



ANNUAL REPORT

2020



2020

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INTRODUCTION



FOREWORD BY DR DENIS LACOMBE, EORTC DIRECTOR GENERAL

Covid-19 made 2020 an especially challenging year for the EORTC, but it also showcased our organisation's remarkable resilience in the face of adversity.

In relatively short time, we managed to transform our entire organisation to a remote and virtual workforce still able to carry out research operations. Although we had to suspend patient recruitment into trials early in the pandemic, our network innovated and found Covid-safe ways to restart that improve patient survival and quality of life. In 2020, we published 72 papers in leading cancer journals showcasing the tremendous scientific output of our community.

Ultimately, we could not proceed as planned in Barcelona with our annual conference. But we successfully pivoted to a series of digital events that actually engaged three times more people than average with a total of 6500 delegates from more than 100 countries.

Beyond the pandemic, conducting independent, multidisciplinary clinical research remains challenging in Europe. The reasons are numerous, linked to changing regulatory frameworks, costs of drugs and bureaucracy. EORTC lobbied the EU institutions at all levels extensively in 2020 to alert policymakers

to these challenges. Through collaboration, we can ensure that clinically relevant questions can work to optimise treatments and define therapeutic strategies free of commercial interest.

Whilst we celebrated the launch of the EU's Beating Cancer Plan, we made sure to highlight the absence of treatment optimisation that is vital to innovation in oncology. We are continuing our efforts with policymakers to rectify this in the Plan. The role of EORTC is being acknowledged as it now appears in the Porto Resolution by the EU Portugal presidency, as a solution for clinical research infrastructure in Europe.

In 2020, EORTC embarked on producing a new governance structure to ensure it remains sustainable in the future. As you will read, the ongoing reforms are strengthening our scientific and organisational strategies whilst deepening our network connections. The new governance structure will be fully implemented in 2022.

All the adaptations we made this year would not have been possible without the dedication and commitment of the EORTC network, committees, board and staff. Their efforts have ensured that we continue with our mission to improve the survival and quality of life of patients.

 **Denis Lacombe**
EORTC Director General

"We managed to transform our entire organisation to a remote and virtual workforce still able to carry out research operations."

MESSAGE FROM PROF BERTRAND TOMBAL, EORTC PRESIDENT

Dear colleagues and friends,

No doubt 2020 has been one of the most challenging times for the EORTC in our 60-year history. Our private and professional lives have been profoundly disrupted by the massive influx of Covid-19 patients. A universal and deleterious consequence has been the postponing of standard care for many severe acute and chronic diseases. The long-term impact of the pandemic on cancer patients remains to be seen.

After a few weeks in the pandemic, we were expecting the worst for clinical trials, understanding that for many reasons these could have been seen as an additional burden in a dramatic sanitary situation.

We must say that today we are proud and admiring of the resourceful adaptation of the organisation in recruiting and managing patients on our trials. Many strategies have been put in place, including the implementation of telemedicine to connect the physicians with their patients remotely. EORTC HQ have been monitoring the impact of the pandemic on patient recruitment throughout the year and we saw a dip in April but the level of recruitment resumed by June.

EORTC's study pipeline is robust with six new studies opened in 2020, 45 ongoing studies, 59 in protocol development and eight in regulatory activation. Currently the EORTC portfolio encompasses 208 studies at various levels of development. In 2020, we had 2 614 patients enrolled in clinical trials with a further 3 111 patients screened for potential trials.

We showed that the EORTC remains a truly multidisciplinary organisation, attracting over 2 800 different cancer specialists including organ specialists interested in clinical research. We worked with 750 institutions across 48 countries in 2020, bringing therapeutic solutions to patients across the globe. We also attracted many young investigators, the next generation of principal researchers who will shape EORTC's future.

As president of this organisation, I am proud of the work that the board and management have accomplished this year to adapt EORTC to the changing landscape in clinical research. Our new governance structure will bring the network closer together, ensuring that we ask the right research questions and develop effective clinical trials that change practice and bring better outcomes to patients.

As we head out of the pandemic and further into the 21st century, it is clear that EORTC has an integral place in clinical cancer research. Our global presence attracts many leading investigators, clinical groups and organisations. The results of the network's research challenges the status quo in healthcare with the best in evidence-based science and data.

EORTC has shown its colours as a robust organisation in 2020, continuously adapting and progressing to improve the lives of cancer patients.



Bertrand Tombal
EORTC President

"Our new governance structure will bring the network closer together."

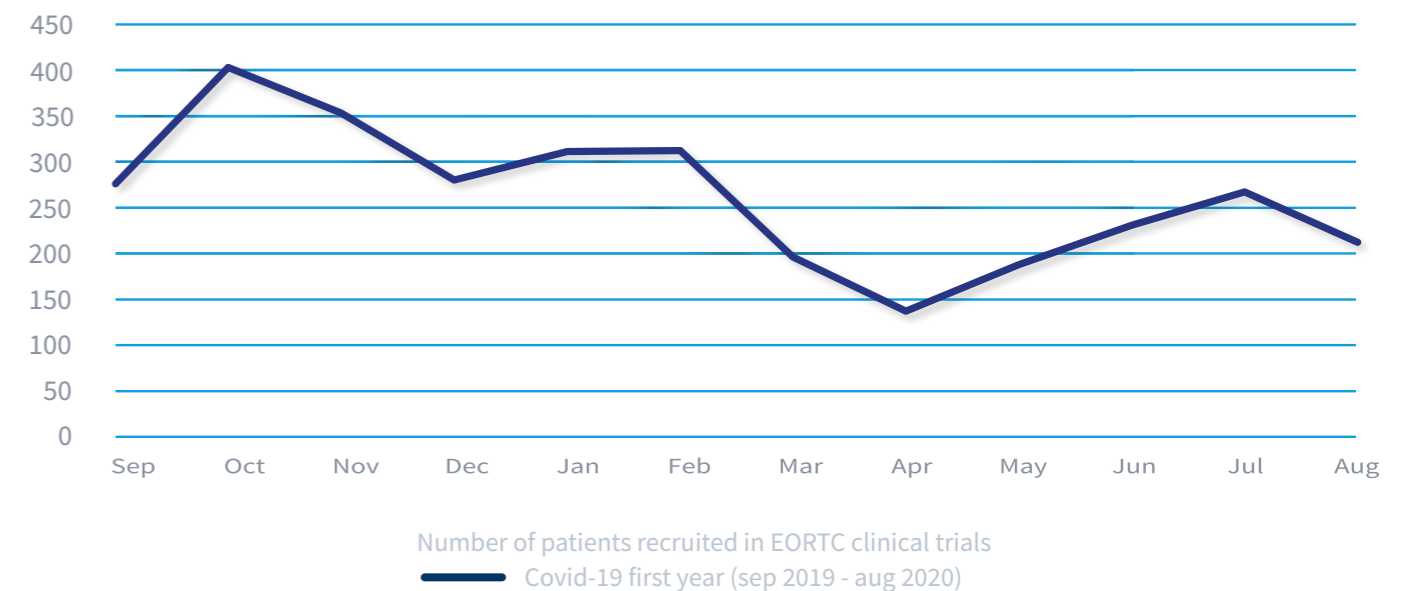




COVID-19 IMPACT ON CANCER CLINICAL TRIALS

Since patients with cancer are more susceptible to Covid-19 than the general population, EORTC clinical trials have been significantly impacted during the pandemic.

Beginning in 2019 we observed that many sites suspended recruitment as seen in the graph. While some sites decreased their monthly accrual, others stopped altogether. Once sites began gradually recruiting patients again in 2020, the recruitment rate stabilised. Note that the small drops between February and August 2020 are due to the end of recruitment of phase III trials and are unlikely due to the pandemic.



Sites also took measures to limit patient visits to hospital and to concentrate resources on treating those patients affected by the pandemic. Measures included organising drug shipment to patients' homes, when feasible, and cancelling monitoring visits to the hospital or proposing virtual visits.

Activities supported by logistics companies were largely unaffected. As a rule, drug shipment to the hospitals continued and only a minority of sites reported blocked or delayed biological sample collection and shipment.



Impact on EORTC headquarters

Following guidance from the Belgian government, all EORTC HQ staff have been working remotely since mid-March 2020. Our IT team put in place infrastructure to provide adequate support for remote working.

The transformation to remote work led to an increase in internal communication, documentation, and reporting to assess the impact of the pandemic on patient recruitment, treatment and visit schedules as well as on data collection, investigational medicinal product and human biological material management.

HQ has continuously monitored daily reports from the European Medicines Agency and 28 countries regarding the evolving guidelines for management

of clinical trials during and after the pandemic, advising study teams accordingly.

Safety reporting from sites was not affected and the number of serious adverse events was stable as well. HQ collected additional Covid-19 data in the clinical study database of ongoing and new trials. Guidance related to vaccination was prepared and sites were encouraged to report Covid-19 vaccinations as concomitant medication as well as any potentially related adverse events from vaccination.

All on-site monitoring visits from mid-March 2020 were cancelled and most could not be rescheduled. Clinical research assistants were able to perform remote monitoring with



site staff, and provide continuous support, including tracking of investigational medicinal products in stock at the sites and timely resupply. On-site monitoring activities gradually re-started from June 2020 in Belgium, including remote monitoring for high-priority visits. Other countries gradually followed starting in July based on authorisation from sites and governments.

To cope with the Covid-19 workload, new initial site submissions were put on hold and then deprioritised until the workload allowed for resumption. Work continued, however, on initial submissions and amendments that started prior to the pandemic.

Not all clinical trial activities were significantly impacted beyond the move to remote working. Since data return from sites was not affected, data cleaning activities continued. Similarly, statisticians maintained their regular activity with the addition of Covid-19 monitoring.

We will assess the full impact of the pandemic on EORTC HQ when more detailed information on the final gap in recruitment and the final number of protocol amendments is available. At the time of writing this report, site reopening for recruitment has started and accrual is back at expected levels.

Beyond clinical studies, we realised some significant silver-linings from the pandemic as an organisation. In general, a majority of Groups also saw higher turnout during virtual events than conventional in-person meetings. Young researchers especially enjoyed the increased access to experts with all the free, virtual meetings.

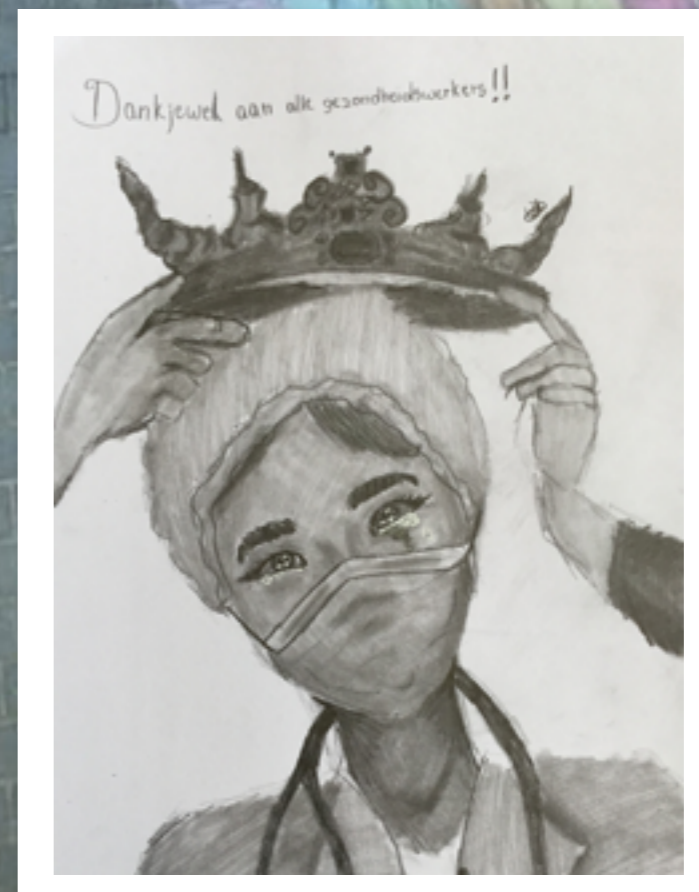


There were certainly concerns amongst patients, relatives and healthcare providers in the early phase of the pandemic, potentially resulting in less willingness to participate in clinical trials and visit large academic centres involved in the Covid-19 response.



Prof. Michael Weller
Chair of the EORTC Brain Tumour Group

The children of the EORTC staff participated in a drawing contest in April 2020 to show their support to the healthcare workers.





Covid-19 severely impacted elderly populations and led to a temporary stop in clinical research. Once Covid adaptations were made, however, we succeeded in resuming activities including hosting a virtual autumn meeting with especially high attendance.



Prof. Antonella Brunello
Chair of the EORTC Cancer in Elderly Task Force

EORTC: IN A NUTSHELL

EORTC IN A NUTSHELL

Despite the advancements in clinical research over the past decades, cancer remains the second leading cause of death globally. It is responsible for about 10 million deaths per year and one in six deaths globally.¹

In 2020, breast cancer became the most common in terms of new cases, compared to lung cancer in 2019.² Yet, cancer continues to impact men overall at a higher rate. One in eight men and one in 10 women are likely to develop cancer during their lifetimes.³ Most other tumour types bear similar challenges and some such as rare tumours are in great need for further therapeutic progress. Even if successfully treated, long-term survival and care remains a significant challenge. In addition, multidisciplinary treatment of cancer needs continued optimisation.

This is the stark reality that fuels our purpose and inspires our mission to prolong survival and improve quality of life of cancer patients. It is why we work so relentlessly to ensure that cancer remains an urgent priority on the global public health agenda. As the largest cancer fighting clinical research organisation in Europe, we are uniquely positioned to lead and deliver practice-changing results.

1. World Health Organization – Cancer Key facts 2020 (Cancer (who.int))

2. World Health Organization – Cancer Key facts 2020 (Cancer (who.int))

3. World Cancer Report 2020 (www.iarc.who.int/)

Prof. Gunnar Folprecht with a patient

Universitätsklinikum Carl Gustav Carus
Member of the EORTC Gastrointestinal
Tract Cancer Group

Uniquely positioned to lead

EORTC serves as a crucial independent and multi-tumour hub in the clinical research world with unique global research infrastructure. This is the added value we offer to international and European communities of clinical researchers.

Our work spans across tumour types, disciplines and national borders. We specialise in pan-European and international clinical and translational research that would be impossible on a national scale.

Our synergistic network of institutions offers a transnational platform with unmatched quality and efficiency, and research capabilities for rare cancers and long-term follow-up. We deliver robust data sets and are committed to generating solid medical evidence.

In today's complex regulatory environment, our experts ensure EORTC activities meet the strictest quality and reliability requirements.

With EORTC, patients are active participants in clinical research. We seek their perspective in research questions and use their insights to better balance academic knowledge with understanding by the general public.



Delivering practice changing results

Since 1962, EORTC has entered over 205 000 patients in practice-changing clinical trials across tumour types, notably for brain, breast, prostate, melanoma, head and neck and soft tissue sarcoma. In 2020, 45 studies were open to patient entry, bringing science and knowledge to patients for therapeutic improvement.

Working with 139 collaborative groups worldwide, EORTC demonstrates its capacity to bring investigators together to drive innovation in cancer care. We play a key role in multidisciplinary, international translational and clinical research, taking basic science from the lab bench to the patient's bedside.

Five pillars of activity

Our clinical research is patient-centric and spans across tumours and disciplines. All EORTC activities fall into five fundamental pillars.

Therapeutic Academic Trials

Academic clinical research to shed light on the therapeutics agenda of cancer by optimising and ultimately changing standards of practice.

Knowledge Translational Research

Translational research to collect biological material for analysis that can deepen our knowledge and understanding of cancer biology and help guide patient treatments based on their own tumour report analysis.

Infrastructure

Infrastructure to promote more efficient and comprehensive cancer research that delivers high quality multidimensional datasets through collaborations with partner organisations, institutions and hospitals.

Education

Education to support the next generation of cancer researchers and healthcare workers by sharing knowledge and best practices, offering guidance and enabling dialogue on a global scale.

HQ of the Future Accelerating Innovation

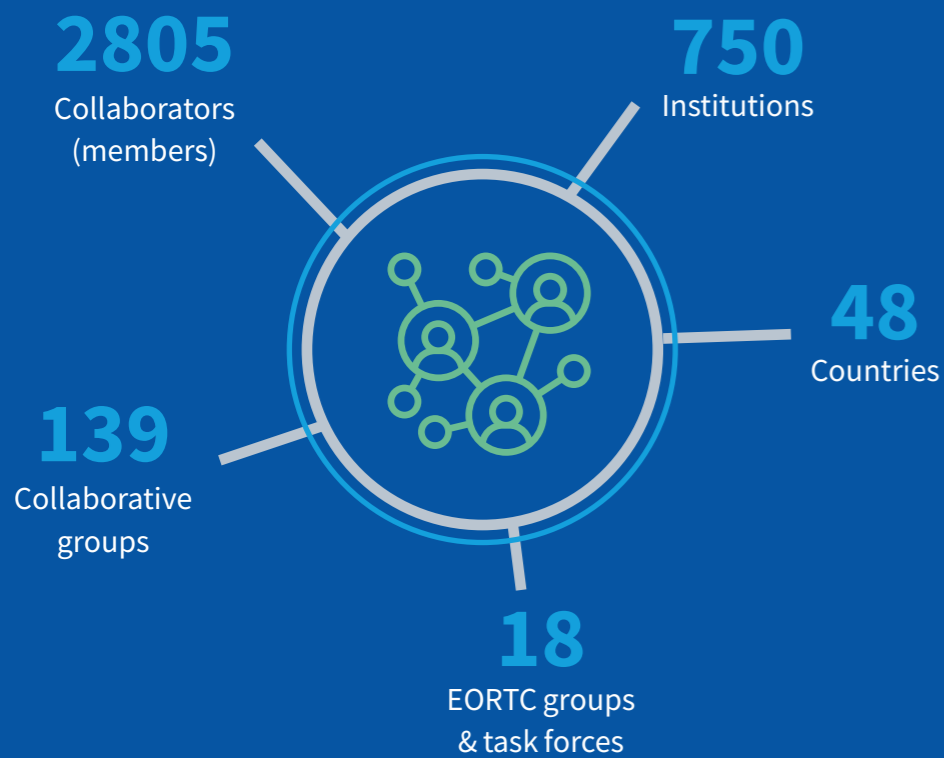
Accelerating innovation to respond to rapid changes in healthcare with new pathways and mechanisms that increase survival and quality of life for patients.



OUR MISSION IN NUMBERS 2020

EORTC's mission is to increase cancer patient survival and quality of life

Network



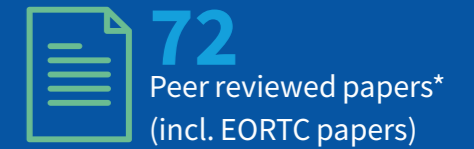
Patients involved in studies



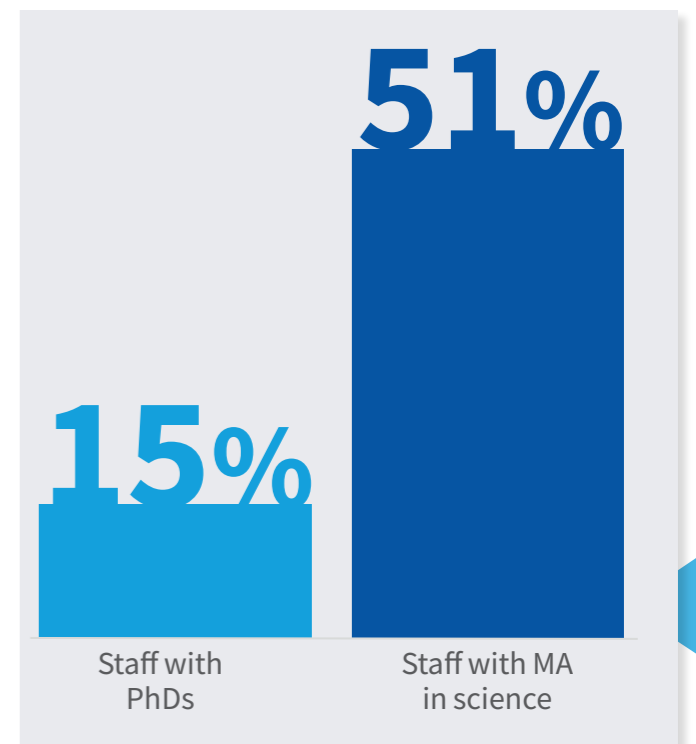
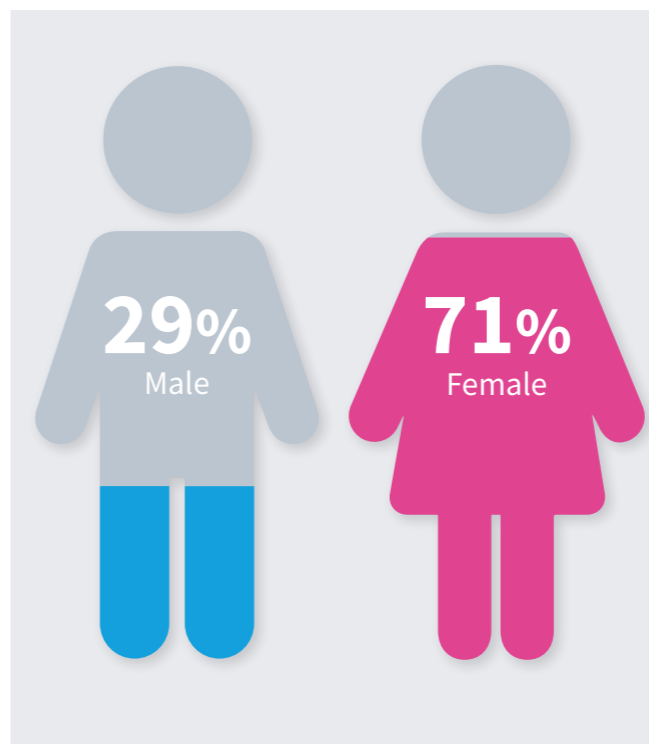
Conferences & Trainings



Publications




Staff




*Scientific medical journals


Studies



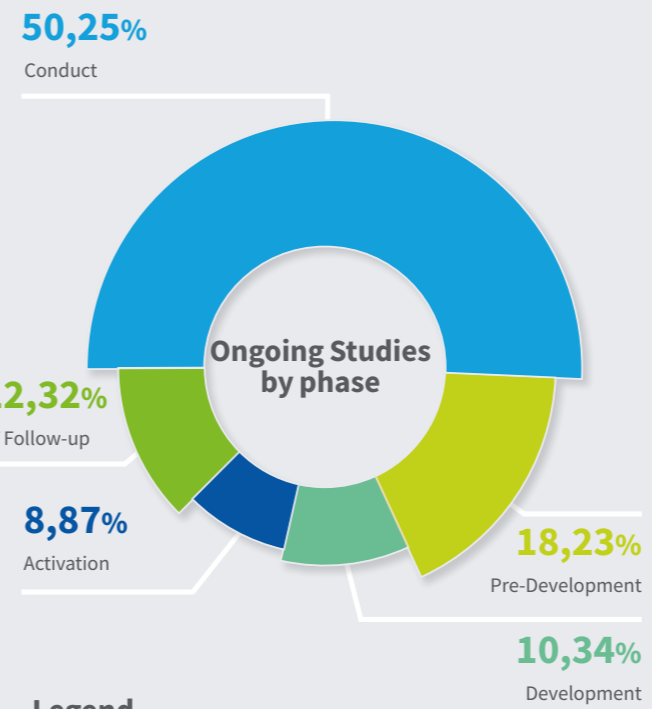
6
New studies activated for 2020



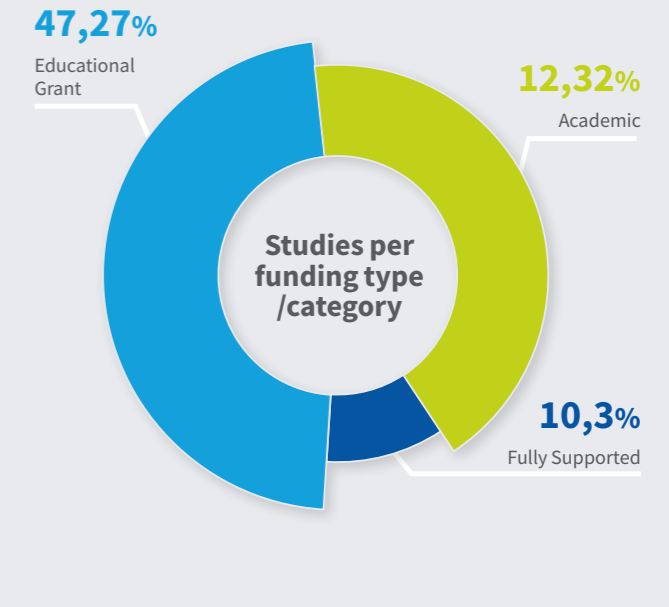
45
Open to patient entry studies



208
Study portfolio (+-)*



- Legend**
- Pre-development:** Board approves the study proposal and the Protocol Review Committee (PRC) approves the protocol synopsis
 - Development:** full protocol is developed until PRC approval
 - Activation:** period from protocol release until the first site active, including regulatory submissions and approval by authorities
 - Conduct:** patient recruitment and follow-up as per protocol, concluding in a Final Analysis Report
 - Long-term follow-up:** monitoring a person's health over time after treatment, both during and after the study



- Legend**
- Academic:** Study sponsored by EORTC or another academic group which are self-funded, or funded by academic grants
 - Educational Grant:** Investigator sponsored trials, funded by industry
 - Fully supported:** Industry sponsored trials

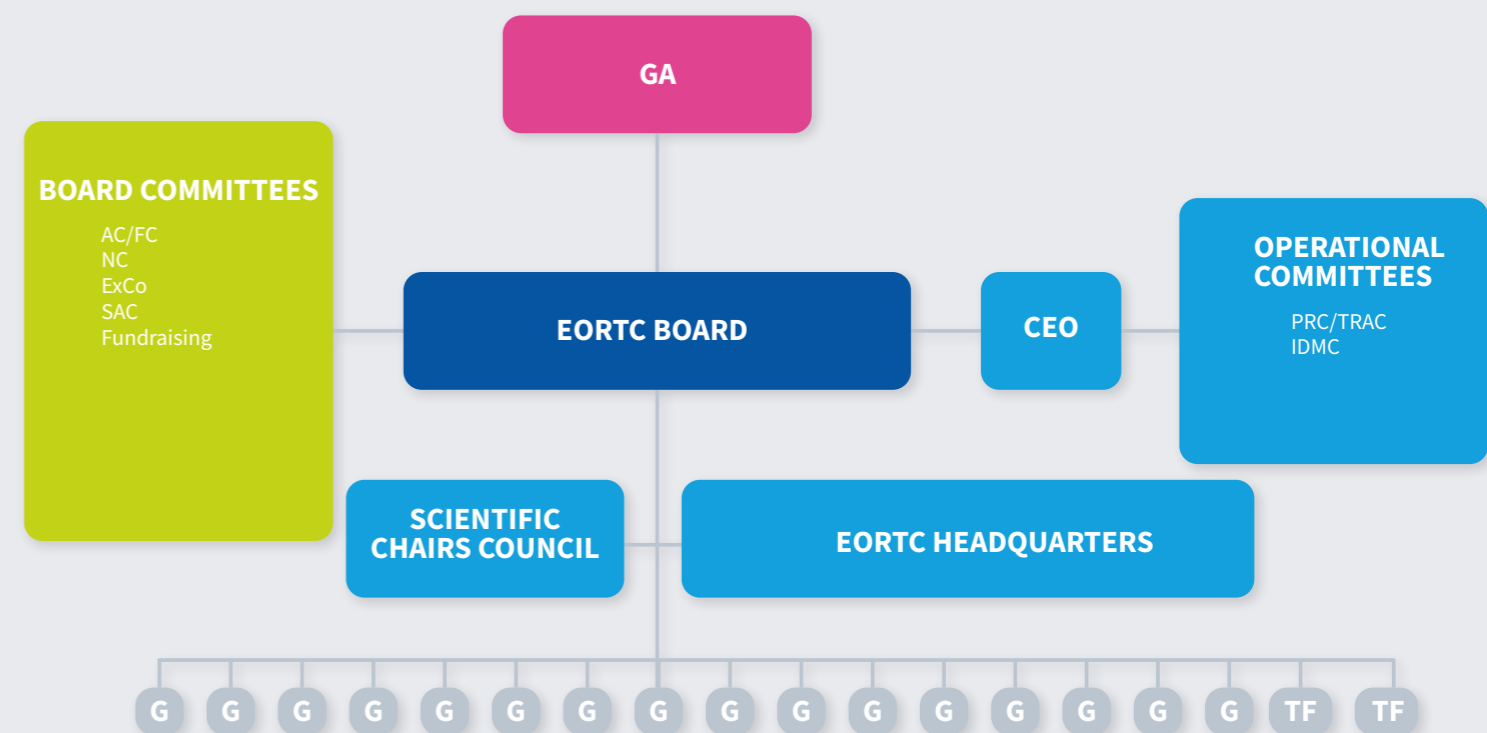
Studies per EORTC Tumour & Cross-discipline Groups **

* All studies with the following status: Pre-development, Open to Patient Entry, Closed to Patient Entry, Long-term follow-up ongoing, Development and Regulatory in process
 ** All EORTC studies per group except the ones that are no longer active or the research projects that are not part of a group. Excluding also Quality Life Group external studies

Modernising our governance

In order to keep EORTC sustainable for the future, EORTC reviewed its governance structure. This follows a number of discussions with internal and external stakeholders to understand how EORTC is functioning and the perception it has amongst the cancer community. We found that there was a lack of cohesion between the scientific and organisational strategies, there was disconnect between the EORTC network and board and with changing landscape in clinical research, the organisation was not adapting quickly enough. Following this diagnosis, EORTC set about changing the governance structure.

EORTC governance



CHANGING EORTC GOVERNANCE

Progress in 2020

Our reforms in 2020 focused on placing the scientific strategy and EORTC's mission at the core of EORTC governance. Leaders of groups and task forces now form a newly created Scientific Chair Council (SCC).

This council oversees the scientific strategy and ensures the link between the science, the EORTC network and board. **The Scientific Chair Council role will be to establish and propose the scientific strategy to the Board, monitor the strategy, feasibility and performance of EORTC's portfolio and maintain the EORTC portfolio in line with the strategy.** Members strengthen cohesion between Groups towards common EORTC goals. They also ensure multi-disciplinary expertise and optimise EORTC capabilities across different groups and task forces. Members develop EORTC's scientific strategy and propose it to the Board. The Chair of the SCC is a voting Board member.

The Board of Directors has also been reshaped to include specialties such as management and finance. This change has helped to ensure that operations better support scientific strategies across EORTC. The Board of Directors is the steering and executive body, advising the General Assembly on new activities and formulating proposals for ratification. The board drives EORTC's mission, vision and values. It holds the fiduciary responsibility of the organisation. It appoints key EORTC officers at governance and group levels.

The EORTC Director General has been re-named to Chief Executive Officer (CEO). His role is to oversee all EORTC's operational and daily activities. The CEO acts as the guardian to ensure that the projects and scientific agenda deliver high-quality outcomes according to expected deliverables and timelines. The CEO reports to the Board, serving also as a non-voting Board member.

The Protocol Review Committee (PRC) becomes a standing committee which evaluates incoming studies in light of the principles of the scientific strategy as developed by the Scientific Chair Council and its prioritisation criteria.



Our governance: roles and responsibilities

Please visit the EORTC website to have more information about our governance's roles and responsibilities. Our committees can be found on the governance's [page](#) of the website.

Board Members



TOMBAL Bertrand
President



STUPP Roger
Past President



LICITRA Lisa
Vice-President



BAUMERT Brigitta
Secretary General



EVRAUD Serge
Treasurer



van der GRAAF Winette
Chair of Translational Research Division



BIZZARI Jean-Pierre
Chair of New Drug Advisory Committee



SCHILSKY Richard
Chair of Protocol Review Committee



TEJPAR Sabine
Chair of Translational Research Advisory Committee



EISENHAUER Elizabeth
Chair of Scientific Audit Committee



OLMOS David
Board Member



HEGI Monika
Board Member



VELIKOVA Galina
Board Member



LACOMBE Denis
EORTC Director General



GOLFINOPOULOS Vassilis
EORTC Director Headquarters (HQ)



du MONCEAU Diego
Chair, EORTC Cancer Research Fund



BENIADA Guy
Chair, Independent Financial Committee (IFC)



LUGOWSKA Iwona
Permanent Guest, Early Career Investigator (ECI)

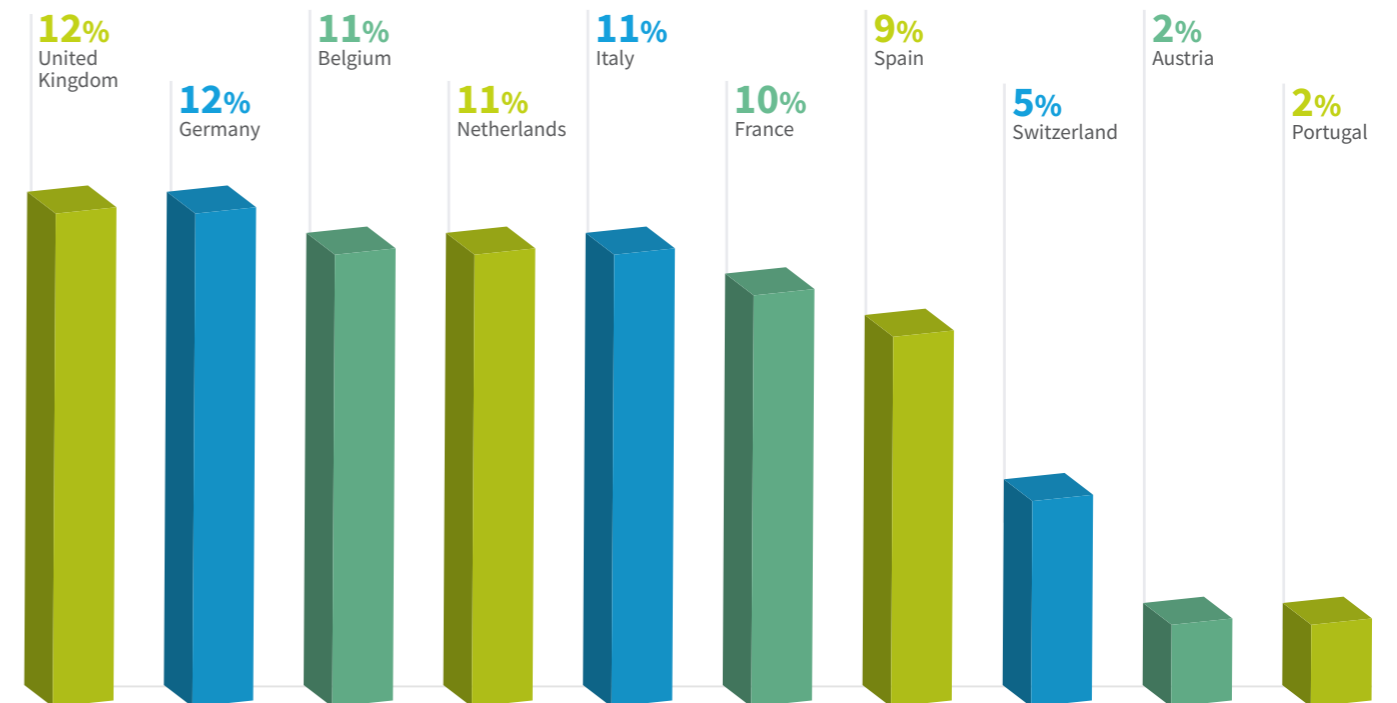
SPOTLIGHT ON OUR MEMBERS

Our clinical research covers all types of cancer tumours with an integrated approach to evaluate innovative agents and multimodal therapeutic strategies against current standard of care.

Our objective is to find the best solution for patients from both an efficacy and quality-of-life perspective. We conduct activities through tumour and modality-oriented research groups.

Beyond tumour-specific research, our experts examine every aspect of cancer therapy, including pharmacology and molecular mechanisms, pathobiology, radiotherapy and imaging.

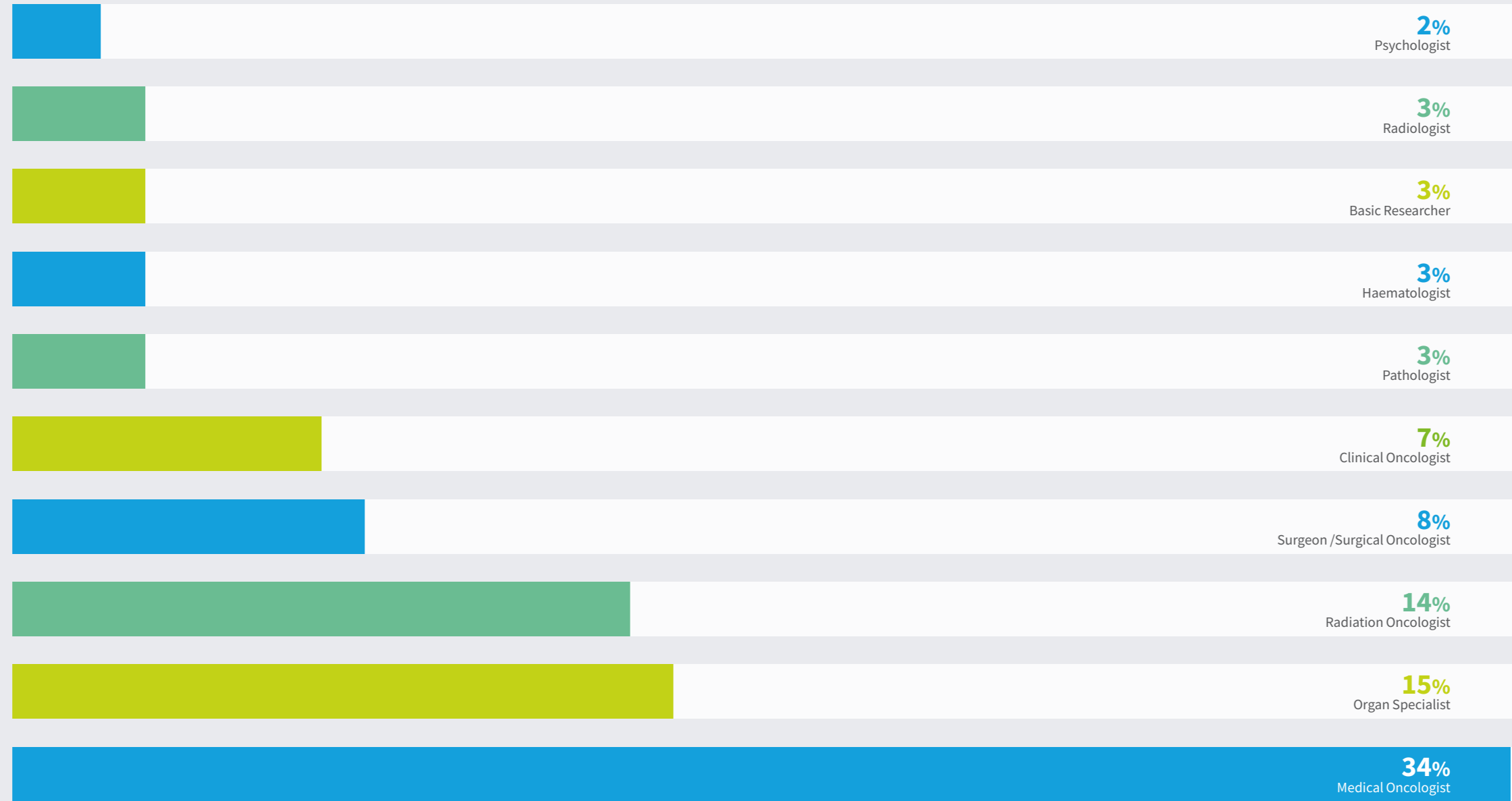
In 2020, EORTC embarked on an ambitious membership renewal programme to ensure that all member information is accurate. The results showed that EORTC had over 2 800 direct members in 2020 from 750 institutions. Members came from 48 countries around the world, with the top 10 from Europe.



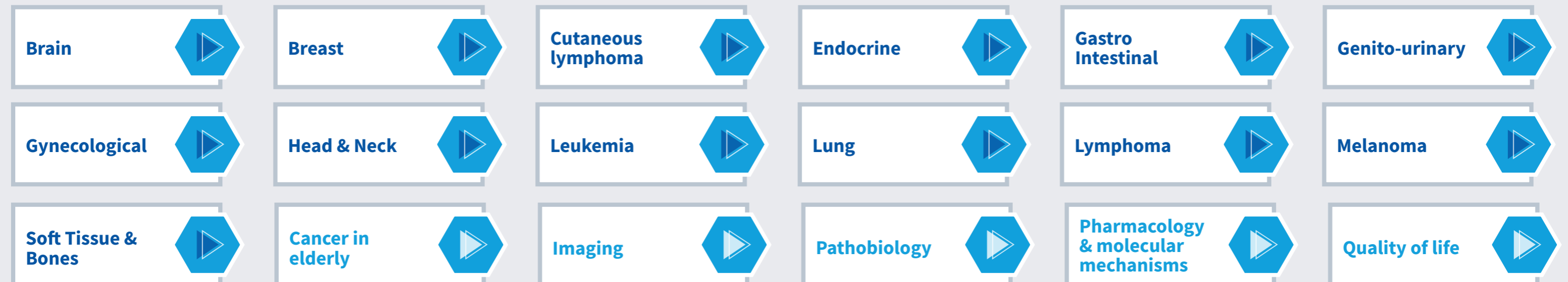
Percentage of EORTC members per country in Europe

Percentage of members per discipline (most frequent ones)

EORTC is a truly multidisciplinary organisation spanning over 30 different disciplines. In 2020, organ specialists grew to comprise 15% of our membership.



EORTC comprises 13 tumour and 5 cross-discipline groups:



EORTC network comprises institutions everywhere in the world.



Institutions from outside Europe

Australia	1
Brazil	2
Canada	5
Egypt	3
Georgia	1
India	1
Israel	9
Japan	5
Jordan	1
Qatar	1
Reunion	1
Taiwan	1
USA	4

Group virtual meetings

Each EORTC Group meets twice a year to discuss ongoing research and new project ideas. These gatherings are a key opportunity to exchange knowledge and insights whilst identifying solutions to challenges, old and new.

Over 2 000 members engaged in Group meetings in 2020 that were largely virtual due to the pandemic. The virtual accessibility made attendance significantly higher than in 2019. Typically meetings are held in rotating locations, but the popularity of virtual engagement may result in more hybrid meetings in the future.

EORTC TUMOUR & CROSS- DISCIPLINE GROUPS IN 2020

“

EORTC is unique for conducting trials across multiple tumours with members stratified across Groups related to their tumour of interest. It's why we attract leading clinical researchers across the globe, and how we conduct practice changing trials.



Denis Lacombe
EORTC Director General

BRAIN TUMOUR GROUP

Mission

The Brain Tumour Group initiates and conducts research to challenge, re-define and develop standards of care in emerging and controversial areas of diagnostic and therapeutic neuro-oncology. The Group is especially focused on diffuse gliomas of adulthood of World Health Organisation grades two to four as well as rare brain tumours. Members conduct joint projects with other EORTC Groups in the area of CNS metastasis.



Michael Weller
Chair

Universitätsspital Zürich,
Switzerland



Jaap Reijneveld
Secretary

Amsterdam University Medical
Centre, The Netherlands



Frédéric Dhermain
Treasurer

Institut Gustave Roussy,
France

Top results 2020

- ▶ Final results of the INTELLANCE 2 trial (EORTC 1410) indicated limited efficacy of the EGFR-targeted antibody drug conjugate, Depatux-M, in combination with temozolomide in EGFR-amplified recurrent glioblastoma.
- ▶ Analysis of our clinical trial database indicated that metformin is unlikely to prolong survival of patients with newly diagnosed glioblastoma.
- ▶ Secondary analyses of EORTC 26101 defined MRI patterns associated with outcomes in bevacizumab-treated recurrent glioblastoma patients.
- ▶ Members¹ received the award for excellence in adult clinical research by the Society of Neuro-Oncology for the abstract entitled, "IDH1/2 wildtype anaplastic gliomas of the EORTC randomised phase III intergroup CATNON trial: overall survival related to treatment, MGMT status and molecular features of glioblastoma."

12 
Ongoing trials

514 
Members

BREAST CANCER GROUP

Mission

This Group aims to challenge, re-define and develop standards of care in all controversial areas of breast cancer diagnosis and therapy, including rare conditions such as male breast cancer. The Group's research also contributes to long-term outcomes and follow-up of all patients until death.



Etienne Brain
Chair

Institut Curie - Hopital Rene Huguenin, France



Frederieke van Duijnhoven
Secretary

The Netherlands Cancer Institute-Antoni Van Leeuwenhoekziekenhuis, The Netherlands



Michail Ignatiadis
Treasurer

Institut Jules Bordet, Belgium



Kim Aalders
Young Investigator Representative

Ziekenhuis Gelderse Vallei, The Netherlands

Top results 2020

- ▶ Launched working groups to develop clinical studies in elderly populations, locoregional treatment and new drug development.
- ▶ Focused on treatment of oligometastatic breast cancer with Imaging Group on a consensus document and support of the TAORMINA clinical trial that is under Board review.
- ▶ Published results from the MINDACT study in peer-reviewed journals¹ and presented at major conferences, including ASCO, EBCC and SABCS.² The major finding related to the update of primary results with 8.7 years median follow-up. It confirmed the utility of low-risk 70-gene signature for withholding adjuvant chemotherapy in the presence of high clinical risk.
- ▶ Appointed Prof Nadia Harbeck from the University of Munich as conference chair of the 12th European Breast Cancer Conference (EBCC). Attracting 2 439 delegates from over 80 countries in 2020, the conference is the only truly multidisciplinary conference in Europe for the breast cancer community.
- ▶ Organised three lectures at the EBCC to offer young investigators practical advice to fund and publish research and learn about statistical principles in clinical research.

15 
Ongoing trials

486 
Members

1. Published two manuscripts, including one on the results of chemotherapy randomisation and another on step-wise procedure and comprehensive analysis of the MINDACT microarray dataset.
2. Conference presentations also included research projects on subgroups of patients with lobular breast cancer and the use of systemic therapy in the MINDACT population.

CANCER IN ELDERLY TASK FORCE

Mission

Geriatric oncologists have two main challenges: selecting patients for specific treatments and the delicate balance of prolonging their survival, whilst maintaining independence and quality of life. Since elderly patients are underrepresented in cancer clinical trials, producing evidence-based recommendations in everyday clinical practice remains difficult. The Group conducts elderly-specific clinical research to meet these two challenges.



Antonella Brunello
Chair

Istituto Oncologico Veneto
IRCCS, Italy



Lissandra Dal Lago
Secretary & Young Investigator Representative

Institut Jules Bordet, Belgium



Andrea Luciani
Treasurer

Ospedale San Paolo, Italy



Top results 2020

- ▶ Continued with APPALACHES, a phase II study of Adjuvant Palbociclib as an alternative to chemotherapy in elderly patients with high-risk ER+/HER2- early breast cancer in conjunction with the Breast Cancer Group.
- ▶ Results from quality-of-life trial 75111 showed an increase in progression-free survival by seven months with the addition of metronomic oral cyclophosphamide to trastuzumab plus pertuzumab in older and frail patients with HER2-positive metastatic breast cancer.
- ▶ Began discussions with the Soft Tissue and Bone Sarcoma Group and Quality of Life Group for a trial in older cancer patients with advanced sarcoma comparing standard doxorubicin versus metronomic cyclophosphamide. Now planning a 1976 intergroup trial, including several items for geriatric assessment.

3 
Ongoing trials

225 
Members

CUTANEOUS LYMPHOMA TASK FORCE

Mission

Cutaneous lymphomas are rare cancers that require a widely distributed, multidisciplinary network to effectively study. Operating as a task force, this Group is focused on testing new agents in collaboration with industry and translational researchers. They regularly engage in prospective research for prognostic index development.



Julia Scarisbrick
Chair

University Hospitals Birmingham NHS Foundation Trust (UHB) - Queen Elizabeth Medical Centre, United Kingdom



Evangelina Papadavid
Treasurer

Athens University - Attikon University General, Greece



Antonio Cozzo
Secretary

Kantonsspital St Gallen, Switzerland



Emmanuella Guenova
Young Investigator Representative

Lausanne University Hospital (CHUV), Switzerland

Top results 2020

- ▶ Launched new trials including PROMPT study of extracorporeal photopheresis, MOGAT study with mogamuzilumab combination with TSE and REACH study with chlormethine gel.
- ▶ Collaborated with more EORTC Groups and the International Rare Cancers Institute (IRCI) following the successful grant to develop a cutaneous T-cell lymphoma questionnaire for health-related quality of life. Recruitment has begun together with the Quality of Life Group including for a central review of PET scans with the Imaging Group.
- ▶ Published a paper on the fundamental role of specialists in Dermatology-Venereology on the diagnosis and management of different types of skin cancer in collaboration with the European Association of Dermato Oncology, European Academy of Dermatology and Venereology, International Dermoscopy Society, European Dermatology Forum and the European Board of Dermato-Venereology.

3 
Ongoing trials

165 
Members

ENDOCRINE TUMOUR GROUP

Mission

The newly formed Endocrine Group is especially focused on identifying novel treatment options for aggressive forms of thyroid carcinoma (TC) and reducing the disease burden by minimising management in high-prevalent low-risk TC.



Johannes Smit
Chair

Radboud University Medical
Center Nijmegen, The
Netherlands



Laura Locati
Secretary

Fondazione IRCCS Istituto
Nazionale dei Tumori, Italy




Sophie Leboulleux
Treasurer

Institut Gustave Roussy, France

Top results 2020

- ▶ Received EORTC approval for trial 1953, predicting tumour progression through molecular profiling in low-risk papillary thyroid cancer during active surveillance, in collaboration with the Head and Neck Cancer Group.
- ▶ Presented abstracts from EORTC trial 1559 at two international congresses. The first at ASCO on Nintedanib (BIBF1120)¹ after first line therapy in progressive radioactive iodine refractory differentiated thyroid cancer. The full paper was submitted to EJC. The second at ESMO on Nintedanib (BIBF1120)² after first line therapy in progressive medullary thyroid cancer.
- ▶ Organised the first European thyroid cancer workshop in November 2020 to improve collaboration and co-ordination with other European groups involved in patient management of endocrine cancer.³
- ▶ Launched a European survey on thyroid cancer genotyping to investigate if molecular analyses are the standard of care for patients in European countries. The results may impact access to tailored agents.
- ▶ Collaborated with EURACAN on STARTER (Starting an Adult Rare Tumour European Registry) to build a prospective European register of rare thyroid cancers such as radio iodine refractory differentiate thyroid cancers, medullary thyroid cancer and anaplastic thyroid cancer.

1 
Ongoing trial

200 
Members

1. "Nintedanib (BIBF1120) after first line therapy in progressive radioactive iodine refractory differentiated thyroid cancer: a multicenter EORTC prospective randomized double-blind phase II study (EORTC protocol 1209-EnTF)" by Sophie Leboulleux et al. was accepted as poster presentation at ASCO and submitted for publication as a full paper in EJC.
2. "Nintedanib (BIBF1120) after first line therapy in progressive medullary thyroid cancer: a multicenter EORTC prospective randomized double-blind phase II study (NCT01788982)" was accepted as an E-poster at ESMO.
3. Workshop partners included the European Thyroid Association (ETA), European Society of Endocrinology (ESE), European Reference Network (ENDO-ERN) and European Reference Network for Rare Adult Solid Cancers (EURACAN).

GASTROINTESTINAL TRACT CANCER GROUP

Mission

This Group focuses on expanding knowledge of the genetic, epigenetic and immunologic backgrounds of gastrointestinal tumour diseases. Clinical trials focus on preclinical to clinical interaction and integrating early drug development, ensuring that new aspects of tumour biology are investigated with appropriate technology.



Florian Lordick
Chair

University Cancer Center Leipzig, Germany



Elizabeth Smyth
Secretary

Cambridge University Hospital NHS -
Addenbrookes Hospital, United Kingdom



Theo Ruers
Treasurer

The Netherlands Cancer Institute-Antoni Van
Leeuwenhoekziekenhuis,
The Netherlands

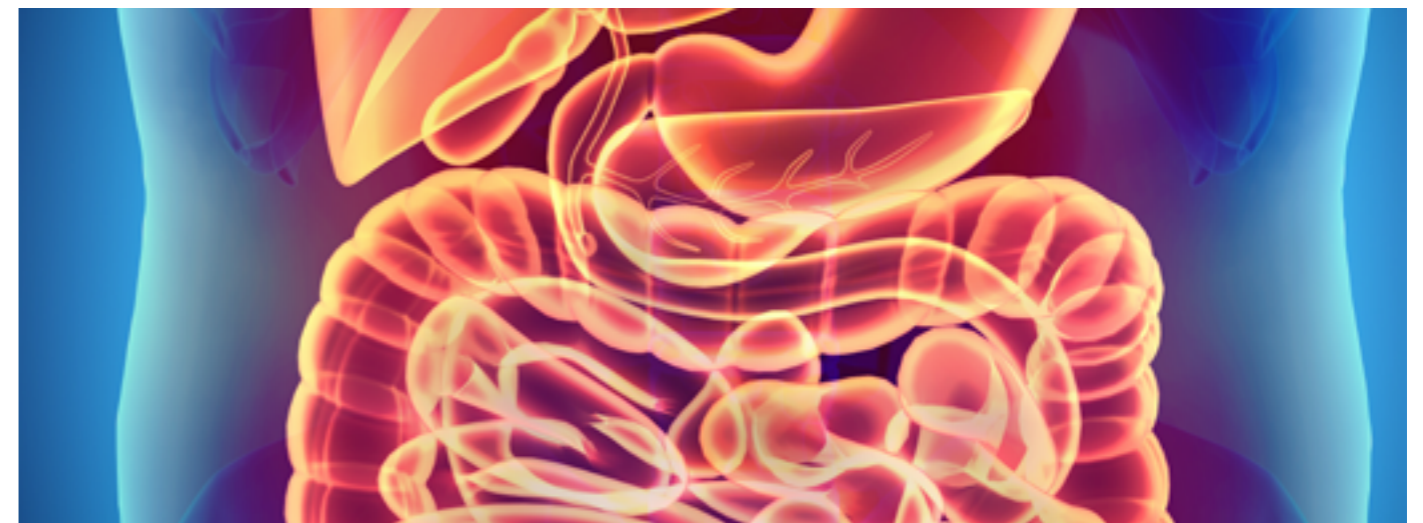


Elisa Fontana
Early Career Investigator leader

Sarah Cannon Research Institute,
United Kingdom

Top results 2020

- ▶ With 569 active members across 28 countries, the Group continues to hold a prominent place in the EORTC network. During the membership renewal process, many investigators confirmed their interest in the Group.
- ▶ Hosted a webinar to explore collaboration with biotechnology and diagnostics companies where Philips, Almac Diagnostics and Oncohost presented their portfolios followed by Q&As.
- ▶ Hosted a webinar to explore collaboration with pharmaceutical partners where E. Lilly, Novartis and Sanofi Genzyme presented their respective drug pipelines.
- ▶ Dr. Elisa Fontana became Group Secretary and Prof. Manfred Lutz was appointed Treasurer.



14 
Ongoing trials

569 
Members

GENITO URINARY CANCERS GROUP



Mission

This Group focuses on treating cancers of the urinary tract and male reproductive system. They are especially concentrated on clinical research for prostate cancer. Members are also interested in rarer diseases and biomarker-driven research.



Axel Bex
Chair

The Netherlands Cancer
Institute Antoni Van
Leeuwenhoekziekenhuis,
The Netherlands



Jose Pablo Maroto
Secretary

Hospital De La Santa Creu I
Sant Pau, Spain



Jan Oldenburg
Treasurer

Akershus University Hospital,
Norway

Top results 2020

- ▶ Joined and actively enrolling for IMMUCan¹, a more than € 30 million funded biomarker project involving various types of cancer using the SPECTA platform, involving 400 treatment-naïve metastatic renal cell carcinomas (RCC).

Co-operated with the Medical Research Council on SORCE², a randomised controlled trial investigating the role of Sorafenib as adjuvant therapy in RCC. Results published at JCO.
- ▶ Actively recruiting and expanding collaboration to Brazil with LACOG for PEACE III³, a randomised phase III trial comparing Enzalutamide vs. a combination of Ra223 and Enzalutamide in asymptomatic or mildly symptomatic castration resistant prostate cancer patients metastatic to bone.
- ▶ Contributing to a project to assess differences in the exposure to Sunitinib in the immediate and deferred cytoreductive nephrectomy (CN) arms of the randomised controlled trial, SURTIME.⁴
- ▶ Completed a research project with two manuscripts accepted for publication in JCO related to survival and new prognosticators in metastatic seminoma and predicting outcomes in men with metastatic non-seminomatous germ cell tumours.⁵

7 
Ongoing trials

441 
Members

1. Integrated IMMUnoprofiling of large adaptive CANcer patient cohorts.
2. A phase III randomised double-blind study comparing Sorafenib with placebo in patients with resected primary renal cell carcinoma at high or intermediate risk of relapse (EORTC 30072).
3. A randomised multi-centre phase III trial comparing enzalutamide vs. a combination of Ra223 and enzalutamide in asymptomatic or mildly symptomatic castration resistant prostate cancer patients metastatic to bone (EORTC 1333).
4. Randomised phase III trial comparing immediate versus deferred nephrectomy in patients with synchronous metastatic renal cell carcinoma (EORTC 30073)
5. Update of the International Germ Cell Cancer Classification Groups (IGCCCG) Analysis (RP 1538).

GYNECOLOGICAL CANCER GROUP

Mission

EORTC has successfully conducted clinical research in ovarian, cervical, uterine and vulvar cancer for decades. Many of these trials were unique and changed clinical practice. Today, the Group is focused on molecular approaches to attain truly multidisciplinary patient management. Their aim is to discover clinically useful predictive factors to identify subgroups of patients based on genomic patterns and activated pathways, and tailor clinical trials to them. The Group also stimulates clinical trials in rare cancers and underserved populations within gynaecology oncology.



**Petronella Beatrix
Ottevanger
Chair**

Radboud University Nijmegen
Medical Centre, The Netherlands



**Fernanda Herrera
Secretary**

Centre Hospitalier Universitaire
Vaudois, Switzerland



**Antonio Casado
Herráez
Treasurer**

Hospital Universitario San
Carlos, Spain

Top results 2020

- ▶ Finalised accrual of the 1508 trial, a phase II study of the anti-PD-L1 antibody atezolizumab, bevacizumab and acetylsalicylic acid to investigate safety and efficacy of this combination in recurrent platinum-resistant ovarian, fallopian tube or primary peritoneal adenocarcinoma.
- ▶ Published review and meta-analysis of progression-free survival as a surrogate end point of overall survival in first-line treatment of ovarian cancer.¹
- ▶ Published results of a randomised double-blind phase II study to evaluate the role of maintenance therapy with cabozantinib in high-grade uterine sarcoma after stabilisation or response to doxorubicin ± ifosfamide following surgery or in metastatic first line treatment.²
- ▶ Collaborated with Quality of Life Group on a questionnaire related to ovarian cancer.³
- ▶ Became a top recruiter for EORTC 1514, an EORTC QLG-GCG survivorship study that is a follow-up for gynecological cancer survivors.

4 
Ongoing trials

288 
Members

1. JAMA Netw Open. 2020 Jan 3;3(1):e1918939. doi: (Published January 3, 2020)

2. International Journal of Gynecological Cancer (EORTC62113).. 2020 Oct;30(10):1633-1637. doi: 10.1136/ijgc-2020-001519. Epub 2020 Jun 15. PMID: 32546554.

3. Gynecol Oncol. 2020 Nov;159(2):515-521. doi: 10.1016/j.ygyno.2020.09.007. Epub 2020 Sep 21. PMID: 32972782

HEAD & NECK CANCER GROUP

Mission

The Group's research aims to contribute to better patient management at various stages of head and neck cancer by promoting and validating new treatments and examining individual responses to therapies. Oropharynx, oral cavity, larynx, hypopharynx cancers are focus areas along with locally advanced pharyngolaryngeal squamous cell carcinoma, pre-neoplastic lesions, salivary gland cancers, and recurrent and/or metastatic cancer.



Christian Simon
Chair

Centre Hospitalier Universitaire Vaudois,
Switzerland



Sjoukje Oosting
Secretary

University Medical Center Groningen,
The Netherlands



Guy Andry
Treasurer

Institut Jules Bordet, Belgium



Paolo Bossi
**Young Investigator
Representative**


Universita Di Brescia - Azienda Ospedaliera
Spedali Civili di Brescia, Italy

Top results 2020

- ▶ Submitted numerous proposals, six of which the Board has endorsed. One research project has since been approved and another is still in review.
- ▶ Produced innovative ideas with novel concepts, including a study with alpha emitting particles and SPECT-CT guided radiotherapy of the neck.
- ▶ Launched a newsletter for young head and neck oncologists.



9 
Ongoing trials

437 
Members

IMAGING GROUP

Mission

This Group promotes the scientific and clinical value of imaging across modalities by spearheading the use of advanced techniques including translatable quantitative biomarkers, radiomic analyses, and artificial intelligence to interrogate biologically-driven questions. Specialist interests also include successful delivery of immunotherapy and image-guided treatment (theranostics).



Marion Smits
Chair

Erasmus MC, The Netherlands



Christophe Deroose
Vice Chair

U.Z. Leuven, Belgium



Laure Fournier
Secretary

Hôpital Européen Georges Pompidou,
France




Lioe-fee de geus-oei
Treasurer

Leiden University Medical Centre,
The Netherlands

Top results 2020

- ▶ Rapidly investigated the impact of Covid-19 on clinical trials, resulting in fast-track publication in one of the leading European Imaging journals.¹
- ▶ Hosted themed plenary meetings featuring keynote lectures from world-renowned experts. The autumn theme revolved around concerns about MRI contrast agent safety and toxicity. The spring theme was on novel applications and theranostics opportunities for prostate cancer and imaging of the immune system.
- ▶ Continued strengthening of transversal research through Group representatives and Disease Oriented Group liaisons. The success of the oligometastatic subcommittee on prostate cancer inspired strong collaboration with the Breast Cancer Group and the Gastrointestinal Tract Cancer Group.
- ▶ Collaborated with the RECIST Group (Response Evaluation Criteria in Solid Tumours) to evaluate the uptake of iRECIST² criteria since the publication of iRECIST guidelines. The RECIST Working Group and the Hyper-Progression Task Force are also collecting images from patients under immunotherapy.
- ▶ Presented on how artificial intelligence applied to imaging can support clinical trials at a 'Movember' webinar by Prof. Luc Bidaut. The event was especially well attended.

1 
Ongoing trial

2 
Research Projects

232 
Members

LEUKEMIA GROUP

Mission

The Group focuses on improving outcomes for adult patients with acute leukaemia or related hematologic malignancies, such as myelodysplastic syndromes. Members operate clinical trials, including large standard practice-changing phase III studies. One of their hallmarks are strong translational research programmes, that for example optimise epigenetic therapy in acute myeloid leukemia or myelodysplastic syndrome. The Group is also engaged in survivorship studies in collaboration with the Quality of Life Group, taking advantage of the large number of patients already included in past phase III clinical trials.



Michael Lübbert
Chair

Universitätsklinikum Freiburg,
Germany



Heiko Becker
Secretary

Universitätsklinikum Freiburg,
Germany

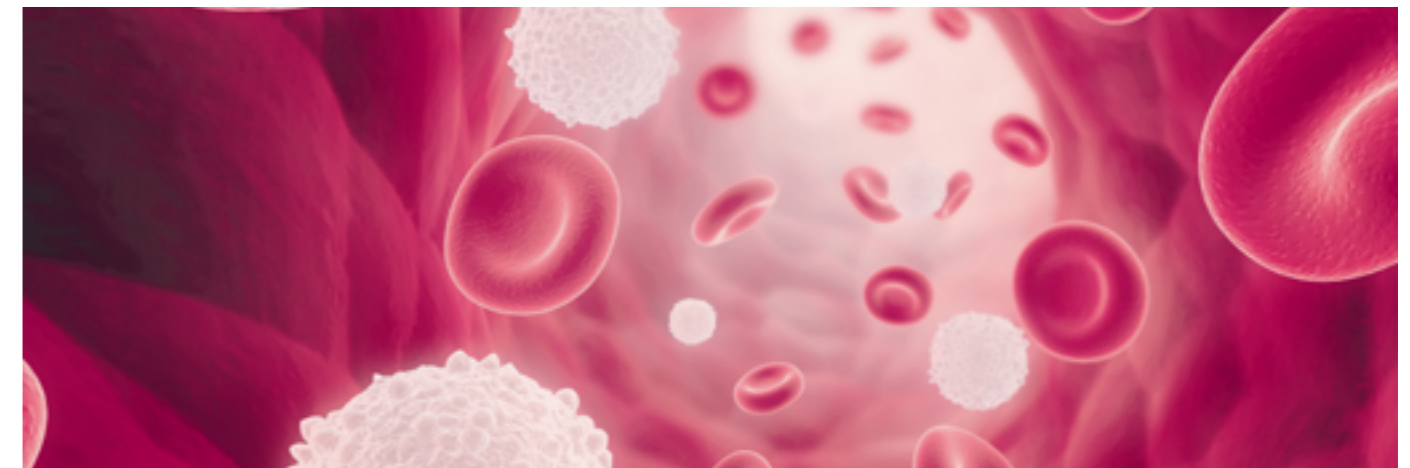


Laimonas Griskevicius
Treasurer

Vilnius University Hospital
Santariskiu Santaros Clinics
Klinikos, Lithuania

Top results 2020

- ▶ Completion and follow-up of a large, hopefully practice-changing phase III trial on the comparison of epigenetic therapy versus standard chemotherapy in first-line treatment of patients with acute myeloid leukemia.¹
- ▶ Active in the Survivorship Project to understand and improve long-term outcomes for acute myeloid leukemia patients as part of the SPARTA trial.²
- ▶ Engaged in HARMONY, the Healthcare Alliance for Resourceful Medicines Offensive against Neoplasms in Hematology.³ The project gathers, integrates and analyses anonymous patient data from diverse sources as part of the Big Data for Better Outcomes programme.



1 
Ongoing trial

160 
Members

LUNG CANCER GROUP

Mission

This Group aims to challenge, re-define and develop standards of care for loco-regional as well as systemic treatments for lung cancer. This extends to mesothelioma and thymomas. Projects are designed to integrate disciplines such as imaging, translational research, quality of life and quality assurance. The Group is also focused on studying the use of immunotherapy to treat lung cancer.



Benjamin Besse
Chair

Institut Gustave Roussy, France

As of December 2020: Anne-Marie Dingemans
Erasmus MC, The Netherlands



Anne-Marie Dingemans
Secretary

Erasmus MC, The Netherlands

As of December 2020: Remon Masip Jordi
HM Delfos Hospital-CIOCC, Spain



Thierry Berghmans
Treasurer

Institut Jules Bordet,
Belgium



Matteo Giaj Levra
Early Career
Investigator leader

Centre Hospitalo-Universitaire
de Grenoble, France



Jessica Menis
Early Career
Investigator leader

Istituto Oncologico Veneto
Padova, Italy

Top results 2020

- ▶ Completed recruitment of two lung studies (1613 APPLE and 1525 Nivothym cohort 1) and launched a new study, Alkaline 1825.
- ▶ Received a one-year funding extension for a statistician fellowship to analyse the MAGRIT database, contributing to a future adjuvant trial and supporting more publications.
- ▶ Despite Covid-19, actively recruited patients to studies and endorsed five new study proposals.
- ▶ Members now include over 50 early career investigators under 40 years of age who actively participate as study co-ordinators in clinical studies, lead surveys to guide future study strategies and organise regular webinars.



11 
Ongoing trials

487 
Members

LYMPHOMA GROUP

Mission

The Group is focused on Hodgkin Lymphoma (HL), a rare cancer. When treated correctly, HL can be cured, but late toxicity (second cancers, cardiovascular diseases and fatigue) is a major concern. New trial initiatives aim to reduce both acute and late toxicity, whilst maintaining high cure rates. Research assesses all aspects of the disease to achieve a better basis for personalised treatment.



Igor Aurer
Chair

University Hospital Centre
Zagreb, Croatia



Wouter Plattel
Secretary & Young Investigator Representative

University Medical Center
Groningen, The Netherlands



Elly Lugtenburg
Treasurer

Erasmus MC, The Netherlands

Top results 2020

- ▶ Above expected inclusion in phase II EORTC 1537-COBRA trial¹ on advanced stage Hodgkin lymphoma despite Covid-19.
- ▶ Finalised the protocol for the new phase III RADAR trial² in early favourable Hodgkin lymphoma (RADAR trial) in collaboration with University College London.
- ▶ Developed a new study protocol for elderly Hodgkin lymphoma patients.
- ▶ Released final results of a long-lasting trial on low-dose total body irradiation in low-grade stage I and II non-Hodgkin lymphoma.
- ▶ Welcomed new investigators from Ireland and Poland who have become active Group members.

9 
Ongoing trials

215 
Members

1. 1537 COBRA trial investigates very early PET-response adapted treatment with BRAVD and BrECADD in patients with advanced Hodgkin lymphoma
 2. A randomised phase III trial with a PET response adapted design comparing ABVD +/- ISRT with A2VD +/- ISRT in patients with previously untreated stage IA/IIA Hodgkin lymphoma

MELANOMA GROUP

Mission

The Group aims to improve the clinical care of patients suffering with cutaneous, mucosal or ocular melanoma, and to increase knowledge about melanoma acquisition and progression. Group sub-committees focus on topics including epidemiology, early-stage melanoma, surgery, pathology and systemic therapy (adjuvant and for advanced disease).



Alexander van Akkooi
Chair

The Netherlands Cancer Institute - Antoni Van Leeuwenhoekziekenhuis, The Netherlands



Paul Lorigan
Secretary

The University of Manchester and The Christie NHS Foundation Trust, United Kingdom



Ghanem Ghanem
Treasurer

Institut Jules Bordet,
Belgium



Bastian Schilling
Young Investigator Representative

University Clinic Wurzburg,
Germany



Sara Valpione
Young Investigator Representative

The University of Manchester and The Christie NHS Foundation Trust, United Kingdom

Top results 2020

- ▶ Presented and published updated follow-up data confirming the relapse-free survival benefit of adjuvant pembrolizumab for high-risk stage III melanoma after complete surgical resection.
- ▶ Presented the first distant-metastasis-free survival data for adjuvant pembrolizumab for high-risk stage III melanoma after complete surgical resection, demonstrating a similar consistent effect on reducing distant-metastases, not just loco-regional recurrences.
- ▶ Despite being unable to complete the predefined accrual, results still showed that adjuvant pegylated interferon is an effective adjuvant treatment in stage IIB/C ulcerated primary melanomas compared to observation. This is especially valuable for developing countries without access to or reimbursement for newer melanoma treatments.
- ▶ Developed a nomogram together with European Association of Dermato-Oncology (EADO) to help predict outcome of sentinel node positive melanoma patients to allow optimal selection for adjuvant therapy.
- ▶ Added SOX10 to the EORTC pathology protocol as an immunohistochemical staining to assess sentinel node metastases in melanoma.



6 Ongoing trials

369 Members

PATHOBIOLOGY GROUP

Mission

Pathobiology research at EORTC aims to identify and validate biomarkers across cancer types that can be used to develop new or more targeted treatments. The Pathobiology Group aims to actively contribute to clinical research within EORTC and to perform collaborative studies into biomarkers.



Paul Span
Chair

Radboud University Medical Center Nijmegen,
The Netherlands

As of September 2020: Ira Skvortsova
Innsbruck Universitätsklinik, Austria



Maurizio Callari
Treasurer

Cruk Cambridge Institute,
United Kingdom



Ira Skvortsova
Secretary

Innsbruck Universitätsklinik, Austria
As of September 2020: Leticia Oliveira-Ferrer
UKE - University Cancer Center, Germany



Gert Van den Eynden
Young Investigator
Representative

GasthuisZusters Antwerpen - SintAugustinus,
Belgium

Top results 2020

- ▶ First results were received on the role of APOBEC3B in breast cancer therapy resistance, funded by the Dutch Cancer Society.
- ▶ Launched EUROSTAR¹ to study reversal of endocrine resistance in metastatic breast cancer.
- ▶ Released outcome of liquid biopsy studies in distinct tumour types: breast cancer (ctDNA in DCIS, circulating microRNA in HER2+ breast cancers, CTC and ctDNA in cholangiocarcinomas).
- ▶ Received first omics-based results highlighting the molecular features of breast carcinoma cells with enhanced metastatic potential.
- ▶ Co-operated with industry on novel therapeutic approaches in projects for head and neck, colorectal and ovarian cancers. Initiated a partnership with GeneTools LLC, headquartered in the US state of Oregon, to test antisense morpholinos that target oncofetal genes.
- ▶ Prof. Tamara Lah Turnšek received a life-time achievement in science award (“Zois award”) in Slovenia. Mariela Vasileva-Slaveva received a Think Pink Europe Innovation Award for a project on the digital diaries of breast cancer patients.
- ▶ Ira Skvortsova became Editor-in-Chief of the new journal, “Advances in Cancer Biology – Metastasis” (Elsevier), which will consider manuscripts on basic and translational cancer research.

134
Sites

25
Countries

174
Members

PHARMACOLOGY & MOLECULAR MECHANISMS (PAMM)

Mission

This Group aims to stimulate preclinical and clinical research of anticancer drug effects and drug-related molecular pathology. PAMM is an integral part of the EORTC's Translational Research Division, delivering information for projects with other disease-oriented groups, particularly in early-stage development.



Eric Raymond
Chair

Groupe Hospitalier Paris Saint-Joseph, France



Elisa Giovannetti
Secretary

Vrije Universiteit University Medical Center, The Netherlands



Annette Larsen
Treasurer

Université Pierre et Marie Curie, Hôpital Saint-Antoine, France

Top results 2020

- ▶ Hosted annual meeting with 38 speakers and 124 participants in 9 sessions on immunotherapy, individualised therapy, DNA repair, novel therapeutics, tumour models and medicinal chemistry. Meeting included a special focus on bench-to-bedside studies.
- ▶ Began collaborating on projects with Disease Oriented Groups for lung, head and neck, and endocrine cancers as well as the Pathobiology Group.



44 
Publications
collaborative papers

127 
Members

QUALITY OF LIFE GROUP

Mission

This Group aims to better understand the effects of cancer and its treatments on health-related quality of life for patients across diverse population groups and cultures. Members develop and refine related questionnaires for oncology clinical trials, other well-designed research studies and clinical practice. They also collaborate with other EORTC research groups to implement studies in clinical trials.



Anne-Sophie Darlington
Chair

School of Health Sciences,
University of Southampton,
United Kingdom



Karin Kuljanic
Secretary

Klinicki Bolnicki Centar Rijeka,
Croatia



Susanne Singer
Treasurer

Johannes Gutenberg
Universitätsklinikum - Mainz
University Medical Center,
Germany
As of Autumn 2020
Mieke Van Hemelrijck
School of Cancer and
Pharmaceutical Sciences,
King's College London, United
Kingdom

Top results 2020

- ▶ Led the co-ordination and development of an Innovative Medicines Initiative (IMI)-funded project to develop international consensus recommendations for the design, analysis and interpretation of PRO data in cancer clinical trials.¹
- ▶ Developed 66 language versions of a telephone script for QLQ-C30 that became a valuable solution for many users during the pandemic, enabling them to collect QOL data when patients were confined at home. Developed preliminary scripts as well for 19 modules that involve over 250 translations.
- ▶ Recruited patients for two prospective clinical trials to assess physical and or psychosocial problems after primary treatment using cross-sectional survey in gynaecologic cancer (EORTC-1514-GCG)² and breast cancer (EORTC-1617-BTG)³.
- ▶ Received further funding for the TOLERANCE trial from Fonds Cancer (FOCA) and currently under consideration by the Rising Tide Foundation to complete its funding. It is a purely academic clinical trial to reduce treatment burden in elderly sarcoma patients using the QLQ-C30.



36 
Ongoing trials

412 
Members

SOFT TISSUE AND BONE SARCOMA GROUP

Mission

This Group conducts international clinical trials and other research projects to innovate multidisciplinary treatment strategies for patients with sarcoma that can improve survival and quality of life. Members collaborate closely and across borders to conduct the breakthrough research that is needed for this heterogeneous group of rare and ultra-rare cancers.



Hans Gelderblom
Chair

Leiden University Medical
Centre
The Netherlands



Winan van Houdt
Secretary

The Netherlands Cancer
Institute-Antoni Van
Leeuwenhoekziekenhuis
The Netherlands



Ian Judson
Treasurer

The Institute of Cancer Research
United Kingdom
As of November 2020:
Jean-Yves Blay
Centre Léon Bérard
France

Top results 2020

- ▶ Published in Lancet Oncology and presented at ASCO on the STRASS trial, the first ever completed randomised controlled trial in retroperitoneal sarcoma. This study evaluated the role of neo-adjuvant radiotherapy for retroperitoneal sarcoma.¹
- ▶ Launched the successor, STRASS 2 to evaluate on a global scale the role of neo-adjuvant chemotherapy for retroperitoneal sarcoma.
- ▶ Published the CaboGIST trial, an important study evaluating cabozantinib as a treatment option for patients with gastrointestinal stromal tumours.
- ▶ Developed several trial designs for immunotherapy strategies for sarcoma by young oncologists, hopefully leading to fully-funded and EORTC-led immunotherapy trials.
- ▶ Approval of and funding for the first soft tissue and bone trial with QOL as the primary endpoint called TOLERANCE, a trial evaluating different chemotherapy regimens for elderly patients.

12 
Ongoing trials

365 
Members



SPECTA

Precision oncology is the future of cancer treatment and through the SPECTA platform, EORTC is helping to lead the way. The pan-European platform allows for the rapid implementation of new clinical trials and robust translational cancer research.

The molecular tumour boards emerging from SPECTA enable clinicians to make far more

informed clinical decisions based on the genomic 'best fit' profile of patients.

SPECTA aligns research into a single protocol and patient informed consent with one clinical database. With a centralised process, it ensures high-quality collection, storage of human biological material as well as translational research.

In 2020, three downstream SPECTA projects were actively enrolling patients and a new project was initiated. With the 4 current downstream projects, global SPECTA enrollment is expected to reach approximately 6 800 patients.

INFRASTRUCTURE PROJECTS

AYA

Molecular landscape of brain and sarcoma cancer in adolescents and young adults.

This is a collaborative project with the German Research Center DKFZ. The sarcoma cohort has fully recruited and closed.

IMMUcan

Gaining knowledge of the interaction between the tumor and its microenvironment and the impact of therapeutic interventions

EORTC is the academic lead for this IMI funded project.

Arcagen

Understanding the genomic of rare cancers.

This is a collaborative project with the European Reference on Rare Adult Solid Cancer (EURACAN). The Gastrointestinal and endocrine cohorts have been fully recruited and closed.

First publication in 2020¹ and poster at the ENA 2020 scientific meeting

BioRadon

[Project under development]

Molecular characterisation of NSCLC (non-small cell lung cancer) and exposure to indoor radon in Europe.

Radon is the leading cause of lung cancer in non-smokers, but the carcinogenesis mechanism in order to prevent future cases, remains unknown.

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7709508/pdf/esmooopen-2020-001075.pdf>

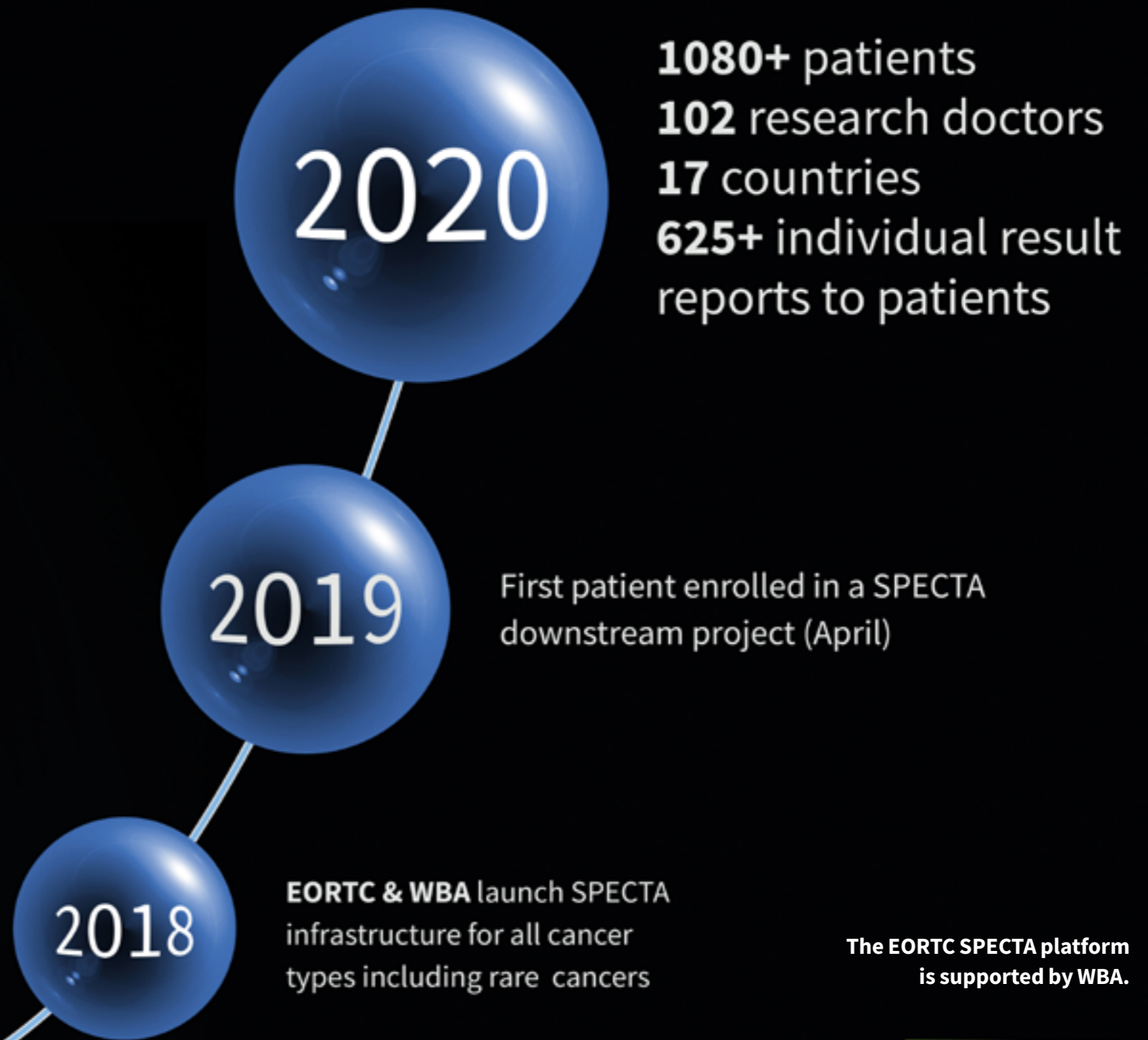
SPECTA platform

Celebrating an important milestone in cancer clinical research & personalised medicine



SPECTA is a unique way to share at international level the results of cancer molecular screening. It's a model for drug development of rare actionable alteration and for identifying eligible patients in different countries. It's a new paradigm for clinical research.

Prof Nicolas Penel
SPECTA's Principal Investigator



The EORTC SPECTA platform is supported by WBA.



E²-RADIatE

The E²-RADIatE platform gathers 'real-world' data on patients treated with radiation oncology in Europe. The platform represents a unique collaboration between the EORTC and the European Society for Radiotherapy and Oncology (ESTRO) to build collective knowledge on how treatments impact patient survival and quality of life.

2020 Highlights

It was a year to remember in more ways than one. We finished activating the 22 sites in our five 'starting' countries from our first wave of regulatory submissions. The second phase of 43 sites (including six new countries) is ongoing. We were happy to welcome the first site in Slovenia, and soon in Austria, Czech Republic, Germany, Poland, Portugal, Spain and the United Kingdom.

Despite Covid-19 restrictions, 441 patients were enrolled in the OligoCare cohort by the end of 2020. There was a slowdown in March (only 16 patients enrolled), but numbers quickly recovered with an average of 36 patients/month until December. Enrolment has consistently exceeded expectations.

In 2021, we are finishing the second phase and further extending the number of sites as part of a third wave. We are also exploring a collaboration with Australian and Canadian centre as well as opening a new cohort on re-irradiation.



The excellent recruitment into the OligoCare cohort indicates the strong commitment of the Radiation Oncology community to contribute to a better understanding of oligometastatic disease in general and of factors influencing outcome of oligometastatic cancer patients treated with radical radiotherapy.



Matthias Guckenberger
Cohort Coordinator of OligoCare



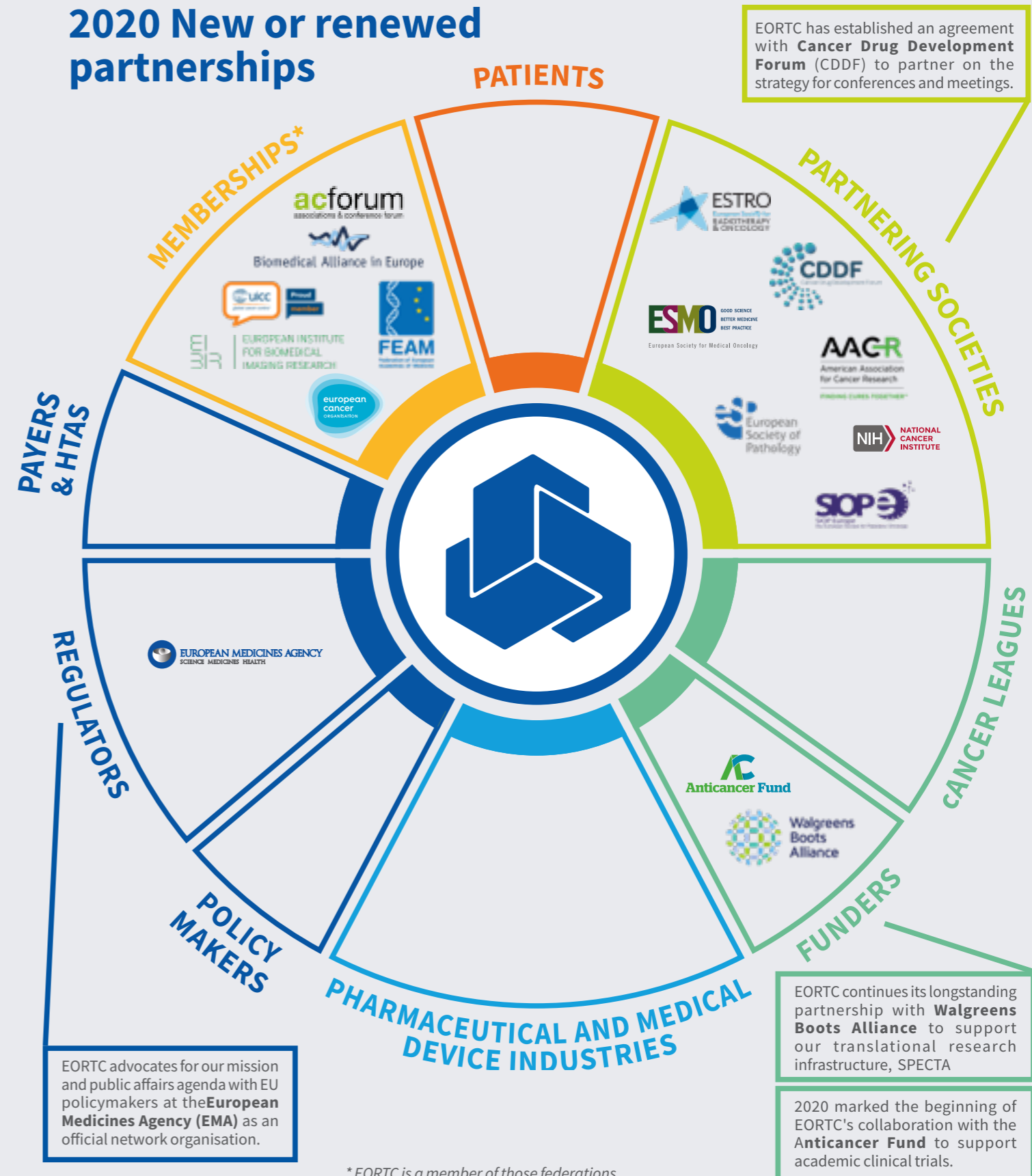
The E²-RADIatE platform is a unique joint initiative of the EORTC and the ESTRO, combining the efforts of a major cancer research organization with those of a large group of dedicated radiation oncology professionals. The structured collection of radiotherapy-specific real-world data will complement the evidence generated in clinical trials and shed additional light on the outcome of the treatments we deliver.



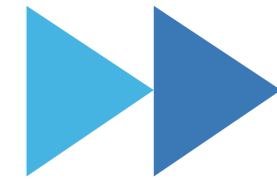
Yolande Lievens
E²-RADIatE Study Coordinator

We partner with organisations that share our mission to improve survival and quality of life for patients with cancer. Partners lend their expertise with clearly defined responsibilities in our structure, whilst adhering to EORTC's principles of independence and quality.

2020 New or renewed partnerships



EORTC ECOSYSTEM



Patient Days 2020

EORTC held a two-day training course in February for European patients and patient representatives. Its aim is to help participants understand cancer biology, and learn about cancer biology, personalised cancer treatment and care, regulatory aspects of clinical research, drug development, real world data, and patient involvement in the design and implementation of clinical trials. Interactive sessions enabled participants to debate on the topics with researchers and experienced patient advocates.

The programme was developed in close collaboration with the EORTC patient panel and is based on topics suggested by participants from previous editions. Post-surveys showed that respondents regarded Patient Days positively, both in terms of its programme and organisation. Afterwards, 12 participants applied to join EORTC's Group of Patient Experts.

PATIENT INVOLVEMENT IN THE RESEARCH



“Before Patient Days, I didn't know where studies come from, how they're carried out or how protocols are created. Now that I understand and know the people behind the research, I trust that they're doing their best to improve quality of life. I feel like we're headed in the right direction.”



EORTC PATIENT PANEL

Patient involvement in the IDMC

Since our goal is to enhance patient involvement in different facets of cancer clinical research, we are currently considering appointing a patient representative as a member of the Independent Data Monitoring Committee (IDMC). A survey to select the most suitable candidates for this role has been developed in collaboration with the IDMC chair and its members.


Patient involvement in Groups

The changes to EORTC governance underway imply involvement of patient representatives in the Group steering committees.

Some numbers


105 
Patient reviewers

9 
Panel members

1 
face-to-face meeting

2 
virtual meetings

4 
Editions of Patient Days

5 
patient information sheets/
informed consents

7 
study concept reviews
received in 2020

Speakers at Patient Days

Roger Wilson and Janette Rawlinson are patient advocates who bring their lived experience to the patient panel. At Patient Days, they spoke about patient needs in research and the relevance of endpoints. They shared their cases and moderated several sessions.

New members

Five new members joined the patient panel in 2020, bringing the total number to nine. Tom Haswell, who was a member of the British Thoracic Oncology Group Steering Committee and an influential professional lung cancer advocate, sadly passed away in November.

Roger Wilson

Panel chairman,
Sarcoma Patients EuroNet
(SPAEN)

UK

Kathy Oliver

International
Brain Tumour Alliance (IBTA)

UK

Janette Rawlinson

NCRI lung subgroup,
British Thoracic Oncology
Group (BTOG), European
Lung Foundation (ELF)

UK

Patricia Fairbrother

Independent Cancer
Patients' Voice (ICPV)

UK

Rafal Nagiecki

Independent patient
advocate

Poland

Eva Maria Strömsholm

Gynaecological Cancer
Patients

Finland

Margaret Grayson

Northern Ireland Cancer
Research Consumer Forum

UK

Lesley Goodburn

Pancreatic Cancer UK,
NCRI Upper GI Executive
Group, NCRI Pancreatic
Cancer workstream

UK

Winette van der Graaf

The Netherlands
Cancer Institute

The Netherlands

Patient involvement guidance

Guidance is in development to support EORTC Disease-Oriented Groups to actively involve patients and patient organisations in a systematic, consistent and sustainable way. It will offer practical advice with an overview of the key elements and challenges involved. The Guidance is part of a toolkit, including some templates and relevant presentations. It is being developed by the EORTC International Policies and Affairs unit in consultation with experienced patient panel members. The Guidance will be finalised after receiving input from the Disease-Oriented Groups.



Clinical trial brochure

The patient panel thoroughly reviewed the EORTC clinical trial brochure to improve its layout, design and coherence. Their contributions will help make the content more understandable and relatable for patients and their family members.

Group survey

Patient panel's Chair co-developed a survey with EORTC HQ to identify the limits and opportunities for patient involvement in Groups. The results of the survey should contribute to pragmatic solutions tailored to the needs of each Group and will be included in the forthcoming Patient Involvement Guidance.

Risk assessment of patient data

In 2020 we had a unique opportunity to benefit from patient contributions not only in research but also to data protection related matters. When developing a standard operation procedure on the Data Protection Impact Assessment, we asked the patient panel to review different scenarios involving the processing of patient data in clinical research and to evaluate the related risks.

During this exercise, we noticed that patients actually upgraded the risk levels that researchers had defined. This suggests that they may be more vigilant to data inaccuracy and unauthorised access to their data than researchers. It also revealed that the spectrum of patient contributions is quite broad and should not be limited to clinical studies.

OUR POLICY
ACTIONS IN
2020

Treatment optimisation

Making treatment optimisation a mandatory step in treatment access was the central theme of our policy actions in 2020. EORTC shares the widespread concern that approved expensive new drugs may not provide substantial added benefit to patients.

Advocacy began in the European Parliament in 2019 with **the launch of the manifesto for treatment optimisation co-ordinated by EORTC.** The manifesto includes specific policy recommendations to produce cost savings that can enhance access to innovative treatments across Europe, including:

Complimenting regulatory clinical trials to identify and qualify new agents with independent clinical research on the optimal use of drugs, including on the duration, dosage and combination with other therapies.

Funding for optimisation studies that collect real-world data in a controlled clinical environment to help close the so-called efficacy-effectiveness gap.

Making continuity from drug registration into healthcare research mandatory.

Many stakeholders have joined in supporting the manifesto, such as Members of the European Parliament, patient organisations, scientific societies, biotechnology and pharmaceutical industry representatives. Although we have seen greater mentions of treatment optimisation in EU

institutional communication, there remains no concrete action to date.

To drive **action forward in 2020, we focused on awareness-raising with influential stakeholders, meeting with MEPs including:** Véronique Trillet-Lenoir, Petra De Sutter, Peter Liese and Frédérique Ries. We are continuing cross talks with the European Medicine Agency and Health Technology Assessment bodies such as EUnetHTA and IQWiG. We are also now in contact with payers including the BeNeLuxA Member States Initiative.

Since this policy challenge is not limited to oncology, we are in talks with the BioMed Alliance to form an umbrella group with other disease areas such as respiratory disease. We started discussions as well with the pharmaceutical and medical device working group of the Organisation for Economic Co-operation and Development (OECD).

We also advocated for treatment optimisation during official consultations on the EU's Pharmaceutical Strategy for Europe, adopted on 25 November 2020.

Europe's Beating Cancer Plan

The EORTC was actively engaged in consultations in 2020 on Europe's Beating Cancer Plan. Presented in February 2020, the Plan is the EU's response to growing challenges and developments in cancer control.

Our advocacy focused on promoting patient-centric independent clinical research in oncology and ensuring sufficient public funding to make academic research including treatment optimisation a reality in Europe.

General Data Protection Regulation (GDPR)

Since coming into force in 2018, the European General Data Protection Regulation (GDPR) has been causing significant concern amongst the scientific community for its impact on the collection and use of data in clinical research. In 2020, the EORTC raised concerns with policymakers regarding:

- ▶ **Diverging national implementation** and the uncertainty regarding the correct compliance with its provisions.
- ▶ **Perceived barriers** for longer storage and reuse of collected data as well as sharing of data with other researchers.
- ▶ **GDPR's interplay** with other European legislation applicable to health research, such as the Clinical Trials Regulation, In Vitro Diagnostic Medical Devices Regulation and Medical Devices Regulation.
- ▶ **Complexities** due to the application of Member State legislation on other matters, such as biobanks, registries and genetic testing.

EU-funded projects in 2020

Despite the pandemic, **2020 was a busy year for EU-funded projects**. EORTC carried on the coordination of “**Integrated Immunoprofiling of large adaptive Cancer patient cohorts**” (IMMUcan). The project aims to understand the tumour micro-environment and how it evolves under the influence of cancer treatment using tumour samples from some 3 000 cancer patients combined with clinical data.

The fully integrated project pipeline is now operational. Access to patient material has been a significant challenge, exacerbated by Covid-19 restrictions. We are looking for additional clinical sites and research groups to participate outside EORTC.

EORTC is participating in a true multi-stakeholder project to bridge the efficacy-effectiveness gap: Next Generation Health Technology Assessment (HTx). In collaboration with the European Proton Therapy Network, we are conducting a case study

using real-world data to validate the benefit of proton therapy in Head and Neck cancer. HTx is also an opportunity to investigate how research organisations like EORTC can support health technology assessments. This is in line with EORTC's policy actions around treatment optimisation.

Finally, **we signed a grant agreement with the EU Innovative Medicines Initiative for “Setting International Standards of Patient-Reported Outcomes and Quality of Life Endpoints in Cancer Clinical Trials” (SISAQOL-IMI)**. Co-ordinated by EORTC, SISAQOL-IMI will establish guidance on how to use patient-reported outcomes in cancer clinical trials. Started in January 2021, the project involves a large group of stakeholders including academic institutions, industry, patient groups, regulatory agencies, HTA and scientific societies from around the world.

In 1991, we established the EORTC Fellowship Programme to encourage physicians, statisticians and scientists from around the world to engage in European clinical cancer research.

Selected fellows work for up to three years at EORTC headquarters in Brussels, the capital of Europe. It is a unique opportunity to absorb all aspects of creating, activating and bringing cancer clinical research projects to maturity, from the inside.

Fellows are exposed to a range of training to reinforce and expand their knowledge of clinical

research. It is also a chance to use EORTC's rich databases to work on practice-changing publications.

Whilst we are grateful to all our supporters worldwide, we are especially appreciative of the contributions from Belgian-based organisations.

This includes Kom Op tegen Kanker for their support to the Emmanuel van der Schueren fellowship, and the European Society for Paediatric Oncology (SIOPE) and Fonds Cancer (FOCA) for their continued support of the medical doctors' fellowship.



Fellowship achievements

- ▶ 199 fellows sponsored
- ▶ 41 nationalities welcomed



Fellows in 2020

- ▶ 23 fellowships ongoing
- ▶ 3 fellowships were awarded this year (2 statisticians and 1 medical doctor)

FELLOWSHIPS



Welcomed the world to EORTC headquarters

- ▶ EUROPE: Belgium, France, United Kingdom, Germany, Greece, Italy & The Netherlands
- ▶ AFRICA: Cameroon, Ghana, Morocco, Nigeria & Zimbabwe
- ▶ MIDDLE EAST: Saudi Arabia & Iran
- ▶ ASIA: Japan
- ▶ OCEANIA: Australia
- ▶ LATIN AMERICA: Brazil

Testimonials



EORTC Fellowships aren't about solo research. They're an opportunity to join a community of researchers inspired by a shared mission. Group success is considered an EORTC success. People are open to new ideas and give you a platform to learn and grow in projects that align with your interests - no matter your educational background.

In one project, I collaborated with world-class artificial intelligence experts to apply the technology to diagnostic

and prognostic models. It's an exciting area with tremendous untapped potential in radiation oncology. Another project involves developing and validating a predictive model for radiotherapy-induced side effects. Both projects are contributing to important advancements in patient survival and quality of life.



Marjan Sharabiani (Iran)

joined the EORTC in December 2018 as a medical physics fellow. She holds a MSc in physics.



I joined EORTC in 2018 right after graduation because I believed a fellowship in biostatistics was the right next step for my career. Three years later, I couldn't be happier with my choice. EORTC has given me the opportunity to work on - and even lead - important projects with international collaborative groups alongside extremely competent senior colleagues.



Nicolas Sauv  (France)

joined the EORTC in April 2018. He holds the equivalent of a MSc degree and is specialised in biostatistics.



I'm focused on Radiotherapy Quality Assurance (RTQA) in recently closed clinical trials in my Emmanuel van der Schueren fellowship. Since 1982, RTQA has been an essential component of EORTC radiotherapy clinical trials. It ensures that radiation therapy is safe and follows trial protocols. It also helps to improve toxicity profiles and disease control as well as radiotherapy standards.



Najlaa Alyamani (Saudi Arabia)

joined the EORTC in May 2020. She holds a medical degree from King Saud University.

The pandemic challenged us to convert the physical meetings that EORTC is world renowned for into virtual ones that could still deliver impact and allow for meaningful engagement. Our team rose to this challenge with impressive skill, welcoming over **6 500 delegates in 2020 from more than 100 countries** to virtual conferences and Group meetings. This is a threefold increase from our average.

Post-event surveys revealed that the majority of delegates still prefer physical meetings as they miss networking with peers. Since we believe that a virtual component to meetings is here to stay, expect more hybrid events in the future.

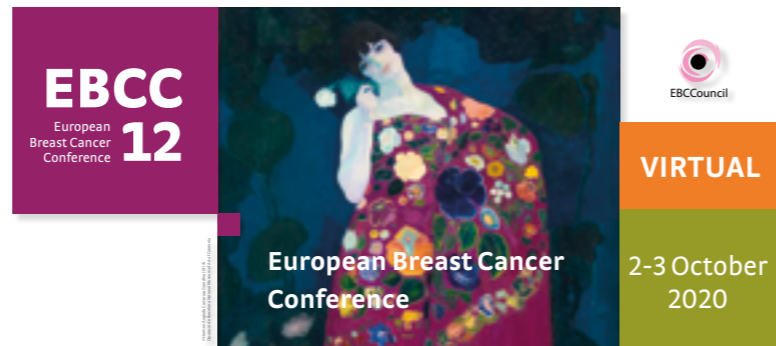


EVENTS AND CAMPAIGNS

12th European Breast Cancer Conference (EBCC 12)

2-3 October 2020

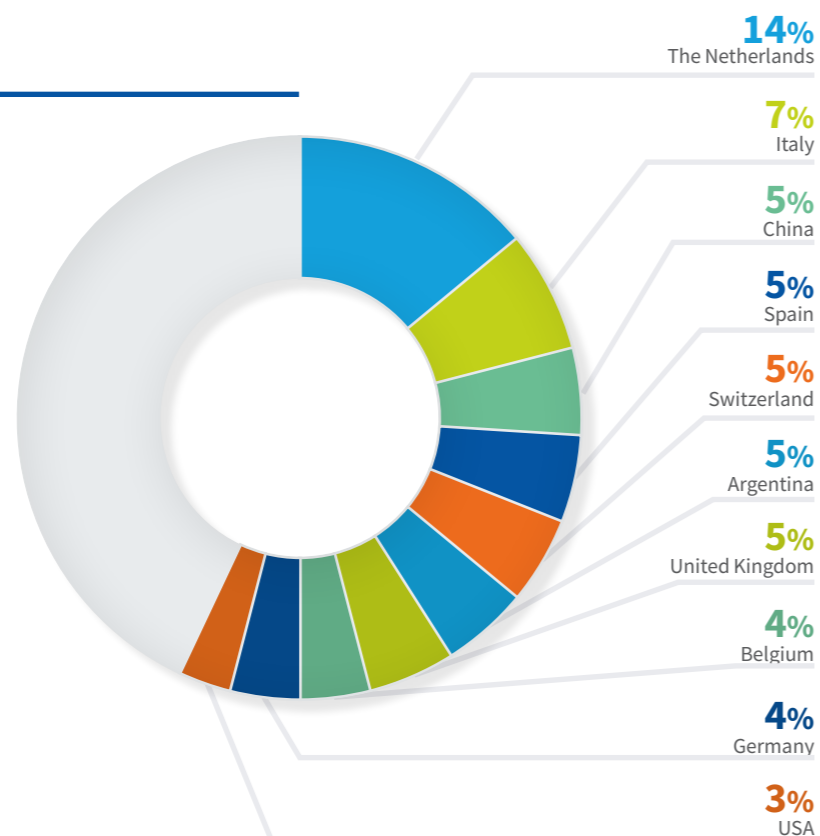
The European Breast Cancer Conference (EBCC) provides a unique multidisciplinary setting for all professionals with a common interest in breast cancer to discuss, debate, inform and educate themselves about this evolving disease. As the largest conference of its kind outside the US, the EBCC brings together diverse stakeholders from clinicians and scientists to patient representatives from around the world.



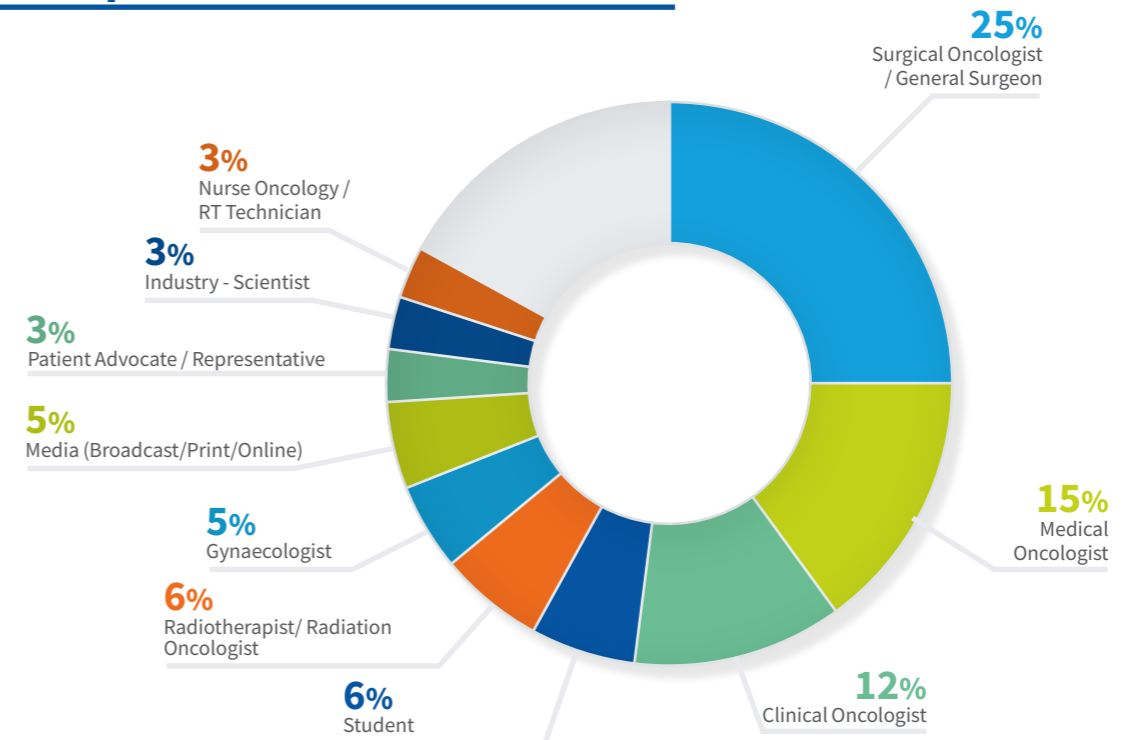
Hosted virtually in 2020, we welcomed an impressive 2 439 delegates from over 80 countries to the 12th edition of the conference. Delegates explored tangible advances made in prevention, diagnosis, treatment and survivorship driven by

multidisciplinary research. They also discussed the impact of Covid-19 on clinical studies and how researchers can prepare for and respond to pandemics and other crises in future.

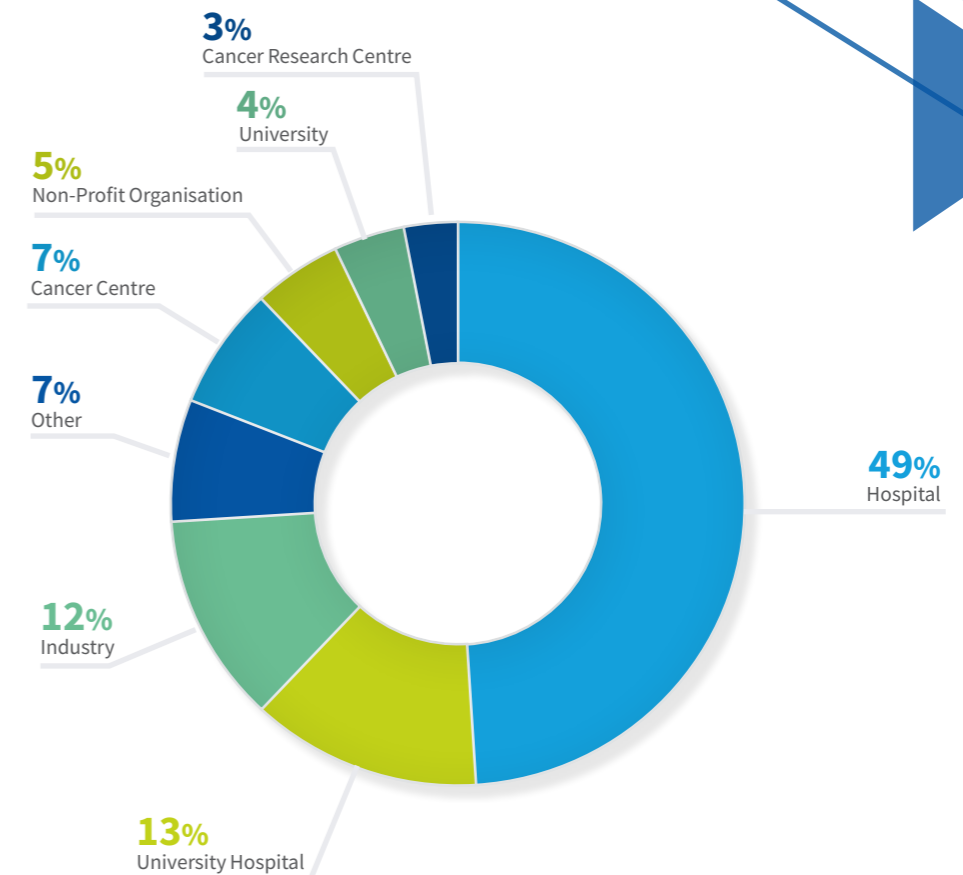
TOP 10 countries



Disciplines

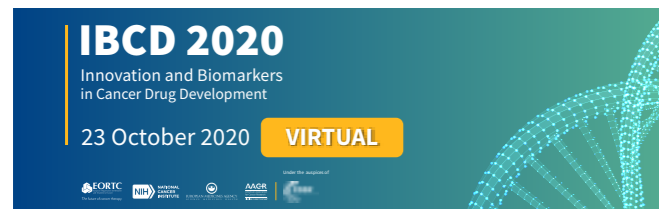


Institutions



Innovation and Biomarkers in Cancer Drug Development 2020

23 October 2020



The Innovation and Biomarkers in Cancer Drug Development (IBCD) conference explores the constantly evolving scientific, methodological and regulatory environment for drug and biomarker development. It is organised by EORTC, NCI, EMA, and AACR with the involvement of FDA and PMDA.

In 2020, more than 400 delegates from 52 countries came together for the virtual conference. Delegates explored topics including comparative effectiveness in research and the translation of findings from clinical trials to daily practice. Panel discussions also covered emerging regulatory routes to approve new anti-cancer agents based on biomarkers. Presentations demonstrated the relevance and feasibility of innovative clinical trial designs.

32nd EORTC-NCI-AACR Symposium on Molecular Targets and Cancer Therapeutics 24-25 October 2020

The symposium is a drug development and translational research meeting focusing on preclinical and phase I studies. Hosted by the EORTC together with the National Cancer Institute (NCI) and the American Association for Cancer Research (AACR), it enables and facilitates in-depth scientific discussions on the latest developments in targets and drugs.

In this 32nd edition, we virtually welcomed 3 778 academics, scientists, industry representatives and other experts from diverse disciplines. Delegates explored the latest innovations in drug development, target selection and the impact of new discoveries in molecular biology.



Methods in Clinical Cancer Research Workshop: virtual version

postponed to November 2021

The annual Methods in Clinical Cancer Research Workshop is a week-long course to educate and train early-career investigators in the best practices of clinical trial design and provide access to experienced clinical investigators from different institutions with expertise across all areas of clinical research. The workshop is organized by the EORTC, ESMO and AACR and has provided training to over 1 600 investigators from all over the world since its inception in 1999.

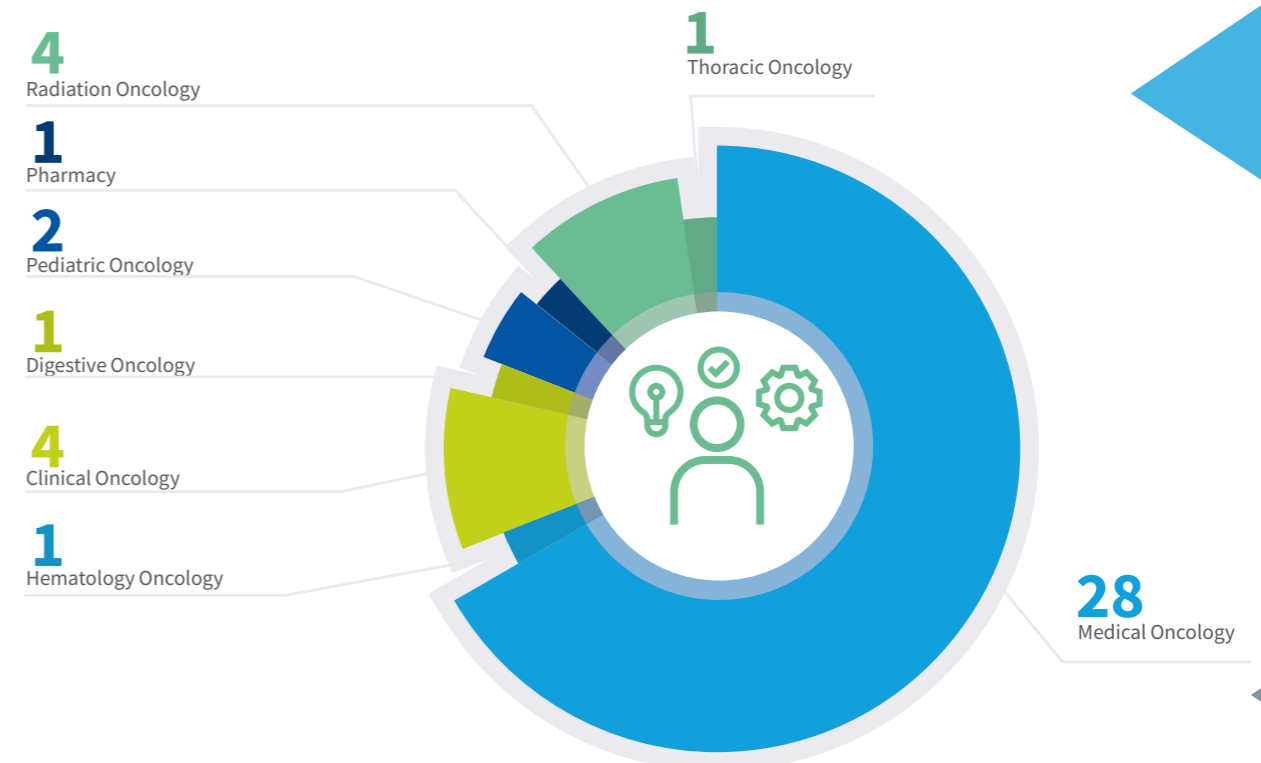
In 2020, we received 132 applications from 30 countries, of which 42 investigators were selected from 12 countries. The workshop attracted



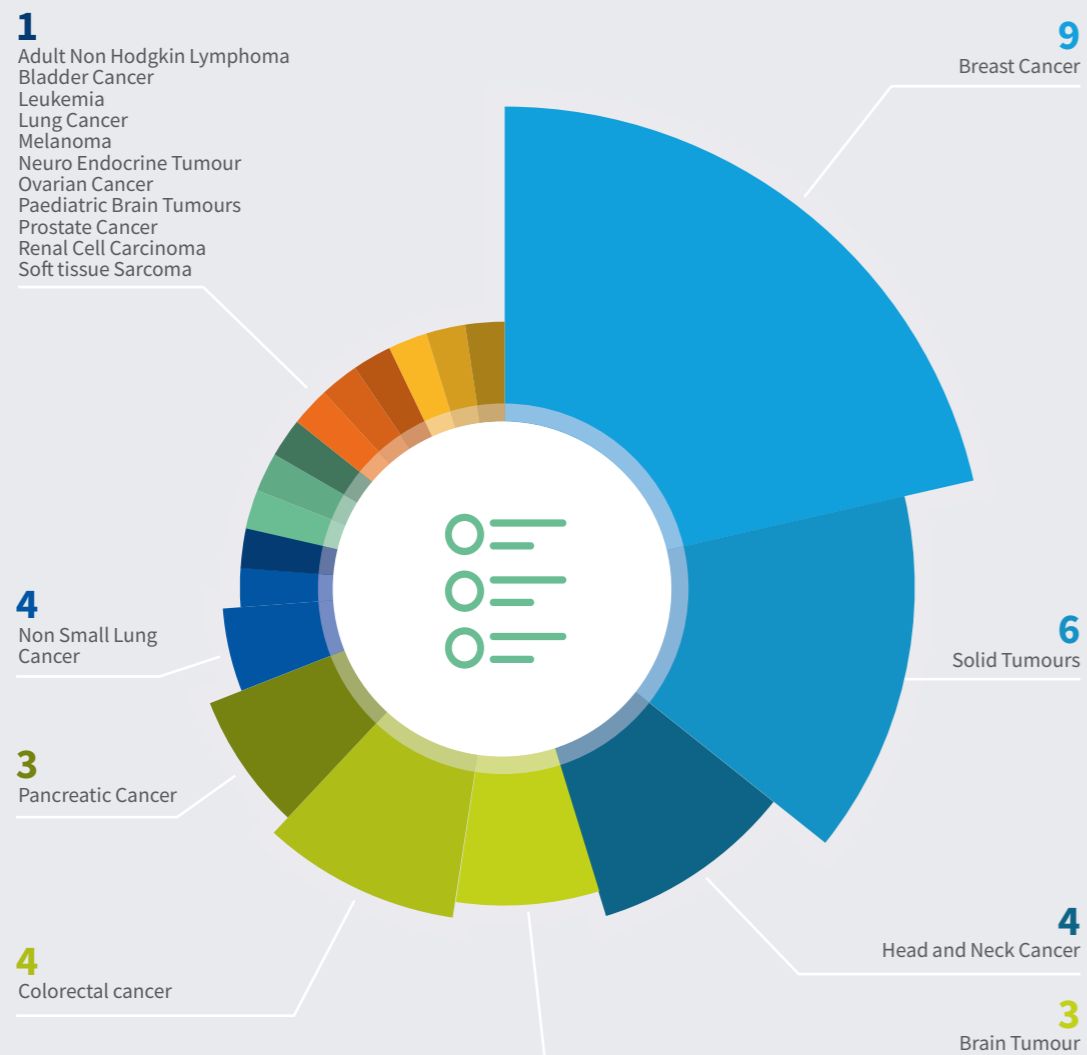
multidisciplinary participants across 18 tumour types. It was decided not to hold a weeklong course instead one virtual session per protocol development group was organised. Faculty members provided advice and recommendations to investigators in eight protocol development groups. Despite the virtual format, the workshop still enabled the peer-to-peer and mentoring relationships that are core to the experience.

Applications will open in May 2021 for the next edition planned for November in Sint Michielsgestel in The Netherlands.

Attracting multidisciplinary investigators



Representing 18 tumour types



World Cancer Day 4 February

The global cancer community commemorates World Cancer Day on February 4 each year with the slogan "I Am and I Will". EORTC has long supported the campaign, calling everyone, collectively and individually, to commit to strengthen actions to reduce the impact of cancer.

In support of the campaign in 2020, we published a series of videos featuring members and staff highlighting the vital role of clinical research in the global fight against cancer. The videos generated an impressive 1 500 views on social media.

Visit our social channels with #IamAndIwill to watch the videos.

Breast Cancer Awareness Month October

Breast Cancer Awareness Month plays a vital role in increasing attention and support for the awareness, early detection, treatment and palliative care of the disease. Typically, we would host a series of events at our HQ, but due to the pandemic we co-hosted a webinar with the Breast International Group (BIG).

The webinar focused on the growing importance of treatment de-escalation to improve patient quality of life by avoiding unnecessary overtreatment. It was open to the general public – not just the scientific community – and engaged nearly 170 participants from around the world.



Movember November



Movember is an annual campaign that challenges men to grow moustaches during the month of November to raise awareness about major health issues facing men: prostate cancer, testicular cancer and men's suicide. Proceeds from the month-wide fundraiser go towards innovative research and projects that benefit men's health around the world.



In 2020, EORTC staff sported their moustaches whilst working from home to support the cause. Despite confinement, staff raised nearly 1 300 € from the EORTC community for the Movember Foundation. We also organised two well-attended webinars: one on prostate cancer and quality of life and another on the future of genito-urinary cancers in clinical research.

Total revenue in the 2020 fiscal year:
Consolidated figures
(EORTC, ECRF, FRIENDS OF EORTC, FFRTC)

We raised

€ 41.7M
for clinical cancer research
€ 2.7M
for operating expenses

€ 44.4M

We invested

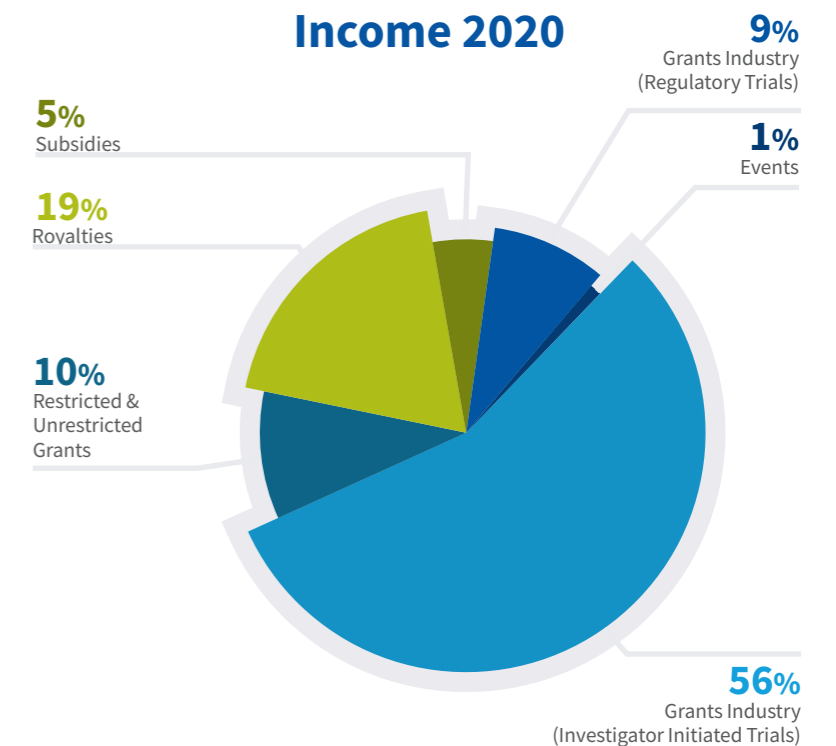
€ 34.8 M
in clinical cancer research
€ 0.6 M
in education/fellowships
€ 0.9 M
in development, communication &
professional events
€ 4.8 M
in operating expenses
(taxes, administration, HQ)

€ 41.1M

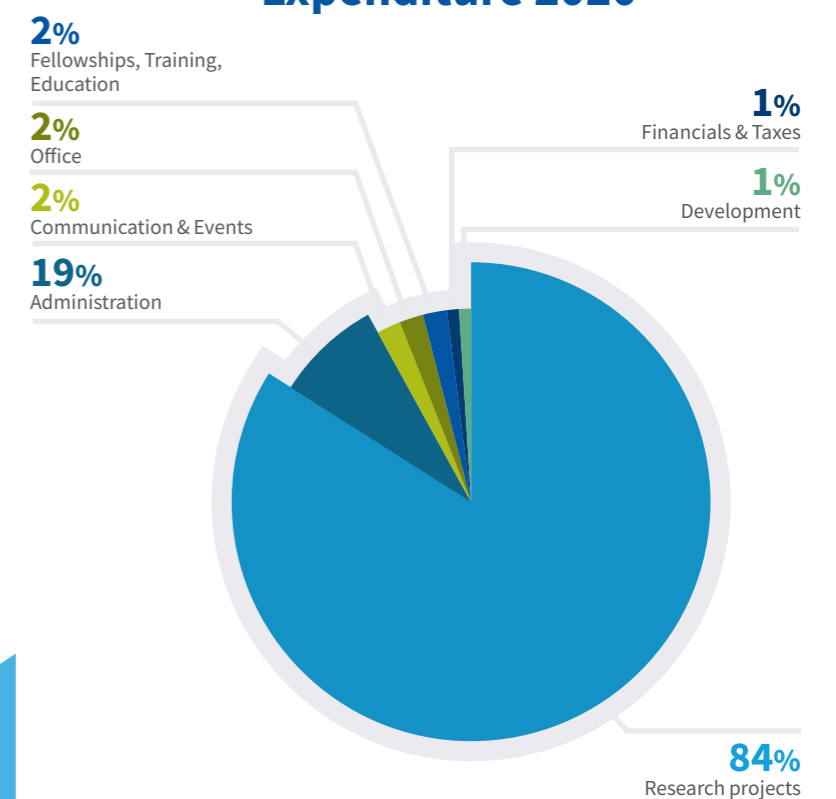
Net assets

€ 73.2 M
in 2020
€ 69.5 M
in 2019

Income 2020



Expenditure 2020



**2020 FINANCIAL
OVERVIEW**

ANNUAL
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EORTC
CANCER RESEARCH FUND



The EORTC Cancer Research Fund (ECRF) is an independent non-profit association founded in 1976 under the honorary presidency of the late Prince Philip, Duke of Edinburgh. ECRF's mission is to promote, encourage and support research on the treatment of cancer under the auspices of the EORTC.

Over the past 44 years, the ECRF has raised millions of euros to fund EORTC trials and projects to develop new treatments and care that have increased survival and quality of life for cancer patients.

The grants and donations that power our work come from a diverse range of supporters, from institutions and foundations to the private sector and generous individuals across Europe and around the world.



MESSAGE FROM THE CHAIRMAN

Due to Covid-19, our planned fundraising events had to be cancelled, postponed or where possible, moved to an online format.

With the invaluable support of our existing partners, we were able to continue supporting EORTC's important clinical research and welcome new partners that share our values and mission in driving change for unmet scientific needs for the benefit of cancer patients across the world.

The need to deliver high-quality and impactful clinical research for the benefit of cancer patients remains the same if not more urgent today. With experts predicting a rise in cancer cases in future, we need to power forward with research that can alleviate this burden for the millions of people at-risk worldwide.



Count Diego du Monceau de Bergendal
Chairman of the fund

OUR 2020 BOARD

ECRF Trustees

Victoria Agnew	UK
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ECRF Board of Trustees (Board Meeting in Brussels) from left to right: HRH Prince Guillaume of Luxembourg, Mrs Alejandra Mac-Cohon Gardner, Dr John Smyth, Count Diego du Monceau ECRF Chairman, Mrs Victoria Agnew, Mr Oscar Lewisohn

TOTAL RESTRICTED & UNRESTRICTED FUNDS RAISED IN 2020

Consolidated figures (EORTC, ECRF, Friends of EORTC, Fondation Francaise RTC¹)

€4.9M
RESTRICTED & UNRESTRICTED GRANTS

66
NUMBER OF ACADEMIC PROJECTS FUNDED (PARTIALLY & IN FULL)²

23
FELLOWSHIPS SPONSORED IN TOTAL

3
NEW FELLOWSHIPS SPONSORED IN 2020

1. Friends of EORTC & Fondation Francaise pour la Recherche et Traitement du Cancer (FFRTC) are registered charities in the UK and France respectively

2. No industry involvement

2020 HIGHLIGHTS



PARTNERSHIP

Precision oncology is the future of cancer treatment and with the Walgreens Boots Alliance (WBA), we have made exciting leaps forward through the SPECTA platform. SPECTA is the leading infrastructure for translational clinical research for all tumour types including rare cancers.

This pan-European platform allows for the rapid implementation of new clinical trials and robust translational cancer research. It helps guide patients' treatments based on their own tumour report analysis, diagnosed and confirmed by a group of leading international experts in the field.



WBA has worked in partnership with EORTC since 2011 to help fight cancer. I'm very proud of the achievements we've made together with SPECTA and the impact of this collaboration on the ability of future generations to survive this awful disease.



Richard Ellis
Vice President of Corporate Social Responsibility, Walgreens Boots Alliance



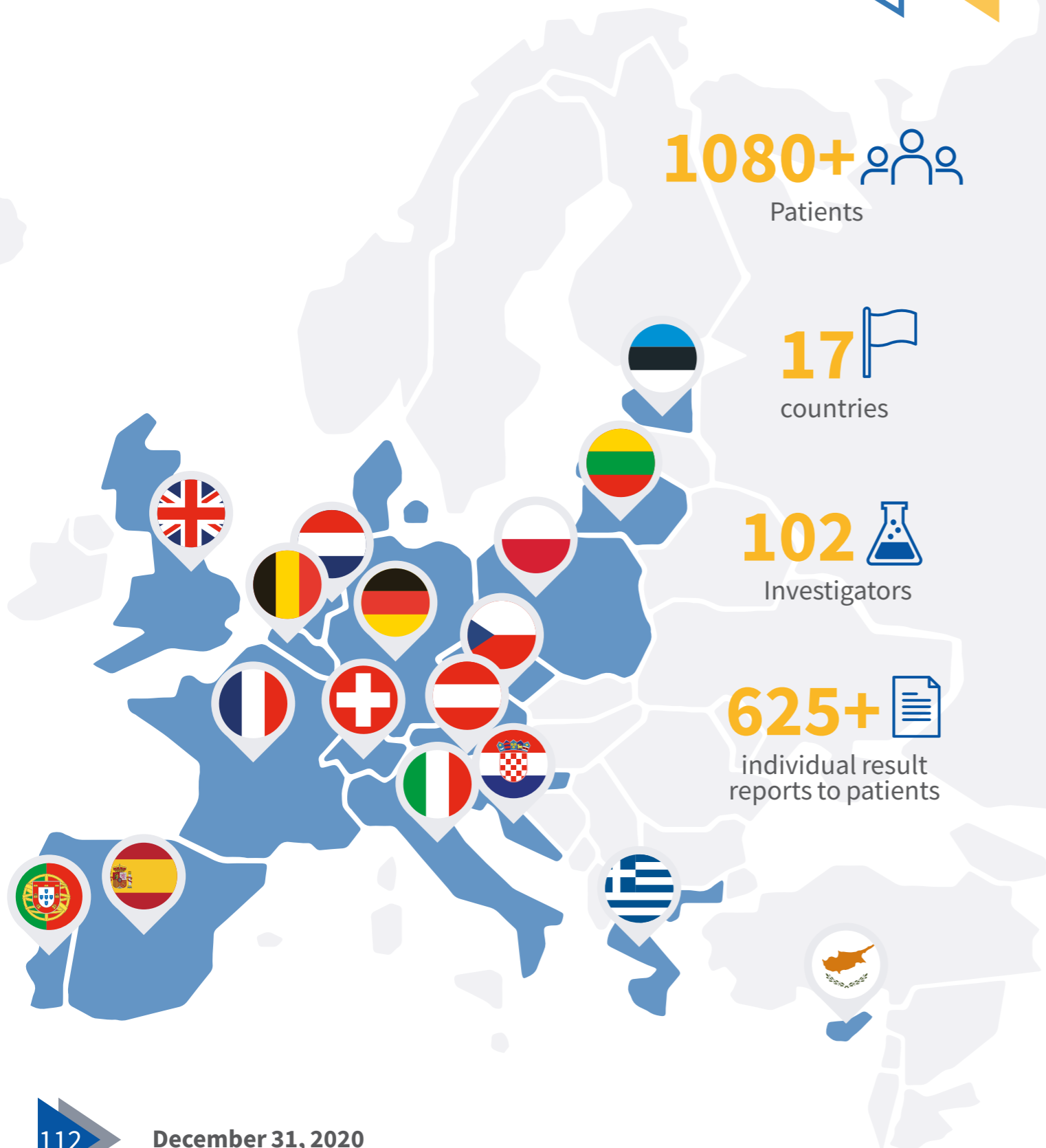
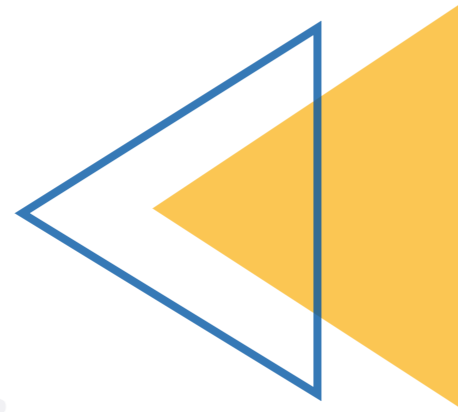
With SPECTA, the knowledge gained from addressing a patient's molecular biology can now be extended to more cancers, enabling us to develop better treatments across tumors. WBA's support has catalysed these breakthroughs.



Dr. Denis Lacombe
EORTC Director General.

SPECTA PLATFORM

In numbers



Despite the pandemic, WBA employees in 2020 continued to demonstrate their commitment to advance EORTC's mission for adolescent and adult cancer patients.



A NEW PARTNERSHIP WITH THE ANTICANCER FUND



In April 2020 the Anticancer Fund and EORTC announced a new partnership in support of the EORTC 1809 STRASS II trial in high-risk retroperitoneal sarcoma, an aggressive and rare cancer affecting the soft tissues of the body.

‘Securing research funding for areas with limited interest from the profit-driven cancer industry is essential to complement progress’, explained Lydie Meheus, managing director of the Anticancer Fund. ‘By partnering with the EORTC, we have the leading organisation in clinical research in Europe that works together with industry but also tries to address other patient-centred needs in a non-profit way. Initiatives like this need encouragement.’

Belgian entrepreneur Filip Balcaen, a major donor to the Anticancer Fund, agrees. ‘I’m convinced that organisations should join forces to achieve major breakthroughs in the fight against cancer’, he explained.

‘We’re very pleased to partner with a like-minded organisation like the Anticancer Fund to address such an important question for patients with high-risk retroperitoneal sarcoma’, said Dr. Denis Lacombe, Director General of the EORTC. ‘This marks the beginning of a successful partnership to tackle patient-centred questions where there is no industry involvement’. The total study cost amounts to approximately €2.9M, of which €1.4M is already secured, the Anticancer Fund’s financial contribution amounts to €700,000.



GENEROUSLY ENHANCING OUR CYBERSECURITY

The EORTC deals with large volumes of patient data. Even though this data is anonymised and complies with the strictest data protection standards, no organisation can be fully immune to cybersecurity threats today.

Significant investments must be made to protect and defend IT infrastructure. Thanks to the generous support of cybersecurity firm Advantio, EORTC’s infrastructure is now even more resilient and secure. The firm began donating their services in 2020 to enhance our security posture. We are grateful for their continued defence of our mission.

“

It’s our great privilege to provide our cybersecurity services to protect your cancer-fighting mission

Marco Borza
CEO, Advantio

INVESTING IN THE EDUCATION OF THE NEXT GENERATION OF ONCOLOGY PROFESSIONALS

Since 1991, the ECRF has supported the EORTC's Fellowship programme which enables physicians, statisticians and scientists from around the world to engage in world-class research for up to three years at EORTC headquarters in Brussels.

In 2020, the number of fellowships at the EORTC reached a total of **18 fellows**. The programme benefits from the longstanding support of organisations including: Fonds Cancer (FOCA), European Society for Paediatric Oncology,

Fondation Contre le Cancer, University of Leiden, Japan Clinical Oncology Group and the Belgian National Lottery.

The ECRF-BAEF partnership provides scholarships that enable American scientific students to spend a year at the EORTC in Brussels.

WE NEED PARTNERS LIKE YOU

What is clinical research exactly?

When you partner with the EORTC, you support patient-centred clinical research that improves survival and quality of life. But what is clinical research exactly? Let us explain.

Cancer clinical trials are research investigations with volunteers who test new treatments. Scientists and doctors are constantly seeking to develop innovative, more effective and less toxic treatments to improve patient survival and quality of life.

Clinical trials are necessary to confirm the safety and effectiveness of new treatments as well as decide whether side effects are acceptable when weighed against benefits.

In cancer research, some clinical trials evaluate new drugs, whilst others optimise different therapeutic approaches including surgery, radiation therapy and combinations of drugs already on the market. As with any new drug or treatment, however, there may be risks as well as benefits. That's why clinical trials are closely monitored and usually conducted in hospitals or through outpatient departments.

Academic clinical cancer research, refers to clinical research which is not funded by pharmaceutical or biotechnology companies for commercialisation, but by non-profit clinical research organisations to advance cancer research and treatment for the benefit of patients.

A typical area of academic clinical research is the advancement and optimisation of already existing therapies. Academic clinical trials may, for instance, test how a combination of treatments (drugs, radiotherapy and surgery) could improve treatment outcomes. Or they may apply registered treatments in additional or less frequent indications.



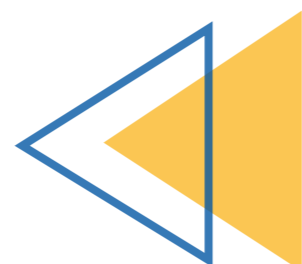
Fighting cancer with clinical research

Improving cancer survival requires independent multidisciplinary research that leads to breakthrough clinical trials. Clinical trials are the most important step on the journey from laboratory findings to standard medical practice that benefits patients.

The EORTC is uniquely positioned to deliver on this mission as the strongest cancer fighting organisation in Europe. We operate on a scale that would be impossible at a national level with a record of achievement dating back to 1962.

No tumour is too rare to tackle at the EORTC. Our research is solution-driven for all types of cancers, regardless of their commercial value. We leave no-one behind because ultimately, cancer touches us all. If not directly, through our families, friends and our countries' healthcare budgets.

We need your help to power our progress forward and welcome you to join us on this journey. Together, we can increase patient survival and quality of life.

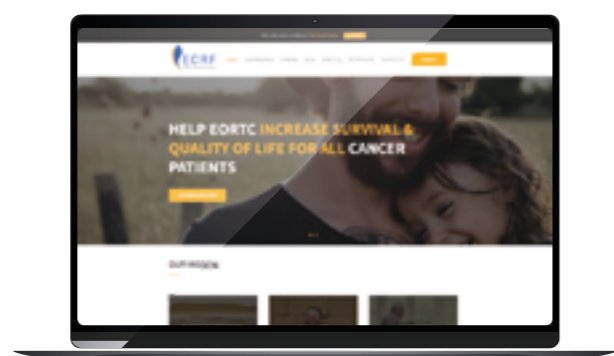


Contact us

We make it easy for businesses and individuals to support our mission. Take the first step and reach out to our team to start a conversation today!

✉ ecrf@eortc.org
☎ +32 2 774 15 26

New website



🌐 www.eortcresearchfund.org/

THANK YOU



Help support practice changing cancer clinical research

Belgium



EORTC ECRF
IBAN:
BE79 0682 4292 7433 (EUR)

UK



Friends of EORTC
IBAN:
GB30 COUT 1800 0201 8843
65 (GBP)

France



Foundation Française RTC
IBAN:
FR76 30000 4009 3200 0100
3025 923 (EUR)

Rest of Europe & USA for EORTC Cancer Research Fund



Transnational Giving Europe (TGE)
King Baudouin Foundation US

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Group / Task Force	Title	Authors	Journal	DOI
Brain Tumours	Memory in low-grade glioma patients treated with radiotherapy or Temozolomide. A correlative analysis of EORTC study 22033-26033	Klein M, Drijver A, van den Bent M, Bromberg J, Hoang-Xuan K., Taphoorn M, Reijneveld J, Ben Hassel M, Vauleon E, Eekers D, Tzuk-Shina, Lucas A, Villa Freixa S, Golfinopoulos V, Gorlia T, Hottinger A, Stupp R, Baumert B.	Neuro-oncology	https://doi.org/10.1093/neuonc/noaa252
Brain Tumours	Gender issues from the perspective of healthcare professionals in Neuro-oncology: an EANO & EORTC Brain Tumor Group survey	Le Rhun E, Weller M, Niclou S, Short S, Piil K, Florian B, Ruda Roberta, Theodorou M, Brandsma D, van den Bent M, Dirven L.	Neuro-oncology	https://doi.org/10.1093/nop/npz053
Brain Tumours	CODEL: phase III study of RT, RT + TMZ, or TMZ for newly diagnosed 1p/19q codeleted oligodendroglioma. Analysis from the initial study design	Jaeckle K., Ballman K, Van den Bent M, Giannini C, Galanis E, Brown P, Jenkins R, Cairncross G, Wick W, Weller M, Aldape K, Dixon J, Anderson K, Cerhan J, Wefel J, Klein M, Grossman S, Schiff D, Raizer J, Dhermain F, Nordstrom D, Flynn P, Vogelbaum M.	Neuro-oncology	https://doi.org/10.1093/neuonc/noaa168
Brain Tumours	Methylome analyses of three glioblastoma cohorts reveal chemotherapy sensitivity markers within DDR genes	Kessler T, Berberich A, Sadik A, Sahm F, Gorlia T, Meisner C, Hoffmann D, Wick A, Kickingereder P, Rübmann P, Bendszus M, Opitz C, Weller M, Van den Bent M, Stupp R, Winkler F, Brandes A, von Deimling A, Platten M, Wick W.	Cancer Medicine	https://doi.org/10.1002/cam4.3447
Brain Tumours	Validation of diffusion MRI phenotypes for predicting response to bevacizumab in recurrent glioblastoma: post-hoc analysis of the EORTC-26101 trial	Schell M, Pflüger I, Brugnara G, Isensee F, Neuberger U, Foltyn M, Kessler T, Sahm F, Wick A, Nowosielski M, Heiland S, Weller M, Platten M, Maier-Hein K, Von Deimling A, van den Bent M, Gorlia T, Wick W, Bendszus M, Kickingereder P.	Neuro-oncology	https://doi.org/10.1093/neuonc/noaa120
Brain Tumours	Noninvasive Characterization of Tumor Angiogenesis and Oxygenation in Bevacizumab-treated Recurrent Glioblastoma by Using Dynamic Susceptibility MRI: Secondary Analysis of the European Organization for Research and Treatment of Cancer 26101 Trial	Kickingereder P, Brugnara G, Hansen M, Nowosielski M, Pflüger M, Schell M, Isensee F, Foltyn M, Neuberger U, Kessler T, Sahm F, Wick A, Heiland S, Weller M, Platten M, von Deimling A, Maier-Hein K, Ostergaard L, van den Bent M, Gorlia T, Wick W, Bendszus M.	Radiology	https://doi.org/10.1148/radiol.20200978

Group / Task Force	Title	Authors	Journal	DOI	Group / Task Force	Title	Authors	Journal	DOI
Breast Cancer	Standard Anthracycline Based Versus Docetaxel-Capecitabine in Early High Clinical and/or Genomic Risk Breast Cancer in the EORTC 10041/BIG 3-04 MINDACT Phase III Trial	Delalogue S, Piccart M, Rutgers E, Litiere S, Van'T Veer L, van den Berkmortel F, Brain E, Dudek-Peric A, Gil-Gil M, Gomez P, Hilbers F, Khalil Z, Knox S, Kuemmel S, Kunz G, Lesur A, Pierga JY, Ravdin P, Rubio I, Saghatchian M, Smilde T, Thompson A, Viale G, Zoppoli G, Vuylsteke P, Tryfonidis K, Poncet C, Bogaerts J, Cardoso F, MINDACT Investigators and the TRANSBIG Consortium.	Journal of Clinical Oncology	https://doi.org/10.1200/JCO.19.01371	EORTC Headquarters	A new measure of treatment effect in clinical trials involving competing risks based on generalized pairwise comparisons	Cantagallo E, De Backer M, Kicinski M, Ozenne B, Collette L, Legrand C, Buyse M, Peron J	Biometrical Journal	https://doi.org/10.1002/bimj.201900354
Breast Cancer	Controlling technical variation amongst 6693 patient microarrays of the randomized MINDACT trial	Jacob L, Witteveen A, Beumer I, Delahaye L, Wehkamp D, van den Akker J, Snel M, Chan B, Floore A, Bakx N, Brinck G, Poncet C, Bogaerts J, Delorenzi M, Piccart M, Rutgers E, Cardoso F, Speed T, Van'T Veer L, Glas A.	Communications Biology	https://doi.org/10.1038/s42003-020-1111-1	EORTC Headquarters	Clinical research in Europe: who do we do all that for?	Lacombe D, Golfinopoulos V, Negrouk A, Tombal B	Journal of Cancer Policy	https://doi.org/10.1016/j.jcpo.2020.100217
Children Leukemia	Pediatric randomized trial EORTC CLG 58951: Outcome for adolescent population with acute lymphoblastic leukemia	Olivier-Gougenheim L, Arfeuille C, Suci S, Sirvent N, Plat G, Ferster A, De Moerloose B, Domenech C, Uyttebroeck A, Rohrllich P, Cave H, Bertrand Y.	Hematological Oncology	https://doi.org/10.1002/hon.2791	EORTC Headquarters	Clinical research tools in pediatric oncology: challenges and opportunities	de Rojas T, Neven A, Towbin A, Carceller F, Bautista F, Riedl D, Sodergren S, Darlington AS, Fernandez-Teijeiro A, Moreno L	Springer	https://doi.org/10.1007/s10555-020-09856-z
Cutaneous Lymphoma	Management of primary cutaneous lymphoma patients during COVID-19 pandemic: EORTC CLTF guidelines	Papadavid E, Scarisbrick J, Ortiz Romero P, Guaglino P, Vermeer M, Knobler R, Stadler R, Bagot M.	Journal of the European Academy of Dermatology and Venereology	https://doi.org/10.1111/jdv.16593	EORTC Headquarters	Views of European Drug Development Stakeholders on Treatment Optimization and Its Potential for Use in Decision-Making	Saesen R, Lejeune S, Quaglio G, Lacombe D, Huys I	Frontiers in Oncology	https://www.frontiersin.org/articles/10.3389/fphar.2020.00043
Cutaneous Lymphoma	Position Statement The evolving field of Dermato-oncology and the role of dermatologists: Position Paper of the EADO, EADV and Task Forces, EDF, IDS, EBDV-UEMS and EORTC Cutaneous Lymphoma Task Force	C Garbe, K Peris, E Soura, A M Forsea, A Hauschild, M Arenbergerova, M Bylaite, V Del Marmol, V Bataille, M Samimi, S Gandini, P Saiag, T K Eigentler, A Lallas, I Zalaudek, C Lebbe, J-J Grob, C Hoeller, C Robert, B Dréno, P Arenberger, L Kandolf-Sekulovic, R Kaufmann, J Malvehy, S Puig, U Leiter, S Ribero, E Papadavid, P Quaglino, M Bagot, S M John, M-A Richard, M Trakatelli, C Salavastru, L Borradori, B Marinovic, A Enk, C Pincelli, D Ioannides, C Paul, A J Stratigos	Journal of the European Academy of Dermatology and Venereology	https://doi.org/10.1111/jdv.16849	EORTC Headquarters	Past, current and future cancer clinical research collaborations: the case of the EORTC	Broes S, Saesen R, Lacombe D, Huys I	Clinical and Translational Science	https://doi.org/10.1111/cts.12863
EORTC Headquarters	Sharing of clinical trial data and samples: The cancer patient perspective	Broes S., Verbaanderd C, Casteels M, Lacombe D, Huys I.	Frontiers in Oncology	https://doi.org/10.3389/fmed.2020.00033	EORTC Headquarters	Cross-Border Access to Clinical Trials in the EU: Exploratory study on needs and reality	Lalova T, Padeanu C, Negrouk A, Lacombe D, Geissler J, Klingmann I, Huys I.	Frontiers in Medicine	https://doi.org/10.3389/fmed.2020.585722
EORTC Headquarters	Clinical research for patients with cancer in palliative care: where we stand	Vinches M, Neven A, Fenwarth L, Terada M, Rossi G, Kelly S, Peron J, Thomaso M, Groenvold M., de Rojas T.	British Medical Journal (BMJ)	http://dx.doi.org/10.1136/bmjspcare-2019-002086	EORTC Headquarters	The European Organisation for Research and Treatment of Cancer, State of Science in radiation oncology and priorities for clinical trials meeting report	Thomas G, Eisenhauer E, Bristow R, Grau C, Hurkmans C, Ost P, Guckenberger M, Deutsch E, Lacombe D, Weber D.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.02.050
EORTC Headquarters					EORTC Headquarters	First results of the EORTC-SPECTA/ Arcagen study exploring the genomics of rare cancers in collaboration with the European reference network EURACAN	Morfouace M, Stevovic A, Vinches M, Golfinopoulos V, Jin D, Holmes O, Erlich R, Fayette J, Croce S, Ray Coquard I, Girard N, Blay JY.	ESMO Open	https://doi.org/10.1136/esmoopen-2020-001075
EORTC Headquarters					EORTC Headquarters	Survival prediction models since liver transplantation - comparisons between Cox models and machine learning techniques	Kantidakis G, Putter H, Lancia C, De Boer J, Braat A, Fiocco M.	BMC Medical Research Methodology	https://doi.org/10.1186/s12874-020-01153-1

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EORTC Headquarters	Using both clinical research and population-based cancer registry in longterm research- a case study using EORTC trials and the Dutch national cancer registry (IKNL)	Liu L, Neven A, Giusti F, Maraldo M, Meijnders P, Aurer I, Fortpied C, Collette L, Visser O.	Journal of Cancer Policy	https://doi.org/10.1016/j.jcpo.2020.100226	Genito-Urinary Cancers	Event-Free Survival, a Prostate-Specific Antigen-Based Composite End Point, Is Not a Surrogate for Overall Survival in Men With Localized Prostate Cancer Treated With Radiation. J Clin Oncol 2020; 38 (26). https://doi.org/10.1200/JCO.19.03114	Xie W, Regan M, Buyse M, Halabi S, Kantoff P, Sartor O, Soule H, Berry D, Clarke N, Collette L, D'Amico A, De Abreu Lourenco R, Dignam J, Eisenberger M, James N, Fizazi K, Gillessen S, Lortet-Lihier N, Parukelar W, Sandler H, Spratt D, Sydes M, Tombal B, Williams S, Sweeney C.	Journal of Clinical Oncology	https://doi.org/10.1200/JCO.19.03114
EORTC Headquarters	Characterization and classification of oligometastatic disease: and ESTRO and EORTC consensus recommendation	Guckenberger M, Lievens Y, Bouma A, Collette L, Dekker A, deSouza N, Dingemans A.M., Fournier B, Hurkmans C, Lecouvet F, Meattini I, Mendez Romero A, Ricardi U, Russell N, Schanne D, Schorsetti M, Tombal B, Verellen D, Verfaillie C, Ost P.	Lancet Oncology, The	https://doi.org/10.1016/S1470-2045(19)30718-1	Head & Neck Cancers	Generalizability Assessment of Head and Neck Cancer NTCP Models Based on the TRIPOD Criteria	Sharabiani M, Clementel E, Andratschke N, Hurkmans C.	Radiation Oncology	https://doi.org/10.1016/j.radonc.2020.02.013
EORTC Headquarters	Organ at risk delineation for clinical trials: A Global Harmonization Group consensus guideline	Mir R, Kelly S, Xiao Y, Moore A, Clark C, Clementel E, Corning C, Ebert M, Hoskin P, Hurkmans C, Ishikura S, Kristensen I, Kry S, Lehmann J, Michalski J, Monti A, Nakamura M, Thompson K, Yang H, Zubizarreta E, Andratschke N, Miles E.	Radiotherapy and Oncology	https://doi.org/10.1016/j.radonc.2020.05.038	Imaging	Impact of the COVID-19 Crisis on Imaging in Oncological Trials	Deroose C, Lecouvet F, Collette L, Oprea-Lager D, Kunz W, Bidaut L, Verhoeff J, Caramella C, Lopci E, Tombal B, de Geus-Oei LF, Fournier, L, Smits M, deSouza N.	European Journal of Nuclear Medicine and Molecular Imaging	https://doi.org/10.1007/s00259-020-04910-y
Gastrointestinal Cancer	Cisplatin and 5-fluorouracil with or without epidermal growth factor receptor inhibition panitumumab for patients with non-resectable, advanced or metastatic oesophageal squamous cell cancer: a prospective, open-label, randomised phase III AIO/EORTC trial (POWER)	Moehler M, Maderer A, Thuss-Patience PC, Brenner B, Meiler J, Ettrich TJ, Hofheinz RD, Al-Batran SE, Vogel A, Mueller L, Lutz MP, Lordick F, Alsina M, Borchert K, Greil R, Eisterer W, Schad A, Slotta-Huspenina J, Van Cutsem E, Lorenzen S.	Annals of Oncology	https://doi.org/10.1016/j.annonc.2019.10.018	Leukemia	Impact of the type of anthracycline and of stem cell transplantation in younger patients with acute myeloid leukaemia: long-term follow up of a phase III study	Baron F, Efficace F, Cannella L, Muus P, Trisolini S, Halkes C, Fazi P, Vignetti M, Marie JP, Chiusolo P, van der Velden W, La Sala E, Vitolo U, Thomas X, Lefrere F, Di Raimondo F, Bourhis JH, Specchia G, Guimaraes JE, Allione B, Vrhovac R, Ferrara F, Stevens-Kroef M, Meert L, De Witte T, Willemze R, Amadori S, Suci S.	American Journal of Hematology	https://doi.org/10.1002/ajh.25795
Gastrointestinal Cancer	Pre- and Postoperative Capecitabine Without or With Oxaliplatin in Locally Advanced Rectal Cancer: PETACC 6 Trial by EORTC GITCG and ROG, AIO, AGITG, BGDO, and FFCD	Schmoll HJ, Stein A, Van Cutsem E, Price T, Hofheinz RD, Nordlinger B, Daisne JF, Janssens J, Brenner B, Reinel H, Hollerbach S, Caca K, Fauth F, Hannig CV, Zalberg J, Tebbutt N, Mauer M, Marreaud S, Lutz M, Haustermans K.	Journal of Clinical Oncology	https://doi.org/10.1200/JCO.20.01740	Leukemia	Survival Improvement over Time of 960 s-AML Patients Included in 13 EORTC-GIMEMA-HOVON Trials	Ramadan S, Suci S, Stevens-Kroef M, Willemze R, Amadori S, De Witte T, Löwenberg B, Muus P, LaBar B, Meert L, De Schaetzen G, Meloni G, Leone G, Vignetti M, Marie JP, Lübbert M, Baron F.	Cancer	https://doi.org/10.3390/cancers12113334
Gastrointestinal Cancer	VESTIGE: Adjuvant Immunotherapy in Patients With Resected Esophageal, Gastroesophageal Junction and Gastric Cancer Following Preoperative Chemotherapy With High Risk for Recurrence (N+ and/or R1): An Open Label Randomized Controlled Phase-2-Study	Smyth E, Knoedler M, Giraut A, Mauer M, Nilsson M, Van Grieken N, Wagner AD, Moehler M, Lordick F.	Frontiers in Oncology	https://doi.org/10.3389/fonc.2019.01320	Lung Cancer	A Randomized Open-Label Phase III Trial Evaluating the Addition of Denosumab to Standard First-Line Treatment in Advanced NSCLC: The European Thoracic Oncology Platform (ETOP) and European Organisation for Research and Treatment of Cancer (EORTC) SPLENDOR Trial	Peters S, Danson S, Hasan B, Dafni U, Reinmuth N, Majem M, Tournoy K, Mark M, Pless M, Cobo M, Rodriguez D, Falchero L, Moran T, Ortega AL, Monnet I, Mohorcic K, Massuti B, Betticher D, Demedts I, Macias JA, Cuffe S, Luciani A, Garcia Sanchez J, Curioni A, Gautschi O, Price G, Coate L, Von Moos R, Zielinski C, Provencio M, Menis J, Ruepp B, Pochesci A, Roschitzki H, Besse B, Rabaglio M, O'Brien M, Stahel R.	Journal of Thoracic Oncology	https://doi.org/10.1016/j.jtho.2020.06.011

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Melanoma	Prognosis of Patients With Stage III Melanoma According to American Joint Committee on Cancer Version 8: A Reassessment on the Basis of 3 Independent Stage III Melanoma Cohorts	Garbe C, Keim U, Suciú S, Amaral T, Eigentler T, Gesierich A, Hauschild A, Heinzerling L, Kiecker F, Schadendorf D, Stadler R, Sunderkotter C, Tuting T, Uitikal J, Wollina U, Zouboulis C, Keilholz U, Testori A, Martus P, Leiter U, Eggermont A.	Journal of Clinical Oncology	https://doi.org/10.1200/JCO.19.03034	Melanoma	Association Between Immune-Related Adverse Events and Recurrence-Free Survival Among Patients With Stage III Melanoma Randomized to Receive Pembrolizumab or Placebo A Secondary Analysis of a Randomized Clinical Trial	Eggermont A, Kicinski M, Blank C, Mandala M, Long G, Atkinson V, Dalle S, Haydon A, Khattak A, Carlino M, Sandhu S, Larkin J, Puig S, Ascierto P, Rutkowski P, Schadendorf D, Koornstra R, Hernandez Aya L, Di Giacomo AM, Van den Eertwegh A, Grob JJ, Gutzmer R, Jamal R, Lorigan P, Krepler C, Ibrahim N, Marreaud S, van Akkooi A, Robert C, Suciú S.	JAMA (Journal of the American Medical Association)	https://doi.org/10.1001/jamaoncol.2019.5570
Melanoma	European consensus-based interdisciplinary guideline for melanoma. Part 2: Treatment Update 2019	Garbe C, Amaral T, Peris K, Hauschild A, Arenberger P, Bastholt L, Bataille V, Del Marmol, Dreno B, Fargnoli MC, Grob JJ, Holler C, Kaufmann R, Lallas A, Lebbe C, Malvey J, Middleton M, Moreno-Ramirez D, Pellacani G, Saiag P, Stratigos A, Vieira R, Zalaudek I, Eggermont A.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2019.11.015	Melanoma	Evaluating the potential of relapse-free survival as a surrogate for overall survival in the adjuvant therapy of melanoma with checkpoint inhibitors	Coart E, Suciú S, Squifflet P, Saad E, Moshyk A, de Schaetzen G, Buyse M, Weber J, Eggermont A, Kotapati S.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.07.011
Melanoma	European consensus-based interdisciplinary guideline for melanoma. Part 1: Diagnostics – Update 2019	Garbe C, Amaral T, Peris K, Hauschild A, Arenberger P, Bastholt L, Bataille V, Del Marmol V, Dreno B, Fargnoli MC, Grob JJ, Höller C, Kaufmann R, Lallas A, Lebbe C, Malvey J, Middleton M, Moreno-Ramirez D, Pellacani G, Saiag P, Stratigos AJ, Vieira R, Zalaudek I, Eggermont A.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2019.11.014	Melanoma	"SOX10 is as specific as S100 protein in detecting metastases of melanoma in lymph nodes and is recommended for sentinel lymph node assessment"	Szumera-Ciećkiewicz A, Bosisio F, Teterycz P, Antoranz A, Delogu F, Koljenović S, van de Wiel BA, Blokx W, van Kempen LC, Rutkowski P, Christopher van Akkooi A, Cook M, Massi D, EORTC Melanoma Group	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.06.037
Melanoma	Adjuvant therapy with Pegylated Interferon-alfa2b vs Observation in stage II B/C patients with ulcerated primary: results of the European Organisation for Research and Treatment of Cancer 18081 randomised trial	Eggermont A, Rutkowski P, Dutriaux C, Hoffman-Wellenhof R, Dziejwski P, Marples M, Grange F, Lok C, Pennachioli E, Robert C, van Akkoi A, Bastholt L, Minisini A, Marshall E, Sales F, Grob JJ, Bechter O, Schadendorf D, Marreaud S, Kicinski M, Suciú S, Testori A.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.04.015	Melanoma	The EORTC-DeCOG nomogram adequately predicts outcomes of patients with sentinel node-positive melanoma without the need for completion lymph node dissection	Verver D, Rekkas A, Garbe C, van Klaveren D, van Akkooi ACJ, Rutkowski P, Powell BWEM, Robert C, Testori A, van Leeuwen BL, van der Veldt AAM, Keilholz U, Stadler R, Eggermont AMM, Verhoef C, Leiter U, Grünhagen DJ.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.04.022
Melanoma	Longer Follow-Up Confirms Recurrence-Free Survival Benefit of Adjuvant Pembrolizumab in High-Risk Stage III Melanoma: Updated Results From the EORTC 1325-MG/KEYNOTE-054 Trial	Eggermont A, Rutkowski P, Dutriaux C, Hoffman-Wellenhof R, Dziejwski P, Marples M, Grange F, Lok C, Pennachioli E, Robert C, van Akkoi A, Bastholt L, Minisini A, Marshall E, Sales F, Grob JJ, Bechter O, Schadendorf D, Marreaud S, Kicinski M, Suciú S, Testori A.	Journal of Clinical Oncology	https://doi.org/10.1200/JCO.20.02110	Quality of Life	International standards for the analysis of quality-of-life and patient-reported outcome endpoints in cancer randomised controlled trials: recommendations of the SISAQOL Consortium	Coens C, Pe M, Dueck AC., Sloan J, Basch E, Calvert M, Campbell A, Cleeland C., Cocks K, Collette L, Devlin N., Dorme L, Flechtner H, Gotay C, Griebisch I, Groenvold M., Johnson L, King M, Kluetz P, Koller M., Malone D, Martinelli F, Mitchell S., Musoro J., O'Connor D, Oliver K, Piau-Louis E, Piccart M, Quinten C, Reijneveld J, Schürmann C., Wilder Smith A, Soltys K, Sridhara R, Taphoorn M, Velikova G., Bottomley A.	Lancet Oncology, The	https://doi.org/10.1016/S1470-2045(19)30790-9
Melanoma	Longer Follow-Up Confirms Recurrence-Free Survival Benefit of Adjuvant Pembrolizumab in High-Risk Stage III Melanoma: Updated Results From the EORTC 1325-MG/KEYNOTE-054 Trial	Eggermont A, Rutkowski P, Dutriaux C, Hoffman-Wellenhof R, Dziejwski P, Marples M, Grange F, Lok C, Pennachioli E, Robert C, van Akkoi A, Bastholt L, Minisini A, Marshall E, Sales F, Grob JJ, Bechter O, Schadendorf D, Marreaud S, Kicinski M, Suciú S, Testori A.	Journal of Clinical Oncology	https://doi.org/10.1200/JCO.20.02110	Quality of Life	Results from a one-day workshop on the assessment of Quality of Life in cancer patients: A joint initiative of the Japan Clinical Oncology Group and the European Organisation for Research and Treatment of Cancer	Terada M, Nakamura K., Martinelli F, Pe M, Mizusawa J, Eba J, Fukuda H, Kiyota N, Gatellier L, Majima Y, Velikova G, Bottomley A.	Japanese Journal of Clinical Oncology	https://doi.org/10.1093/jjco/hyaa119

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Quality of Life	Psychometric properties of the updated EORTC module for assessing quality of life in patients with lung cancer (QLQ-LC29): an international, observational field study	Koller M, Shamieh O, Hjermsstad M, Hornslien K, Young T, Chalk T, Ioannidis G, Harle A, Johnson C, Tomaszewski K, Serpentini S, Pinto M, van der Weijst L, Janssens A, Morag O, Chie WC, Arraras J, Pompili C, Jungraithmayr W, Hechtner M, Katsuchi D, Müller K, Gräfenstein L, Schulz C, Bottomley A.	Lancet Oncology, The	https://doi.org/10.1016/S1470-2045(20)30093-0	Quality of Life	Differences in Patient-Reported Outcomes That Are Most Frequently Detected in Randomized Controlled Trials in Patients With Solid Tumors: A Pooled Analysis of 229 Trials	Giesinger J, Blazeby J, Aaronson N, Sprangers M, Fayers P, Sparano F, Rees J, Anota A, Wan C, Pezold M, Isharwal S, Cottone F, Efficace F.	Value in Health	https://doi.org/10.1016/j.jval.2020.02.007
Quality of Life	Minimally important differences for interpreting European Organisation for Research and Treatment for Cancer (EORTC) Quality of life Questionnaire Core 30 scores in patients with head and neck cancer	Musoro J, Coens C, Singer S, Tribius S, Oosting S, Groenvold M, Simon C, Machiels JP, Gregoire V, Velikova G, Cocks K, Sprangers M, Kim M, Bottomley A.	Journal of the Sciences and Specialities of the Head & Neck	https://doi.org/10.1002/hed.26363	Quality of Life	Developing Symptom Lists for People with Cancer Treated with Targeted Therapies	Sodergren S, Wheelwright S, Fitzsimmons D, Efficace F, Sprangers M, Fayers P, Harle A, Schmidt H, Bottomley A, Darlington AS, Benson C, Bredart A, Hentschel L, Arraras JI, Ioannidis G, Leahy M, Lugowska I, Nicolatou-Galitis O, Petranovic D, Rohde G, Golfinopoulos V, Johnson C.	Targeted Oncology	https://doi.org/10.1007/s11523-020-00769-z
Quality of Life	Minimally important differences for interpreting the EORTC QLQ-C30 in patients with advanced colorectal cancer treated with chemotherapy	Musoro J, Sodergren S, Coens C, Pochesci A, Terada M, King M, Sprangers M, Groenvold M, Cocks K, Velikova G, Flechtner HH, Bottomley A.	Colorectal Disease	https://doi.org/10.1111/codi.15295	Quality of Life	Evaluating the use of the EORTC patient-reported outcome measures for improving inter-rater reliability of CTCAE ratings in a mixed population of cancer patients: study protocol for a randomized controlled trial	Wlntner L, Giesinger J, Sztankay M, Bottomley A, Holzner B.	Trials	https://doi.org/10.1186/s13063-020-04745-w
Quality of Life	Normative data for the EORTC QLQ-C30 from the Austrian general population	Lehmann J, Giesinger J, Nolte S, Sztankay M, Wintner L, Liegl G, Rose M, Holzner B.	Health and quality of life outcomes	https://doi.org/10.1186/s12955-020-01524-8	Quality of Life	An international update of the EORTC questionnaire for assessing quality of life in breast cancer patients: EORTC QLQ-BR45	Bjelic-Radiscic V, Cardoso F, Cameron D, Brain E, Kuljanic V, da Costa RA, Conroy T, Inwald E, Serpentini S, Pinto M, Weis J, Morag, Lindviksmoen Astrup G, Tomaszewski K, Pogoda K, Sinai P, Aaronson N, Velikova G, Greimel E, Arraras J, Bottomley A.	Annals of Oncology	https://doi.org/10.1016/j.annonc.2019.10.027
Quality of Life	Updated EORTC QLQ-C30 general population norm data for Germany	Nolte S, Waldmann A, Liegl G, Petersen M, Groenvold M, Rose M.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.06.002	Quality of Life	Demystifying the estimand framework: a case study using patient-reported outcomes in oncology	Fiero M, Pe M, Weinstock C, King-Kallimanis B, Komo S, Keplin H, Gray S, Bottomley A, Kluetz P, Sridhara R.	Lancet Oncology, The	https://doi.org/10.1016/S1470-2045(20)30319-3
Quality of Life	EORTC QLU-C10D value sets for Austria, Italy, and Poland	Gamper EM, King T, Norman R, Efficace F, Cottone F, Holzner B, Kemmler G.	Quality of Life Research	https://doi.org/10.1007/s11136-020-02536-z	Quality of Life	Minimally important differences for interpreting European Organisation for Research and Treatment of Cancer (EORTC) Quality of life Questionnaire core 30 scores in patients with ovarian cancer	Musoro J, Coens C, Greimel E, King M, Sprangers M, Nordin A, Van Dorst E, Groenvold M, Cocks K, Velikova G, Flechtner H, Bottomley A.	Gynecologic Oncology	https://doi.org/10.1016/j.ygyno.2020.09.007
Quality of Life	Gender effects on quality of life and symptom burden in patients with lung cancer: results from a prospective, cross-cultural, multi-center study	Koch M, Jensen Hjermsstad M, Tomaszewski P, Hornslien K, Harle A, Arraras J, Morag O, Pompili C, Ioannidis G, Navarra C, Chie W, Johnson C, Bohrer T, Janssens A, Kulis D, Bottomley A, Schulz C, Zeman F, Koller M.	Journal of Thoracic Disease	http://dx.doi.org/10.21037/jtd-20-1054	Quality of Life, Brain Tumours	Measuring change in health-related quality of life: the impact of different analytical methods on the interpretation of treatment effects in glioma patients	Coomans M, Taphoorn M, Aaronson N, Baumert B, van den Bent M, Bottomley A, Brandes A, Chinot O, Coens C, Gorlia T, Herrlinger U, Keime-Guibert F, Malmstrom A, Martinelli F, Stupp R, Talacchi A, Weller M, Wick W, Reijneveld J, Dirven L.	Neuro-oncology	https://doi.org/10.1093/nop/npaa033
Quality of Life	International validation of the EORTC CAT Core: a new adaptive instrument for measuring core quality of life domains in cancer	Petersen M, Aaronson N, Conroy T, Costantini A, Giesinger J, Hammerlid E, Holzner B, Johnson C, Kieffer J, van Leeuwen M, Nolte S, Ramage J, Tomaszewski K, Waldmann A, Young T, Zotti P, Groenvold M.	Springer	https://doi.org/10.1007/s11136-020-02421-9					

Group / Task Force	Title	Authors	Journal	DOI	Group / Task Force	Title	Authors	Journal	DOI
Quality of Life, Brain Tumours	Objective neurocognitive functioning and neurocognitive complaints in patients with high-grade glioma: Evidence of cognitive awareness from the European Organisation for Research and Treatment of Cancer brain tumour clinical trials	Caramanna I, Bottomley A, Drijver J, Twisk J, van den Bent M, Idbaih A, Wick W, Pe M, Klein M, Reijneveld J.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.10.040	Soft Tissue & Bone Sarcoma	Activity and safety of the multi-target tyrosine kinase inhibitor cabozantinib in patients with metastatic gastrointestinal stromal tumor after treatment with imatinib and sunitinib: European Organization for Research and Treatment of Cancer Phase 2 trial 1317 "CaboGIST"	Schoeffski P, Le Cesne, Kasper B, Papai Z, Blay JY, Italiano A, Benson C, Kopeckova K, Ali N, Dileo P, Menge F, Cousin S, Wardelmann E, Wozniak A, Marreaud S, Litiere S, Zaffaroni F, Nzokirantevye A, Vanden Bempt I, Gelderblom H.	European Journal of Cancer	https://doi.org/10.1016/j.ejca.2020.04.021
Quality of Life, Brain Tumours	Calculating the net clinical benefit in neuro-oncology clinical trials using two methods: quality-adjusted survival effect sizes and joint modeling	Coomans M, Dirven L, Aaronson N, Baumert B, van den Bent M, Bottomley A, Brandes A, Chinot O, Coens C, Gorlia T, Herrlinger U, Keime-Guibert F, Malmström A, Martinelli F, Sloan J, Stupp R, Talacchi A, Weller M, Wick W, Reineveld J, Taphoorn M.	Neuro-Oncology Advances	https://doi.org/10.1093/naojnl/vdaa147	Soft Tissue & Bone Sarcoma	Preoperative radiotherapy plus surgery versus surgery alone for patients with primary retroperitoneal sarcoma (EORTC-62092: STRASS): a multicentre, open-label, randomised, phase 3 trial	Bonvalot S, Gronchi A, Le Pechoux C, Swallow C, Strauss D, Meeus P, van Coevorden F, Stoldt S, Stoeckle E, Rutkowski P, Rastrelli M, Raut C, Hompes D, De Paoli A, Sangalli C, Honore C, Chung P, Miah A, Blay JY, Fiore M, Stelmes JJ, Dei Tos A, Baldini E, Litiere S, Marreaud S, Gelderblom H, Haas R.	Lancet Oncology, The	https://doi.org/10.1016/S1470-2045(20)30446-0
Radiation Oncology, Breast Cancer	Internal mammary and medial supraclavicular lymph node chain irradiation in stage I–III breast cancer (EORTC 22922/10925): 15-year results of a randomised, phase 3 trial	Poortmans P, Weltens C, Fortpied C, Kirkove C, Peignaux-Casasnovas K, Budach V, van der Leij F, Vonk E, Weidner N, Rivera S, Van Tienhoven G, Fourquet A, Noel G, Valli MC, Guckenberger M, Koiter E, Racadot S, Abdah-Bortnyak R, Van Limbergen E, Engelen A, De Brouwer P, Struikmans H, Bartelink H.	Lancet Oncology, The	https://doi.org/10.1016/S1470-2045(20)30472-1	Soft Tissue & Bone Sarcoma	Evaluation of the use and efficacy of (neo)adjuvant chemotherapy in angiosarcoma: a multicenter study	Constantinidou A, Sauve N, Stacchiotti S, Blay JY, Vincenzi B, Grignani G, Rutkowski P, Guida M, Hindi N, Klein A, Valentin T, Sufliarsky J, Desar I, Steeghs N, Litiere S, Gelderblom H, Jones R.	ESMO Open	https://doi.org/10.1136/esmoopen-2020-000787
Soft Tissue & Bone Sarcoma	Doxorubicin plus dacarbazine, doxorubicin plus ifosfamide, or doxorubicin alone as a first line treatment for advanced leiomyosarcoma: A propensity score matching analysis from the European Organization for Research and Treatment of Cancer Soft Tissue and Bone Sarcoma Group	D'Ambrosio L., Touati N., Blay J.Y., Grignani G., Filippot R., Czarnecka A., Pipperno-Neuman S., Martin-Broto J., Sanfilippo R., Katz D., Duffaud F., Vincenzi B., Stark D., Mazzeo F., Tuchscherer A., Chevreau C., Sherriff J., Estival A., Litiere S., Sents W., Ray Coquard I, Tolomeo F, Le Cesne A, Rutkowski P, Stacchiotti S., Kasper B, Gelderblom H., Gronchi A.	Cancer	https://doi.org/10.1002/cncr.32795	Soft Tissue & Bone Sarcoma	Survival of soft tissue sarcoma patients after completing six cycles of first-line anthracycline containing treatment: an EORTC-STBSG database study	Verschoor J, Litiere S, Marreaud S, Judson I, Toulmonde M, Wardelmann E, Le Cesne A, Gelderblom H.	Clinical Sarcoma Research	https://doi.org/10.1186/s13569-020-00137-5
Soft Tissue & Bone Sarcoma	Quality of Surgery and Outcome in Localized Gastrointestinal Stromal Tumors Treated Within an International Intergroup Randomized Clinical Trial of Adjuvant Imatinib	Gronchi A, Bonvalot S, Poveda Velasco A, Kotasek D, Rutkowski P, Hohenberger P, Fumagalli E, Judson I, Italiano A, Gelderblom H, Van Coevorden F, Penel, Kopp H, Duffaud F, Goldstein D, Martin-Broto J., Wardelmann E, Marreaud S, Smithers M, Le Cesne A, Zaffaroni F, Litiere S, Blay J.Y., Casali P.	JAMA (Journal of the American Medical Association)	https://doi.org/10.1001/jamasurg.2020.0397	Soft Tissue & Bone Sarcoma	A randomized double-blind phase II study evaluating the role of maintenance therapy with cabozantinib in high-grade uterine sarcoma after stabilization or response to doxorubicin ± ifosfamide following surgery or in metastatic first line treatment (EORTC62113)	Ray-Coquard I, Hatcher H, Bompas E, Casado A, Westermann A, Isambert N, Casali P, Pratap S, Stark D, Valverde C, Anand A, Huizing M, Floquet A, Lindner L, Hermes B, Seddon B, Coens C, Jones R, Reed N.	International Journal of Gynecological Cancer	http://dx.doi.org/10.1136/ijgc-2020-001519
Soft Tissue & Bone Sarcoma	iCREATE: Imaging features of primary and metastatic alveolar soft part sarcoma in the EORTC CREATE study	Mcaddy N, Saffar H, Litiere S, Jaspers P, Schoeffski P, Messiou C.	Canadian Journal of Gastroenterology	https://doi.org/10.1186/s40644-020-00352-9	Soft Tissue & Bone Sarcoma	Impact of acute kidney injury on anticancer treatment dosage and long-term outcomes: a pooled analysis of European Organisation for Research and Treatment of Cancer trials	Peron J, Neven A, Collette L, Launay-Vacher V, Sprangers B, Marreaud S.	Nephrology Dialysis Transplantation	https://doi.org/10.1093/ndt/gfaa049

CLINICAL TRIALS 2020

Number	Alias	Title	Status	Primary Group	Secondary Groups
1553	SPECTA	SPECTA: Screening Cancer Patients for Efficient Clinical Trial Access	Recruiting		
55984		A randomized trial of Adryamicin (A) Cisplatin (P) chemotherapy versus Paclitaxel (T) Adriamycin (A) and Cisplatin (P) in patients with metastatic/relapsed or locally advanced inoperable endometrial cancer.	LT-FU ongoing		
1308	ROAM	Radiation versus Observation following surgical resection of Atypical Meningioma: a randomised controlled trial (The ROAM trial) / EORTC 1308	Recruiting	EORTC Brain Tumor Group	EORTC Brain Tumor Group, EORTC Radiation Oncology Group, Trans-Tasman Radiation Oncology Group Inc, Cancer Trials Ireland / ICORG, The Walton Centre NHS Foundation Trust
1320		Trabectedin for recurrent grade II or III meningioma: a randomized phase II study of the EORTC Brain Tumor Group	Closed to Patient Entry	EORTC Brain Tumor Group	EORTC Brain Tumor Group
1410	INTELLANCE 2	INTELLANCE 2: ABT 414 alone or ABT 414 plus temozolomide versus lomustine or temozolomide for recurrent glioblastoma: a randomized phase II study of the EORTC Brain Tumor Group	Closed to Patient Entry	EORTC Brain Tumor Group	EORTC Brain Tumor Group
1410p	Pediatric Sub 1410-BTG	Evaluation of ABT-414 in Children with High Grade Gliomas (Main study: ABT-414 alone or ABT-414 plus temozolomide versus lomustine for recurrent glioblastoma: a randomized phase II study of the EORTC Brain Tumor Group)	Closed to Patient Entry	EORTC Brain Tumor Group	EORTC Brain Tumor Group
1419	ETERNITY	Molecular genetic, host-derived and clinical determinants of long-term survival in glioblastoma	Recruiting	EORTC Brain Tumor Group	EORTC Brain Tumor Group, Brain Tumor Funders' Collaborative
1608	STEAM	Study of TG02 in Elderly Newly Diagnosed or Adult Relapsed Patients with Anaplastic Astrocytoma or Glioblastoma: A Phase Ib Study	Recruiting	EORTC Brain Tumor Group	EORTC Brain Tumor Group
1634	PersoMed-I	Personalized Risk-Adapted Therapy in Post-Pubertal Patients with Newly-Diagnosed Medulloblastoma (PersoMed-I)	Regulatory in Process	EORTC Brain Tumor Group	EORTC Brain Tumor Group, Cooperative Trials Group for Neuro-Oncology, German Neuro-Oncology Working Group

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
1635	I-WOT	IDH mutated 1p/19q intact lower grade glioma following resection: Wait Or Treat? IWOT - A phase III study	Recruiting	EORTC Brain Tumor Group	EORTC Brain Tumor Group						
1709	MIRAGE	A phase III trial of marizomib in combination with standard temozolomide-based radiochemotherapy versus standard temozolomide-based radiochemotherapy alone in patients with newly diagnosed glioblastoma - MIRAGE	Closed to Patient Entry	EORTC Brain Tumor Group	EORTC Brain Tumor Group,Canadian Cancer Trials Group	10041	MINDACT	MINDACT (Microarray In Node-negative and 1 to 3 positive lymph node Disease may Avoid Chemo Therapy): A prospective, randomized study comparing the 70-gene signature with the common clinicopathological criteria in selecting patients for adjuvant chemotherapy in breast cancer with 0 to 3 positive nodes"	LT-FU ongoing	EORTC Breast Cancer Group	EORTC Breast Cancer Group,Breast International Group,Gruppo Oncologico Italiano Ricercia Clinica,Borstkanker Onderzoeksgroup Nederland,National Cancer Research Institute - Breast Cancer Group,West German Study Group,Grupo espanol de estudio, tratamiento y otras estrategias experimentales en tumores solidos,SI_IOL
26053	CATNON	Phase III trial on concurrent and adjuvant temozolomide chemotherapy in non-1p/19q deleted anaplastic glioma. The CATNON intergroup trial.	Closed to Patient Entry	EORTC Brain Tumor Group	EORTC Brain Tumor Group,EORTC Radiation Oncology Group,NCIC Clinical Trial Group,Radiation Therapy Oncology Group,Cancer Trials Support Unit,Cooperative Trials Group for Neuro-Oncology,University College of London	10071	ALTTO	A randomised, multi-centre, open-label, phase III study of adjuvant lapatinib, trastuzumab, their sequence and their combination in patients with HER2/ErbB2 positive primary breast cancer	LT-FU ongoing	EORTC Breast Cancer Group	EORTC Breast Cancer Group10,Breast European Adjuvant Studies Team
26071	CENTRIC	Cilengitide in subjects with newly diagnosed glioblastoma and methylated MGMT promoter gene- a multicenter, open-label, controlled Phase III study, testing cilengitide in combination with standard treatment (temozolomide with concomitant radiation therapy, followed by temozolomide maintenance therapy) versus standard treatment alone (CENTRIC)	LT-FU ongoing	EORTC Brain Tumor Group	EORTC Brain Tumor Group,EORTC Radiation Oncology Group	10085	Male BC	Clinical and biological characterization of Male Breast Cancer : an international retrospective EORTC, BIG and NABCG intergroup study (for the prospective part, please refer to 10085p)	LT-FU ongoing	EORTC Breast Cancer Group	Swedish Association of Breast Oncologists, EORTC Breast Cancer Group, Breast International Group, Schweizerisches Arbeitsgemeinschaft Klin. Krebsforschung, Borstkanker Onderzoeksgroup Nederland, Cancer Trials Ireland / ICORG
26081	CODEL	Phase III Intergroup Study of Radiotherapy with Concomitant and Adjuvant Temozolomide versus Radiotherapy with Adjuvant PCV Chemotherapy in Patients with 1p/19q Co-deleted Anaplastic Glioma or Low Grade Glioma	Closed to Patient Entry	EORTC Brain Tumor Group	EORTC Brain Tumor Group,Cooperative Trials Group for Neuro-Oncology,Alliance	10085p	Prospective male BC	Clinical and biological characterization of Male Breast Cancer: an international EORTC, BIG, TBCRC and NABCG intergroup study.	Closed to Patient Entry	EORTC Breast Cancer Group	Swedish Association of Breast Oncologists, EORTC Breast Cancer Group, Breast International Group, Schweizerisches Arbeitsgemeinschaft Klin. Krebsforschung, Borstkanker Onderzoeksgroup Nederland, Cancer Trials Ireland / ICORG, Grupo Latino Americano de Investigações Clínicas em Oncologia / Latin American Cooperative Oncology Group, Translational Breast Cancer Research Consortium, Hellenic Oncology Research Group,Hellenic Cooperative Oncology Group
10031	SOFT	A Phase III Trial Evaluating the Role of Ovarian Function Suppression and the Role of Exemestane as Adjuvant Therapies for Premenopausal Women with Endocrine Responsive Breast Cancer tamoxifen versus ovarian function suppression + tamoxifen versus ovarian function suppression + exemestane.	LT-FU ongoing	EORTC Breast Cancer Group	EORTC Breast Cancer Group,International Breast Cancer Study Group,Oncology Site Management Organization						

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
10112	Aphinity	A randomized multicenter, double-blind, placebo-controlled comparison of chemotherapy plus trastuzumab plus placebo versus chemotherapy plus trastuzumab plus pertuzumab as adjuvant therapy in patients with operable HER2-positive primary breast cancer.	LT-FU ongoing	EORTC Breast Cancer Group	EORTC Breast Cancer Group, Breast International Group	1324	Olympia	A randomised, double-blind, parallel group, placebo-controlled multi-centre Phase III study to assess the efficacy and safety of olaparib versus placebo as adjuvant treatment in patients with germline BRCA1/2 mutations and high risk HER2 negative primary breast cancer who have completed definitive local treatment and neoadjuvant or adjuvant chemotherapy	Closed to Patient Entry	EORTC Breast Cancer Group	EORTC Breast Cancer Group, Breast International Group, National Surgical Adjuvant Breast and Bowel Project
10853		Phase III trial of radiation therapy vs no treatment for patients with in situ ductal carcinoma of the breast (Jointly with the EORTC Radiotherapy Cooperative Group)	LT-FU ongoing	EORTC Breast Cancer Group	EORTC Breast Cancer Group	1401	LORD	Management of low grade ductal carcinoma in situ (low-grade DCIS): a randomized, multicenter, non-inferiority trial, between standard therapy approach versus active surveillance	Recruiting	EORTC Breast Cancer Group	EORTC Breast Cancer Group, Borstkanker Onderzoeksgroup Nederland, The Netherland Cancer Institute
10981	AMAROS	After Mapping of the Axilla: Radiotherapy Or Surgery AMAROS	LT-FU ongoing	EORTC Breast Cancer Group	EORTC Breast Cancer Group, EORTC Radiation Oncology Group, Borstkanker Onderzoeksgroup Nederland, ALMANAC Trialists Group	1408	AURORA	Aiming to Understand the MOlecular Aberrations in Metastatic Breast Cancer	Recruiting	EORTC Breast Cancer Group	EORTC Breast Cancer Group, Breast International Group, International Breast Cancer Study Group
1307	BRAVO	A phase III, randomized, open label, multicenter, controlled trial of niraparib versus physician's choice in previously-treated, HER2 negative, germline BRCA mutation-positive breast cancer patients.	Closed to Patient Entry	EORTC Breast Cancer Group	Swedish Association of Breast Oncologists, EORTC Breast Cancer Group, Breast International Group, Grupo Espanol de Investigacion del Cancer de Mama, International Breast Cancer Study Group, Gruppo Oncologico Italiano Ricerca Clinica, Borstkanker Onderzoeksgroup Nederland, Grupo espanol de estudio, tratamiento y otras estrategias experimentales en tumores solidos, Hellenic Oncology Research Group, Hellenic Cooperative Oncology Group, Icelandic Breast Cancer Group, Institute of Cancer Research - Clinical Trials & Statistics Unit, Sheba Breast Collaborative Group	1502	PYTHIA	A phase II study of Palbociclib plus Fulvestrant for pretreated patients with ER+/HER2- metastatic Breast Cancer; Palbociclib in molecularly characterized ER-Positive/HER2 negative metastatic Breast Study: the PYTHIA study	Closed to Patient Entry	EORTC Breast Cancer Group	EORTC Breast Cancer Group, International Breast Cancer Study Group
						1513	PALLAS	PALbociclib CoLLaborative Adjuvant Study: A randomized phase III trial of palbociclib with adjuvant endocrine therapy versus endocrine therapy alone for hormone receptor positive (HR+)/ human epidermal growth factor receptor 2 (HER2)-negative early breast Cancer	Closed to Patient Entry	EORTC Breast Cancer Group	EORTC Breast Cancer Group, Breast International Group, Austrian Breast and Colorectal Cancer Study Group
						22051	SUPREMO	Selective Use of Postoperative Radiotherapy AftEr MastectOmy (SUPREMO)	Closed to Patient Entry	EORTC Breast Cancer Group	EORTC Breast Cancer Group, EORTC Radiation Oncology Group22, Scottish Cancer Trials Breast Group
						1221	nursing home project	Cancer in elderly nursing home residents in Belgium: prospective cohort study including translational research to develop better prognostic tools to help with treatment decisions in the elderly	Closed to Patient Entry	EORTC Cancer in Elderly Task Force	EORTC Cancer in Elderly Task Force

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
1745	APPALACHES	A Phase II study of Adjuvant PALbociclib as an Alternative to Chemotherapy in Elderly patients with high-risk ER+/HER2- early breast cancer (APPALACHES)	Recruiting	EORTC Cancer in Elderly Task Force	Swedish Association of Breast Oncologists,EORTC Breast Cancer Group,EORTC Cancer in Elderly Task Force,Breast International Group,International Breast Cancer Study Group,Gruppo Oncologico Italiano Ricercia Clinica,German Adjuvant Breast Cancer Group,Grupo espanol de estudio, tratamiento y otras estrategias experimentales en tumores solidos,Unicancer Oncogeriatrics Group	58951		The value of 1) Dexamethasone vs prednisolone during induction 2) of prolonged versus conventional duration of L-Asparaginase therapy during consolidation and late intensification, in acute lymphoblastics leukemia and lymphoblastic non-Hodgkin lymphoma of childhood. A Randomised phase III study.	LT-FU ongoing	EORTC Children's Leukemia Group	EORTC Children's Leukemia Group
						58LAE		Assessment of the long term outcome of childhood ALL patients enrolled in EORTC CLG trials between 1971 and 1998	Closed to Patient Entry	EORTC Children's Leukemia Group	EORTC Children's Leukemia Group
						1754	REACH	Study to determine the aetiology of chlormethine gel induced-skin drug reaction in early stage mycosis fungoides cutaneous T cell lymphoma (MF-CTCL)	Regulatory in Process	EORTC Cutaneous Lymphoma Task Force	EORTC Cutaneous Lymphoma Task Force
75111		Pertuzumab + trastuzumab (PH) versus PH plus metronomic chemotherapy (PHM) in the elderly HER2+ metastatic breast cancer population who may continue on T-DM1 alone following disease progression while on PH/PHM: an open-label multicentre randomized phase II selection trial of the EORTC Elderly Task Force and Breast Cancer Group	LT-FU ongoing	EORTC Cancer in Elderly Task Force	Swedish Association of Breast Oncologists,EORTC Breast Cancer Group,EORTC Cancer in Elderly Task Force	1820	MOGAT	Open-Label, phase II, Multi-Center, study of Anti-CCR4 Monoclonal Antibody (mogamulizumab) Plus Total Skin Electron Beam therapy (TSEB) in patients with stage IB-IIB Cutaneous T-Cell Lymphoma (MOGAT)	Regulatory in Process	EORTC Cutaneous Lymphoma Task Force	EORTC Cutaneous Lymphoma Task Force
						1652	PARCT	Phase II trial of atezolizumab (anti-PD-L1) in the treatment of stage IIb-IV mycosis fungoides/sezary syndrome patients relapsed/refractory after a previous systemic treatment	Closed to Patient Entry	EORTC Cutaneous Lymphoma Task Force	EORTC Cutaneous Lymphoma Task Force
58051	Interfant	International collaborative treatment protocol for infants under one year with acute lymphoblastic or biphenotypic leukemia	Closed to Patient Entry	EORTC Children's Leukemia Group	EORTC Children's Leukemia Group,French Acute Lymphoblastic Leukemia,Operating Center for Research and Statistics	1209		A phase II study exploring the safety and efficacy of nintedanib (BIBF1120) as second line therapy for patients with either differentiated or medullary thyroid cancer progressing after first line therapy.	Closed to Patient Entry	EORTC Endocrine Tumors Group	EORTC Endocrine Tumors Group
58081		Translational research - observational study for identification of new possible prognostic factors and future therapeutic targets in children with acute lymphoblastic leukaemia (ALL).	Closed to Patient Entry	EORTC Children's Leukemia Group	EORTC Children's Leukemia Group	1534		Protocol SAKK 41/13 Adjuvant aspirin treatment in PIK3CA mutated colon cancer patients. A randomized, double-blinded, placebo-controlled, phase III trial	Closed to Patient Entry	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group
58111	IntReALL SR 2010	International Study for Treatment of Standard Risk Childhood Relapsed ALL 2010. A randomized Phase III Study Conducted by the Resistant Disease Committee of the International BFM Study Group	Closed to Patient Entry	EORTC Children's Leukemia Group	EORTC Children's Leukemia Group,Charite Universitaetsmedizin Berlin	1203	INNOVATION	INtegration of trastuzumab, with or without pertuzumab, into periOperatiVe chemotherApy of HER-2 posiTive stOmach caNcer: the INNOVATION-TRIAL	Recruiting	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group,Korean Cancer Study Group,Dutch Upper GI Group
58921		Randomized phase III study comparing IDA versus MTZ in induction and intensification treatment of AML or MDS in children	LT-FU ongoing	EORTC Children's Leukemia Group	EORTC Children's Leukemia Group	1409	CLIMB	A prospective Colorectal Liver Metastasis DataBase with an Integrated Quality Assurance program	Closed to Patient Entry	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group,European Society of Surgical Oncology

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
1527	DREAM	DREAM: Diffusion-Weighted Magnetic REsonance Imaging Assessment of Liver Metastasis to Improve Surgical Planning	Recruiting	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group,EORTC Imaging Group,European Society of Surgical Oncology,Japan Clinical Oncology Group	40091	BOS 2	Randomized phase II trial evaluating the efficacy of FOLFOX alone, FOLFOX plus bevacizumab and FOLFOX plus panitumumab as perioperative treatment in patients with resectable liver metastases from wild type KRAS and NRAS colorectal cancer	Closed to Patient Entry	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group
1560	ILOC	Phase II of immunotherapy plus local tumour ablation (RFA or stereotactic radiotherapy) in patients with colorectal cancer liver metastases	Recruiting	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group						EORTC Gastrointestinal Tract Cancer Group, Grupo Espanol para el Tratamiento de Tumores Digestivos, Arbeitsgemeinschaft Internistische Onkologie, Arbeitsgemeinschaft Medikamentöse Tumortherapie
1607		Open-label first line, single-arm phase II study of CisGem combined with pembrolizumab in patients with advanced or metastatic biliary tract cancer	Recruiting	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group	40101	POWER	An open-label, randomized phase III trial of cisplatin and 5-fluorouracil with or without panitumumab for patients with nonresectable, advanced or metastatic esophageal squamous cell cancer (ESCC)	Closed to Patient Entry	EORTC Gastrointestinal Tract Cancer Group	
1707	VESTIGE	Adjuvant immunotherapy in patients with resected gastric cancer following preoperative chemotherapy with high risk for recurrence (N+ and/or R1): an open label randomized controlled phase-2-study (VESTIGE)	Recruiting	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group						
1714	CRUCIAL	Phase II trial in inoperable oesophageal cancer evaluating the feasibility of the combination of definitive chemoradiation with the immune checkpoint blockers Nivolumab +/- Ipilimumab (CRUCIAL)	Closed to Patient Entry	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group,EORTC Radiation Oncology Group	40CRC	SPECTAcOLOR	Screening Platform of the EORTC for Clinical Trials in Advanced Colorectal cancer "SPECTAcOLOR"	Closed to Patient Entry	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group
22114	TOP GEAR	Trial of preoperative therapy for gastric and esophagogastric junction adenocarcinoma. A randomized phase II/III trial of preoperative chemoradiotherapy versus preoperative chemotherapy for resectable gastric cancer.	Recruiting	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group,EORTC Radiation Oncology Group,Australasian Gastro-Intestinal Trials Group,Trans-Tasman Radiation Oncology Group Inc	1201	PEACE-1	A prospective randomised phase III study of androgen deprivation therapy (+/- docetaxel) with or without local radiotherapy with or without abiraterone acetate and prednisone in patient with metastatic hormone-naïve prostate cancer.	Closed to Patient Entry	EORTC Genito-Urinary Cancers Group	UNICANCER,EORTC Genito-Urinary Cancers Group,EORTC Radiation Oncology Group,Groupe d'Etude des Tumeurs Uro-Genitales
40054	PETACC-6	Preoperative chemoradiotherapy and postoperative chemotherapy with capecitabine and oxaplatin vs.capecitabine alone in locally advanced rectal cancer (PETACC-6).	LT-FU ongoing	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group,EORTC Radiation Oncology Group,Federation Francophone de Cancerologie Digestive,Australasian Gastro-Intestinal Trials Group,Arbeitsgemeinschaft Internistische Onkologie,Belgian Group of Digestive Oncology	1333	PEACE III	A Randomized multicenter phase III trial comparing enzalutamide vs. a combination of Ra223 and enzalutamide in asymptomatic or mildly symptomatic castration resistant prostate cancer patients metastatic to bone.	Recruiting	EORTC Genito-Urinary Cancers Group	EORTC Genito-Urinary Cancers Group,Groupe d'Etude des Tumeurs Uro-Genitales,Cancer Trials Ireland / ICORG,Canadian Urologic Oncology Group,Grupo Latino Americano de Investigações Clínicas em Oncologia / Latin American Cooperative Oncology Group
40084		A phase II-R and a phase III trial evaluating both *Erlotinib (PH II-R) and chemoradiation (PH III) as adjuvant treatment for patients with resected head of pancreas adenocarcinoma *(PH II-R Erlotinib randomization completed, arm 2 closed to accrual effective 04/02/14)	Closed to Patient Entry	EORTC Gastrointestinal Tract Cancer Group	EORTC Gastrointestinal Tract Cancer Group40,EORTC Radiation Oncology Group22,Radiation Therapy Oncology Group	1407	TIGER	A Randomized phase III trial comparing conventional-dose chemotherapy using paclitaxel, ifosfamide, and cisplatin (TIP) with high dose chemotherapy using mobilizing paclitaxel plus ifosfamide followed by High-dose carboplatin and etoposide (TI-CE) as first salvage treatment in relapsed or refractory germ cell tumors	Recruiting	EORTC Genito-Urinary Cancers Group	UNICANCER,EORTC Genito-Urinary Cancers Group30,Cancer Trials Ireland / ICORG,Alliance,Institute of Cancer Research - Clinical Trials & Statistics Unit,The Australian and New Zealand Urogenital and Prostate

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
1414	Pegasus	Phase IIIb randomized trial comparing irradiation plus long term adjuvant androgen deprivation with GnRH antagonist versus GnRH agonist plus flare protection in patients with very high risk localized or locally advanced prostate cancer. A joint study of the EORTC ROG and GUCG	Recruiting	EORTC Genito-Urinary Cancers Group	EORTC Genito-Urinary Cancers Group,EORTC Radiation Oncology Group	1701	PATHOS	Phase III trial of risk-stratified, reduced intensity adjuvant treatment in patients undergoing transoral surgery for Human papillomavirus (HPV)-positive oropharyngeal cancer"	Regulatory in Process	EORTC Head and Neck Cancer Group	EORTC Head and Neck Cancer Group
1532	ODM-201	A phase 2 Randomized Open-Label Study of Oral ODM-201 vs. androgen deprivation therapy (ADT) with LHRH agonists or antagonist in Men with Hormone Naive Prostate Cancer	Recruiting	EORTC Genito-Urinary Cancers Group	EORTC Genito-Urinary Cancers Group	1206		A randomised phase II study to evaluate the efficacy and safety of Chemotherapy (CT) vs androgen deprivation therapy (ADT) in patients with recurrent and/or metastatic, androgen receptor (AR) expressing, salivary gland cancer (SGCs)	Recruiting	EORTC Head and Neck Cancer Group	UNICANCER,EORTC Head and Neck Cancer Group,Réseau d'Expertise Français sur les Cancers ORL Rares
1545	EnzaRAD	Randomised phase 3 trial of Enzalutamide in Androgen Deprivation therapy with radiation therapy for high risk, clinically localised, prostate cancer.	Closed to Patient Entry	EORTC Genito-Urinary Cancers Group	EORTC Genito-Urinary Cancers Group,Cancer Trials Ireland / ICORG,The Australian and New Zealand Urogenital and Prostate	1420	Best Of	Phase III study assessing the “best of” radiotherapy compared to the “best of” surgery (trans-oral surgery (TOS)) in patients with T1-T2, N0-N1 oropharyngeal, supraglottic carcinoma and with T1, N0 hypopharyngeal carcinoma	Recruiting	EORTC Head and Neck Cancer Group	EORTC Head and Neck Cancer Group,EORTC Radiation Oncology Group,Schweizerisches Arbeitsgemeinschaft Klin. Krebsforschung,Groupe d'Oncologie et Radiotherapie Tete et Cou,National Cancer Research Institute - Head & Neck Cancer Grp,Interdisziplinäre AG Kopf-Hals-Tumoren
30073	SURTIME	Randomized Phase III trial comparing immediate versus deferred nephrectomy in patients with synchronous metastatic renal cell carcinoma.	LT-FU ongoing	EORTC Genito-Urinary Cancers Group	EORTC Genito-Urinary Cancers Group,National Cancer Research Institute - Renal Cancer Group,Canadian Urologic Oncology Group	1559	UPSTREAM	A pilot study of personalized biomarker-based treatment strategy or immunotherapy in patients with recurrent/metastatic squamous cell carcinoma of the head and neck (UPSTREAM)	Recruiting	EORTC Head and Neck Cancer Group	UNICANCER,EORTC Head and Neck Cancer Group24,National Cancer Research Institute - Head & Neck Cancer Grp
1212	NiCCC	A Randomised Phase II Study of Nintedanib (BIBF 1120) compared to Chemotherapy in Patients with Recurrent Clear Cell Carcinoma of the Ovary or Endometrium (NiCCC)	Closed to Patient Entry	EORTC Gynecological Cancer Group	Scottish Gynaecological Cancer Trials Group,EORTC Gynecological Cancer Group	1629		Late Toxicity and Long-term Quality of Life in Head and Neck Cancer Survivors	Recruiting	EORTC Head and Neck Cancer Group	EORTC Head and Neck Cancer Group,EORTC Quality of Life Group
1508		A phase II study of the anti-PD-L1 antibody atezolizumab, bevacizumab and acetylsalicylic acid to investigate safety and efficacy of this combination in recurrent platinum-resistant ovarian, fallopian tube or primary peritoneal adenocarcinoma	Closed to Patient Entry	EORTC Gynecological Cancer Group	EORTC Gynecological Cancer Group	1740	LA-OSCC	Randomized Phase II study of Cisplatin plus Radiotherapy versus Durvalumab plus Radiotherapy followed by Adjuvant Durvalumab versus Durvalumab plus Radiotherapy followed by Adjuvant Tremelimumab and Durvalumab in Intermediate Risk HPV-Positive Locoregionally Advanced Oropharyngeal Squamous Cell Cancer (LA-OSCC)	Recruiting	EORTC Head and Neck Cancer Group	EORTC Head and Neck Cancer Group,Canadian Cancer Trials Group
55092		Phase IB-II, open label, multicentre feasibility study of Pazopanib in combination with Paclitaxel and Carboplatin in patients with platinum-refractory/resistant ovarian, fallopian tube or peritoneal carcinoma.	Closed to Patient Entry	EORTC Gynecological Cancer Group	EORTC Gynecological Cancer Group	24971		A randomized phase III multicenter trial of neoadjuvant docetaxel (Taxotere) plus cisplatin plus 5-fluorouracil versus neoadjuvant cisplatin plus 5-fluorouracil in patients with locally advanced inoperable squamous cell carcinoma of the head and neck	LT-FU ongoing	EORTC Head and Neck Cancer Group	EORTC Head and Neck Cancer Group
55994		Randomized phase III study of neoadjuvant chemotherapy followed by surgery vs. concomitant radiotherapy and chemotherapy in FIGO Ib2, IIa > 4 cm or IIb cervical cancer.	Closed to Patient Entry	EORTC Gynecological Cancer Group	EORTC Gynecological Cancer Group						

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
65091		Empirical versus pre-emptive (diagnostic-driven) antifungal therapy of patients treated for haematological malignancies or receiving an allogeneic stem cell transplant. A therapeutic open label phase III strategy study of the EORTC Infectious Diseases and Leukemia Groups	Closed to Patient Entry	EORTC Infectious Diseases Group	EORTC Leukemia Group,EORTC Infectious Diseases Group	1702	HALT	Targeted therapy with or without dose intensified radiotherapy for oligo-progressive disease in oncogene-addicted lung tumours	Recruiting	EORTC Lung Cancer Group	EORTC Lung Cancer Group,EORTC Radiation Oncology Group,National Cancer Research Institute - Lung Cancer Group
1301	AML21	10-day decitabine versus conventional chemotherapy ("3+7") followed by allografting in AML patients >= 60 years: a randomized phase III study of the EORTC Leukemia Group, CELG, GIMEMA and German MDS Study Group	Closed to Patient Entry	EORTC Leukemia Group	EORTC Leukemia Group,Gruppo Italiano Malattie Ematologiche dell'Adulto	1825	ALKALINE trial	Activity of Lorlatinib based on ALK resistance mutations on blood in ALK positive NSCLC patients previously treated with 2nd generation ALK inhibitor	Recruiting	EORTC Lung Cancer Group	EORTC Lung Cancer Group
08111	ETOP5-12 (SPLENDOUR)	A randomised, open-label phase III trial evaluating the addition of denosumab to standard first-line anticancer treatment in advanced NSCLC	Closed to Patient Entry	EORTC Lung Cancer Group	EORTC Lung Cancer Group,European Thoracic Oncology Platform	22055	LUNG-ART	Phase III study comparing post-operative conformal radiotherapy to no post-operative radiotherapy in patients with completely resected non-small cell lung cancer and mediastinal N2 involvement - LUNG-ART	Closed to Patient Entry	EORTC Lung Cancer Group	Institut Gustave Roussy,EORTC Lung Cancer Group,EORTC Radiation Oncology Group,Intergruope Francophone de Cancérologie Thoracique
08112	NEMO	Nintedanib as maintenance treatment of malignant pleural mesothelioma (NEMO): a double-blind randomized phase II study of the EORTC Lung Cancer Group	Recruiting	EORTC Lung Cancer Group	EORTC Lung Cancer Group	1537	COBRA	Very early FDG-PET-response adapted targeted therapy for advanced Hodgkin lymphoma: a single-arm phase II study	Recruiting	EORTC Lymphoma Group	EORTC Lymphoma Group
08114	GEM	Genetics of EGFR Mutation Study (GEM): a Translational Study of the EORTC Lung group	Closed to Patient Entry	EORTC Lung Cancer Group	EORTC Lung Cancer Group,National Cancer Research Institute - Lung Cancer Group	20012	BEACOPP	BEACOPP (4 cycles escalated + 4 cycles baseline) versus ABVD (8 cycles) in stage III & IV Hodgkin's Lymphoma	LT-FU ongoing	EORTC Lymphoma Group	EORTC Lymphoma Group,Australasian Leukaemia and Lymphoma Group,NCIC Clinical Trial Group,Nordic Lymphoma Group,Grup per l'Estudi del Limfomes de Catalunya i Balears,National Cancer Research Institute - Lymphoma Group-UK
1205		EORTC randomized phase II study of pleurectomy/ decortication (P/D) preceded or followed by chemotherapy in patients with early stage malignant pleural mesothelioma	Recruiting	EORTC Lung Cancer Group	EORTC Lung Cancer Group	20051	H10	The H10 EORTC/GELA/IIL randomized Intergroup trial on early FDG-PET scan guided treatment adaptation versus standard combined modality treatment in patients with supradiaphragmatic stage I/II Hodgkin's lymphoma.	LT-FU ongoing	EORTC Lymphoma Group	EORTC Lymphoma Group,Italian Lymphoma Foundation,Lymphoma Study Association
1335	SPECTAlung	SPECTAlung: Screening Patients with thoracic tumors for Efficient Clinical Trial Access	Closed to Patient Entry	EORTC Lung Cancer Group	EORTC Lung Cancer Group,EORTC Pathobiology Group	20113	BREACH	Brentuximab vedotin associated with chemotherapy in untreated patients with stage I/II unfavourable Hodgkin's lymphoma. A randomized phase II LYSA-FIL-EORTC intergroup study	Closed to Patient Entry	EORTC Lymphoma Group	EORTC Lymphoma Group,Italian Lymphoma Foundation,Lymphoma Study Association
1416	PEARLS	A randomized, phase 3 trial with anti-PD-1 monoclonal antibody pembrolizumab (MK-3475) versus placebo for patients with early stage NSCLC after resection and completion of standard adjuvant therapy	Closed to Patient Entry	EORTC Lung Cancer Group	EORTC Lung Cancer Group,European Thoracic Oncology Platform	1417	REACTION	A phase II study of etoposide and cis/carboplatin with or without pembrolizumab in untreated extensive small cell lung cancer	Closed to Patient Entry	EORTC Lung Cancer Group	EORTC Lung Cancer Group
1613	APPLE	APPLE trial:Feasibility and activity of AZD9291(osimertinib) treatment on Positive PLasma T790M in EGFR mutant NSCLC patients	Closed to Patient Entry	EORTC Lung Cancer Group	EORTC Lung Cancer Group	20881	H7	Phase III study on Hodgkin's disease supradiaphragmatic clinical stages I and II	LT-FU ongoing	EORTC Lymphoma Group	EORTC Lymphoma Group

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
20884	H3-4	Prospective randomized controlled trial of adjuvant involved field radiotherapy after MOPP/ABV hybrid chemotherapy in advanced Hodgkin disease. H34 Trial	LT-FU ongoing	EORTC Lymphoma Group	EORTC Lymphoma Group,Pierre et Marie Curie Group	1612	EBIN	Combination of targeted therapy (Encorafenib and Binimetinib) followed by combination of immunoterapy (Ipilimumab and Nivolumab) vs immediate combination of immunotherapy in patients with unresectable or metastatic melanoma with BRAF V600 mutation: an EORTC phase II randomized study (EBIN)	Recruiting	EORTC Melanoma Group	EORTC Melanoma Group
20931	H8	Protocol H8 for a prospective controlled trial in stage I-II supradiaphragmatic Hodgkin's disease. Evaluation of treatment efficacy and (long term) toxicity in three different prognostic subgroups. H8 Trial	LT-FU ongoing	EORTC Lymphoma Group	EORTC Lymphoma Group	18081		Adjuvant peginterferon alpha-2b for 2 years vs Observation in patients with an ulcerated primary cutaneous melanoma with T(2-4)bN0M0: a randomized phase III trial of the EORTC Melanoma Group	LT-FU ongoing	EORTC Melanoma Group	EORTC Melanoma Group,NCIC Clinical Trial Group
20971		A Phase III randomized study on low-dose total body irradiation and involved field radiotherapy in patients with localized, stages I and II, low grade non-Hodgkin's lymphoma	Closed to Patient Entry	EORTC Lymphoma Group	EORTC Lymphoma Group,EORTC Radiation Oncology Group	18961		Adjuvant ganglioside GM2-KLH/QS-21 Vaccination Post-operative adjuvant ganglioside GM2-KLH/QS-21 vaccination treatment vs observation after resection of primary cutaneous melanoma (AJCC stage II, T3-T4N0M0), a 2-arm multicenter randomized phase III trial	LT-FU ongoing	EORTC Melanoma Group	EORTC Melanoma Group
20982	H9	Prospective controlled trial in clinical stages I-II supradiaphragmatic Hodgkin'Disease. Evaluation of treatment efficacy, (long term) toxicity and Quality of Life in two different prognostic subgroups.	LT-FU ongoing	EORTC Lymphoma Group	EORTC Lymphoma Group	90101	CREATE	Cross-tumoral Phase 2 clinical trial exploring crizotinib (PF-02341066) in patients with advanced tumors induced by causal alterations of ALK and/or MET ("CREATE")	Closed to Patient Entry	EORTC Network of Core Institutions	EORTC Network of Core Institutions
18071		Adjuvant immunotherapy with anti-CTLA-4 monoclonal antibody (ipilimumab) versus placebo after complete resection of high-risk Stage III melanoma : A randomized, double-blind Phase 3 trial of the EORTC Melanoma Group.	LT-FU ongoing	EORTC Melanoma Group	EORTC Melanoma Group	90111		Neoadjuvant afatinib based treatment strategies followed by surgery in squamous cell carcinoma of the head and neck: an EORTC NOCI-HNCG window study	LT-FU ongoing	EORTC Network of Core Institutions	EORTC Network of Core Institutions,EORTC Head and Neck Cancer Group
1208	MiniTub	Minitub: Prospective registry on Sentinel Node (SN) positive melanoma patients with minimal SN tumor burden who undergo Completion Lymph Node Dissections (CLND) or Nodal Observation.	Recruiting	EORTC Melanoma Group	EORTC Melanoma Group	1620		Assessment of the Quality of Life of childhood acute lymphoblastic leukemia patients enrolled in EORTC Children Leukemia Group trials between 1971 and 1998	Closed to Patient Entry	EORTC Quality of Life Group	
1325		Adjuvant immunotherapy with anti-PD-1 monoclonal antibody Pembrolizumab (MK-3475) versus placebo after complete resection of high-risk Stage III melanoma: A randomized, double- blind Phase 3 trial of the EORTC Melanoma Group	Closed to Patient Entry	EORTC Melanoma Group	EORTC Melanoma Group	1622		Comparison of the EORTC QLU-C10D with generic utility instruments and development of a comprehensive manual for its use	Recruiting	EORTC Quality of Life Group	EORTC Quality of Life Group
						1629		Late Toxicity and Long-term Quality of Life in Head and Neck Cancer Survivors	Recruiting	EORTC Quality of Life Group	
						1721		Understanding long-term implications of brain tumor treatment on HRQOL and cognitive functioning: a European cross-sectional study	Regulatory in Process	EORTC Quality of Life Group	EORTC Brain Tumor Group

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
1726		Evaluating the use of the EORTC PRO measures for improving inter-rater reliability of CTCAE ratings (CTCAE)	Recruiting	EORTC Quality of Life Group		1624		An international field study for the reliability and validity of the EORTC Sexual Health Questionnaire (EORTC SHQ-C22) for assessing sexual health in cancer patients	Closed to Patient Entry	EORTC Quality of Life Group	EORTC Quality of Life Group
1727		Development and evaluation of an e-learning programme on EORTC Quality of Life measures in clinical practice	Closed to Patient Entry	EORTC Quality of Life Group		1722		Improving Health-Related Quality of Life in Metastatic Breast Cancer. Taking stock of achievements and delivering better measurement	Recruiting	EORTC Quality of Life Group	EORTC Breast Cancer Group,EORTC Quality of Life Group
1747		Determination of utility weights for the QLU-C10D in five countries inside and outside Europe and analysis of their variability across populations	Ongoing, but not in recruitment as this is N/A for this project	EORTC Quality of Life Group	EORTC Quality of Life Group	1748		Phase 1-3 development of an EORTC module assessing fertility issues and patient care needs	Recruiting	EORTC Quality of Life Group	EORTC Breast Cancer Group,EORTC Genito-Urinary Cancers Group,EORTC Gynecological Cancer Group,EORTC Lymphoma Group,EORTC Quality of Life Group,European Society for Gynecological Oncology
1749		Incorporating the patient voice in sarcoma research: How can we assess quality of life in this heterogeneous group of patients?	Recruiting	EORTC Quality of Life Group	EORTC Soft Tissue and Bone Sarcoma Group	1751		Revision of the EORTC QLQ-BN20 brain tumor module	Recruiting	EORTC Quality of Life Group	EORTC Brain Tumor Group,EORTC Quality of Life Group
1837		Development of an EORTC module for renal cancer patients: phase I-III	Regulatory in Process	EORTC Quality of Life Group	EORTC Quality of Life Group	1514		An International Field Study to test the Reliability and Validity of the EORTC Anal Cancer Module (the EORTC QLQ-ANL27) and the EORTC QLQ-C30 for assessing Health Related Quality of Life in patients with Anal Cancer	Recruiting	EORTC Quality of Life Group	
1840		Cutaneous T-cell and B-cell lymphomas	Recruiting	EORTC Quality of Life Group		1518		Confirming content validity of the EORTC QLQ-C30	Closed to Patient Entry	EORTC Quality of Life Group	EORTC Quality of Life Group
1841		Adaption of the EORTC QLQ-Breast Cancer Module for male BC Phase I	Regulatory in Process	EORTC Quality of Life Group	EORTC Breast Cancer Group	1522		Development of an EORTC questionnaire for individuals at risk for a Hereditary Cancer Predisposition Syndrome : the EORTC QLQ-HCPSxx	Closed to Patient Entry	EORTC Quality of Life Group	EORTC Quality of Life Group
1514		Follow-up in Gynecological Cancer Survivors: An EORTC QLQ-GCG Survivorship Study	Recruiting	EORTC Quality of Life Group	EORTC Gynecological Cancer Group,EORTC Quality of Life Group	1523		Adapt the existing EORTC QLQ-GINET21 Module to develop a specific module for use in patients with Pancreatic Neuroendocrine Tumour.	Closed to Patient Entry	EORTC Quality of Life Group	EORTC Quality of Life Group
1518		Confirming content validity of the EORTC QLQ-C30	Closed to Patient Entry	EORTC Quality of Life Group	EORTC Quality of Life Group	1617		Follow-up in Early and Locally Advanced Breast Cancer Patients: An EORTC QLG-BCG- ROG Protocol	Recruiting	EORTC Quality of Life Group	EORTC Breast Cancer Group,EORTC Quality of Life Group,EORTC Radiation Oncology Group
1522		Development of an EORTC questionnaire for individuals at risk for a Hereditary Cancer Predisposition Syndrome : the EORTC QLQ-HCPSxx	Closed to Patient Entry	EORTC Quality of Life Group	EORTC Quality of Life Group	1621		A Survivorship Project to understand and to improve long-term outcomes for Acute myeloid leukemia patients (SPARTA): The SPARTA Platform	Recruiting	EORTC Quality of Life Group	EORTC Leukemia Group,EORTC Quality of Life Group,Gruppo Italiano Malattie Ematologiche dell'Adulto
1523		Adapt the existing EORTC QLQ-GINET21 Module to develop a specific module for use in patients with Pancreatic Neuroendocrine Tumour.	Closed to Patient Entry	EORTC Quality of Life Group	EORTC Quality of Life Group	1623		Comparative evaluation of the computer-adaptive EORTC quality of life measures	Recruiting	EORTC Quality of Life Group	EORTC Quality of Life Group
1617		Follow-up in Early and Locally Advanced Breast Cancer Patients: An EORTC QLG-BCG- ROG Protocol	Recruiting	EORTC Quality of Life Group	EORTC Breast Cancer Group,EORTC Quality of Life Group,EORTC Radiation Oncology Group			An international field study for the reliability and validity of the EORTC cancer cachexia module (the EORTC QLQ-CAX24) and the EORTC QLQ-C30 for assessing quality of life in cancer patients with cachexia	Closed to Patient Entry	EORTC Quality of Life Group	
1621		A Survivorship Project to understand and to improve long-term outcomes for Acute myeloid leukemia patients (SPARTA): The SPARTA Platform	Recruiting	EORTC Quality of Life Group	EORTC Leukemia Group,EORTC Quality of Life Group,Gruppo Italiano Malattie Ematologiche dell'Adulto						
1623		Comparative evaluation of the computer-adaptive EORTC quality of life measures	Recruiting	EORTC Quality of Life Group	EORTC Quality of Life Group						

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
		An international field study for the reliability and validity of the Phase IV EORTC Quality of Life modules for patients with Hodgkin's Lymphoma (EORTC QLQ-HL27), high-grade non-Hodgkin's Lymphoma (EORTC QLQ-NHL-HG29), low-grade non-Hodgkin's Lymphoma (EORTC QLQ-NHL-LG20), and Chronic Lymphocytic Leukaemia (EORTC QLQ-CLL17).	Recruiting	EORTC Quality of Life Group		1219		A blind randomized multicenter study of accelerated fractionated chemoradiotherapy with or without the hypoxic radiosensitizer nimorazole (Nimoral), using a 15 gene signature for hypoxia in the treatment of squamous cell carcinoma of the head and neck	LT-FU ongoing	EORTC Radiation Oncology Group	EORTC Head and Neck Cancer Group,EORTC Radiation Oncology Group,Trans-Tasman Radiation Oncology Group Inc,Danish Head & Neck Cancer Group
		Development of an EORTC QOL Communication-specific module - Phases 4	Recruiting	EORTC Quality of Life Group		1945	OligoRARE	Stereotactic body radiotherapy in addition to standard of care treatment in patients with oligometastatic rare cancers (OligoRARE): a randomized, phase 3, open-label trial.	Regulatory in Process	EORTC Radiation Oncology Group	EORTC Radiation Oncology Group
		Development of a questionnaire to measure instrumental activities of daily living (I-ADL) in patients with primary brain tumors and brain metastases: Phase IV international field testing	Recruiting	EORTC Quality of Life Group		22033		Primary chemotherapy with temozolomide vs.radiotherapy in patients with low grade gliomas after stratification for genetic 1p loss : a phase III study	LT-FU ongoing	EORTC Radiation Oncology Group	EORTC Brain Tumor Group,EORTC Radiation Oncology Group,NCIC Clinical Trial Group,Trans-Tasman Radiation Oncology Group Inc,University College of London
		An international field study for the reliability and validity of the EORTC PATSAT-C33 core questionnaire and the EORTC OUTPATSAT7 Module	Recruiting	EORTC Quality of Life Group		22042		Adjuvant postoperative high-dose radiotherapy for atypical and malignant meningioma : a Phase II and observation study	LT-FU ongoing	EORTC Radiation Oncology Group	EORTC Brain Tumor Group,EORTC Radiation Oncology Group
		Development of a QLG procedure for rapid creation of symptom based questionnaires	Closed to Patient Entry	EORTC Quality of Life Group		22085	DCIS	A randomized phase III study of radiation doses and fractionation schedules for ductal carcinoma in situ (DCIS) of the breast.	Closed to Patient Entry	EORTC Radiation Oncology Group	EORTC Breast Cancer Group,EORTC Radiation Oncology Group,Breast International Group,Trans-Tasman Radiation Oncology Group Inc,Borstkanker Onderzoeksgroup Nederland
		Phase II and III development of an EORTC QOL cancer survivorship questionnaire	Closed to Patient Entry	EORTC Quality of Life Group		22113	LUNGTECH	LungTech Stereotactic Body Radiotherapy (SBRT) of inoperable centrally located NSCLC: A phase II study in preparation for a randomized phase III trial	Closed to Patient Entry	EORTC Radiation Oncology Group	EORTC Lung Cancer Group,EORTC Radiation Oncology Group
		An international phase IV field study for the reliability and validity of the EORTC Thyroid Cancer Module THY34	Recruiting	EORTC Quality of Life Group		22922		Phase III randomized trial investigating the role of internal mammary and medial supraclavicular (IM-MS) lymph node chain irradiation in stage I-III breast cancer (Joint study of the EORTC Radiotherapy Cooperative Group and the EORTC Breast Cancer Cooperative Group EORTC 22922/10925)	LT-FU ongoing	EORTC Radiation Oncology Group	EORTC Breast Cancer Group,EORTC Radiation Oncology Group
		Development and validation of the EORTC computerized adaptive testing (CAT) instrument - Project Extension	Closed to Patient Entry	EORTC Quality of Life Group							
		Development of thresholds for the EORTC QLQ-C30 and the EORTC CAT measures to enable their use for symptom screening in daily clinical practice	Closed to Patient Entry	EORTC Quality of Life Group							
		Investigating and improving the German response scales of the EORTC core questionnaire for assessing the quality of life in cancer patients (EORTC QLQ-C30) – a three-step approach	Closed to Patient Entry	EORTC Quality of Life Group							

Number	Alias	Title	Status	Primary Group	Secondary Groups	Number	Alias	Title	Status	Primary Group	Secondary Groups
22991		Three Dimensional Conformal Radiotherapy / Intensity Modulated Radiotherapy alone vs Three Dimensional Conformal Radiotherapy plus adjuvant hormonal therapy in localized T1b-c, T2a, N0, M0 prostatic carcinoma. A Phase III Randomized Study.	LT-FU ongoing	EORTC Radiation Oncology Group	EORTC Radiation Oncology Group	1506	ANITA	A phase II multicenter study comparing the efficacy of the oral angiogenesis inhibitor nintedanib with the intravenous cytotoxic compound ifosfamide for treatment of patients with advanced metastatic soft tissue sarcoma after failure of systemic non-oxazaphosphorine-based first line chemotherapy for inoperable disease "ANITA"	Closed to Patient Entry	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group
1202		Phase II trial of cabazitaxel in metastatic or inoperable locally advanced dedifferentiated liposarcoma.	Closed to Patient Entry	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group	1762	REDUCE	Reduced dose-density of denosumab for maintenance therapy of unresectable giant cell tumor of bone: a multicenter phase II study "REDUCE"	Closed to Patient Entry	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group
1317	CaboGist	Phase II study of cabozantinib in patients with metastatic gastrointestinal stromal tumor (GIST) who progressed during neoadjuvant, adjuvant or palliative therapy with imatinib and sunitinib	Closed to Patient Entry	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group	1809	STRASS 2	A randomized phase III study of neoadjuvant chemotherapy followed by surgery versus surgery alone for patients with High Risk RetroPeritoneal Sarcoma (STRASS 2)	Recruiting	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group
1321	ALT-GIST	A randomised phase II trial of imatinib alternating with regorafenib compared to imatinib alone for the first line treatment of advanced gastrointestinal stromal tumour (GIST). (CTC 0122/AGITG AG1013GST)	Closed to Patient Entry	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group,Scandinavian Sarcoma Group,Australasian Gastro-Intestinal Trials Group	62005		Phase III randomised, intergroup, international trial assessing the clinical activity of STI-571 at two dose levels in patients with unresectable or metastatic gastrointestinal stromal tumours (GIST) expressing the KIT receptor tyrosine kinase (CD117)	LT-FU ongoing	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group,Scandinavian Sarcoma Group,Australasian Gastro-Intestinal Trials Group,Italian Sarcoma Group
1402	EE2012	International Randomised Controlled Trial for the Treatment of Newly Diagnosed Ewing's Sarcoma Family of Tumours – Euro Ewing 2012	Closed to Patient Entry	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group,Schweizerisches Arbeitsgemeinschaft Klin. Krebsforschung,Societe Francaise Cancer et Leucemie des Enfants,Grupo Espanol de Investigacion en sarcomas,University of Birmingham	62024		Intermediate and high risk localized,completely resected, gastrointestinal stromal tumors (GIST) expressing KIT receptor : a controlled randomized trial on adjuvant Imatinib mesylate (Glivec) versus no further therapy after complete surgery.	LT-FU ongoing	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group,Australasian Gastro-Intestinal Trials Group,Italian Sarcoma Group,French Sarcoma Group,Grupo Espanol de Investigacion en sarcomas
1403	rEECur	International Randomised Controlled Trial of Chemotherapy for the treatment of recurrent and primary refractory Ewing sarcoma	Recruiting	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Soft Tissue and Bone Sarcoma Group,Scandinavian Sarcoma Group,Italian Sarcoma Group,Gesellschaft fuer Paediatrische Onko. & Haemato. - Germany,Grupo Espanol de Investigacion en sarcomas,University of Birmingham,Swiss Paediatric Oncology Group	62092	STRASS	A phase III randomized study of preoperative radiotherapy plus surgery versus surgery alone for patients with Retroperitoneal sarcomas (RPS) - STRASS	Closed to Patient Entry	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Radiation Oncology Group,EORTC Soft Tissue and Bone Sarcoma Group
						62113		A randomized double-blind phase II study evaluating the role of maintenance therapy with cabozantinib in High Grade Uterine Sarcoma (HGUtS) after stabilization or response to doxorubicin +/- ifosfamide following surgery or in metastatic first line treatment	Recruiting	EORTC Soft Tissue and Bone Sarcoma Group	EORTC Gynecological Cancer Group,EORTC Soft Tissue and Bone Sarcoma Group,National Cancer Research Institute - Gyneco Cancer Group,National Cancer Research Institute - Sarcoma Group

Number	Alias	Title	Status	Primary Group	Secondary Groups
1811	E ² -RADlatE	EORTC-ESTRO Radiotherapy Infrastructure for Europe	Recruiting	European Society for Radiotherapy and Oncology	European Society for Radiotherapy and Oncology
1604	MOTRICOLOR 3	Phase II open-label study with the anti-PD-L1 Atezolizumab monoclonal antibody in combination with Bevacizumab in patients with advanced chemotherapy resistant colorectal cancer and MSI-like molecular signature	Recruiting	Vall D'Hebron	Vall D'Hebron
1656	IMI-2-TRISTAN	Translational Imaging Methods in Drug Safety Assessment	Ongoing	Research project	Imaging Group
2039		Central Review and correlation of PET scans and lymph node histology in CTCL	In review	Research project	Imaging Group



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