



INTERNATIONAL SOCIETY of ORAL ONCOLOGY NEWSLETTER

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Welcome to the December edition of the ISOO Newsletter.
Do you have an article or news that you would like to share?
Please contact Allan, AHovan@bccancer.bc.ca

Dr. Allan Hovan (Editor, ISOO Newsletter)



Season's Greetings

Season's Greetings to our ISOO colleagues around the world. This has been another successful year for ISOO. It needs to be said, however, that the strength of our group truly lies in its membership - you! Though relatively small in number, ISOO members continue to accomplish great things: publications in peer-reviewed journals, a robust Oral Care Study Group, significant contributions to other MASCC Study Groups (notably Mucositis and Bone), creation and dissemination of guidelines, systematic review updates, interesting and well-attended CE courses, etc. Our membership continues to grow, and it is our hope to extend our membership into the Indian and Southeast Asian subcontinent. Holding next year's meeting in Australia (for the first time) will hopefully attract more colleagues from those parts of the world.

RECRUIT A COLLEAGUE IN 2016!

Make 2016 the year you introduce a colleague to MASCC and ISOO! We currently have more than 1,000 members worldwide, representing more than 60 countries and 6 continents. In the past year, we've seen an increase in members from all countries, most notably Denmark and India. Membership benefits include a free subscription to our monthly journal, *Supportive Care in Cancer*, access to members-only areas of our website, discounts on supportive care books and meeting registration fees, and numerous opportunities to work with MASCC/ISOO Study Groups, to exchange ideas and expertise, and promote supportive care in cancer. Membership is open to medical and surgical oncologists, radiologists, nurses, dental professionals, pharmacists, social workers, dietitians, psychologists, students, industry representatives, and anyone interested in the prevention and management of the adverse effects of cancer and its treatment.

Oral Oncology Services Around the World: *Spotlight on Greece*

The Dental Oncology Unit was established in the University of Athens Dental School in 2004. It exists to manage the oral complications of cancer treatment. In addition, 5 hours of didactic material is presented in the 4th year dental school curriculum; 5th year students rotate through the oncology unit several times during the academic year.

In 2005, the Hellenic Association of Oral Oncology was founded to further promote the discipline of oral oncology. On May 16, 2015 over 100 dentists, oncologists and nurses attended the 4th annual Day of Oral Oncology. This meeting was endorsed by MASCC/ISOO, the Mediterranean Multidisciplinary Oncology Forum (MMOF), the Hellenic Society of Medical Oncology, Hematology and Radiation Oncology and received generous industry support.

An ever-increasing number of patients have been accessing the Dental Oncology Unit since its inception in 2004 including H&N radiotherapy patients, solid tumour patients, patients with hematologic malignancies and a variety of other patients receiving systemic therapy.



4th Annual Day of Oral Oncology

FIGURE 1.

Number of oncology patients per year, 2004-2014

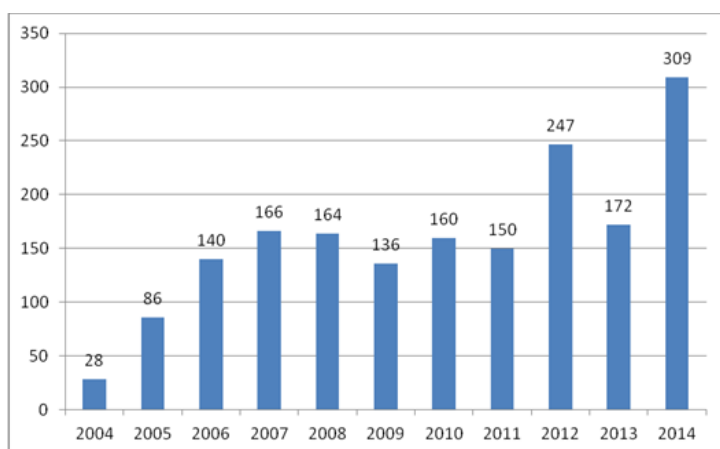
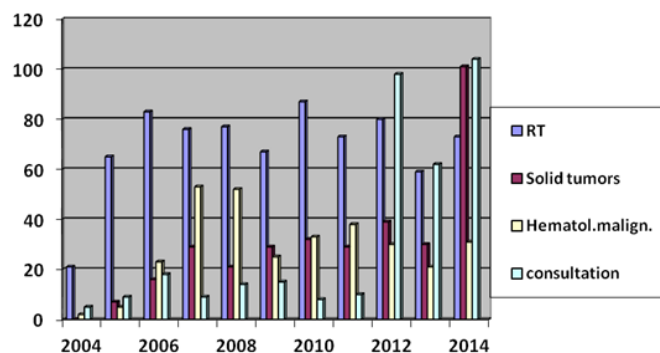


FIGURE 2.

Type and number of oncology patients per year, 2004-2014



Meet an ISOO Member, Jonn Wu

Dear colleagues – My name is Jonn Wu, and I am a radiation oncologist at the Vancouver Cancer Centre, at the British Columbia Cancer Agency (Canada). I am a father of two, who are both attending the University of British Columbia (UBC). Living in Vancouver provides us an opportunity to be active outdoors on a year-round basis. Some of my extra-curricular hobbies include racquet sports, chasing after my dog, and playing electric bass in a rock band. For further details, we can discuss over a beverage in Adelaide!

I attended medical school at the University of Alberta, and completed my radiation oncology residency at the Cross Cancer Institute (Edmonton). As a resident in the early 1990s, I developed a strong interest in head & neck (H&N) cancers and novel radiotherapy techniques such as three-dimensional conformal radiotherapy (3DCRT). This was followed by a H&N and intensity modulated radiotherapy (IMRT) fellowship at the University of Washington (Seattle). I was then recruited to the BC Cancer Agency (BCCA) in 1999 to bring these techniques to British Columbia. H&N and oral malignancies continue to be my primary clinical focus, and since 2009, I have had the honour of chairing our provincial H&N Tumour Group.



*Jonn Wu, Vancouver Cancer Centre,
British Columbia Cancer Agency*

Our desire to improve the quality of care for our patients continues to provoke interesting research questions. At the BCCA, we are developing and implementing precision radiotherapy techniques, including rotational (RapidArc) and stereotactic systems. In order to track whether or not these treatments improved cancer cure rates and quality of life for our patients, we created a provincial platform to capture population-based patient and treatment-related outcomes for all H&N and lung cancer patients in BC (the OaSIS system). Other programs, including capturing pre- and post-radiotherapy salivary output measurements and quality of life data for all H&N patients in BC, are a direct result of our close collaborative relationship with my oral oncology colleagues.

When I joined the H&N team in 1999, I was extremely impressed to see how keen and integrated the Oral Oncology program was within our H&N team – not just in Vancouver, but across all regional cancer centres. Members of the oral oncology team, which have included ISOO members Drs. Allan Hovan and Joel Epstein, attend our weekly provincially video-linked tumour boards and provide important clinical input. They are very active in developing provincial practice guidelines, streamlining clinical workflows and other research projects including a randomized trial with hyperbaric oxygen – all for the benefit of our patients. When I heard that there was an international society of other like-minded colleagues, it was only natural that I would join ISOO. My only regret was waiting this long to get involved.

I look forward to meeting you in Adelaide!

Submit Your Abstract for MASCC/ISOO 2016!

Share your research and best practices in diverse aspects of supportive care in cancer at our 2016 meeting in Adelaide. This is an ideal venue in which to present your latest findings to the international community. See the abstract submission information, including topics, at www.mascc.org/meeting. The submission deadline is February 16th. Meeting registration is also open. Take advantage of early registration discounts!

PBM-LLLT-Working Group Report:

Photobiomodulation (PBM) Using Low Level Laser Therapy (LLLT) in Supportive Care in Cancer

On June 25, 2015, at the MASCC/ISOO meeting in Copenhagen, a group of experts and enthusiasts in the field of photobiomodulation (PBM) using low level laser therapy (LLLT) held their first working group meeting. The event, which went on for almost two hours, was attended by more than 40 MASCC/ISOO members from around the world, and we thank each and every one.

The theme for PBM-LLLT working group was “The Role of LLLT in Oncology Care: Potential Indications, Biology and Future Directions.” The session was chaired by Raj Nair (ISOO Board Member, Australia) and included presentations by Stephen Sonis (USA), Rene-Jean Bensadoun (France), Joel Epstein (USA), and Judith Raber-Durlacher (Netherlands) who was pivotal in organizing the event.



Dr. Steve Sonis

Topics included the principles behind PBM-LLLT in supportive care in cancer (Raj Nair), potential clinical indications (Rene-Jean Bensadoun), LLLT biology, pathways and safety concerns (Steve Sonis), and future research and clinical directions (Joel Epstein). A highlight of the meeting was the questions on the molecular or biologic mechanisms or pathways involved in the effectiveness of the PBM-LLLT. Steve Sonis considered it as a pleiotropic, biologically potent therapy with requirements for device approval being perhaps less rigorous than those for a drug or biological agent. It is possible that this could be approved by regulatory agencies on the basis of safety data alone. However, there remains a need and opportunity to better define the mechanism of action of LLLT in mucositis and other indications.

Based on the discussion among the expert panel and the audience, our main focus of research will be on the safety of PBM using LLLT in head and neck cancer (HNC) patients with orofacial complications, such as mucositis, skin toxicities, trismus, salivary gland hypo function, and lymphedema. We know that LLLT has broad biologic activity and potentially broad application for the management of orofacial conditions in oncology care. We know that PBM using LLLT has the potential to become a routine prophylactic and therapeutic agent in broader oncology, hematology, and HNC patients. Based on the “level of evidence” in clinical practice, we have at least one recommendation and a suggestion, respectively, for PBM-LLLT use in cancer patients (MASCC/ISOO Guidelines, 2014). After careful consideration of the above, the following research questions were raised.

1. How do multiple pathways that may impact wound healing affect local cancer recurrence?
2. Does PBM-LLLT affect possible residence tumor cell behavior in HNC?
3. Does individual variation exist? How likely is a genomic component of an individual to affect biological response to LLLT? Does everyone respond in the same way?
4. How can the lack of consistency across studies (dose, power. etc.) be addressed?
5. Are there any unknown systemic effects of PBM-LLLT from local application?
6. What can we learn from in vivo animal studies looking at possible tumor regression/promotion of HNC.
7. What can we learn from retrospective and prospective studies of tumor outcomes in HNC patients treated with PBM-LLLT vs historical controls or standard outcome data.

Our priorities are to establish parameters for data collection and a data bank (retrospective and prospective), as well as to identify and obtain funding, internationally. If any of the members (MASCC/ISOO) are interested in joining the working group or furthering research, please contact us directly via email r.nair@griffith.edu.au.



Dr. Raj Nair

Join us in celebration of our 25th Anniversary!

A promotional graphic for the MASCC/ISOO 25th Anniversary Annual Meeting. The top half features a dark blue background with a large, stylized white 'A' on the left. To the right of the 'A', the word 'Australia' is written in a large, white, serif font. Below this, the text 'MASCC/ISOO' is in a large, white, sans-serif font, followed by 'ANNUAL MEETING ON SUPPORTIVE CARE IN CANCER' in a smaller, white, sans-serif font. Below that, 'Adelaide, Australia | 23-25 June, 2016' is written in a smaller, white, sans-serif font. On the far left, the text 'SAVE THE DATE!' is written in a bold, yellow, sans-serif font. On the far right, there is a colorful graphic of the map of Australia with the text '25th ANNIVERSARY' in white. The bottom half of the graphic shows a photograph of the Adelaide city skyline, including a tall skyscraper and a large, modern, curved building. A large, white, stylized hand is visible on the left side of the bottom half, reaching towards the center.

To register for updates on Adelaide, go to: www.mascc.org/meeting and enter your email!

Washington DC to Host MASCC/ISOO 2017

The 2017 Annual Meeting of MASCC/ISOO will take place in Washington, DC, USA, from June 21 to 24. Scientific Meeting Chair Rachel Gibson has announced the theme of the meeting as “Sharing Successes in Supportive Care in Cancer.” Topics will include new models of coordinated care, strategies for managing targeted therapies, the integration of oncology and dermatology, and financial toxicity. New e-poster sessions will be mentored by leading world experts, many based at the National Cancer Institute or other US research centers.

Washington, DC, the US capital, is a compact city defined by imposing neoclassical monuments, museums, and performing arts venues. As the heart of US government and finance, it is home to the White House, the Federal Reserve, and the National Archives Building, which houses the US Declaration of Independence. Museums and other points of interest include the National Gallery of Art, the National Museum of Natural History, the National Air and Space Museum, the Holocaust Memorial Museum, the Vietnam Veterans Memorial, the Washington Monument, and the Lincoln Memorial.

