

protection strategies for radiation oncology professionals more prone to undergo BOS. Participants were asked to provide some general information and fill-in 3 different validated questionnaires (TAS-20, IRI, ProQoL) to investigate alexithymia trait, empathy and to quantify eventual BOS. The PRO-BONO initiative, is a valuable way to address an important issue, to analyze it and to define management strategies for individuals at risk of developing BOS.

OC-0327 The PRO BONO survey (PROject on Burn-Out in RadiatioN Oncology)

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Purpose or Objective

Burn-out syndrome (BOS) is a stress-related syndrome, particularly frequent within Oncology professionals and staff. It may affect performance within the working environment and impact on individual physical and mental well-being. Personality traits may predispose to develop BOS. Alexithymia is a psychological construct describing deficits in emotion processing and awareness. Empathy is the ability to share and understand another's 'state of mind' or emotion. The PROject on Burn-Out in RadiatioN Oncology (PRO BONO study) was developed to explore BOS in the field of radiation oncology and to investigate whether personality traits such as alexithymia and empathy may potentially affect the likelihood to develop BOS.

Material and Methods

An anonymous survey was conducted online using the web-based platform Survey Monkey (www.surveymonkey.com), addressed to ESTRO members, reached out via e-mail, social media or through the collaboration of National Societies. All professionals within ESTRO were involved (radiation oncologists, medical physicists, radiation therapists, radiobiologists). Participants were asked to provide specific individual and professional information and fill-in 3 different validated questionnaires to investigate alexithymia trait, empathy and to quantify BOS, namely the Toronto Alexithymia Scale (TAS-20), the Interpersonal Reactivity Index (IRI) and the Professional

Quality of Life Scale (ProQoL). Answers were collected and results analysed by the Young ESTRO Committee.

Results

The survey is still open for response. So far, a total of 1958 ESTRO members took part, from 94 different countries and 5 continents. Male were 56%, female 44%. Most of respondents were radiation oncologists (53%), while radiation technologists were 26%, medical physicists 20% and radiobiologists 1%. As for educational level of respondents, most of them were MD (44%), MSc (18%) or BSc (13%), being in the field of radiation oncology for < 5 year (28%) or between 11 and 20 years (27%). Up to 49% of them had on-call duties. Most of them (84%) pointed out that medical practice affected their private life. They felt valued by their patients in 88% of cases (not enough:12%) and by their supervisor in 72% (not enough:28%). Up to 32% had a 1-year leave from work. Preliminary results using Person correlation coefficient (PCC) showed a significant correlation (PCC=0.82) between a higher score (>61) on TAS-20 and a higher score (>57) on the burn-out subscale of the ProQoL questionnaire. A higher score for Empathy Concern within the IRI questionnaire was also significantly correlated (PCC =0.79) to higher burn-out on ProQoL.

Conclusion

The PRO BONO study provided an overview on BOS, alexithymia and empathy in radiation oncology professionals worldwide. Personality traits such as alexithymia and empathy seem to be correlated to the likelihood to develop BOS. After the upcoming end of the study, detailed analysis on subset population and individual domains within administered questionnaires will better clarify the scenario.

SP-0328 Report back from ESTRO mobility grants clinical: SRS and SBRT in the management of oligometastatic disease

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Abstract text

Concept of oligometastatic state, proposed by Hellman and Weichselbaum, implies that "there exists a subset of patients with limited volume metastases in whom treatment of oligometastatic sites impacts survival". Randomized studies have demonstrated that surgical treatment of oligometastatic lesions can improve survival. Stereotactic body radiotherapy (SBRT) and Stereotactic Radiosurgery (SRS) has emerged as an attractive alternative or as an adjuvant to surgical resection. In this report we would like to review: the results of ablative radiotherapy for the intracranial and extracranial (lung, liver, spine) oligometastases; recent attempts to identify the patients with limited number of metastases who mostly benefit from aggressive local treatment; data addressing fractionation regimens in regard to feasibility and safety of ablative radiotherapy for various localization, volume and size of metastases and short summary of my experience at the University Hospital Turin. Aiming to develop the concept of stereotactic body radiotherapy and radiosurgery and introduce it in the clinical practice, we have set up collaborations and engaged discussion with Georgian colleagues. This process was enhanced by my visit to the department of Prof. Umberto Ricardi thanks to the mobility grant. Sharing the expertise of this department and inspiring our self from the irradiation protocols developed by Prof. Umberto Ricardi and his group, now we are treating this group of patients with oligometastatic disease and keeping institutional registry. The accumulating clinical data could be used in future to draw conclusions for safe and beneficial implementation of the existing guidelines.

SP-0329 Modelling Head and Neck Radiotherapy outcomes using radiomics biomarkers