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Pablo Huñis, Adrián
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Editorial

How did I experience ASCO 2021?

Adrián Pablo Huñis [a,*]

[a] *Emeritus Member of the American Society of Clinical Oncology (ASCO)*

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¿Cómo experimenté ASCO 2021?

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1. INTRODUCTION

The 57th Annual Meeting of the American Society of Clinical Oncology (ASCO) was held in virtual mode, between June 4 and 8, 2021

It is the most important scientific cancer event in the world and brings together more than 35,000 doctors and professionals related to the care of cancer patients. Through these conferences, the cancer community learns how to better care for, support, and treat people with cancer. It is also a forum for the presentation of clinical trial results that may influence practice, change the direction of future research, or have an impact on cancer policy.

ASCO is extremely important to healthcare professionals treating and caring for people with cancer, but it is just as important for people who have been diagnosed with

* *Corresponding author.*
E-mail address: aphunis@gmail.com
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cancer.

These conferences allow patients, and those who live disease-free for many years, to stay up to date on what to expect from their care and to learn more about the treatments that may eventually become available to them.

It is very likely that some of the results that we will hear at the meeting will change the level of standard of care and expand or change treatment options for people currently living with cancer, and others will influence or transform future research into new schemes of treatments.

Dr. Lori Pierce was the President of the ASCO 2021 Annual Meeting and was also the President of the ASCO.

After completing her chief residency at the University of Pennsylvania in 1989, Dr. Pierce was appointed as a senior investigator at the National Cancer Institute, and, 2 years later, she joined the faculty of the University of Michigan. Today, Dr. Pierce is a professor of radiation oncology and vice provost for academic and faculty affairs at the University of Michigan and director of the Michigan Radiation Oncology Quality Consortium.

An ASCO volunteer since 1992, Dr. Pierce has served on the Board of Directors, Special Awards Selection Committee, Government Relations Committee, Scientific Program Committee, and as chair of the Conquer Cancer Nominating Committee. She served as a mentor for the Leadership Development Program from 2015 to 2018. In recognition of her extensive volunteer service to ASCO, in 2015, Dr. Pierce was named a Fellow of ASCO (FASCO). In 2018, she was honored with the Hologic, Inc Endowed Women Who Conquer Cancer Mentorship Award from Conquer Cancer, the ASCO Foundation, for her extraordinary leadership and support of the next generation of oncology professionals.

After serving as ASCO president-elect in 2019-2020, Dr. Pierce began her term as ASCO's 57th president on June 1, 2020.

This year, ASCO's "leitmotiv" was: "Equity: Every Patient. Every Day. Everywhere" [1].

It is evident that the year of his presidency was marked by making equity and equality his greatest purpose, his goal, emphasizing not only patients belonging to racial, religious, and social minorities, but also those of doctors of color, latinos and other minorities who strive for the same opportunities as the white and American doctors.

2. ASCO 2021, SOME DATA

This year, 5,410 abstracts were submitted for consideration by the Annual Meeting Scientific Program Committee. Approximately 2,500 abstracts were selected for presentation in Oral Abstract Sessions, Clinical Science Symposia, and Poster Sessions, plus more than 2,400 for online publication.

As virtual mode, ASCO 2021 also had, this year [2]:

2.1. OPENING SESSION

Opening Session will include three Guest Speaker Addresses and the Presidential Address (Lori Pierce MD)

ASCO is delighted to welcome Julio Frenk, MD, PhD, MPH, as one of the meeting's guest speakers

Rhea Boyd, MD, MPH, will also be joining Opening Session as a guest speaker.

Opening Session participants will also hear from Norman E. "Ned" Sharpless, MD. Dr. Sharpless is the 15th director of the National Cancer Institute (NCI). Prior to his appointment, Dr. Sharpless served as the director of the Lineberger Comprehensive Cancer Center at the University of North Carolina (UNC), a position he held since 2014. Dr. Sharpless will reflect on the progress in cancer care in commemoration of the 50th anniversary of the National Cancer Act.

2.2. PLENARY SESSION

The Plenary Session showcases abstract presentations of the top practice-changing science, with commentary from expert discussants.

2.3. CLINICAL SCIENCE SYMPOSIA: EDUCATIONAL SESSIONS

Sessions of particular interest this year include:

- FDA Approvals and Their Incorporation into Clinical Practice
- Equality in Care for All Women: Addressing Disparities in Gynecologic Malignancies
- So, Your Patient with Kidney or Bladder Cancer Responded to Immunotherapy: What's Next?
- Checkpoint Inhibitor – Based Therapies: New Immuno-Oncology Targets and Resistance Mechanisms
- How to Treat High-Risk Myeloma at Diagnosis and Relapse
- Expanding the Druggable Universe
- Social Determinants, Not Biology: Time to Reappraise Genetics-Based Theories of Racial / Ethnic Cancer Outcome Disparities
- Current Issues with CAR T-Cells for Hematologic Malignancies
- A Case-Based Approach to Understanding

Complex Genetic Information in an Evolving Landscape
- Can You Hear Me Now: Barriers and Facilitators to Telemedicine?

2.4. CASE-BASED PANEL SESSIONS

Six Case-Based Panel Sessions will feature expert faculty discussing timely and challenging real-world clinical scenarios. The scheduled broadcast of these sessions will be highly interactive, offering both Q&A and participant polling:

- Team Players: A Multidisciplinary Approach to the Treatment of Oligometastatic Breast Cancer
- Oligometastases in Prostate Cancer: How to Rationally Incorporate Metastasis-Directed Therapy into Your Practice
- Navigating the Maze of Systemic Therapies for Metastatic Hepatocellular Carcinoma
- Locally Advanced Rectal Cancer: So Many Options, What to Do?
- Making Heads or Tails Out of Checkpoint Inhibitor Combination Therapy for First-Line Advanced Non-Small Cell Lung Cancer
- BRAF, MET, H-RAS, PD-1, and Other Targets You Do Not Want to Miss in Head and Neck Cancers

3. PERSONAL VISION

It is undoubted that medical education, since the beginning of the coronavirus pandemic, in March 2020, has modified lifestyle habits, in all aspects. Medical training does not escape this “new normal”.

Until 2019, and for the last ten years, Chicago was the city of world oncology, during ASCO meetings. The beauty of its architecture, the excellent gastronomy, the enormous number of hotel rooms and its jazz music, made it the right place to gather more than 30,000 professionals related to cancer treatment.

For four days we met in the Convention Center, and the works that marked the most modern and current therapy for the treatment of cancer were presented and discussed.

For about ten years, a “revolution” [3] has been brewing in modern antitumor treatment.

Molecular biology, genetics, genomics, biomarkers and the appearance of new drugs, monoclonal antibodies, tyrosine kinase inhibitors, anti-angiogens, vaccines and more recently, immunotherapy’s, have revolutionized the treatment of solid and liquid tumors and are being achieved important results, with prolonged remissions, control of the disease for more than five years, probably many responding patients manage to chronify their disease and with the advantage that many of these drugs are administered orally, they have a very low toxicity profile and the "old and so feared chemotherapy" is used less and less and if it is indicated, it is associated with some of these new drugs, since in some cases there are synergistic effects, and in others there are results of potentiating of effects.

Obviously, the advances are not only pharmacological. Surgery and radiotherapy go in parallel with all this new strategy, which in my opinion the most important is to have overcome old dogmas of oncology.

Today tumors are no longer treated ... patients are treated and each one of these patients has a "customized treatment". PERSONALIZED MEDICINE was born.

This is what I have seen from ASCO 2021 and what I envision for the next few years.

Today we know the altered phenotype of some tumors and we have the drugs to modify-cure them-phenotypically (chronic myeloid leukemia, positive Philadelphia chromosome, imatinib treatment, possibility of negative Philadelphia chromosome, CURE!!!)

As we advance in the knowledge of these data on the biology and genetics of tumors, and their "molecular errors", tailor-made drugs will be developed to correct these errors and we will obtain control of the disease.

After 43 years of treating cancer patients, I am happy to be able to witness this true revolution in its approach and a real paradigm shift, with results that are in sight, ASCO 2021 has shown the impressive, good results that we have today in cancer lung, breast, digestive, prostate, melanoma, patients with control of their disease for more than five and ten years, numbers unthinkable until only ten years ago.

I am grateful to the Iberoamerican Journal of Medicine Editors-in-Chief for the possibility of writing this editorial note, as an introduction to future topics in modern Clinical Oncology.

Buenos Aires, Argentina
July 2021

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