**Aim:** The Medical Doctor’s (MD) perspective of supportive care in cancer (SCC) in France was previously assessed on a national survey. However, the opinion of patients (P) has never been evaluated nor compared to MD’s perception. We promoted and compared P and MD awareness via national surveys to monitor implementation and information delivered to patients on SCC.

**Methods:** The French Speaking Association for SCC (AFSOS) conducted two observational studies, analyzed with a Chi2 test: - **S1:** a 30 points questionnaire sent to 2,263 physicians caring for cancer P (oncologists, radiotherapists, haematologists, gastroenterologists). - **S2:** a 40 points questionnaire performed by physicians to P, using a face-to-face method.

**Results:** 711 MDs returned S1 and S2 was conducted with 1,562 P. In S1, MDs declared relying on SCC organization (81%) but 19% of P declared they were offered to benefit from an organization called SCC (54% at diagnosis, 35% after complication). The name SCC was known by 34% of P, most frequently described as complementary care to specific treatments (55%). Palliative Care word had been previously heard by 80% P, mostly considered as care to improve quality of life during cancer treatment for 59%. In S2, professional resources identified outside the hospital were: General Practitioners (84%), Nurses (58%), Pharmacists (52%). According to P, the top 3 supportive care consultations proposed were psychology (61%), nutrition (55%) and announcement organization (55%), while MDs mentioned palliative care (98%), psychological care (98%), social care (98%). S2 showed that supportive treatment was prescribed to 63% of P, mostly by their oncologist (74%), and 64% of those P received information on adverse events respectively for 38% and 53%. MDs declared delivering information on adverse events for 49% of P receiving epoetin and to 74% of P running for analgesic treatment.

**Conclusions:** Oncologist is the cornerstone of SCC organization. Information as well as treatment must be developed to further enhance SCC and patient quality of care.

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