ANZGOG Preceptorship in Cervical & Vulvar Cancers 2023 DAY 1 – Friday, 8 Dec | 12pm – 5.30pm AEDT



12.00pm – 12.05pm	WELCOME – Paul Cohe	en & Ming-Yin Lin
12.05pm – 12.20pm	_	oith ANZGOG clinical trials – mentoring new researchers. OG Research Manager
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12.20pm – 1.35pm 75min	GO Preceptors Michael Burling Niveditha Rajadevan Raj Ganendra Sam Saidi	1. Cervical cancer staging: What are the implications of the change in cervical cancer staging by FIGO in 2018? - Laura Sunderland, MO Registrar [Michael Burling]
*All Talks 10mins	Lois Eva Orla McNally Emma Allanson	2. What are the management options for microinvasive cervical cancer and when do you think nodal assessment is required? - Harrison Odgers, GO Registrar [Niveditha Rajadevan] 5min Q&A 3. What is the current evidence for performing a simple.
		 What is the current evidence for performing a simple hysterectomy in patients diagnosed with cervical cancer with tumour size of less than 2cm? Melanie Stanhope, RO Trainee [Raj Ganendra]
		4. In the current 2023 ESGO guideline for the radical surgical treatment of stage 1B1 and 1B2 cervical cancer, where parametrectomy is to be performed, laparotomy is designated as the standard approach annotated as level 1A evidence. What is the current evidence for and against this recommendation?
		- Marta Preston, GO Senior Registrar [Sam Saidi] 5min Q&A
		5. Which patients with cervical cancer are eligible for fertility preserving surgery and what options could be offered? - Lachlan Fitzpatrick, MO Ad Trainee [Lois Eva]
		 6. What is the evidence for sentinel lymph node biopsy in Cervical Cancer? - Erin Howells, MO Registrar [Orla McNally] 5min Q&A
10mins		Preceptor Panel Discussion
1.45pm – 3.15pm ~90min	RO Preceptors Robyn Cheuk Tiffany Daly David Chang	Adjuvant & Neoadjuvant Treatment What are the indications for adjuvant radiotherapy after initial surgery for an early stage cervix cancer and the
	Viet Do MO Preceptors George Au-Yeung Jeffrey Goh Michelle Wilson Alison Davis	expected outcomes from this treatment? Include a discussion on the types of adjuvant radiotherapy that can be used. - Monica McGauran, GO Fellow [Robyn Cheuk]



	Sandy Simon Lawrence Kasherman Kate Webber Yoland Antill RO Preceptors Robyn Cheuk Tiffany Daly David Chang Viet Do MO Preceptors George Au-Yeung Jeffrey Goh Michelle Wilson Alison Davis Sandy Simon Lawrence Kasherman Kate Webber Yoland Antill	 Neoadjuvant chemotherapy for cervix cancer, who should it be offered to? Georgina Mitchell, GO Fellow [George Au-Yeung] 5min Q&A Definitive Management – Locally Advanced Definitive Radiotherapy+/-Chemo for locally advanced Cervix Cancer. Nicla Lui, GO Fellow [Tiffany Daly] How has cervical cancer brachytherapy techniques improved over time? Sita Murugappan, GO Registrar [David Chang] 5min Q&A Discuss the evidence for adjuvant treatment following definitive concurrent chemo-radiotherapy. Harrison Odgers, GO Registrar [Jeffrey Goh] 3min Q&A Metastatic Treatment What is our initial systemic treatment for metastatic cervical cancer – how have we got to where we are today? Minah Ha, GO Fellow [Michelle Wilson] Treatment of metastatic disease- Second-line and beyond: Have we made any progress?
		- Charmian Eng, GO Fellow [Alison Davis] 5min Q&A
10mins		Preceptor Panel Discussion
3.25pm – 3.35pm		A Short Break
3.35pm – 4.15pm ~40min	GO Preceptors Michael Burling Niveditha Rajadevan Raj Ganendra Sam Saidi Lois Eva Orla McNally Emma Allanson MO Preceptors George Au-Yeung Jeffrey Goh Michelle Wilson Alison Davis Sandy Simon	1. Which patients have options for curative surgical treatment for their recurrent cervical cancer? - Taylor Hodge, GO Registrar [Raj Ganendra] 3min Q&A Survivorship 1. What is the evidence for how survivorship care in cervical cancer should be delivered? - Julianne O'Shea, RO Fellow [Emma Allanson]



	Lawrence Kasherman Kate Webber Yoland Antill	2. What are the management approaches for locally advanced cervical cancer in pregnancy? - Charmian Eng, GO Fellow [Emma Allanson] 5min Q&A
10min		Preceptor Panel Discussion
4.25pm – 5.15pm 50min	Path/Scientists Marsali Newman Gayanie Ratnayake Lyndal Anderson	1. What is the basis and rationale for subtyping cervical adenocarcinoma into HPV associated and HPV independent types and what implication does a diagnosis of HPV independent adenocarcinoma have for diagnosis and prognosis? - Cheryl Yim, GO Fellow [Marsali Newman] 2. what is the importance of grading in HPV associated adeno? How are the HPV associated endocervical adenocarcinomas classified using Silva pattern based classification? What is the clinical significance of this classification? - Sarah Te Whaiti, GO Fellow [Gayanie Ratnayake] 5min Q&A Histopathology - Vulvar Cancer 1. What are the precursor lesions of HPV independent squamous cell carcinoma of the vulva and why is p53 immunohistochemistry important? - Helena Obermair, GO Registrar [Lyndal Anderson] 2. Discuss the morphology, diagnosis and prognosis of HPV associated vulvar cancers. - Jason Phung, GO Registrar [Lyndal Anderson]
10min		Preceptor Panel Discussion
5.25pm – 5.30pm		CLOSING –Ming-Yin Lin & Paul Cohen



Day 2 – Saturday, 9 Dec 10.30am – 12.30pm AEDT				
10.30am – 10.35am	WELCOME -Ming-Yin L	in & Paul Cohen		
10.35am – 10.45am	Sharing a Lived Experience – Norma Raspin, Survivors Teaching Students volunteer			
10.45am - 12.15pm ~90mins	Emma Allanson Michael Burling Raj Ganendra Lois Eva Sam Saidi Niveditha Rajadevan Orla McNally MO: Lawrence Kasherman Sandy Simon Jeff Goh George Au-Yeung Alison Davis Kate Webber Yoland Antill RO Viet Do Tiffany Daly Robyn Cheuk David Chang	1. Comment on the trends in incidence of HPV-dependent and HPV-independent vulvar cancer in Australia and New Zealand. What factors may be driving these changes? What implications may these incidence trends have for the management of vulvar cancer? - Monica McGauran, GO Fellow [Lois Eva] 2. What is considered an adequate surgical margin in patients with early stage vulvar cancer? Discuss the evidence on which this based? - Nicla Lui, GO Fellow [Michael Burling] 5min Q&A 3. How is lymph node disease in the groin best assessed in vulval cancer? "You are seeing a 52yr old patient in clinic with a 2cm diameter unifocal vulvar squamous cell carcinoma and are about to consent her for surgery. The tumour is on the mid-vulva in the left interlabial sulcus, close to the midline. Histopathology has recently been reviewed at your MDT. The depth of invasion was 1.6mm. She has no comorbidities. How will you counsel her?" - Sarah Te Whaiti, GO Fellow [Orla McNally] 3min Q&A 4. Outline your management of a patient after radical vulvectomy with micrometastasis (<2mm) in the sentinel node. Discuss evidence-based recommendations for this scenario. How would your approach differ if the metastasis exceeds 2mm? Additionally, address the management of a patient with a clinically 2cm unilateral groin node. - Julianne O'Shea, RO Fellow [Viet Do] 5. Locally advanced vulva cancer (T3/T4). - Hui Ling Yeoh MO Registrar [Tiffany Daly] 5min Q&A 6. Management of metastatic and recurrent disease. "You are seeing a 62yr old patient in outpatient clinic. She had a FIGO stage 3C vulvar SCC treated by radical		



	vulvectomy and bilateral inguinofemoral lymphadenectomy 12 months earlier. A surveillance PET-CT shows multiple FDG-avid para-aortic lymph nodes, mediastinal nodes, and a supraclavicular node. Outline your management and discuss the evidence for your approach." - Erin Howells, MO Registrar [Lawrence Kasherman] 7. Neoadjuvant therapy for non-surgical candidates. Comment on the role of neoadjuvant therapy (RT and systemic therapies) in vulvar SCC. When might it be indicated? Is there evidence for its efficacy? - Marta Preston, GO Senior Registrar [Sandy Simon] 5min Q&A
10mins	Preceptor Panel Discussion
12.25pm – 12.30pm	CLOSING - Paul Cohen & Ming-Yin Lin