medical social workers. The survey is conducted after obtaining the approval of the Ethics Committee and Academic Committee of the JSNO. Method: As of September 26, this questionnaire is currently underway online and anonymously. The questionnaire includes questions on work environment, home environment (including childcare and nursing care) for understanding work-life balance, existence of problems related to career development, support measures considered necessary, and expectations for WING. Results: As the results of the questionnaire were not available at the time of writing this abstract. However at the presentation we will present the statistical analysis of the survey. Various comparisons of the questionnaire items common to those of the Japan Neurosurgical Society and the Japan Pediatric Society, which were conducted several years before this survey. Conclusion: Respect for diversity is increasingly important in the field of neuro-oncology. Surveys are important for the future success of our diverse community, and we believe that this survey will be an important milestone.

Key words: women in neuro-oncology | diversity | gender equality | questionnaire survey | carrier development

COT-29

THE JAPAN BRAIN TUMOR ALLIANCE: ACHIEVEMENTS IN 2020–2021: HIGHLIGHTS FOR NEURO-ONCOLOGISTS AND HEALTHCARE PROFESSIONALS

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Brain tumors are a major shock at diagnosis for patients and their families, and the journey is hectic, impacted in various and complex ways, including acute and chronic episodes. The Japan Brain Tumor Alliance is a non-profit organisation, established in 2006 to support patients and their families. As our key activity, JBTA offers nation-wide patient support through patient-gathering meetings with and without health care professionals to openly share needs, issues and concerns, partly summarized and shared in the scientific field (Gatellier, 2021, OT Journal, vol 55 no.3, 257–259; Gatellier, 2021, MASCC Annual Meeting). JBTA actively collaborates with the International Brain Tumor Alliance, with recent outcome of an international survey featuring the brain-tumor patient and caregiver experience during COVID-19 pandemic (Voisin et al., 2020, Neuro-oncology advances, 2(1), vdaa104). As part of collaboration with healthcare professionals in 2020–21, JBTA achievements include the review of clinical guidelines (as part of Patient and Public Involvement activity), information-sharing events with the Japan Clinical Oncology Group and the seminar with a group including occupational therapists. In addition, to highlight patients' needs and priorities to the neuro-oncology community, since March 2020, JBTA shares the Japanese translation of the monthly IBTA e-newsletter broadcasting the latest and most relevant scientific, community information and brain tumor-related events around the world to healthcare professionals and brain tumor patients and families in Japan. These enlightening events place JBTA in an ideal position to lead research in the direction most meaningful to brain tumor patients.

Key words: Quality of Life | patients' priorities | Patient Public Involvement

COT-30

EFFECT OF TUMOR RESECTION IN 11C METHIONINE ACCUMULATION AREA ON SURVIVAL IN PATIENTS WITH GLIOBLASTOMA

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Aim: The amount of tumor excised in an area enhanced by contrast medium on magnetic resonance imaging strongly affects the survival time of patients with glioblastoma. We investigated the effect of the amount of tumor removal in the 11C methionine (MET) accumulation site on overall survival(OS). Methods: Twenty-six patients (15 male; mean age, 68.9 years) with a diagnosis of glioblastoma who underwent tumor resection at Kizawa Memorial Hospital between June 1, 2015 and August 30, 2021 underwent MET-positron emission tomography (MET-PET) before and after the operation. In a comparison of MET-PET before and after tumor resection, the tumor-to-normal (T/N) ratio reduction (ΔT/N), MET accumulation area reduction (MET-extent of resection [EOR]), and the residual MET accumulation volume (MET-residual tumor volume [RTV]) were calculated. The relationship between these MET-related parameters associated with tumor resection and OS was investigated via univariable analysis. Results: Univariate analysis revealed that ΔT/N was significantly associated with OS (hazard ratio [HR]: 0.98; 95% confidence interval [CI]: 0.97–0.99; p=0.02). MET-RTV was also significantly associated with OS (HR: 1.01; 95% CI: 0.98–1.02; p=0.73) Conversely, MET-EOR (HR: 0.99; 95% CI: 0.97–1.01; p=0.06) was not significantly associated with OS. Conclusions: Aggressive surgical resection of the MET accumulation site significantly prolongs survival in patients with glioblastoma.

Key words: glioblastoma | ^{11}C methionine | survival

COT-31

RISK FACTORS FOR THE DEVELOPMENT OF SKIN RASH WITH LEVETIRACETAM AND LACOSAMIDE IN PATIENTS WITH GLIOMA

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Introduction: Seizure control of in glioma patients is essential for quality of life. The new generation anti-seizure drug (ASD) is represented by lacosamide (LCM) and levetiracetam (LEV), and is said to have few side effects of eruption. We retrospectively analyzed the incidence of rash and related factors of the ASD, evaluated the safety of patients with glioma, and conducted a comparison with the evaluation of patients with meningioma. Method: We calculated the incidence of rash in patients who underwent glioma resection at our Hospital from January 2017 to December 2019 and were prescribed LEV or LCM, and compared it with the same incidence in meningioma patients. Multivariate logistic regression analysis was used to analyze the risk factors for the ASD-related eruption. Result: The subjects were 353 gliomas and 125 meningiomas who received LEV or LCM.The median ages are 44 ± 14.8 and 58 ± 13.2, respectively, and the male-female ratio is 203/150 and 53/72. There was no difference in the incidence of eruptions between the two groups, LEV and LCM, and the incidence of ASD-related eruptions was 11% (39/353) for gliomas, significantly higher than 1.6% (2/125) for meningiomas (p = 0.006). The incidence of ASD-related eruptions in glioma patients was not significantly different between the LEV group (10% (21/216)) and the LCM group (13% (20/154)) (p = 0.53). In a multivariate analysis of risk factors for eruption, chemoradiotherapy (p = 0.01), history of drug allergy (p = 0.039) was significantly higher. Conclusion: The incidence of LEV and LCM eruptions in glioma patients was higher than that in meningioma patients, and it was speculated that the treatment course specificity was more important than the disease-specific factors. Patients with glioma, especially those who have undergone chemoradiotherapy or have a history of drug allergies, require careful confirmation of the eruption.

Key words: anti-seizure drug | lacosamide | levetiracetam