

Are you organising an annual meeting or conference which you would like to tell our readers about?
Or would you like to write a report on a meeting or conference of particular interest?
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BNOS 2016 Conference, “Trials, Technologies and T-cells”

Date: 29 June – 1 July 2016. **Venue:** Leeds, UK. **Report by:** Maryanne Roach on behalf of the BNOS Council and BNOS 2016 organising committee. The full report is available on the BNOS website www.bnos.org.uk



British Neuro-Oncology Society

Approximately 250 attended “Trials, Technologies and T-cells” in Leeds 29th June – 1st July 2016. First was the Education Day: five paired presentations by scientists and clinicians. Then: plenary sessions, proffered papers, posters, a special session for allied health professionals, and lunchtime seminars and exhibitions by sponsors. Plenary sessions were filmed, and will be made available on the BNOS website. BNOS awarded bursaries to five younger applicants.

Invited speakers were: Bernhard Radlwimmer (German Research Center), Laura Evgin (Mayo Clinic), Nicola Sibson (Oxford Institute for Radiation Oncology), Stephanie Combs (ISAR Hospital, Munich), Richard Gilbertson (University of Cambridge), Luisa Ottobri (University of Milan), Gelareh Zadeh (University of Toronto) and Sebastian Bradner (University College, London).

Social and networking opportunities were not ignored with a Welcome Reception at Leeds City Museum and Conference Dinner at the Royal Armouries Museum (after a most entertaining demonstration by two knights in medieval armour!)

Many presentations revolved around the set-up, testing and quality assurance of novel assay techniques. It is easy to forget that before research can progress, the methodological techniques themselves, be they innovative assays, imaging or mathematical modelling methods, have to be developed, optimised and standardised. One centre is even using an MDT approach when treating its mice!

Next generation sequencing is now central to research and diagnosis; the identification of particular genetic mutations present in sub-groups of specific brain tumours were discussed, with some evidence of differential response to treatment. Attendees were encouraged to contact their local NHS Genomic Medical Centre with a view to

taking part in the Genomics England 100,000 Genome Project, now extended to include adult gliomas and specified other brain tumours.

The 2016 WHO classification combines histopathological features and molecular biomarkers. Some of the latter (e.g. IDH mutation and ATRX loss) can be easily tested with antibodies whilst TERT promoter mutation and 1p/19q loss are not yet available in all centres. Greater demands are therefore being placed on traditional diagnostic imaging techniques eg deduction of IDH mutation status from MR and spectroscopy, diffusion tensor MRI, concurrent spectroscopy and MRI, optical imaging by means of bioluminescence and fluorescence etc.

70-80% of neuro oncology patients are treated by means of radiotherapy so it is appropriate that efforts are being made to improve radiotherapy planning e.g. by fusing CT with MRI and use of MR-integrated LINACs.

There has been a rapid move into various types of immune-viro therapy: vaccines, oncolytic viruses, checkpoint inhibitory monoclonal antibodies, and adoptive cell transfer with chimeric antigen receptor (CAR) T cells. The great variety of mechanisms of action ensures that an enormous number of combinations are possible, both with other immune-mediated therapies, of the same or different class, and with conventional chemo radiotherapy. However there are significant challenges to be overcome in terms of clinical endpoints and adverse effects.

It is not saying anything new to emphasise the enormous challenge that we face. We are not short of ideas – rather the opposite. There are a vast number of hypotheses as to the basis for the heterogeneity and plasticity of glioma, and its invasive and migratory capacity. In addition, one must consider the many (cause or effect?) inter-relationships between genomics, proteomics and metabolomics, and the

impact of the tumour on normal brain metabolism and, vice versa, the effect on the tumour of its micro-environment. One could be forgiven for thinking that the advent of genomic screening has made the situation even worse by characterising so many genetic lesions and aberrations requiring investigation (although we are at least able to better predict prognosis and response to current treatment in some tumours on the basis of these molecular variations). There are a plethora of putative treatment targets but we still seem far off significant clinical progress.

On the one hand, there is the search for ever more specific and highly targeted, personalised therapies (that the NHS may never be able to afford?) whilst, on the other hand, the heterogeneity of the disease soon renders these ineffective, meaning that one either steps back to broader epigenetic strategies or devises ever more complex combinations of modalities with differing and, often cascading, mechanisms of action.

Prizes

Best presentation prize: Jason Adhikaree, Nottingham (Enhancement of myeloid dendritic cells through MAPK p38 inhibition promotes T cell proliferation and restores adaptive immunity in GBM patients)

Best scientific poster: Chiara Moriconi, Cardiff (Caveolin-1 implicated as a pro-invasive gene in high-grade glioma cell models: Implementation of a 3D spheroid matrix invasion assay)

Best clinical poster: Ingela Oberg, Cambridge (Nurse-led telephone clinics improve patient satisfaction and enhance follow-up for benign / low grade tumour patients)

**BNOS 2017 will be held from
21-23 June in Edinburgh**

ESMO 2016: From disease treatment to patient care

Date: 7-11 October 2016. **Venue:** Copenhagen, Denmark.

Preview

ESMO 2016 Congress will be held in the beautiful city of Copenhagen, Denmark, between 7-11 October.

"ESMO 2016 will be a fabulous platform where the most outstanding data are going to be presented," said Andrés Cervantes, Scientific Chair. Nearly 2,900 abstracts were submitted for inclusion within the programme, marking a 70% increase since 2010, when researchers all over the world started to look at the European congress as the place to share their research with the community. "With USA, Italy, Spain, France and Japan being the top five submitters, the ESMO 2016 Congress will be a truly international convention at which to learn about the latest advances in cancer, discuss clinical challenges and share best practices in order to improve patient treatment and care.

Around 60 late-breaking abstracts were submitted, anticipating breakthrough research findings with implications for clinical practice. Top submissions were in the fields of non-small-cell lung cancer, colorectal and gastrointestinal



cancers, genitourinary tumours and immunotherapy, in addition to other important results in less common research areas.

Three high-quality keynote lectures will offer congress attendees a sharp insight into the evolution of cancer research and patient care, offering thought-provoking interdisciplinary discussion:

- J Allison: The development of checkpoint inhibitors
- E Voest: The art of the possible: Bridging the gap between genomics and patient care?
- J Soria: The patient journey: Is cancer cure around the corner?

ESMO 2016 will also represent the first ESMO annual congress, as announced last year: "Holding an annual congress will allow us to accommodate the rapid pace of progress in the field and to fulfil our mission of promoting education and disseminating knowledge to guarantee

the best patient care," said ESMO Past-President Rolf A Stahel.

"Equipping our members to fight cancer more effectively is ESMO's principal goal," said ESMO President, Fortunato Ciardiello. "Cancer patients and their needs are at the center of all that we do: our profession is driven by our determination, individually and collectively, to secure the best possible outcomes for people with cancer across Europe and around the world."

The ESMO 2020 Vision is a confirmation of such determination, promoting integrated cancer care, providing specialised education and advocating for sustainable cancer care.

Make sure you don't miss the ESMO 2016 Congress and save the dates for the most influential annual meeting for oncology professionals in Europe.



For further information, please visit: www.esmo.org

Inaugural APM Supportive & Palliative Care (ASP) Conference

Date: 30-31 March 2017. **Venue:** Belfast, UK. **Report by:** Dr Andrew Davies, Chair, The APM Supportive and Palliative Care Conference.

Preview

Abraham Lincoln said "You can please some of the people all of the time, you can please all of the people some of the time but you can't please all of the people all of the time".

The Inaugural APM Supportive and Palliative Care Conference aims to "please" all of the APM membership in terms of its educational content, its social programme and value for money – at least for two days in March 2017!

The organising committee has planned a programme to address the CPD requirements for all – from medical students to established consultants, highlighting new developments within the specialty, e.g. "early palliative care" and also to highlight the challenges for the specialty, e.g. Shape of Training. Moreover, the conference will consist of a main programme, with concurrent parallel sessions, so that delegates will always have a choice of sessions to attend. The conference will also include the APM's Annual General Meeting.

The main programme will include

invited lectures and submitted presentations relating to new research, service evaluations (service developments) and audits. Confirmed speakers include;

- Professor Janelle Yorke, who will give the Abe Guz Lecture
- Professor Bee Wee, who will discuss EOLC
- Dr Richard Berman, who will present on early palliative care and the Christie Hospital model
- Professor Karen Forbes, who will speak about the SCE.

In addition, there will be the Fiona Hicks Memorial Lecture, which will relate to her enduring passion for Palliative Medicine education and training. We will confirm the speaker for this session in due course.

The parallel sessions have been organised in conjunction with our invited partner organisations, e.g. the Irish Palliative Medicine Consultants Association (IPMCA) and the All Ireland



Institute of Hospice and Palliative Care (AIHPC). As well as formal sessions, there will be more informal "meet the expert" sessions, to discuss a range of topics from careers advice for Junior and SSAS Doctors to undertaking research and medical writing.

In addition to the educational programme, there will be ample opportunity to network with colleagues and to sample the "active" social scene in Belfast. The conference centre is situated close to the city centre and to a number of hotels, restaurants and bars and also the major tourist attractions, e.g. the Titanic Museum, the Crumlin Road Gaol and Game of Thrones tours. Moreover, the people are very friendly and the atmosphere is very relaxed.

So.....book your study leave now - before your colleagues do! And I look forward to seeing you in Belfast next March.