

A diamond open access online journal | established in 1871 |  
published by the SMW supporting association | [www.smw.ch](http://www.smw.ch)

## Supplementum 283

ad Swiss Med Wkly 2024;154

November 18, 2024

## Abstracts of the Swiss Oncology & Hematology Congress (SOHC)

Basel (Switzerland), November 20–22, 2024

# SOHC

SWISS ONCOLOGY & HEMATOLOGY CONGRESS

SSMO  
SSOM  
SGMO

SGKSSH

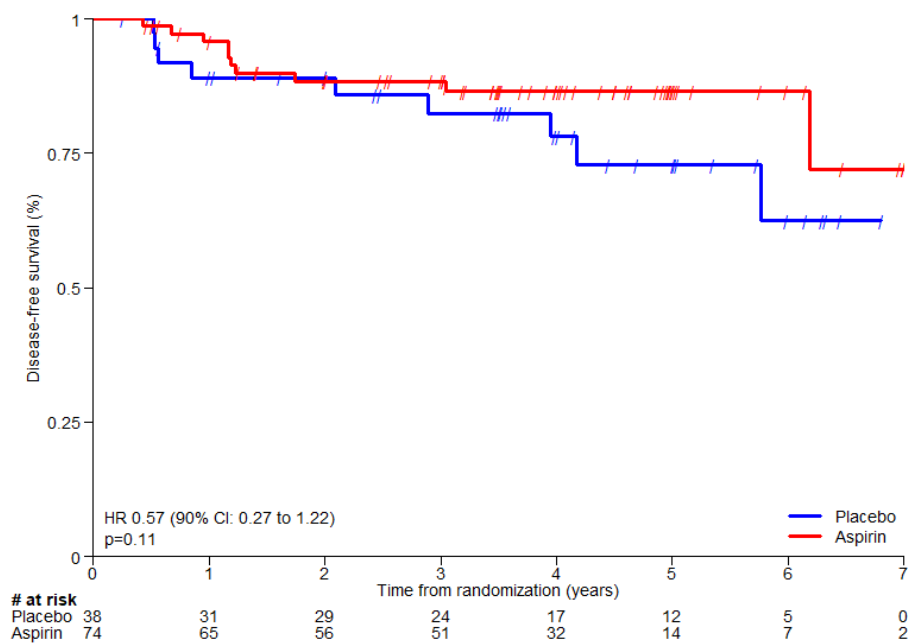
 SAKK  
WE BRING PROGRESS TO CANCER CARE



respectively. Baseline patient characteristics were well-balanced between groups, with an overall median age of 66 years (range 29–89) and 42.9% of patients being female. After a median follow-up of 4 years, 19 DFS events occurred, including 10 in the aspirin group and 9 in the placebo group, respectively. The HR for DFS was 0.57 (90% CI 0.27–1.22) in favor of aspirin ( $p=0.11$ ). Five-year DFS rates were 86.5% (90% CI: 77.7%–92.0%) in the aspirin group and 72.9% (90% CI 55.7%–84.3%) in the placebo group, respectively. The HR for TTR was 0.49 (90% CI 0.21–1.19,  $p=0.089$ ) in favor of aspirin. Both unstratified HR for OS (0.71, 90% CI 0.23–2.13,  $p=0.3$ ) and stratified HR for OS (0.60 (0.15–2.43) were in favor of aspirin. We did not document any aspirin-related serious AEs.

**Conclusions:** SAKK 41/13 is the first prospective, randomized trial to provide clinical evidence of a protective effect of adjuvant aspirin in patients with resected, PIK3CA-mutant colon cancer, with a clinically relevant 43% DFS improvement and 51% TTR improvement. Even though the results are not statistically significant due to premature study closure, adjuvant aspirin warrants individual consideration in

patients with resected, PIK3CA-mutant colon cancer stage II and III.



## ONCOREHA/OPS/PALLIATIVE.CH/SOHC BEST ABSTRACT & AWARD SESSION – NURSING, SUPPORTIVE & PALLIATIVE CARE, REHABILITATION & SURVIVORSHIP

437

### Onco-hematology care through patients' eyes: findings from the 2023 Swiss Cancer Patient Experiences (SCAPE) survey

C. Arditi<sup>1</sup>, S. Schobinger<sup>2</sup>, R. Pfau<sup>2</sup>, A. Heuss<sup>2</sup>, A. Frei<sup>1</sup>, M. Eicher<sup>3,4</sup>

<sup>1</sup>Department of Epidemiology and Health Systems, Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, <sup>2</sup>HOPOS, HOPOS Umbrella organization Hemato-Oncological Patient Organizations Switzerland, Aesch, <sup>3</sup>Institute of Higher Education and Research in Healthcare (IUFERS), University of Lausanne, Lausanne, <sup>4</sup>Oncology nursing, Swiss Association for Nursing Science, Bern

**Introduction:** Patient-reported experiences of care measures (PREMs) are essential for understanding how well the care system is addressing both the medical and psychosocial needs of patients. To date, experiences of patients diagnosed with hematological cancer have rarely been investigated in Switzerland. Initiated by a patient association, this study aimed to evaluate patient-reported experiences among individuals with leukemia, lymphoma, or myeloma to identify areas for improvement in onco-hematology care.

**Methods:** We analyzed data from the third Swiss Cancer Patient Experiences (SCAPE) survey, a cross-sectional, multicenter study conducted in 2023. Patients from 23 cancer centers across Switzerland were asked to complete a survey on care experiences before diagnosis, at diagnosis, and during inpatient, outpatient and home care, as well as on survivorship care.

Rates of positive experiences were compared between patients with hematological and other cancers.

**Results:** Of nearly 17,000 invited patients, 7,844 completed the questionnaire (49% response rate), including 1,126 with hematological cancer (14%). Overall, positive experiences were reported for most aspects of care, with some notable differences between onco-hematology and other cancer patients. The highest positive experiences included being treated with respect (95.8%), in regular contact with a reference person (98.3%), and access to diagnostic testing (91.5%). Lower-rated experiences included managing long-term symptoms (59.5%), receiving financial aid information (58.4%) and receiving information on late side effects (57.6%). Fewer onco-hematology patients reported timely access to a specialist (65.7% vs 73.3%) and adequate support for managing radiotherapy side effects (69.9% vs 78.5%) compared to other cancer patients. Despite this, onco-hematology patients rated their overall care slightly higher than patients with solid tumors (9.14 vs 9.01).

**Conclusions:** While overall experiences with cancer care were positive, onco-hematology patients face distinct challenges, especially in survivorship care. Strengthening collaboration between cancer centers and patient organizations could help address these issues. These challenges should be considered in future developments, in line with the national cancer plan currently being developed under the leadership of the Federal Office of Public Health.