

ERN eUROGEN registry

Report on Expertise Area 3.2

INTRODUCTION

This report entails the first ERN eUROGEN registry retrospective analysis of the Expertise Area 3.2: Testicular cancer. This report aims to give insight in the current clinical practices using the Clinical Practice Snapshot data about the patients entered. As retrospective data entry is still ongoing for the majority of HCPs, not all HCPs have reached the minimum of 30 retrospective patients per Expertise Area, yet. Only HCPs which entered more than 5 patients for 3.2 Testicular cancer were included in these analyses. As patient numbers are not similar, the results cannot be equally compared between HCPs, but the analyses give an indication of trends. Please keep in mind that only Stage II and Stage III patients are included in the analyses, as only those patients are eligible for Clinical Practice Snapshot data entry.

The Clinical Practice Snapshots should only contain data about the first year of treatment, which starts at the date the patients first visits the ERN eUROGEN HCP for testicular cancer. However, sometimes information outside the 1-year window was added, and at other times, the dates are unknown. If this occurs, we interpreted this variable for this patient as 'Not performed'. An example: A patient had the first visit to the hospital (start treatment) at 23-01-2021, and the RPLND surgery took place at 08-02-2022 (more than a year after the start of treatment). This surgery should not be entered in the Clinical Practice Snapshot of the ERN eUROGEN registry. If this information was there, we interpreted it as 'No RPLND'.

Please keep in mind these reports are meant to inform you about some general treatment characteristics using the Clinical Practice Snapshot data, not to perform in-depth statistical analyses. If you have any suggestions about information to add to these reports, or to delete because the information is not relevant, please let us know and it will be taken into account for the next report.

EA 3.2; TESTICULAR CANCER

Descriptive statistics

The table below provides an overview of the descriptive statistics for patients from Expertise Area 3.2, testicular cancer. Corresponding figures were made of the variables, and they are displayed on the next pages.

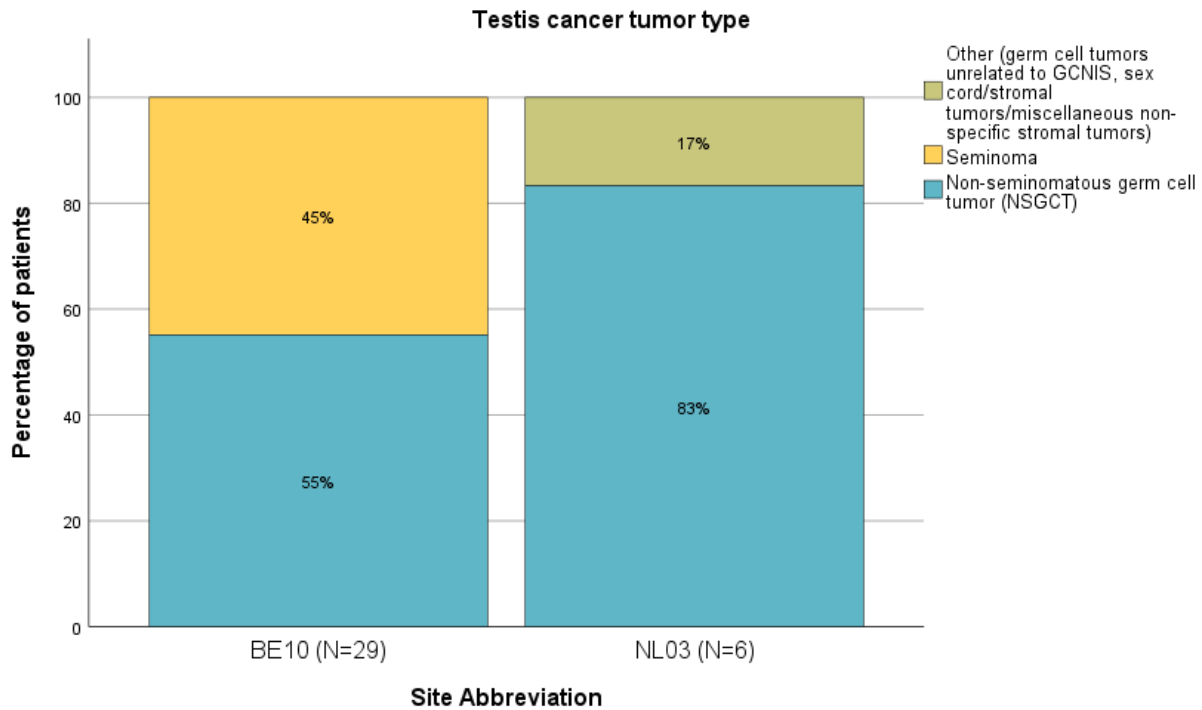
	Total (N=36)	Belgium BE10 (N=30)	Netherlands NL03 (N=6)
Diagnostics			
Type of tumor (filled in for 35 patients (97.2%))			
Seminoma; N (%)	13 (37.1%)	13 (44.8%)	-
Non-seminomatous germ cell tumor; N (%)	21 (60.0%)	16 (55.2%)	5 (83.3%)
Other; N (%)	1 (2.9%)	-	1 (16.7%)
Clinical stage of disease (filled in for 35 patients (97.2%))			
Stage II; N (%)	25 (71.4%)	21 (72.4%)	4 (66.7%)
Stage III; N (%)	10 (28.6%)	8 (27.6%)	2 (33.3%)
Prognosis of disease (filled in for all patients)			
Good; N (%)	25 (69.4%)	21 (70.0%)	4 (66.7%)
Intermediate; N (%)	7 (19.4%)	6 (20.0%)	1 (16.7%)
Poor; N (%)	3 (8.3%)	2 (6.7%)	1 (16.7%)
Unknown; N (%)	1 (2.8%)	1 (3.3%)	-
Value LDH (filled in for all patients)			
Prechemotherapy (U/L); Median (range)	193 (166;860)	193 (166;284)	203.5 (171;860)
Postorchietomy nadir (U/L); Median (range)	182 (142;2236)	183 (142;2236)	159 (153;165)
RPLND surgery			
RPLND performed at HCP (filled in for 35 patients (97.2%))			
Yes; N (%)	19 (54.3%)	13 (44.8%)	6 (100%)
No; N (%)	16 (45.7%)	16 (55.2%)	-
Preoperative imaging (filled in for 19 patients (52.7%))			
CT; N (%)	18 (94.7%)	12 (92.3%)	6 (100%)
MRI; N (%)	2 (10.5%)	1 (7.7%)	1 (16.7%)
PET-CT; N (%)	4 (21.1%)	1 (7.7%)	3 (50.0%)
Type of RPLND surgery (filled in for 19 patients (52.7%))			
Open surgery; N (%)	15 (78.9%)	10 (76.9%)	5 (83.3%)
Laparoscopic surgery; N (%)	2 (10.5%)	1 (7.7%)	1 (16.7%)
Robotic surgery; N (%)	2 (10.5%)	2 (15.4%)	-
RPLND as pre-chemotherapy or primary treatment (N=19)			
Primary treatment; N (%)	6 (31.6%)	4 (30.8%)	2 (33.3%)
Pre-chemotherapy; N (%)	13 (68.4%)	9 (69.2%)	4 (66.7%)
RPLND performed unilateral or bilateral (N=19)			
Unilateral; N (%)	12 (63.2%)	9 (69.3%)	3 (50.0%)
Bilateral; N (%)	5 (26.3%)	2 (15.4%)	3 (50.0%)
Unknown; N (%)	2 (10.5%)	2 (15.4%)	-
RPLND level of nerve-sparing (filled in for 18 patients (50.0%))			
Unilateral nerve-sparing; N (%)	-	-	-
Bilateral nerve-sparing; N (%)	-	-	-
Not nerve-sparing; N (%)	1 (5.6%)	-	1 (16.6%)
Unknown; N (%)	17 (94.4%)	12 (100%)	5 (83.3%)
Intraoperative complications (filled in for 19 patients (52.7%))			
Yes; N (%)	1 (5.3%)	-	1 (16.7%)
No; N (%)	18 (94.7%)	13 (100%)	5 (83.3%)
Postoperative complications (filled in for 19 patients (52.7%))			
Yes; N (%)	3 (15.8%)	2 (15.4%)	1 (16.7%)
No; N (%)	16 (84.2%)	11 (84.6%)	5 (83.3%)
Follow-up			
Recurrence of tumor (filled in for all patients)			
Yes; N (%)	1 (2.8%)	1 (3.3%)	-
No; N (%)	45 (97.2%)	29 (96.7%)	6 (100%)

LDH: Lactate dehydrogenase; startdat. of trt: startdate of treatment; RPLND: Retroperitoneal Lymph Node Dissection

Diagnosis

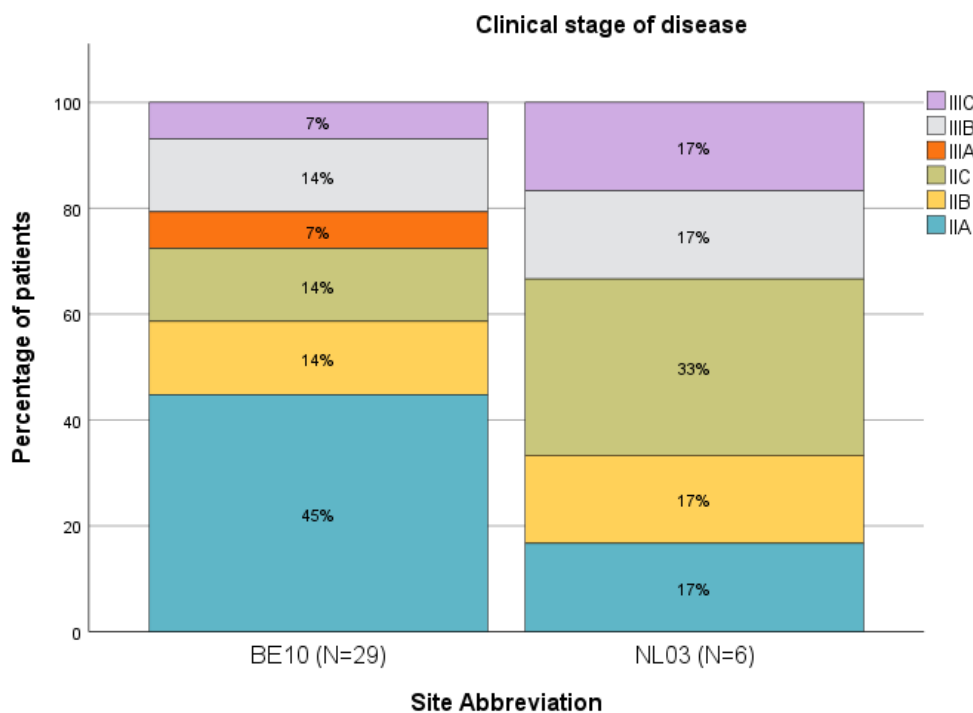
Type of tumor

The majority of patients was diagnosed with NSGCT, followed by seminoma.



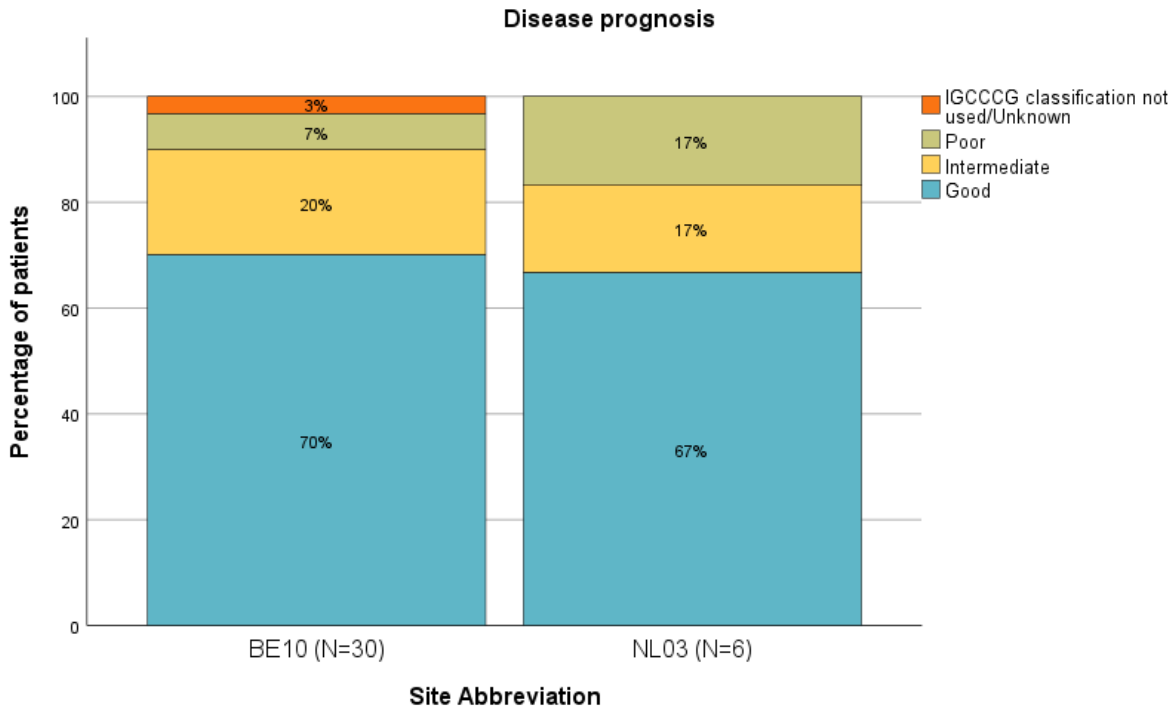
Clinical stage of disease

There is great variety in the clinical stage of disease for patients of both BE10 and NL03.



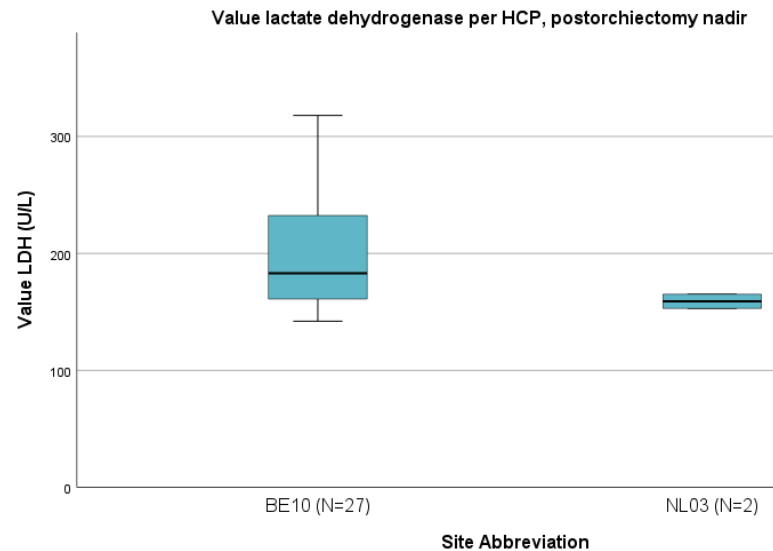
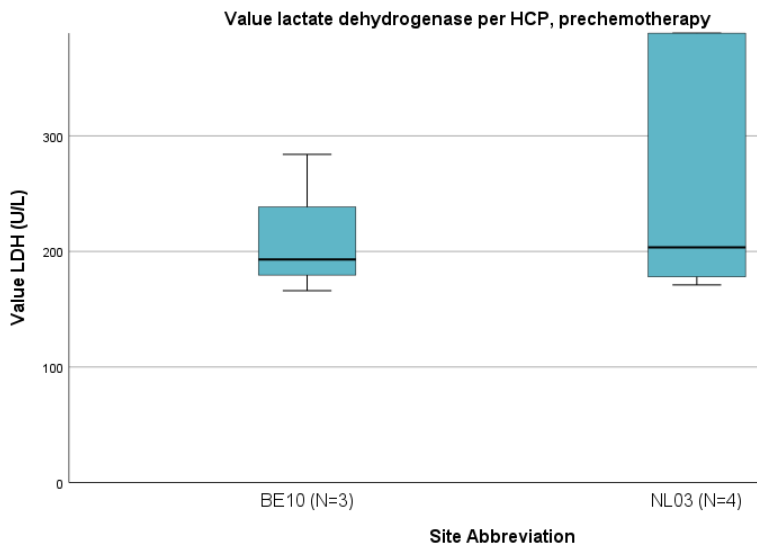
Disease prognosis

Most patients have a 'good' disease prognosis according to the IGCCCG classification, but also 'intermediate' and 'poor' disease prognosis occur.



LDH measurements

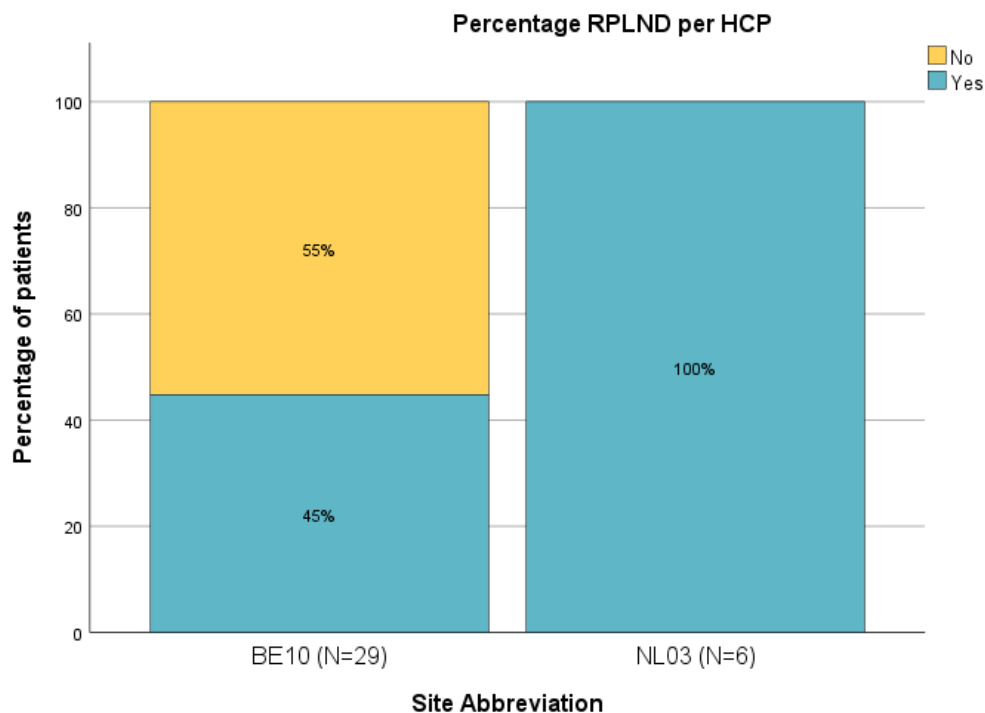
Boxplot of LDH measurement taken at different timings, prechemotherapy and post orchietomy nadir. The black line in the boxplots represents the median.



Surgery

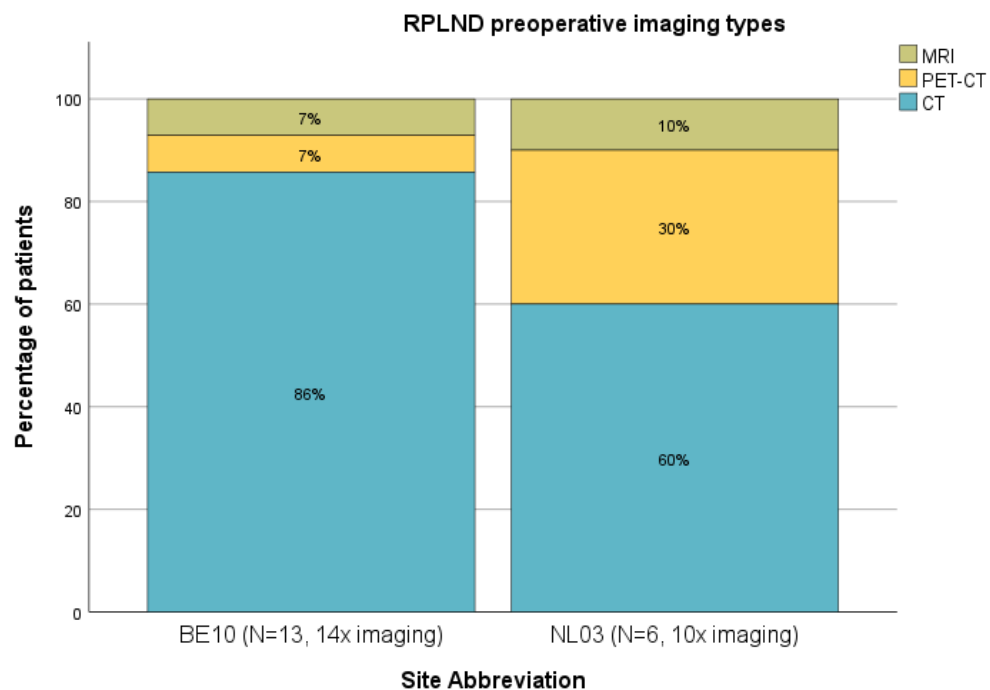
RPLND performed

RPLND was performed for all patients of NL03 and for almost half of BE10 patients.



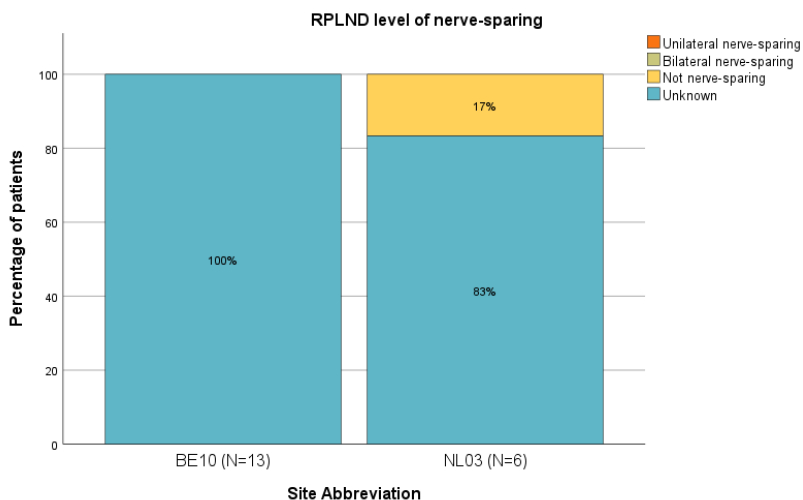
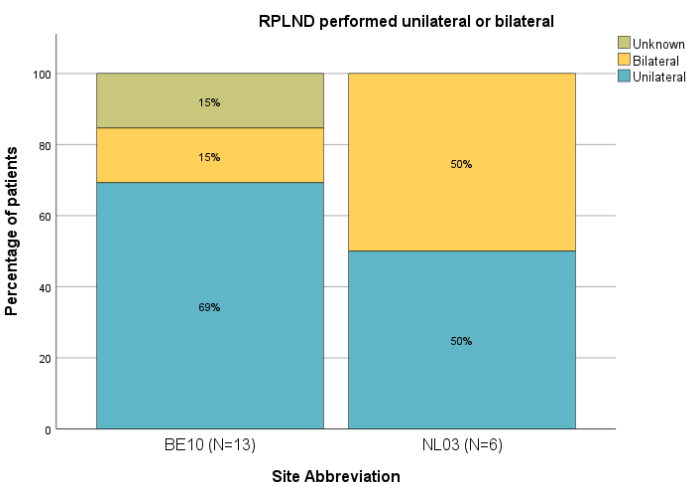
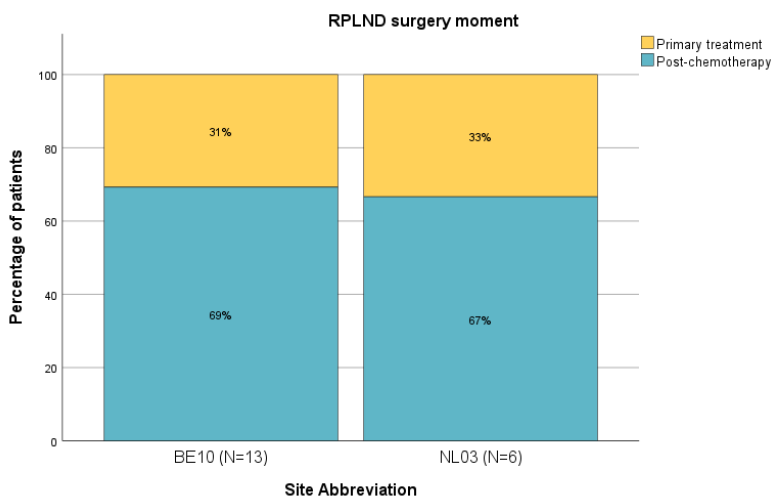
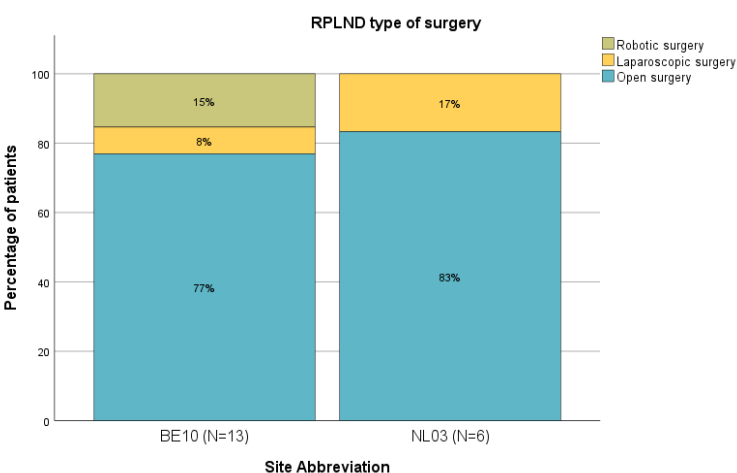
Preoperative imaging

Most patients of BE10 had a preoperative CT scan, a few patients had a PET-CT or MRI. NL03 patients all had a preoperative CT scan, but also PET-CT and MRI scans were done for some patients.



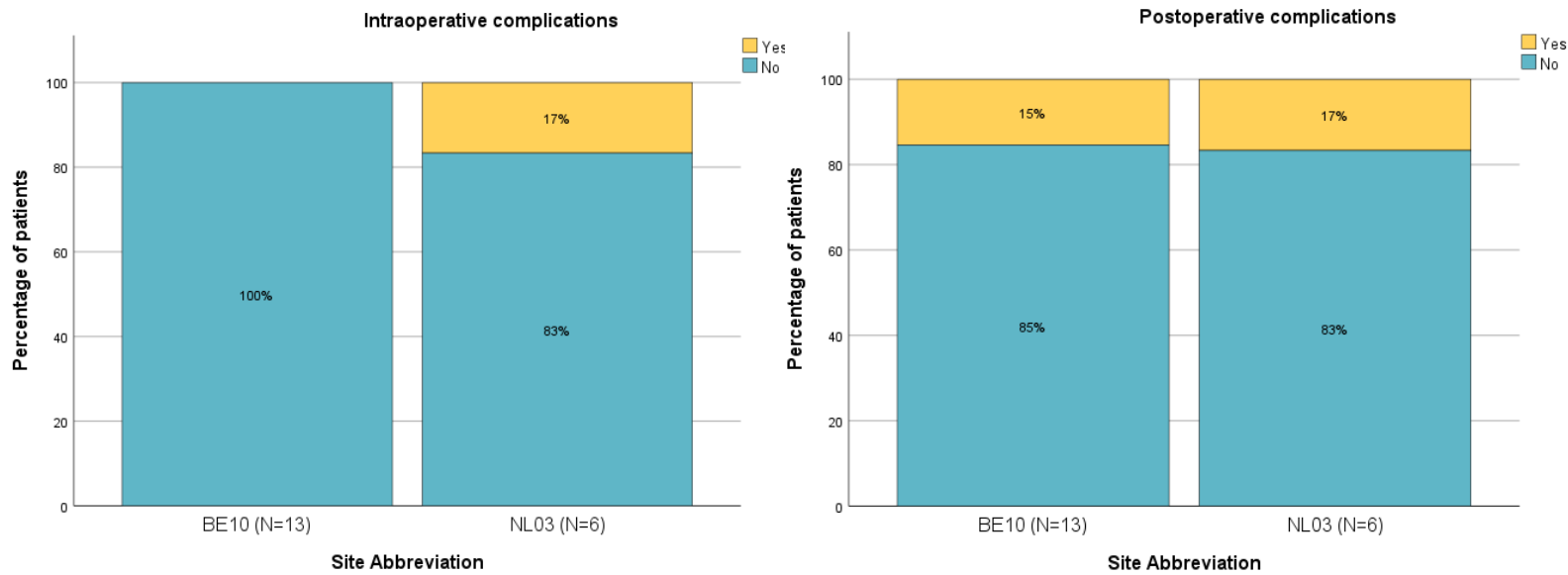
RPLND surgery characteristics

Below an overview of multiple RPLND surgery characteristics can be found. Most surgeries were open surgeries in both HCPs. Surgeries occurred as both primary treatment and post-chemotherapy, with a majority of the surgeries being post-chemotherapy. In BE10, RPLND was performed mostly unilateral, where in NL03 RPLND was performed equally bilateral and unilateral. Information about the surgery being nerves-sparing was unknown for most patients.



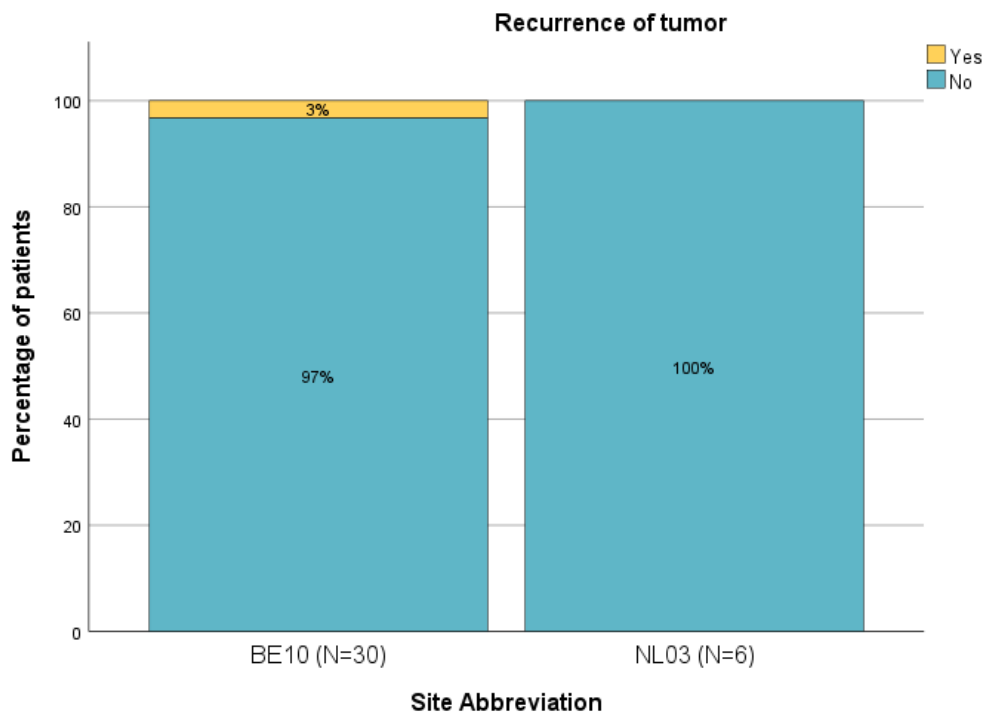
Complications after surgery

Most patients did not have any intra- or -postoperative complications. Most complications occurred postoperative.



Recurrence of tumor

Besides 1 patient in BE10, no patients had a recurrence of their tumor within 1 year after the start of their treatment.





<http://eurogen-ern.eu/>



Funded by
the European Union

ERN eUROGEN is one of the 24 European Reference Networks (ERNs) approved by the ERN Board of Member States. The ERNs are co-funded by the European Commission. For more information about the ERNs and the EU health strategy, please visit <http://ec.europa.eu/health/ern>