Cancer
- Med. Integrated Oncology Pharmacy Practice
- Practical stability studies for anticancer drugs