



ISNS
International Sentinel Node Society

THE ISNS SENTINEL

Newsletter of the International Sentinel Node Society

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President & Secretary's Message



Donald Morton, M.D.



Alistair Cochran, M.D.

It is truly remarkable that almost two years have passed since the exciting days in Yokohama that saw the creation of our new society. Much has happened in this period, during which we have seen further evaluation of the clinical relevance and applicability of the SN technique and a flowering of interest in applying the approaches to new tumors in a range of novel sites. There is also an energetic field of study that attempts to apply combinations of histopathology and molecular pathology to the detection of tumor in lymph nodes and the prediction of the likelihood of extension of tumor to the non-sentinel nodes, the likelihood of recurrence and of disease-specific death. There is increasing interest in the basic defects that down-regulate the sentinel nodes and the development of strategies to correct these. The impending 4th International Sentinel Node Congress will provide an intellectual feast to all interested in the technique and we hope to see many Society members in LA.

Society-related activities have divided into two major, separate parts. The first year was devoted to establishing the Society as a legitimate and legal entity (a process of no little complexity). This is now complete, largely thanks to the knowledge and wisdom and energy of Joel Pollack, Dr. Morton's Senior Assistant. At the same time initial recruiting for the Society has gone well, with 175 full members. We believe that the December Congress will provide an excellent opportunity to increase membership, and urge all existing members to encourage others with an interest in the sentinel node to join. There is much to be done in future years, and the stronger the Society is, the more effective we will be. Those interested in membership should contact Alistair Cochran, MD at acochran@mednet.ucla.edu or Joel Pollack at pollackj@jwci.org.

The second year has largely been given over to organizing the Conference, and again, much of the credit for this lies with Joel. The omens are good. The Venue is excellent (though some of us will miss the easy access to the sea shore), the hotel is comfortable and is a seasoned site for conferences. We have assembled a first class group of invited speakers who will address the pressing issues in a free and frank manner. We have received a remarkable

number of proffered papers, and whether selected for platform or poster, (a truly difficult task that was bravely undertaken by multiple reviewers assessing anonymous papers), they represent truly up-to-date basic, translational and clinical research. The Conference will allow sufficient free and social time to permit critical and productive personal interactions. We are again generously supported by a highly professional group of companies who deal in the equipment and materials relevant to all aspects of the techniques.

There is much Societal business to transact. Founding President Morton will complete his two-year tenure in December, and the President-Elect is Professor Umberto Veronesi. There will be elections for President-Elect, a Vice-President, a Secretary, a Treasurer and several Council members (Secretary and Treasurer may be reappointed). A committee has been appointed under the leadership of Vice-President Thompson to make recommendations for potential appointees to the open positions. In this regard, it is appropriate to thank Dr. David Krag for his valuable service to the Society. David has informed us of his wish to resign in order to have time for other commitments.

The December meeting will be a good time for the Society to determine its goals and priorities for the upcoming years. Items in this category include, but are not limited to:

1. Our role as advocates of the technique and in ensuring that balance is maintained when the approach is subject to question and criticism
2. The nature and extent that we are involved in professional and public education about the approaches
3. Our role in fostering clinical trials
4. Whether there is a need for a regional subgroup structure to support the International Society
5. The establishment of a group within the Society to create and disseminate a regular publication for circulation within the membership
6. A consideration of the current and potential financial condition of the Society
7. The extent that the Society should support travel of its own members to future International meetings (Most societies do not!)
8. The extent that the Society should provide funds to facilitate the attendance at meetings of junior physician/scientists and personnel from regions where travel support is less readily available

It has been our pleasure and a real honor to serve the Society in this initial period. Much has been achieved, and we are pleased to recognize the remarkable contributions of Joel Pollack and his staff in the uncharted waters of these first years.

Donald L. Morton, MD

Alistair J. Cochran, MD

ISNS to Host 4th International Sentinel Node Congress

The International Sentinel Node Society and the John Wayne Cancer Institute are pleased to host the 4th International Sentinel Node Congress. The Congress will feature invited lectures from internationally-known oncologists and molecular biologists, oral/poster presentations chosen from submitted abstracts, special workshops and "meet the professor" forums.

Congress Details

Date: December 3-6, 2004

Registration: December 3, 2004

Welcome Reception: December 3, 2004

Banquet Gala: December 4, 2004

Closing Remarks: December 6, 2004

Location: Century Plaza Hotel
2025 Avenue of the Stars
Los Angeles, California 90067

Hosts: International Sentinel Node Society
John Wayne Cancer Institute

The ISNS Membership Meeting will take place at noon on Sunday, December 5, 2004, in the main ball room.

Conference Update

- 1) Approximately 50 invited lectures will be featured.
- 2) Over 230 abstracts have been accepted for the conference.
- 3) Approximately 28 countries will be represented from around the world.

Sentinel Node Trials (MSLT II)

A new international study being organized by researchers at JWCI will determine whether all patients with a positive sentinel node require a complete lymph node dissection. It will also determine whether a node evaluated as "tumor-positive" by molecular pathology is equivalent to a node that contains tumor on pathology evaluation.

The innovative Sentinel Node technique was first developed by Donald L. Morton, MD, Alistair Cochran, MD and colleagues at the John Wayne Cancer Institute at UCLA in the early 1980s. This minimally invasive procedure allows doctors to spare healthy lymph nodes during surgeries for melanoma, breast cancer and other diseases. Having fewer nodes removed lowers the risk of complications such as edema (swelling), numbness and pain.

The technique's advantages were evaluated during the landmark Multicenter Selective Lymphadenectomy Trial I (MSLT), a 17-center study that compared the new technique

against wide excision alone, which was organized by JWCI with more than 2,000 melanoma patients. Many surgeons have adopted the technique worldwide, although outcome analysis is still awaited.

Approximately 4,200 people with newly diagnosed melanoma will be enrolled in MSLT II at more than 40 international institutions. Enrollment will take seven years. "It's a major effort – but well worth it", Dr. Morton asserts.

"MSLT II will not only make the knowledge of this technique more available, we hope it will further endorse what we believe is a superior and sound approach to cancer surgery," he explains. "Part of our responsibility as medical scientists is to lead the way in validating innovative practices, so that cancer patients everywhere can benefit."

In addition to comparing surgical techniques, researchers will also study the molecular chemistry of blood and tissue from melanoma patients. JWCI Director of Clinical Trials, Douglas Maier, explains that these samples will allow scientists to evaluate advanced technologies such as proteomic analyses. "This work could help future melanoma patients obtain more accurate prognoses and treatment," Maier predicts.

ISNS Conception

The International Sentinel Node Society (ISNS) was created during the 3rd Congress held in Yokohama, Japan in 2002. The Society was established to serve and coordinate the needs of the diverse community of physicians and scientists who study the sentinel node including (but not limited to) surgeons, pathologists, nuclear medicine physicians, dermatologists, and basic scientists.

Society Goals

- a) To promote the concept of the sentinel node in the medical and scientific community and encourage the use of the sentinel node (SN) technique where appropriate.
- b) To foster interdisciplinary interchange of knowledge and information.
- c) To hold periodic international meetings to encourage and promote interaction between researchers and clinicians interested in techniques of SN-related topics.
- d) To conduct educational activities to enhance professional experience and competence in the techniques of SN identification and evaluation.
- e) To promote and encourage clinical and laboratory research of SN-related topics and to disseminate the results.

f) To encourage and facilitate the organization and conduct of cooperative trials of the application of sentinel node approaches to the full range of suitable neoplasms.

Membership

The purpose of the Society is to serve and coordinate the needs of the diverse community of physicians and scientists who study the sentinel node. The Society is a non-profit corporation. Active membership in the Society is limited to surgeons, pathologists, nuclear medicine physicians, dermatologists, oncologists, radiotherapists and scientists who have shown evidence of continuing commitment to sentinel node surgery as demonstrated by such activities as:

1. Oncologic teaching or research.
2. Involvement in activities of a National or an International Oncology Research Society.

For membership, please return a completed application with your annual dues of \$100 USD to:

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C/o The John Wayne Cancer Institute
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ATTENTION: Joel M. Pollack –
Membership

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