# Sylvie Rottey – President, Belgian Society of Medical Oncology

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*Professor Sylvie Rottey, president of the Belgian Society of Medical Oncology (BSMO) outlines the state of cancer care in Belgium, the country's positioning in clinical trials for medical oncology, and how the importance of the Society's network of international partnerships.*

**Can you please begin by introducing the mission and activities of the BSMO to our international readers?**

It is a quite recent specialty, so BSMO was only officially registered in 2011 as the professional association of Belgian Medical Oncologists. We have a Board of ten members, from university and private hospitals, and are organized with specific taskforces because oncology is broad.

We organized our annual Symposium last month, where we attracted 170 clinicians, mainly medical oncologists and young colleagues in training, researchers. Also, the pharmaceutical industry was represented. We had 45 abstracts presented by our PhD students. Networking is one of the main goals of our Symposium.

BSMO has a key role in the communication with the government, especially in times of drug shortages, because our colleagues turn to us We are in contact with the ministry, the Federal Agency for Medicines and Health Products (FAMHP), the National Institute for Health and Disability

Insurance (INAMI), as well as with the press to make things clear for the public. Every month, we issue the BJMO (Belgian Journal of Medical Oncology), where members and organ specialists involved in oncology can publish. We are a privileged platform between the physicians, the government and the press.

**What are the latest achievements of BSMO?**

In Belgium, all medical oncologists can prescribe immunotherapy drugs, which means BSMO must guide them, especially regarding toxicity. We organize meetings (industry and non-industry driven) to improve education and built the ImmunoManager, a tool everybody uses on a daily basis to get prescription guidance.

We created cancertrials.be, a website where you can get information on running trials, to make it easier for physicians and patients. BSMO now sponsors national precision trials, mostly based on personalized treatment. It has been complex to set up, but it is accelerating. Our role is growing, so we try to be as much organized and professional as possible, to ensure we give the personalized treatment to the right person. We try to find connections with the industry so that they provide targeted drugs that are not reimbursed in Belgium for certain rare indications.

We want to make these trials as broad as possible, so communication within our members is crucial. We encourage all hospitals to perform prescreening and send materials to the labs. In case they find a mutation or the target, patients are sent to the right centre.

**Clinical trials are very important to bring innovations, but other countries are competing like Switzerland or France. What is it about Belgium that makes the country competitive as a landscape for clinical development?**

Belgium is very active in the performance of clinical trials because we are well organized and deliver high-quality input. Once you prove to the companies and industrial collaborators that you can reach a target and enter your patients into the trials with good quality, future initiatives are launched. In Ghent f.i., we have a detailed Phase I unit, with 30 persons dedicated to this specific kind of clinical trials. Once we attract early-stage trials to Belgium, we are almost certain to be involved in Phases 2 and 3 as well, if the program is successful.

In general, there is no need to be in competition with other countries,  but we need to be complementary. Our aim is to offer the right drug to the right patient and if even possible, in a short time frame

When we perform the Belgian FMI project in the near future, a molecular tumour board will examine all the reports and look for the possibility of clinical trials in Belgium and beyond.

**As we discussed with Brigitte Nolet from Roche, the BSMO and Belgian Cancer Center have joined forces with the company to launch the GeNeo project. Can you give us an overview of the initiative and the role of BSMO in this partnership?**

The current project with GeNeo is to perform foundation medicine, so the gene analysis of 1,000 patients. We will compare it with the NGS, that is already available and reimbursed in Belgium, but on a lower level – about 70 to 100 genes depending on the centre. We will see if performing the larger panel of genes on our patients has a clinical impact. We hope to show that the more genes we test, the more targeted drugs we can deliver, and the more trial possibilities we can find for our patients. After analysis and if positive results would be obtained, we could provide our government with a study report to ask for more reimbursement for larger panels of genes. This is the beginning of our collaboration, starting very soon.

However, GeNeo aims at a broader scope. Roche wants to collaborate with BSMO in the future to attract more drugs for personalized treatments, which means attracting more clinical trials. Personalized medicine is quite recent and much more personalized than immunotherapy, so there is still a long road to go in oncology. The support of big pharma will help us to reach more.

**Do you see that Belgium has the capacity to embrace personalized medicine on a larger scale?**

Cancer care is of a high level in Belgium. It is supported by everyone, especially politicians, so we should keep stimulating it and stay in contact with the government. Immunotherapy reimbursement is great, but we should still do better for NGS. Let us prove first the need with the GeNeo project.

**Can you give us a current overview of the burden of cancer in Belgium where the incidence per 100,000 is higher (651,000) than the EU-15 average (625,000) both for men and women?**

Following a political decision in order to improve care for cancer patients in Belgium, cancer centres have been created within every hospital. The goal is that new cancer patients are discussed in a multidisciplinary approach. We need to provide to the government a TNM classification – which is the international classification we use to assess cancers, as well as a register we fill out for every patient. To support cancer care in hospitals, we get a fee for every patient we discuss, so the number of FTEs you get for psychological support, onco nurses, dieticians etc. depends on the number of cancer patients registered in your hospital.

**From attending last month's European Cancer Forum and World Cancer Day Conference hosted by the EU Commission, there seems to be a debate among stakeholders of where priorities should lie – prevention, early detection, access to innovation, or research. In your view, how should these factors be prioritized to have the most impact for reducing the burden of this disease?**

Lifestyle plays a key role in diseases like diabetes, cardiovascular disorders or cancer, and in healthcare overall. Smoking or alcohol abuses have nothing to do with big science, and prevention is where the government should keep focusing.

Early detection is also important because it helps to cure cancer. Moreover, Thanks to the support of the industry and a good network of grants, we have the means to perform a lot of research within the field of advanced cancer.

**In Europe, the UK, Switzerland and France are advancing strongly and investing considerably in cell & gene therapy area. Could you describe the competitiveness of Belgium in the field of cell + gene therapy?**

This is what we are doing on a daily basis in Phase I trials in Belgium. It is a complex field, but Belgium can deliver high-quality research, in collaboration with universities.

**Looking forward, what are your priorities for the future of BSMO?**

Our main goal is to be able to attract and inform every medical oncologist to what is happening in the Belgian oncological community. We need to have everyone on board, in order to improve the quality of cancer care in Belgium, attract more clinical trials and be able to provide the right trial for the right patient.

**Would you have a final message for our international readers?**

We are in a really intriguing time for oncology and we cannot miss the newest evolutions, so stay in touch with BSMO!

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