

# The GOC News

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 Summer 2006

## 6<sup>th</sup> Annual CPD Program – An Overwhelming Success

Our 6th annual meeting in Montreal continued to take our professional development meeting to a new level. The program content and execution was true to its theme of advancing advocacy for new therapies in the elderly and for the introduction of HPV vaccines for cervical cancer control. The role of the GOC was integrated in all four themes, positioning GOC and its membership as key stewards to help disseminate best practice, help establish standards, and help identify sub-groups of patients who would benefit from each of these therapies.



*Drs. Lizabeth Brydon, Ken Swenerton and David Popkin*

The morning started with an outstanding panel on IP chemotherapy with Dr. Deborah Armstrong and Lois Almadrones, Clinical Nurse Specialist from Sloan Kettering, basically mapping out for us the evidence for IP chemotherapy as a preferred option of care in patients

with optimal debulked ovarian cancer as adjuvant therapy. Dr. Armstrong took us through the options for future therapies and strategies for GOG's upcoming trials in IP chemotherapy. She addressed future directions of IP che-

motherapy which include modulating toxicity, the timing of chemotherapy relative to surgery and catheter placement as well as adjustment of agents used, improving outcomes (examining

alternative agents for IP chemotherapy use and combining of IP chemotherapy with targeted therapies). We also discussed the GOG phase II randomized trial to be led by Dr. Joan Walker as principle investigator looking at a three-arm study comparing various combinations of IV and IP Taxol/CisPlatinum in different regimens. The conclusions drawn from the GOG 172 study by Dr. Armstrong confirmed that statistically, IP regimen produces an improvement in progression-free and overall survival in patients on the IP arm with a 65.6 month median survival, and the longest survival reported to date from a randomized trial in advanced ovarian cancer.

Lois Almadrones went through an excellent presentation as the Advanced Nurse Practitioner who was involved in all IP chemotherapy studies done at Sloan Kettering, mapping out practical  
*(Continued on page 3)*

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The Society of Gynecologic Oncologists of Canada  
 La société des gynécologues oncologues du Canada

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The GOC acknowledges the Society of Obstetricians and Gynaecologists of Canada for their continued support of our Society.

## GOC History Book Update

The GOC history book is now complete and has gone for final publication. A tremendous amount of work has been done and with work such as this, there is bound to be some incompleteness, however, over the time

and with the extensive review, we all feel pretty happy about the effort that has been put into the project to bring it to completion. This book will be mailed to members in July and will be on display at the annual meeting

in Vancouver. Special thanks to Mrs. Hélène Soublière for managing the extremely difficult task of completing this very tortuous project. We are truly grateful for her commitment and loyalty to the Society.

## Fifth Canadian Leadership Lecture – An Entertaining but Poignant Experience

The 5th GOC Canadian Leadership Lecture guest speaker Mr. Rex Murphy presented, in the setting of the Olympic Tower, a memorable lecture. Mr. Murphy is well known as a Canadian icon. He is a Rhodes Scholar who attended Oxford University and is well known both on the television and radio circuit for his commentary and his poignant views on politics and the Canadian scene. Mr. Murphy presented an overview of leadership using the political arena as an example of what to do and what not to do. He drew on the importance of being excellent in what we do and believing that being excellent in what we do affects many others in different and tangible ways, even though it may not be recognized initially. He pointed out using refined examples of the role of language and how it can affect us - using examples from Lincoln right through to present day politics both provincial and federal. In his usual style, he was entertaining but also very serious in some of his most im-

portant comments. At the end, all who attended felt a certain synergy that in our own world, at the clinical and local leadership levels, the commitment to excellence in oncological care, which is the hallmark of GOC, was a worthwhile endeavour. He gave us renewed encouragement that such endeavours will be rewarded in the future in terms of the impact on society.



*Dr. Michael Fung-Kee-Fung, Mr. Rex Murphy (5<sup>th</sup> Canadian Leadership Speaker), Dr. Diane Provencher*

## Gynecologic Oncology Group Scores a Coup!

After months of behind the scenes efforts, the Princess Margaret Hospital Foundation announced the first Chair in Gynaecological Oncology Research at a gala event in Toronto on May 17, 2006. The Chair was established by a series of contributions from the private sector and the Princess Margaret Hospital Foundation. The new Chair will be named the Crashley Family Chair in Gynaecological Cancer Research. Key to this has been the ongoing effort to galvanize the community within Toronto, both corporate and academic, to support the Gynaecological Oncology Program at the Princess Margaret Hospital. At the event launch, Hugo Boss (corporately) with singer Michael Bublé came out in support of this event which was featured in the National Post, two pages centre spread, and included much needed profile for gynaecological oncology. The success of the Toronto group really reminds all of us of the important need and the possibilities of working with our local community in order to get support to advance the cause of research. It is a motivation and a sign to all of us to what is possible. The inaugural Chair will be Dr. Joan Murphy. Congratulations to all from the PMH Program and their continued efforts to achieve excellence in gynaecological cancer research.

## GOC Ultimatum Challenge



*Dr. Paul Bessette*

The CPD Organizing Committee and everyone at GOC are extremely grateful to the outstanding work of Dr. Paul Bessette and his team (Dr. Mark Carey and H  l  ne Soubl  re) for developing the GOC Ultimatum Challenge. This follows in the strong tradition of innovation of mixing both educational content with humour and this time an organizational challenge for sure! The game included four teams headed by team captains and also involved the whole audience. It involved direct response through touch pads and included a very complex set of rules that challenged GOC Executives (team captains) with variable results. The game pitted teams made up of the audience and the team captains against each other to answer skill testing questions

both from the history of the GOC as well as basic science and clinical science. Needless to say the challenge was quite overwhelming for several of our members. The team led by Dr. Provencher, true to her presidential status, resulted in being the winner and Laurie Ann Holmes our nurse member was recipient of a well deserved gift through a lottery for that team. The amount of work required to set this up and to produce questions of such high academic content was very much appreciated and in fact was a great learning experience for all of us. We hope next year to continue this in the second edition of the GOC Ultimatum Challenge. Thanks again to outstanding work by Dr. Paul Bessette and Dr. Mark Carey.

## CG<sup>2</sup> Annual Meeting Update

The CG<sup>2</sup>, which is the Canadian Gynecologic Cancer Group, is made up of founding organizations GOC, NOCA and the OCC. The group met for their annual meeting and continue to develop strategies for promoting awareness around gynaecological cancer, specifically ovarian cancer. The aim is to create a coordinated strategy around sharing the tremendous efforts of the organizations and linking them with the Society. The CG<sup>2</sup> plans to organize a joint project/presentation to be held at various sites throughout the country during September, ovarian cancer month. Many joint projects were discussed including the establishment of a resident gynaecological elective program for prospective fellows, as well as the establishment of a common poster review or common day that participating hospitals will profile the three organizations in the fight for ovarian cancer. More information on this will follow. Dr. Barry Rosen is now the Chair of the CG<sup>2</sup> as of this year go forward.

## GOC to Launch First Webcast

The GOC Executive, working with the Website Committee, is developing a Webcast on Emerging Strategies in Vaccine Delivery. This Webcast will be based on the CPD presentations of Drs. Stanley, Franco and Duval and will be edited by Dr. Tien Le, Chair of the Website Committee, working with Dr. Joan Murphy and others. The plan is to develop a series of simultaneous Webcasts that will be hosted at different centers at a particular time and will allow groups at each center to congregate using Internet and telephone conferencing lines for discussions about the presentations. GOC's goal is to establish local capacity around knowledge within the screening groups at each participating institution. This will also allow us to have a structured evaluation process of gaps in knowledge. More on this will follow.

## TAKE A LOOK AT WWW.G-O-C.ORG!

By Dr. Tien Le, Chief Website Editor

We are delighted to invite you to visit our newly designed Society's website. The GOC website has been re-transformed and new functionalities added, making it easier for you to navigate. We hope that you will find the site to be more user friendly, and that you will get all the information you need in a quick and easy manner. Besides the new features and look, maintenance and update of the site will be less complicated with the new Customer Management System (CMS) software facilitating presentation of the latest

current information and communications without the need to rely on outside technical assistance.

Some of the changes we have made to the site include:

- enhanced search functionality so relevant information can be retrieved quickly
- facilitating online CME activities through posting of current relevant presentations, webcasts and podcasts with links to online discussion forums

- updating the current Canadian research activities, clinical trials, and publications
- reactivation our discussion board where members of the GOC and fellows in training can post cases for discussion and inputs from colleagues across the country

Phase II of the web redesign is the development of a custom web membership management database which is scheduled to be ready by September. This software is web-based and will

allow for secured on-line transactions such as membership renewal, CPD registration, etc. and will provide instantaneous issuance of confirmations and official receipts. From an administrative perspective, this new database will streamline the membership services functions and very importantly will be a repository for membership and activities.

Go to [www.g-o-c.org](http://www.g-o-c.org), and please answer the poll question as your feedback is important to us!

### 6<sup>th</sup> Annual CPD Program (continued from page 1)



Top: Drs. Rachel Kupets, Val Capstick, Al Covens and Mr. Robin Hall (GSK); Middle: Fellows dinner; Bottom: Prof. Margaret Stanley

advice about the use of catheters, the use fenestrated tip, a BARD™ catheter, as well as helping us understand how best to manage some common complications. The discussion was complete with GOC's approach to IP chemotherapy. GOC President, Dr. Diane Provencher, presented her experience at CHUM as well as the overall plan for GOC including its knowledge transfer strategy to set-up best practices, the IP Communities of Practice group and the present

standards for IP chemotherapy being developed with GOC to be presented in the summer. Dr. Rosen and Dr. Stuart also presented local best practice and solutions for implementation.

The meeting continued with our traditional debate on the Role of Radiotherapy in Ovarian Cancer. Both Dr. Swenerton and Dr. Fyles presented an authoritative and scholarly dissertation on the role of radiotherapy. Dr. Swenerton's work from the BC database pointed to a discrete benefit that radiotherapy does apply to a specific subset of patients independent of chemotherapy. This was followed by a presentation on the Cancer Care in the Elderly where Dr. James Watters presented a very concise review of the surgical physiology of the elderly and stressed that the elderly population is a heterogeneous population and went through the comments as regards physiological age versus chronological age. He identified the decline in muscle mass and strength which are common in the elderly and the impact on perioperative care as well as some of the unknown benefits and the risks associated with major laparoscopic surgery based on the physiological changes that occur in the elderly. Dr. Lodovico Balducci gave a truly enlightening and entertaining discussion on the role of supportive care in the elderly cancer patient stressing again the heterogeneity in this population and the benefits and management that is

necessary to support adequate interventions. He stressed the importance of the management of anemia and neutropenia in the elderly as well as pain management alternatives. He also discussed some of the benefits of certain chemotherapeutic agents including Liposomal/Doxorubicin versus Doxorubicin in terms of benefit for the elderly. Dr. Balducci is principle author of the comprehensive geriatric oncology textbook and it was truly a delight to hear his insights and what we need to do to support the elderly patient's access to oncological care.

The HPV plenary session on Emerging Strategies in Vaccine Delivery was discussed. We were truly privileged to have Professor Margaret Stanley, OBE, Professor of Immunology at the University of Cambridge who is a world authority on immunology in HPV. Dr. Stanley took us through a simple yet elegant dissertation on the Immunobiology of HPV and the Implications for HPV Vaccines and the rationale for vaccination of young adolescents between 9 and 10 years old as potential benefits for a universal program. She discussed the course of HPV infection and the limitations at present. She also discussed the long duration of benefit in

terms of immunogenic response with the present strategies. Dr. Eduardo Franco paralleled this with his usual outstanding and scholarly presentation of the Efficacy of Prophylactic HPV Vaccines and the impact that HPV vaccines will have on our present screening programs in terms of affecting the predictive values of the present Pap test. He discussed looking at changing the model for primary screening and the implications of this. Dr. Bernard Duval also presented from the perspective of HPV vaccine implementation within Canada from research to action and mapped out for us the implications necessary to understand how universal implementation of vaccination could occur and definitely the steps towards that. He paralleled a case study of Hepatitis B vaccine. He discussed the role of NACI, the National Advisory Committee on Immunization, and the importance of developing demonstration projects that would affect implementation. We also went through a review of different scenarios depending upon what would most likely happen with the licensing of the vaccines. The HPV session was recorded for the creation of a Webcast to be available on the GOC Website which is to be announced in the near future.

Thanks to GlaxoSmithKline, Schering Canada, Merck Frosst Ltd., OrthoBiotech, Bard Canada and Digene Corporation for their support of this meeting.

## News from the Centres

### Awards

Dr. David Popkin, former President of GOC, has been awarded the title Emeritus Professor, Department of Obstetrics, Gynecology & Reproductive Sciences, College of Medicine, University of Saskatchewan 2006. Congratulations!

## Academic Corner

### Recent Publications

Avard D, Bridge P, Bucci LM, Chiquette J, Dorval M, Durocher F, Easton D, Godard B, Goldgar D, Knoppers BM, Laframboise R, Lespérance B, Plante M, Tavtigian SV, Vézina H, Wilson B, Simard and INHERIT BRCA's Partnering in Oncogenetic Research - The INHERIT BRCA's Experience: Opportunities and Challenges. *Fam Cancer* 5:3013, 2006.

Duggleby, W., Popkin, D.R., Effective Patient-Physician Communication at the End of Life: What Patients Want to Hear and How to Say It. *Geriatrics & Aging*. February 2006 Vol 9 No. 2 pp129-132.

Plante M, Lau S, Brydon E, Swenerton K, Leblanc R, Roy M. Neoadjuvant chemotherapy followed by vaginal radical trachelectomy in bulky stage Ib1 cervical cancer: a case report. *Gynecol Oncol* 101(2): 367-700, 2006.

Marie Claude Renaud and Michel Roy. Laparoscopy in gynaecological oncological surgery in 2005. *Reviews in Gynaecological and Perinatal Practice*, vol 6, issues 1-2, June 2006 40-46.

Thibaudeau J, Lepine J, Tojic T, Duguay Y, Pelletier G, Plante M, Brisson J, Tetu B, Jacob S, Perusse L, Bélanger A, Guillemette C. Characterization of common UGT1A8, UGT1A9 and UGT2B7 variants with different capacity to inactivate mutagenic 4-hydroxylated metabolites of estradiol and estrone. *Cancer Res*: 66, 125, 2006.

## IP Chemotherapy Standards

The IP Communities of Practice Group is continuing its focus to complete its development of an IP Standards document. This is a document developed through a combination of (1) consensus-based modified Delfi process; (2) an extensive literature and systematic review. The document is nearing completion and will describe the conditions at the level of the institution, at the level of the individual practitioner and at the level of organizations which would ideally need to be in place in order to provide the safe deployment of IP chemotherapy. This is part of the overall

GOC strategy to identify the right settings on part of our goal to develop a knowledge exchange strategy around IP chemotherapy so as to establish best practice for the country. Helen MacKay and Patti Power have developed a document on the review of toxicity for IP chemotherapy and will be incorporated in subsequent documents. We look forward to this being another area of advocacy where GOC is stepping out to establish best practice for our patients.

## Third National Conference on Ovarian Cancer

By Dianne Miller, MD, President of the 3<sup>rd</sup> NCOCR Meeting

The third National Conference on Ovarian Cancer research was held in Vancouver from May 13<sup>th</sup> to May 15<sup>th</sup>. The meeting was designed to showcase Canadian advances in basic and clinical research on ovarian cancer. The meeting was attended by over one hundred delegates from six provinces, five states and Mexico.

There were five invited presentations. Dr. Hal Hirte from McMaster discussed the current use of anti-signaling therapies for ovarian cancer patients. Dr. Bob Bast from MD Anderson spoke on the role imprinted tumor suppressor genes in the pathogenesis of epithelial ovarian cancer. Dr. Gordon Mills gave a review of the genomics of ovarian cancer. Our own current and past-presidents of GOC, Dr. Diane Provencher and Dr. Joan Murphy spoke on intraperitoneal chemotherapy and drug resistance in ovarian cancer respectively.

This meeting offered the unique opportunity for clinicians and scientists to interact on a national stage. A comment was made at the meeting that at the first national conference participants greeted each other warily, at the second meeting they greeted each other as acquaintances and at this meeting we greeted each other as friends.

There were over 65 abstracts submitted to the meeting. In addition, there were 36 oral presentations from 14 Canadian, 2 American and even 1 Mexican university. The scope and variety of the presentations was amazing. The GOC website will be providing a link to these in the near future.

The next meeting will be in Montreal in 2008. I would encourage GOC members to attend this important meeting.

## Witness of the Third National Conference on Ovarian Cancer Research

May 13 to 16, 2006 – Vancouver, British Columbia, Canada

By Diane Provencher, GOC President

I returned home from the conference contented and secured vis-à-vis today and tomorrow. Imagine a mix of researchers, students, GOC members listening until the last minute of the four days, attentive to one another's work.

Interest, respect, enthusiasm were palpable. The guest speakers, Drs. Robert Best and Gordon Mills both

from the MD Anderson Cancer Center, certainly gave outstanding talks, proof that huge labs can generate fabulous work. Additionally, the organisation was just superb. Everything ran smoothly. Nevertheless, I was very proud of our Canadian contribution. Remember that Anne-Marie Mes-Masson and myself will be your host in 2008!

## National Guidelines in Recurrent Ovarian Cancer – An Update

The National Guidelines in Recurrent Ovarian Cancer is a joint partnership between the GOC and the Clinical Practice Guideline Action Group of the Canadian Strategy for Cancer Control. The document is in its penultimate form undergoing final revisions. The next step will be to submit the document for feedback to over 100 practitioners

within Canada. This document essentially is an adaptation of four bodies, Cancer Care Ontario, BC Cancer Agency, The Scottish Cancer Council and the National Institute for Clinical Evaluative Sciences of UK (NICE). This is an exciting project and we look forward to its completion.