Wednesday, 18 April 2018

17.45-18.45  
Welcome Reception at the Academy Building  
This reception is offered by the University of Groningen, the Municipality of Groningen and the Province of Groningen

19.30  PhD and early career researcher dinner, or own arrangements

Thursday 19 April 2018

8.45  Welcome and registration with coffee/tea
Revision of presentations

Blue Room
Chair: Annette Berendsen
9.30  Introduction David Weller

9.45  Prof. Hans Nijman, head of the Dept. of Obstetrics & Gynecology, UMC Groningen, chair of Dutch initiative: regional network formation in cancer patient care (Citrien Project)  
ORGANISATION AND COOPERATION IN CANCER CARE: BUILDING BRIDGES TOWARDS COMPREHENSIVE CANCER NETWORKS

10.05  Prof. Niek de Wit, head of the Dept. of General Practice and Prof. Elskens van der Wall, oncologist and head of the Cancer Center UMC Utrecht  
OPTIMIZING THE CANCER PATHWAY REQUIRES PRIMARY-SECONDARY CARE COLLABORATION!

10.40  Coffee/tea

11.10 - 12.20  Orals Survivorship / Room 9
Chair: Geertruida de Bock

26. Jansen, L  
THE PSYCHOSOCIAL WELL-BEING OF INFORMAL CAREGIVERS OF OLDER PATIENTS WITH CANCER

104. Maass, SWMC  
LONG-TERM PSYCHOLOGICAL DISTRESS IN A POPULATION-BASED COHORT OF EARLY BREAST CANCER SURVIVORS AND THEIR MATCHED CONTROLS

19. Nekhlyudov, L  
DEVELOPING A FRAMEWORK FOR MEASURING QUALITY OF CANCER SURVIVORSHIP CARE

44. Rasmussen, LA  
ACTIVITY IN GENERAL PRACTICE PRECEDING A DIAGNOSIS OF CANCER RECURRANCE
11.10 - 12.20 Orals Early Diagnosis / Round Room

Chair: Fiona Walter

12. Emery, JD
THE RAGE PROJECT: A STEP-WEDGE IMPLEMENTATION OF RAPID ACCESS GASTROINTESTINAL ENDOSCOPY (RAGE) SERVICES IN MELBOURNE, AUSTRALIA

36. Nafees, SN
DEVELOPMENT OF A BEHAVIOUR CHANGE INTERVENTION TO EXPEDITE THE DIAGNOSIS OF SYMPTOMATIC CANCER; FINDINGS FROM AN ONLINE SURVEY OF GENERAL PRACTITIONERS IN WALES

52. Brandenburg, D
POSSIBLE MISSED OPPORTUNITIES FOR DIAGNOSING COLORECTAL CANCER IN DUTCH GENERAL PRACTICE: A MULTI-METHODS APPROACH

105. Nicholson, BD
A WORD I USE ALMOST EVERY DAY BUT ACTUALLY WHAT DOES IT MEAN?” AN INTERVIEW STUDY OF ENGLISH GPS’ UNDERSTANDING AND PRACTICE OF SAFETY NETTING FOR POTENTIAL CANCER PRESENTATIONS

11.10 - 12.20 Short orals Prevention – Policy / Room 10

Chair: Christine Campbell

108. Weller, D
IMPROVING ORAL AND CERVICAL CANCER OUTCOMES IN RURAL INDIA: A PRIMARY CARE-BASED INTERVENTION USING M-HEALTH TECHNIQUES

31. Mansour, MBL
OPPORTUNITIES FOR A SMOKING CESSATION DISCUSSION WITH FEMALE SMOKERS ATTENDING CERVICAL CANCER SCREENING: AN EXPLORATIVE QUALITATIVE STUDY

48. Usher-Smith, JA
DEVELOPMENT AND VALIDATION OF LIFESTYLE-BASED PREDICTION MODELS FOR THE PREVENTION OF THE MOST COMMON PREVENTABLE CANCERS

50. Merriel, SWD
HUMAN PAPILLOMAVIRUS (HPV) VACCINATION FOR YOUNG MEN WHO HAVE SEX WITH MEN (YMSM) IN PRIMARY CARE: INSIGHTS FROM THE YOUNG HIMMS STUDY

68. Mills, K
DEVELOPMENT AND USABILITY TESTING OF A VERY BRIEF INTERVENTION FOR PERSONALISED CANCER RISK ASSESSMENT TO PROMOTE BEHAVIOUR CHANGE IN PRIMARY CARE

12.20 Lunch
13.20 – 14.30 Orals Early Diagnosis / Round Room

Chair: Richard Neal
27. Shephard, EA
SELECTION OF MEN FOR INVESTIGATION OF POSSIBLE TESTICULAR CANCER IN PRIMARY CARE: A LARGE CASE-CONTROL STUDY USING ELECTRONIC PATIENT RECORDS.
56. Lawrenson, RA
DIFFERENCES IN THE PRESENTATION OF BREAST CANCER IN NEW ZEALAND WOMEN
97. Marzo, M
DIAGNOSING OVARIAN CANCER IN PRIMARY CARE: RESULTS FROM THE CATALAN DIAGNOSIS AUDIT (OVACC STUDY)
16. Callister, ME
LUNG CANCER STAGE SHIFT FOLLOWING A SYMPTOM AWARENESS CAMPAIGN
111. Percac-Lima, S.
BRIDGING PRIMARY CARE, RADIOLOGY AND ONCOLOGY: LUNG CANCER SCREENING NAVIGATION FOR CURRENT SMOKERS IN COMMUNITY HEALTH CENTERS A RANDOMIZED CONTROLLED TRIAL

13.20 – 14.30 Short orals Survivorship / Room 9

Chair: Daan Brandenburg
2. Miedema, B
STILL BUILDING THE BRIDGE! BARRIERS TO TRANSITIONING TO PRIMARY HEALTH CARE FOR CANCER FOLLOW-UP CARE
7. Urquhart, R
SURVIVORSHIP CARE PLANS: DISCREPANCIES BETWEEN WHAT RCTS ASSESS AND WHAT STAKEHOLDERS EXPECT FROM THEIR USE
8. Wieldraaijer, T
COLORECTAL CANCER PATIENTS’ PREFERENCES FOR TYPE OF CAREGIVER DURING SURVIVORSHIP CARE
25. Akker, M. van den
CRITICAL REFLECTIONS CONCERNING COMBINED IN-DEPTH INTERVIEWS WITH OLDER PATIENTS WITH CANCER AND THEIR INFORMAL CAREGIVERS
33. Roscoe, J
PARTNERSHIP IN PROSTATE CANCER CARE: THE FEASIBILITY OF AN INTEGRATED SYSTEM TO IMPROVE PATIENT OUTCOMES AND EXPERIENCE. ICARE-P
55. Bock, GH de
PATIENTS’ EXPECTATIONS AND PREFERENCES REGARDING CANCER FOLLOW-UP CARE
64. Gimferrer, N
BREAST CANCER PATIENTS: HOSPITAL AND PRIMARY CARE SHARED CARE
106. Kanguru, LK
SURVIVAL FOLLOWING DIAGNOSIS OF A SECOND PRIMARY CANCER (SPC): A NATIONAL LINKAGE STUDY IN SCOTLAND
113. Heins, MJ
LONG-TERM EFFECTS OF DIFFERENT BREAST CANCER TREATMENTS
5. Urquhart, R
ADVANCE CARE PLANNING WITH CANCER PATIENTS: DESIGN AND TESTING OF A TAILORED COMMUNICATION SKILLS TRAINING WORKSHOP

13.20 – 14.30 Short orals Prevention – Policy / Room 10

Chair: Greg Rubin
Short orals Prevention - Policy
115. Lyratzopoulos, Y
WHICH ASPECTS OF PATIENT EXPERIENCE PREDICT SATISFACTION WITH CARE? EVIDENCE FROM THE ENGLISH CANCER PATIENT EXPERIENCE SURVEY
79. Noteboom, EA
IMPLEMENTATION OF A TIME OUT CONSULTATION IN PRIMARY CARE BEFORE TREATMENT DECISION FOR PALLIATIVELY TREATED CANCER PATIENTS: A MIXED METHODS PILOT STUDY EVALUATING PATIENTS’ AND PHYSICIANS’ EXPERIENCES
60. Stegmann, ME
CORRESPONDENCE BETWEEN PRIMARY AND SECONDARY CARE ABOUT PATIENTS WITH CANCER: A DELPHI CONSENSUS STUDY
14. Murchie, P
DOES RURALITY IMPACT PROCESSES AND OUTCOMES OF MELANOMA CARE? RESULTS FROM A WHOLE-SCOTLAND MELANOMA COHORT
17. MacDonald, LA
CANCER RESEARCH UK FACILITATORS: A BRIDGE BETWEEN CANCER STRATEGIES AND CHANGE IN PRIMARY CARE
42. Milley, K
LOOK WHO IS TALKING NOW: CANCER IN PRIMARY CARE ON TWITTER
72. Lofters, AK
DISPARITIES IN BREAST CANCER DIAGNOSIS FOR IMMIGRANT WOMEN IN ONTARIO AND BC: RESULTS FROM THE CANIMPACT STUDY
84. Barnett, KN
EXAMINING THE IMPACT OF MULTIMORBIDITY ACROSS THE CANCER CARE CONTINUUM – A DATA LINKAGE STUDY INVESTIGATING BOTH COLORECTAL AND LUNG CANCER
70. Hansen, DG
BUILDING BRIDGES: VIDEO-ASSISTED COMMUNICATION BETWEEN A CANCER PATIENT, THE GENERAL PRACTITIONER AND THE ONCOLOGIST TESTED IN A RANDOMIZED CONTROLLED TRIAL
51. Merriel, SWD
PREDICTING PROSTATE CANCER PROGRESSION: RETROSPECTIVE COHORT STUDY IDENTIFYING PROGNOSTIC FACTORS FOR PROSTATE CANCER OUTCOMES USING ROUTINE PRIMARY CARE DATA

14.30  Coffee/tea/soft drinks

15.00 – 16.00  Workshops / Room 9 + 10

Workshop I / Room 9
69. Walter, FM; Emery, J; Neal, RD; Lyratzopoulos, Y; Hamilton, W
EVALUATING CANCER DIAGNOSTIC TESTS FOR PRIMARY CARE

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Workshop II / Room 10
20. Roope, R; Bauld, L; Llewellyn-Date, K
BEHAVIOUR CHANGE AND CANCER PREVENTION. MINUTES IN A CONSULTATION TO SAVE YOU TIME - SAVE A LIFE.

15.00 - 16.00  Blue Room

Chair: Larissa Neklyudov
Prof. Kevin Oeffinger, director Duke Center for Onco-Primary Care and Duke Supportive Care & Survivorship Center, Duke Cancer Institute

MEET & GREET
15.00 – 16.00  E-posters / Round Room

Chair: Mariken Stegmann

4. Douma, LN
DO PEOPLE WITH A DIFFERENT REGULATORY FOCUS MAKE DIFFERENT DECISIONS ABOUT COLORECTAL CANCER-Screening participation?

10. Duijts, SFA
BARRIERS AND FACILITATORS REGARDING (RETURN TO) WORK AND EXPERIENCED CHANGES IN EMPLOYMENT STATUS OF BREAST CANCER SURVIVORS 5-10 YEARS AFTER DIAGNOSIS

11. Boer, AGEM de
THE ROLE OF THE GENERAL PRACTITIONER IN RETURN TO WORK AFTER CANCER – A SYSTEMATIC REVIEW

15. Bongaerts, THG
DIFFERENTIAL ATTENDANCE RATES IN DUTCH NATIONAL CANCER SCREENING PROGRAMMES

102. Koo, M
PRESENTING SYMPTOMS OF CANCER AMONG TEENAGERS AND YOUNG ADULTS: PRELIMINARY FINDINGS FROM THE BRIGHTLIGHT COHORT

29. Högberg, C
DIAGNOSIS OF COLORECTAL CANCER AND INFLAMMATORY BOWEL DISEASE: SYMPTOMS AS PERCEIVED BY PATIENTS AND DOCTORS AND Faecal Immunochemical Test Results

38. Moriarty, YC
IMPROVING CANCER SYMPTOM AWARENESS AND HELP-SEEKING AMONG PEOPLE LIVING IN SOCIOECONOMICALLY DEPRIVED COMMUNITIES USING THE ONLINE HEALTH CHECK: A PROTOCOL FOR THE AWARENESS AND BELIEFS ABOUT CANCER (ABACUS) RANDOMISED CONTROL TRIAL

40. Hultstrand Ahlin, C
PATIENTS’ PRESENTATION OF BODILY SENSATIONS – AN OBSERVATIONAL STUDY OF, INTERACTION, NEGOTIATION AND SHARED UNDERSTANDINGS AMONG PATIENTS AND HEALTHCARE PERSONNEL AFTER IMPLEMENTATION OF STANDARDIZED CANCER PATIENT PATHWAYS

43. Habgood, EH
IDENTIFYING THE PREVALENCE OF PATIENTS AT INCREASED RISK FOR MELANOMA IN AUSTRALIAN GENERAL PRACTICE

46. Holt Jessen, N
CANCER PATIENT PATHWAYS AND INVESTIGATIONS IN THE YEAR PRECEDING A DIAGNOSIS OF AN ABDOMINAL CANCER

47. De Burghgraeve, T
TOGETHER IN LINE, THE POWER OF INFORMAL CARE IN GROUP

49. Smits, S
PROTOCOL FOR THE DEVELOPMENT OF A BRIEF DECISION AID FOR LOW-DOSE ASPIRIN USE AS A PREVENTIVE STRATEGY FOR BOWEL CANCER ALONGSIDE SCREENING

67. Perfors, IAA
INVOLVING THE GENERAL PRACTITIONER DURING CURATIVE CANCER TREATMENT: A SYSTEMATIC REVIEW OF HEALTH CARE INTERVENTIONS

16.00  Comfort break, switch to Blue Room

Blue Room
Chair: Annette Berendsen

16.10  Dr. Wanda de Kanter, pulmonologist, Netherlands Cancer Institute
WHY SHOULD ALL DOCTORS CARE ABOUT PREVENTION?

17.00  Closing remarks

18.30 Conference dinner at Pudding Factory Groningen
### Friday 20 April 2018

<table>
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<th>Time</th>
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<tr>
<td>7.00</td>
<td>Ca-PRI run 5 km around Groningen (meet at Academy Building from 6.50-7.00)</td>
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<td>8.20</td>
<td>Welcome and registration with coffee/tea</td>
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**Blue Room**

8.50  Good morning & practicalities  
**Chair:** Marjolein Berger, head Dept. General Practice & Elderly Care Medicine
9.00 - 9.25  
Prof. Roger Jones, editor of the British Journal of General Practice
TRENDS IN PRIMARY PUBLISHING: MAXIMIZING THE MESSAGE FOR REAL LIFE PRACTICE

9.25 Comfort break, switch to rooms

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| 9.35 – 10.45 | Orals Survivorship / Room 9  
**Chair:** Saskia Maass  
13. Murchie, P  
DOES RURALITY PREDICT POORER CANCER SURVIVAL? – AN INTERNATIONAL META-ANALYSIS AND NARRATIVE SYNTHESIS OF EVIDENCE FOR POTENTIAL MECHANISMS  
54. Wharam, JWF  
IMPACT OF HIGH-DEDUCTIBLE INSURANCE ON BREAST CANCER CARE AMONG LOWER-INCOME WOMEN  
95. Boer, H  
SHARED-CARE FOLLOW-UP AFTER CHEMOTHERAPY FOR TESTICULAR CANCER SURVIVORS  
76. Chima, S  
PUBLISH OR PERISH: MAPPING PUBLICATIONS OF CANCER IN PRIMARY CARE IN THE LAST 5 YEARS  
100. Geerse, OP  
IT TAKES TWO TO TANGO: A QUALITATIVE STUDY OF SERIOUS ILLNESS CONVERSATIONS IN PATIENTS WITH ADVANCED CANCER

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| 9.35 – 10.45 | Short orals Early Diagnosis I / Round Room  
**Chair:** Henk van Weert  
9. Jensen, H  
CANCER SUSPICION AND URGENT REFERRAL IN RELATION TO A PERSON’S USUAL CONSULTATION PATTERN IN GENERAL PRACTICE  
18. McCutchan, GM  
UNDERSTANDING THE INFLUENCES ON EARLY LUNG CANCER SYMPTOM PRESENTATION AND INTERVENTION PREFERENCES IN HIGH RISK GROUPS: A QUALITATIVE STUDY  
24. Adam, R  
THE ROLE OF PATIENTS’ FACIAL CUES IN MODIFYING GENERAL PRACTITIONERS’ SUSPICIONS ABOUT CANCER  
35. Hvidberg, LH  
WHEN THE GP HAS A CANCER SUSPICION AT FIRST PRESENTATION: WHICH PATIENTS ARE NOT URGENTLY REFERRED?  
37. Rubin, GP  
DIAGNOSING CANCER IN PRIMARY CARE: RESULTS FROM THE ENGLISH NATIONAL CANCER DIAGNOSIS AUDIT |
58. Swann, R
NATIONAL CANCER DIAGNOSIS AUDIT: AVOIDABLE DELAYS TO DIAGNOSIS
45. Witt, J
QUALITY IMPROVEMENT TO DRIVE THE EARLY DIAGNOSIS OF CANCER: LESSONS FROM THE NATIONAL
CANCER DIAGNOSIS AUDIT IN ENGLAND
39. Bradley, S
SENSITIVITY OF CHEST X-RAY FOR LUNG CANCER: SYSTEMATIC REVIEW
41. Law, RJ
THE DEVELOPMENT OF A PRIMARY CARE INTERVENTION TO EXPEDITE THE DIAGNOSIS OF SYMPTOMATIC
CANCER; FINDINGS FROM INTERVIEWS WITH GPS AND FOCUS GROUPS WITH PRACTICE TEAMS
118. Donker, GA
GENERAL PRACTITIONER’S CANCER-RELATED GUT FEELINGS RELATED TO TRIGGERS AND DIAGNOSIS — A
PROSPECTIVE COHORT STUDY

9.35 – 10.45 Short orals Early Diagnosis II / Room 10

Chair: Henry Jensen
Short orals Early Diagnosis

61. Erp, NF van
TIME TO REFERRAL FOR RELATIVELY UNCOMMON CANCER TYPES IN THE NETHERLANDS
62. Humphrys, E
EXPLORING SYMPTOM EXPERIENCE AND HEALTH LITERACY IN THE TIMELY DIAGNOSIS OF OESOPHAGEAL AND
GASTRIC CANCER: A QUALITATIVE STUDY
71. Hirst, Y
ATTITUDES IN PRIMARY CARE TOWARDS FAecal IMMUNOCHEMICAL TESTS IN PATIENTS AT INCREASED RISK
FOR COLORECTAL CANCER: EVIDENCE FROM A UK BASED GENERAL PRACTITIONER SURVEY
73. Von Wagner, C
GENERAL PRACTITIONERS’ AWARENESS OF THE RECOMMENDATIONS FOR FAecal IMMUNOCHEMICAL TESTS
(FIT) FOR SUSPECTED LOWER GASTROINTESTINAL CANCERS: A NATIONAL SURVEY
80. Hendry, A
A QUALITATIVE STUDY OF THE PRESENTATION OF POTENTIAL LUNG CANCER SYMPTOMS IN SMOKERS
96. Scott, KCL
BRACED: THE BRAIN TUMOUR EARLY DETECTION STUDY OF PATIENT PERSPECTIVES ON FACTORS AFFECTING
TIMELY DIAGNOSIS OF PRIMARY BRAIN TUMOURS
103. Nicholson, BD
THE DIAGNOSTIC PERFORMANCE OF FAecal IMMUNOCHEMICAL TESTING IN PATIENTS MEETING THE 2015
NICE GUIDELINE CRITERIA FOR SUSPECTED COLORECTAL CANCER IN PRIMARY CARE
110. Round, T
ASSOCIATION BETWEEN USE OF URGENT CANCER REFERRAL PATHWAYS AND SURVIVAL: A 5 YEAR NATIONAL
COHORT STUDY
22. Walter, FM
HOW CAN ELECTRONIC CLINICAL DECISION SUPPORT (ECDS) FOR MELANOMA BE EFFECTIVELY
IMPLEMENTED? A QUALITATIVE STUDY OF GPS AND PATIENTS IN ENGLISH PRIMARY CARE.

10.45 Coffee/tea
11.15 – 12.15  Workshops in Room 9 + 10

Workshop I / Room 9

32. Neal, RD; Law, RJ; Nafees, S; Brain, K; Smits, S
DEVELOPMENT OF A PRIMARY CARE BEHAVIOUR CHANGE INTERVENTION TO EXPEDITE THE DIAGNOSIS OF SYMPTOMATIC CANCER: A MULTI-DIMENSIONAL APPROACH

Workshop II / Room 10

82. Harrison, SL; Nekhlyudov, L; Ireland J
BUILDING BRIDGES BETWEEN PRIMARY AND SECONDARY CARE: IS SPEED DATING AN OPTION?

11.15 – 12.15  E-posters / Round Room

Chair: Saskia Duijts, UMCG

53. Ablett-Spence, I
DEVELOPMENT AND IMPLEMENTATION OF A NOVEL QUESTIONNAIRE TO EVALUATE PATIENT EXPERIENCE OF THE MDC PATHWAY

57. Lawrenson, RA
IMPROVING EARLY ACCESS TO LUNG CANCER DIAGNOSIS FOR MAORI AND RURAL COMMUNITIES

59. McGregor, LM
USING PRIMARY CARE TO HELP INCREASE UPTAKE OF BOWEL SCOPE SCREENING IN YORKSHIRE: A PROTOCOL

63. Humphrys, E
TIMELY DIAGNOSIS OF OESOPHAGEAL AND GASTRIC CANCER: QUANTITATIVE RESULTS FROM A MIXED-METHODS STUDY

66. Reguilon, I
INTERNATIONAL VARIATION IN CANCER-SPECIFIC ‘ACCESS TO DIAGNOSTICS’ DATA: AN INTERNATIONAL CANCER BENCHMARKING PARTNERSHIP STUDY

74. Campbell, C
THE EXPERIENCE OF LIVING WITH AND BEYOND CANCER WITH COMORBID ILLNESS: A QUALITATIVE SYSTEMATIC REVIEW

75. Lifford, K
THE IMPACT OF THE WELSH BOWEL SCREENING PROGRAMME ON EMERGENCY PRESENTATION FOR COLORECTAL CANCER

77. Wollersheim, BHME
PROSTATE CANCER FOLLOW-UP CARE IN SECONDARY AND PRIMARY HEALTH CARE (PROSPEC STUDY): STUDY PROTOCOL FOR A RANDOMISED CONTROLLED TRIAL

83. Bikker, A
SECOND PRIMARY CANCERS: A MIXED-METHODS SYSTEMATIC REVIEW OF PATHWAYS TO DIAGNOSIS

86. Baun, M-L LB ladegaard
OVARIAN CANCER OUTCOME AND VARIATION IN REFERRAL RATES FOR TRANSVAGINAL ULTRASOUND EXAMINATION FROM GENERAL PRACTICE

87. Calanzani, N
UNDERLYING ASSUMPTIONS AND MECHANISMS ABOUT THE DETECT CANCER EARLY (DCE) PROGRAMME IN SCOTLAND

88. Walabyeki, J
DESIGNING A LUNG HEALTH MEDIA CAMPAIGN USING STAKEHOLDER ANALYSIS WORKSHOPS

89. Magdalena, ME
VALIDITY OF THE “GUT FEELINGS” OF FAMILY PHYSICIANS FOR THE DIAGNOSIS OF SERIOUS DISEASE AND CANCER: A STUDY PROTOCOL

90. McCutchan, GM
DEVELOPMENT OF PERSONALISED RISK INFORMATION TO PROMOTE SMOKING CESSATION IN A LUNG CANCER SCREENING CONTEXT
12.15      Lunch

13.00 – 14.00    Blue Room
Chair: Greg Rubin
Sigrid Attema, Dutch Cancer Society; Stephen Taplin, NCI, USA; Sara Hiom, Cancer Research UK; Jon Emery, Cancer Australia and Jess Søgaard, Danish Cancer Society

WHAT DRIVES THE STRATEGY FOR FUNDING?
How do we get primary care on the agenda? Panel discussion after short presentations

14.00 Comfort break, switch to rooms

14.10 – 15.10    Workshops / Room 9 + 10

Workshop III / Room 9
6. Walter, FM; Nicholson, B; Anderson, RS; Black, G; Humphrys, E
OPTIMISING PATIENT-GP COMMUNICATION TO IMPROVE EARLY CANCER DIAGNOSIS

Workshop IV/ Room 10
34. Virgilsen, LFV; Offerson, SO; Turner, MT; Fielding, SF; Murchie, PM
THE LONG AND WINDING ROAD - EXPLORING THE IMPACT OF DISTANCE ON CANCER EXPERIENCES

14.10 – 15.10    E-posters / Round Room

Chair: Olaf Geerse, UMCG
91. Korevaar, J
INCIDENCE OF LOCAL BREAST CANCER RECURRENCE: A SYSTEMATIC REVIEW
92. Khan, Z
FEASIBILITY OF THE IMPLEMENTATION OF CYTOSPONGE™ AS A TRIAGE TEST FOR REFLUX SYMPTOMS IN PRIMARY CARE: BARRETT’S ESOPHAGUS SCREENING TRIAL 3 (BEST3)
93. Weller, D
DEVELOPING INTEGRATED CANCER CARE IN EUROPE
94. Stokmans, SC
DAILY LIFE ACTIVITIES COMPROMISE INTESTINAL INTEGRITY IN COMMUNITY-DWELLING OLDER ADULTS: A PILOT STUDY
98. Calanzani, N
A SYSTEMATIC REVIEW OF HEALTH SYSTEM LEVEL INITIATIVES PROMOTING THE EARLIER DIAGNOSIS OF CANCER AMONG THE ADULT POPULATION
99. Bertels, LS
GENERAL PRACTITIONERS’ PERSPECTIVES ON BOWEL CANCER SCREENING: A QUALITATIVE INTERVIEW STUDY FROM A DUTCH CONTEXT
101. O’Malley, D
TOWARD PATIENT-CENTERED SURVIVORSHIP CARE: A QUALITATIVE EXPLORATION OF A PRIMARY CARE BASED HEALTH COACHING INTERVENTION TO IMPROVE SELF-MANAGEMENT IN POST-TREATMENT CANCER SURVIVORS
21. Nekhlyudov, L
INTERNATIONAL GUIDELINES FOR POST-TREATMENT CANCER SURVIVORSHIP CARE: WEB-BASED REVIEW
107. Senghor, AS
SOCIAL ENVIRONMENT OF OUTPATIENTS. SOCIAL INEQUALITIES AND SOCIO-TECHNICAL NETWORKS
109. McPhail, S
PATIENT PATHWAYS TO DIAGNOSIS, FROM REFERRAL TO PRESENTATION

112. Martins, T
HEALTHCARE USE IN MEN WITH SYMPTOM OF POSSIBLE PROSTATE CANCER

114. Patel, KP
INFLUENCING CONFIDENCE AND INTER-PROFESSIONAL COLLABORATION THROUGH ONLINE LEARNING FOR CANCER CARE AT THE PRIMARY CARE LEVEL

116. Lyratzopoulos, Y
UNDERSTANDING ASSOCIATIONS OF ONLINE RESPONSE TO CANCER PATIENT EXPERIENCE SURVEYS WITH PATIENT CHARACTERISTICS, PATIENT EXPERIENCE AND SURVEY NON-RESPONSE

117. Lyratzopoulos, Y
ARE INDICATORS OF CLINICAL QUALITY ASSOCIATED WITH INDICATORS OF DIAGNOSTIC ACTIVITY IN PRIMARY CARE? EVIDENCE FROM ENGLISH GENERAL PRACTICES

15.10 Coffee/tea/soft drinks

Blue Room
15.40
Chair: Daan Brandenbarg
Four best (short) orals: flash presentations and prize-giving

16.00 – 16.30
Chair: David Weller
Next year & Closing remarks

16.30 onwards
Optional events
- Guided tours of the University Medical Center (e.g. Cancer Center, Art in the hospital) or Climbing the Martini tower
- Dinner in the Library of the Martini Church (Martinikerk) offered by Marjolein Berger, head of Dept. General Practice & Elderly Care Medicine