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## IPSO Summer newsletter 2007

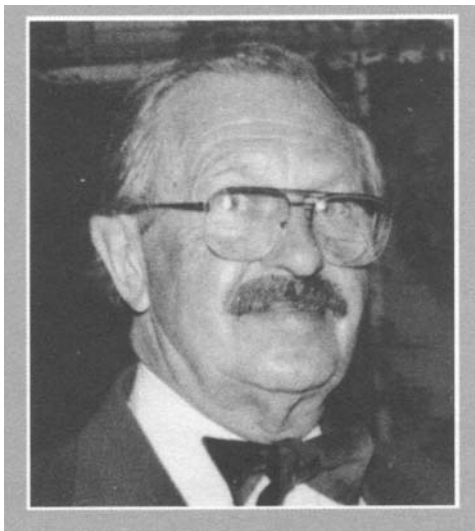
### The IPSO Oncology course (part 3) at the EUPSA meeting in Torino, Italy – May 2007

The third IPSO Oncology course was, as the former two times, organized as a pre-meeting course for Pediatric Surgical Trainees and junior Pediatric Surgeons at the 8<sup>th</sup> EUPSA congress in Torino, Italy. Twenty three participants followed this interactive course on soft tissue sarcoma's (non-rhabdo), thoracic wall tumors, and endocrine tumors. An active and enthusiastic Faculty guaranteed an interactive participation, and lively discussions were the hallmarks of this course, centered on patients' cases and clinical problems. Participants had prepared themselves through the Distance Learning Course that they had received by mail after registering to the course. In the afternoon, the participants presented difficult cases they had prepared, which were at depth discussed by the 'Tumor Board', and the day was concluded with the Assessment of the Candidates with MCQ's on basic science, the Distance Learning Course and material discussed during that day. All candidates received their Certificate and successfully completed the Course.

The participants gave the course a high rating through their evaluation forms, and were specifically were very enthusiastic about its interactive nature. The Executive Board of EUPSA decided to continue the course, and expressed their strong interest to have all three parts repeated.



IPSO Faculty – Goinski, Martelli, Murphy, Jasoni, Aronson, Carachi – and course participants, at the 3<sup>rd</sup> IPSO-EUPSA Oncology Course in Torino,



**In memoriam Professor Philippe R. Exelby, MD, FAAP, FACS, honorary member of IPSO (1928-2007)**

Dr. Philip R. Exelby was a native of Chesterfield, England. As a young man, he joined the Royal Air Force and piloted a Spitfire over Europe and Africa during World War II. He was educated at The Queen's College of The University of Oxford and received his medical degree from the University College Hospital Medical School (Oxon) in 1954. He trained in general surgery at the West Middlesex Hospital in England and came to the United States with a residency in psychiatry, giving him an insight that aided him in his dealings with patients and families for the remainder of his career.

He joined the Department of Surgery at Memorial Sloan-Kettering Cancer Center in New York as a surgical resident in 1965. As an American Cancer Society Fellow, he pursued advanced training in pediatric surgery at the Children's National Medical Center in Washington and at Columbia University, returning to Memorial Hospital to lead a new surgical service—the first unit in the United States devoted exclusively to surgery of childhood malignancies. He became the Chief of the Pediatric Surgical Service from 1970 to 1994, Professor of Surgery at Cornell University Medical Center from 1970 to 1996, Acting Chairman of Pediatrics from 1982 to 1986, and more recently has been named Member Emeritus of Memorial Sloan-Kettering Cancer Center.

He was a pioneer in the development of new surgical techniques for the effective removal of malignant tumors from vital organs. He spearheaded new treatments that integrated surgery with chemotherapy and radiotherapy—treatments that have increased cure rates and prevented damage to normal organs in young children. He accomplished much: publishing his work in over a hundred publications and twenty chapters in books and monographs; training leaders in the field of pediatric surgical oncology; and securing the lives of hundreds of children, now grown to adulthood, who once had cancer. Through his work with the American Cancer Society, he led national efforts to improve treatments for children with cancer. As a founding and active member of IPSO, he was the IPSO surgical representative at the SIOP scientific committee for many years. He was elected as Honorary Member of IPSO in 1997. At his last IPSO meeting in 2000, he presented his very humorous paper 'A Surgeon who recalled the early days of chemotherapy' as an invited speaker.

Dr. Exelby continued this work after his retirement, establishing treatment programs for children with cancer and chronic infections at Bangkok University and, more recently, treating victims of the tsunami. He was a gifted surgeon and a caring physician whose wisdom, skill, infectious humor, and extraordinary humanity enriched us all.

Michael P. LaQuaglia, Memorial Sloan-Kettering Cancer Center, New York  
Daniel C. Aronson, Emma Children's Hospital, Amsterdam

### **News from the Program Committee**

The academic programme for Mumbai has been finalised. The anonymous scoring system has resulted in some inevitable disappointments, and I thank those that have brought them to our attention, but no system is perfect and the Scientific Committee humbly requests the indulgence of the Membership; we are trying very hard to be fair, and to be seen to be fair. The final programme is of high quality with much to interest the Oncological Surgeon. Speakers are reminded that it is planned that they present for 7 minutes allowing 3 minutes for discussion. Chairmen have been asked to be vigilant to prevent a speaker stealing time from those that follow.

In addition to Free Papers there are "Meet the Expert" sessions on Liver Tumours and Rare Tumours, there are sessions on Wilms Tumour held in conjunction with our friends in SIOP, and there is significant input from our colleagues in India giving a different perspective to our deliberations. There will also, as tradition demands, be a Problem Case session. You are all invited to bring Problem Cases as 4 slide Powerpoint presentations. There is no "programme" for this session. If you wish to present a problem, solved or unsolved, contact Dr Dan Aronson or Dr Bruce Broecker at the meeting, and podium time will be allocated on a first come, first served basis. Last but not least, there will be a Master Video Session for which you are all invited to send in video's to dr. Qureshi (Sajid Shafique Qureshi, MD, Tata Memorial Hospital & Research Center, 1/26 Merchant Building, 3<sup>rd</sup> Sankli Street, Byculla, BOMBAY; mail: [ajidshfique@rediffmail.com](mailto:ajidshfique@rediffmail.com)).

Most delegates however attend the Annual Meeting solely in order to listen to the Presidential Address that this year Dr Richard Spicer will deliver on Wednesday 31st October. It is always exciting to hear how the new President plans to take the Society forward.

Prior to the formal IPSO meeting our colleagues in Mumbai, supported by IPSO faculty have arranged a hands-on Surgical Workshop covering many oncological situations. Surgeons in training will find this programme of great interest.

The social programme has been arranged by Dr Susmitha Bhatnagar who I know is very aware of the IPSO traditions of good fellowship. The IPSO dinner will once again be an unmissable event and a time to make new friendships and renew old ones. I look forward to meeting you all in Mumbai!

Hakuna Matata,

Larry Hadley, Chairman

### **IPSO in Mumbai!**

Dear Colleagues,

"Welcome to Mumbai, India. Just a few months away, the SIOP congress will be held and once again all of us will gather to fill ourselves with loads of knowledge and share our experiences. Well, some of you might feel, Mumbai, India is at the other end of the world, but a feast is awaiting you here. Feast not just in terms of delectable cuisine, but also in terms of academics. The Preconference live operative pediatric surgical oncology workshop followed by the scientific program of IPSO and of course the ISPO dinner will be an unforgettable experience with active participation from all of you.

The Live Operative Workshop highlights surgeries on unusual or difficult tumors in children by an esteemed faculty which includes Professor Larry Hadley, Prof. von Schweinitz and Professor Michael LaQuaglia. Apart from oncosurgery, a live session on insertion of long lines and ports will be demonstrated. Other features would be panel discussions on multi-modality treatment of tumors, master video demonstrations, discussion on laparoscopic oncosurgery, etc.

The scientific sessions as usual would be beyond comparison. The ISPO dinner venue has been specially selected with the intention of leaving behind an indelible mark of Mumbai in the hearts and minds of the delegates. Out on the sea, surrounded by water on all sides, on a boat cruise, we shall all gather and have the best of the times before we depart to meet again in the next IPSO event".

Sushmita Bhatnagar, local Surgical organizer

## **From the Secretary/Treasurer**

### **A change of the Statues...**

Last year at the business meeting in Geneva, mainly two changes of the statutes have been suggested by the statutes committee. (1) The EC accounts for over 10% of the membership, which is too large, and should therefore be reduced (Statutes Chapter III, article 5). (2) IPSO should become more democratic, which can be achieved by having members been nominated for posts by any other active member, rather than through the EC (Bylaws Chapter II, article 3). The statues have been changed in concept, accordingly.

The membership also wanted to change the period between proposed amendments in the statues and the voting to 2 months, instead of 6 months (Statutes Chapter VII, article 12). This issue was discussed by the membership, and it was accepted to wait with the voting until the next BM in Mumbai. It has been put in the January and July Newsletter that members who are not able to be at the Mumbai meeting can send their written vote to the Secretariat. This means that this year's election for a new EC member will depend on the Memberships decision (vote) to decrease the EC by natural attrition, or not.

### **Nominees to stand for election of the Executive Board**

We will have to vote for a new President, and also the second term of your Program Director will end. Larry Hadley and Jan Godzinsky have agreed to stand for election as nominee for President and Program Director, respectively. The Membership is invited to propose any other IPSO member of good standing (who paid his dues) to stand as a second nominee for the election of one of these posts.

In Mumbai, the second term of Alessandro Inserra (EC member) will end. Please propose an IPSO member of good standing, and who agreed to stand for this election. If you propose an EC-nominee for election, please make sure that he/she is fully aware of the proposals from the Statues committee to reduce the size of the EC, as mentioned above. *This is a proposal and not yet a fact*, but it will be brought to a vote in Mumbai. If it will be approved by the Membership (which your EC encourages), there will be no election since we would want to diminish the number of the EC by natural attrition. If it is not approved by the Membership, we will need to fill the vacant position. The nominee must thus be willing to stand as a candidate to the EC, in an election which may or may not take place!

### **Call for Candidates of New Members of IPSO**

The importance to expand the number of IPSO members can not be stressed enough! Please consider to propose your chief, colleague, fellow, (chief)resident, registrar, or assistant with an interest in Pediatric Surgical Oncology to become a new member of IPSO. Please fill out the enclosed application form for IPSO membership and return it with a small CV / resumé to the Secretary of IPSO.

### **Annual Dues**

Recently, some of you have received a letter of remittance of your 2007 dues, and of probable unpaid dues from (the) previous year(s). So far, **ONLY 34 MEMBERS HAVE PAID ALL DUES INCLUDING 2007!** The serious non paying-members ( $\geq 3$  years of unpaid dues) will be removed from our member list this year. So pay now if you don't want to loose your membership! Payment is encouraged preferably by credit card. The Treasurer will issue a receipt to all who paid the membership fee. Please realize that IPSO is a small Society that needs to keep up its financial strength. We can not survive without our dues!

**Please check your name, (e-mail) address, phone/fax numbers, and/or position in the 2007 Membership Directory, and please forward any changes to the Secretariat!**

Who knows the address of dr. Kinji Yokomori, Tokyo?

### **Pediatric Solid Tumor e-Board**

We are glad to invite you to join this International academic discussion group on pediatric solid tumors. This discussion involves the interesting cases, problems, suggestions and experience pertaining to **pediatric solid tumors only**.

This group is not to anybody's credit but a genuine effort to bring the pediatric surgeons, pediatricians, surgical oncologists, pediatric oncologists, radiation oncologists, cancer biologist, oncopathologist & nuclear medicine physicians from all over the world under one roof, so that we can discuss the pediatric tumors which invariably requires combined modality.

<http://groups.yahoo.com/group/pedoncology> (If you would like to join, just reply to this link)

There are already **149** members joined from all over the world from every discipline & discussion has already started. If you care the child with cancer, kindly join and actively participate in group activities with your experience in this field.

Thanks.

Moderators Pedoncology Yahoo Group: Dr Stephen Shochat (Pediatric Surgical Oncologist), Dr Manjusha Sailukar (Pediatric Surgeon), Dr Anupama Borkar (Pediatric Oncologist), Dr Sajid Qureshi (Pediatric Surgical Oncologist), Dr Daniel Aronson (Pediatric Surgical Oncologist), Dr Purna Kurkure (Pediatric Oncologist)

### **Rare Tumor Registry**

Please send any cases of rare tumors (as defined as tumors that do not fit into an established treatment protocol) to the Rare Tumor Registry in Amsterdam. Use the registration form attached to this news letter, or ask one at [d.c.aronson@amc.uva.nl](mailto:d.c.aronson@amc.uva.nl) As usual, authors of abstracts regarding rare tumors will be asked to send in their presented case.

The Registry can also be contacted to inquire for information regarding rare tumors, or to exchange rare tumor tissues for research purposes. Only names of Surgeons whose patients are registered in the database will be given upon request, since patient data are not provided for privacy reasons.

### **President Corner**

Dear Colleagues,

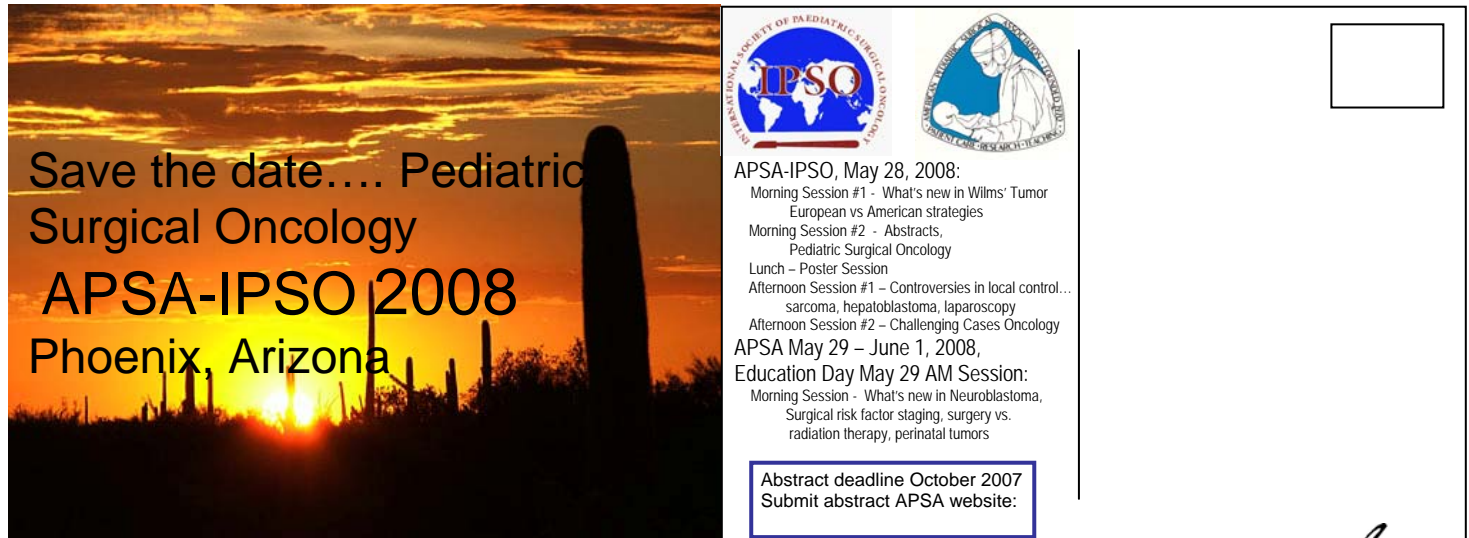
I hope you have all had a professionally successful and personally happy year so far. As I face my own challenges at work I think of my friends in Paediatric Surgical Oncology around the world and how they are having to solve similar problems in widely differing medical and political environments.

Here in the United Kingdom we live in a prosperous country and doctors are well paid; however all doctors are struggling under an increasing burden of Government initiatives, targets and directives. Many of these distort clinical priorities and limit clinical freedom. The child with cancer may suffer because priority for operating lists is given to children with minor, non urgent conditions simply because of the imperative to treat them within certain timescales. The child needing a biopsy, insertion of central venous line or other surgical procedure within 24 hours is often postponed because there are no government targets for urgent or semi-urgent surgery. Add to this the increasing bureaucracy which is swallowing up more and more of the money allocated to our National Health Service and you can see why many surgeons are unhappy and disillusioned. They have responsibility without power; a classic recipe for stress, anxiety and depression. And yet I know that many Doctors in other countries are envious of what we have in the United Kingdom; they have their own local problems and by keeping this in perspective I am usually able to be grateful for positives we have here.

I do hope to see many of you in Mumbai. It promises to be a great meeting, and of course an opportunity to

visit a wonderful country.  
best wishes to you all, Richard Spicer, President

With



Save the date.... Pediatric  
Surgical Oncology  
APISA-IPSO 2008  
Phoenix, Arizona

INTERNATIONAL SOCIETY OF PAEDIATRIC SURGICAL ONCOLOGY  
IPSO

AMERICAN PEDIATRIC SURGICAL ASSOCIATION  
APSA

APISA-IPSO, May 28, 2008:  
Morning Session #1 - What's new in Wilms' Tumor  
European vs American strategies  
Morning Session #2 - Abstracts,  
Pediatric Surgical Oncology  
Lunch - Poster Session  
Afternoon Session #1 - Controversies in local control...  
sarcoma, hepatoblastoma, laparoscopy  
Afternoon Session #2 - Challenging Cases Oncology  
APISA May 29 - June 1, 2008,  
Education Day May 29 AM Session:  
Morning Session - What's new in Neuroblastoma,  
Surgical risk factor staging, surgery vs.  
radiation therapy, perinatal tumors

Abstract deadline October 2007  
Submit abstract APSA website:

## CANCER AT THE AMERICAN PEDIATRIC SURGICAL ASSOCIATION MEETING – the 2008 IPSO-APISA event –

Start making the necessary preparations – writing abstracts, saving money, begging for permission – to come to the 2008 APISA meeting which will again feature a joint IPSO-APISA cancer program. A program committee has been busy working out the various details to make this a superb program which you will not want to miss. Moreover strong support, in the form of attendance, from our organization is very important for any number of reasons. The meeting will be in the desert Southwest, a spectacular part of the US. The APISA venue and program are always outstanding. The content of the cancer program will include a full day (May 28<sup>th</sup>) preceding the start of the APISA meeting and will feature a similar format to past versions – panel discussions, abstract and poster sessions, and a problem case session. For this meeting the panel discussions will be on the topics of Wilms tumor and surgery for local control. On the following day (May 29<sup>th</sup>) the cancer education session will feature a panel discussion of various issues of neuroblastoma.

### Important dates to remember

The deadline for abstract submission will be sometime in **October 2007** (the exact date will appear on the APISA website). This will be after we meet in Mumbai so a reminder then will be too late. You will not get repetitive reminders of this and will have to remember it on your own.

### Important logistics to remember

As in the past registration and meeting arrangement will be made through APISA. All this is possible on their website – [www.eapsa.org](http://www.eapsa.org). **Abstract submission will require sponsorship from an APISA member.**

Dr Rebecka Meyers and Dr Steve Shochat, whom most of you know, have volunteered to sponsor any abstract from an IPSO member. As a courtesy sending them a copy before submission would seem a reasonable and appropriate thing to do. Their contact information is: [Rebecka.Meyers@hsc.utah.edu](mailto:Rebecka.Meyers@hsc.utah.edu), [Stephen.Shochat@STJUDE.ORG](mailto:Stephen.Shochat@STJUDE.ORG). Unlike prior meetings it is no longer mandatory to submit a manuscript of your abstract for possible publication in JPS, though this is still encouraged. Also unlike prior meetings it is not necessary to specify that your abstract should be considered for the IPSO/APISA program or the APISA meeting. The IPSO-APISA program committee will review all oncology related abstracts and has been given permission by the APISA program committee to accept or reject and to organize and distribute those accepted in the most effective and appropriate fashion.

Bruce Broecker, on behalf of the IPSO-APSA Program Committee

**APPLICATION for IPSO membership**  
(please print)

NAME OF APPLICANT

TITLE

AFFILIATION

ADDRESS

NATIONALITY

PHONE NUMBER

FAX NUMBER

E-MAIL ADDRESS

NAME OF SPONSOR 1

NAME OF SPONSOR 2

**PLEASE RETURN WITH YOUR C.V. TO THE IPSO SECRETARIAT**

Daniel C. Aronson, Emma Children's Hospital, PO BOX 22700, 1100 DE Amsterdam, The Netherlands

Date:

## IPSO - Rare Tumor Registry

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1105 AZ AMSTERDAM, The Netherlands  
tel: +31-20-566-5693  
fax: +31-20-566-9287  
e-mail: d.c.aronson@amc.uva.nl

Patient initials:

Date of birth:

Date of Diagnosis:

Pathology:

Stage (if possible):

Organ:

Surgery(S):

Yes  No

if Yes:

primary  delayed  biopsy only

Chemo (C):

Yes  No

Radioth (R):

Yes  No

Order of (S), (C), (R):

Tumor tissue stored:

Yes  No

if Yes, how:

paraffin  frozen  culture  other:

Date of last follow up:

Condition at last follow up:

CR  PR  SD  PD  expired

Name of Surgeon:

Name of Institution Address:

Telephone: