SIOG Presidential Session

Chair
Arti Hurria, SIOG President 2012-2014
Presidential Address

Etienne Brain, SIOG President 2014-2016
SIOG 2014-2016
Etienne GC Brain, MD PhD
Medical Oncology
Hôpital René Huguenin / Institut Curie
Saint-Cloud, France

http://www.siocg.org
Strategy & directions

2012-2014

I. Research and science
   – Conference

II. Education
   – Partnership with other societies, Plexus, Medscape

III. Financial stability and sustainability

2014-2016

I. Promotion of scientific knowledge

II. Build the future

III. Expand international outreach and dimension
I. Promotion of scientific knowledge (1)

1. **Guidelines** development (new & updates)

2. Access to and use of **geriatric tools**

3. Research
Age distribution for patients enrolled onto National Cancer Institute (NCI) adult cooperative group phase II and III treatment trials (all diseases) from 2001 to 2011.

Hurria A et al. JCO 2014;32:2587-2594
I. Promotion of scientific knowledge (2)

- **Research** (no question of sponsoring!)
  - Highlight the gaps with unsolved questions
  - Support initiatives from cooperative groups as a facilitator
  - Disseminate and emphasize the practical use of results from research developed by our members (PACE & PREOP, CRASH, CARG, etc.)
  - Promote new methodology
    - Relevant endpoints (preservation of function, cognition and independence)
    - Move from extrapolation to evidence-based health cares
    - Address both over- and under-diagnosis & treatment
    - De-escalation issues
    - Harness and take maximum advantage of targeted therapies & innovation vs conventional treatment (chemo) in order to limit side effects
    - Call for a certain degree of assessment of life expectancy to balance treatment decision
    - Pharmaco-economic issues

“We need less research, better research, and research done for the right reasons” *(Douglas Altman)*

→ “what is value in health care?”
II. Build the future (1)

1. To breathe new/young life
   - Young SIOG committee
   - Increase emphasis on young participation
     - Mentorship
     - Education
     - Fellowships and grants

2. Look for inspirations from AYA & paediatrics (similar challenges)
   - Grapple with age definition
   - Cross all tumours
   - Have a supportive care focus
II. Build the future (2)

3. **Increase the community**
   - Nursing and allied health committee

4. **Increase multisciplinarity**
   - Surgery, XRT, med onc, biostat, pharmacologist, scientist/biologist, etc.
   - Making sure that nobody is left behind
We live in an era of unprecedented, rapid and inexorable global ageing.
III. Expand international outreach and dimension

1. **Yearly regional events** (APAC, LATAM, Middle East) alternating with the annual conference
   - Singapore APAC (2014) → follow-up
   - 2015-2016 → LATAM, Middle East, etc.

2. **Workshops in low and middle income countries**

3. Make full use of **trans- and cross-cultural skills** → **Enrich** the overall perspectives/standpoints
Two worlds confronting one another?

- **Young patient**
  - Social and family obligations (children)
  - Quantity of life +++

- **Oncology**
  - Therapies and innovation
  - Toxicity, response, survival
    - RECIST
    - NCI CTC v4.0
    - Survival (DFS, PFS, OS)
  - Fast-moving world
  - "Molecular portrait" of tumour & GEP

- **Elderly patient**
  - QoL+++
  - Independence
  - Staying at home

- **Geriatrics**
  - Symptoms, diagnosis
  - Quality of survival, i.e. amount of life with good QoL
  - Cognition
  - Functional status
  - QoL
  - Nutrition, etc.
  - Requiring time
  - "Global portrait" of patient & CGA

**vs or +?**
FEC, AACR, FAC, ASCO, CMF, DXR, PK/PD, CEX, 5FU CDDP, Calvert AUC, ESMO, Chatelut AUC, CTC, population PK, FOLFIRI, FOLFOX 7, CPA, DFS, DDFS, OS, TTP, NCI, CYP P450, JCO, JNCI, HER2, PI3K, mTOR, Phase 0, ECCO, ib and ab, etc.

Charlson, CIRSG, CGA, MNA, GDS, MMS, ADL, IADL, e-prognosis, EUGMS, GFI, CMR2, JAGS, G8, CARG, Oncodage, VES-13, TRFs, JGO, NIA, Walter’s score, Lee’s score, CRASH, p16^ink4a, etc.
All of this will help to breathe life from the Lisbon success towards the Prague dream…
2014 Paul Calabresi Award

2014 Recipient
Martine Extermann, MD, PhD
H. Lee Moffitt Cancer Center, Tampa, USA
Dr. Martine Extermann

Martine Extermann, MD, PhD

H. Lee Moffitt Cancer Center, Tampa, USA

Dr. Martine Extermann is Professor of Oncology and Medicine at the University of South Florida. She is a Senior Member in the Senior Adult Oncology Program at the Moffitt Cancer Center. She earned her medical diploma and her medical PhD at the University of Geneva, Switzerland. She has a Swiss Board Certification in Internal Medicine, specialty Oncology-Hematology. She also holds ABIM certifications in Internal Medicine and Medical Oncology. She has worked at Moffitt since 1994 and has been a faculty member since 1997. Her research focuses on cancer in the elderly. Her main areas of investigation are comorbidity, comprehensive assessment, and prediction/prevention of treatment toxicity in older cancer patients.

She served as Chair of the Eastern Cooperative Oncology Group's Subcommittee on Aging and is presently involved in the South West Oncology Group. She also served as President of the International Society of Geriatric Oncology (SIOG), of which she is also a founding board member. She served on the ASCO Education and Scientific Program Committees, and is an Editorial Board member of the Journal of Clinical Oncology. Dr. Extermann was presented at ASCO 2009 with the B.J. Kennedy Award for Scientific Excellence in Geriatric Oncology.
BIG DATA AND GERIATRIC ONCOLOGY: TRANSLATIONAL AND CLINICAL OPPORTUNITIES

Martine Extermann
H. Lee Moffitt Cancer Center
University of South Florida
Tampa, FL, USA
2014 Calabresi Lecture
Also: ASCO’s CancerLinQ, Cancer genome atlas, Etc...
Some representative examples of business level data domains:

- Demographics
- Cancer Stage
- Diagnosis
- Treatment
- Drugs
- Labs

Patient Cohort Examples:

- Newly Diagnosed, Primary Pancreatic, having CEL File
- Primary Breast Cancer, Survival Time >30 months, Disease Stage 1-4, Diagnosed with Type 2 Diabetes, currently on Metformin
- Female with myelodysplastic syndrome, currently taking vidaza as 1st course chemotherapy, initially diagnosed in 2007-2008
Querying the TCC Data Warehouse

http://transmedprod/bisde_identified/bis.silverlight.shell.aspx
Senescence-associated-gene signature identifies genes linked to age, prognosis, and progression of human gliomas

Domenico Coppola\textsuperscript{a,b,c,g,1}, Lodovico Balducci\textsuperscript{d,\ast}, Dung-Tsa Chen\textsuperscript{e,1}, Andrey Loboda\textsuperscript{k}, Michael Nebozhyn\textsuperscript{h,k}, Aileen Staller\textsuperscript{f}, William J. Fulp\textsuperscript{e}, William Dalton\textsuperscript{b,g}, Timothy Yeatman\textsuperscript{b,c,h,j}, Steven Brem\textsuperscript{b,f,h,i,1}

Data obtained using the Total Cancer Care database
Does it make a difference?

![Graph showing cumulative incidence of death from all causes for Standard care and Oncogeriatric care.]

<table>
<thead>
<tr>
<th></th>
<th>Standard care (n = 104)</th>
<th>Oncogeriatric care (n = 42)</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-year overall mortality, %</td>
<td>71</td>
<td>58</td>
<td>-</td>
</tr>
<tr>
<td>Crude mortality, HR (95% CI)</td>
<td>1.61 (0.99–2.63)</td>
<td>1 (reference)</td>
<td>0.057</td>
</tr>
<tr>
<td>Adjusted mortality, HR (95% CI)*</td>
<td>1.59 (0.88–2.87)</td>
<td>1 (reference)</td>
<td>0.125</td>
</tr>
</tbody>
</table>

*Multivariable analyses were adjusted for age and year of diagnosis.

Van de Water et al., J Geriatr Oncol, 2014
Remote consulting

SAOP2 screen at local practice. If +, local CGA evaluation

Oncology work-up. Treatment decision to make?

Formatted feedback & comments

Expert review of treatments & outcomes

Search TCC database for Similar cases
What a database can and cannot do
Can do

- Give you a realistic number estimate for studies and planning
- Assemble data from multiple source in a (more or less) easily accessible and harmonized way
- Give you access to genetic, laboratory, and clinical information on a large scale
Can not do

Is it clinically significant?
2014 SIOG Nursing & Allied Health Investigators Award

2014 Winner
Cindy Kenis, Belgium

Supported by an unrestricted grant from AMGEN
Cindy Kenis

Cindy Kenis
Geriatric Oncology Nurse
UZ Leuven
Leuven, Belgium

Cindy Kenis has achieved her Bachelor degree in Nursing at KH Leuven (2002) and her Master in Nursing Science at KU Leuven (2005), Belgium. As a geriatric oncology nurse, she is coordinating the largest multicentric studies within the Belgian Cancer Plan (CP) (CP 2009-2011: 10 centres; CP 2012-2015: 22 centres) focusing on the systematic implementation of geriatric screening and assessment in older patients with cancer, followed by geriatric recommendations / interventions and follow-up. Based on her experience, she started a PhD in 2013 within the field of geriatric oncology with the title: ‘Geriatric screening and assessment in older cancer patients’.

O20 – Prognostic value of geriatric screening and assessment for overall survival in older patients with cancer.
2014 SIOG Young Investigators Award

2014 Winner
Maria José Molina-Garrido, Spain
Maria José Molina-Garrido

MJ Molina-Garrido, MD, PhD.
Head of the Division of Cancer in the Elderly
Hospital General Virgen de la Luz
Cuenca, Spain

She studied Medicine at the University of Murcia (Spain) and received her medical degree in 2001. She is a Specialist in Medical Oncology and also holds a Diploma in Geriatrics in the Autonoma University of Barcelona. She has completed a Master in Geriatry and Gerontology in the University of Barcelona. In 2006, she finished her training as an Oncologist (Hospital Universitario de Elche, Alicante-Spain) and now, she concentrates on geriatric assessment, sarcopenia and frailty in elderly cancer patients. In 2011 she was appointed Director of the Division of Cancer in the Elderly in Hospital General Virgen de la Luz in Cuenca, with special responsibilities for research. She has participated in many international clinical trials in cancer and several studies about elderly cancer patients. She is the main author of many international original articles related to cancer in the elderly and is the main designer and the main investigator in research projects related to elderly cancer patients.

2014 SIOG Best Poster Award

2014 Recipient

Emilie Ferrat

P050 – Predictors of One-Year Mortality in a Prospective Cohort of Elderly Patients with Cancer
Thank you
See you in Prague!