



The 4th MEMAGO CONGRESS

Middle East & Mediterranean Association
of Gynecological Oncology

and

1st Emirates Gynecological Oncology Conference



Roberto Angioli, M.D.

IGCS PRESIDENT

Chairman OB/GYN University of Rome



IGCS MISSION:
TO ENHANCE THE CARE OF WOMEN WITH
GYNECOLOGIC CANCER WORLDWIDE
THROUGH EDUCATION AND TRAINING AND
PUBLIC AWARENESS.



IGCS

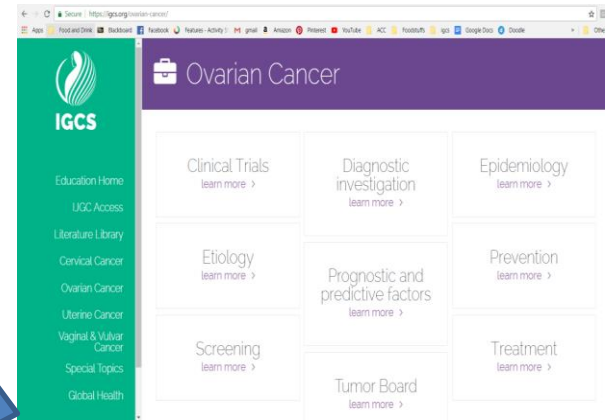
MISSION AND ROLE OF IGCS

Project ECHO®

- Monthly tumor boards via videoconferencing technology with Strategic Alliance Partnership members and trainees as part of the Global Curriculum & Mentorship Program
- Partnering region providers present cases (history, lab, treatment, challenges)
- Feedback and guidance for cases provided by the IGCS faculty consultants
- Regional providers and IGCS faculty consultants work together to provide quality care
- Short didactic following case presentations



IGCS EDUCATION PORTAL



GLOBAL CURRICULUM & MENTORSHIP PROGRAM



COMPREHENSIVE TWO TO THREE YEAR EDUCATION AND TRAINING PROGRAM DESIGNED FOR REGIONS AROUND THE WORLD THAT DO NOT CURRENTLY HAVE FORMAL TRAINING IN GYNECOLOGIC ONCOLOGY



THE PROGRAM MATCHES INSTITUTIONS AND INDIVIDUALS FROM HIGHER RESOURCE SETTINGS (INTERNATIONAL MENTORS) WITH PARTNERS IN LOWER RESOURCE SETTINGS WISHING TO OBTAIN FORMAL GYNECOLOGIC ONCOLOGY TRAINING



THE INTERNATIONAL MENTORS EVALUATE THE TRAINEE'S PROGRESS WITH EVALUATION REPORTS, SURGICAL CASE LOG REVIEW AND VIRTUAL TUMOR BOARDS.



THE MENTORS TRAVEL TO THE TRAINING SITE 2-3X PER YEAR FOR HANDS-ON TRAINING AND HOST THE TRAINEE FOR A 1-3 MONTH OBSERVERSHIP



UPON COMPLETION OF THE PROGRAM TRAINEES TAKE A FINAL EXAMINATION AND RECEIVE A CERTIFICATE OF COMPLETION

IGCS MEMBERS

MULTIDISCIPLINARY MEMBERSHIP FROM OVER 150 COUNTRIES

- GYN ONC
- SURG ONC
- MED ONC
- RAD ONC
- PATHOLOGIST
- ALLIED HEALTH PROFESSIONALS

- ASIA
- NORTH AMERICA
- EUROPE
- SOUTH AFRICA
- OCEANIA
- MIDDLE EAST

2019

3000 Members
(projected)

2018

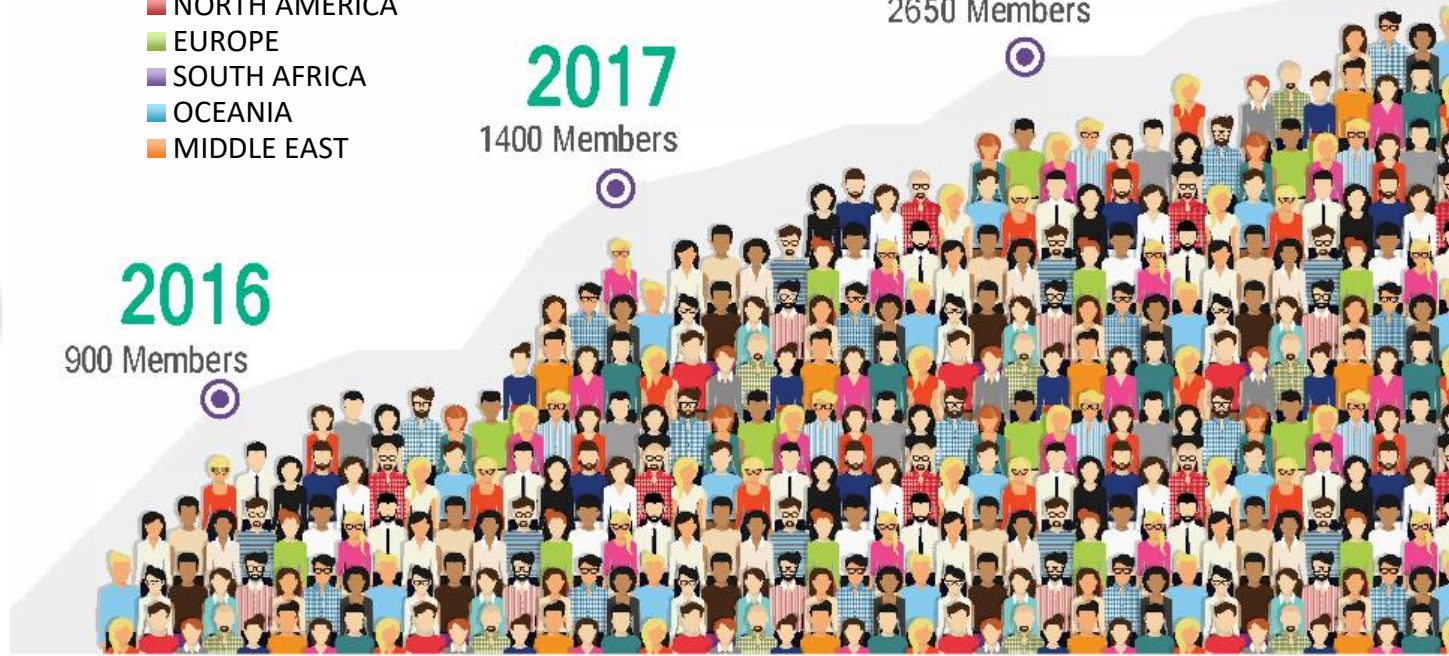
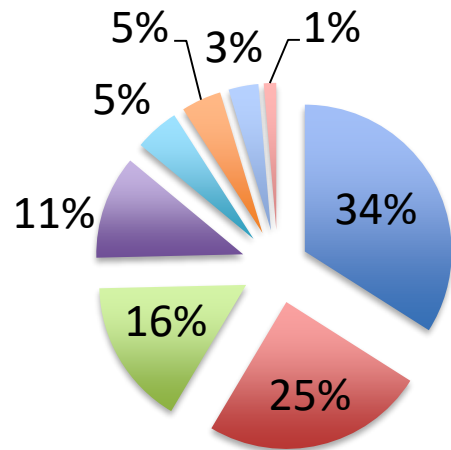
2650 Members

2017

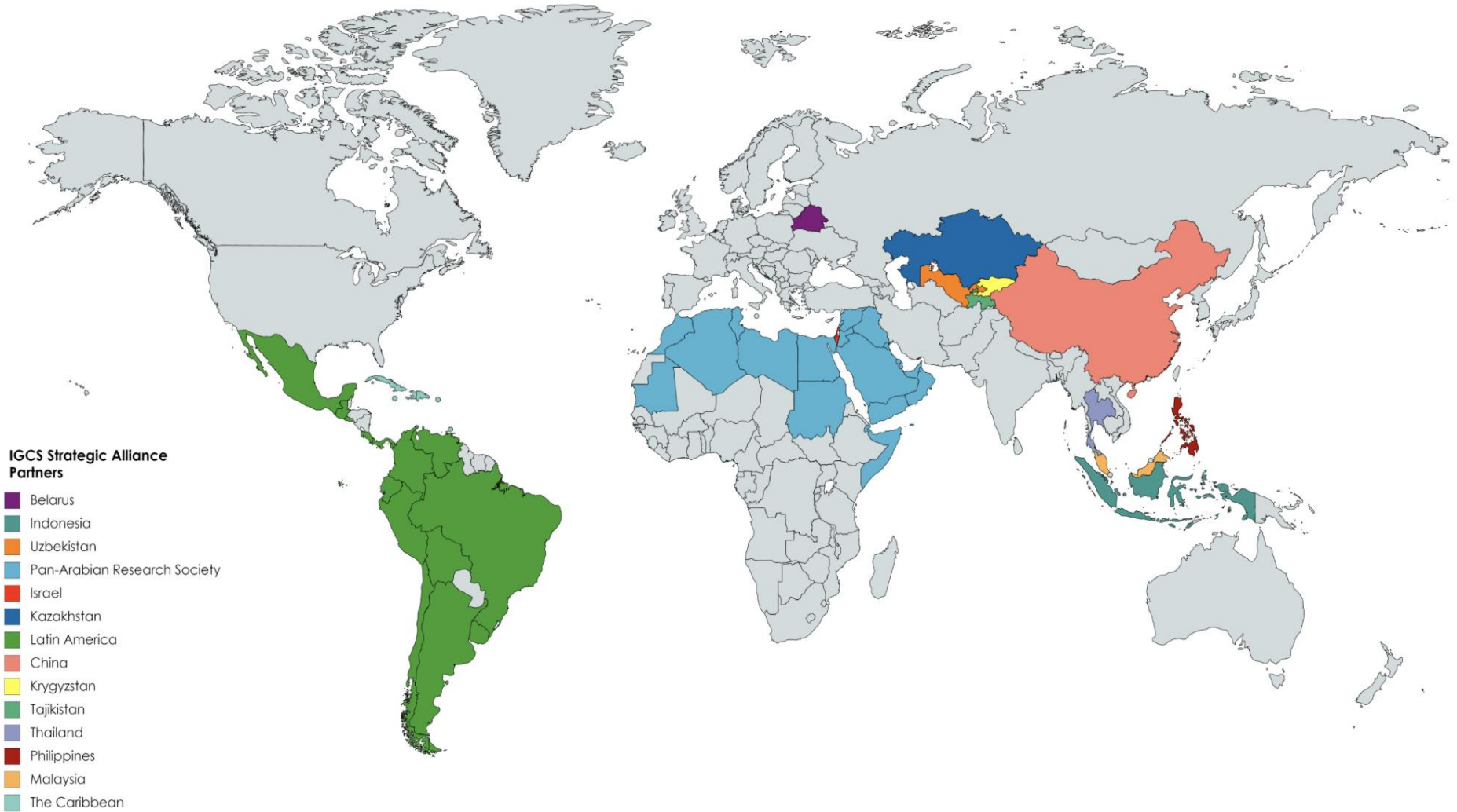
1400 Members

2016

900 Members



IGCS STRATEGIC ALLIANCE PARTNERS





MEMAGO (Middle East and Mediterranean Association of
Gynecologic Oncologists)

IGCS (International Gynecologic Cancer Society)

PARTNERS SINCE JUNE 5, 2018



IGCS

FUTURE CONGRESSES



North
America
New York
2021



Europe
Rome, Italy
2020



Kyoto,
Japan
2018

Asia
Future

Middle
East
2022



South America
Rio de Janeiro,
Brazil 2019

Global Meeting of the
International Gynecologic Cancer Society



IGCS 2019

Rio de Janeiro

BRAZIL

SEPTEMBER 19-21, 2019

SEE YOU AT **IGCS 2020**

IGCS
2020
ROME



SEPTEMBER 10-13, 2020
AUDITORIUM PARCO DELLA MUSICA
ROME - ITALY

IGCS
INTERNATIONAL
GYNECOLOGIC
CANCER SOCIETY

igcs2020.com



IGCS

ROME SEPTEMBER 9-13, 2020



In 2020, the IGCS's Annual Global Meeting will be held in Rome, in the prestigious location of Auditorium Parco della Musica, on 10-13 September.

Auditorium is a sophisticated music architecture and an extraordinary urban complex.

It was finished in 2003 and, from that moment, started to run at full speed, hosting important national and international events.



IMPORTANCE OF PATIENT REPORTED OUTCOME AND QOL

[Gynecol Oncol. 2018](#)

[Semin Oncol Nurs. 2012](#)

[Future Oncol. 2010](#)

**PATIENT
REPORTED
OUTCOME**

CAREGIVERS

**PATIENT
QUALITY OF
LIFE**

We have shown that incorporating a **focused patient-reported symptom** questionnaire into routine outpatient care of gynecological oncology patients undergoing chemotherapy was met with a **high degree** of patient and provider **satisfaction** regarding questionnaire content, feasibility, and perception of care improvement.

Need to assess patients and family members for distress and intervene to reduce distress by fostering **patient-caregiver, teamwork communication, and self-care; providing information; and referring to resources as needed.**

QOL includes the measurement of patient-reported outcomes, mostly described as the physical, social, emotional and functional wellbeing of the patient. Therapeutic interventions such as chemotherapy and/or radiation can **thus be monitored from a patient perspective.**



ADVOCACY

BURDEN OF CANCER IN THE WORLD

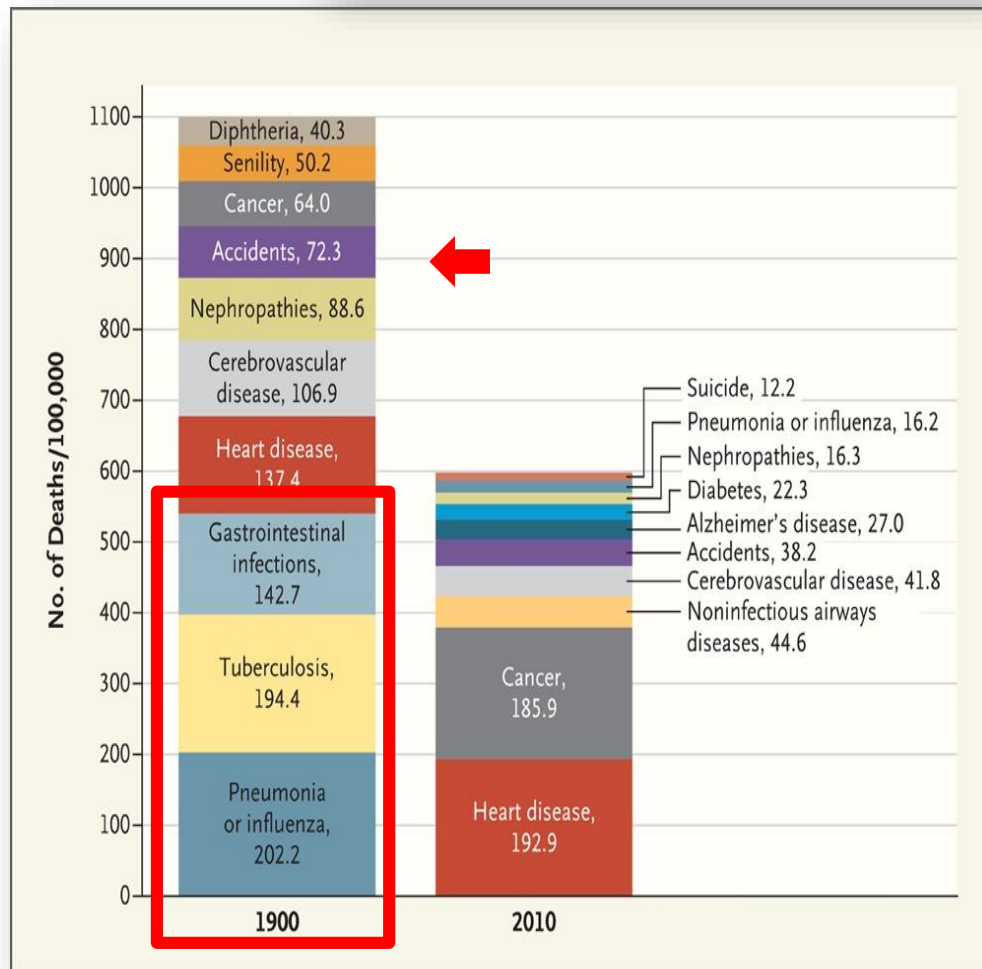


The NEW ENGLAND
JOURNAL of MEDICINE

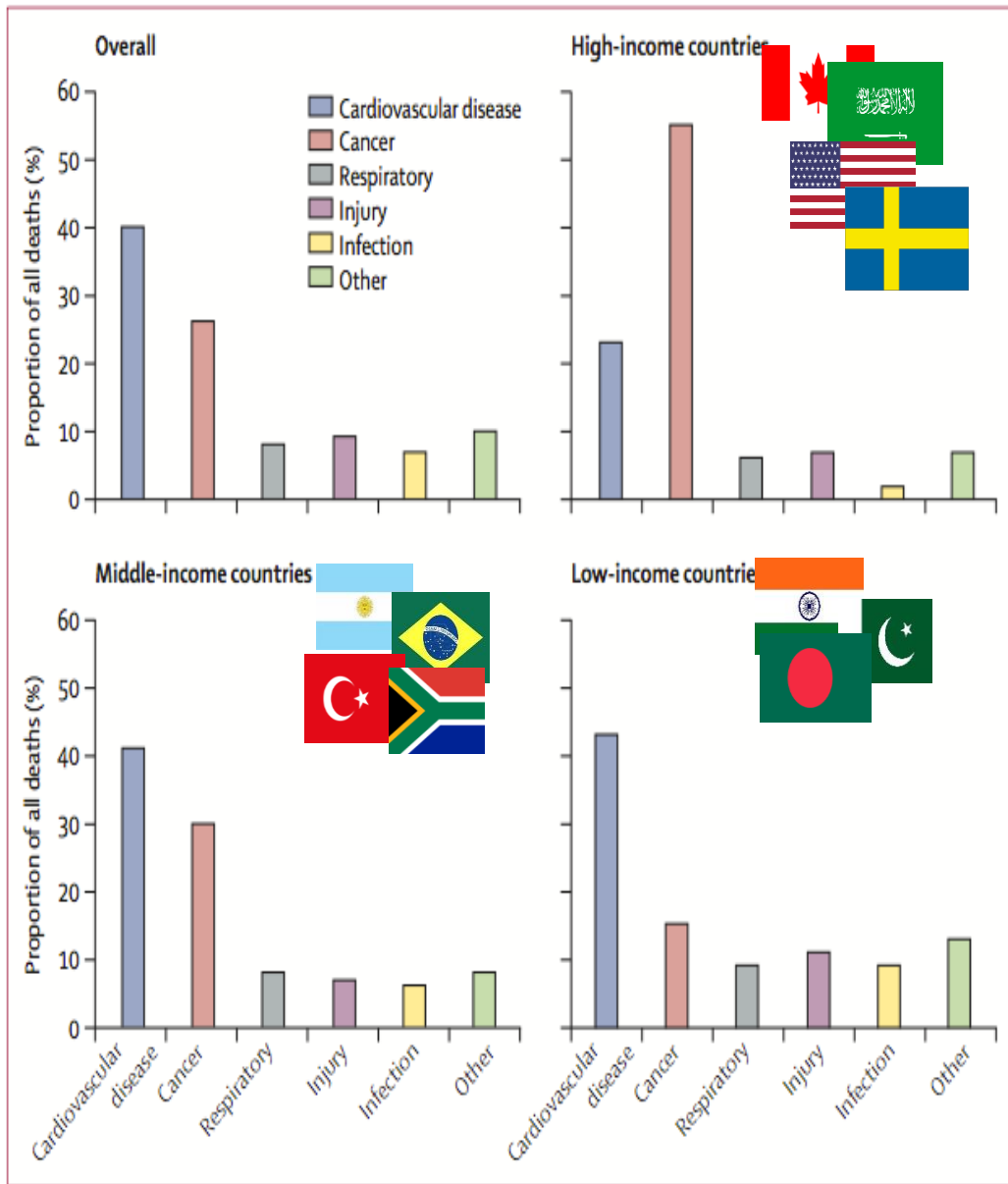


Abscesses	1	Hernia, or Rupture	3
Aneurism	1	Jaundice	10
Apoplexy	13	Inflammation of the bowels	1
Burns or Scalds	6	_____ of the stomach	1
Cancer	5	Killed by lightning	1
Casualties	15	Insanity	1
Childbed	14	Intemperance	2
Cholera Morbus	6	Locked jaw	2
Colic	2	Mortification	11
Consumption	221	Old Age	26
Convulsions	36	Palsy	12
Cramp in the stomach	2	Pleurisy	8
Croup	1	Quinsy	15
Debility	28	Rheumatism	1
Decay	20	Rupture of blood vessels	1
Diarrhoea	15	Small-Pox, (at Rainsford's Island)	2
Drinking cold water	2	Sore throat	1
Dropsy	21	Spasms	2
_____ in the head	23	Stillborn	49
Drowned	13	Suicide	1
Dysentery	14	Sudden death	25
Dispepsia or Indigestion	15	Syphilis	12
Fever, bilious	7	Teething	15
_____ pulmonic	46	Worms	11
_____ inflammatory	24	Whooping Cough	14
_____ putrid	6	White swelling	2
_____ typhus	33	Diseases not mentioned	48
Flux infantile	57		
Gout	3		
Hoemorrhage	4		
		Total,	942

CAUSES OF DEATH IN 1811.
BILL OF MORTALITY FOR THE TOWN
OF BOSTON
(NEJM 1812)



BURDEN OF CANCER



HIGHER INCIDENCE OF CARDIOVASCULAR DISEASE AND RELATED DEATH IN POORER COUNTRIES THAN IN RICHER COUNTRIES

DESPITE A LOWER BURDEN OF CARDIOVASCULAR DISEASE RISK FACTORS IN POORER COUNTRIES

HIGHER INCIDENCE OF DEATH FROM CANCER THAN FROM CARDIOVASCULAR DISEASE IN HICS AND SOME UPPER- MICS.

BURDEN OF CANCER: REASONS BEHIND

WHY CANCER RATES ARE INCREASING?



ALCOHOL



UV EXPOSURE



DIET



OBESITY



REDUCED PHYSICAL ACTIVITY



SMOKE

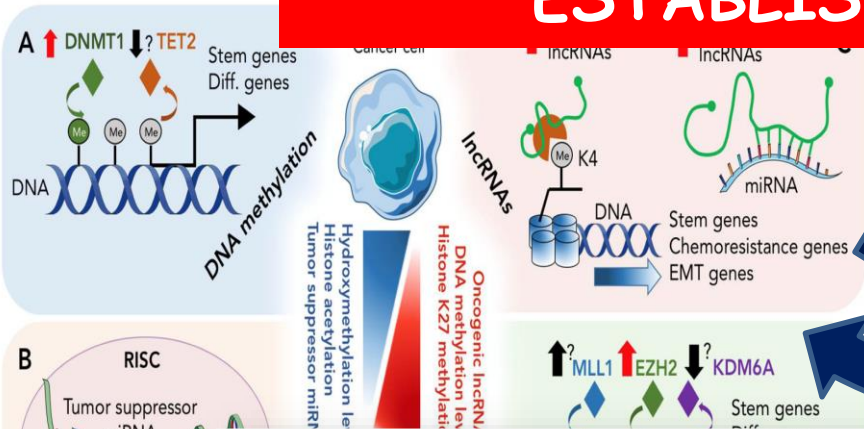
EPIGENETIC CHANGES

CANCER

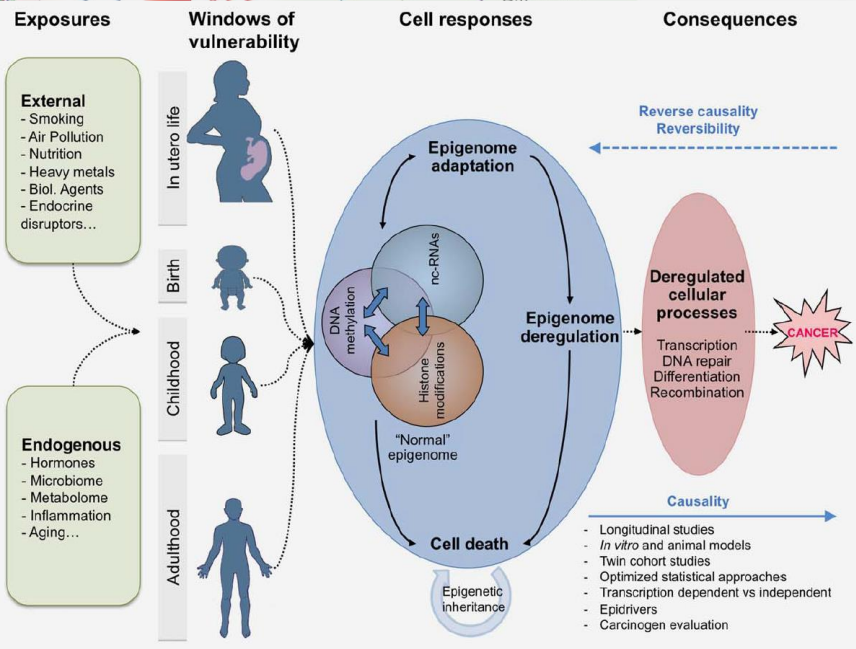
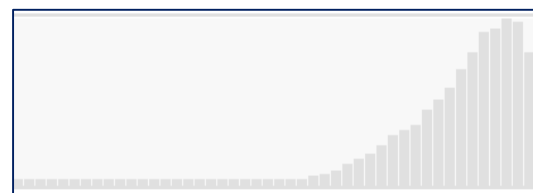


BURDEN OF CANCER

THE FIRST LINK BETWEEN DNA METHYLATION AND CANCER WAS ESTABLISHED IN 1983



PUBMED RESEARCH



EPIGENETIC MECHANISMS REGULATING CANCER STEM CELLS

Oncology reports 2014
Epigenomics, 2018
Cancer J. 2017
Methods Mol Biol. 2015

BURDEN OF CANCER

CONCEPTUALLY, EPIGENETIC CHANGES ARE REVERSIBLE AND ARE RATIONAL TARGETS FOR THERAPEUTIC APPROACHES



EPIGENETIC AGENTS INCLUDE VARIOUS CLASSES

DNA METHYLTRANSFERASE (DNMT) INHIBITORS

HISTONE DEACETYLASE (HDAC) INHIBITORS

BRD: BROMODOMAIN

KDM: LYSINE DEMETHYLASE

KMT: LYSINE METHYLTRANSFERASE



BURDEN OF GYNECOLOGICAL CANCER

LOW INCOME COUNTRIES

HIGH INCOME COUNTRIES

HIGH INCOME COUNTRIES

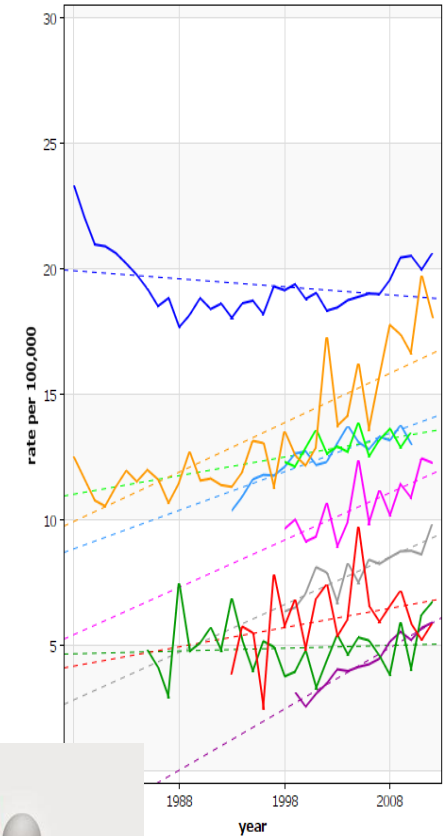
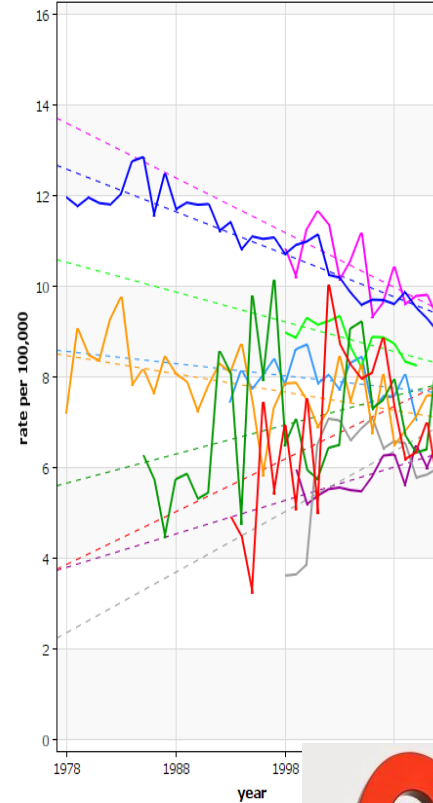
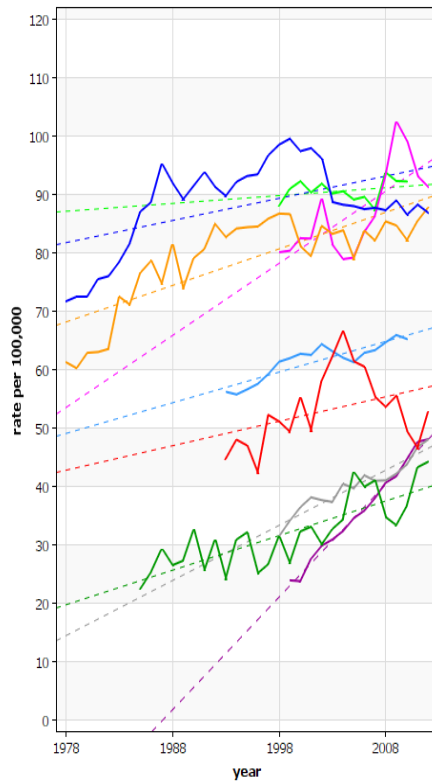
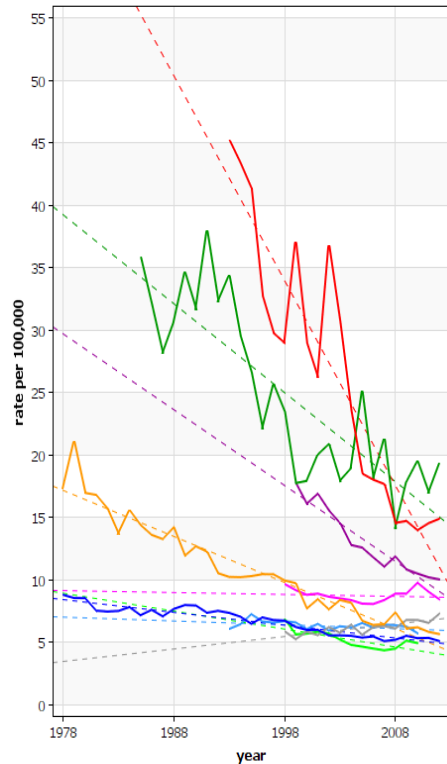
HIGH INCOME COUNTRIES

**CERVICAL
CANCER**

**BREAST
CANCER**

**OVARIAN
CANCER**

**ENDOMETRIAL
CANCER**



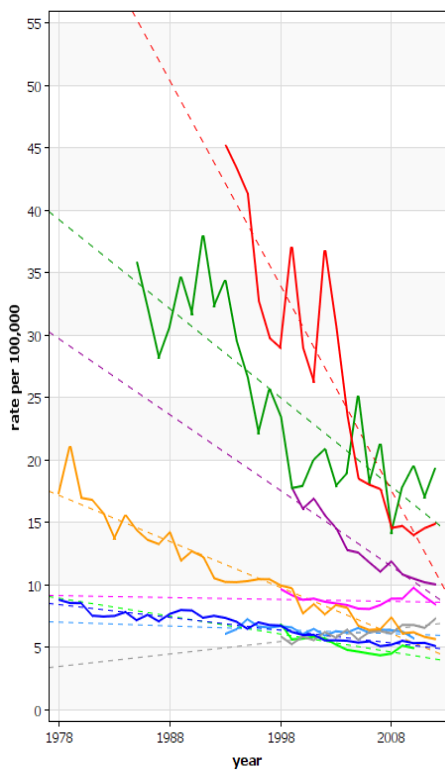
- Brazil, Goiania
- Ecuador, Quito
- USA, SEER (9 registries): White
- USA, SEER (9 registries): Black
- China (5 registries)
- Korea (5 registries)
- Germany (2 registries)
- Italy (8 registries)
- Spain (9 registries)



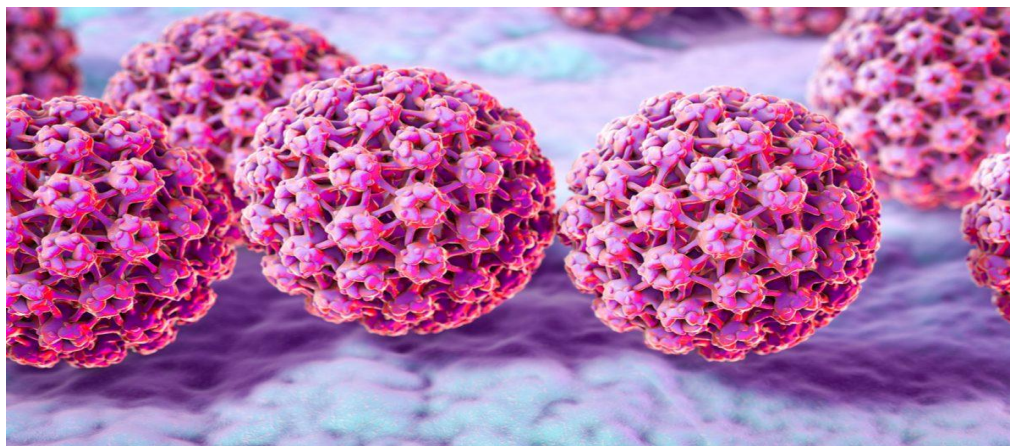
BURDEN OF GYNECOLOGICAL CANCER

LOW INCOME COUNTRIES

CERVICAL CANCER



CERVICAL CANCER IS MORE SPREAD IN LICs BECAUSE LACK OF SCREENING PROGRAMS, VACCINATION AND TREATMENT.



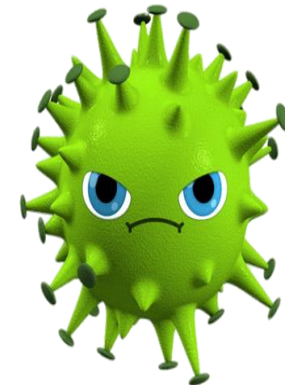
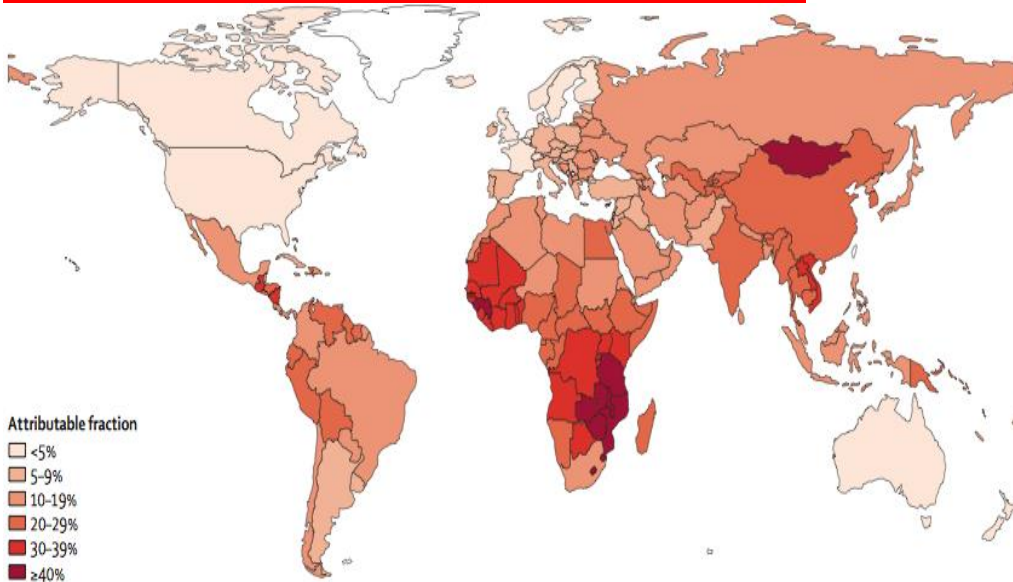
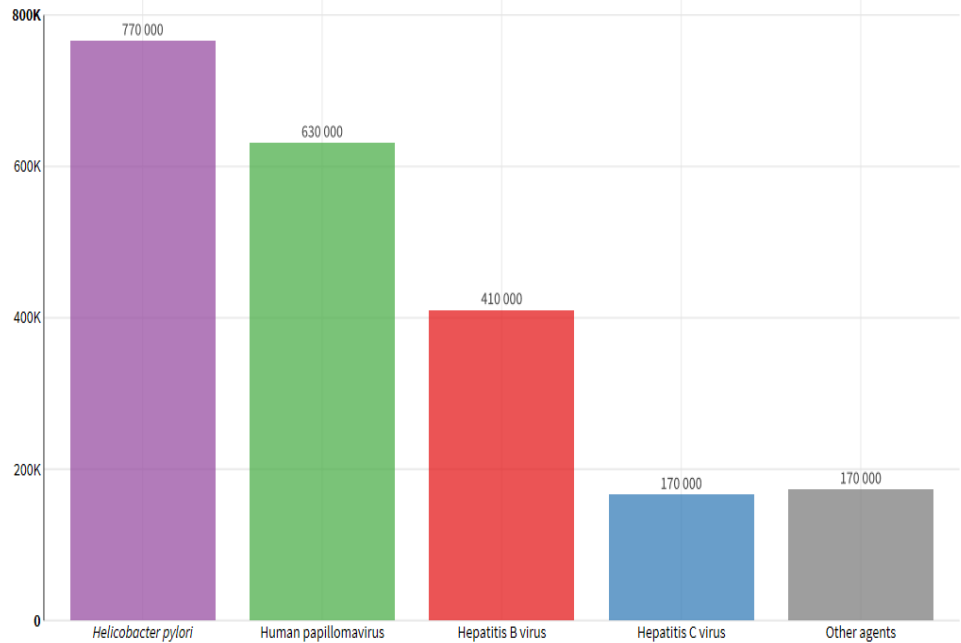
...FURTHER ACTION IS NEEDED

CERVICAL CANCER

OF THE ESTIMATED 14 MILLION NEW CANCER CASES WORLDWIDE IN 2012, 2.2 MILLION (15.4%) WERE ATTRIBUTABLE TO INFECTION.

TWO-THIRDS OF INFECTION-ATTRIBUTABLE CANCERS (1.4 MILLION CASES) OCCURRED IN LESS DEVELOPED COUNTRIES

Cancer cases (all infectious agents) among both sexes in 2012 attributable to infections, in the world, shown by infectious agents



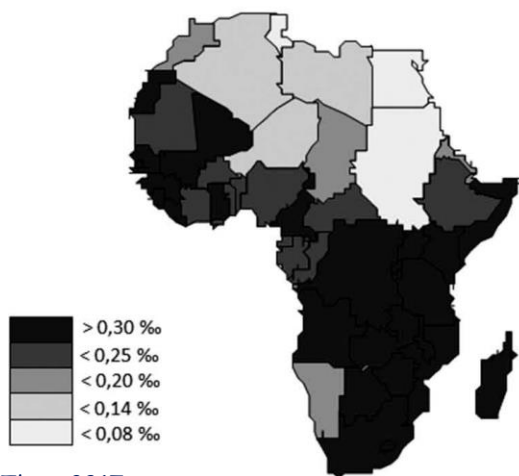
HPV AND CERVICAL CANCER IN AFRICA

SUBSAHARIAN AFRICA

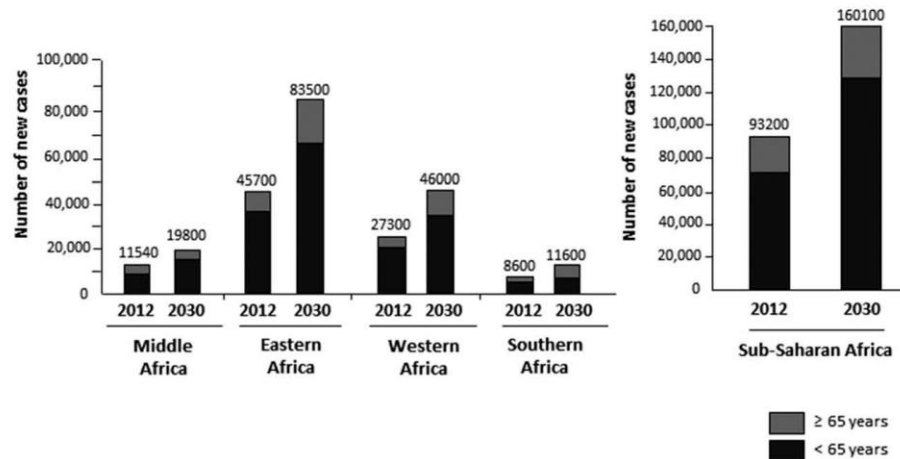
HPV IS RESPONSIBLE FOR 7.7% OF CANCERS IN DEVELOPING COUNTRIES, MAINLY CERVICAL CANCER.

CERVICAL CANCER IS STEADILY INCREASING IN SUB-SAHARAN AFRICA, WITH MORE THAN 75,000 NEW CASES AND 50,000 DEATHS YEARLY

a. Cervical cancer incidence in Africa (2012)



b. Estimated number of new cervical cancer cases in 2012 and 2030



HPV AND CERVICAL CANCER IN MIDDLE EAST

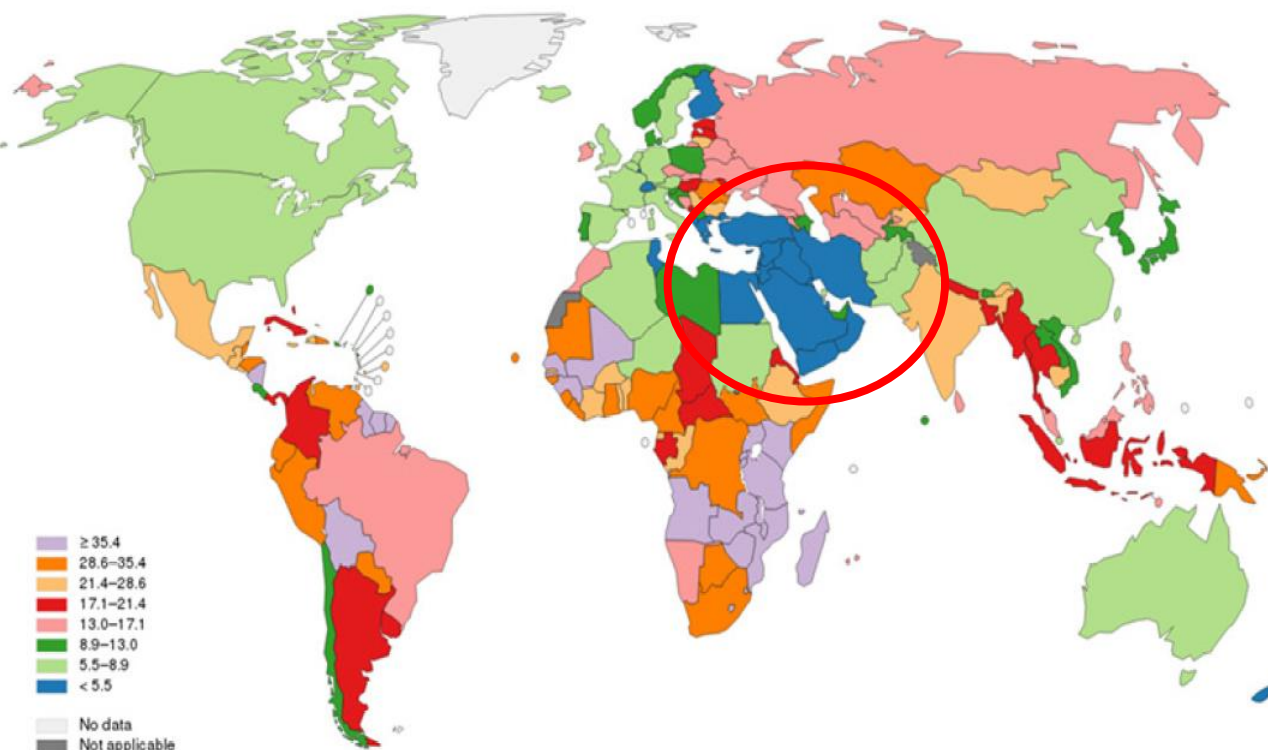
WESTERN ASIA

WESTERN ASIA SHOWS UNEXPLAINABLY LOW CERVICAL CANCER INCIDENCE DESPITE THE LACK OF PROACTIVE NATIONAL SCREENING OR VACCINATION PROGRAMS



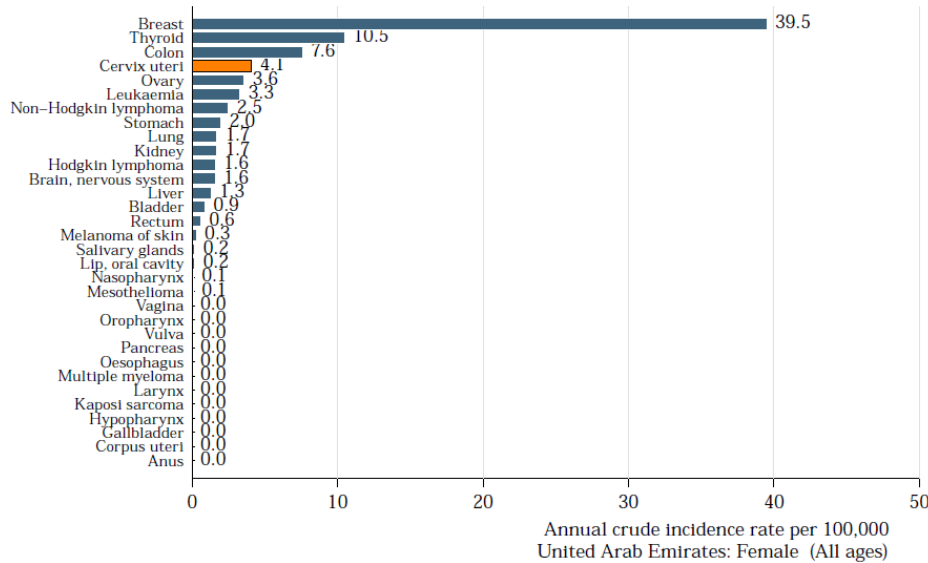
THE RATE OF HPV INFECTION IN CANCER SAMPLES, WE FOUND RELATIVELY LOWER RATE (77%) OF INFECTION COMPARED TO WORLDWIDE ESTIMATE (85-99%).

+ GENETIC POLYMORPHISMS

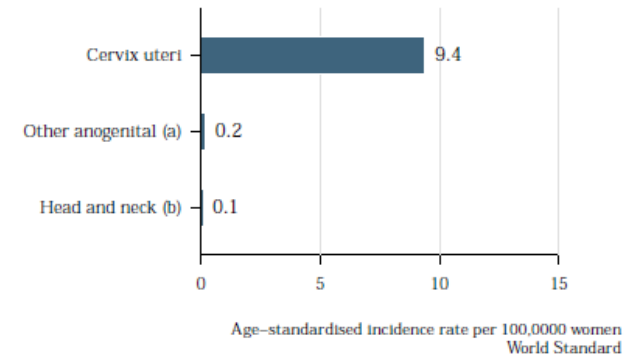


HPV AND CERVICAL CANCER IN MIDDLE EAST

COMPARISON OF CERVICAL CANCER INCIDENCE TO OTHER CANCERS IN WOMEN OF ALL AGES IN THE UNITED ARAB EMIRATES (ESTIMATES FOR 2018)



HPV-RELATED CANCER INCIDENCE IN THE UNITED ARAB EMIRATES (ESTIMATES FOR 2012)



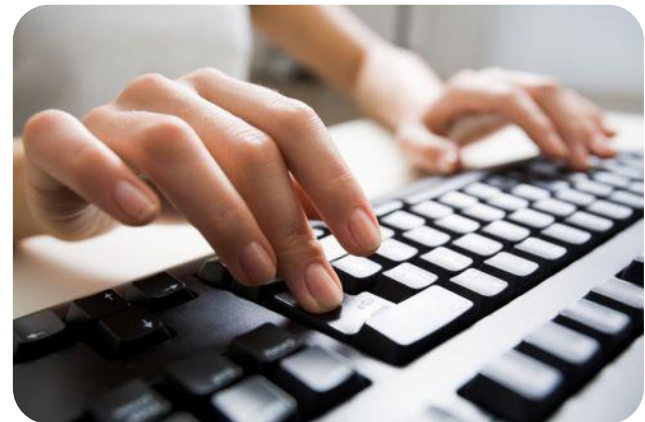
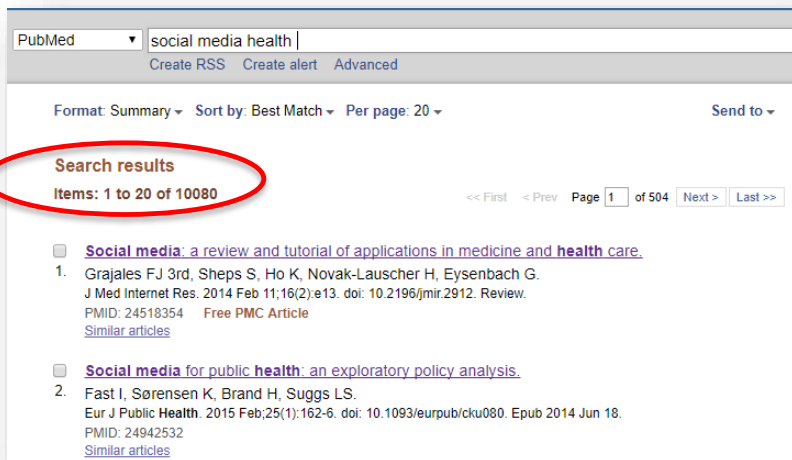
Prevalence (%) of HPV 16 and/or HPV 18 among women with:

Normal cytology	2.5 [†]
Low-grade cervical lesions (LSIL/CIN-1)	24.0 [†]
High-grade cervical lesions (HSIL/CIN-2/CIN-3/CIS)	52.3 [†]
Cervical cancer	72.4 [†]

HPV SENTIMENT



IN RECENT YEARS, THE CENTRAL ROLE OF SOCIAL MEDIA, ALSO IN MATTER OF MEDICINE, IS EMERGING



HPV SENTIMENT

TIME RANGE: 1 AUGUST 2015 - 31 JULY 2016

LINGUA: ITALIAN

MENTION: ARTICLES, NEWS, POST AND TWEETON SOCIAL MEDIA

KEYWORDS:



HPV SENTIMENT



#	Site	Volume	Backlinks	mozRankScore
1	twitter.com	1.569	49.850.734	9,60
2	www.facebook.com	175	28.108.091	9,47
3	blog.ilgiornale.it	28	168	4,98
4	www.vacciniinforma.it	19	115	2,83
5	www.ilfattoquotidiano.it	19	101.828	6,27
6	www.laleva.org	18	619	4,72
7	www.meteoweb.eu	18	11.461	5,56
8	www.panoramasanita.it	17	12.567	4,54
9	www.pharmastar.it	16	46	3,93
10	www.aboutpharma.com	14	29	3,91



HPV SENTIMENT

Rete Vaccini FIMP
 @ReteVacciniFIMP

Comunicazione EMA sui vaccini anti-Hpv I AIFA Agenzia Italiana del Farmaco agenziafarmaco.gov.it/it/content/com...
 09:52 - 9 Nov 2015



Corriere.it Salute
 @Corriere_Salute

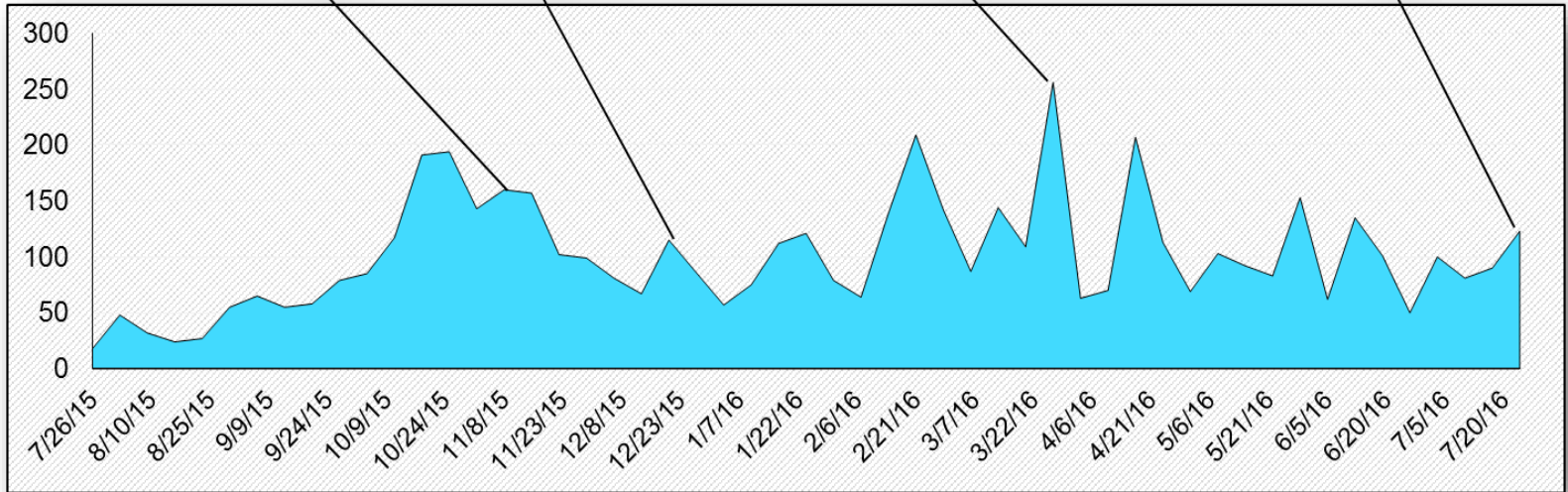
Il vaccino contro il Papilloma virus è gratis ma poco sfruttato
 bit.ly/1WYwTQz
 11:00 - 18 Nov 2015

IRE ISG IFO
 @IREISGufficiale

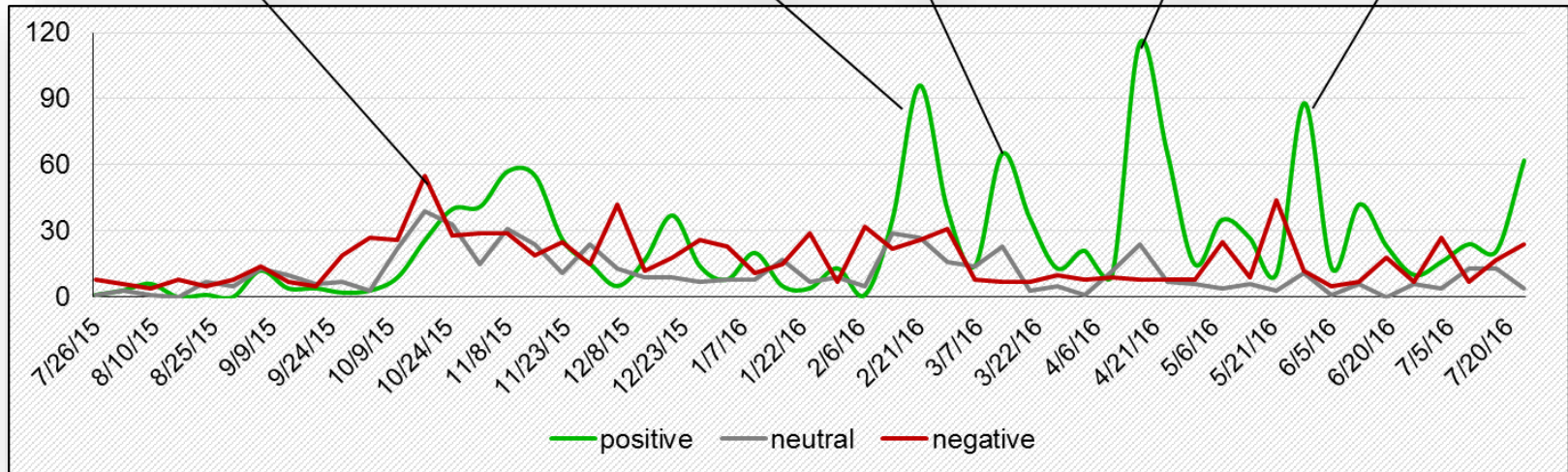
Vaccinazione #HPV: importante studio del #SanGallicano e @istsupsan su maschi a rischio infezioni.
ifo.it/index/news/Mar...
 16:36 - 18 Mar 2016

MSD Salute
 @msdsalute

#HPV : infezioni a picco dall'introduzione delle vaccinazioni
bit.ly/1VciHOj
 20:01 - 31 Lug 2016

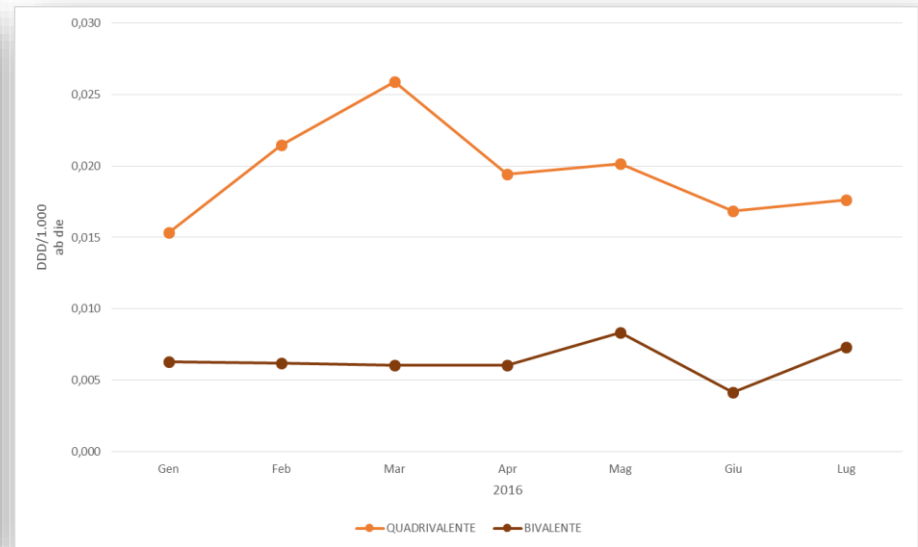
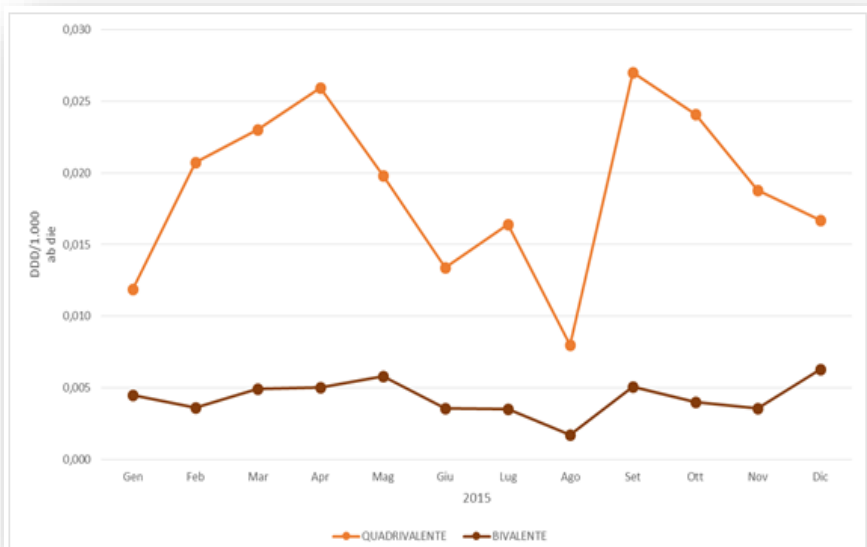


HPV SENTIMENT

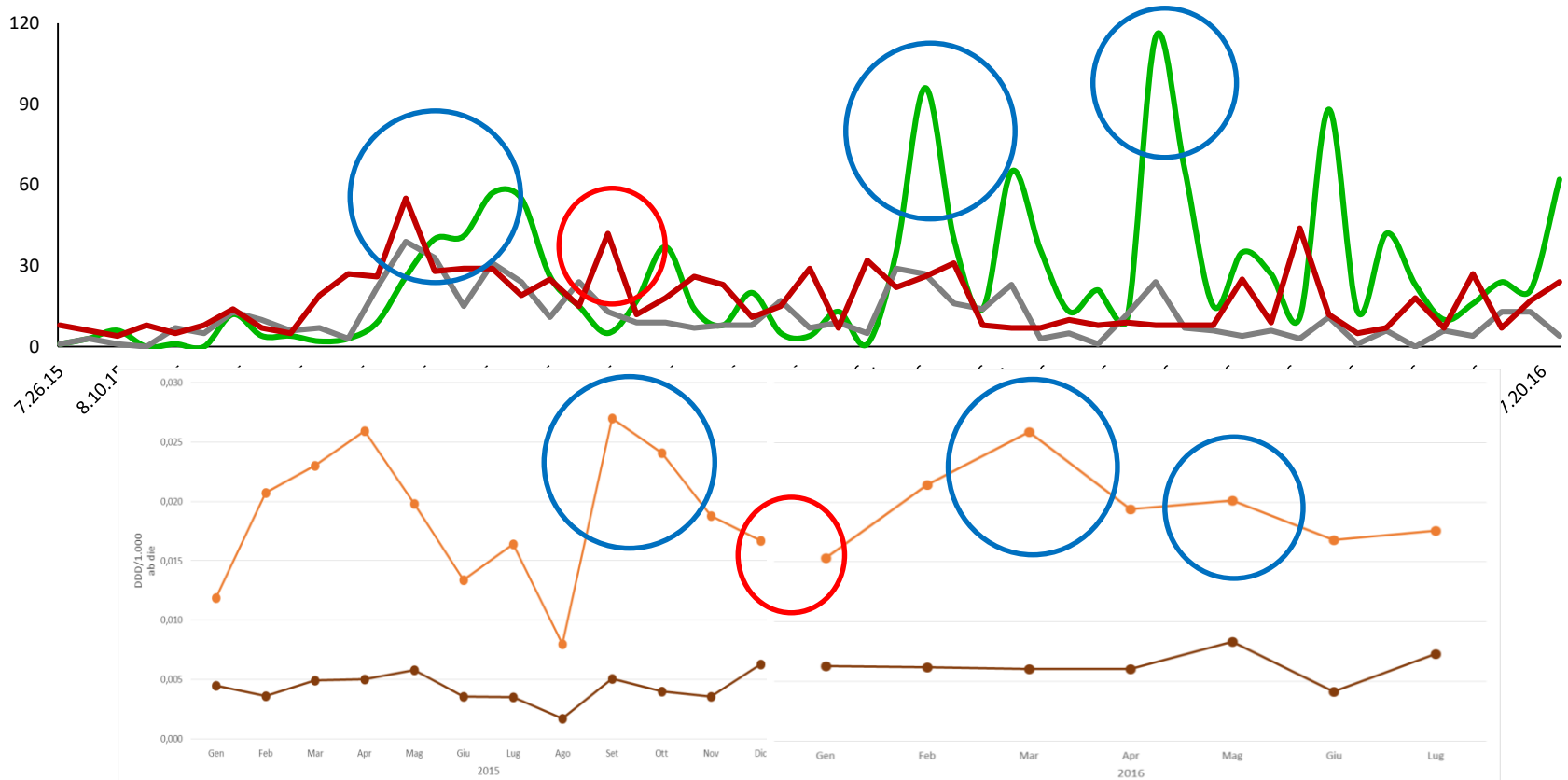


HPV SENTIMENT

NATIONAL TREND OF HPV VACCINATION IN FEMALES IN 2015-2016

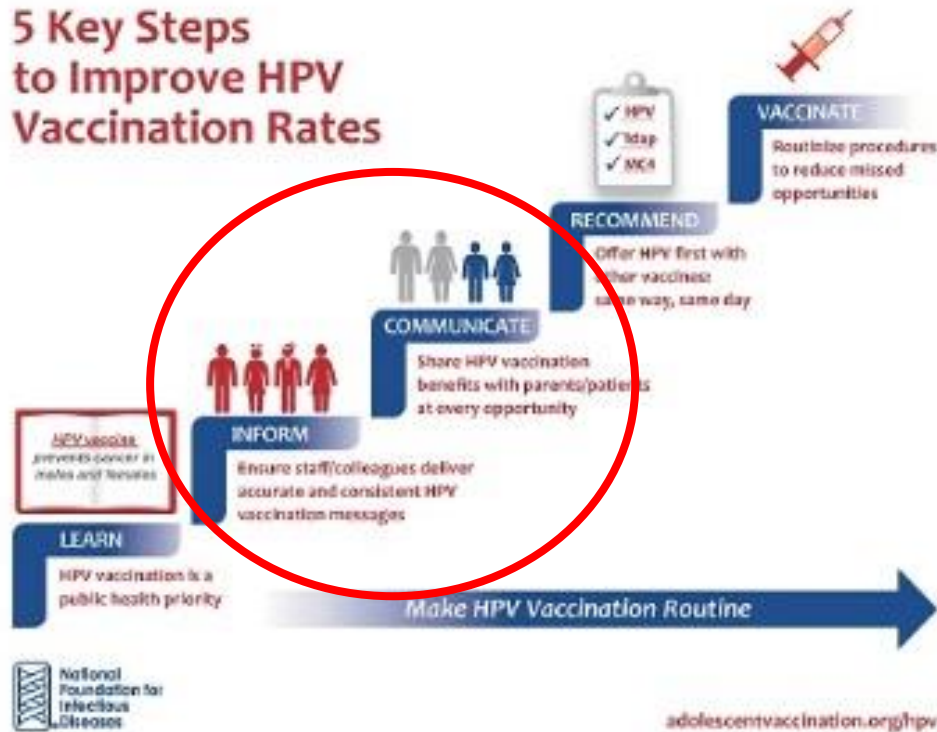


HPV SENTIMENT



HPV SENTIMENT

5 Key Steps to Improve HPV Vaccination Rates



1. PUBLICATION OF DATA ABOUT SAFETY AND EFFICACY OF THE VACCINE
2. GOVERNATIVE COOPERATION
3. SOCIAL MEDIA TO SPREAD INFORMATIONS
4. INFORMATION IN THE SCHOOLS

CERVICAL CANCER



TIMELINE

1976 '70-'80 1989 1992 1995 1999 2000 2003

FIRST HPV IDENTIFICATION IN WOMEN WITH CERVICAL CANCER

INFECTION IS COMMON BOTH IN CERVICAL CANCER AND IN HEALTHY WOMEN

IARC CONCLUDES THAT THERE WERE POOR DATA TO BELIEVE IN ASSOCIATION BETWEEN CERVICAL CANCER AND HPV

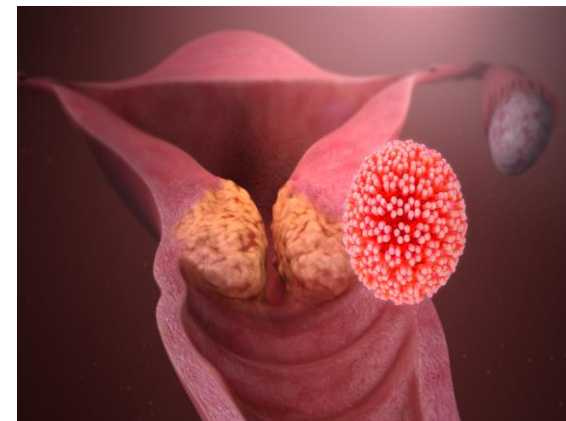
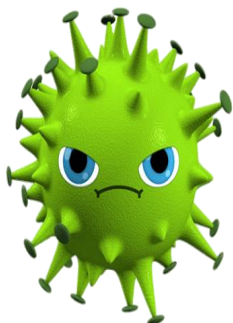
ASSOCIATION BETWEEN HPV AND CERVICAL CANCER

SOME HPV CAN CAUSE CANCER IN HUMAN

HPV IS NECESSARY FOR CERVICAL CANCER

FIRST STUDIES ABOUT VACCINES

HPV TESTING AS SCREENING



FUTURE GOAL... HPV AND CERVICAL CANCER ERADICATION



IGCS

144th WHO Executive Board – 30 January 2019

More than 70 countries supported the decision for WHO Secretariat to develop a

Global Strategy towards the Elimination of Cervical Cancer



Photo credit: Chris Black

FUTURE GOAL... HPV AND CERVICAL CANCER ERADICATION

The Architecture to Eliminate Cervical Cancer

Vision: To build a world without cervical cancer

Threshold: < 4 cases of cervical cancer per 100,000 woman-years

2030 CONTROL TARGETS

90%

of girls fully vaccinated with HPV vaccine by 15 years of age

70%

of women screened with an HPV test at 35 and 45 years of age


90%

of women identified with cervical disease receive treatment for precancerous lesions or invasive cancer

SDG 2030: Target 3.4 – 30% reduction in mortality from cervical cancer

The 2030 targets and elimination threshold are subject to revision depending on the outcomes of the modeling and the WHO approval process

CERVICAL CANCER ERADICATION



ERADICATION PERMANENT REDUCTION TO ZERO OF THE
WORLDWIDE INCIDENCE OF INFECTION CAUSED BY A SPECIFIC
AGENT.

TWO NECESSARY CONDITIONS:



**IT IS AN INFECTIOUS
DISEASE**



**MEASURES AGAINST THE
DISEASE EXIST**

THE RING-VACCINATION PRINCIPLE

RING VACCINATION IS A STRATEGY TO INHIBIT THE
SPREAD OF A DISEASE BY VACCINATING ONLY THOSE
WHO ARE
MOST LIKELY TO BE INFECTED.

SMALLPOX HISTORICAL TIMELINE



1798
EDWARD
JENNER
DISCOVERED
VACCINATION



1959
WHO
INITIATED A
PLAN TO RID
THE WORLD
OF SMALLPOX

1967
INTENSIFIED
ERADICATION PROGRAM
BEGAN

1975



RAHIMA BANU, A THREE-YEAR-OLD GIRL
FROM BANGLADESH,
WAS THE LAST PERSON
IN THE WORLD TO HAVE NATURALLY ACQUIRED VARIOLA MAJOR

1977
ALI MAOW MAHLIN,
SOMALIA, WAS THE LAST
PERSON TO HAVE
NATURALLY ACQUIRED
SMALLPOX CAUSED BY
VARIOLA MINOR

MAY 1980

33RD WORLD HEALTH ASSEMBLY
OFFICIALLY DECLARED THE WORLD
FREE OF THIS DISEASE



SUCCESS AT LAST!
SMALLPOX WAS OFFICIALLY DECLARED ERADICATED IN 1980,
through a ring-vaccination principle





SEE YOU AT **IGCS 2020**



IGCS
2020
ROME



SEPTEMBER 10-13, 2020
AUDITORIUM PARCO DELLA MUSICA
ROME - ITALY

igcs2020.com

Thank you!

CERVICAL CANCER ERADICATION

TRANSMISSION ROUTES

DIRECT TRANSMISSION ROUTES

1. AIR DROPLETS:
2. SEXUAL
3. BLOOD
4. MOTHER TO CHILD (VERTICAL)
5. ANY BODY FLUID
6. SKIN-TO-SKIN CONTACT



SUITABLE FOR RING-VACCINATION

NO DIRECT TRANSMISSION ROUTES

1. AIRBORN
2. FECAL-ORAL
3. VECTOR-BORNE
4. WOUNDS
5. WATER, SOIL

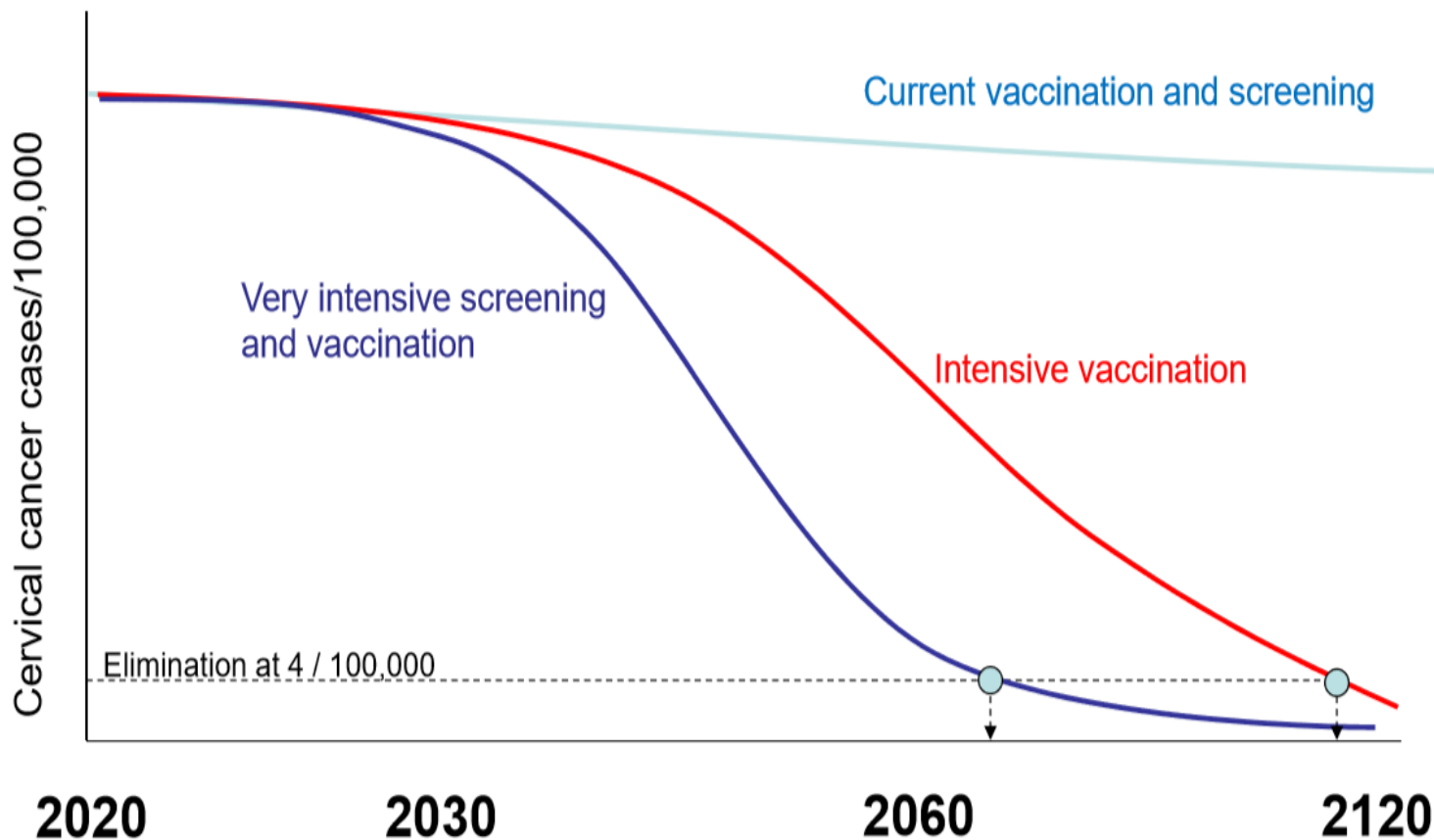


NO SUITABLE FOR RING-VACCINATION



IGCS

CERVICAL CANCER ELIMINATION: CONCEPTUAL FRAMEWORK





IGCS Executive Council and CEO



- President: Roberto Angioli
- President-Elect: Robert Coleman
- SECRETARY TREASURER: Andreas Obermair
- SECRETARY TREASURER ELECT: Anuja Jhingran
- VICE PRESIDENT : Marie Plante
- Immeditate Past President: Michael Quinn
- CEO (CHIEF EXECUTIVE OFFICER): Mary Eiken





IGCS

IGCS Council Members



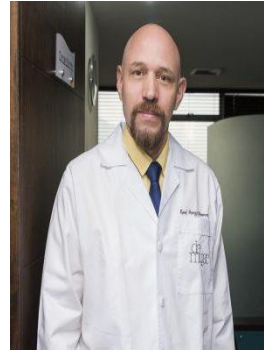
**Dr. Vivek
Arora**
Sydney,
Australia



Dr. Remi Nout
Leiden, The
Netherlands



**Dr. Mauricio
Augusto Silva
Magalhães Costa**
Rio de Janeiro,
Brazil



**Dr. Rene
Pareja**
Medelin,
Colombia



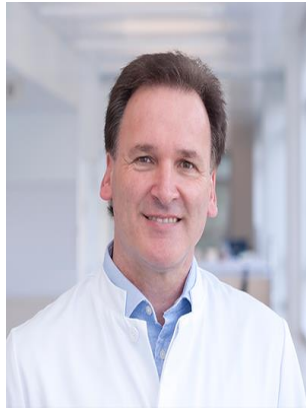
**Dr. Greta
Dreyer**
Arcadia,
Pretoria South
Africa



**Dr. Robert
Soslow**
New York, USA



**Dr. Rosalind
Glasspool**
Glasgow,
Scotland



**Dr. Rainer
Kimmig**
Essen, Germany



**Dr. Ritu
Salani**
IGCS Education
Committee
Chair, USA



**Dr. Kathleen
Schmeler**
IGCS Mentorship &
Training Committee
Chair, USA



**Joseph Soon-
Yau Ng**
Singapore



ADVOCACY



WHAT?

IGCS has always conducted and supported a Patient Summit at each IGCS Meeting

WHY?

To bring together leading patient experts, nurses, and physicians to reach common understanding about key challenges facing gynecologic cancer patient-centered care.

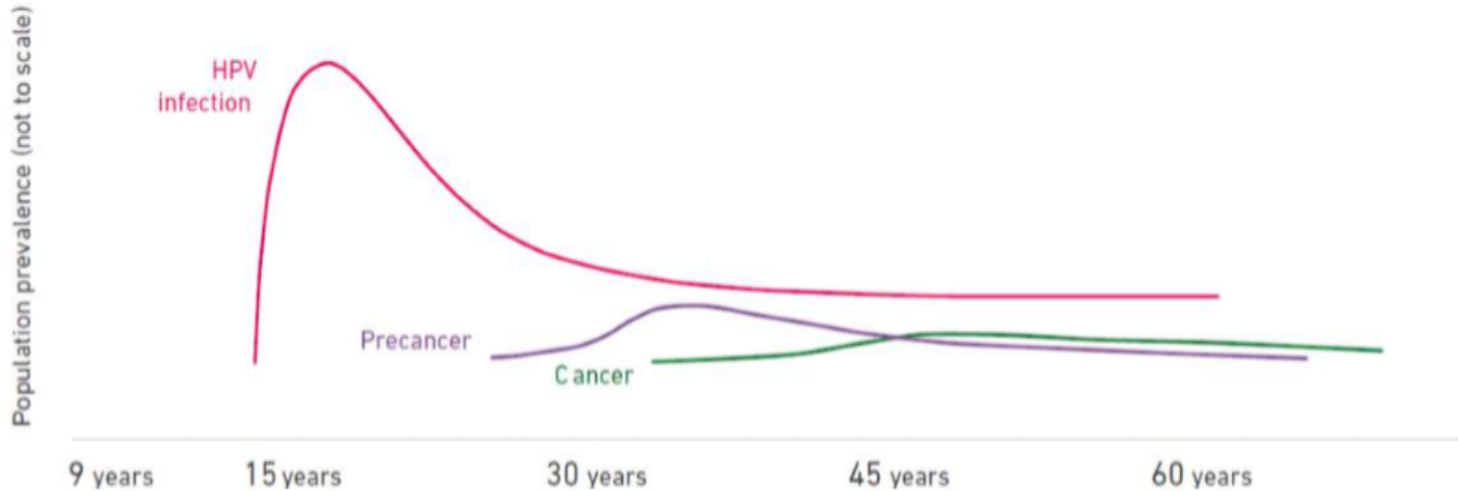
WHEN/WHERE?

As we plan each Global Meeting, we will network with local physician thought leaders for information, regional strategic alliance partners and other similar organizations to become familiar with the region and their current advocacy efforts and needs.

WHO?

A strong network of survivors, caregivers and others who would attend the "Empowering Women" course.

WHO LIFE COURSE APPROACH TO CERVICAL CANCER CONTROL



Primary Prevention

Girls 9-14 years

- HPV vaccination

Girls and boys, as appropriate

- Health information and warnings about tobacco use
- Sexuality education tailored to age & culture
- Condom promotion/provision for those engaged in sexual activity
- Male circumcision

Secondary Prevention

Women > 30 years of age

“Screen and treat” – single visit approach

- Point-of-care rapid HPV testing for high risk HPV types
- Followed by immediate treatment
- On site treatment

Tertiary Prevention and Palliative Care

All women as needed at any age

- Treatment of invasive cancer:
 - Surgery
 - Radiotherapy
 - Chemotherapy
- Palliative care

ADVOCACY PROGRAM IN ROME 2020

MEET THE PATIENT



A precious opportunity for patients to *meet* the most prominent Gynecologic Oncology Physicians to present their perspective.

ENJOY THE SUNRISE



At sunrise most of Rome is still asleep, but we will jump on the bus and explore the city in its glorious splendor.

SYMPOSIUM



One day of the congress will be dedicated to *Symposia* related to new treatments, quality of life, and social initiatives.

CONCERT



The *concert* will be held in the Santa Cecilia hall of Auditorium Parco della Musica with music of the most famous European composers of '800 and '900

GEOGRAPHIC ITINERARY WINE TASTING



An Advocacy Reception (*Geographic Itinerary Wine Tasting*) will take place in the external Cavea of the Auditorium. Within the walls of this huge architectural complex by Renzo Piano an oenological itinerary through the most prestigious vines of Italy.