Welcome to the June Issue of the MASCC Society News

Message from the Editor, Toni Clark

This month, we feature research on low-level laser therapy for mucositis with news from the MASCC/ISOO PBM-LLLT Working Group, and we highlight a feature article by Ian Olver that appeared in the Spring EONS Magazine. We share information about the new American College of Surgeons Cancer Program Standards to ensure patient-centered care and news of upcoming supportive care conferences. We also join Helsinn Group in celebrating 40 years of supportive cancer care and bring you an interview with Vice-Chairman and CEO Riccardo Braglia. A warm welcome to 31 new members who joined us in March!

As always, you can find the current and older issues of the MASCC Society News online at www.mascc.org/newsletters or in the back pages of our journal, Supportive Care in Cancer.

Photobiomodulation with Low-Level Laser Therapy in Supportive Cancer Care

Low-level laser therapy (LLLT), first introduced in the 1960s and currently termed photobiomodulation (PBM) on the basis of its mechanism of action, is a form of light treatment that does not generate heat. It has been reported effective for numerous conditions, including pain, wound healing, musculoskeletal problems, neurological dysfunctions, rheumatoid arthritis, and fibromyalgia, to name but a few. It has also been found useful in the treatment of several oral and perioral diseases. Recently, it has gained attention as a possible means of mitigating oral mucositis associated with chemotherapy, haematopoietic stem cell transplantation, and radiation therapy regimens. In fact, LLLT has been shown to favorably affect the incidence, course, or severity of mucositis and associated pain. Its possible use in this context is noted in the most recent MASCC/ISOO Clinical Practice Guidelines for the Management of Mucositis Secondary to Cancer Therapy.

A group of about 40 MASCC/ISOO members interested in the use of this technique formed the PBM-LLLT Working Group, which held its first meeting at the 2015 MASCC/ISOO Annual Meeting in Copenhagen to discuss the role of this modality in cancer care. The Working Group session was chaired by Raj Nair and included presentations by Stephen Sonis, Rene-Jean Bensadoun, Joel Epstein, and Judith Raber-Durlacher. Topics included the principles behind PBM-LLLT, potential clinical indications, LLLT biology, pathways and safety concerns, and future directions, both research and clinical. While the requirements for device approval may be less rigorous than those for a drug or biological agent, since regulatory approval might be based on safety data alone, there remains a need to better define the mechanism of action of LLLT in the context of mucositis, as well as other indications. The Working Group articulated several questions that future research should address, with a focus on the safety of this modality in head and neck cancer patients with orofacial complications, such as mucositis, skin toxicities, salivary gland problems, and lymphedema. The group concluded that LLLT has broad biologic activity and potentially broad application in the management of orofacial conditions and that PBM-LLLT has the potential to become a routine prophylactic and therapeutic agent.

The PBM-LLLT Working Group leadership has recently taken the initiative in exploring the biological basis of PBM-LLLT, especially in the context of head and neck cancers (HNC), one of the major research questions the group has identified. Stephen Sonis et al. have conducted a comprehensive literature search to identify LLLT-activated pathways that have been strongly associated with negative tumor outcomes including proliferation, invasion, angiogenesis, metastases, and cancer-treatment resistance. In their resulting paper, published in March in Oral Oncology, the authors suggest an investigational strategy to be sure that the anti-mucositis effect of LLLT is independent of its possible potential to enhance some tumor behaviors in HNC. Included are appropriate preclinical modeling, short- and long-term follow-up of LLLT-treated patients, and the requirement for consistency of LLLT parameters.

We spoke with Raj Nair, Chair of the MASCC/ISOO Working Group on PBM-LLLT, about the potential of this treatment in supportive cancer care and the group's plans for the future. Raj will also present a seminar on PBM-LLL in supportive care at the MASCC/ISOO Annual Meeting in Adelaide on June 25th as part of the ISOO CE Day.
What makes PBM-LLLT an attractive treatment for mucositis? Light has always been an integral part of humanity's survival and healing. The “reinvention” of this approach to healing provides us with a modality that has very little or no adverse effects. The light-emitting device is easy to use, economical, and it promotes patient and operator compliance. Moreover, it allows us to avoid adding yet another drug to the long list of cancer regimens.

What are the most important questions to answer before advocating PBM-LLLT for this application? As we know, LLL is included in the MASCC/ISOO Clinical Practice Guidelines, and there should not be any concerns regarding its use in chemotherapy and HSCT-induced mucositis. One important question or possible reservation concerns whether and how LLL could affect a probable residual tumor, in HNC, for example.

What are the possible risks of this treatment? There are no known risks of this treatment if used by a trained clinician, one who is knowledgeable about calibration of the device, diagnosis, and dosage.

What other research questions does the group plan to address? Well-designed laboratory studies on the identified biological pathways and molecules (Sonis et al., 2016) using animal models, especially in the context of HNC.

What is the focus of the seminar that you will lead in Adelaide? The seminar will cover an update on the biological potential of LLL and what we know so far about PBM on a cellular/molecular level. We will also try to answer the question of whether we are ready to use LLL as a prescribable modality in supportive care.


Ensuring Patient-Centered Care:
New American College of Surgeons Cancer Program Standards

The Commission on Cancer (CoC) has released the 2016 edition of Cancer Program Standards: Ensuring Patient-Centered Care, which encompasses the requirements that cancer programs must meet to earn and maintain CoC accreditation. The manual includes standards to promote patient-centered cancer care, including delivery of genetic testing and counseling, the development of survivorship care plans, and mechanisms to address psychosocial distress and healthcare disparities and barriers. The standards have been enhanced with clarifications and improved language to help with the comprehension of the compliance criteria. The 2016 edition requirements became effective on January 1, 2016 (with the exception of the 2017 phase-in standards, which go into effect January 1, 2017. Programs must be in compliance with the standard criteria by that date. Cancer programs will be rated on the standard compliance criteria that were in place for the activity years prior to the phase-in date.

You can download a copy of the manual, order a hard copy of the manual, or download replacement pages for the 2012 edition at the website of the American College of Surgeons. A brief summary of the 2016 revisions is also available.

https://www.facs.org/quality%20programs/cancer/coo/standards

The Commission on Cancer (CoC) is a consortium of professional organizations dedicated to improving survival and quality of life for cancer patients through setting standards to promote cancer prevention, research, education, and monitoring of comprehensive quality care.

ICCN 2016 Preliminary Program Now Available!

The International Society of Nurses in Cancer Care (ISNCC) will hold its International Conference on Cancer Care Nursing (ICCN 2016) from September 4-7 in Hong Kong, China. The theme for this year’s conference is “Embracing Globalization Through Leadership and Partnership in Cancer Care.” The conference has a strong focus on supportive care and nurses’ roles. An International Partner Joint Session with MASCC will feature Alex Molasiotis speaking on “Peripheral Neuropathies After Chemotherapy: A Challenging and Under-researched Symptom.” Alex will also present a preconference workshop on publishing. The preliminary program is now available online and for download at the ISNCC website: http://www.isncc.org

Early-bird registration rates are available through July 6th.
A Focus on Supportive Care in EONS Magazine

For its Spring 2016 issue, EONS Magazine partnered with MASCC for a special section on symptom management and quality of life for cancer patients. The issue includes a guest editorial by MASCC President David Warr and articles by several MASCC members: Ian Olver, Lidia Schapira, Mellor Davis, David Hui, Paz Fernandez-Ortega, Jody Phillips, Manon Lemonde, Massey Nematollahi, and Alex Molasiotis. This month, we include a summary of Ian Olver’s lead article on MASCC and its passion for supportive care.

The Future of MASCC and the Role of Nurses

Ian Olver, MD, President-Elect of MASCC, authored the lead article in a special supportive care feature in the Spring 2016 issue of the EONS Magazine.* The article, titled “MASCC and a Passion for Supportive Care in Cancer,” stresses the importance of identifying and managing supportive care needs of people with cancer—something that nurses are in a prime position to do.

MASCC has long stressed that “Supportive care makes excellent cancer care possible.” And supportive care, in its broadest sense, covers all stages of care, from diagnosis through survivorship to end of life for patients and for caregivers. In his article, Ian discusses emerging supportive care topics around the globe and the ways that MASCC, with its wide international membership, is playing a role in addressing them. Areas of ongoing need include the following:

- Disparities in delivery of supportive care, including availability and cost of both cancer and supportive care drugs;
- The wide use of CAM, the need for clinical trials of efficacy, and the potential for adverse effects and treatment interactions;
- Patterns of toxicity with new, targeted therapies;
- Psychosocial and spiritual support;
- Long-term needs of cancer survivors and the need for early intervention.

MASCC’s 17 Study Groups provide many opportunities for members to participate in research, educational projects, practice guideline development, and international programs to address these needs.

Ian also stresses the important contributions of nurses to supportive care and the critical role they play in MASCC. Nurses, who are instrumental in day-to-day care, are a major source of information and support for patients.

“He invites nurses with interests in supportive care to join MASCC, where they can contribute their knowledge and expertise on a global scale. MASCC will continue to work closely with groups such as EONS and to explore opportunities for mutual benefit.

“We want to continue to grow and, given that nurses have made significant contributions to education and research in supportive care, we would encourage those with a special interest in this field to engage with us.”

*The EONS Magazine brings the latest news about the European Oncology Nursing Society to its members. The EONS is a pan-European organization dedicated to the support and development of cancer nurses. Society programs help nurses develop skills, network with one another, and raise the profile of cancer nursing across Europe.

2nd Annual Guildford Supportive Care in Cancer Course

On November 9-10, the Royal College of Physicians, London, will host the 2nd Annual Guildford Supportive Care in Cancer Course. The course is organized by the Department of Supportive & Palliative Care at the Royal Surrey County Hospital (incorporating St. Luke’s Cancer Centre) and is endorsed by MASCC’s Executive Committee. Course Organizer Andrew Davies (Vice-Chair, Palliative Care Study Group) has generously offered a £100.00 discount on the two-day registration rate for MASCC members.

The aim of this course is to provide an up-to-date, evidence-based review of current issues in supportive care. The focus of this year’s course is metastatic bone disease and strategies for preventing its development and progression. Other topics this year include e-technologies for symptom assessment, patterns of toxicity with new targeted therapies, and the widespread use of CAM, the need for clinical trials of efficacy, and the potential for adverse effects and treatment interactions. The speakers, all of whom work in oncology, share an interest in supportive care and include specialists in clinical oncology, medical oncology, haematology-oncology, palliative medicine, orthopedic surgery, and allied health professionals. See the course brochure for full details of speakers, topics, and a registration form: http://www.mascc.org/guildford-supportive-care • Register before July 4th for Early Bird Rates!

To register at the special discounted rate for MASCC members, write “MASCC Member Rate” at the bottom of the registration form. For more information, contact Victoria Robinson, Study Day Administrator, Supportive & Palliative Care Department, Royal Surrey County Hospital, Egerton Road, Guildford, Surrey GU2 7XX. Email: rsc-tr.SPCT-Courses@nhs.net Tel: +44 1483 571122, ext. 2043 (Tuesdays 8:00-4:00; Wednesdays or Thursdays: 8:00-1:00) Fax: +44 1483 406868

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Helsinn Group Celebrates 40 Years of Supportive Cancer Care

This year, Helsinn Group, a Swiss pharmaceutical company and member of MASCC's Corporate Advisory Council since 2005, celebrates its 40th anniversary. Helsinn is one of the world’s leading supportive cancer-care companies with a portfolio of numerous medicines and therapies. Helsinn now supports people with cancer in more than 90 countries, through a network of over 70 trusted commercial and marketing partners. Its goal is to improve care and quality of life for every person affected by cancer.

In honor of Helsinn’s 40th anniversary, Riccardo Braglia, Vice Chairman and CEO, offered a few words on the company’s long commitment to supportive care in cancer and its plans for the future.

How would you describe Helsinn in 2016? Helsinn is a family-run company that delivers leading cancer supportive care by providing the highest quality products and services to improve the lives of people with cancer. For 40 years we’ve been improving the everyday lives of patients, always guided by our core family values of respect, integrity, and quality. We are committed to extending the global reach of our quality care, to support more patients through lengthening the journey of living with cancer.

Why has Helsinn focused on cancer supportive care in the last decade? As cancer treatments improve, enabling people to live longer, cancer has become a “chronic disease.” The need for products designed to improve quality of life has never been greater. Helsinn’s cancer-care therapies have evolved to fit the needs of people with cancer and have played a critical role in shaping the supportive care market as it adapts to fit this new disease model. We strive to maintain the highest standards and provide world-class products and services that improve the health and the quality of life for people affected by cancer worldwide.

Can you give an example of some of the most important cancer supportive care products introduced to the market by Helsinn? In 2003, Helsinn launched Aloxi®, for chemotherapy-induced nausea and vomiting (CINV), through its network of commercial partners worldwide. In 2015, we launched the next generation Akynzeo®, which is the first approved fixed combination oral agent that targets two critical signaling pathways associated with CINV by combining netupitant, an NK_1 receptor antagonist, and palonosetron, a 5-HT_3 receptor antagonist, in a single capsule for the prevention of CINV. Akynzeo® has now been approved and is marketed in the US, Europe, and Australia, and it has also been included as a treatment option in the ASCO, NCCN, and ESMO/MASCC antiemesis guidelines.

How does Helsinn plan to advance innovation in the area of cancer supportive care? Helsinn has a high-quality and growing R&D engine, from pre-clinical research through all phases of clinical development with proven expertise. In the last five years, we have reinvested an average of 30 percent of our total sales each year in R&D, and we now have more than 600 committed employees globally, with a presence in Switzerland, Ireland, the US, and China. Our broad pipeline of programs targets diverse unmet needs in cancer supportive care, including chemotherapy-induced diarrhea, cancer anorexia, cachexia, chemotherapy-induced neuropathic pain, metabolic conditions, and — through our new Helsinn Integrative Care Division - nonpharmaceutical products and treatments.

What has driven your recent move into the area of nonpharmaceutical products for cancer patients? A growing number of cancer patients seek supplements and herbs to help manage the side effects of cancer and cancer treatments without the awareness or support of their oncologists, and this approach can pose risks if not managed properly. In response, we have created Helsinn Integrative Care, which aims to bridge the gap between patients’ growing interest in self-management and the lack of clinical evidence and oncologist support for the use of these products. At Helsinn, a trusted provider of cancer supportive care products, we believe that we have an important role to play in signposting appropriateness with quality within this expanding new market. The company’s long-term vision is to offer entrusted options to people with cancer wherever there is demand, not only with pharmaceutical products, but also through medical devices, supplements, and medical foods that are clinically validated and under the control of healthcare practitioners.
JUNE 7TH NATIONAL CANCER SURVIVORS DAY

Cancer Survivors Day is celebrated around the world each year on the first Sunday in June to honor cancer survivors, celebrate milestones, and show that life after a cancer diagnosis can be productive and rewarding. Visit www.ncsd.org/register to register your event and access resources to help plan and promote it.

New MASCC Members

MASCC welcomes the following new members who joined us in March.

- Kiriko Abe, Japan
- Eskinder Ali, Singapore
- Julia Ashenhurst, United States
- Imogen Ball, Australia
- Kate Bilton, Australia
- Alison Bounds, Australia
- Yin Ting Cheung, United States
- Muralidharan Chellamma, Canada
- Keith Cox, Australia
- Olga Rodica Criuland, Romania
- Patrick Crombez, Belgium
- Adrian Dabscheck, Australia
- Sumith Gunawardane, Sri Lanka
- Toshinobu Hayashi, Japan
- Pui Ying Patty Ho, China
- Claire Kent, Australia
- Su-Jin Koh, Republic of Korea
- Yelena Kruse, United States
- Maria Lapid, United States
- Wing Sum Li, Hong Kong
- Jean-Marc Maurel, South Africa
- Anne McGregor, New Zealand
- Shehzad Niazi, United States
- Simon Noble, United Kingdom
- Macy Tong, Hong Kong
- Maria Delores Teneza, Philippines
- Mary Lilia Bernadette Tinio, Philippines
- Macy Tong, Hong Kong
- Mario Toro, United States
- Rosita Van Kullenburg, Australia

Correction to the April Issue

In our April issue, we inadvertently left out the names of the founders and early leaders of the Mucositis Study Group (in the article “Profile: Mucositis Study Group”). The MSG was formed in 1998 and was co-led in its early years by Edward Rubenstein, Mark Schubert, and Douglas Peterson, who also led in the development of MASCC’s first clinical guidelines for the prevention and treatment of cancer therapy-induced oral and gastrointestinal mucositis. This has been corrected in the online edition of the April Society News. We regret the error.

Have any news items to share?

Please send contributions for the MASCC News to MASCCnews@mascc.org or to Toni Clark, Editor at tclark@mascc.org

For more information please contact: Åge Schultz, MASCC Executive Director: aschultz@mascc.org

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