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ASCO beyond McCormick: perseverance, collaboration, mentorship

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It is difficult to describe my experience as a first-time attendee at this year's the American Society of Clinical Oncology annual meeting in simple words. The meeting at the sprawling McCormick Convention Center in Chicago was packed with more than 30,000 attendees; the program with its many options and offerings was as overwhelming. "ASCO Daily News!" a gentleman announced. What's the latest, ground-breaking news of the day? I thought. Perhaps reading the Daily News was the least I had to do to keep apace with the meeting. That assumption was way off the mark. It is not possible to keep up with *all* the meeting news, not even the selected "key" news.

My mentors had advised me to focus my program selections to my goals and interests, and there were tools aplenty for helping me to plan my convention itinerary. The sessions were organized by tumor types, and by various topics such as professional development, health services research, and so on. Mobile applications such as ePlanner/iPlanner allowed me to search the sessions and plan my calendar of events.

By the end of the first day, I learned that even that was too much. I was physically worn out from walking between the day's presentations. This was where the value of the virtual meeting came into play. At the start of the second day, I chose the 3 most important sessions and saved the others for the virtual meeting. That allowed me to spend time in the hallways meeting my mentors' collaborators, at the posters exchanging ideas, in Room S501 lounging with the fellows from other programs, and in a long line at Starbucks conversing with a community oncologist from Michigan.

My favorite part of the meeting was the plenary session because it exemplified some of the ideals we strive for: perseverance, collaboration, and mentorship. For example, the SWOG9346 trial¹ of intermittent versus continuous androgen deprivation in metastatic prostate cancer was initiated when the presenter was a "very young woman" and the discussant was a "young man," to use their words. Over nearly 2 decades, they persevered to enroll more than 3,000 patients through the collaboration of 5 cooperative groups in the United States, Canada, and Europe.

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In another study, the long-term follow-up results of the EORTC 26951 trial² of adjuvant chemotherapy in anaplastic oligodendrogial tumors epitomized the power of a cooperative group study that led to the discovery of a molecular predictive biomarker. This was orchestrated through the group's concerted efforts to obtain missing tumor samples to improve the statistical power for 1p, 19q codeleted subgroups. This kind of work would not have been possible without the investigators' diligence, perseverance, and collaborative efforts.

Finally, in Dr. Rakesh K. Jain's Science of Oncology Award lecture,³ he took us on a tour of the tumor microenvironment and introduced each of the abnormal players—blood vessels, lymphatic vessels, and the cells embedded in the matrix. He explained how each of those abnormalities could contribute to tumor progression, immune suppression, and treatment resistance, and how they could be investigated for cancer treatment with a focus on “normalizing the tumor microenvironment.”

All in all, the meeting left me with the imprints that will guide me for the rest of my career.

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