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ABSTRACT

It is widely documented that germ cell tumours (GCT) are highly curable, however, there is little attention in the literature regarding long term side effects (Shamash et al., 2020). Chemotherapy is the cornerstone of GCT treatment.

Cisplatin based regimes cause both acute and long-term side effects including hair loss, nausea and vomiting, acute kidney injury, infections, and mucositis. Longer terms complications include second malignancies, reduced lung function, hearing damage, peripheral neuropathy, metabolic syndrome, infertility, and cardiovascular disease, (Shamash and Ng, 2023).

However, we wanted to explore if there are late effects amongst GCT patients who did not undergo chemotherapy and opted for surveillance. Therefore, the purpose of this poster is to highlight the prevalence of late effects amongst our surveillance cohort, and to hopefully improve GCT survivorship through earlier late effects management.

METHODS

We collected historic data from 335 GCT patients following the surveillance guidelines from diagnosis as per the Anglian Germ Cell Cancer Collaborative Group (AGCCCG) for up to 10 years and highlighted any patient that had reported a late effect.

This included **endocrine issues, hypertension, hyperlipidaemia, fertility**, as well as **psychological concerns**, any **lifestyle advice** offered, or any new issues related to their GCT diagnosis. We decided to look at year 5 and year 10 as this is when the guidelines recommend hormone and lipid bloods, and therefore we anticipated to pick up more late effects.

RESULTS

Year 5: 37 patients reported a late effect.

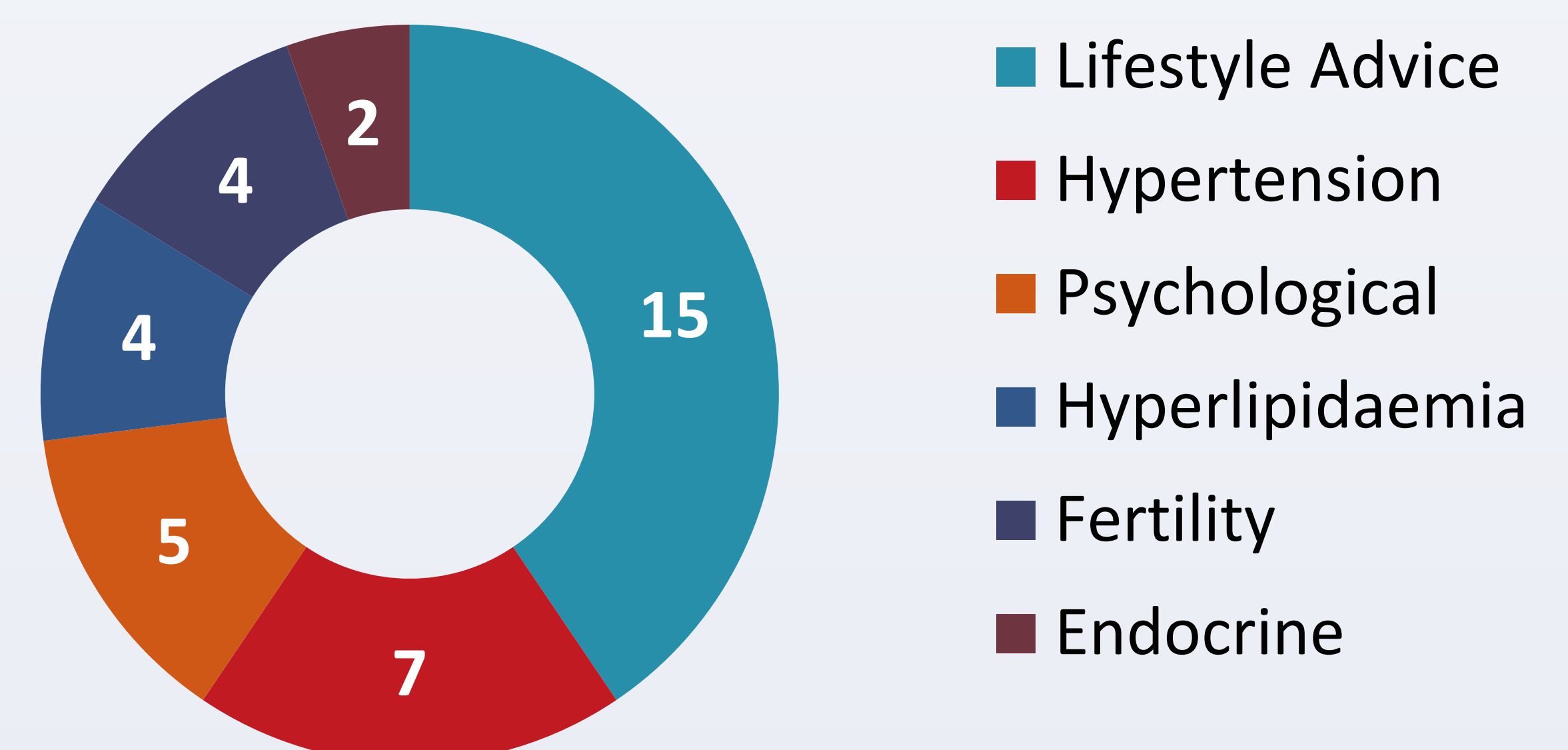
Year 10: 10 patients reported a late effect with no fertility or endocrine issues reported.

The CNS team at Bart's run nurse-led clinics in the GCT practice and note that although the number above is relatively low, albeit significant to our patients, patients do present with late effects throughout their 10 year follow-up at Bart's and this is addressed as and when a concern is mentioned in our clinics.

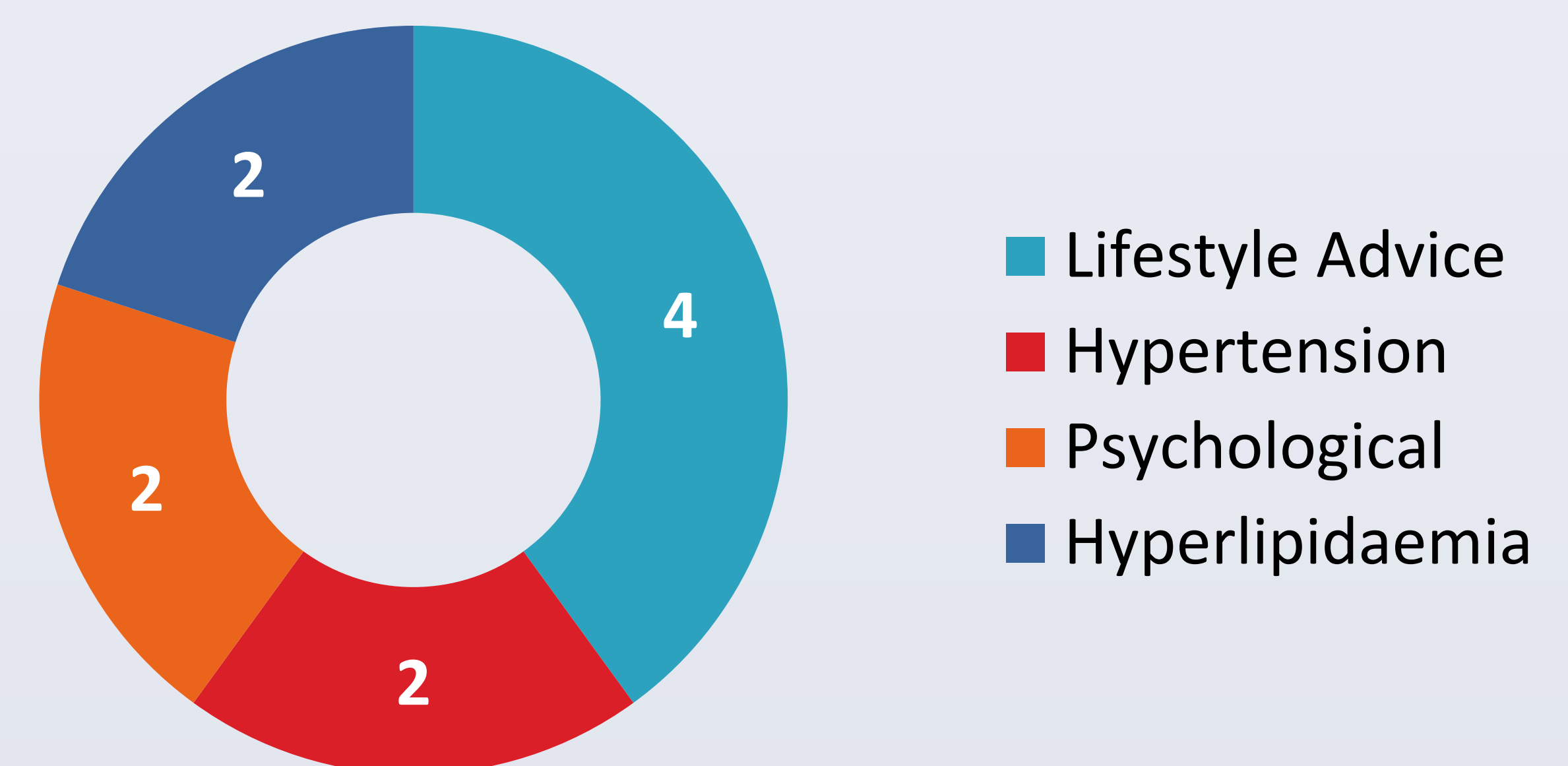
The majority of patients in year 5 and year 10 are offered lifestyle advice, such as healthy eating, weight loss, smoking cessation advice etc.

RESULTS CONTINUED

Year 5: Reported Concerns



Year 10: Reported Concerns



CONCLUSION

The findings pose a genuine need for late effects to be monitored and managed amongst GCT patients to improve quality of survivorship.

The late effects mentioned in the methods section should be addressed at each follow-up appointment, as through experience there are occasions when a patient will not report a concern if they do not believe it could be related to their diagnosis. It is only when specifically asked where the patient will be more likely to report a potential late effect.

Future work could explore those patients who were metastatic at diagnosis or had adjuvant chemotherapy, as it is believed those patients will present more late effects than those on surveillance from diagnosis.

REFERENCES

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