Result: The patient characteristics of the 101/257 (=39.3%) evaluable responses reflected our entire cohort of MTB-FR registry study participants. mPSCC-G analysis showed high overall satisfaction of MTB-FR participants, with 76.2% stating that case discussion at MTB-FR was beneficial to them. EQ-5D-5L and EORTC-QLQ-C30 analyses indicate that HRQoL is higher in patients receiving therapy recommended by the MTB. In addition, patients receiving personalized treatment tend to report lower symptom burden and higher functional scores.

Discussion: In addition to OS/PFS, PROMs should be collected more widely, placing patient-centered care at the heart of the treatment process for patients with advanced cancer. To ensure that as many patients as possible benefit from this diagnostic tool, it is essential that patients are enrolled in a MTB in a timely manner.

Conclusion: To the best of our knowledge, this is the first structured analysis of patient satisfaction and QoL of participants in a molecular tumor board registry trial in Germany demonstrating the subjective therapeutic benefit of patients.

Disclosure Statement: The authors declare no conflict of interest.

629

Plato2: Nationwide Platform for linking and analysing Oncology Research Data

Sylke Zeissig¹; Monika Klinkhammer-Schalke¹; Benjamin Barnes²; Johannes Bruns³; Bianca Franke¹; Tobias Hartz⁴; Anne Hennings¹; Hedy Kerek-Bodden⁵; Jan Krischan Krause³; Klaus Kraywinkel²; Gerd Nettekoven⁶; Olaf Ortmann¹,³; Thomas Seufferlein³; Kerstin Weitmann⁴; Simone Wesselmann³; Stefan Rolf Benz¹

¹Arbeitsgemeinschaft Deutscher Tumorzentren e.V., Berlin, Deutschland

 ${}^2\!Zentrum\,f\"ur\,Krebsregister daten\,am\,Robert-Koch-Institut,\,Berlin,\,Deutschland$

³Deutsche Krebsgesellschaft e.V., Berlin, Deutschland

⁴Plattform § 65c, Magdeburg, Deutschland

⁵Haus der Krebs-Selbsthilfe – Bundesverband e.V., Bonn, Deutschland

 6 Deutsche Krebshilfe, Bonn, Deutschland

Background: For a nationwide, event-related compilation and evaluation of oncological data, a platform is needed that is professionally supported with experience in clinical-scientific evaluations. To answer specific questions, the cancer registry data should be linked with other relevant data in order to gain new scientific knowledge. In addition, the platform will provide an infrastructure for prospective registry based trials. The Act on the Compilation of Cancer Registry Data (Gesetz zur Zusammenführung von Krebsregisterdaten (KRDa-ZuG)) supports the establishment of this platform.

Methods: We chose six use cases on topics and entities to form the basis of our investigations. Interdisciplinary expert teams are currently analysing the necessary steps and proposed solutions. For each use case the data requirements will be identified and the suitability of the data set linkage will be evaluated on the basis of the applicable regulations especially under current federal/ state law.

Result: The project is currently in development phase. First step is to take stock of the current situation. It will be examined which questions can already be dealt with today available data, which projects would only be feasible with a very high effort and which would not be feasible at present and need data linkage with other data sources.

Discussion: The Phase 2 platform concept seeks to enable timely and accessible nationwide inquiries and evaluations of specific research questions in clinical cancer medicine. The realm of research questions that can be addressed using healthcare data will thus be continuously expanded.

Conclusion: The project's results will facilitate retrospective and prospective evaluations using study and routine data for healthcare research and clinical therapies, further advancing the field. By lever-aging the Plato2 platform, we strive to enhance healthcare outcomes and informed decision-making.

Disclosure Statement: The authors declare that there are conflicts of interest. The conflicts were submitted to the congress organizer KUKM GmbH and KUKM can disclose them if needed.

634

Informationsbedürfnisse von Patient*innen mit fortgeschrittenem Lungen-, Ösophagus- und Leberkarzinom - Ergebnisse eines Realist Reviews im Projekt Onco:cide

<u>Stephan Nadolny</u>^{1,2}; Lydia Ilin³; Christian Heise⁴; Johannes Porzelle⁵; Julia Roick³; Matthias Richter³; Patrick Michl⁴; Henning Rosenau⁵; Jan Schildmann¹

¹Institut für Geschichte und Ethik der Medizin, Profilzentrum Gesundheitswissenschaften, Medizinische Fakultät, Martin-Luther-Universität Halle-Wittenberg, Halle, Deutschland

²Institut für Bildungs- und Versorgungsforschung im Gesundheitsbereich, Hochschule Bielefeld, Bielefeld, Deutschland

³Lehrstuhl für Soziale Determinanten der Gesundheit, Fakultät für Sport- und Gesundheitswissenschaften, Technische Universität München, München, Deutschland

⁴Klinik für Gastroenterologie, Infektionskrankheiten und Vergiftungen, Universitätsklinikum Heidelberg, Heidelberg, Deutschland ⁵Interdisziplinäres Zentrum Medizin – Ethik – Recht, Juristische und Wirtschaftswissenschaftliche Fakultät, Martin-Luther-Universität Halle-Wittenberg, Halle, Deutschland

Background: The decision-making ability of people with cancer can be compromised by several factors. A variety of interventions have been developed to improve decision-making. Professionals perceive them as conflicting with existing practice, resource intensive and therefore the degree of implementation is low.

The project aims to optimize the existing informed consent process with a low-threshold, multimodal intervention. A realist review was conducted to provide a theoretical basis. One research question focuses on the information needs of patients throughout the disease trajectory.

Methods: We searched Medline, Cinahl, PsycInfo, Web of Science and Scopus from 2005 to October 2022. We included studies focusing on the information needs of patients with lung, esophageal and liver cancer regardless of the study design or setting. Two researchers independently screened and extracted the data. We analyzed the data with respect to the different information needs at different stages of the disease process (diagnosis, treatment, post-treatment, end of life) as well as cancer progression. Result: Database search yielded 1022 articles. After title and abstract screening 111 remained and 60 studies were included in the analysis after screening full texts. Most studies (n=30) focused on the diagnosis and treatment phase and only a minority on the end-of-life phase (n=5). Important information needs are prognosis, treatment options, cancer symptoms, side effects, coping and self-care. The need for information on treatment options decreases over the disease trajectory with a greater focus on coping and self-care in the post-treatment phase.

Discussion: Patients need varying information over the course of their disease. Due to heterogeneous reporting, it was difficult to differentiate the information needs in relation to cancer progression or staging.

Conclusion: More emphasis should be placed on coping and self-care at an early stage, e.g. to build resilience, as it can be challenging for cancer patients to anticipate their needs when they are preoccupied with treatment decisions.

Disclosure Statement: The authors declare no conflict of interest.

635

Surveillance and field service improve quality and quantity in the Rhineland-Palatinate Cancer Registry

Petra Plachky; Katharina Weinert; Philipp Kachel

Cancer Registry of Rhineland-Palatinate in the Institute for Digital Health Data RLP gGmbH, Mainz, Deutschland

Background: Clinical-epidemiological cancer registration serves as key driver in monitoring and improvement of oncological treatment in Germany. In this context close interaction between cancer registries and physicians is mandatory. One parameter is to supply main information on a cancer patient with minimal effort for the inquiring physician. For this aim the cancer registry in Rhineland-Palatinate developed the oncological