

influence colon and/or breast cancer risk and development will inform us not only about biological plausibility for the observed association, but also provide evidence for causality, and be important for practical guidelines both in prevention and importantly also for patients. Proposed biomarkers for the associations between energy imbalance and colon and breast cancer are i.e. genetic susceptibility, steroid hormones, hyperinsulinemia, insulin resistance, leptin, increased inflammation: i.e. C-reactive protein, depressed immune function, oxidative stress and DNA repair. Results from recent observational studies and cancer prevention intervention trials will be focused. Finally, some results from those few randomized controlled trials including physical activity among breast and colon cancer patients will be presented.

Special Session (Sun, 25 Sep, 13:15–14:15) Tips and Tricks to be the Best

168

INVITED

Middle Face Microvascular Reconstructions Based on Cordeiro Classification

A. Maciejewski¹, C. Szymczyk¹, M. Grajek¹, L. Krakowczyk¹, P. Jedrzejewski¹, J. Wierzon¹, R. Szumniak¹, M. Dobrut¹, R. Ulczok¹, S. Poltorak¹. ¹M. Skłodowska-Curie Memorial Institute, Department of Oncologic and Reconstructive Surgery, Gliwice, Poland

Middle face reconstructions are usually very difficult. In the reconstruction of this area we can use both artificial materials and autologous tissue, or a combination of these two. In most of the cases a free tissue transfer is used for the coverage. Each defect in this area is unique, and each must be treated individually, but thanks to Cordeiro classification we can apply a protocol of useful microvascular techniques which will provide optimal postoperative outcome in given defect's type. This presentation describes microvascular techniques in a reconstruction of middle face defects' (Type I-IV). A quality of life evaluation based on own modification of University of Washington QOL form is also described. The most important conclusion? – Proper preoperative planning and free flap(s) choice are crucial to obtain satisfactory aesthetic and functional outcome.

169

INVITED

Tips and Tricks How to be the Best – Clinical Oncologist

S. Sleijfer¹. ¹Erasmus University Medical Center, Department of Medical Oncology, Rotterdam, The Netherlands

There are several aspects in Medical Oncology in which physicians can be successful: patient care, teaching, and research. With respect to research, several parameters can be used to measure someone's success such as number of publications, impact factor of journals in which manuscripts are published, number of citations, oral presentations, grants awarded, appointments and several others.

As holds true for every aspect of life, success in research is a combination of own capacities and opportunities from which several can be influenced, but others not. Furthermore, opportunities to become successful in research will differ per country, institute and department.

In this presentation, a personal view on how to be successful in cancer research as a clinical oncologist will be given.

170

INVITED

Radiation Oncologist

D. Zips¹. ¹TU Dresden, Radiation Oncology UK Carl Gustav Carus, Dresden, Germany

To successfully perform clinical work, research and teaching is often a challenging task. Working as a clinician scientist and university lecturer I will report my experiences and techniques to cope with this challenge. A personal view on for example how to combine experimental research with clinical duties, the impact of mentors and the use of having a fellowship abroad will be discussed.

Special Session (Sun, 25 Sep, 13:15–14:15) The European Network for Cancer Research in Children and Adolescents (ENCCA) FP7 Project

171

INVITED

The European Network for Cancer Research in Children and Adolescents(ENCCA) FP7 Project

R. Ladenstein¹, G. Vassal², K. Pritchard-Jones³, M. Schrappe⁴.

¹St. Anna's Children's Hospital and Children's Cancer Research Institute, Paediatric Haematology Oncology, Vienna, Austria; ²Institut Gustave Roussy, Paediatric Haematology Oncology, Villejuif, France; ³University College, Paediatric Haematology Oncology, London, United Kingdom; ⁴Christian-Albrechts-Universität zu Kiel, Paediatric Haematology Oncology, Kiel, Germany

ENCCA is a 'Network of Excellence', funded by the European Union's FP7 Programme under the health topic 'Structuring clinical research in paediatric and adolescent oncology in Europe'. The ENCCA consortium is composed of 33 partners from across Europe, including research institutes and organisations recognised as being at the forefront of excellence in paediatric oncology.

The objective is to reduce knowledge fragmentation and enhance their communication, collaboration and management in an effort to advance clinical research in Europe. ENCCA will restructure knowledge-sharing through the integration of the whole chain of stakeholders from the European paediatric oncology community bringing together their expertise and viewpoints to ensure that ENCCA is all-encompassing but remaining patient-centred. Ultimately ENCCA aims to create a sustainable 'European Virtual Institute' to serve as future platform for clinical and translational research in childhood and adolescent cancers in Europe.

The ENCCA consortium is dedicated to

1. Promoting innovative methodologies and designs for clinical trials
2. Harmonising therapeutic strategies by enabling better access to innovative therapies, knowledge and technology in the field of paediatric tumour biology
3. Improving substantially the quality of life of children and adolescents with cancer with a particular emphasis on long term treatments side effects
4. Proposing common ethical definitions, monitor ethical issues present in the implementation of the European clinical research agenda
5. Providing a comprehensive education and training programme, enhancing research mobility, sustainable clinical trial design, training coordination and information to benefit patients' families.

To achieve the ultimate goal of becoming the 'stepping stone' towards an interactive and sustainable European Institute, the ENCCA network will deliver over the next 4 years 18 work packages with a total of 80 milestones and 82 deliverables, streamlined through 3 main channels of activities embracing all tumours groups: Integrated Activities, Joint Research Activities and Spread of Excellence.

The ENCCA consortium envisions a dynamic and open network that can benefit the entire paediatric oncology community in Europe to overcome also current major hurdles like difficulties to run investigator driven clinical trials within the 2004 clinical trial directive and the extremely poor access to new drugs despite the 2007 Paediatric Medicine Regulation.

172

INVITED

'Spread of Excellence' (Dissemination) Activities of the European Network of Excellence for Cancer Research in Children and Adolescents (ENCCA)

K. Pritchard-Jones¹. ¹University College London, Institute of Child Health, London, United Kingdom

Good communication, sharing of knowledge and international coordination of research into paediatric cancer underpins continued advances in this field which are sorely needed. Cancer in children remains a significant public health issue as some 15,000 new cases are diagnosed every year in Europe. Although 80% of cases are cured by multidisciplinary treatments, still 3,000 cases will not survive. The ENCCA network aims to improve the current situation by reducing as far as possible the existing hurdles and pitfalls in paediatric oncology. ENCCA's ultimate goal is to build a sustainable virtual European institute to serve cancer research in children and adolescents for the next decades, including coordinating training opportunities for clinical and non-clinical researchers to significantly improve cure rates and quality of cure for patients.

The 'Spread of Excellence' work packages include disseminating the work of ENCCA to patients, parents, academic researchers and industry to improve partnerships and knowledge of opportunities for participation in clinical trials, research training and collaboration. A specific work