



The ESO Masterclass:

where those most eager to learn meet
those most willing to teach

→ Peter McIntyre

Once a year, in a quiet location somewhere in Europe, 60 of the continent's brightest and most motivated young oncologists gather for a learning experience that can define their careers. This week-long Masterclass lies at the very heart of ESO's mission, building an army of brilliant and caring young oncologists, many of whom will be the leaders of tomorrow.

The European School of Oncology was famously founded on a misdiagnosis and its unique selling point is to prevent tragedies based on ignorance and lack of education.

The legacy on which the School was launched in 1982 was bequeathed by an Italian businessman who was treated for a year for arthritis before discovering that his pain came from bone metastases originating from undiagnosed prostate cancer.

The whole premise of the School is that mistakes like this would not happen if doctors were better educated about cancer and if specialists were up to date with and applied the latest research and best clinical practice. The Milan group who created ESO was evangelical about improving doctors' knowledge and understanding about latest treatments and diagnostic tools.

ESO education is about incorporating research that updates state-of-the-art best practice, while retaining tried and tested treatments that work. It is the application of knowledge to the treatment of patients that is at the heart of ESO initiatives, exemplified in its motto 'Learning to care'.

It does this by enlisting the best experts from around Europe to present the evidence for first-line therapies and subsequent treatments, asking and answering "what if" questions on the way. The emphasis is on multidisciplinary ways of working and the importance of becoming a true specialist so that all patients are in the hands of doctors who know the evidence and how to apply it.

In the variety of ESO courses – Inside Track, Insight conferences, a course for medical students – the Masterclass in Clinical Oncology for young oncologists has come to be seen as a key event bringing together those most eager to learn and those most willing to teach.

The annual Masterclass is a week of intensive learning and interaction for 60 of the brightest and best: 30- to 40-year-olds on the cusp of deciding their ultimate oncology specialism. The course is dedicated to medical and clinical oncologists and the focus is on the big killers: lung, breast, prostate, colorectal and gynaecological cancers.

Alberto Costa, director of ESO, says that these Masterclasses take the School back to its roots. "When we started ESO, courses were like this – one week residential courses. But then people had no money and people were too busy, and the hospitals

would not let them go for a week. So the courses were cut back to one or two days.

"Now we have 60 students for a week. This is exactly what people of this age need. They are now at the age when they have to choose what specialty they will follow but options are still open to them. You cannot come here through paying a registration fee. You have to write a motivation about why you want to come and you have to prepare a case study and then you may be accepted."

LEARNING FROM DIFFICULT CASES

What is now the ESO–ESMO Masterclass in Clinical Oncology celebrated its 10th anniversary in April 2011 at the Wolfsberg Centre, by Lake Constance, in Switzerland. The venue (it belongs to UBS investment bankers) exudes a sense of calm order. The Masterclass is a ferment of bubbling activity.

The daily routine is rigorous: breakfast by 8.00am, first presentation at 8.30am, and (with breaks) presentations through till 4.30pm. Then the day begins again, as the participants split into groups and present and discuss case studies from their own hospitals. By the time they close, it has been 11 hours of intense concentration.

The presentations read like a *Who's Who* of European oncology: Aron Goldhirsch on breast cancer, Jan Vermorken on gynaecological cancers, Jacques Bernier on head and neck cancers, Eric van Cutsem on colorectal cancer, Rolf Stahel on lung cancer.

For the case study discussions, nobody brings a straightforward case. The history is revealed step by step, usually with recurrence or complications following treatment and some tough choices at the end. With 15 to 20 young oncologists in each group there are echoes of the hit TV series *House*, in which bright young doctors outdo each other in diagnoses and suggested treatment.

The faculty member for one group is Nicholas Pavlidis, professor at the Department of Medical Oncology in Ioannina, Greece, and joint chair of the Masterclass. He's far too nice to be 'Dr House', but there is something magical about his ability to pop up with a slide containing the most relevant research results during discussion.

And (unlike the malignant Dr House) Pavlidis always brings the students back to the human perspective – these are not cases but people. So one case study involves a mother of two children diagnosed with

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What if...? Students bring difficult case studies for discussion with international experts such as lung cancer specialist Rolf Stahel, pictured here

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colorectal cancer in 2008. She has been treated for aggressive disease and liver metastases with cytoreductive surgery and hyperthermic intraperitoneal chemotherapy (HIPEC). By March 2011, after many cycles of treatment, there is no obvious sign of disease. Should they be adopting invasive diagnostic tests? Pavlidis asks what the outcome will be if the cancer has returned and all agree that they will have run out of options. Gently, he suggests that the additional tests will bring distress to the patient without benefit.

Another case concerns a young woman who presented with adenocarcinoma, and was initially treated apparently successfully. But, after recurrence and further treatment, hepatic metastases were found. Despite hepatic metastasectomy, it is clear that the cancer has not been cured. Pavlidis points out that she is still alive six years after her initial diagnosis, and for much of that time has been able to live

a normal life. Is this a treatment that has failed, as the young doctor may feel, or one that has given this young woman years of good-quality life, critical years with her young children?

Pavlidis has been described as the 'father' of the Masterclass. Almost 30 years ago, in 1982, as a young Fellow at the Royal Marsden Hospital in the UK, he attended the first ESO course in Milan. "If you look at who were participants then, more than 50% of them are now professors in universities inside or outside Europe," he says. He is sure this pattern will be repeated with the current Masterclass series.

"We offer real education by distinguished experts from Europe. What makes the difference is that not only do you teach the big killers but you also have these people sitting in these kind of groups presenting their own clinical cases. We analyse and criticise and give directions."

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UP FOR THE CHALLENGE

The participants are clearly up for the challenge. Jochan Bauer qualified as a doctor seven years ago and now works in internal medicine at the Esslingen Hospital in Germany, specialising in cancer and haematology. “My consultant took part in this Masterclass several years ago and recommended it warmly,” he said. “He is certainly right about this. It updates you on the facts and on standard diagnosis and treatment. It is hard work, but it is definitely worth it.”

Andreia Costa, a medical oncology fellow at the Hospital de São João, Portugal, takes her final medical oncology exams in 2012. “This is a fantastic revision for me and it is very important for my training. It is very intensive, but we do get some breaks between sessions. I particularly value the discussion of the cases in small groups and over coffee.”

Davit Zohrabyan, a medical oncologist at the Yerevan State Medical University Hospital in Armenia, sees the course as a lifeline to knowledge that is not easily available in his home country. He saved up the questions he could not answer at home so he could ask the experts here. “Armenia is a small country and it is not rich and it does not have big research programmes. It is very important for me and for my country that I get acquainted with the new methods and practice. I want to be informed with all the important new scientific knowledge. I want to work together with science.”

Inevitably, after 10 years, the pupils start to become teachers. Elżbieta Senkus-Konefka was one of 53 students on the very first Masterclass held in Montecatini, Italy, in 2002. Now a specialist in radiotherapy and medical oncology in Gdansk, Poland, she has returned for the past two years to lecture on treatment for metastatic breast cancer.

“My career is an example of someone who graduates from these courses and then becomes an expert. When I applied I was just starting on medical oncology. I wrote that this was at a very important point for me because I had just switched to a second specialty. Ten years ago hardly anyone from eastern

AN EXCELLENT REPORT CARD

Students rate the Masterclass highly for useful and relevant education. A review of doctors attending the first nine Masterclasses shows that almost 60% were aged 30–34, and 37% were aged 35–45. Participants were evenly divided, males and females.

The vast majority of participants (72%) were medical oncologists, with 6% radiation oncologists and 6% clinical oncologists. Some had not yet finally decided on their areas of specialisation. Two thirds (67%) came from European Union countries, 25% from non-EU countries of Europe and 8% from outside Europe – mainly the Middle East and Latin America.

Feedback by students is very positive. Over the first nine years the overall median score for the quality of education was of 3.54 out of 4. Information was rated as useful and relevant (median 3.64) and well balanced with good evidence (3.59), with adequate time for discussion and questions (3.51).

Masterclasses have been held in Italy, Spain, Cyprus, Malta, Bulgaria and Portugal, but the Wolfsberg Centre, at Ermatingen, Switzerland, received almost perfect scores for facilities, management and organisation, and it is clear that ESO hopes it will be able to return.

Source: N Pavlidis et al. (2010) The Masterclass of the European School of Oncology: The ‘key educational event’ of the school. *Eur J Cancer* 46:2159–65

Europe went to international conferences or was considered an expert. I was one of the few to do so.”

Razvan Popescu, medical oncologist at the Hirslanden Clinic in Aarau, Switzerland, is one of two scientific coordinators. “One of the reasons why I became involved is because of the experience of both good and bad quality teaching that I have had myself.”

Popescu is active with the European Society for Medical Oncology (ESMO), and in his work on the ESMO awards committee he saw many CVs of young doctors from eastern Europe who needed support. “Certain countries, not exclusively in central and eastern Europe, have teaching that is mandatory for them to attend, but it does not take them forward – they don’t learn. These young people are the future of

oncology in Europe. What ESO has been doing, and I am delighted it is now doing it in partnership with ESMO, has been to set up a very, very good course. One of the main drivers for me to continue to participate is the live interaction which develops between the faculty and students. They get the crème of European oncology coming and lecturing, but also interacting with them.”

Should the course ease up a little? Can anyone concentrate for 11 hours a day? The other coordinator, Wolfgang Gatzemeier, believes that the benefit is worth the pain. “At the beginning, I say you are here for a marathon. I did it for 10 years and I survived and you will survive as well. I know it is not easy to follow presentations for such a long time, but they also have time to reflect and talk to each other.” He points out that the students do not have to remember everything as they get a book of presentations and access to the slides online.

THE LATEST DATA - IN CONTEXT

Gatzemeier, a breast surgeon, believes that the Masterclasses have added value over the large scientific conferences. “When you go to the major conferences and congresses you can get lost in all that they have to offer. Here, in this more relaxed ambience, people are taught by top faculty in a very intensive way. The most important information is presented and everybody has an opportunity to gain as much as possible from what is offered.

“We ask people at the end if it is too much and yes, some complain that it is too compressed, but they also always ask us to do something more as well! From our follow-up, we see that for many participants this was a crucial point in their career, so that they may have the opportunity to become head of a department.”

ESO is not resting on its laurels. In May this year it held a Balkan Masterclass in Clinical Oncology in Dubrovnik, Croatia, co-chaired by Popescu, who is originally from Romania, and by Semir Bešlija from the Institute of Oncology in Sarajevo, Bosnia. Like the full Masterclass, this was a residential course



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It's for nurses too. Twenty-two cancer nurses attended a nursing Masterclass held in parallel; this group is discussing issues in patient communication

paid for by sponsors, although slightly shorter, at three days. The Balkans course was also open to surgeons, who are not covered by the main Masterclass.

Popescu explained that the aim was to devise a course that was particularly relevant to the clinical environment in the region. “Some people come and hear things that they won't ever be able to put into practice, like monoclonals and targeted small agents that cost a fortune.

“There are a few people from the region who are exceptionally bright and sometimes manage to come to western institutions and do superbly well. It is painful that if they want to return to their own region they find they are not only struggling with financial issues, they are also struggling with systemic issues and the culture.”

A MASTERCLASS IN CANCER NURSING

The Masterclass in Switzerland was not only about doctors: 22 nurses also attended from 15 countries. It was the tenth Masterclass for doctors, and the fourth for nurses. Funding is in place for the nursing

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course to take place alongside the medical course for the next two years. Some presentations are shared with medics, but the nurses also break out to look at the advanced practice of nursing cancer patients.

Sara Faithfull, President of the European Oncology Nursing Society (EONS), chaired the nursing course with many of the same objectives. “The idea is that we are training future leaders, so this is very much about clinical experience and about looking at key skills and developing practice. We have looked at putting in place the advanced assessment skills that in many countries aren’t systematic or taught. It is not just about the latest breast cancer treatment, it is about how you would, as a nurse, manage targeted therapies and manage the side-effects and look more specifically at the quality of life issues and enhancing care.”

The pedagogical methods used by the nurses are very different, based around group work and group discussion. In a communication segment they discuss how to respond when a patient inevitably asks: “How long have I got?” or when a relative says: “Don’t tell them what they have got.”

Nurse training and practice differ across Europe, and EONS has been working to improve online training opportunities for nurses, many of whom get less than three days a year away from the ward for training. But as with the doctors, there is little that can beat the face-to-face interaction.

Sandrine Decosterd, from the Geneva University Hospitals, feels that this personal sharing of experience and motivation is most valuable. “This course also gives you a lot of knowledge in a short time – both scientific knowledge and nursing knowledge.”

Elana Laska teaches palliative care nursing in Albania, where there are few oncology nurses. As an advocate to improve the role and skills of nurses, she was keen to share her knowledge when she got home. “Every time I go for training I prepare

a report. I hold meetings with the team and give them my experiences. I write notes every night about what I have seen and all the things I am thinking about how we can do something differently.”

EONS is planning to get academic accreditation for the next nurse Masterclass using case studies online afterwards to see how it has changed nurses’ practice.

Alberto Costa feels that the Masterclass concept is much stronger when it includes doctors and nurses and he praises the sponsors for putting money into education, without wanting to put their names all over everything.

Cutting the cake to mark the 10th anniversary of the medical Masterclass, he pointed out that there are now more than 500 people who have been through the course, “a little army of brilliant young oncologists all over Europe”.

The average age of those attending the course seems to be dropping and the majority are under 35. It will not be many years before the students attending the Masterclass will not even have been born when ESO began. For now, it can be said that they have grown up together and that together they undoubtedly make a difference to the practice of oncology.

The Masterclass is funded by an unrestricted grant from a pool of sponsors through ESO’s Sharing Progress in Cancer Care programme

Happy 10th anniversary. Chatrina Melcher, one of the organisers, with ESO director Alberto Costa (right) and co-chair Nicolas Pavlidis (left) celebrate with cake and presents



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