ECCO 9

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FEDERATION OF EUROPEAN CANCER SOCIETIES

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ABSTRACT FORM

It is essential that the abstract conforms to the guidelines. See sample abstract on the next page.

(Office use only)

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TOPICS PROPOSED FOR PROFFERED PAPERS SESSIONS

Please tick ONE box which refers to the main subject of the abstract.

Topics to be selected by BASIC SCIENTISTS / MEDICS

☐ Angiogenesis
☐ Biotherapy - gene therapy - vaccination
☐ Bone marrow and stem cell supported therapies
☐ Breast cancer, clinical management - advanced disease
☐ Breast cancer, clinical management - early disease
☐ Breast cancer, genetics and biology
☐ Breast cancer, pathology and predictive factors
☐ Cancer genetics
☐ Cancer in children
☐ Chemoprevention
☐ Clinical pharmacology/Phase I studies
☐ Colorectal cancer
☐ Drug resistance and pre-clinical drug development
☐ Endocrine tumours
☐ Epidemiology
☐ Head and neck cancer
☐ Hodgkin's disease
☐ Leukaemias
☐ Melanoma
☐ Minimal access surgery in cancer
☐ Molecular targets for therapy
☐ Myeloma
☐ Nervous system tumours in adults and children
☐ Non-Hodgkin's lymphoma
☐ Non-small cell lung cancer
☐ Other gastro-intestinal tumours
☐ Other gynaecological tumours
☐ Other urological tumours
☐ Ovarian tumours
☐ Prevention of therapy related side effects
☐ Prostate cancer
☐ Psychosocial oncology
☐ Radiobiology
☐ Radiotherapy
☐ Small cell lung cancer
☐ Soft tissue and bone tumours
☐ Supportive care
☐ Testicular tumours
☐ Tumour markers
☐ Miscellaneous

Topics to be selected by NURSES

☐ Cancer across the life span - the needs of children and older people
☐ Changing health care systems - challenges and dilemmas
☐ Evidence based cancer nursing
☐ Nursing diagnoses in cancer care
☐ Palliative care
☐ Patient education
☐ Rehabilitation
☐ Cancer care - the role of advanced technology

Key numbers

Please categorise your abstract by writing up to a maximum of three numbers corresponding to the list of key words for subject indexing on the last page of this form. ☐☐☐ ☐☐☐ ☐☐☐

SAMPLE ABSTRACT

Refer to the example and ensure that the abstract resembles this format as closely as possible.

METASTATIC MELANOMA: STAGING WITH WHOLE BODY POSITRON-EMISSION TOMOGRAPHY (PET) AND FIRST EXPERIENCE WITH IMAGE FUSION PET SPIRAL COMPUTED TOMOGRAPHY

R. Böni[1], H. Steinert[2], R.A. Huch Böni[2], T. Berthold[2], R. Dummer[1], G. Burg[1], G.K. von Schulthess[2]. [1]*Department of Dermatology;* [2]*Department of Medical Radiology, Division of Nuclear Medicine, University Hospital of Zurich*

Purpose: In melanoma patients, accurate staging and early detection of metastatic lesions are of great importance for the therapeutic procedure. In a prospective study the value of whole body PET with (F18)-fluoro-deoxy-glucose (FDG) in staging of 77 melanoma patients was evaluated.
Methods: Whole body FDG-PET was performed in 30 women and 47 men with known metastatic melanoma or with newly diagnosed melanoma (Breslow > 1.5 mm). Patients with suspected metastases also underwent CT and/or MRI. Diagnoses were confirmed histologically or in at least one imaging modality in addition to PET. Image fusion of PET and CT was performed in five cases in which lesions were newly diagnosed on PET having no morphologic correlation on CT.
Results: 91 lesions were evaluated of which 66 proved to be melanoma metastases. Whole body PET correctly demonstrated 60 sites of metastases. Six metastases were missed. In ten patients, PET detected new metastases. Overall accuracy of PET was 84.6%, sensitivity 90.9% and specificity 68.0%.
Conclusion: Whole body PET with (F18)-FDG is a very sensitive technique in the detection of melanoma metastases. In small lesions detected by PET only, image fusion is essential for exact lesion localization and thus a necessary prerequisite for planning surgical intervention.

CHECKLIST FOR ABSTRACT SUBMISSION:

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- ☐ Have you typed the abstract following the guidelines?
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- Abstracts must be submitted on the original official abstract form by 15 February 1997 and indicate the preferred category (oral, poster) for which the abstract is to be considered.
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- To assist in preparing the subject index, authors should categorise the abstract by including in the boxes at the bottom of the abstract form up to three 3-digits numbers from the approved ECCO 9 subject index list.
- Abstracts must be typed in single spacing in black within the blue frame using a 10 or a 12 pitch character. If using a laser printer, it is permissible to print the abstract on clean white paper that should then be cut and pasted to fit inside the blue frame on the abstract form.
- Abstracts should be structured in such a way as to include (1) an introductory sentence indicating the purpose of the study and the names of co-operative study groups, if applicable; (2) a brief description of pertinent experimental procedures; (3) a summary of the new, unpublished data; and (4) a conclusion.
- Abstract titles should be brief and reflect the content of the abstract.
- Up to 10 authors can be listed. The presenting author's name must be underlined.
- The use of standard abbreviations is desirable. A special or unusual abbreviation must be placed (in round brackets) after the first appearance of the word for which it stands. The abstract should contain no illustrations but one table may be included.
- Abstracts will be selected on their scientific merit and should be well presented and include mature, not previously published data. Abstracts on case studies will not be considered.
- The presenting author is obliged to ascertain that all authors are aware of the content of the abstract before submission to the organising secretariat.
- The presenter and co-authors must identify any financial interests in products or processes described in the abstract.
- In submitting an abstract it is taken as read that the authors accept that the information to be reported is for exclusive presentation in the session to which the abstract will be assigned if accepted. This information should not be presented at any commercially sponsored satellite symposium organised at ECCO 9.
- Changes or corrections to the abstract will not be considered once it has been received by the organising secretariat.
- Abstracts must be submitted and presented at the conference in English.

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LIST OF KEY WORDS FOR SUBJECT INDEXING

Basic science: genetics and molecular biology

101 Cytogenetics
102 Genetic techniques
103 Gene expression/regulation
104 Gene marking
105 Oncogenes
106 Suppressor genes

Basic science: cell biology

111 Angiogenesis
112 Apoptosis
113 Cell cycle
114 Cell proliferation
115 Endocrinology
116 Receptors and signal transduction
117 Growth factors and telomerases
118 Metastasis

Basic science: carcinogenesis and tumour biology

121 *Carcinogenesis*
122 Tumour biology
123 Tumour environment
124 Tumour immunology
125 Biophysics

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131 Cancer prevention
132 Epidemiology
133 Hereditary and familial cancer risk
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135 Other

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142 Diagnostic imaging
143 Pathological diagnosis
144 Prognostic factors
145 Screening and surveillance
146 Staging
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202 Breast - advanced/metastatic
203 Breast - chemotherapy
204 Breast - ductal carcinoma in situ
205 Breast - endocrine therapy
206 Breast - radiation therapy
207 Breast - surgery
208 Breast - *tumour markers and* prognosis
209 Breast - other

211 Thyroid and other endocrine neoplasms

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221 Anal
222 Carcinoïds
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233 Colorectal - chemotherapy
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452 Chemotherapy: administration
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510 Antimetabolites
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711 Cytokines and immunological agents
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843 Nursing - Education
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846 Nursing - Research
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869 Terminal care
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